

DEATH CERTIFICATE

1 DECEASED	Family Name Given Name(s) Date of Death Place of Death Sex and Age Place of Birth Period of Residence in Australia Place of Residence Usual Occupation Marital Status at Date of Death	Jones Hazel Isabella 01 March 2015 Gosford District Hospital, Gosford Female 91 years Wagga Wagga, NSW Life 70 Bourbon Street Wyoming, NSW, 2250 Home Maker Widowed
2 MARRIAGE(S)	Place of Marriage Age when Married Full Name of Spouse	Wagga Wagga, NSW 21 years Wilfred Henry Charles Jones
3 CHILDREN	In Order of birth names and ages	Allan 69 Years Peter 54 Years Garry 64 Years
4 PARENTS	Mother's Name Mother's Maiden Family Name Father's Name	Ruby Mary Hughes Boyton Francis James Hughes
5 MEDICAL	Cause of Death and Duration of last illness Name of Certifying Medical Practitioner or Coroner	(l)(a) Acute on chronic renal failure, 1 week (b) Malnutrition, 3 weeks (c) Mucositis, 3 weeks (d) Multiple basal cell carcinoma, 4 weeks Dr Sarah Soryal
6 BURIAL OR CREMATION	Date Place	6th March 2015 Palmdale Memorial Park Lawn Cemetery Palmdale, NSW
7 INFORMANT	Name Address Relationship to deceased	Peter Jones 61 Aliberti Drive Blacktown, NSW, 2148 Son
8 REGISTERING AUTHORITY	Name Date	Amanda Ianna, Registrar 07 April 2015
9 ENDORSEMENT(S)		Not Any



Before accepting copies, sight unaltered original. The original has a coloured background.

REGISTRY OF BIRTHS
DEATHS AND MARRIAGES

SYDNEY 07 April 2015

I hereby certify that this is a true copy of particulars recorded in a
Register in the State of New South Wales, in the Commonwealth of Australia

Registrar