

72843

A 6792
ID TAG NO.

Local File Number

STATE OF OREGON
OREGON STATE HEALTH DIVISION
DEPARTMENT OF HUMAN SERVICES
Vital Records UnitCERTIFICATE OF DEATH
ORS - 148

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TYPE
OR PRINT
IN
PERMANENT
BLACK
INK
FOR
INSTRUCTIONS
SEE
HANDBOOK

DECEDENT

IF DEATH
OCCURRED IN
INSTITUTION,
SEE HANDBOOK
REGARDING
COMPLETION OF
RESIDENCE ITEMS

DISPOSITION

CERTIFIER

MEDICAL
EXAMINERCONDITIONS
IF ANY
WHICH GAVE
RISE TO
IMMEDIATE
CAUSE
STATING THE
UNDERLYING
CAUSE LASTCAUSE OF
DEATH

DECEASED - NAME		First		Middle		Last		State File Number	
Effie Etta		Mae		THOMAS				DATE OF DEATH (month, day, year)	
1 White		4 Female		5a 63		Under 1 year		2 March 24, 1987	
3 Klamath Falls		7a Klamath Falls		7b West Medical Center		Under 1 day		6 August 21, 1923	
7a Klamath Falls		HOSPITAL OR OTHER INSTITUTION - NAME		(If not in either, give street and number)		IF HOSP. OR INST. Indicate DOA, OP/Emr. Rm., Inpatient (specify)		COUNTY OF DEATH	
8 Pennsylvania		CITIZEN OF WHAT COUNTRY		9 U.S.A.		10 Married		7d Klamath	
13 194-14-3354		USUAL OCCUPATION (Give kind of work done during most of working life, even if retired)		14a Housewife		11 Wm K. Thomas		12 NO	
15a Oregon		COUNTY		15b Klamath		CITY, TOWN OR LOCATION		15c Klamath Falls	
16 Issac David Parker		MOTHER - first middle last		17 Violet - Bell		15d 3021 Broadman		ZIP 97603	
18 William K. Thomas, husband		INFORMANT - NAME and relationship to deceased						15e NO	
19a Cremation		CEMETERY OR CREMATORY - NAME		19b Eternal Hills Crematory		LOCATION		19c Klamath Falls, Oregon	
20a William F. Davenport		NAME AND ADDRESS OF FACILITY		20b 6420 South Sixth Street, Klamath Falls, Oregon 97603-7194					
21a 11:08 P		THE DECEASED WAS PRONOUNCED DEAD		21b March 24, 1987 11:08 P.		FROM:		NATURAL CAUSES <input checked="" type="checkbox"/>	
21c		CERTIFIER (Signature)		21d		NAME AND TITLE - (Type or Print)		HOMICIDE <input type="checkbox"/>	
21e		MEDICAL EXAMINER		21f		DATE SIGNED (Month, Day, Year)		ACCIDENT <input type="checkbox"/>	
21g		Klamath		21h		March 25, 1987		SUICIDE <input type="checkbox"/>	
21i		DATE RECEIVED BY REGISTRAR (Mo., Day, Year)		21j		REGISTRAR		UNDETERMINED <input type="checkbox"/>	
21k		March 26, 1987		21l		March 25, 1987		PENDING <input type="checkbox"/>	
21m		IMMEDIATE CAUSE		21n		ENTER ONLY ONE CAUSE PER LINE FOR (a), (b) AND (c).			
21o		(a) Cardiogenic Shock		21p		Interval between onset and death		hours	
21q		(b) Acute Myocardial Infarction		21r		Interval between onset and death		hours	
21s		(c) Atherosclerotic Vascular Disease		21t		Interval between onset and death		years	
21u		OTHER SIGNIFICANT CONDITIONS		21v		Conditions contributing to death but not related to cause given in PART I (a)			
21w		DATE OF INJURY (Month, Day, Year)		21x		HOUR		21y 9:00AM	
21z		March 24, 1987		21aa		HOW INJURY OCCURRED (Enter nature of injury in Part I or Part II, Item 23)		21ab Fell on kitchen floor	
21ac		INJ. AT WORK (Specify Yes or No)		21ad		PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify)		21ae Home	
21af		NO		21ag		LOCATION		21ah 3021 Broadman, Klamath Falls, Kl, Oregon 97603	
21ai		DID HOSPITAL REPRESENTATIVE MAKE REQUEST FOR ANATOMICAL GIFT CONSENT?		21aj		YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>		21ak WAS GIFT MADE?	
21al		RESERVED FOR REGISTRAR'S USE		21am		YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>			

ORIGINAL-VITAL STATISTICS COPY

45-107 Rev. 1-86

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 F. Davenport, Deputy RegistrarDate March 26, 1987

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 William K. Thomas
of March A.D., 19 87 at 11:56 o'clock A M., and duly recorded in Vol. 137
of Deeds on Page 5148

FEE \$5.00

Return: William K. Thomas

3021 Broadman, Klamath Falls, Oregon 97603

Evelyn Biehn, County Clerk

By William F. Davenport