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18904

ID TAG NO

137

(Local File Number)

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

Vol. 1880 Page 7346

CERTIFICATE OF DEATH

State File Number

TYPE
OR PRINT
IN INK
PERMANENT
BLACK
INK
FOR
INSTRUCTIONS
SEE
HANDBOOK

DECEASED - NAME		First	Middle	Last	DATE OF DEATH (month, day, year)
RODERICK		McCLOUD	SMITH		2 April 10, 1986
RACE White; Black; American Indian; etc. (Specify)		SEX Male	AGE 88	Under 1 year	DATE OF BIRTH (month, day, year)
3 White		5a	5b	5c	6 September 10, 1897
CITY, TOWN OR LOCATION OF DEATH		HOSPITAL OR OTHER INSTITUTION - NAME (If not in either, give street and number)		IF HOSP. OR INST. Indicate DOA (OP, Emer, Rm., Inpatient (specify))	
7a Klamath Falls		7b Merle West Medical Center		7c Inpatient	
STATE OF BIRTH (If not in U.S.A., name country)		CITIZEN OF WHAT COUNTRY		MARRIED; NEVER MARRIED; WIDOWED; DIVORCED (specify)	
8 Kansas		9 U.S.A.		10 Married	
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (Give kind of work done during most of working life, even if retired)		KIND OF BUSINESS OR INDUSTRY	
13 543-10-0064		14a Shop Foreman - Retired		14b Automobile Repair	
RESIDENCE - STATE		COUNTY	CITY, TOWN OR LOCATION	STREET AND NUMBER OR R.F.D.	
15a Oregon		15b Klamath	15c Klamath Falls	15d 2176 Wiard	
FATHER - NAME		MOTHER - NAME	INFORMANT - NAME and relationship to deceased		
16 Samuel J. Smith		17 Irene Smith	18 Wife		
BURIAL, CREMATION, REMOVAL MAUS (specify)		CEMETERY OR CREMATORY - NAME		LOCATION - City or town - State	
19a Burial		19b Klamath Hills Memorial Gardens		19c Klamath Falls, Ore	
FUNERAL SERVICE LICENSEE or person acting as such (Signature)		NAME AND ADDRESS OF FACILITY			
20a Jim Lancaster		20b WARD S / 1945 Main St. / Klamath Falls, Ore. 97601			
To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated:		DATE SIGNED (Mo., Day, Year)		HOUR OF DEATH	
21a (Signature) <i>Everett E. Howard</i>		21b April 11, 1986		21c 2:20 P.M.	
NAME, TITLE AND ADDRESS OF CERTIFIER (Type or Print)					
21d Everett E. Howard, MD - 2622 Campus Dr. - Klamath Falls, Ore. 97601					
NAME OF ATTENDING PHYSICIAN (If other than certifier (Type or Print))					
21e					
DATE RECEIVED BY REGISTRAR (Mo., Day, Year)		REGISTRAR			
22a April 16, 1986		22b (Signature) <i>Richard E. Craun</i>			
PART I IMMEDIATE CAUSE		ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c)		Interval between onset and death	
(a) ACUTE PANCREATITIS				INTER	
DUE TO OR AS A CONSEQUENCE OF				Interval between onset and death	
(b) ATROPHIC PANCREATITIS				YEARS	
DUE TO OR AS A CONSEQUENCE OF				Interval between onset and death	
(c)					
PART II OTHER SIGNIFICANT CONDITIONS		Conditions contributing to death but not related to cause given in PART I (a), (b), or (c)		AUTOPSY (Specify Yes or No)	
23a PRISON MOUTH / BILVER OBSTRUCTION (7 years)				24 No	
ACCIDENT (Specify Yes or No)		DATE OF INJURY (Mo., Day, Year)	HOUR OF INJURY	DESCRIBE HOW INJURY OCCURRED	
26a No		26b	26c	26d	
INJURY AT WORK (Specify Yes or No)		PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify)	LOCATION	STREET OR R.F.D. NO. - CITY OR TOWN - STATE	
26e		26f	26g	26h	
DID HOSPITAL REPRESENTATIVE MAKE REQUEST FOR ANATOMICAL GIFT CONSENT?		WAS GIFT MADE?			
YES ☐ NO ☐ N/A ☐		YES ☐ NO ☐ N/A ☐			
RESERVED FOR REGISTRAR'S USE					

ORIGINAL-VITAL STATISTICS COPY

45-2 Rev

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.

MARIAN ACKERMAN, Registrar Vital Statistics

By *Richard E. Craun* Deputy Registrar

Date *April 16, 1986*

VOID IF ALTERED

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

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of _____ the 29th day of April A.D., 19 86 at 12:49 o'clock P. M., and duly recorded in Vol. M86 of _____ Deeds on Page 7346

FEE \$5.00

Ret: Irene Smith 2176 Wiard St.

Evelyn Biehn, County Clerk

By *Richard E. Craun* Klamath Falls, Oregon 97603