## CERTIFIED COPY



## OF AN ENTRY

## Pursuant to the Births and Deaths Registration Act 1953

	EATH / Company	Entry No. 300
Registration district Shropshire	Administrati	ve area
Sub-district Shropshire	County of Shropshire	LAVE
Date and place of death     Twenty-first June 2024     Royal Shrewsbury Hospital Mytton Oak Road Shrewsbury	ary	
2. Name and surname Simon Douglas MADIN	3. Sex Male  4. Maiden surname of woman who has married	
5. Date and place of birth Eighteenth August 1964 Shrewsbury, Shropshire 6. Occupation and usual address Electrician Husband of Jacqueline MADIN Housewife 45 Fairview Drive Bayston Hill Shrewsbury Shropshire	nas married	533 S
7.(a) Name and surname of informant	(b) Qualification	
Jacqueline MADIN	Widow of deceased Present at the death	
(c) Usual address 45 Fairview Drive Bayston Hill Shrewsbury Shropshire 8. I certify that the particulars given by me above are true to the best	of my knowledge and belief	
J. Madin	2000	Signature of informant
9. Cause of death I (a) Myocardial Infarction  Certified by Mostafa Yousry Shaban Abbas SOWAILAN	M MB ChB 2010 Alexandria University	
10. Date of registration Twenty-sixth June 2024	11. Signature of registrar D B Firmin Deputy Registrar	4

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

Sept \*Superintendent Registrar

\*Strike out whichever does not apply

Date 26 June 24