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CERTIFICATE OF DEATH
STATE OF CALIFORNIA

Vol. M78 Page 5422

STATE FILE NUMBER

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

DECEDENT PERSONAL DATA

1A. NAME OF DECEDENT—FIRST: ROY
1B. MIDDLE: W.
1C. LAST: WING
2A. DATE OF DEATH (MONTH, DAY, YEAR): Jan. 18, 1978
2B. HOUR: 2240
3. SEX: male
4. RACE: white
5. ETHNICITY: American
6. DATE OF BIRTH: Sept. 16, 1932
7. AGE: 45 YEARS
IF UNDER 1 YEAR: MONTHS / DAYS
IF UNDER 24 HOURS: HOURS / MINUTES
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY): Canada
9. NAME AND BIRTHPLACE OF FATHER: Yvonne Wing, Pedmont, Oklahoma
10. BIRTH NAME AND BIRTHPLACE OF MOTHER: Grace Chalmers, Canada
11. CITIZEN OF WHAT COUNTRY: U.S.A.
12. SOCIAL SECURITY NUMBER: 517-32-6779
13. MARITAL STATUS: Married
14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME): Vivian V. Waldroop
15. PRIMARY OCCUPATION: Power Switch board operator
16. NUMBER OF YEARS THIS OCCUPATION: 13
17. EMPLOYER (IF SELF-EMPLOYED, SO STATE): LA Dept. of Water & Power
18. KIND OF INDUSTRY OR BUSINESS: Utilities

USUAL RESIDENCE

19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION): 32401 San Francisquito Canyon Rd.
19B.
19C. CITY OR TOWN: Saugus
19D. COUNTY: Los Angeles
19E. STATE: CA
20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP: Vivian V. Wing - wife, 32401 San Francisquito Cy, Saugus, Calif. 91350

PLACE OF DEATH

21A. PLACE OF DEATH: Henry Mayo Memorial Hospital
21B. STREET ADDRESS (STREET AND NUMBER OR LOCATION): 23845 West McBean Parkway
21C. CITY OR TOWN: Valencia
21D. COUNTY: Los Angeles

CAUSE OF DEATH

22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)
IMMEDIATE CAUSE (A) GUNSHOT WOUND PENETRATING HEAD AND PERFORATING BRAIN
CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST
DUE TO, OR AS A CONSEQUENCE OF (B)
DUE TO, OR AS A CONSEQUENCE OF (C)
APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
23. OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH
24. WAS DEATH REPORTED TO CORONER?
25. WAS BIOPSY PERFORMED? NO
26. WAS AUTOPSY PERFORMED? NO
27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? OPERATION: NO DATE

PHYSICIAN'S CERTIFICATION

28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.
I ATTENDED DECEDENT SINCE (ENTER MO, DA, YR.)
I LAST SAW DECEDENT ALIVE (ENTER MO, DA, YR.)
28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE
28C. DATE SIGNED
28D. PHYSICIAN'S LICENSE NUMBER
28E. TYPE PHYSICIAN'S NAME AND ADDRESS

INJURY INFORMATION

29. SPECIFY ACCIDENT, SUICIDE, ETC.: SUICIDE
30. PLACE OF INJURY: HOME
31. INJURY AT WORK: NO
32A. DATE OF INJURY—MONTH, DAY, YEAR: JANUARY 18, 1978
32B. HOUR: 1845
33. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN): 32401 SAN FRANCISQUITO CYN., SAUGUS
34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY): AS ABOVE - GUNSHOT WOUND TO HEAD SELF INFLICTED

CORONER'S USE ONLY

35A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. AS REQUIRED BY LAW I HAVE HELD AN (INQUEST) INVESTIGATION
35B. CORONER—SIGNATURE AND DEGREE OR TITLE: [illegible] DEPUTY
35C. DATE SIGNED: 1-22-78

FUNERAL DIRECTOR AND LOCAL REGISTRAR

36. DISPOSITION: burial
37. DATE—MONTH, DAY, YEAR: 1-23-78
38. NAME AND ADDRESS OF CEMETERY OR CREMATORY: Live Oak Memorial Park Monrovia, CA
39. EMBALMER'S LICENSE NUMBER: not embalmed
40. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH): Turner & Stevens Live Oak
41. LOCAL REGISTRAR—SIGNATURE: Morrison E. Chamberlin MD
42. DATE ACCEPTED BY LOCAL REGISTRAR: JAN 23 1978

STATE REGISTRAR

A. B. C. D. E. F.

VS-11 (1-75)

Vivian Wing
2502 S. Westgrove Ave.
Duarte, Calif 91010

THIS IS A TRUE CERTIFIED COPY OF THE RECORD FILED IN THE COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES IF IT BEARS THIS SEAL IN PURPLE INK.

JAN 23 1978

FEE $3.00

Morrison E. Chamberlin

Morrison E. Chamberlin, Acting Director of Health Services and Registrar

STATE OF OREGON; COUNTY OF KLAMATH; ss.

I hereby certify that the within instrument was received and filed for record on the 21st day of March A.D., 19 58 at 4:28 o'clock P M., and duly recorded in Vol M78 of Deeds on Page 5422.

FEE $3.00

WM. D. MILNE, County Clerk

By Dernetha D. Letsch Deputy