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CERTIFICATE OF DEATH
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	
		Addaline		T.		Turner		June 16, 1985		1012	
3. SEX	4. RACE/ETHNICITY	5. SPANISH/HISPANIC		6. DATE OF BIRTH		7. AGE		8. IF UNDER 1 YEAR		9. IF UNDER 24 HOURS	
Female	White/American	NO		September 1, 1909		75 YEARS		MONTHS		DAYS	
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)		9. NAME AND BIRTHPLACE OF FATHER				10. BIRTH NAME AND BIRTHPLACE OF MOTHER					
Oklahoma		Moses C. Trautwein - Illinois				Anna M. Fenton - Illinois					
11A. CITIZEN OF WHAT COUNTRY	11B. IF DECEDENT WAS IN U.S. 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	557-40-2424		Married		Earl G. Turner					
15. PRIMARY OCCUPATION		16. NUMBER OF YEARS THIS OCCUPATION		17. EMPLOYER OF SELF-EMPLOYED, SO STATE		18. NAME OF INDUSTRY OR BUSINESS					
Secretary		20		Turners Tank Line		Petroleum Product Transportation					
19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)				19B.		19C. CITY OR TOWN					
306 Persimmon Lane						Santa Ana					
19D. COUNTY		19E. STATE		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP							
Orange		California		Earl G. Turner - Husband							
21A. PLACE OF DEATH		21B. COUNTY		306 Persimmon Lane							
Kaiser Permanente Medical Center		Orange									
21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)		21D. CITY OR TOWN		Santa Ana, California							
441 N. Lakeview Avenue		Anaheim									
22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)				APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH		24. WAS DEATH REPORTED TO CORONER?					
(A) Cardiac arrest				▲		NO					
(B) Heart Failure				▲		25. WAS BIOPSY PERFORMED?					
(C) Myocardial infarction				▲		NO					
23. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN				27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION		DATE					
Heart Failure				NO							
28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSE(S) STATED.		28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE		28C. DATE SIGNED		28D. PHYSICIAN'S LICENSE NUMBER					
6/16/85		D.T. Rogers M.D.		6/18/85		619506					
28E. TYPE PHYSICIAN'S NAME AND ADDRESS		D.T. Rogers, M.D. Newport									
1401 Avocado Blvd #303		Newark Calif									
29. SPECIFY INCIDENT, INJURY, 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					
Burial		June 20, 1985		Rose Hills Memorial Park 3900 S. Workman Mill Rd. Whittier, Calif		Unembalmed					
40A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)		40B. LICENSE NO.		41. LOCAL REGISTRAR'S SIGNATURE		42. DATE ACCEPTED BY LOCAL REGISTRAR					
Rose Hills Mortuary Whittier, CA		970		E. G. Biehne, Jr.		JUN 20 1985					
STATE REGISTRAR		A.		B.		C.		D.		E.	

STATE OF OREGON: COUNTY OF KLAMATH: SS.

Filed for record at request of Earl G. Turner the 20th day
of Nov. A.D., 19 85 at 11:11 o'clock AM., and duly recorded in Vol. M89
of Deeds on Page 22382.

Evelyn Biehn County Clerk
By Evelyn Biehn

FEE \$8.00

Return: Earl G. Turner
306 Persimmon Ln, Santa Ana, Ca. 92704

Date: Santa Ana, California

H. H. Officer and Local Registrar of Births and Deaths of Orange County

Fee: \$4.00 No Fee Veterans Purposes

JUN 25 1985

THIS IS TO CERTIFY, IF IMPRESSED WITH THE SEAL OF THE ORANGE COUNTY HEALTH OFFICER, THAT THIS IS A TRUE COPY OF THE PERMANENT RECORD FILED IN THIS OFFICE.