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CERTIFICATE OF DEATH

STATE OF CALIFORNIA

 Vol. M86 Page 20291
 3-86-30-003693

 Date:
 Fee: \$5.00

THIS IS TO CERTIFY, IF IMPRESSED WITH THE SEAL OF THE ORANGE COUNTY HEALTH OFFICER, THAT THIS IS A TRUE COPY OF THE PERMANENT RECORD FILED IN THIS OFFICE.

No Fee Veterans Purposes

L. B. Burt, M.D.

VS-111 (1-85)

STATE FILE NUMBER		1A. NAME OF DECEDENT—FIRST		1B. MIDDLE		1C. LAST		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
		Roger		Keith		Meredith		2A. DATE OF DEATH (MONTH, DAY, YEAR)	
3. SEX		4. RACE/ETHNICITY		5. SPANISH/HISPANIC		6. DATE OF BIRTH		7. AGE	
Male		White		NO		Nov. 30, 1927		52 YEARS	
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)		9. NAME AND BIRTHPLACE OF FATHER		10. BIRTH NAME AND BIRTHPLACE OF MOTHER		11. CITIZEN OF WHAT COUNTRY		12. SOCIAL SECURITY NUMBER	
Wisconsin		Milton Meredith Wisconsin		Marguerite Knoll Wisconsin		USA		473-24-8695	
11A. CITIZEN OF WHAT COUNTRY		11B. IF DECEASED WAS EVER IN MILITARY GIVE DATES OF SERVICE		13. MARITAL STATUS		14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)		15. KIND OF INDUSTRY OR BUSINESS	
USA		19 45 TO 1947		Married		Carolyn Simpson		Construction	
16. NUMBER OF YEARS THIS OCCUPATION		17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)		18. COUNTY		19. CITY OR TOWN		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP	
47		C.K. Varner Co., Inc.		Orange		Westminster		Carolyn Meredith Wife	
19.82 Dalton Circle		19. STATE		21A. PLACE OF DEATH		21B. COUNTY		21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)	
Orange		Calif.		Anaheim Memorial Hospital		Orange		1111 W. LaPalma	
22. DEATH WAS CAUSED BY: IMMEDIATE CAUSE		(ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)		23. DATE AND PLACE DEATH OCCURRED AT THE TIME STATED		24. WAS DEATH REPORTED TO CORONER?		25. WAS BIOPSY PERFORMED?	
A. <u>Bronchogenic Carcinoma of Lung</u>		B. <u>Card Compression</u>		C. <u>Tr. due to Bronchitis</u>		No		Yes	
26. SPECIFY ACCIDENT, SUICIDE, ETC.		27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23?		28. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE		29. DATE SIGNED		30. PHYSICIAN'S LICENSE NUMBER	
		No		R. B. Burt, M.D.		4-12-86		628337	
31. PLACE OF INJURY		32. INJURY AT WORK		33. DATE OF INJURY—MONTH, DAY, YEAR		34. HOUR		35. CORONER—SIGNATURE AND DEGREE OR TITLE	
1211 LaPalma, Anaheim, Calif.		No		4-7-86				Dr. Lawrence Madsen, MD	
36. DISPOSITION		37. DATE—MONTH, DAY, YEAR		38. NAME AND ADDRESS OF CEMETERY OR CREMATORY		39. EMBALMER'S LICENSE NUMBER AND SIGNATURE		40. DATE ACCEPTED BY LOCAL REGISTRAR	
Cremation		Apr 11 7 1986		Westminster Memorial Park		Not Embalmed		APR 7 1986	
40A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH) AND ADDRESS		41. LOCAL REGISTRAR'S SIGNATURE		42. DATE		43. SIGNATURE		44. SIGNATURE	
Westminster Mem. Pk. Mortuary		L. B. Burt, M.D.		APR 7 1986		L. B. Burt, M.D.		L. B. Burt, M.D.	

STATE OF OREGON: COUNTY OF KLAMATH:

SS.

Filed for record at request of

of November A.D., 19 86 at 11:24 o'clock A.M., and duly recorded in Vol. M86 the 14th day of Deeds.

FEE \$5.00

Ret: Carolyn Meredith 9182 Dalton Circle, Westminster, Calif. 92683

Evelyn Biehn, County Clerk

By