CERTIFICATE OF DEATH

14894 2/	A在特別的可以政治是否對於	Vital Record			DATE OF DEATH	ile Number N (month, day, year)
Local File N DECEASED - NAME	First RACHEL	Middle LUCINDA	MILLER		₂ Jນ	me 11, 1982
RACE White, Black, American Inc	tian. SEX	AGE—Last birthda	ay Under 1 ys	ays hours min.	T ₆	May 4, 1889
etc. (specify) White	Fema	LL C 5a AL OR OTHER INSTITUTION	NAME IF HOSP.	OR INST. Indicate DOA Rm. Inpatient [Specify	COUNTY OF DE	EATH Klamath
Klamath Fa	(If not in	either, give street and number	enter 7 I	npatient 	7d IED, WIDOWED)	WAS DECEDENT EVER IN U ARMED FORCES? [Spect Year
STATE OF BIRTH (If not in U.S.A.	A. CITIZEN OF W	HAT COUNTRY WARRIE	D DIVORCED (specify).	1. Adolf		TRY
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13 541 - 09 -	COUNTY	CITY, TOWN, OR I	LOCATION STRE	624 Witc	hell	601 Inside City Limits (specify yes or no) 15e Yes
15a Oregon	15b Klamat	Maiden Name	first middle	MATCHERE	MT_NAME and relation	
Jesse Loc	K CEMETERY OR	Lois D.		LOCATION	city or town	state
BURIAL CREMATION, REMOVAL, MAUS. (specify)	l _{se} Klar	math Memoria	1 Park			lls, Oregon
FUNERAL SERVICE LICENSE	E Or Person Acting As S	WARD'S	- 1945 Ma	ain - Kla	math Fal	ls, Oregon 9
200 Cames To		ZOO and place and	DATE 21b	SIGNED (MO. Day. Y.		21c 1:10 A
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NAME OF ATTENDIN	IG PHYSICIAN IF OTHER					
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