

23073

VOLUME PAGE 1966

LOCAL REGISTRAR'S NUMBER 158

STANDARD CERTIFICATE OF DEATH

STATE OF OREGON
BOARD OF HEALTH - PORTLAND
PUBLIC HEALTH SERVICE

STATE FILE NO. 007102

DATE RECEIVED May 2 1968

1. NAME OF DECEASED GRACE HALLLEY

2. PLACE OF DEATH
A. COUNTY Klamath
B. CITY, TOWN OR LOCATION Klamath Falls
C. LENGTH OF LIFE IN YEARS 77

3. USUAL RESIDENCE (If different from place of death, give residence before admission)
A. STATE Oregon B. COUNTY Klamath
C. CITY, TOWN OR LOCATION Klamath Falls
D. STREET ADDRESS, RURAL ROUTE, ETC. 1526 Etna

4. DATE OF DEATH May 2 1966

5. SEX Female

6. COLOR OR RACE White

7. MARITAL STATUS Married

8. SOCIAL SECURITY NO. [blank]

9. USUAL OCCUPATION Housewife

10. KIND OF BUSINESS At Home

11. NAME OF SPOUSE William Lee Halley

12. DATE OF BIRTH January 13 1889

13. AGE LAST BIRTHDAY 77

14. BIRTHPLACE (State or Foreign Country) Beswick, California

15. WAS DECEASED A CITIZEN OF U.S. [X] Yes [] No

16. IF DECEASED WAS A VETERAN, WHAT WAR? []

17. NAME OF FATHER Samuel Raymond

18. MAIDEN NAME OF MOTHER Lucy Sabrina

19. PREDECESSOR'S NAME AND WHAT WAR? William L. Halley (Husband)

20. CAUSE OF DEATH (Enter only one cause per line in (a), (b), and (c).)
PART I: DEATH WAS CAUSED BY IMMEDIATE CAUSE (a) Pulmonary congestive blood vessels 1-2 days
DU TO (b) Arteriosclerosis 4-5 months
DU TO (c) Coronary artery disease 4-5 months
PART II: Other Contributing Cause(s) [blank]

21. IF DECEASED WAS FEMALE, WAS THERE A PREGNANCY IN THE PART II MONTH? [] Yes [X] No [] Unknown [] Yes [X] No

22. WAS DEATH RESULT OF [] Accidental [] Suicide [] Natural [X] [] Other []

23. TIME OF DEATH [] Day [] Night []

24. IF ACCIDENT OR INJURY, PLACE OF INJURY [] At Home [] At Work [] In Vehicle [] In Water [] In Fire [] In Other []

25. DESCRIBE HOW INJURY OCCURRED []

26. CERTIFICATE [] Single [] Married [] Widowed [] Divorced []

27. RESERVES FOR REGISTRAR'S USE

28. NAME OF CEMETERY OR BURIAL PLACE Hearst Cemetery

29. LOCATION (City or Town) Dorris, California

30. DATE RECEIVED BY LOCAL REGISTRAR 5/4/66

31. REGISTRAR'S SIGNATURE [Signature]

32. FURNISH REGISTRAR'S SIGNATURE AND ADDRESS [Signature] Klamath Falls, Oregon

STATE OF OREGON, COUNTY OF MULTNOMAH SS

I HEREBY CERTIFY THAT THE FOREGOING COPY HAS BEEN COMPARED BY ME WITH THE ORIGINAL DOCUMENT AND IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL CERTIFICATE AS THE SAME APPEARS ON FILE IN THE VITAL STATISTICS SECTION OF THE OREGON STATE BOARD OF HEALTH AND IN MY OFFICIAL CARE AND CUSTODY.

DATE ISSUED May 15 1968

STATE REGISTRAR

STATE OF OREGON, } ss
County of Klamath }

Filed for record at request of

W. L. Halley

on this 17 day of May A.D. 1968

at 1:30 o'clock P.M. and duly

recorded in Vol. M68 of 1968 Deeds

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DOROTHY ROGERS, County Clerk

By Deputy

Fee \$1.50