

DEC 3 11 41 AM '73

Vol. 73 Page 15612

LOCAL REGISTRAR'S NUMBER 377				STANDARD CERTIFICATE OF DEATH 16825	
STATE OF OREGON				STATE FILE NO.	
BOARD OF HEALTH - PORTLAND				DATE RECEIVED JAN 3 1974	
PUBLIC HEALTH SERVICE					
1. NAME OF DECEASED Gladys Eugenia Hunter		2. USUAL RESIDENCE (If institution, give residence before admission) A. STATE Oregon B. COUNTY Klamath			
3. PLACE OF DEATH A. COUNTY Klamath		C. CITY, TOWN, OR LOCATION Klamath Falls			
4. DATE OF DEATH Dec. 23 1964		5. SEX Female		6. COLOR OR RACE Caucasian	
7. SOCIAL SECURITY NO. 554-28-1422		8. USUAL OCCUPATION Housewife		11. NAME OF SPOUSE Leland O Hunter	
9. DATE OF BIRTH Nov. 25 1901		10. AGE LAST BIRTHDAY 63		12. IF DECEASED WAS A VETERAN, WHAT WAR?	
13. BIRTHPLACE (State or Foreign Country) Petaluma, California		14. WAS DECEASED A CITIZEN OF U. S. A.		15. IF DECEASED WAS A VETERAN, WHAT WAR?	
16. NAME OF FATHER John Vallier		17. MAIDEN NAME OF MOTHER Helen Stewart		18. HUSBAND'S NAME AND RELATIONSHIP TO DECEASED L.O. Hunter, husband	
19. CAUSE OF DEATH (Enter only one cause per line in (A), (B), and (C).) PART I: DEATH WAS CAUSED BY: IMMEDIATE CAUSE (A): Hypertension - Right Side 10 months					
PART II: OTHER DISORDERS, CONDITIONS, OR SYMPTOMS PRESENT AT TIME OF DEATH (List in order of importance):					
20. TIME OF DEATH (Month, Day, Year) Dec. 23 1964					
21. IF DECEASED WAS DECEASED, WAS DEATH A: a. Yes b. No c. Unknown					
22. IF DECEASED WAS DECEASED, WAS DEATH A: a. Yes b. No c. Unknown					
23. IF DECEASED WAS DECEASED, WAS DEATH A: a. Yes b. No c. Unknown					
24. IF DECEASED WAS DECEASED, WAS DEATH A: a. Yes b. No c. Unknown					
25. IF DECEASED WAS DECEASED, WAS DEATH A: a. Yes b. No c. Unknown					
26. IF DECEASED WAS DECEASED, WAS DEATH A: a. Yes b. No c. Unknown					
27. DESCRIBE HOW INJURY OCCURRED.					
28. CERTIFICATE (Signed and attested by the Registrar on the date stated above.) 12/23/64 John W. Hunter M.D. 1 Klamath Falls Oregon 28 Dec 1964					
29. RESERVED FOR REGISTRAR'S USE					
30. PREPARED BY (Name, Date, Title, Location) 12/29/64 Eternal Hills Klamath Falls, Ore.					
31. RECEIVED BY (Name, Title, Location) Kurt Hale 515 Pine Klamath Falls					

DATE ISSUED Nov. 29 1973

STATE OF OREGON, COUNTY OF MULTNOMAH)SS
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 HEALTH DIVISION AND IN MY OFFICIAL CARE AND CUSTODY.

Ret: Melvin Hunter
2605 Vermont
K.D.

STATE REGISTRAR
Marion M. Math

STATE OF OREGON, COUNTY OF KLAMATH; ss.

Filed for record at request of Melvin Hunter

this 3rd day of Dec. A.D., 1973 at 11:41 o'clock A.M., and duly recorded in

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Fee \$2.00

WM. D. MILNE, County Clerk
By Susan C. White Deputy