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FEB 15 1979

Vol. 79 Page 3663

CERTIFICATE OF DEATH

STATE OF CALIFORNIA

4000 768

STATE FILE NUMBER			LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER		
1A. NAME OF DECEDENT—FIRST HAROLD			1B. MIDDLE L (NN)		1C. LAST MARTIN
2A. DATE OF DEATH (MONTH, DAY, YEAR) SEPTEMBER 14, 1978			2B. HOUR 1340		
3. SEX MALE		4. RACE WHITE	5. ETHNICITY AMERICAN	6. DATE OF BIRTH JULY 24, 1919	
7. AGE 59 YEARS		IF UNDER 1 YEAR MONTHS	IF UNDER 1 YEAR DAYS	IF UNDER 24 HOURS HOURS MINUTES	
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY) TEXAS			9. NAME AND BIRTHPLACE OF FATHER TOM MARTIN TEXAS		10. BIRTH NAME AND BIRTHPLACE OF MOTHER LANNIE BURNS TEXAS
11. CITIZEN OF WHAT COUNTRY U.S.A.			12. SOCIAL SECURITY NUMBER 547-22-7520		13. MARITAL STATUS MARRIED
14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME) LOIS ABBOTT			15. PRIMARY OCCUPATION MECHANIC		
16. NUMBER OF YEARS THIS OCCUPATION ADULT LIFE			17. EMPLOYER (IF SELF-EMPLOYED, SO STATE) SELF		
18. KIND OF INDUSTRY OR BUSINESS AUTOMOBILE REPAIR			19. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP LOIS MARTIN, WIFE		
20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP 3131 HIGHWAY ONE, SPACE 161			21. CITY OR TOWN ARROYO GRANDE		
22. CITY OR TOWN ARROYO GRANDE			23. COUNTY SAN LUIS OBISPO		
24. STATE CALIF.			25. STREET ADDRESS (STREET AND NUMBER OR LOCATION) 3145 SOUTH HALCYON ROAD		
26. CITY OR TOWN ARROYO GRANDE			27. COUNTY SAN LUIS OBISPO		
28. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C) IMMEDIATE CAUSE (A) <i>Cardiopulmonary failure</i> DUE TO, OR AS A CONSEQUENCE OF (B) <i>Carcinomatous</i> DUE TO, OR AS A CONSEQUENCE OF (C) <i>epidermoid Carcinoma Rt lung</i>			29. WAS DEATH REPORTED TO CORONER? NO		
30. OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH			31. WAS DEATH REPORTED TO CORONER? NO		
32. WAS DEATH REPORTED TO CORONER? NO			33. WAS DEATH REPORTED TO CORONER? NO		
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This is to certify, That this is a full, true and correct copy of the record on file in this office and that the same has been carefully compared.

SAN LUIS OBISPO COUNTY
HEALTH DEPARTMENT

Sept. 19th 1978. By *L. Willhoit*
Deputy Registrar

STATE OF OREGON; COUNTY OF KLAMATH; ss.

I hereby certify that the within instrument was received and filed for record on the 15th day of February A.D., 19 79 at 1:15 o'clock P. M., and duly recorded in Vol. N79 of Deeds on Page 3663.

FEE \$3.00

WM. D. MILNE, County Clerk

By *Bernice Phelps* Deputy