54199

STATE OF FLORIDA

BUREAU of VITAL STATISTICS

CERTIFICATION OF DEATH

STATE FILE NUMBER:

DECEDENT INFORMATION

DATE ISSUED:

DATE FILED:

NAME ANN C QUINTA

DATE OF DEATH JANUARY 1 2020

DATE OF BIRTH

SEX FEMALE SSN [redacted] AGE 082 YEARS

PLACE OF DEATH DECEDENT'S HOME

BIRTHPLACE

FACILITY NAME OR STREET ADDRESS

LOCATION OF DEATH

RESIDENCE

OCCUPATION INDUSTRY

TATES CC

EDUCATION

HISPANIC OR HAITIAN ORIGIN?

R IN U.S. ARMED FORCES? NO

RACE