K. 33050
33205
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United States of America—State of New Mexico—Vital Records

CERTIFICATE OF DEATH—Medically Certified by Physician other than Medical Investigator

(NOTE: If death due to accident, suicide, homicide, trauma, or unknown causes, refer case to Medical Investigator)

County of Death: Bernalillo
City, Town, Location: Albuquerque

Field	Entry
Decedent—Name (First, Middle, Last)	Kay Smith
Sex	F.
Date of Death	March 22, 1980
Date of Birth	Nov. 5, 1940
Age	39
Race	White
Hospital or Other Institution	Lovelace Bataan Hospital
If Hosp. or Inst.	Inpatient
State or Country of Birth	Washington
Citizen of What Country	USA
Married, Never Married, Widowed, Divorced	Married
Surviving Spouse	Jack Smith
Was Decedent Ever in U.S. Armed Forces?	X No
Social Security Number	536-38-6017
Usual Occupation	Housewife
Kind of Business or Industry	Home
Residence—State	Montana
County	Sanders
City, Town or Location	Noxon
Street and Number	Box 245 Bullriver RD.
Father—Name	Willis E. Campbell
Mother—Maiden Name	Dora Mae Martman
Informant—Name	Jack Smith
Mailing Address	Box 245 Bullriver Rd. Noxon, Montana 59853
Burial, Cremation, Removal, Other	Removal-Burial
Cemetery or Crematory—Name	Libbey Cemetery
Location	Libbey, Montana
Funeral Service Licensee Signature	Don [signature] 406
Facility Name	Strong-Thorne
Facility Address	Albuquerque, New Mexico
Certifier Signature	[signature]
Date Signed	3-23,1980
Hour of Death	7:14 pm 3/22/80
Certifier Name and Address	Lovelace Clinic Albuquerque New Mexico
Name of Attending Physician if Other Than Certifier	
Registrar Signature	[signature]
Date Received	[illegible]
Part I. Immediate Cause	[illegible handwriting]
Due to or as a Consequence of	[illegible handwriting]
Part II. Other Significant Conditions	
Autopsy	No
Was Recent Surgical Procedure Performed?	No

CERTIFIED COPY OF VITAL RECORD

STATE OF NEW MEXICO COUNTY OF BERNALILLO

Michael J. Burkhart, Director
Health Services Division
Health and Environment Department

This is a true and exact reproduction of the original document officially registered and placed on file in the Vital Records Section of the New Mexico Health and Environment Department in Santa Fe, New Mexico, and issued under authority of the State Registrar of Vital Statistics.

DATE ISSUED: March 25, 1980

[signature]
Michael WSTAmmann
State Registrar
Vital Statistics

THIS COPY NOT VALID UNLESS PREPARED ON SAFETY PAPER WHICH DISPLAYS THE RAISED SEAL OF THE STATE REGISTRAR. (NMSA, 1953, at Section 12-4-48)

1980 MAY 1 PM 3 11

Reception No. 37538 INDEXED
Recorded at the request of Jack Smith
on the 1st of April 1980
Fee $2.00 4:30 O'clock P.M.
[signature], by [signature]
CLERK AND RECORDER, Deputy
Lincoln County, Montana
Return to: Jack Smith (Called for)

Ret: Bill Sisemore
540 Main
K. Falls, Or

8093

STATE OF OREGON; COUNTY OF KLAMATH; ss.

Filed for record at request of Klamath County Title Co.

this 1st day of May A. D. 19 80 at 3:11 o'clock P M., and

duly recorded in Vol. M80, of Deeds on Page 8092

Wm D. MILNE, County Clerk

By Bernetha N. Kolarik

Fee $7.00

STATE of MONTANA
COUNTY of LINCOLN

I, [illegible] County Clerk and Recorder in and for the said County of Lincoln, State of Montana, hereby certify the annexed and foregoing to be a full, true and correct copy of a certain [illegible] together with the endorsement thereon as the same appears of record in this office.

Witness my hand and seal of said Lincoln County: Montana affixed this [illegible] day of [illegible] A.D. 1980

[illegible]
County Clerk and Recorder

[illegible]
Deputy