132	Will.				
	5	CERTIFIER BURIAL	CAUSE	DECEASED  Usual residence where decayed in death accounted in most in the state of	A sold before
	PARAMETER CONTRACTOR ASSESSMENT OF RECORD ASSESSMEN	NATURE  NATURE  NAME (type or prim)  NAME (type or	(b)  (b)  (c)  (d)  (d)  (d)  (d)  (d)  (d)  (d	BAGE White, Negre, An eric (specify)  3. Whi is country of Death  72. K lar of Birth  73. K lar of Birth out.  8. Miss of Country Number o	STATE OF OREGON—HEALTH DVISION Vital Statistics Section CERTIFICATE OF DEATH 777 110
	STATE OF	OREGON; COUNTY ( ertify that the within in  A.D., 19 77 at <sup>2</sup> ;5	MARJORIE S. CO.  By Date VOID IF ALTERED  OF KLAMATH; ss.  strument was received and file  o'clock PM., a	correct and complete transcript of ath County Department of Health.  MER, Registrar Vital Statistics  Deputy Registrar  NOV 15 1977  19  ed for record on the 17th day of and duly recorded in Vol. M77	2438 2438
	01	\$ 3.00	n Page	ILNE, County Clerk  Bel May Deputy	
Edition .					· Chi Air I a sa s