CERTIFIED COPY



OF AN ENTRY

Pursuant to the Births and

Deaths Registration Act 1953

DEATH		Entry No. 300	
Registration district Wirral	Administr	Administrative area	
Sub-district Wirral	Borough of Wirral		
 Date and place of death Fifteenth November 2022 Arrowe Park Hospital, Arrowe Park Road, William 	rral, Merseyside		
2. Name and surname Peter JEFFRYES	3. Sex Male 4. Maiden surname of woman who has married	m/ar va nan r	
5. Date and place of birth Fifth January 1952 Wirrel			
6. Occupation and usual address Hospital Porter (retired) 16 Silverburn Avenue, Wirral, Merseyside			
7.(a) Name and surname of informant Certificate received from Kate WILSON Assis (c) Usual address	(b) Qualification tant Coroner for Liverpool and Wirral. Inquest he	eld 30 November 2022	
8. I certify that the particulars given by me above are tru	e to the best of my knowledge and belief	Signature of informant	
9. Cause of death I (a) Pneumonia (b) Acute on chronic subdural haematoma (c) Fall II Heart Failure Conclusion: Accidental death	MAXWELL HODGE SOLICE Signature NO OPM Name NILLULO Date 20 09 20 CERTIFIED COPY OF OF	MUNE 100110/14 1023	
10. Date of registration First December 2022	11. Signature of registrar J Dickinson Registrar	- CONTRACTOR AND	

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

*Strike out whichever does not apply

Date 1-12-2022