

Death Certificate of Desiderius Morris DeBel

2263 Reclamation
(Jeanette)

VO 1770 PAGE 6160

Oregon State Board of Health Certificate of Death

1. PLACE OF DEATH
County Wash State Oregon Local Registered No. 20
Township _____ of Village _____
City Washburn No. 111111 St. _____ Ward _____
(If death occurred in a hospital or institution, give its name instead of street number)
Length of residence in city or town where death occurred _____ yrs. mos. da. How long in U. S. if of foreign birth? _____ yrs. mos. da.

2. FULL NAME
(a) Residence: No. 2263 Reclamation St.
(b) Place of death: _____

PERSONAL AND STATISTICAL PARTICULARS

3. SEX Male 4. COLOR OR RACE White 5. Single, Married, Widowed or Divorced (Indicate the date)
Married

6. DATE OF BIRTH (month, day, and year) April 1, 1900
7. AGE Years 22 Months 4 Days 26

8. Trade, profession, or particular kind of work, occupation, or service, in which he was engaged at the time of death
Manager of Washburn Mill

9. Industry or business in which work was done, as with mill, factory, store, etc.
Washburn Mill

10. BIRTHPLACE (city or town) Washburn

11. NAME Desiderius Morris DeBel

12. BIRTHPLACE (city or town) Washburn

13. BIRTHPLACE (city or town) Washburn

14. BIRTHPLACE (city or town) Washburn

15. INFORMANT (Name) Paul W. Shopp
(Address) Washburn, Oregon

16. BURIAL, CREMATION OR REMOVAL
Place Washburn Date July 1, 1970

17. UNIDENTIFIED
(Address) Washburn, Oregon

18. FILE NO. 2263

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (month, day, and year) July 1, 1970

22. CAUSE OF DEATH (Indicate the immediate cause of death, and the underlying cause, if any, in order of sequence, separated by "and")
Heart failure

23. If death was due to external cause (reference to 22), also the following:
Heart failure

24. Where did injury occur? (Specify city or town, county, and state)
Washburn, Oregon

25. Was there any injury to any part of the body?
No

26. Signature of Physician or other qualified person
Paul W. Shopp

STATE OF OREGON, COUNTY OF MULTNOMAH
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 IS IN OFFICIAL CARE AND CUSTODY.

June 26 1970

20320
R. W. Milne
Klamath County Title Co.
P.O. Box 151
Klamath Falls, Oregon

STATE OF OREGON,
County of Klamath } ss.

Filed for record at request of:
Klamath County Title Co.
on this 24th day of July, A.D., 1970
at 1:21 o'clock P.M. and duly
recorded in Vol. M-70 of Deeds
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24 WM. D. MILNE, County Clerk
By Paul W. Shopp
Fee \$1.50 Deputy.

JUL 24 1 21 PM 1970