59906

# CERTIFICATE OF DEATH
STATE OF CALIFORNIA

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STATE FILE NUMBER — LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

**DECEDENT PERSONAL DATA**

| 1A. NAME OF DECEDENT—FIRST | 1B. MIDDLE | 1C. LAST | 2A. DATE OF DEATH (MONTH, DAY, YEAR) | 2B. HOUR |
|---|---|---|---|---|
| THOMAS | A. | BURNS | JUNE 2, 1978 | 0954 |

| 3. SEX | 4. RACE | 5. ETHNICITY | 6. DATE OF BIRTH | 7. AGE (IF UNDER 1 YEAR: MONTHS / DAYS; IF UNDER 24 HOURS: HOURS / MINUTES) |
|---|---|---|---|---|
| MALE | WHITE | IRISH | MARCH 31, 1909 | 69 YEARS |

| 8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY) | 9. NAME AND BIRTHPLACE OF FATHER | 10. BIRTH NAME AND BIRTHPLACE OF MOTHER |
|---|---|---|
| MICHIGAN | TIMOTHY J. BURNS - IRELAND | ELLEN CREMEN - IRELAND |

| 11. CITIZEN OF WHAT COUNTRY | 12. SOCIAL SECURITY NUMBER | 13. MARITAL STATUS | 14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME) |
|---|---|---|---|
| UNITED STATES | 551-07-2581 | MARRIED | VICTORIA BEHOVITZ |

| 15. USUAL OCCUPATION | 16. NUMBER OF YEARS THIS OCCUPATION | 17. EMPLOYER (IF SELF-EMPLOYED, SO STATE) | 18. KIND OF INDUSTRY OR BUSINESS |
|---|---|---|---|
| STRUCTUAL IRON WORKER | 25 YEARS | VENNELL STEEL COMPANY | STEEL |

**USUAL RESIDENCE**

| 19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION) | 19B. | 20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP |
|---|---|---|
| 5519 WEST 142ND PLACE | | VICTORIA BURNS (WIFE)<br>5519 WEST 142ND PLACE<br>HAWTHORNE, CA. 90250 |

| 19C. CITY OR TOWN | 19D. COUNTY | 19E. STATE |
|---|---|---|
| HAWTHORNE | LOS ANGELES | CA. |

**PLACE OF DEATH**

| 21A. PLACE OF DEATH | 21B. STREET ADDRESS (STREET AND NUMBER OR LOCATION) |
|---|---|
| HAWTHORNE COMMUNITY HOSPITAL | 11711 SOUTH GREVILLEA AVENUE |

| 21C. CITY OR TOWN | 21D. COUNTY |
|---|---|
| HAWTHORNE | LOS ANGELES |

**CAUSE OF DEATH**

22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)

CONDITIONS IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST

| | | APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH |
|---|---|---|
| IMMEDIATE CAUSE (A) | Probable acute myocardial infarction | 1 HR |
| DUE TO, OR AS A CONSEQUENCE OF (B) | Arteriosclerotic heart disease | 9YRS |
| DUE TO, OR AS A CONSEQUENCE OF (C) | | |

| 24. WAS DEATH REPORTED TO CORONER? | 25. WAS BIOPSY PERFORMED? | 26. WAS AUTOPSY PERFORMED? |
|---|---|---|
| No | No | No |

23. OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH: None

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'S SIGNATURE AND DEGREE OR TITLE | 28C. DATE SIGNED | 28D. PHYSICIAN'S LICENSE NUMBER |
|---|---|---|---|---|
| 7/1/69 | 5/31/78 | Murray J. Heichman, MD | 6/2/78 | G 9668 |

28E. TYPE PHYSICIAN'S NAME AND ADDRESS: Murray J. Heichman, M.D. — 8540 Sepulveda Blvd Suite 1212 Los Angeles, Calif

**INJURY INFORMATION**

| 29. SPECIFY ACCIDENT, SUICIDE, ETC. | 30. PLACE OF INJURY | 31. INJURY AT WORK | 32A. DATE OF INJURY—MONTH, DAY, YEAR | 32B. HOUR |
|---|---|---|---|---|
| | | | | |

| 33. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN) | 34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY) |
|---|---|
| | |

**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 | 35C. DATE SIGNED |
|---|---|---|
| | | |

**FUNERAL DIRECTOR AND LOCAL REGISTRAR**

| 36. DISPOSITION | 37. DATE—MONTH, DAY, YEAR | 38. NAME AND ADDRESS OF CEMETERY OR CREMATORY | 39. EMBALMER'S LICENSE NUMBER |
|---|---|---|---|
| BURIAL | 6/6/78 | HOLY CROSS CEMETERY<br>5835 WEST SLAUSON AVENUE, LOS ANGELES | 5036 |

| 40. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH) | 41. LOCAL REGISTRAR—SIGNATURE | 42. DATE ACCEPTED BY LOCAL REGISTRAR |
|---|---|---|
| MCCORMICK MORTUARY | Norman E. Chamberlin | JUN 5 1978 |

**STATE REGISTRAR**

| A. | B. | C. | D. | E. | F. |
|---|---|---|---|---|---|
| | | | | | |

VS-11 (1-78)

Ret: Victoria Burns
5519 W. 142nd Place
Hawthorne, Ca. 90250

CR 30

STATE OF OREGON, )
County of Klamath )

Filed for record at request of

on this 19th day of December D. 19 78
at Deeds o'clock 10:06 M, and duly
recorded in Vol. M-78 of Deeds
Page 28273

Wm D. MILNE, County Clerk
By Jacqueline J. Mether Deputy

Fee $3.00

Fee