

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

INSTRUCTIONS
SEE
HANDBOOK

PRECEDENT

IF DEATH
COURSED IN
INSTITUTION
SEE
HANDBOOK
REGARDING
COMPLETION OF
CERTIFICATE ITEMS

DISPOSITION

CERTIFIER

CONDITIONS
IF ANY
WHICH GAVE
RISE TO
IMMEDIATE
CAUSE
STATING THE
UNDERLYING
CAUSE LAST

CAUSE OF
DEATH

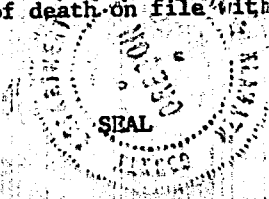
DECEASED - NAME George Marie BAGGETT		DATE OF DEATH (month, day, year) August 19, 1986	
RACE (specify) White		DATE OF BIRTH (month, day, year) March 6, 1902	
SEX Female		IF HOSP. OR INST. Indicate DOA, OP/Emg. Rm., Inpatient (specify) Inpatient	
CITY, TOWN OR LOCATION OF DEATH Klamath Falls		COUNTY OF DEATH Klamath	
STATE OF BIRTH (if not in U.S.A., name country) Colorado		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (specify) Married	
CITIZEN OF THAT COUNTRY U.S.A.		SPOUSE (IF MARRIED, WIDOWED) Henry Baggett	
SOCIAL SECURITY NUMBER 541-64-1027		WAS DECEDENT EVER IN U.S. ARMED FORCES? (specify yes or no) No	
USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Housewife		KIND OF BUSINESS OR INDUSTRY Homemaking	
RESIDENCE - STATE Oregon		STREET AND NUMBER OR R.F.D. 4202 Gary Street	
COUNTY Klamath		ZIP 97603	
CITY, TOWN OR LOCATION Klamath Falls		Inside City Limits (specify yes or no) No	
FATHER - NAME first middle last Dana Stanley Root		MOTHER - first middle last (Maiden Name) Mary Josephine McCarthy	
BUTLER - NAME first middle last Henry Baggett, husband		INFORMANT - NAME and relationship to deceased Henry Baggett, husband	
BURIAL, CREMATION, REMOVAL, MAUS. (specify) Burial		CITY OR TOWN Klamath Falls, Oregon	
CEMETERY OR CREMATORY - NAME Eternal Hills Memorial Gardens		STATE Oregon	
FUNERAL SERVICE LICENSEE or person acting as such (Specify type) William J. Davenport		NAME AND ADDRESS OF FACILITY Davenport's Chapel of the Good Shepherd, 6420 South Sixth Street, Klamath Falls, Oregon 97603-7194	
To the best of my knowledge, date and place and due to the cause(s) stated Everett E. Howard		DATE SIGNED (Mo., Day, Year) August 19, 1986	
21a (Signature) Everett E. Howard		HOUR OF DEATH 1:12 A.M.	
NAME, TITLE AND ADDRESS OF CERTIFIER (Type or Print) Everett E. Howard, MD, 2622 Campus Drive, Klamath Falls, Oregon 97601		21c	
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)			
DATE RECEIVED BY REGISTRAR (Mo., Day, Year) AUG 19 1986		REGISTRAR William E. Cravens	
22a IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b) AND (c).) Cardiac vascular - Accident		Interval between onset and death Hours	
PART I (a) DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death	
(b) DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death	
(c) OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not related to cause given in PART I (a)		AUTOPSY (Specify Yes or No) No	
PART II		WAS MEDICAL EXAMINER NOTIFIED (Specify Yes or No) No	
ACCIDENT (Specify Yes or No) No		DATE OF INJURY (Mo., Day, Year) August 19, 1986	
HOUR OF INJURY 1:12		DESCRIBE HOW INJURY OCCURRED	
INJURY AT WORK (Specify Yes or No) No		LOCATION Home	
PLACE (If injury - At home, farm, street, factory, office building, etc. (Specify))		STREET OR R.F.D. NO. 4202 Gary Street	
CITY OR TOWN Klamath Falls		STATE Oregon	
DID HOSPITAL REPRESENTATIVE MAKE REQUEST FOR ANATOMICAL GIFT CONSENT? NO		WAS GIFT MADE? NO	
RESERVED FOR REGISTRAR'S USE			

ORIGINAL-VITAL STATISTICS COPY

45-2 Rev. 1-68

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 William E. Cravens, Deputy Registrar
Date August 19, 1986
VOID IF ALTERED

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

STATE OF OREGON: COUNTY OF KLAMATH: ss.
Filed for record at request of _____ the _____ 21st day
of August A.D. 19 86 at 11:16 o'clock A.M., and duly recorded in Vol. M36,
of _____ Deeds on Page 15041
Evelyn Biehn, County Clerk
By [Signature]
FEE \$5.00
Return: Henry Baggett 4202 Gary St., Klamath Falls, Ore. 97603