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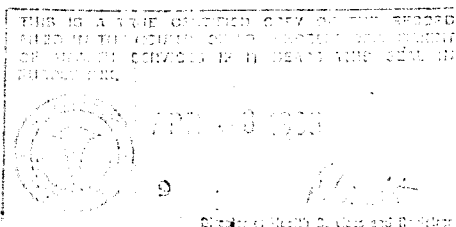
## MTL-20108 CERTIFICATE OF DEATH

STATE FILE NUMBER		STATE OF CALIFORNIA		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
1A. NAME OF DECEDENT—FIRST		1B. MIDDLE		1C. LAST	
JOHN		EDWARD		GRIFFITHS	
3. SEX		4. RACE/ETHNICITY		5. SPANISH/HISPANIC	
Male		White/English		NO	
6. DATE OF BIRTH		7. AGE		2A. DATE OF DEATH (MONTH, DAY, YEAR)	
March 14, 1950		35 YEARS		Found April 17, 1985	
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)		9. NAME AND BIRTHPLACE OF FATHER		10. BIRTH NAME AND BIRTHPLACE OF MOTHER	
England		George Griffiths - England		Vera Maude Price-England	
11A. CITIZEN OF WHAT COUNTRY		11B. IF DECEASED WAS EVER IN MILITARY, GIVE DATES OF SERVICE		12. SOCIAL SECURITY NUMBER	
USA		1975 TO 1979		561-02-7662	
13. MARITAL STATUS		14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)		15. PRIMARY OCCUPATION	
Married		Darlene Mullek		Salesman	
16. NUMBER OF YEARS THIS OCCUPATION		17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)		18. NAME OF INDUSTRY OR BUSINESS	
4		Unavailable		Solar Energy	
19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)		19B. CITY OR TOWN		19C. CITY OR TOWN	
4880 Glenwood		Klamath Falls		Klamath Falls	
19D. COUNTY		19E. STATE		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP	
Klamath		California		Darlene Griffiths - Wife	
21A. PLACE OF DEATH		21B. COUNTY		4880 Glenwood	
Private Garage		Los Angeles		Klamath Falls, Oregon 97602	
21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)		21D. CITY OR TOWN			
26804 Shorewood Rd.		Rancho Palos Verdes			
22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)		23. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 22A		24. WAS DEATH REPORTED TO CORONER?	
IMMEDIATE CAUSE				85-5173	
CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST.		(A) ACUTE CARBON MONOXIDE INTOXICATION		25. WAS BIOPSY PERFORMED?	
		(B)		No	
		(C)		26. WAS AUTOPSY PERFORMED?	
				No	
27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION		28. DATE SIGNED		28D. PHYSICIAN'S LICENSE NUMBER	
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	
I ATTENDED DECEDENT SINCE (ENTER MO. DA. YR.)		28D. TYPE PHYSICIAN'S NAME AND ADDRESS			
29. SPECIFY ACCIDENT, SUICIDE, ETC.		30. PLACE OF INJURY		31. INJURY AT WORK	
Suicide		Private Garage		No	
32. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		33. DATE OF INJURY—MONTH, DAY, YEAR		32B. HOUR	
26804 Shorewood Rd - Rancho Palos Verdes		Unknown		Unk.	
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 (INVESTIGATION)		35B. CORONER—SIGNATURE AND DEGREE OR TITLE	
Inhalation of Auto Exhaust				Deputy Coroner WLS	
36. DISPOSITION		37. DATE—MONTH, DAY, YEAR		38. NAME AND ADDRESS OF CEMETERY	
Cremation		April 23, 1985		1250 S. Vermont Ave.	
40A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)		40B. LICENSE NO.		39. EMBALMER'S LICENSE NUMBER AND SIGNATURE	
Roosevelt Mem. Park Mortuary		F-1362		Not Embalmed	
41. LOCAL REGISTRAR—SIGNATURE		42. DATE ACCEPTED BY LOCAL REGISTRAR			
Richard S. Males		APR 23 1985			

VS-11 (1-85)

RETURN: MTC.

01-9-3-7065



STATE OF OREGON: COUNTY OF KLAMATH. SS.

Filed for record at request of Mountain Title Co. the 24th day of Aug. A.D., 19 88 at 11:25 o'clock A.M., and duly recorded in Vol. M88 of Deeds on Page 13679

FEE \$8.00

Evelyn Biehn County Clerk  
By Lauren Mulledore