

CERTIFICATION OF VITAL RECORD

COUNTY of SISKIYOU

YREKA, CALIFORNIA

22021

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Aspen Title 04035783

STATE FILE NUMBER				4700-98			
1A. NAME OF DECEDENT—FIRST		1B. MIDDLE		1C. LAST		2A. DATE OF DEATH MONTH, DAY, YEAR 12H HOUR	
Aaron		Earl		McCOY		March 31, 1986 3:45AM	
3. SEX		4. RACE/ETHNICITY		5. DATE OF BIRTH		7. AGE	
Male		White		December 15, 1897		88 YEARS	
8. DATE/PLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)		9. NAME AND BIRTHPLACE OF FATHER		10. BIRTH NAME AND BIRTHPLACE OF MOTHER		14. NAME OF SURVIVING SPOUSE BY WFF, ENTH BIRTH NAME	
California		Sylvester McCoy-California		Mary Clairanda Powers-Calif.		Bertha Leonna Stone, wife	
11A. CITIZEN OF WHAT COUNTRY		11B. IF DECEASED WAS EVER IN MILITARY GIVE DATES OF SERVICE		12. SOCIAL SECURITY NUMBER		13. MARITAL STATUS	
U.S.A.		19 — TO 19 —		Never Applied		Married	
15. PRIMARY OCCUPATION		16. NUMBER OF YEARS THIS OCCUPATION		17. EMPLOYER IF SELF-EMPLOYED, SO STATE		18. KIND OF INDUSTRY OR BUSINESS	
Rancher		70 years		Self-employed		Agriculture	
19A. USUAL RESIDENCE—STREET ADDRESS AND NUMBER OR LOCATION		19B. CITY OR TOWN		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP		21. CITY OR TOWN	
1105 Hill Road, Rt 1 Box 59B		Tulelake		Bertha McCoy, wife Rt 1 Box 59B Tulelake, California 96134		Tulelake	
22. DEATH WAS CAUSED BY IMMEDIATE CAUSE		23. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 22A		24. WAS DEATH REPORTED TO CORONER?		25. WASopsy PERFORMED?	
CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST.		(A) DUE TO, OR AS A CONSEQUENCE OF (B) DUE TO, OR AS A CONSEQUENCE OF (C)		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH		26. WAS AUTOPSY PERFORMED?	
						Yes	
27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION		28. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE		29. DATE SIGNED		30. PHYSICIAN'S LICENSE NUMBER	
		J. E. [Signature]		4-2-86		72-86	
31. INJURY AT WORK		32A. DATE OF INJURY—MONTH, DAY, YEAR		32B. HOUR		33. CONTAINER—SIGNATURE AND DEGREE OR TITLE	
						J. E. [Signature]	
34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH PRECEDED INJURY)		35. CORONER—SIGNATURE AND DEGREE OR TITLE		36. DATE SIGNED		37. CORONER'S LICENSE NUMBER	
		J. E. [Signature]		4-2-86		72-86	
38. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSE STATED AS REQUIRED BY LAW I HAVE HELD AN INQUEST-INVESTIGATION		39. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSE STATED AS REQUIRED BY LAW I HAVE HELD AN INQUEST-INVESTIGATION		40. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSE STATED AS REQUIRED BY LAW I HAVE HELD AN INQUEST-INVESTIGATION		41. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSE STATED AS REQUIRED BY LAW I HAVE HELD AN INQUEST-INVESTIGATION	
Burial		April 3, 1986		Adin Cemetery, Adin California		3104 Ore	
42. DATE ACCEPTED BY LOCAL REGISTRAR		43. LOCAL REGISTRAR—SIGNATURE		44. LOCAL REGISTRAR'S LICENSE NUMBER		45. DATE ACCEPTED BY LOCAL REGISTRAR	
April 2, 1986		[Signature]		[Signature]		April 2, 1986	
STATE REGISTRAR		A.		B.		C.	
VS-1111-28						30-96	

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COMPARED

CERTIFIED COPY OF VITAL RECORDS

03506

STATE OF CALIFORNIA }
COUNTY OF SISKIYOU } SS

This is a true and exact reproduction of the document officially registered and placed on file in the office of the SISKIYOU COUNTY RECORDER.

ATTEST: Deane A. Masters
DATE ISSUED: October 29, 1990

This copy not valid unless prepared on engraved border displaying date and signature of Deputy County Recorder.

David M. Elledge
DAVID G. ELLEDGE
SISKIYOU COUNTY RECORDER



STATE OF OREGON: COUNTY OF KLAMATH: SS.

Filed for record at request of Aspen Title Co. the 30th day
of Oct. A.D. 19 90 at 3:32 o'clock P.M., and duly recorded in Vol. M90
of Deeds on Page 21802
Evelyn Biehn - County Clerk
By Deane A. Masters

FEE \$8.00

Return: ATC