82236

CERTIFICATE OF DEATH
STATE OF CALIFORNIA

Vol. 80 Page 5437

4500 215
LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

STATE FILE NUMBER

DECEDENT PERSONAL DATA

1A. NAME OF DECEDENT—FIRST	1B. MIDDLE	1C. LAST
WILSON	J.	WADE

2A. DATE OF DEATH (MONTH, DAY, YEAR)	2B. HOUR
March 17, 1980	0117

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		Feb. 26, 1899	81 YEARS

8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)	9. NAME AND BIRTHPLACE OF FATHER	10. BIRTH NAME AND BIRTHPLACE OF MOTHER
Oklahoma	George Herbert Wade, Pennsylvania	Clara White, Michigan

11. CITIZEN OF WHAT COUNTRY	12. SOCIAL SECURITY NUMBER	13. MARITAL STATUS	14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)
USA	552-46-2307	Married	Berthat Smith

15. PRIMARY OCCUPATION	16. NUMBER OF YEARS THIS OCCUPATION	17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)	18. KIND OF INDUSTRY OR BUSINESS
Orchard Farmer	5	Self-Employed	Agriculture

USUAL RESIDENCE

19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)	19B.	19C. CITY OR TOWN
1720 Wade Circle		Klamath Falls

19D. COUNTY	19E. STATE
Klamath	Oregon

PLACE OF DEATH

21A. PLACE OF DEATH	21B. COUNTY	20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP
Mercy Medical Center	Shasta	Bertha Wade - Wife 1720 Wade Circle Klamath Falls, Oregon

21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)	21D. CITY OR TOWN
Clairmont Heights	Redding

'80 MAR 24 AM 9

CAUSE OF DEATH

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

IMMEDIATE CAUSE — (A) Metastatic Lung CA — DUE TO, OR AS A CONSEQUENCE OF

(B) — DUE TO, OR AS A CONSEQUENCE OF

(C)

CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH: 5 months

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

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

27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? — TYPE OF OPERATION — DATE: NO

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.)
10/24/79	3/16/80

28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE

28C. DATE SIGNED

28D. PHYSICIAN'S LICENSE NUMBER: A 31117

28E. TYPE PHYSICIAN'S NAME AND ADDRESS: Behrooz Zidehsarai MD, 1760 Gold St., Redding, Ca. 96001

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
Cremation	Mar. 19, 1980	Redding Cemetery Crematory, Redding, Ca.	Not Embalmed

40. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH): McDonald's Chapel, Redding, Ca.

41. LOCAL REGISTRAR—SIGNATURE: Sherry L. Bertram, Deputy Registrar

42. DATE ACCEPTED BY LOCAL REGISTRAR: MAR 18 1980

STATE REGISTRAR

A.	B.	C.	D.	E.	F.

VS-11 (10-78)

Bruce Owens Realtors
520 Klamath Ave
Attn Marie Owens

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: MAR 18 1980

Sherry L. Bertram
Deputy Registrar of Vital Statistics
Shasta County Health Department
2650 Hospital Lane
Redding, CA 96001

STATE OF OREGON; COUNTY OF KLAMATH; ss.

I hereby certify that the within instrument was received and filed for record on the 24th day of March A.D., 19 80 at 9:11 o'clock A M., and duly recorded in Vol M80, of Deeds on Page 5437.

FEE $3.50

WM. D. MILNE, County Clerk
By Jeanette A. Roberts Deputy