5621 '81 OCT 21 AM 11 27 [illegible] OR STRING (OVER)

CERTIFICATE OF DEATH
STATE OF CALIFORNIA

Vol. A-81 Page 18367

STATE FILE NUMBER | LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

DECEDENT PERSONAL DATA

1A. NAME OF DECEDENT—FIRST	1B. MIDDLE	1C. LAST
FLORENCE	Mimi	ANDERSON

2A. DATE OF DEATH (MONTH DAY YEAR)	2B. HOUR
September 20, 1981	1300

3. SEX	4. RACE	5. ETHNICITY	6. DATE OF BIRTH	7. AGE (IF UNDER 1 YEAR: MONTHS, DAYS; IF UNDER 24 HOURS: HOURS, MINUTES)
Female	Cauc.	German-Welsh	April 10, 1896	85 YEARS

8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)	9. NAME AND BIRTHPLACE OF FATHER	10. BIRTH NAME AND BIRTHPLACE OF MOTHER
Ohio	Wm. Howell - Ohio	Mamie Zimmerman - Ohio

11. CITIZEN OF WHAT COUNTRY	12. SOCIAL SECURITY NUMBER	13. MARITAL STATUS	14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)
U.S.A.	562-28-6238	Married	Orville N. Anderson

15. PRIMARY OCCUPATION	16. NUMBER OF YEARS THIS OCCUPATION	17. EMPLOYER (IF SELF-EMPLOYED SO STATE)	18. KIND OF INDUSTRY OR BUSINESS
Secretary	10yrs.	U.S. Government Engineers	Civil Service

USUAL RESIDENCE

19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)	19B.	19C. CITY OR TOWN
12142 Allard Street		Norwalk

19D. COUNTY	19E. STATE
Los Angeles	Calif.

PLACE OF DEATH

21A. PLACE OF DEATH	21B. COUNTY
"Residence"	Los Angeles

21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)	21D. CITY OR TOWN
12143 Allard St.	Norwalk

20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP
Mr. Orville N. Anderson - Husband
(Same as 19a)

CAUSE OF DEATH

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

IMMEDIATE CAUSE (CONDITION, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST)

(A) Myocardial Infarction
DUE TO, OR AS A CONSEQUENCE OF
(B) ASHD + Aortic Insuff
DUE TO, OR AS A CONSEQUENCE OF
(C) Mild CHF

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

23. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH
Hiatal Hernia & Emphysema

24. WAS DEATH REPORTED TO CORONER? NO
25. WAS BIOPSY PERFORMED? No
26. WAS AUTOPSY PERFORMED? NO
27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION: NO DATE:

PHYSICIAN'S CERTIFICATION

28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED. I LAST SAW DECEDENT ALIVE

DATE SEEN SINCE	LAST SAW DECEDENT ALIVE
Dec 1978	9/16/81

28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE: Keith Wong, MD
28C. DATE SIGNED: 9/21/81
28D. PHYSICIAN'S LICENSE NUMBER: A026257
28E. TYPE PHYSICIAN'S NAME AND ADDRESS: R. Wong, M.D. - 9945 E. Artesia Blvd. - Bellflower, Calif.

INJURY INFORMATION

29. SPECIFY IF 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	9-25-81	Angeles Abbey Crem. - 1515 E. Compton Blvd. Compton, Calif.	Unembalmed

40. NAME OF FUNERAL DIRECTOR OR PERSON ACTING AS SUCH: THE NEPTUNE SOCIETY
41. LOCAL REGISTRAR—SIGNATURE
42. DATE ACCEPTED BY LOCAL REGISTRAR: SEP 22 1981

STATE REGISTRAR

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

VS 11 (C 78)

THIS IS A TRUE CERTIFIED COPY OF THE RECORD FILED IN THE COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES IF IT BEARS THIS SEAL IN PURPLE INK.

LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICES STATE OF CALIFORNIA

SEP 22 1981

FEE $3.00

Director of Health Services and Registrar

CK 409

Return to:
Orville N. Anderson
12143 Allard St.
Norwalk, CA 90650

STATE OF OREGON; COUNTY OF KLAMATH: ss.

I hereby certify that the within instrument was received and filed for record on the 21st day of October A.D., 1981 at 11:27 o'clock A M., and duly recorded in Vol M81 of Deeds on page 18367.

Fee $4.00

EVELYN BIEHN
COUNTY CLERK

By [signature] Deputy