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STATE OF OREGON
HEALTH DIVISION DEPARTMENT OF HUMAN RESOURCES
Vital Statistics Section

Vol. ^m 79 Page 3501

CERTIFICATE OF DEATH

DECEASED: NAME First Middle Last
CARL - SCHUBERT

RACE: White SEX: Male AGE: 31

CITY, TOWN OR LOCATION OF DEATH: Klamath Falls

STATE OF BIRTH: Nebraska CITIZEN OF WHAT COUNTRY: U.S.A. MARRIED: NEVER MARRIED, DIVORCED, WIDOWED, MARRIED

SOCIAL SECURITY NUMBER: 543 - 32 - 1355 BUSINESSMAN - Retired

RESIDENCE - STATE: Oregon COUNTY: Klamath CITY, TOWN, OR LOCATION: Klamath Falls STREET AND NUMBER OR R.F.D.: 405 Lincoln Street

FATHER: Carl Schubert MOTHER: Augusta Mueller

CEMETERY OR CREMATORY: Mt. Laki Cemetery

WARDEN: 1945 Main St. - Klamath Falls, Ore.

CERTIFIER: NAME AND TITLE: Blake C. Serven, M.D. / 207 Medical-Dental Bldg / Klamath Falls, Oregon

DATE SIGNED: APR 17 1979

REGISTRAR: MARIAN ACKERMAN

DATE: APR 17 1979

RESERVED FOR REGISTRAR'S USE

Return Wm. D. Milne
P.O. Box 574
Klamath Falls, Ore.

STATE OF OREGON
County of Klamath

This certifies that the foregoing is a correct and complete transcript of a record of death on file with the Klamath County Department of Health Services.

(SIA.)

MARIAN ACKERMAN, Registrar Vital Statistics

By: Marian Ackerman Deputy Registrar

Date: APR 17 1979

VOID IF ALTERED

STATE OF OREGON; COUNTY OF KLAMATH; ss.

I hereby certify that the within instrument was received and filed for record on the 26th day of April, A.D., 1979 at 2:24 o'clock P.M., and duly recorded in Vol. 79 of Deeds on Page 3501.

FILE 3.00

WM. D. MILNE, County Clerk

By: Wm. D. Milne Deputy