

161		STATE OF OREGON—STATE BOARD OF HEALTH Vital Statistics Section		75-008850	
Local File Number		CERTIFICATE OF DEATH		State File Number	
Name of Decedent Caroline A. SMITH		Sex Female		Date of Birth (month, day, year) April 15, 1907	
Race White		Age 56		Date of Death (month, day, year) January 11, 1963	
Place of Birth Lana, Oregon		Place of Death Home		Place of Burial Home	
Marital Status Married		Spouse's Name William T. Smith		Spouse's Date of Birth April 15, 1907	
Occupation Housewife		Cause of Death Lung Cancer		Manner of Death Natural	
Social Security Number 542-12-6870		Hospital or Clinic Sacred Heart Hospital		Physician's Name William T. Smith	
Residence Route 5 Box 1067		City Springfield, Oregon		County Clatsop	
Signature of Decedent		Signature of Physician		Signature of Registrar	
Date of Declaration		Date of Registration		Date of Filing	

STATE OF OREGON, COUNTY OF MULTNOMAH)SS
I HEREBY CERTIFY THAT THE FOREGOING COPY HAS BEEN
IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL
VITAL STATISTICS SECTION OF THE OREGON STATE HEALTH

Nov. 16 1977

THE ORIGINAL DOCUMENT AND
IT APPEARS ON FILE IN THE
OFFICIAL CARE AND CUSTODY.

STATE REGISTRAR

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 NOVEMBER A.D., 1977 at 11:08 o'clock A.M., and duly recorded in Vol. M77, of DEEDS on Page 22979.

FEE \$ 3.00

WM. D. MILNE, County Clerk

By Sheretha D. Ketch Deputy