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OCT 7 1983

Leonard Kanuk REGISTRAR-RECORDER
LOS ANGELES COUNTY, CALIFORNIA

REGISTRAR-RECORDER LOS ANGELES COUNTY * CALIFORNIA *

'83 OCT 31 AM 11

CERTIFICATE OF DEATH
STATE OF CALIFORNIA

STATE FILE NUMBER 0190-037163
LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

DECEDENT PERSONAL DATA

1A. NAME OF DECEDENT—FIRST: JAMES
1B. MIDDLE: MONROE
1C. LAST: GEARY
2A. DATE OF DEATH (MONTH, DAY, YEAR): August 18, 1983
2B. HOUR: 1345
3. SEX: Male
4. RACE: White
5. ETHNICITY:
6. DATE OF BIRTH: April 9, 1941
7. AGE: 42 YEARS (IF UNDER 1 YEAR: MONTHS, DAYS; IF UNDER 24 HOURS: HOURS, MINUTES)
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY): Massachusetts
9. NAME AND BIRTHPLACE OF FATHER: Daniel J. Geary, Massachusetts
10. BIRTH NAME AND BIRTHPLACE OF MOTHER: Kathryn Bitler, Pennsylvania
11. CITIZEN OF WHAT COUNTRY: USA
12. SOCIAL SECURITY NUMBER: 561-52-7934
13. MARITAL STATUS: Married
14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME): Carolyn Long
15. PRIMARY OCCUPATION: Optician
16. NUMBER OF YEARS THIS OCCUPATION: 20
17. EMPLOYER (IF SELF-EMPLOYED, SO STATE): Self-Employed
18. KIND OF INDUSTRY OR BUSINESS: Optical supplies

USUAL RESIDENCE

19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION): 10042 Lynrose
19B.
19C. CITY OR TOWN: Temple City
19D. COUNTY: Los Angeles
19E. STATE: California

PLACE OF DEATH

21A. PLACE OF DEATH: Methodist Hospital of So. Calif.
21B. COUNTY: Los Angeles
21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION): 300 W. Huntington Dr.
21D. CITY OR TOWN: Arcadia
20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP: Carolyn L. Geary - wife, 10042 Lynrose, Temple City, Calif.

CAUSE OF DEATH

22. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)
CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST
(A) MASSIVE SPONTANEOUS SUBARACHNOID HEMORRHAGE — 30 HRS
DUE TO, OR AS A CONSEQUENCE OF
(B) INTRACRANIAL VASCULAR MALFORMATION — UNKNOWN
DUE TO, OR AS A CONSEQUENCE OF
(C)
APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
23. OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH: HYPERTENSION
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? NO — TYPE OF OPERATION — DATE

PHYSICIAN'S CERTIFICATION

28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.
I ATTENDED DECEDENT SINCE (ENTER MO. DA. YR.): 8-17-83
I LAST SAW DECEDENT ALIVE (ENTER MO. DA. YR.): 8-18-83
28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE: Gregory Withers MD
28C. DATE SIGNED: 8-19-83
28D. PHYSICIAN'S LICENSE NUMBER: G27800
28E. TYPE PHYSICIAN'S NAME AND ADDRESS: GREGORY WITHERS, M.D. 624 W. Duarte Rd. Arcadia, CA.

INJURY INFORMATION

29. SPECIFY 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: Cremation
37. DATE—MONTH, DAY, YEAR: 8/22/83
38. NAME AND ADDRESS OF CEMETERY OR CREMATORY: Chapel of the Pines Los Angeles, CA.
39. EMBALMER'S LICENSE NUMBER AND SIGNATURE: Not Embalmed
40. NAME OF FUNERAL DIRECTOR OR PERSON ACTING AS SUCH: 15 Lee R. Gill Mortuary 456 Temple City, Calif.
41. LOCAL REGISTRAR
42. DATE ACCEPTED BY LOCAL REGISTRAR: AUG 19 1983

STATE | A. | 1. | B. | C. | D. | E. | F.

RETURN TO: ARCADIA OPTICAL, 1021 S Baldwin Avenue, Arcadia, CA 91006, Attn: Carolyn

STATE OF OREGON: COUNTY OF KLAMATH: ss
I hereby certify that the within instrument was received and filed for record on the 31st day of October A.D., 1983 at 10:44 o'clock A M, and duly recorded in Vol M83, of Deeds on page 18721.

EVELYN BIEHN, COUNTY CLERK

Fee $4.00

by Lou Smith deputy