38855 '84 JUL 13 PM 4

CERTIFICATE OF DEATH
STATE OF CALIFORNIA

Vol. M84 Page 11968

3801

STATE FILE NUMBER

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

DECEDENT PERSONAL DATA

1A. NAME OF DECEDENT—FIRST	1B. MIDDLE	1C. LAST
FLORENCE	SHIPSEY	MAHONEY

3. SEX	4. RACE	5. ETHNICITY	6. DATE OF BIRTH	2A. DATE OF DEATH (MONTH, DAY, YEAR)	2B. HOUR
Female	White	Irish	Feb 3, 1921.	APRIL 7, 1984.	0625H

8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)	9. NAME AND BIRTHPLACE OF FATHER	7. AGE (YEARS / IF UNDER 1 YEAR MONTHS / DAYS / IF UNDER 24 HOURS HOURS / MINUTES)
California	Thomas F. Shipsey/Ireland	63

11. CITIZEN OF WHAT COUNTRY	12. SOCIAL SECURITY NUMBER	13. MARITAL STATUS	10. BIRTH NAME AND BIRTHPLACE OF MOTHER
U.S.A.	559-24-4111	Married	Florence Thomas/Calif.

15. PRIMARY OCCUPATION	16. NUMBER OF YEARS THIS OCCUPATION	17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)	14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)
Housewife	40	AT HOME	Frank Mahoney

USUAL RESIDENCE

19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)	19B.	18. KIND OF INDUSTRY OR BUSINESS
96 Sotelo		DOMESTIC

19D. COUNTY	19E. STATE	19C. CITY OR TOWN
SAN FRANCISCO	CA	San Francisco

PLACE OF DEATH

21A. PLACE OF DEATH	21B. COUNTY	20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP
	San Francisco	Frank Mahoney-Husband 96 Sotelo San Francisco, Calif

21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)	21D. CITY OR TOWN
96 Sotelo	San Francisco

CAUSE OF DEATH

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

IMMEDIATE CAUSE — (A) Metastatic Breast Cancer — APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH: 2½ years

CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST — DUE TO, OR AS A CONSEQUENCE OF — (B)

DUE TO, OR AS A CONSEQUENCE OF — (C)

23. OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH: None

24. WAS DEATH REPORTED TO CORONER? Yes

25. WAS BIOPSY PERFORMED? Yes

26. WAS AUTOPSY PERFORMED? No

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.): January '82
I LAST SAW DECEDENT ALIVE (ENTER MO. DA. YR.): April 84

28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE: Richard H Cohen MD

27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION: Mastectomy January 1982

28C. DATE SIGNED: 4/3/84

28D. PHYSICIAN'S LICENSE NUMBER: G 9303

28E. TYPE PHYSICIAN'S NAME AND ADDRESS: 3838 CALIFORNIA ST S.F. 94118

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	37. DATE—MONTH, DAY, YEAR	38. NAME AND ADDRESS OF CEMETERY OR CREMATORY
Entombment	April 9, 1984.	Holy Cross Cemetery, Colma

40. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)	39. EMBALMER'S LICENSE NUMBER AND SIGNATURE	41. LOCAL REGISTRAR—SIGNATURE	42. DATE RECEIVED BY LOCAL REGISTRAR
Driscoll's Mortuary Chapel	#4884 Robert Smith	213 Mervyn F. Silverman MD	4/8/84

STATE REGISTRAR

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

VS-11 (10-78)

THIS IS TO CERTIFY THAT, IF BEARING THE SEAL OF THE SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH, THIS IS A TRUE COPY OF THE DOCUMENT FILED IN THIS OFFICE.

NO. 84 [illegible]

DATED: Apr. 9, 1984

Mervyn F. Silverman

MERVYN F. SILVERMAN, M.D.
DIRECTOR OF PUBLIC HEALTH
AND LOCAL REGISTRAR

SAN FRANCISCO CALIFORNIA

STATE OF OREGON: COUNTY OF KLAMATH:ss

I hereby certify that the within instrument was received and filed for record on the 16th day of July A.D., 1984 at 4:10 o'clock P M, and duly recorded in Vol M84 of Deeds on page 11968.

Fee: $4.00

EVELYN BIEHN, COUNTY CLERK

by: Pam Smith, Deputy

Return: Frank Mahoney 96 Sotelo San Francisco, Ca. 94116