

BUREAU of VITAL STATISTICS

CERTIFICATION OF DEATH

STATE FILE NUMBER: 2016145157

DATE ISSUED: December 30, 2016

DECEDENT INFORMATION

STATE FILE DATE: September 28, 2016

NAME: JOSE FERNANDEZ
 AKA: JOSE DELFIN FERNANDEZ GOMEZ
 DATE OF DEATH: FOUND ON September 25, 2016 SEX: MALE AGE: 024 YEARS
 DATE OF BIRTH: July 31, 1992 SSN: [REDACTED]
 BIRTHPLACE: CUBA
 PLACE WHERE DEATH OCCURRED: OCEAN
 FACILITY NAME OR STREET ADDRESS: NORTH JETTY OF GOVERNMENT CUT
 LOCATION OF DEATH: MIAMI BEACH, MIAMI-DADE COUNTY, 33139

SURVIVING SPOUSE, DECEDENT'S RESIDENCE AND HISTORY INFORMATION

MARITAL STATUS: DIVORCED
 SURVIVING SPOUSE NAME: NONE
 RESIDENCE: [REDACTED]

COUNTY: MIAMI-DADE

OCCUPATION, INDUSTRY: PROFESSIONAL BASEBALL PLAYER, MAJOR LEAGUE BASEBALL

RACE: White Black or African American Asian Indian Chinese Filipino Native Hawaiian
 American Indian or Alaskan Native--Tribe: Japanese Korean Vietnamese
 Guamanian or Chamorro Samoan Other Pacific Isl:
 Other Asian: Unknown

HISPANIC OR HAITIAN ORIGIN? YES, CUBAN

EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED EVER IN U.S. ARMED FORCES? NO

PARENTS AND INFORMANT INFORMATION

FATHER/PARENT: JOSE DELFIN FERNANDEZ
 MOTHER/PARENT: MARITZA GOMEZ FERNANDEZ
 INFORMANT: MARITZA GOMEZ FERNANDEZ
 RELATIONSHIP TO DECEDENT: MOTHER
 INFORMANT'S ADDRESS: [REDACTED]

PLACE OF DISPOSITION AND FUNERAL FACILITY INFORMATION

PLACE OF DISPOSITION: GOLD COAST CREMATORY
 FORT LAUDERDALE, FLORIDA

METHOD OF DISPOSITION: CREMATION

FUNERAL DIRECTOR/LICENSE NUMBER: MONICA COMAS, F045133

FUNERAL FACILITY: CABALLERO RIVERO WESTCHESTER F078957
 8200 SW 40TH STREET, MIAMI, FLORIDA 33155

CERTIFIER INFORMATION

TYPE OF CERTIFIER: ASSOCIATE MEDICAL EXAMINER MEDICAL EXAMINER CASE NUMBER: 161102912
 TIME OF DEATH (24 hr): FOUND AT 0315 DATE CERTIFIED: September 27, 2016
 CERTIFIER'S NAME: KENNETH DUVAL HUTCHINS
 CERTIFIER'S LICENSE NUMBER: ME82184
 NAME OF ATTENDING PHYSICIAN (If other than Certifier): NOT ENTERED



, State Registrar

REQ: 2017686520

THE ABOVE SIGNATURE CERTIFIES THAT THIS IS A TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE.

WARNING:

THIS DOCUMENT IS PRINTED OR PHOTOCOPIED ON SECURITY PAPER WITH WATERMARKS OF THE GREAT SEAL OF THE STATE OF FLORIDA. DO NOT ACCEPT WITHOUT VERIFYING THE PRESENCE OF THE WATERMARKS. THE DOCUMENT FACE CONTAINS A MULTICOLORED BACKGROUND, GOLD EMBOSSED SEAL, AND THERMOCHROMIC FL. THE BACK CONTAINS SPECIAL LINES WITH TEXT. THE DOCUMENT WILL NOT PRODUCE A COLOR COPY.



* 3 4 2 4 5 3 5 5 *

DH FORM 1946 (03-13)

CERTIFICATION OF VITAL RECORD



VOID IF ALTERED OR ERASED

VOID IF ALTERED OR ERASED