93577

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CERTIFICATE OF DEATH

STATE OF CALIFORNIA

1500 — 2420

STATE FILE NUMBER — LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

DECEDENT PERSONAL DATA

1A. NAME OF DECEDENT—FIRST	1B. MIDDLE	1C. LAST	2A. DATE OF DEATH (MONTH, DAY, YEAR)	2B. HOUR
Charles	Vincent	Watkins	August 12, 1988	Abt1535

3. SEX	4. RACE/ETHNICITY	5. SPANISH/HISPANIC	6. DATE OF BIRTH	7. AGE
Male	White/American	NO X	November 13, 1935	52 YEARS

8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)	9. NAME AND BIRTHPLACE OF FATHER	10. BIRTH NAME AND BIRTHPLACE OF MOTHER
CO	Thomas J. Watkins - TN	Pearl Seymour - KS

11A. CITIZEN OF WHAT COUNTRY	11B. IF DECEASED WAS EVER IN MILITARY GIVE DATES OF SERVICE	12. SOCIAL SECURITY NUMBER	13. MARITAL STATUS	14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)
U.S.A.	1960 TO 1972	554-42-9157	Married	Marjorie Jacobson

15. PRIMARY OCCUPATION	16. NUMBER OF YEARS THIS OCCUPATION	17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)	18. KIND OF INDUSTRY OR BUSINESS
Pilot	10	U. S. Forest Service	Civil Service

USUAL RESIDENCE

19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)	19B.	19C. CITY OR TOWN
2380 North Quince Avenue		Rialto

19D. COUNTY	19E. STATE
San Bernardino	CA

20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP
Marjorie Watkins - Wife
2380 North Quince Avenue
Rialto, CA 92376

PLACE OF DEATH

21A. PLACE OF DEATH	21B. COUNTY
Breckenridge Mountain	Kern

21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)	21D. CITY OR TOWN
T28S - R32E - S/E Of The S/E Quarter Of Section 19	Havilah, Rural

CAUSE OF DEATH

22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)

IMMEDIATE CAUSE (A) Multiple Blunt Force Injuries. — APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH: Instant

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

DUE TO, OR AS A CONSEQUENCE OF (B) None

DUE TO, OR AS A CONSEQUENCE OF (C) None

24. WAS DEATH REPORTED TO CORONER? Yes C-1139-88

25. WAS BIOPSY PERFORMED? No

26. WAS AUTOPSY PERFORMED? Yes

23. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 22A: None

27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION / DATE: No

PHYSICIAN'S CERTIFICATION

28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. ATTENDED DECEDENT SINCE (ENTER MO. DA. YR.) / LAST SAW DECEDENT ALIVE (ENTER MO. DA. YR.)

28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE — 28C. DATE SIGNED — 28D. PHYSICIAN'S LICENSE NUMBER

28E. TYPE PHYSICIAN'S NAME AND ADDRESS

INJURY INFORMATION

29. SPECIFY ACCIDENT, SUICIDE, ETC.	30. PLACE OF INJURY	31. INJURY AT WORK	32A. DATE OF INJURY—MONTH, DAY, YEAR	32B. HOUR
Accident	Breckenridge Mountain	Yes	August 12, 1988	Abt 1535

33. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN): T28S - R32E - S/E Of The S/E Quarter Of Section 19 Rural Havilah

34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY): Pilot Of Airplane That Crashed In Mountain

CORONER'S USE ONLY

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) Investigation

35B. CORONER—SIGNATURE AND DEGREE OR TITLE: Helen Bruce Frankel, Coroner — Deputy

35C. DATE SIGNED: 08-15-88

36. DISPOSITION	37. DATE—MONTH, DAY, YEAR	38. NAME AND ADDRESS OF CEMETERY OR CREMATORY	39. EMBALMER'S LICENSE NUMBER AND SIGNATURE
Cremation	August 16, 1988	Mt. View Crematorium-San Bernardino, CA	Not Embalmed

40A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)	40B. LICENSE NO.	41. LOCAL REGISTRAR—SIGNATURE	42. DATE ACCEPTED BY LOCAL REGISTRAR
Bobbitt Memorial Chapel, Inc.	1133	BABATUNDE JINADU, M.D.	AUG 16 1988

8445

THIS IS TO CERTIFY THAT THIS IS
A TRUE COPY OF THE DOCUMENT ON
FILE IN THIS OFFICE

BABATUNDE JINADU, M.D., MPH
LOCAL REGISTRAR OF VITAL STATISTICS
KERN COUNTY HEALTH DEPARTMENT
BAKERSFIELD, CALIFORNIA 93305

AUG 2 6 1988

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ISSUED BY KERN COUNTY HEALTH DEPARTMENT

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Pearl Watkins the 7th day of Nov. A.D., 19 88 at 11:46 o'clock A M., and duly recorded in Vol. M88 of Deeds on Page 18840.

Evelyn Biehn County Clerk

By [signature]

FEE $8.00

Return" Pearl Watkins
2434 Randcliffe,Klamath FAlls,Or.97601