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MTC-14536

STATE OF OREGON
OREGON STATE HEALTH DIVISION
DEPARTMENT OF HUMAN RESOURCES
Vital Records Unit

CERTIFICATE OF DEATH

ORS - 146

Local File Number: 255

State File Number: 81-009865

DECEASED — NAME: Barbara Ann Buchanan
DATE OF DEATH: May 1, 1981
SEX: Female
AGE: 47
DATE OF BIRTH: September 18, 1933
RACE: White
CITY, TOWN, OR LOCATION OF DEATH: Klamath Falls
HOSPITAL OR OTHER INSTITUTION NAME: 2455 Reclamation Ave
COUNTY OF DEATH: Klamath
STATE OF BIRTH: California
CITIZEN OF WHAT COUNTRY: U.S.A.
MARRIED, NEVER MARRIED, WIDOWED, DIVORCED: Married
SPOUSE: Kenneth L. Buchanan
SOCIAL SECURITY NUMBER: 547-42-8945
USUAL OCCUPATION: Grocery Store Owner
KIND OF BUSINESS OR INDUSTRY: Retail Grocery
RESIDENCE STATE: Oregon
COUNTY: Klamath
CITY, TOWN, OR LOCATION: Klamath Falls
STREET AND NUMBER OR R.F.D.: 2455 Reclamation Ave.
INFORMANT: Yes
FATHER: —
MOTHER: Burmiester
INFORMANT: Kenneth L. Buchanan, Husb.

DISPOSITION
BURIAL, CREMATION, REMOVAL: Cremation
CEMETERY OR CREMATORY: Eternal Hills Crematory
LOCATION: Klamath Falls, Oregon 97601
FUNERAL SERVICE LICENSEE: O'Hair's Funeral Chapel, 515 Pine, Klamath Falls, Or

CERTIFIER — MEDICAL EXAMINER
CERTIFICATION
DEATH OCCURRED: 8:00 A.M. May 1, 1981
THE DECEDENT WAS PRONOUNCED DEAD: 10:07 A.M. May 1, 1981
CERTIFIER: George R. Nicholson M.D.
DATE SIGNED: JUN 25 1981
MEDICAL EXAMINER FOR: Klamath
DATE RECEIVED BY REGISTRAR: JUN 25 1981
REGISTRAR (SIGNATURE): Glenda Francis

CAUSE OF DEATH
PART I
(a) Arteriosclerotic Heart Disease
(b)
(c)
PART II: Yes
DATE OF INJURY:
HOW INJURY OCCURRED:
INJ. AT WORK:
PLACE OF INJURY:
LOCATION:
RESERVED FOR REGISTRAR'S USE

ORIGINAL VITAL STATISTICS RECORD

STATE OF OREGON, COUNTY OF MULTNOMAH

DATE ISSUED JUN 25 1985

I HEREBY CERTIFY THAT THE FOREGOING COPY HAS BEEN COMPARED BY ME WITH THE ORIGINAL DOCUMENT AND IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL CERTIFICATE AS THE SAME APPEARS ON FILE IN THE VITAL RECORDS UNIT OF THE OREGON STATE HEALTH DIVISION AND IN MY OFFICIAL CARE AND CUSTODY.

RETURN: VETERENS' AFFAIRS
700 SUMMER STREET NE
SALEM, OR 97310-1201

Joseph D. Carney, State Registrar

NOT VALID WITHOUT SEAL OF OREGON STATE HEALTH DIVISION

JUN 29 1985 JUN 6 1985

STATE OF OREGON: COUNTY OF KLAMATH:ss
I hereby certify that the within instrument was received and filed for record on the 28th day of June A.D., 19 85 at 10:03 o'clock A M, and duly recorded in Vol M85, of Deeds on page 9928.

EVELYN BIEHN, COUNTY CLERK

Fee: $ 5.00

by: Pam Smith, Deputy