

MEDICAL CERTIFICATE OF DEATH OF PRISONER

Central Region **Prison**

I certify that prisoner No CENR0000107/18

Name Daxton lexis

Died in the In this day at 09-10-2018 01:00 AM

and the cause of death was gf gfdgfd gfd gfdgfdgfd

Medical Officer
Medical Officer

I certify that prisoner No CENR0000107/18

Name Daxton lexis

Died in the In this day at 09-10-2018 01:00 AM

and the cause of death was gf gfdgfd gfd gfdgfdgfd

Medical Officer
Medical Officer