

I CERTIFY THAT, IF THIS SEAL IS AFFIXED
IN PURPLE INK, THIS IS A TRUE AND
CORRECT COPY OF THE PERMANENT RECORD
FILED OR RECORDED IN THIS OFFICE.



COUNTY RECORDER

Lee A. Branch
ORANGE COUNTY, STATE OF CALIFORNIA

DATE 01-29-87 FEE 57.00

CERTIFICATE OF DEATH										3-86-30-009052	
STATE OF CALIFORNIA										LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
STATE FILE NUMBER											
1A. NAME OF DECEDENT—FIRST				1B. MIDDLE		1C. LAST		2A. DATE OF DEATH (MONTH, DAY, YEAR)			2B. HOUR
Raymond				Eugene		Colfax		September 9, 1986			1126
3. SEX		4. RACE/ETHNICITY		5. SPANISH/HISPANIC		6. DATE OF BIRTH			7. AGE		IF UNDER 1 YEAR
Male		White		NO		April 23, 1924			62 YEARS		MONTHS
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)		9. NAME AND BIRTHPLACE OF FATHER									
California		Ray C. Colfax-Missouri									
11A. CITIZEN OF WHAT COUNTRY		11B. IF DECEDENT WAS EVER IN MILITARY GIVE DATES OF SERVICE		12. SOCIAL SECURITY NUMBER		13. MARITAL STATUS		14. NAME OF SURVIVING SPOUSE OF WIFE, ENTER BIRTH NAME			
U.S.A.		19 41 TO 19 47		556-24-2610		Married		Mary Jane Holcomb			
15. PRIMARY OCCUPATION				16. NUMBER OF YEARS THIS OCCUPATION		17. EMPLOYER IF SELF-EMPLOYED, SO STATE			18. KIND OF INDUSTRY OR BUSINESS		
Physician				31		Self			Medicine		
19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)										19B.	
19361 Francisco Way										Yorba Linda	
19C. CITY OR TOWN				20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP							
Orange				Mary Jane Colfax-Wife 19361 Francisco Way Yorba Linda, CA 92686							
21A. PLACE OF DEATH				21B. COUNTY		21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)					
St. Jude Hospital Yorba Linda				Orange		21D. CITY OR TOWN					
16850 Bastanchury Rd.				Yorba Linda							
22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)											
IMMEDIATE CAUSE											
CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST.											
(A) RESPIRATORY FAILURE ◀ 6 Mo.											
(B) CHRONIC OBSTR. PULMONARY DISEASE ◀ 10 Yrs.											
(C)											
23. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 22A											
NONE											
24. WAS DEATH REPORTED TO CORONER?											
NO											
25. WAS BIOPSY PERFORMED?											
NO											
26. WAS AUTOPSY PERFORMED?											
NO											
27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION											
NO											
28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.											
28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE											
28C. DATE SIGNED											
28D. PHYSICIAN'S LICENSE NUMBER											
28E. TYPE PHYSICIAN'S SIGNATURE AND ADDRESS											
James L. Fearle 1801 W. Romneya Dr. Anaheim, CA											
29. EMPLOYER, ACCIDENT, BURIAL, ETC.											
30. PLACE OF INJURY											
31. INJURY AT WORK											
32A. DATE OF INJURY—MONTH, DAY, YEAR											
32B. HOUR											
33. LOCATION—STREET AND NUMBER OR LOCATION AND CITY OR TOWN											
34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)											
35A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. AS REQUIRED BY LAW I HAVE HELD AN INQUEST-INVESTIGATION											
35B. CORONER—SIGNATURE AND DEGREE OR TITLE											
35C. DATE SIGNED											
36. DISPOSITION											
37. DATE—MONTH, DAY, YEAR											
38. NAME AND ADDRESS OF CEMETERY OR CREMATORY											
39. EMBALMER'S LICENSE NUMBER AND SIGNATURE											
40A. NAME OF FUNERAL DIRECTOR FOR PERSON ACTING AS SUCH											
40B. LICENSE NO.											
41. LOCAL REGISTRATION DISTRICT											
42. DATE ACCEPTED BY LOCAL REGISTRAR											
Curial Sept. 13, 1986 Loma Vista Memorial Park-Fullerton, CA 5531 Angus D. McAulay											
McAulay & Wallace Mortuary F-190 SEP 11 1986											
STATE REGISTRAR											

STATE OF OREGON: COUNTY OF KLAMATH: SS.

Filed for record at request of Mary Jane Connolly the 23rd day
of June A.D., 19 87 at 3:11 o'clock P.M., and duly recorded in Vol. M87,
of Deeds on Page 10892.
County Clerk [Signature]

FEE **\$5.00**

FEE \$5.00
Ret: Mary Jane Connolly 19361 Francisca Wy., Yorba Linda, Calif. 92686