4517

CERTIFICATE OF DEATH

STATE OF CALIFORNIA

Vol. M89 Page 16160

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
MILTON	DOUGLAS	HAACK	October 31, 1988	1215

3. SEX	4. RACE/ETHNICITY	5. SPANISH/HISPANIC	6. DATE OF BIRTH	7. AGE	IF UNDER 1 YEAR: DAYS	IF UNDER 24 HOURS: MINUTES
Male	White	NO	August 16, 1921	67 YEARS		

8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)	9. NAME AND BIRTHPLACE OF FATHER	10. BIRTH NAME AND BIRTHPLACE OF MOTHER
South Dakota	Henry Haack - Germany	Leita Bradshaw - South Dakota

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	19 TO 19	553-16-8612	Never Married	

15. PRIMARY OCCUPATION	16. NUMBER OF YEARS THIS OCCUPATION	17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)	18. KIND OF INDUSTRY OR BUSINESS
Office Administrator	25	Goodyear	Tire and Rubber Manufacturing

USUAL RESIDENCE

19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)	19B.	19C. CITY OR TOWN
9314 Cord Avenue		Downey

19D. COUNTY	19E. STATE	20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP
Los Angeles	California	Deloris Sauder - Sister 9314 Cord Avenue Downey, CA 90240

PLACE OF DEATH

21A. PLACE OF DEATH	21B. COUNTY	
Shea Convalescent Hospital	Los Angeles	
21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)	**21D. CITY OR TOWN**	
7716 Pickering	Whittier	

CAUSE OF DEATH

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) COMA — ◁ DAYS

DUE TO, OR AS A CONSEQUENCE OF:

(B) RAISED INTRACRANIAL PRESSURE — ◁ "

DUE TO, OR AS A CONSEQUENCE OF:

(C) RECURRENT MENINGIOMA BRAIN. — ◁ YEARS

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

24. WAS DEATH REPORTED TO CORONER? Yes 88-054090

25. WAS BIOPSY PERFORMED? YES

26. WAS AUTOPSY PERFORMED? NO

23. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 22A: HYPERTENSION

27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? YES — TYPE OF OPERATION: CRANIOTOMY AND REMOVAL — DATE: 1978, 1984 — CEREBRAL MENINGIOMA

PHYSICIAN'S CERTIFICATION

24A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. I ATTENDED DECEDENT SINCE (ENTER MO. DA. YR.)	I LAST SAW DECEDENT ALIVE (ENTER MO. DA. YR.)	24B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE	24C. DATE SIGNED	24D. PHYSICIAN'S LICENSE NUMBER
2-13-86	10-3-88	Bashaw M.D.	10-31-88	A34842

24E. TYPE PHYSICIAN'S NAME AND ADDRESS: B. A. Shaw, MD-7727 Painter Ave., Whittier, CA

INJURY INFORMATION

29. SPECIFY ACCIDENT, SUICIDE, 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)

CORONER'S USE ONLY N/E

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
Burial	Nov. 5, 1988	Rose Hills Memorial Park 3900 S. Workman Mill Rd., Whittier, CA	5231

40A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)	40B. LICENSE NO.	41. LOCAL REGISTRAR—SIGNATURE	42. DATE ACCEPTED BY LOCAL REGISTRAR
Lanier-Richardson-Siewert-Barber	775	Richard S. Madigan	NOV 02 1988

STATE REGISTRAR: A. | B. | C. | D. | E. | F.

VS-11(1-85)

THIS IS A TRUE CERTIFIED COPY OF THE RECORD FILED IN THE COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES IF IT BEARS THIS SEAL IN PURPLE INK.

NOV 02 1988

27

Director of Health Services and Registrar

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Ronald E. Sauder the 29th day of Aug. A.D., 19 89 at 12:08 o'clock P.M., and duly recorded in Vol. M89 of Deeds on Page 16160.

Evelyn Biehn - County Clerk

By Pauline Muhlendore

FEE $8.00

Return: Ronald E. Sauder
12117 Groveland, Whittier, CA. 90604