

CERTIFIED COPY
Pursuant to the Births and



OF AN ENTRY
Deaths Registration Act 1953

BCS 052404

DEATH

Registration district Gloucestershire		Entry No. 142
Sub-district Gloucestershire		Administrative area
County of Gloucestershire		
1. Date and place of death Tenth April 2023 20 Hillcourt Road, Cheltenham		
2. Name and surname Philip Graham GOLDMAN		3. Sex Male
		4. Maiden surname of woman who has married
5. Date and place of birth Seventh November 1956 London		
6. Occupation and usual address Executive Leadership Coach Husband of Rachel GOLDMAN, Property Developer and Personal Development Coach 20 Hillcourt Road, Cheltenham, Gloucestershire		
7.(a) Name and surname of informant Rachel GOLDMAN		(b) Qualification Widow of deceased Present at the death
(c) Usual address 20 Hillcourt Road, Cheltenham, Gloucestershire		
8. I certify that the particulars given by me above are true to the best of my knowledge and belief R Goldman		
9. Cause of death I (a) Lung Cancer		
Signature of informant		
Certified by James Alexander Hunt MB		
10. Date of registration Seventeenth April 2023		11. Signature of registrar M A Morgan Deputy Registrar

Certified to be a true copy of an entry in a register in my custody.

Mark { *copy*

*Superintendent Registrar
*Registrar

*Strike out whichever does not apply

Date 17th April 2023

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WARNING: A CERTIFICATE IS NOT EVIDENCE OF IDENTITY.