

8648

82 JAN 27 PM 3:05
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MTC 1396

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CERTIFICATE OF DEATH
STATE OF CALIFORNIADECEDENT
PERSONAL
DATASTATE FILE NUMBER
1A. NAME OF DECEDENT—FIRST

THELMA

3. SEX
Female4. RACE
White8. BIRTHPLACE OF DECEDENT (STATE OR
FOREIGN COUNTRY)
California11. CITIZEN OF WHAT COUNTRY
U.S.A.15. PRIMARY OCCUPATION
Housewife1B. MIDDLE
ETLEEN5. ETHNICITY
American9. NAME AND BIRTHPLACE OF FATHER
Paul F. Jenkel - Iowa12. SOCIAL SECURITY NUMBER
557-26-224316. NUMBER OF YEARS
THIS OCCUPATION
361C. LAST
KETCHUM6. DATE OF BIRTH
May 17, 192313. MARITAL STATUS
Married17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)
Own Home

19B.

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER
2A. DATE OF DEATH (MONTH, DAY, YEAR)
June 23, 19812B. HOUR
12057. AGE
58 YEARS10. BIRTH NAME AND BIRTHPLACE OF MOTHER
M. Roselle Pickering - Utah14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER
BIRTH NAME)
Robert L. Ketchum18. KIND OF INDUSTRY OR BUSINESS
Homemaker19C. CITY OR TOWN
Granada Hills20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP
Robert L. Ketchum Husband
Same 91344USUAL
RESIDENCE19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)
17225 Tulsa St.19D. COUNTY
Los Angeles19E. STATE
California21B. COUNTY
Los AngelesPLACE
OF
DEATH21A. PLACE OF DEATH
Residence23C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)
17225 Tulsa St.21D. CITY OR TOWN
Granada HillsCAUSE
OF
DEATH22. DEATH WAS CAUSED BY:
IMMEDIATE CAUSE

(A) DUE TO, OR AS A CONSEQUENCE OF

(B) DUE TO, OR AS A CONSEQUENCE OF

(C) DUE TO, OR AS A CONSEQUENCE OF

cardio pulmonary arrest
lung cancer with bleedingAPPROXIMATE
INTERVAL
BETWEEN
ONSET
AND
DEATH
3/17/8124. WAS DEATH REPORTED
TO CORONER?
81-815125. WAS DISPOST PERFORMED?
No26. WAS AUTOPSY PERFORMED?
No23. OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH
none27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23?
TYPE OF OPERATION muscle biopsy28C. DATE SIGNED
6/23/8128D. PHYSICIAN'S LICENSE NUMBER
638541PHYSICIAN'S
CERTIFICATION28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE
AND PLACE STATED FROM THE CAUSES STATED.
1 ATTENDED DECEDENT SINCE (ENTER MO., DA., YR.)
3/17/8128B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE
Peter V.W. Miao, M.D.28E. TYPE PHYSICIAN'S NAME AND ADDRESS
4911 Van Nuys Blvd. Sherman Oaks, CaliforniaINJURY
INFORMATIONCORONER'S
USE
ONLY

29. SPECIFY ACCIDENT, SUICIDE, ETC.

30. PLACE OF INJURY

33. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)
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)

34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)

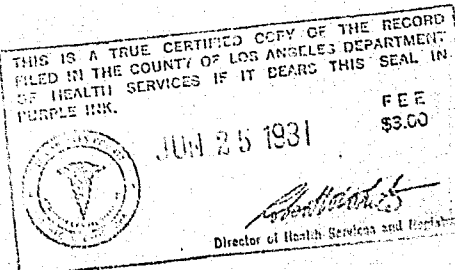
35C. DATE SIGNED

36. POSITION
Bustal37. DATE—MONTH, DAY, YEAR
June 27, 198138. NAME AND ADDRESS OF CEMETERY OR CREMATORY
Oakwood Memorial Park, Chatsworth, CA
22160 Lassen Street

41. LOCAL REGISTRATION

39. EMBALMER'S LICENSE NUMBER AND SIGNATURE
379042. DATE ACCEPTED BY LOCAL REGISTRATION
JUN 25 198140. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)
BASTIAN & PERROTT MORTUARYSTATE
REGISTRAR

VS-11 (10-78)

RECORDING REQUESTED BY:
GARY L. STEVENSWHEN RECORDED PLEASE MAIL
TO:
Robert L. Ketchum
17225 Tulsa St.
Granada Hills, CA 91344STATE OF OREGON; COUNTY OF KLAMATH; ss.
I hereby certify that the within instrument was received and filed for record on the

27 day of January A.D., 1982 at 3:25 o'clock P. M., and duly recorded in

Vol 182, of Deeds on page 1095.

Fee \$ 4.00

EVELYN DIEHN
COUNTY CLERK
By Joya McLean deputy