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STATE OF OREGON - HEALTH DIVISION
Vital Statistics Section

46

CERTIFICATE OF DEATH

77-002123

DECEASED NAME: Joann
RACE: White
SEX: Female
AGE: 52
DATE OF DEATH: February 17, 1977
DATE OF BIRTH: December 29, 1924
HOSPITAL OR OTHER INSTITUTION NAME: Pres. Intercomm. Hospt.
NAME OF SPOUSE: Lawrence F. Paganoni
KIND OF BUSINESS OR INDUSTRY: Homemaker
CITY, TOWN OR LOCATION: Klamath Falls
STREET AND NUMBER OR R.F.D.: 3625 Montavilla Dr.
INFORMANT NAME: Lawrence F. Paganoni, husband
DEATH WAS CAUSED BY:
OTHER SIGNIFICANT CONDITIONS:
INJURY AT WORK:
PLACE OF INJURY:
LOCATION:
HOW INJURY OCCURRED:
AUTOPSY: NO
CERTIFICATION:
DEATH OCCURRED: 1:10 A.M.
DATE SIGNED: 2/21/77
SIGNATURE: William A. Bartlett, M.D.
ADDRESS: 2860 Daggett St., Klamath Falls, Oregon 97601
BUTLER, CREMATION, REMOVAL:
CEMETERY OR CREMATORY NAME: Eternal Hills Mem. Gard.
LOCATION: Klamath Falls, Oregon
DATE: 2-21-77
FUNERAL CHAPEL: 515 Pine, Klamath Falls, Ore.
DATE RECEIVED BY LOCAL REGISTRAR:
DATE RECEIVED BY STATE REGISTRAR: 1977

STATE OF OREGON, COUNTY OF MULTNOMAH)ss
I HEREBY CERTIFY THAT THE FOREGOING COPY HAS BEEN COMPARED BY ME WITH THE ORIGINAL DOCUMENT AND IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL CERTIFICATE AS THE SAME APPEARS ON FILE IN THE VITAL RECORDS UNIT OF THE OREGON STATE HEALTH DIVISION AND IN MY OFFICIAL CARE AND CUSTODY.

DATE ISSUED Apr. 4 1980

STATE REGISTRAR

[Signature]

NOT VALID WITHOUT RAISED SEAL OF OREGON STATE HEALTH DIVISION
STATE OF OREGON; COUNTY OF KLAMATH; ss.

I hereby certify that the within instrument was received and filed for record on the 15th day of April A.D., 19 80 at 9:49 o'clock A.M., and duly recorded in Vol. M80 of Deeds on Page 6998.

FEE \$3.50

WM. D. MILNE, County Clerk
By *[Signature]* Deputy