75236 329
Local File Number

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

CERTIFICATE OF DEATH

Vol. M79 Page 24723

State File Number

1 DECEASED—NAME: FIRST NEITA MIDDLE MAE LAST ASIALA

2 DATE OF DEATH (MONTH, DAY, YEAR): September 26, 1979

3 RACE (WHITE, BLACK, AMERICAN INDIAN, ETC.) (SPECIFY): White

4 SEX: Female

5A AGE—LAST BIRTHDAY (YEARS): 59

5B UNDER 1 YEAR: MOS. / UNDER 1 DAY: DAYS / HOURS / MIN.

6 DATE OF BIRTH (MONTH, DAY, YEAR): February 22, 1920

7A COUNTY OF DEATH: Umatilla

7B CITY, TOWN, OR LOCATION OF DEATH: Umatilla

7C HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET & NO.): 2 Miles East, Hwy 730

7D IF HOSP. OR INST., INDICATE DOA, OP/EMERG., INPATIENT (SPECIFY): —

8 STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY): Washington

9 CITIZEN OF WHAT COUNTRY: U.S.A.

10 MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): Married

11 SPOUSE (IF MARRIED, WIDOWED): V.T. Asiala

12 WAS DECEDENT EVER IN U.S. ARMED FORCES? (SPECIFY YES OR NO): yes

13 SOCIAL SECURITY NUMBER: 531-18-1615

14A USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED): Housewife

14B KIND OF BUSINESS OR INDUSTRY: Own Home

15A RESIDENCE—STATE: Oregon

15B COUNTY: Klamath

15C CITY, TOWN, OR LOCATION: Klamath Falls

15D STREET AND NUMBER OR R.F.D.: 2404 Radcliff

15E INSIDE CITY LIMITS (SPECIFY YES OR NO): yes

16 FATHER—NAME FIRST MIDDLE LAST: Elmer E. Hurst

17 MOTHER—MAIDEN NAME FIRST MIDDLE LAST: Mona Maynard

18 INFORMANT—NAME AND RELATIONSHIP TO DECEASED: Mona Hurst - Mother

19A BURIAL, CREMATION, REMOVAL, MAUS. (SPECIFY): Removal

19B CEMETERY OR CREMATORY—NAME: Dayton City

19C LOCATION CITY OR TOWN STATE: Dayton, Washington

20A FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH—SIGNATURE: Daniel Burns

20B NAME AND ADDRESS OF FACILITY: Hubbard-Rogg Box C Dayton, Washington 99328

CERTIFICATION — MEDICAL EXAMINER

I CERTIFY THAT I MADE INQUIRY INTO THE DEATH OF THE DECEASED PERSON DESCRIBED ABOVE, AND IN MY OPINION DEATH RESULTED ON OR ABOUT:

21A DEATH OCCURRED (HOUR): 9:45 A.M.

21B THE DECEDENT WAS PRONOUNCED DEAD (MONTH, DAY, YEAR, HOUR): 9/26/79 11A M.

21C FROM: NATURAL CAUSES ☐ ACCIDENT ☒ SUICIDE ☐ HOMICIDE ☐ UNDETERMINED ☐ PENDING ☐

21D CERTIFIER — SIGNATURE: Paul W. Knowles

21E NAME—(TYPE OR PRINT): Paul Knowles DEGREE OR TITLE: M.D.

21F MEDICAL EXAMINER FOR: Umatilla COUNTY

21G DATE SIGNED (MONTH, DAY, YEAR): October 1, 1979

22A DATE RECEIVED BY REGISTRAR (MO. DAY, YR.): Oct. 3, 1979

22B REGISTRAR (SIGNATURE): Norma M. Hurtel

23 IMMEDIATE CAUSE — PART I (ENTER ONLY ONE CAUSE PER LINE FOR (A.), (B.), AND (C.))

(A) Multiple Traumatic Injuries — INTERVAL BETWEEN ONSET AND DEATH:

DUE TO, OR AS A CONSEQUENCE OF: (B) a) Fracture Cervical Spine C3-4 b) Basilar Skull Fracture c) Crushing Injury Chest - d) Fracture of Sternum & Humerus

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

PART II OTHER SIGNIFICANT CONDITIONS — CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (A).

Multiple Lacerations Contusions, Abrasions

24 AUTOPSY (SPECIFY YES OR NO): No

25A DATE OF INJURY (MONTH, DAY, YEAR): 9/26/79

25B HOUR: 9:45 A

25C HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 23): Deceased Was backing Car & Swung into Path of Truck

25D WORK (SPECIFY YES OR NO): No

25E PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY): Street.

25F LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, COUNTY, STATE): 2 miles East Hwy 730, Umatilla

RESERVED FOR REGISTRAR'S USE

ORIGINAL-VITAL STATISTICS COPY

VS-107 REV. 1-78

STATE OF OREGON)
COUNTY OF UMATILLA)

This certifies that the foregoing is a correct and complete transcript of the record of death on file with the UMATILLA COUNTY HEALTH DEPT.

COUNTY REGISTRAR OF VITAL STATISTICS

Patricia L. Fletcher

Date: Oct. 12, 1979

NOT VALID WITHOUT RAISED SEAL OF UMATILLA COUNTY HEALTH DEPT.

STATE OF OREGON; COUNTY OF KLAMATH; ss.

I hereby certify that the within instrument was received and filed for record on the 22nd day of October A.D., 19 79 at 9:36 o'clock A M., and duly recorded in Vol M79 of Deeds on Page 24723.

FEE $3.50

WM. D. MILNE, County Clerk

By Bernetha Aldrich Deputy