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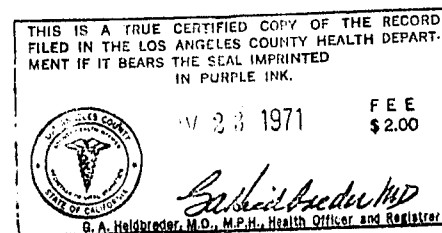
CERTIFICATE OF DEATH

7097-040040

STATE OF CALIFORNIA—DEPARTMENT OF PUBLIC HEALTH		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
1. NAME OF DECEASED—FIRST NAME		2. MIDDLE NAME	
3. SEX		4. COLOR OR RACE	
5. BIRTHPLACE		6. DATE OF BIRTH	
7. NAME AND BIRTHPLACE OF FATHER		8. MAIDEN NAME AND BIRTHPLACE OF MOTHER	
9. CITIZEN OF WHAT COUNTRY		10. SOCIAL SECURITY NUMBER	
11. LAST OCCUPATION		12. NAME OF LAST EMPLOYING COMPANY OR FIRM	
13. PLACE OF DEATH—NAME OF HOSPITAL OR OTHER INPATIENT FACILITY		14. STREET ADDRESS—STREET AND NUMBER OR LOCATION	
15. CITY OR TOWN		16. COUNTY	
17. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)		18. INSIDE CITY CORPORATE LIMITS	
19. CITY OR TOWN		20. NAME AND MAILING ADDRESS OF INFORMANT	
21. CORONER		22. PHYSICIAN	
23. NAME OF FUNERAL DIRECTOR FOR PERSON ACTING AS SUCH		24. EMBALMER—SIGNATURE IF BODY EMBALMED; LICENSE NUMBER	
25. PART I: DEATH WAS CAUSED BY IMMEDIATE CAUSE		26. PART II: OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO THE IMMEDIATE CAUSE GIVEN IN PART I	
27. NAME OF FUNERAL DIRECTOR FOR PERSON ACTING AS SUCH		28. LOCAL REGISTRAR—SIGNATURE	
29. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		30. DATE OF INJURY—MONTH DAY YEAR	
31. SPECIFY ACCIDENT, SUICIDE OR HOMICIDE		32. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)	
33. INJURY AT WORK		34. DATE OF INJURY—MONTH DAY YEAR	
35. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		36. DATE OF INJURY—MONTH DAY YEAR	
37. INJURY AT WORK		38. DATE OF INJURY—MONTH DAY YEAR	
39. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		40. DATE OF INJURY—MONTH DAY YEAR	
41. INJURY AT WORK		42. DATE OF INJURY—MONTH DAY YEAR	
43. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		44. DATE OF INJURY—MONTH DAY YEAR	
45. INJURY AT WORK		46. DATE OF INJURY—MONTH DAY YEAR	
47. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		48. DATE OF INJURY—MONTH DAY YEAR	
49. INJURY AT WORK		50. DATE OF INJURY—MONTH DAY YEAR	
51. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		52. DATE OF INJURY—MONTH DAY YEAR	
53. INJURY AT WORK		54. DATE OF INJURY—MONTH DAY YEAR	
55. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		56. DATE OF INJURY—MONTH DAY YEAR	
57. INJURY AT WORK		58. DATE OF INJURY—MONTH DAY YEAR	
59. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		60. DATE OF INJURY—MONTH DAY YEAR	
61. INJURY AT WORK		62. DATE OF INJURY—MONTH DAY YEAR	
63. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		64. DATE OF INJURY—MONTH DAY YEAR	
65. INJURY AT WORK		66. DATE OF INJURY—MONTH DAY YEAR	
67. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		68. DATE OF INJURY—MONTH DAY YEAR	
69. INJURY AT WORK		70. DATE OF INJURY—MONTH DAY YEAR	
71. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		72. DATE OF INJURY—MONTH DAY YEAR	
73. INJURY AT WORK		74. DATE OF INJURY—MONTH DAY YEAR	
75. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		76. DATE OF INJURY—MONTH DAY YEAR	
77. INJURY AT WORK		78. DATE OF INJURY—MONTH DAY YEAR	
79. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		80. DATE OF INJURY—MONTH DAY YEAR	
81. INJURY AT WORK		82. DATE OF INJURY—MONTH DAY YEAR	
83. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		84. DATE OF INJURY—MONTH DAY YEAR	
85. INJURY AT WORK		86. DATE OF INJURY—MONTH DAY YEAR	
87. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		88. DATE OF INJURY—MONTH DAY YEAR	
89. INJURY AT WORK		90. DATE OF INJURY—MONTH DAY YEAR	
91. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		92. DATE OF INJURY—MONTH DAY YEAR	
93. INJURY AT WORK		94. DATE OF INJURY—MONTH DAY YEAR	
95. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		96. DATE OF INJURY—MONTH DAY YEAR	
97. INJURY AT WORK		98. DATE OF INJURY—MONTH DAY YEAR	
99. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		100. DATE OF INJURY—MONTH DAY YEAR	

11622

Rev. Anna M. Smith
22046 - Providence St.,
Woodland Hills, Calif.
91364



STATE OF OREGON; COUNTY OF KLAMATH; ss.

Filed for record at request of ANNA M. SMITH

this 28th day of AUGUST A. D., 1973 at 11:12 o'clock A. M., and duly recorded in
Vol. M 73 of DEEDS on Page 11621

FEE \$ 4.00

WM. D. MILNE, County Clerk

By *Hazel Magel*