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79 AUG 7 1975
STATE OF OREGON - STATE BOARD OF HEALTH
Vital Statistics Section

Vol. 79 Page 18842

Local File Number

CERTIFICATE OF DEATH

State File Number

ASED

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RIAL

DECEASED-NAME		First		Middle		Last		State File Number	
1. ORVILLE		HARRISON		BAKER		DATE OF DEATH (month, day, year)		2. August 13, 1975	
RACE White		SEX Male		AGE-Last birthday (years) 71		Under 1 year mos. days		Under 1 day hours min.	
3. White		4. Male		5a. 71		5b. 5c.		6. January 25, 1904	
COUNTY OF DEATH		CITY, TOWN, OR LOCATION OF DEATH		Inside City Limits (specify yes or no)		HOSPITAL OR OTHER INSTITUTION-NAME (if not in either, give street and number)		7d. 47863 Highway 58	
7a. Lane		7b. Oakridge		7c. Yes		7d. 47863 Highway 58		NAME OF SPOUSE	
STATE OF BIRTH (If not in U.S.A., name country)		CITIZEN OF WHAT COUNTRY		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (specify)		11. Grace Marie Baker		12. 521 - 22 - 1148	
8. Oklahoma		9. U.S.A.		10. Married		11. Grace Marie Baker		12. 521 - 22 - 1148	
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (give kind of work done during most of working life, even if retired)		KIND OF BUSINESS OR INDUSTRY		13. Softwood Sawmill		14a. Oregon	
12. 521 - 22 - 1148		13a. Millwright		13. Softwood Sawmill		14a. Oregon		14b. Lane	
RESIDENCE-STATE		COUNTY		CITY, TOWN, OR LOCATION		Inside City Limits (specify yes or no)		STREET AND NUMBER OR R.F.D.	
14a. Oregon		14b. Lane		14c. Oakridge		14d. Yes		14e. 47863 Highway 58	
FATHER-NAME		MOTHER-NAME		INFORMANT-NAME and relationship to deceased		17. Grace M. Baker -- Wife		18. 8-10 years	
15. Albert Harrison Baker		16. Minnie Belle Kennett		17. Grace M. Baker -- Wife		18. 8-10 years		19. "	
PART I. DEATH WAS CAUSED BY:		(ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), and (c))		approximate interval between onset and death		18. 8-10 years		19. "	
18. (a) Uremia		(b) Nephrosclerosis		(c) Diabetic Hypoparathyroidism		19. "		20. "	
Conditions, if any, which gave rise to immediate cause (a), due to, or as a consequence of:		(b) Nephrosclerosis		(c) Diabetic Hypoparathyroidism		20. "		21. "	
PART II. OTHER SIGNIFICANT CONDITIONS: conditions contributing to death but not related to cause given in Part I (a)		AUTOPSY (yes or no)		IF YES were findings considered in determining cause of death		19a. No		19b. "	
21. Herpes Zoster, Hemodialysis		19a. No		19b. "		22. 8-11-75		23. 12:15 P.M.	
ACCIDENT (specify yes or no)		DATE OF INJURY (month, day, year)		HOUR		HOW INJURY OCCURRED (enter nature of injury in part I or part II, item 18)		24. 8-16-1975	
20a. "		20b. "		20c. "		20d. "		20e. "	
INJURY AT WORK (specify yes or no)		PLACE OF INJURY at home, farm, street, factory, office bldg., etc. (specify)		LOCATION (street or R.F.D. No., city or town, county, state)		20g. "		20h. "	
20e. "		20f. "		20g. "		20h. "		20i. "	
CERTIFICATION- PHYSICIAN: I attended the deceased from:		month day year		month day year		And Last Saw Him/Her Alive on: month day year		I Did/Did Not view the body after death (specify)	
21. 4-1-72 to 8-13-75		8-11-75		8-11-75		Did not		12:15 P.M.	
PHYSICIAN-SIGNATURE		NAME (type or print)		degree or Title		DATE SIGNED (month, day, year)		22c. 8-21-1975	
22a. Emily B. Ferguson		22b. Emily B. Ferguson		M D		22c. 8-21-1975		23. 132 East Broadway Eugene, Oregon 97401	
MAILING ADDRESS-PHYSICIAN		street		city or town		state		zip	
23. 132 East Broadway Eugene, Oregon 97401		24a. Burial		24b. Forestvale Mem. Park		24c. Oakridge Oregon		24d. 8-16-1975	
BURIAL, CREMATION, REMOVAL, MAUS. (specify)		CEMETERY OR CREMATORY-NAME		LOCATION city or town		state		DATE (mo., day, year)	
24a. Burial		24b. Forestvale Mem. Park		24c. Oakridge Oregon		24d. 8-16-1975		25a. Malcolm H. Clement Jr.	
FUNERAL DIRECTOR'S SIGNATURE		FUNERAL HOME-NAME AND ADDRESS (street, city or town, state, zip)		25b. Oakridge Funeral Home P. O. Box 711 Oakridge, Ore. 97463		26a. 8-25-1975		26b. 8-25-1975	
25a. Malcolm H. Clement Jr.		25b. Oakridge Funeral Home P. O. Box 711 Oakridge, Ore. 97463		26a. 8-25-1975		26b. 8-25-1975		27. "	
REGISTRAR-SIGNATURE		DATE RECEIVED BY LOCAL REGISTRAR		DATE RECEIVED BY STATE REGISTRAR		27. "		28. "	
26a. 8-25-1975		26b. 8-25-1975		27. "		28. "		29. "	
RESERVED FOR REGISTRAR'S USE		29. "		30. "		31. "		32. "	
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