

A-16948

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STANDARD CERTIFICATE OF DEATH STATE OF OREGON
LOCAL REGISTRAR'S NUMBER 251 DATE RECEIVED OCT 10 1961

1. NAME OF DECEASED: **Lois Annette Falmberg**

2. PLACE OF DEATH: **Klamath**

3. CITY, TOWN, OR LOCATION: **Klamath Falls**

4. NAME OF HOSPITAL, OR PLACE WHERE DECEASED: **Hillside Hospital**

5. DATE OF DEATH: **September 15, 1958**

6. SEX: **Female**

7. COLOR OR RACE: **White**

8. MARITAL STATUS: **Married**

9. SOCIAL SECURITY NO.: **540-09-6944**

10. USUAL OCCUPATION: **Librarian**

11. NAME OF SPOUSE: **Walter**

12. DATE OF BIRTH: **Feb. 14, 1916**

13. AGE LAST BIRTHDAY: **42**

14. BIRTHPLACE (State or Foreign Country): **Portland, Oregon**

15. WAS DECEASED A CITIZEN OF U.S.: **Yes**

16. IF DECEASED WAS A VETERAN, WHAT WAS HIS STATUS: **None**

17. NAME OF FATHER: **Fred Reims**

18. MAIDEN NAME OF MOTHER: **Flora Thayer**

19. IF DECEASED WAS A VETERAN, WHAT WAS HIS STATUS: **None**

20. CAUSE OF DEATH (Enter only one cause and list in (a), (b), and (c).)

PART I: DEATH WAS CAUSED BY IMMEDIATE CAUSE (a): **Cerebral C.A.**

PART II: DEATH WAS CAUSED BY IMMEDIATE CAUSE (b): **C.A. 9/15/58**

PART III: DEATH WAS CAUSED BY IMMEDIATE CAUSE (c): **1/15/58**

21. TIME OF DEATH: **10:15 P.M.**

22. DESCRIBE HOW INJURY OCCURRED: **None**

23. CERTIFICATE: **105 P.M.**

24. RESERVED FOR REGISTRAR'S USE: **163X**

25. NAME OF REGISTRAR OR CLERK: **Hughes-Ranson Mortuary Astoria, Oregon**

26. SIGNATURE OF REGISTRAR OR CLERK: **W. W. W. W.**

27. DATE RECEIVED BY LOCAL REGISTRAR: **9-16-58**

CERTIFIED COPY

STATE OF OREGON
County of Multnomah

ISSUED JUN 14 1963

THIS IS TO CERTIFY THAT THIS IS A REPRODUCTION OF THE ORIGINAL RECORD ON FILE IN THE VITAL STATISTICS SECTION OF THE OREGON STATE BOARD OF HEALTH.

STATE REGISTRAR

By Direction of
RICHARD H. WILCOX, M.D.
State Health OfficerSTATE OF OREGON
County of Klamath

Filed for record at request of:

Klamath County Title Co.

on this 9 day of June A.D. 19 61
at 3:55 o'clock P.M. and duly
recorded in Vol. 353 of Deeds
Page 384CHAS. F. DE LAP, County Clerk
By *Chas. F. De Lap* Deputy

Fee \$1.50

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STANDARD CERTIFICATE OF DEATH STATE OF OREGON
LOCAL REGISTRAR'S NUMBER 51334 DATE RECEIVED FEB 25 1963

1. NAME OF DECEASED: **WILBURN LEE ROY SPARKS**

2. PLACE OF DEATH: **Klamath**

3. CITY, TOWN, OR LOCATION: **Klamath Falls**

4. NAME OF HOSPITAL, OR PLACE WHERE DECEASED: **Hillside Hospital**

5. DATE OF DEATH: **February 8, 1963**

6. SEX: **Male**

7. COLOR OR RACE: **White**

8. MARITAL STATUS: **Married**

9. SOCIAL SECURITY NO.: **540-18-0413**

10. USUAL OCCUPATION: **Laborer**

11. NAME OF SPOUSE: **Dolly Sparks**

12. DATE OF BIRTH: **May 27, 1902**

13. AGE LAST BIRTHDAY: **60**

14. BIRTHPLACE (State or Foreign Country): **Missouri**

15. WAS DECEASED A CITIZEN OF U.S.: **Yes**

16. IF DECEASED WAS A VETERAN, WHAT WAS HIS STATUS: **None**

17. NAME OF FATHER: **John R. Sparks**

18. MAIDEN NAME OF MOTHER: **Ivy Ferguson**

19. IF DECEASED WAS A VETERAN, WHAT WAS HIS STATUS: **None**

20. CAUSE OF DEATH (Enter only one cause and list in (a), (b), and (c).)

PART I: DEATH WAS CAUSED BY IMMEDIATE CAUSE (a): **Arteriosclerotic heart disease**

PART II: DEATH WAS CAUSED BY IMMEDIATE CAUSE (b): **Myocardial infarction**

PART III: DEATH WAS CAUSED BY IMMEDIATE CAUSE (c): **70 yrs**

21. TIME OF DEATH: **10:15 P.M.**

22. DESCRIBE HOW INJURY OCCURRED: **None**

23. CERTIFICATE: **2-9-63**

24. RESERVED FOR REGISTRAR'S USE: **1444X**

25. NAME OF REGISTRAR OR CLERK: **Klamath Memorial Park Klamath Falls, Oregon**

26. SIGNATURE OF REGISTRAR OR CLERK: **W. W. W. W.**

27. DATE RECEIVED BY LOCAL REGISTRAR: **2-9-63**

CERTIFIED COPY

STATE OF OREGON
County of Multnomah

ISSUED MAR 14 1963

THIS IS TO CERTIFY THAT THIS IS A REPRODUCTION OF THE ORIGINAL RECORD ON FILE IN THE VITAL STATISTICS SECTION OF THE OREGON STATE BOARD OF HEALTH.

STATE REGISTRAR

By Direction of
RICHARD H. WILCOX, M.D.
State Health OfficerSTATE OF OREGON; COUNTY OF KLAMATH; ss.
KLAMATH COUNTY TITLE CO.

Filed for record at request of:

this 9th day of June A.D. 1961 at 3:55 o'clock P.M. and
duly recorded in Vol. 353 of Deeds on Page 385

CHAS. F. DE LAP, COUNTY CLERK

By *Chas. F. De Lap* Deputy