

26056

STATE OF OREGON - HEALTH DIVISION
Vital Statistics Section

54
Local File Number

CERTIFICATE OF DEATH

State File Number

DATE OF DEATH (month, day, year)
February 23, 1977

DECEASED NAME
ORANGE, COLIN

DATE OF BIRTH (month, day, year)
August 18, 1918

AGE (years)
58

SEX
Male

CITY, TOWN, OR LOCATION OF BIRTH
Klamath Falls, Oregon

CITY, TOWN, OR LOCATION OF DEATH
Klamath Falls, Oregon

CITIZENSHIP
USA

MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (specify)
Married

NAME OF SPOUSE
Louise Campbell

INDUSTRY
U.S. Navy

STREET ADDRESS
385 - 09 - 7811

CITY, TOWN, OR LOCATION
Klamath Falls, Oregon

INFORMANT NAME AND RELATIONSHIP TO DECEASED
Louise Campbell (Wife)

FATHER NAME
Perry F. Campbell

MOTHER NAME
Cora - Woods

DEATH WAS CAUSED BY
Immediate cause
Cardiac App. Failure

Underlying cause
Capillary Thrombosis

CAUSE
Pne

CONDITIONS, IF ANY, PREEXISTING OR CONTRIBUTING TO THE DEATH
None

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

ACCIDENT
DATE OF INJURY
None

INJURY AT WORK
None

PLACE OF INJURY
None

HOW INJURY OCCURRED
None

CERTIFICATE
DATE OF DEATH
February 23, 1977

TIME OF DEATH
2:00 A.M.

DEATH OCCURRED
At the place of death

DATE SIGNED (month, day, year)
February 24, 1977

SIGNATURE OF REGISTRAR
Veldon C. Boge

SIGNATURE OF DEPUTY REGISTRAR
Marian Chapman

DATE
February 24, 1977

VOID IF ALTERED

STATE OF OREGON; COUNTY OF KLAMATH; ss:

I hereby certify that the within instrument was received and filed for record on the 28th day of FEBRUARY A.D., 1977 at 12:58 o'clock P.M., and duly recorded in Vol. M 77 of DEEDS on Page 3484.

FEE \$ 3.00

WM. D. MILNE, County Clerk

By *W. D. Milne* Deputy

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

By *Marian Chapman* Deputy Registrar
Date FEB 24 1977

VOID IF ALTERED

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