DECEASED  DECEASED  DECEASED  DECEASED  DECEASED  COUNTY  INATE OF  COUNTY  INATE OF  COUNTY  INATE OF  ANTER  CAUSE  INVESTIGATOR  CAUSE  INVESTIGATOR  CERTIFIER  CERTIFIER  DECEASE  CAUSE  INVESTIGATOR  DECEASE  INVESTIGATOR  COndition which is former and in the county of the cou	
FINAL COUNTY    COUNTY   COUNT	
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State Fill  State Fill  State Fill  State Fill  State Fill  Dev Oatt of Detail  A Description of spouse  A Description of the Number  The (a)  AUTOFY  Lor.  Lor.  Lor.  Lor.  Lor.  Lor.  Lor.  Lor.  Autofy  Part II, Item 15  Lor.  Lor.  Lor.  Autofy  Autofy  Lor.  Lor.  Autofy  Brant II, Item 15  Lor.  Lor.  Autofy	
Save File Number  Date OF DEATH (month, day, year)  - (LOVERNEER CS. 1972 - DATE OF DEATH (month, day, year)  - (LOVERNEER CS. 1972 - DATE OF DEATH (month, day, year)  - (LOVERNEER CS. 1972 - DATE OF DEATH (month, day, year)  - (LOVERNEER CS. 1972 - DATE OF DEATH (month, day, year)  - (LOVERNEER CS. 1973 - DATE RECEIVED BY STATE REGISTINAR  -	
STATE OF OREGON  County of Klamath  This certifies that the foregoing is a correct and complete transcript of a record of death on file with the Klamath County Department of Health.  VELDON C. BOGE, M.D., Registrar Vital Statistics  (SEAL)	
STATE OF OREGON; COUNTY OF KLAMATH; ss.  Filed for record at request ofMARGARFT ANN BURNS  this _31stday ofJanuary _ A. D., 1973 _ at3:45o'clockP. M., and duly recorded in	
Vol. M. 73 of DIFDS on Page 1159  WM. D. MILNE, County Clerk  Fet. 6! - Snargout and Burns  5633 Sahiesel and four)  By Jane C. Dray	