64917 CERTIFICATE OF DEATH STATE OF CALIFORNIA Vol. M 79 Page 7229

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
CARL	L.	ROCK	8/22/78	1034

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	Polish	January 17, 1909	69 YEARS

8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)	9. NAME AND BIRTHPLACE OF FATHER	10. BIRTH NAME AND BIRTHPLACE OF MOTHER
New York	Lawrence Ruchaczewski - Poland	Victoria Sczuthowski -Polan

11. CITIZEN OF WHAT COUNTRY	12. SOCIAL SECURITY NUMBER	13. MARITAL STATUS	14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)
U.S.A.	106-07-0194	Married	Helen Olszewski

15. PRIMARY OCCUPATION	16. NUMBER OF YEARS THIS OCCUPATION	17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)	18. KIND OF INDUSTRY OR BUSINESS
Baker	60	Van DeKamp Co.	Bakery

USUAL RESIDENCE

19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)	19B.	19C. CITY OR TOWN
1410 Valley View		Glendale

19D. COUNTY	19E. STATE	20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP
Los Angeles		Mr. Carl Rock - Son 14 Corte Nueva Millbrae, CA 94030

PLACE OF DEATH

21A. PLACE OF DEATH	21B. COUNTY
Glendale Adventist Hospital	Los Angeles

21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)	21D. CITY OR TOWN
1509 Wilson Terrace	Glendale

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) Myocardial Infarction	Immediate
DUE TO, OR AS A CONSEQUENCE OF	(B) Coronary Atherosclerosis	yrs
DUE TO, OR AS A CONSEQUENCE OF	(C) Hypertensive Heart Disease	yrs

24. WAS DEATH REPORTED TO CORONER?	25. WAS BIOPSY PERFORMED?	26. WAS AUTOPSY PERFORMED?
NE	NE	NE

23. OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH

27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION: NE 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
8/15/78	8/15/78	W. K. Billingsby M.D.	8/22/78	G 2476

28E. TYPE PHYSICIAN'S NAME AND ADDRESS: Billingsby, M.D. 1530 E. Chevy Chase Dr. Glendale, Cal

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 OCURRED 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

36. DISPOSITION	37. DATE—MONTH, DAY, YEAR	38. NAME AND LOCATION OF CEMETERY OR CREMATORY	39. EMBALMER'S LICENSE NUMBER AND SIGNATURE
Burial	8/25/78	FOREST LAWN MEMORIAL PARK 1712 S. GLENDALE AVE., GLENDALE, CA	4373 Marvin C. Frey

40. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)	41. LOCAL REGISTRAR—SIGNATURE	42. DATE ACCEPTED BY LOCAL REGISTRAR
Forest Lawn - Glendale	Sol Bernstein, MD	AUG 25 1978

STATE REGISTRAR	A.	B.	C.	D.	E.	F.

VS-11 (5-78)

01-3-1-0353

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Returnto
Giacomini Jones & Lansky
635 Main
K Falls, Or

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.
FEE $8.00
AUG 28 1978
Sol Bernstein, M.D.
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 3rd day of March A.D., 19 79 at 8:39 o'clock A M., and duly recorded in Vol M79, of Deeds on Page 7229.

FEE $3.00

WM. D. MILNE, County Clerk
By Pamela A. Lutsch Deputy