84128

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

Vol. M80 Page 8565

Local File Number 140

CERTIFICATE OF DEATH

State File Number

1. DECEASED—NAME (FIRST, MIDDLE, LAST): John Byrum HUDDLESTON
2. DATE OF DEATH (MONTH, DAY, YEAR): April 20, 1980
3. RACE (WHITE, BLACK, AMERICAN INDIAN, ETC.) (SPECIFY): White
4. SEX: Male
5A. AGE—LAST BIRTHDAY (YEARS): 59
5B. UNDER 1 YEAR (MOS., DAYS)
5C. UNDER 1 DAY (HOURS, MIN.)
6. DATE OF BIRTH (MONTH, DAY, YEAR): January 1, 1921
7A. COUNTY OF DEATH: Klamath
7B. CITY, TOWN, OR LOCATION OF DEATH: Gilchrist
7C. HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET & NO.): Mustang Lane
7D. IF HOSP. OR INST. INDICATE DOA, OP/EMER. RM., INPATIENT (SPECIFY):
8. STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY): Missouri
9. CITIZEN OF WHAT COUNTRY: USA
10. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): Married
11. SPOUSE (IF MARRIED, WIDOWED): Dorothy
12. WAS DECEDENT EVER IN U.S. ARMED FORCES? (SPECIFY YES OR NO): yes
13. SOCIAL SECURITY NUMBER: 495-16-4557
14A. USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED): Logger/Timber Faller
14B. KIND OF BUSINESS OR INDUSTRY: Logging
15A. RESIDENCE—STATE: Oregon
15B. COUNTY: Klamath
15C. CITY, TOWN, OR LOCATION: Gilchrist
15D. STREET AND NUMBER OR R.F.D.: Mustang Lane
15E. INSIDE CITY LIMITS (SPECIFY YES OR NO): no
16. FATHER—NAME (FIRST, MIDDLE, LAST): Byrum Huddleston
17. MOTHER—MAIDEN NAME (FIRST, MIDDLE, LAST): Verna Marie Blanchard
18. INFORMANT—NAME AND RELATIONSHIP TO DECEASED: Dorothy Huddleston - Wife
19A. BURIAL, CREMATION, REMOVAL, MAUS. (SPECIFY): Burial
19B. CEMETERY OR CREMATORY—NAME: Pilot Butte Cemetery
19C. LOCATION (CITY OR TOWN, STATE): Bend, Oregon
20A. FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH—SIGNATURE: [signature]
20B. NAME AND ADDRESS OF FACILITY: Niswonger-Reynolds, Inc., 105 N.W. Irving, Bend, Oregon 97701

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): 12:35 P. M.
21B. THE DECEDENT WAS PRONOUNCED DEAD (MONTH, DAY, YEAR, HOUR): April 20 1980 12:55 P. M.
21C. FROM: NATURAL CAUSES [X] ACCIDENT [ ] SUICIDE [ ] HOMICIDE [ ] UNDETERMINED [ ] PENDING [ ]
21D. CERTIFIER—SIGNATURE: [signature]
21E. NAME—(TYPE OR PRINT) DEGREE OR TITLE
21F. MEDICAL EXAMINER FOR: Klamath COUNTY
21G. DATE SIGNED (MONTH, DAY, YEAR): April 1980
22A. DATE RECEIVED BY REGISTRAR (MO. DAY, YR.): APR 25 1980
22B. REGISTRAR (SIGNATURE): Shelia Marier

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

PART I
(a) Probable Ventricular Fibrillation — INTERVAL BETWEEN ONSET AND DEATH: secs
(b) DUE TO, OR AS A CONSEQUENCE OF: Arteriosclerotic Heart Disease — INTERVAL BETWEEN ONSET AND DEATH: yrs
(c) DUE TO, OR AS A CONSEQUENCE OF: — INTERVAL BETWEEN ONSET AND DEATH:

PART II — OTHER SIGNIFICANT CONDITIONS — CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a) — INTERVAL BETWEEN ONSET AND DEATH

24. AUTOPSY (SPECIFY YES OR NO): No
25A. DATE OF INJURY (MONTH, DAY, YEAR)
25B. HOUR
25C. HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 23)
25D. INJ. AT WORK (SPECIFY YES OR NO)
25E. PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY)
25F. LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, COUNTY, STATE)

RESERVED FOR REGISTRAR'S USE

Mrs John Huddleston
P.O. Box 762
Gilchrist Or 97737

ORIGINAL—VITAL STATISTICS COPY

VS-107 REV. 1-78

1980 MAY 9 PM 2 52

STATE OF OREGON
County of Klamath

This certifies that the foregoing is a correct and complete transcript of a record of death on file with the Klamath County Department of Health Services.

(SEAL)

MARIAN ACKERMAN, Registrar Vital Statistics

By [signature], Deputy Registrar
Date April 28, 1980

VOID IF ALTERED

NOT VALID WITHOUT RAISED SEAL OF THE KLAMATH CO. DEPT. OF HEALTH SERVICES

STATE OF OREGON; COUNTY OF KLAMATH; ss.

I hereby certify that the within instrument was received and filed for record on the 9th day of May A.D., 19 80 at 2:52 o'clock P M., and duly recorded in Vol M80 of Deeds on Page 8565.

FEE $3.50

WM. D. MILNE, County Clerk

By [signature] Deputy