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VIC 23741-K

STATE OF OREGON

OREGON STATE HEALTH DIVISION
DEPARTMENT OF HUMAN SERVICES

Vital Records Unit

Vol. m90 Page 11780

A 0600
ID TAG NO.

Local File Number

CERTIFICATE OF DEATH

State File Number

TYPE
OR PRINT
IN
PERMANENT
BLACK INK
FOR
INSTRUCTIONS
SEE
HANDBOOK

IF DEATH
OCCURRED IN
INSTITUTION
E HAND LOCK
EGARDING
COMPLETION OF
OF DECEASED

POSITION

CERTIFIER

CONDITIONS
IF ANY
WHICH GAVE
RISE TO
IMMEDIATE
CAUSE
DATING THE
UNDERLYING
CAUSE LAST

CAUSE OF
DEATH

PH 2 15

JUN 11 1986

DECEASED - NAME		First	Middle	Last	DATE OF DEATH (month, day, year)	
1 William Harvey				McKEEVER	2 July 3, 1986	
RACE (specify)	3 White	SEX	4 Male	AGE - Last birthday (years)	5a 71	DATE OF BIRTH (month, day, year)
CITY, TOWN OR LOCATION OF DEATH		HOSPITAL OR OTHER INSTITUTION - NAME (if not in either, give street and number)			IF HOSP. OR INST. Indicate DOA, OP/Emr. Rm., Inpatient (specify)	
7a Medford		7b Rogue Valley Medical Center			7c Inpatient	
STATE OF BIRTH (if not in U.S., name country)		CITIZEN OF WHAT COUNTRY		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (specify)		COUNTY OF DEATH
8 Texas		9 U.S.A.		10 Married		11 Moneta
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (Give kind of work done during most of working life, even if retired)		KIND OF BUSINESS OR INDUSTRY		
13 520-09-7301		14a Maintenance Supervisor		14b Duetsch Company		
15a Oregon	15b Klamath	15c Klamath Falls	15d 411 Pacific Terrace	ZIP	97601	
FATHER - NAME		MOTHER - NAME		INFORMANT - NAME and relationship to deceased		
16 William A. McKeever		17 Anna G. Nelson		18 Moneta - Wife		
BURIAL, CREMATION, REMOVAL, MAUS. (specify)		CEMETERY OR CREMATORY - NAME		LOCATION - city or town state		
19a Cremation		19b Eternal Hills Memorial Garden		19c Klamath Falls Oregon		
FUNERAL SERVICE LICENSEE or person acting as such (Signature)		NAME AND ADDRESS OF FACILITY				
20a [Signature]		20b Wards Funeral Home, 1945 Main St., Klamath Falls, Oregon				
To be completed by certifying physician only		DATE RECEIVED BY REGISTRAR (Mo., Day, Year)		REGISTRAR		21c 0900 M
21a [Signature]		21b July 7, 1986		21c 0900 M		21d Richard Schaefer, M.D., 2911 Siskiyou Blvd., Medford, Oregon 97504
21e NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)						
21f DATE RECEIVED BY REGISTRAR (Mo., Day, Year)		21g REGISTRAR				
22a JUL 08 1986		22b [Signature]				
23 IMMEDIATE CAUSE		[ENTER ONLY ONE CAUSE PER LINE FOR (a), (b) AND (c)]				Interval between onset and death
PART I (a) CARDIOGENIC SHOCK						HOURS
(b) ACUTE MYOCARDIAL INFARCTION						DAYS
(c) CORONARY ARTERIOSCLEROSIS						YEARS
PART II OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not related to cause given in PART I (a)		AUTOPSY (Specify Yes or No)				WAS MEDICAL EXAMINER NOTIFIED (Specify Yes or No)
24 No		25 No				26 No
ACCIDENT (Specify Yes or No)		DATE OF INJURY (Mo., Day, Year)		HOUR OF INJURY		DESCRIBE HOW INJURY OCCURRED
26a No		26b		26c		26d
INJURY AT WORK (Specify Yes or No)		PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify)		LOCATION		STREET OR R.F.D. NO. CITY OR TOWN STATE
26e No		26f		26g		
DID HOSPITAL REPRESENTATIVE MAKE REQUEST FOR ANATOMICAL GIFT CONSENT?		WAS GIFT MADE?				
YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>		YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>				
RESERVED FOR REGISTRAR'S USE						

45-2 Rev. 1-8

STATE OF OREGON

ORIGINAL VITAL STATISTICS COPY
CERTIFIED COPY OF DEATH RECORD

COUNTY OF JACKSON

This certifies that the foregoing is a correct and complete transcript of a record of death on file with the JACKSON COUNTY HEALTH DEPARTMENT.

Upon recording return to:

Moneta Mc Keever
1951 Erie Apt. 4
Klamath Falls, OR 97601

DATE JUL 11 1986

[Signature]
REGISTRAR, VITAL STATISTICS

NOT VALID WITHOUT RAISED SEAL OF JACKSON COUNTY
VOID IF ALTERED

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Mountain Title co. the 15th day of June A.D. 19 90 at 2:15 o'clock P.M., and duly recorded in Vol. M90 of Deeds on Page 11780

FEE \$8.00

Evelyn Biehn County Clerk

By Deanne McKeever