

0200498

THIS RECORD IS VALID FOR DEATH ONLY

12521

FILE NO. 117

BIRTH No.

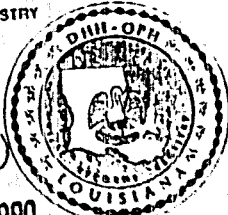
1. LAST NAME OF DECEASED Hesselgrave		2. FIRST NAME Ethel		3. MIDDLE NAME Mosley		4. DATE OF BIRTH April 16, 1990	
5. SEX Female		6. RACE White		7. MARITAL STATUS Widowed		8. NAME OF SPOUSE Harold Hesselgrave	
9. DATE OF DEATH March 30, 1906		10. AGE 84		11. PLACE OF BIRTH Elizabeth, New Jersey		12. OF INTEREST No	
13. USUAL OCCUPATION Cook		14. TYPE OF DEATH Restaurant		15. NUMBER OF YEARS IN US 3 Years		16. PLACE OF DEATH Terrebonne General Medical Center	
17. CITY TOWNSHIP LOCATION OF DEATH Houma		18. STATE OF DEATH Louisiana		19. COUNTY OF DEATH Terrebonne		20. PARISH OF DEATH Terrebonne	
21. USUAL RESIDENCE OF DECEASED Houma		22. STREET ADDRESS 3704 Grand Caillou Rd.		23. ZIP CODE 70363		24. YES ☒ NO ☐ RESIDENCE WHERE CITY LAST RESIDENCE IN MO	
25. FATHER'S FIRST NAME Mosely		26. FATHER'S MIDDLE NAME Joseph		27. FATHER'S PLACE OF BIRTH Kryzewka		28. STATE OF BIRTH Nova Scotia	
29. MOTHER'S FIRST NAME Szafran		30. MOTHER'S MIDDLE NAME Anna		31. MOTHER'S PLACE OF BIRTH Galicia		32. STATE OF BIRTH Poland	
33. DATE OF DEATH April 17, 1990		34. PLACE OF DEATH Terrebonne General Medical Center		35. CITY TOWNSHIP LOCATION OF DEATH Houma		36. STATE OF DEATH Louisiana	
37. CAUSE OF DEATH chronic respiratory failure		38. DURATION OF ILLNESS months		39. DATE OF DEATH April 17, 1990		40. PLACE OF DEATH Terrebonne General Medical Center	
41. OTHER CAUSE OF DEATH Ascending paralysis		42. DURATION OF ILLNESS months		43. DATE OF DEATH April 17, 1990		44. PLACE OF DEATH Terrebonne General Medical Center	
45. PARTIAL OTHER CAUSE OF DEATH Urinary tract infection		46. DURATION OF ILLNESS months		47. DATE OF DEATH April 17, 1990		48. PLACE OF DEATH Terrebonne General Medical Center	
49. PARTIAL OTHER CAUSE OF DEATH Urinary sepsis		50. DURATION OF ILLNESS months		51. DATE OF DEATH April 17, 1990		52. PLACE OF DEATH Terrebonne General Medical Center	
53. DATE OF DEATH April 17, 1990		54. TIME OF DEATH M		55. PLACE OF DEATH Terrebonne General Medical Center		56. CITY TOWNSHIP LOCATION OF DEATH Houma	
57. STATE OF DEATH Louisiana		58. COUNTY OF DEATH Terrebonne		59. PARISH OF DEATH Terrebonne		60. DATE OF DEATH April 17, 1990	
61. SIGNATURE OF DECEASED Denis B. Schermyder, Jr.		62. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		63. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		64. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.	
65. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		66. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		67. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		68. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.	
69. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		70. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		71. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		72. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.	
73. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		74. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		75. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		76. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.	
77. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		78. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		79. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		80. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.	
81. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		82. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		83. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		84. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.	
85. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		86. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		87. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		88. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.	
89. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		90. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		91. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		92. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.	
93. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		94. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		95. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		96. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.	
97. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		98. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		99. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.		100. SIGNATURE OF WITNESS Denis B. Schermyder, Jr.	

OFFICE OF PUBLIC HEALTH - VITAL RECORDS REGISTRY

IN ACCORDANCE WITH LSA-R.S. 40:50 (C), I CERTIFY THAT THE ABOVE IS A TRUE AND CORRECT COPY OF A DEATH CERTIFICATE IN MY CUSTODY.

Denis B. Schermyder, Jr.
LOCAL REGISTRAR

APR 23 1990



CERTIFY THAT THIS IS A TRUE AND CORRECT COPY OF A CERTIFICATE OR DOCUMENT REGISTERED WITH THE VITAL RECORDS REGISTRY OF THE STATE OF LOUISIANA, PURSUANT TO LSA-R.S. 40:32, ET SEQ.

William H. Baur
STATE REGISTRAR

STATE OF OREGON: COUNTY OF KLAMATH: SS.

Filed for record at request of Douglas V. Osborne the 26th day of June A.D. 19 90 at 11:41 o'clock A.M., and duly recorded in Vol. M90 of Deeds on Page 12517.
Evelyn Biehn - County Clerk
By Douglas V. Osborne

FEE \$28.00