

## BUREAU of VITAL STATISTICS

## CERTIFICATION OF DEATH

STATE FILE NUMBER: 2018149002

DATE ISSUED: SEPTEMBER 28, 2018

## DECEDENT INFORMATION

DATE FILED: SEPTEMBER 24, 2018

NAME: WADE EMIL GORDON

DATE OF DEATH: SEPTEMBER 16, 2018

SEX: MALE

SSN: 120-52-6637

AGE: 059 YEARS

DATE OF BIRTH: JUNE 20, 1959

BIRTHPLACE: BAY SHORE LONG ISLAND, NEW YORK, UNITED STATES

PLACE OF DEATH: DECEDENT'S HOME

FACILITY NAME OR STREET ADDRESS: 113 HIGHLAND STREET

LOCATION OF DEATH: COCOA, BREVARD COUNTY, 32922

RESIDENCE: 113 HIGHLAND STREET, COCOA, FLORIDA 32922, UNITED STATES

COUNTY: BREVARD

OCCUPATION, INDUSTRY: RADIO ANNOUNCER, COMMUNICATION

EDUCATION: SOME COLLEGE CREDIT, BUT NO DEGREE

EVER IN U.S. ARMED FORCES? NO

HISPANIC OR HAITIAN ORIGIN? NO, NOT OF HISPANIC/HAITIAN ORIGIN

RACE: WHITE

SURVIVING SPOUSE / PARENT NAME INFORMATION  
(NAME PRIOR TO FIRST MARRIAGE, IF APPLICABLE)

MARITAL STATUS: NEVER-MARRIED

SURVIVING SPOUSE NAME: NONE

FATHER'S/PARENT'S NAME: IRVIN GORDON

MOTHER'S/PARENT'S NAME: ANNIE ROTH

## INFORMANT, FUNERAL FACILITY AND PLACE OF DISPOSITION INFORMATION

INFORMANT'S NAME: NANCY M GORDON

RELATIONSHIP TO DECEDENT: SISTER

INFORMANT'S ADDRESS: 113 HIGHLAND STREET, COCOA, FLORIDA 32922, UNITED STATES

FUNERAL DIRECTOR/LICENSE NUMBER: JANORISE STONE, F044261

FUNERAL FACILITY: STONE FUNERAL HOME - COCOA F065839

516 KING ST, COCOA, FLORIDA 32922

METHOD OF DISPOSITION: CREMATION

PLACE OF DISPOSITION: ORLANDO CREMATORY, LLC  
ORLANDO, FLORIDA

## CERTIFIER INFORMATION

TYPE OF CERTIFIER: CERTIFYING PHYSICIAN

MEDICAL EXAMINER CASE NUMBER: NOT APPLICABLE

TIME OF DEATH (24 HOUR): 2221

DATE CERTIFIED: SEPTEMBER 21, 2018

CERTIFIER'S NAME: VINAY KALPURE NARAYANA KUMAR

CERTIFIER'S LICENSE NUMBER: ME78264

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

## CAUSE OF DEATH AND INJURY INFORMATION

MANNER OF DEATH: NATURAL

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

a. HYPERTENSIVE HEART DISEASE

b. HYPERTENSION

c. OBESITY, SLEEP APNEA

d.

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

AUTOPSY PERFORMED? NO

AUTOPSY FINDINGS AVAILABLE TO COMPLETE CAUSE OF DEATH?

DATE OF SURGERY:

DID TOBACCO USE CONTRIBUTE TO DEATH? NO

REASON FOR SURGERY:

PREGNANCY INFORMATION: NOT APPLICABLE

DATE OF INJURY: NOT APPLICABLE

TIME OF INJURY (24 HOUR):

INJURY AT WORK?

LOCATION OF INJURY:

DESCRIBE HOW INJURY OCCURRED:

VOID IF ALTERED OR ERASED

VOID IF ALTERED OR ERASED