[redacted] '85 NOV 19 AM 8 24

CERTIFICATE OF DEATH

STATE OF CALIFORNIA

8000 — 00[illegible]

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

STATE FILE NUMBER

- 1A. NAME OF DECEDENT—FIRST: Lloyd
- 1B. MIDDLE: Wallace
- 1C. LAST: Casselman
- 2A. DATE OF DEATH (MONTH, DAY, YEAR): January 12, 1985
- 2B. HOUR: 0813
- 3. SEX: Male
- 4. RACE/ETHNICITY: White/American
- 5. SPANISH/HISPANIC: NO X
- 6. DATE OF BIRTH: April 24, 1922
- 7. AGE: 62 YEARS
- IF UNDER 1 YEAR: MONTHS / DAYS
- IF UNDER 24 HOURS: HOURS / MINUTES
- 8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY): MN
- 9. NAME AND BIRTHPLACE OF FATHER: Harold W. Casselman - MN
- 10. BIRTH NAME AND BIRTHPLACE OF MOTHER: Regina Hanson - MN
- 11. CITIZEN OF WHAT COUNTRY: U.S.A.
- 12. SOCIAL SECURITY NUMBER: 473-44-7193
- 13. MARITAL STATUS: Married
- 14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME): Evelyn Berge
- 15. PRIMARY OCCUPATION: Pilot
- 16. NUMBER OF YEARS THIS OCCUPATION: 23
- 17. EMPLOYER (IF SELF-EMPLOYED, SO STATE): U.S. Air Force
- 18. KIND OF INDUSTRY OR BUSINESS: Military
- 19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION): 5711 Arden Avenue
- 19B.
- 19C. CITY OR TOWN: Highland
- 19D. COUNTY: San Bernardino
- 19E. STATE: CA
- 20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP: Evelyn Casselman - Wife, 5711 Arden Avenue, Highland, CA 92346
- 21A. PLACE OF DEATH: Bay Community Hospital
- 21B. COUNTY: San Diego
- 21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION): 435 "H" Street
- 21D. CITY OR TOWN: Chula Vista

22. DEATH WAS CAUSED BY: (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.

Cause	Approximate interval between onset and death
IMMEDIATE CAUSE (A) CARDIO-RESPIRATORY ARREST	immediate
DUE TO, OR AS A CONSEQUENCE OF (B) PROBABLY MYOCARDIAL INFARCTION	Probably immediate
DUE TO, OR AS A CONSEQUENCE OF (C) CORONARY ARTERY DISEASE	unknown

- 24. WAS DEATH REPORTED TO CORONER? NO
- 25. WAS BIOPSY PERFORMED? NO
- 26. WAS AUTOPSY PERFORMED? Yes
- 23. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 22A: severe bleeding ulcer (Duodenal)
- 27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION: NO
- DATE:
- 28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.
- ATTENDED DECEDENT SINCE (ENTER MO. DA. YR.): 1-1-85
- LAST SAW DECEDENT ALIVE (ENTER MO. DA. YR.): 1-12-85
- 28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE: C. E. deCarvalho, M.D.
- 28C. DATE SIGNED: 1-14-85
- 28D. PHYSICIAN'S LICENSE NUMBER: A38504
- 28E. TYPE PHYSICIAN'S NAME AND ADDRESS: Carlos Decarvalho-1635 Third Ave., Chula Vista, CA
- 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):
- 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: Burial
- 37. DATE—MONTH, DAY, YEAR: Jan. 18, 1985
- 38. NAME AND ADDRESS OF CEMETERY OR CREMATORY: Montecito Memorial Park-San Bernardino, CA
- 39. EMBALMER'S LICENSE NUMBER AND SIGNATURE: 5400 [signature]
- 40A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH): Bobbitt Memorial Chapel, Inc.
- 40B. LICENSE NO.: 1133
- 41. LOCAL REGISTRAR—SIGNATURE: Donald G. Ramras, M.D.
- 42. DATE ACCEPTED BY LOCAL REGISTRAR: JAN 15 1985

STATE ONLY — A. B. C. D. E. F.

COUNTY OF SAN DIEGO - DEPT. OF HEALTH SERVICES 1700 PACIFIC HWY.
THIS IS TO CERTIFY THAT, IF BEARING THE OFFICIAL SEAL OF THE SAN DIEGO
DEPT. OF HEALTH SERVICES, THIS IS A TRUE COPY OF THE ORIGINAL DOCUMENT
FILED.
FEE PAID: $4.00
DATE ISSUED: Feb. 25, 1985

[signature]
REGISTRAR OF VITAL STATISTICS

9.00

18715

GRESHAM, VARNER, SAVAGE, NOLAN & TILDEN
LAW OFFICES
396 WEST FOURTH STREET
SAN BERNARDINO, CALIFORNIA 92401
(714) 884-2171 • (714) 884-0611

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JOHN B. McCAULEY
ROBIN BRAMLETT
ERNEST E. RUTTENBURG

DONALD W. JORDAN
JOHN B. LONERGAN
OF COUNSEL

TELECOPIER
(714) 888-2220

TRUST TITLING INSTRUCTION

TO WHOM IT MAY CONCERN

RE: EVELYN B. CASSELMAN and the
EVELYN CASSELMAN TRUST)

All assets to be held by the above referenced Trust are to be titled as follows:

EVELYN B. CASSELMAN, Trustee of the EVELYN CASSELMAN TRUST dated July 2, 1985

Philip M. Savage, III
of GRESHAM, VARNER, SAVAGE,
NOLAN & TILDEN

PMS:eb

[redacted]

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of _____ the 19th day of November A.D., 19 85 at 9:24 o'clock A M., and duly recorded in Vol. M85, of Deeds on Page 18714.

Evelyn Biehn County Clerk
By Pam Smith

FEE $9.00