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STATE OF OREGON
OREGON STATE HEALTH DIVISION Vol. 184 Page 20827
DEPARTMENT OF HUMAN RESOURCES
Vital Records Unit

CERTIFICATE OF DEATH

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Local File Number 455 State File Number

DECEASED - NAME VERLE MATHEW HESELTINE		DATE OF DEATH (month, day, year) December 7, 1984	
RACE (White, Black, American Indian, etc.) White	SEX Male	AGE - LAST BIRTHDAY (years) 74	DATE OF BIRTH (month, day, year) April 23, 1910
CITY, TOWN OR LOCATION OF DEATH Klamath Falls	HOSPITAL OR OTHER INSTITUTION - NAME Merle West Medical Center	STATUS Inpatient	COUNTY OF DEATH Klamath
STATE OF BIRTH Wisconsin	CITIZEN OF WHAT COUNTRY U.S.A.	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED Married	WAS DECEDENT EVER IN U.S. ARMED FORCES? No
SOCIAL SECURITY NUMBER 541-16-4938	USUAL OCCUPATION Farmer	SPOUSE Lottie L. Heseltine	KIND OF BUSINESS OR INDUSTRY Farming
RESIDENCE - STATE Oregon	COUNTY Klamath	CITY, TOWN OR LOCATION Klamath Falls	STREET AND NUMBER OR R.F.D. ZIP 1505 Madison Ave., 460 97603
FATHER Ernest - Heseltine	MOTHER Isabelle - Calkins	INFORMANT NAME AND RELATIONSHIP TO DECEASED Lottie L. Heseltine, Wife	
BURIAL, CREMATION, REMOVAL MAUS Burial	CEMETERY OR CREMATORY NAME Klamath Memorial Park	LOCATION Klamath Falls, Oregon	
FUNERAL SERVICE LICENSEE OR PREPARATOR AS SUPPLIANT McHair's Funeral Chapel, Inc., 515 Pine St., Klamath Falls, Ore			
NAME AND ADDRESS OF CERTIFYING PHYSICIAN F. Geoffrey Marx, M.D., 2614 Clover St., Klamath Falls, Oregon 97601		DATE SIGNED 12/10/84	TIME OF DEATH 9:55 A.
DATE RECEIVED BY REGISTRAR DEC 10 1984			
IMMEDIATE CAUSE PART I DUE TO OR AS A CONSEQUENCE OF Myocardial Rupture Myocardial Infarct ASHD			
PART II OTHER SIGNIFICANT CONDITIONS ACCIDENT DATE OF INJURY PLACE OF INJURY LOCATION			

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.

MARION A. HENSON, Registrar Vital Statistics

Date DEC 11 1984 Deputy Registrar

VOID IF ALTERED

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

STATE OF OREGON: COUNTY OF KLAMATH: ss
I hereby certify that the within instrument was received and filed for record on the 11th day of December, A.D., 1984 at 10 o'clock M., and duly recorded in Vol. 184 of 20827 on page 20827.

Fee: \$ 1.00

EVELYN BISHN, COUNTY CLERK

by: Lottie Heseltine, Deputy

Lottie Heseltine, 1505 Madison Ave., Klamath Falls, Oregon 97603