OREGON STATE BOARD OF HEALTH VITAL STATISTICS SECTION 23873 STANDARD CERTIFICATE OF DEATH BOARD OF HEADTH SERVICE DATE FILE NO.

BOARD OF HEADTH SERVICE DATE RECEIVED HAY 2 4 1968 NUMBER 120 HECK 1. NAME OF DECEASED CHARLEY 3, USUAL RESIDENCE III Ina A. STATE Oregon 2. PLACE OF DEATH A. COUNTY Klamath B. COUNTY Klamath B. CITY, TOWN, III outside corporate
OR Inmits, so specify
LOCATION Klamath Falls 6 Hours 2B COCATION Merrill "" D. NAME OF HOSPITAL (If not in hospital, give street address D. STREET ADDRESS, RURAL ROUTE, ETC. Presidental Intercommunity Hospital 125 - 1st. Street 4. DATE OF Month Day Year B. SEX 6. COLOR OR RACE

DEATH May 2 1968 Male White

B. SOCIAL SECURITY NO. S. USUAL OCCUPATION of life) 10. KIND OF BUSINESS
OR INDUSTRIAN OF BUSINESS OR INDUSTRIAN OF BUSINESS OR INDUSTRIAN OF BUSINESS OF O Divorced Never M Mary Ann Peck 13- AGE LAGT BIRTHDAY IF UNDER MONTHS 12 DATE OF Mobils Day Year 13 AGE L BIRTH July = 3 1892 18, WAS DECEASED A CITIZEN OF.

MU.S.

Porsign Country

Name of Country C.

18. MAIDEN NAME OF MOTHER

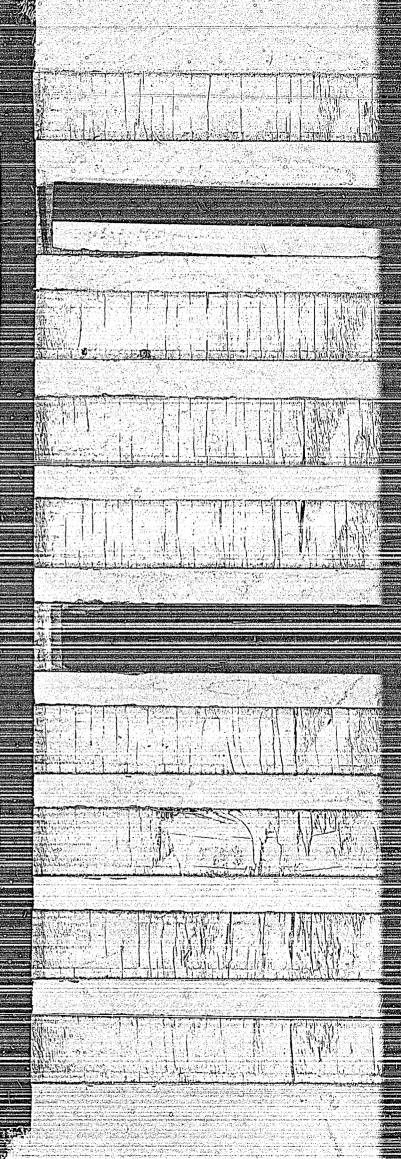
Fielda Edding

SE FER LINE IN (A), (B), AND (C). 14. BIRTHPLACE (State or Foreign Country)
Springfield, Missouri 19. INFORMANT'S NA RELATIONSHIP TO Dale Peck 17. NAME OF FATHER Richard James Peck 20. CAUSE OF DEATH (ENTER ONLY ONE CAUSE FER LINE IN (A), (B), AND (C).

PART I: DEATH WAS CAUSED BY:

IMMEDIATE CAUSE (A): CONCESTIVE HEATER PRILURE 7 LOURS ASSISTED ASS Conditions, if any DUE TO (B): MYOCARDIA STUBBLE (a), shows cause (a), salting the underly ping cause last (f). DUE TO (C): PARY II. Other Significant Conditions contributing to Death but not related to preumbly TVS. the terminal disease or condition given in Part I (a): Tes No Unknown Tes X No The terminal disease of Commission and Property of the terminal disease of Commission and Property of the terminal disease of Commission and Property of the terminal disease of the terminal terminal disease of the terminal 27. DESCRIBE HOW INJURY OCCURRED. 30A DECEASED WILL BE 30B, DATE 30C, NAME OF CREMATORY OF Burled Cremated Removed Cliber 5/6/68 Malin Cemetery

31. DATE RECEIVED BY 32. REGISTRAR'S SIGNATURE 35. FUHERAL DI
LOCAL REGISTRAR 32. REGISTRAR'S SIGNATURE 35. Malin, Oregon 35. FUNHAL DIN Klamath Falls, Oregon STATE OF OREGON SS. DATE ISSUED MAY 3 1 1968 Libereby certify that the foregoing copy has been compared by me with the original docu-ment 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 STATE REGISTRAR S-112 Rev. 2-2-67 STATE OF GREGON, \$ 55 County of Klem th Filed for receif at requist of Brickner on this 19 (2 if June A. 9. 19 68_ et 3:00 e'ol c'. PM . ind . aly recorded in Vel. M-68 of Deeds



BOROTHY ROGERS, Gount Cherry Persons of English Property Persons of the Control o