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STATE OF OREGON
OREGON STATE HEALTH DIVISION
DEPARTMENT OF HUMAN RESOURCES
Vital Records Unit
CERTIFICATE OF DEATH
ORS - 146

Vol. M83 Page 1345

Local File Number		State File Number	
DECEASED-NAME		DATE OF DEATH (MONTH, DAY, YEAR)	
FIRST MIDDLE LAST		2 January 15, 1983	
MELODY R. SHELBY		DATE OF BIRTH (MONTH, DAY, YEAR)	
1 RACE WHITE, BLACK, AMERICAN INDIAN, ETC. (SPECIFY)		6 October 5, 1951	
2 SEX		COUNTY OF DEATH	
3 White		70 Klamath	
4 AGE - LAST BIRTHDAY (YEARS)		71 Emer. Rm.	
5A 31		72 Klamath	
6 CITY, TOWN, OR LOCATION OF DEATH		73 West Medical Center	
7A Klamath Falls		74 Emer. Rm.	
8 HOSPITAL OR OTHER INSTITUTION NAME (IF NOT IN EITHER, GIVE STREET & NO.)		75 Klamath	
9 STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY)		76 Klamath	
10 Oregon		77 Klamath	
11 CITIZEN OF WHAT COUNTRY		78 Klamath	
12 U.S.A.		79 Klamath	
13 SOCIAL SECURITY NUMBER		80 Klamath	
14 541-58-6725		81 Klamath	
15 USUAL OCCUPATION (GIVE NO OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED)		82 Klamath	
16 Bookkeeper		83 Klamath	
17 RESIDENCE-STATE		84 Klamath	
18 Oregon		85 Klamath	
19 COUNTY		86 Klamath	
20 Klamath		87 Klamath	
21 CITY, TOWN, OR LOCATION		88 Klamath	
22 Klamath Falls		89 Klamath	
23 STREET AND NUMBER OR R.F.D.		90 Klamath	
24 4707 Hope Street		91 Klamath	
25 97601		92 Klamath	
26 FATHER-NAME FIRST MIDDLE LAST		93 Klamath	
27 Ernest Frank Schmidt		94 Klamath	
28 MOTHER-MAIDEN NAME FIRST MIDDLE LAST		95 Klamath	
29 Mildred I. Luper		96 Klamath	
30 INFORMANT-NAME AND RELATIONSHIP TO DECEASED		97 Klamath	
31 Dan Shelby, husband		98 Klamath	
32 LOCATION CITY OR TOWN STATE		99 Klamath	
33 Klamath Falls, Oregon 97601		100 Klamath	
34 BURIAL, CREMATION, REMOVAL, MAUS, (SPECIFY)		101 Klamath	
35 Burial		102 Klamath	
36 CEMETERY OR CREMATORY NAME		103 Klamath	
37 Eternal Hills Memorial Gardens		104 Klamath	
38 FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH		105 Klamath	
39 William J. Davenport		106 Klamath	
40 NAME AND ADDRESS OF FACILITY		107 Klamath	
41 Davenport's Chapel of the Good Shepherd,		108 Klamath	
42 6420 South Sixth Street, Klamath Falls, Oregon 97601		109 Klamath	
43 CERTIFICATION - MEDICAL EXAMINER		110 Klamath	
44 I CERTIFY THAT I MADE INQUIRY INTO THE DEATH OF THE DECEASED PERSON DESCRIBED ABOVE, AND IN MY OPINION DEATH RESULTED ON OR ABOUT:		111 Klamath	
45 DEATH OCCURRED		112 Klamath	
46 10:34 AM		113 Klamath	
47 MONTH DAY YEAR		114 Klamath	
48 January 15, 1983		115 Klamath	
49 TIME		116 Klamath	
50 10:34 AM		117 Klamath	
51 CERTIFIER SIGNATURE		118 Klamath	
52 Michael R. Cummings		119 Klamath	
53 MEDICAL EXAMINER		120 Klamath	
54 Klamath		121 Klamath	
55 DATE RECEIVED BY REGISTRAR (MO., DAY, YR.)		122 Klamath	
56 January 18, 1983		123 Klamath	
57 IMMEDIATE CAUSE		124 Klamath	
58 (A) Asphyxiation		125 Klamath	
59 (B) Carbon monoxide intoxication		126 Klamath	
60 (C) OTHER SIGNIFICANT CONDITIONS		127 Klamath	
61		128 Klamath	
62 DATE OF INJURY (MONTH, DAY, YEAR)		129 Klamath	
63 January 15, 1983		130 Klamath	
64 HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 23)		131 Klamath	
65 Self-inflicted poisoning		132 Klamath	
66 INJ. AT WORK (SPECIFY YES OR NO)		133 Klamath	
67 No		134 Klamath	
68 PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC.		135 Klamath	
69 Car in home garage		136 Klamath	
70 LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, COUNTY, STATE)		137 Klamath	
71 4707 Hope Street, Klamath Falls, Klamath, Oregon 97601		138 Klamath	
72 RESERVED FOR REGISTRAR'S USE		139 Klamath	

ORIGINAL-VITAL STATISTICS COPY

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.



MARIAN ACKERMAN, Registrar Vital Statistics

By Marian Ackerman, Deputy Registrar

Date JAN 19 1983

VOID IF ALTERED

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

After recording notation to: D.L. Hoots, 2261 S. 6th St. #5 Klamath Falls

State of OREGON: COUNTY OF KLAMATH: ss.

I hereby certify that the within instrument was received and filed for record on the

25 day of Jan A.D., 1983 at 2:39 o'clock p M., and duly recorded in

Vol M83 of Deeds on page 1345.

Fee \$ 4.00

EVELYN BIEHN
COUNTY CLERK

By [Signature] deputy