

BUREAU of VITAL STATISTICS

CERTIFICATION OF DEATH

STATE FILE NUMBER: 2020159214

DATE ISSUED: NOVEMBER 18, 2020

DECEDENT INFORMATION

DATE FILED: SEPTEMBER 3, 2020

NAME: ALFONSO RODRIGUEZ LUNA

DATE OF DEATH: AUGUST 21, 2020

SEX: MALE SSN: 999-99-9999

AGE: 049 YEARS

DATE OF BIRTH: FEBRUARY 3, 1971

BIRTHPLACE: MEXICO

PLACE OF DEATH: EMERGENCY ROOM/OUTPATIENT

FACILITY NAME OR STREET ADDRESS: MEMORIAL HOSPITAL WEST

LOCATION OF DEATH: PEMBROKE PINES, BROWARD COUNTY, 33028

RESIDENCE: 100 WEST 16TH STREET, HIALEAH, FLORIDA 33010, UNITED STATES

COUNTY: MIAMI-DADE

OCCUPATION, INDUSTRY: PICKER, AGRICULTURE

EDUCATION: SOME COLLEGE CREDIT, BUT NO DEGREE

EVER IN U.S. ARMED FORCES? NO

HISPANIC OR HAITIAN ORIGIN? YES, MEXICAN

RACE: WHITE

SURVIVING SPOUSE / PARENT NAME INFORMATION

(NAME PRIOR TO FIRST MARRIAGE, IF APPLICABLE)

MARITAL STATUS: MARRIED

SURVIVING SPOUSE NAME: MARIA DEL ROCIO RAMOS FLORES

FATHER'S/PARENT'S NAME: ARISTEO RODRIGUEZ GARCIA

MOTHER'S/PARENT'S NAME: MARIA DEL PILAR LUNA SANTILLAN

INFORMANT, FUNERAL FACILITY AND PLACE OF DISPOSITION INFORMATION

INFORMANT'S NAME: MARCO ANTONIO MEDINA

RELATIONSHIP TO DECEDENT: BROTHER IN LAW

INFORMANT'S ADDRESS: PASEO DE MARQUES 5617 COL VALLE DEL, MARQUEZ, 54790, MEXICO

FUNERAL DIRECTOR/LICENSE NUMBER: ANDRES ARCELAY, F044288

FUNERAL FACILITY: ARCELAYS FUNERAL SERVICES F077062

13700 NW 19TH AVENUE #8, OPA LOCKA, FLORIDA 33054

METHOD OF DISPOSITION: CREMATION

PLACE OF DISPOSITION: ARCELAYS FUNERAL SERVICES

OPA-LOCKA, FLORIDA

CERTIFIER INFORMATION

TYPE OF CERTIFIER: ASSOCIATE MEDICAL EXAMINER

MEDICAL EXAMINER CASE NUMBER: 20174571

TIME OF DEATH (24 HOUR): 1654

DATE CERTIFIED: OCTOBER 2, 2020

CERTIFIER'S NAME: MARCELA FERNANDES CHISTE

CERTIFIER'S LICENSE NUMBER: ME116275

NAME OF ATTENDING PHYSICIAN (IF OTHER THAN CERTIFIER): NOT APPLICABLE

CAUSE OF DEATH AND INJURY INFORMATION

MANNER OF DEATH: ACCIDENT

CAUSE OF DEATH - PART I - AND APPROXIMATE INTERVAL: ONSET TO DEATH

a. HEAT STROKE

b.

c.

d.

PART II - OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I:

AUTOPSY PERFORMED? YES

AUTOPSY FINDINGS AVAILABLE TO COMPLETE CAUSE OF DEATH? YES

DATE OF SURGERY:

DID TOBACCO USE CONTRIBUTE TO DEATH? NO

REASON FOR SURGERY:

PREGNANCY INFORMATION: NOT APPLICABLE

DATE OF INJURY: AUGUST 21, 2020

TIME OF INJURY (24 HOUR): UNKNOWN

INJURY AT WORK? YES

LOCATION OF INJURY: 14741 SUNSET LANE, SOUTHWEST RANCHES, FLORIDA 33330, UNITED STATES

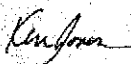
DESCRIBE HOW INJURY OCCURRED:

Exposure to hot environment

PLACE OF INJURY: OUTSIDE

IF TRANSPORTATION INJURY, STATUS OF DECEDENT:

TYPE OF VEHICLE:



STATE REGISTRAR

REQ: 2022119081

THE ABOVE SIGNATURE CERTIFIES THAT THIS IS A TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE.
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DH FORM 1947 (03-13)

CERTIFICATION OF VITAL RECORD

