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STATE OF OREGON--STATE BOARD OF HEALTH
Vital Statistics Section

3 ml 11787

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CERTIFICATE OF DEATH

DECEASED

Usual residence where deceased lived, if death occurred at home, give residence before admission.

DECEASED

1. DECEASED NAME: First, Middle, Last
Warren Russell Alexander

2. SEX: Male

3. RACE: White

4. AGE: 52

5. DATE OF BIRTH: 2 July 20, 1973

6. DATE OF DEATH: August 30, 1920

7. COUNTY OF DEATH: Klamath

8. CITY, TOWN, OR LOCATION OF DEATH: Klamath Falls

9. CITIZEN OF WHAT COUNTRY: U.S.A.

10. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify Yes or No): Married

11. HUSBAND'S NAME (If married): Hilfred Alexander

12. SOCIAL SECURITY NUMBER: 242-12-6623

13. RESIDENCE-STATE: Oregon

14. COUNTY: Klamath

15. CITY, TOWN, OR LOCATION: Klamath Falls

16. STREET AND NUMBER OR R.F.D.: Rt. 1, Box 558

17. FATHER-NAME: Charles Alexander

18. MOTHER-NAME: Julia Glazner

19. HILFRED ALEXANDER, wife

20. DEATH WAS CAUSED BY: (a) Immediate cause: Pneumonia (b) Due to, or as a consequence of: Carcinoma of lung with cerebral metastases (c) Due to, or as a consequence of: 2 months

21. PART II. OTHER SIGNIFICANT CONDITIONS: conditions contributing to death but not related to cause given in Part I (a), (b), or (c)

22. ACCIDENT: (Specify Yes or No) No

23. INJURY AT WORK: (Specify Yes or No) No

24. DATE OF INJURY: 7/13/73

25. LOCATION (Street or R.F.D. No., city or town, county, state): Klamath Falls, Oregon

26. PHYSICIAN: (Specify Name, Address, City or Town, County, State) Medical Dental Bld., Klamath Falls, Oregon

27. PHYSICIAN-SIGNATURE: M.D. 7/30/73

28. BUREAU: (Specify Name, Address, City or Town, County, State) Klamath Falls, Oregon

29. BUREAU-SIGNATURE: M.D. 7/30/73

30. REGISTERED FOR REGISTRAR'S USE: 7/30/73

31. DATE RECEIVED BY LOCAL REGISTRAR: 7/30/73

32. DATE RECEIVED BY STATE REGISTRAR: 7/30/73

VS 2 R 49

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.

(SEAL)

VELDON C. BOGE, M.D., Registrar Vital Statistics

By Marion Chapman, Deputy Registrar
Date Jul 20 1973

VOID IF ALTERED

STATE OF OREGON; COUNTY OF KLAMATH; ss.

Filed for record ~~XXXXXX~~

this 14th day of SEPTEMBER, D., 1973, at 10:15 o'clock AM, and duly recorded in

Vol. M 73, of DEEDS on Page 11787

FEE \$ 2.00

WM. D. MILNE, County Clerk

By Magali Drayal