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

CERTIFICATE OF DEATH
ORS – 146

8624 Local File Number

State File Number

DECEASED—NAME (1) First: Neil; Middle: Grady; Last: BRESHEARS

(2) DATE OF DEATH (MONTH, DAY, YEAR): January 23, 1986

(3) RACE WHITE, BLACK, AMERICAN INDIAN, ETC. (SPECIFY): White

(4) SEX: Male

(5A) AGE—LAST BIRTHDAY (YEARS): 43

(5B) UNDER 1 YEAR: MOS. / DAYS

(5C) UNDER 1 DAY: HOURS / MIN.

(6) DATE OF BIRTH (MONTH, DAY, YEAR): August 22, 1942

(7A) CITY, TOWN, OR LOCATION OF DEATH: Lakeview

(7B) HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET & NO.): N. Edge of Lakeview at Scales

(7C) IF HOSP. OR INST., INDICATE DOA, OPIEMER, INPATIENT (SPECIFY): —

(7D) COUNTY OF DEATH: Lake

(8) STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY): Oregon

(9) CITIZEN OF WHAT COUNTRY: USA

(10) MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): Married

(11) SPOUSE (IF MARRIED, WIDOWED): Judy

(12) WAS DECEDENT EVER IN U.S. ARMED FORCES? (SPECIFY YES OR NO): Yes

(13) SOCIAL SECURITY NUMBER: 543-46-6811

(14A) USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED): Truck Driver

(14B) KIND OF BUSINESS OR INDUSTRY: Trucking

(15A) RESIDENCE—STATE: Oregon

(15B) COUNTY: Lake

(15C) CITY, TOWN, OR LOCATION: Lakeview

(15D) STREET AND NUMBER OR R.F.D. ZIP: 1128 South H Street 97630

(15E) INSIDE CITY LIMITS (SPECIFY YES OR NO): No

(16) FATHER—NAME FIRST MIDDLE LAST: Clem Breshears

(17) MOTHER—FIRST MIDDLE LAST (MAIDEN NAME): Annie Duncan

(18) INFORMANT—NAME AND RELATIONSHIP TO DECEASED: Judy Breshears (wife)

(19A) BURIAL, CREMATION, REMOVAL, MAUS, (SPECIFY): Burial

(19B) CEMETERY OR CREMATORY—NAME: West Side Cemetery

(19C) LOCATION—CITY OR TOWN, STATE: Lakeview, Oregon

(20A) FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH—SIGNATURE: James Huffstutter

(20B) NAME AND ADDRESS OF FACILITY: Huffstutter's Funeral Chapel 410 Center Street Lakeview, OR 97630

CERTIFICATION — MEDICAL EXAMINER

I CERTIFY THAT I MADE INQUIRY INTO THE DEATH OF THE DECEASED PERSON DESCRIBED ABOVE, AND IN MY OPINION DEATH RESULTED ON OR ABOUT:

(21A) DEATH OCCURRED (HOUR): 10:45 PM

(21B) THE DECEDENT WAS PRONOUNCED DEAD — MONTH: Jan. DAY: 23, YEAR: 1986 HOUR: 11:30 PM

(21C) FROM: NATURAL CAUSES ☐ ACCIDENT ☐ SUICIDE ☐ HOMICIDE XXX UNDETERMINED ☐ PENDING ☐

(21D) CERTIFIER—SIGNATURE: Terence J Parr

(21E) NAME—(TYPE OR PRINT): Terence J. Parr MD. DEGREE OR TITLE

(21F) MEDICAL EXAMINER FOR: Cate COUNTY

(21G) DATE SIGNED (MONTH, DAY, YEAR): 1/27/86

(22A) DATE RECEIVED BY REGISTRAR (MO., DAY, YR.): January 28, 1986

(22B) REGISTRAR (SIGNATURE): Reg Robsm, deputy

(23) IMMEDIATE CAUSE — PART I — (ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), AND (C).)

(a) Multiple Gun shot Wounds to Head. — INTERVAL BETWEEN ONSET AND DEATH: Immed.

DUE TO, OR AS A CONSEQUENCE OF:

(b)

DUE TO, OR AS A CONSEQUENCE OF:

(c) — INTERVAL BETWEEN ONSET AND DEATH

PART II — OTHER SIGNIFICANT CONDITIONS — CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (A) — INTERVAL BETWEEN ONSET AND DEATH

(24) AUTOPSY (SPECIFY YES OR NO): Yes

(25A) DATE OF INJURY (MONTH, DAY, YEAR): January 23, 1986

(25B) HOUR: 10:45PM

(25C) HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 23): Homicide

(25D) INJ. AT WORK (SPECIFY YES OR NO): No

(25E) PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY): Highway

(25F) LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, COUNTY, STATE): N. Edge of Lakeview at Scales

RESERVED FOR REGISTRAR'S USE

ORIGINAL - VITAL STATISTICS COPY

45-107 REV 12-83

STATE OF OREGON

COUNTY OF LAKE

THIS CERTIFIES THAT THE FOREGOING IS A CORRECT AND COMPLETE TRANSCRIPT OF A RECORD OF DEATH ON FILE WITH THE LAKE COUNTY HEALTH DEPARTMENT

(SEAL) OREGON LAKE COUNTY

BY: Reg Robsm
DEPUTY REGISTRAR

DATE January 30 19 86

NOT VALID WITHOUT RAISED SEAL OF LAKE COUNTY HEALTH DEPARTMENT

VOID IF ALTERED

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of _____
of February A.D., 19 86 at 2:02 o'clock P M., and duly recorded in Vol. M86 the 5th day
of Deeds on Page 2239.

FEE $5.00

Evelyn Biehn County Clerk
By Bernetta A Kolock

Return: Judy Breshears-1128 South H. St., Lakeview, OR 97630