73869 — CERTIFICATE OF DEATH — STATE OF CALIFORNIA

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303

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
Jessie	Mae	Winkle	April 25, 1979	0630

3. SEX	4. RACE	5. ETHNICITY	6. DATE OF BIRTH	7. AGE (IF UNDER 1 YEAR: MONTHS / DAYS; IF UNDER 24 HOURS: HOURS / MINUTES)
Female	Cauc	American	July 20, 1904	74 years

8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)	9. NAME AND BIRTHPLACE OF FATHER	10. BIRTH NAME AND BIRTHPLACE OF MOTHER
Arkansas	Henry Mc Ghee - Texas	Vitula Vancel - Mo.

11. CITIZEN OF WHAT COUNTRY	12. SOCIAL SECURITY NUMBER	13. MARITAL STATUS	14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)
United States	540 12 7578	Widowed	

15. PRIMARY OCCUPATION	16. NUMBER OF YEARS THIS OCCUPATION	17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)	18. KIND OF INDUSTRY OR BUSINESS
Housewife	46	Self Employed	Own Home

USUAL RESIDENCE

19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)	19B.	19C. CITY OR TOWN
P. O. Box 462		Chiloquin

19D. COUNTY	19E. STATE	20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP
Klamath	Oregon	Betty Horton - Dau. 2221 Deerfield Ave. Redding, Ca. 96001

PLACE OF DEATH

21A. PLACE OF DEATH	21B. COUNTY
	Shasta
21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)	**21D. CITY OR TOWN**
2221 Deerfield Ave.	Redding

CAUSE OF DEATH

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

IMMEDIATE CAUSE — (A) Cardiopulmonary arrest — 10 mn

CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST — DUE TO, OR AS A CONSEQUENCE OF: (B) Arteriosclerotic Heart Disease — 20 yrs

DUE TO, OR AS A CONSEQUENCE OF: (C)

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

24. WAS DEATH REPORTED TO CORONER	25. WAS BIOPSY PERFORMED	26. WAS AUTOPSY PERFORMED
Yes	No	No

23. OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH: Chronic Obstructive Lung Disease

27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF 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—SIGNATURE AND DEGREE OR TITLE	28C. DATE SIGNED	28D. PHYSICIAN'S LICENSE NUMBER
12-23-78	3-13-79	J Russell Mann	4/25	G032727

28E. TYPE PHYSICIAN'S NAME AND ADDRESS: Russell J. Mann, ~~1310~~ 2005 Court Street, Redding, Ca.

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

36. DISPOSITION	37. DATE—MONTH, DAY, YEAR	38. NAME AND ADDRESS OF CEMETERY OR CREMATORY	39. EMBALMER'S LICENSE NUMBER AND SIGNATURE
Burial	27 April 79	Klamath Falls Mem. Park, Klamath Falls, Ore.	James Allen 461

40. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)	41. LOCAL REGISTRAR—SIGNATURE	42. DATE ACCEPTED BY LOCAL REGISTRAR
Allen & Dahl Funeral Chapel	Kathleen E Carter, Deputy Registrar	APR 26 1979

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

VS-11 (5-78)

CERTIFICATION STATEMENT

This is to certify that the above is a true and correct copy of facts recorded on the death record of the above named decedent as registered in this office.

DATED: APR 26 1979

Kathleen E. Carter
Deputy Registrar of Vital Statistics
Shasta County Health Department
2650 Hospital Lane
Redding, Ca. 96001

Return to:
D. L. Hoots
2261 S. 6th
Klamath Falls, OR

STATE OF OREGON; COUNTY OF KLAMATH; ss.

I hereby certify that the within instrument was received and filed for record on the 12th day of September A.D., 1979 at 2:53 o'clock P M., and duly recorded in Vol M79, of Deeds on Page 21776.

FEE $3.50

WM. D. MILNE, County Clerk
By Bernetha L Kolach Deputy