## 25945

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	STATE FILE		10 20-	NOI E	USE BLA	CK INK ON			LOCAL REGISTRAT				UMBER
DECEDENT PERSONAL DATA	MARY		0	1B. MIDDLE CATHERINE		1C. LAST (FAMILY) CAWLEY			JAN. 08, 1991			. YR 28. HOUR 3. SEX	
	4. RACE CAUCASIAN		5. HISPA	5. HISPANICSPECIFY		6. DATE OF BIRTH—MO, DA		-Mo, Day,			1 YEAR IF	JNDER 24	HOURS
	8. STATE OF	9. CITIZEN OF WH	AT   10A	YES	X OF FATHER	No MA	Y 02, 19		90	!!	1	OURS M	
	UK USA		וט	UNKNOWN UNKNOWN		14. MARITA	UK	υ	NKNOWN CU	MMINGS	3	UK	STATE OF
	19 TO 19 X NONE 562-10-5616				WIDOWED			10.110	NAME OF SURVIVING SPOUSE (IF WIFE, ENTER MAIDEN NAME)				
	HOMEMAKER HOMEM			BUAL KIND OF E	BUSINESS	!	AL EMPLOYER -EMPLOYEI		D. YEARS IN OCCUPATION 64	17. EDU	CATION —YE	ARS CO	MPLETED
USUAL RESIDENCE	18A. RESIDENCE-STREET AND NUMBER OR LOCATION							<u> </u>	188. CITY	L		C. ZIP C	ODE
	2302 S. COCHRAN AVE.			18F Num	MBER OF YEARS 18F. STATE OR FOREIGN COUNTRY							900	16
	LOS ANG		IN THIS COUNTY		CALIFORNIA			20. NAME, RELATIONSHIP, MAILING ADDRESS AND ZIP CODE OF INFORMANT JOHN CAWLEY—SON					
PLACE OF	SUN RAY				LOS ANGELES			2302 S. COCHRAN AVE. LOS ANGELES, CALIF. 90016					
DEATH	19D. STREET ADDRESS—STREET AND NUMBER OR LOCATION 3210 W. PICO BLVD.			OR LOCATION	N 19E. CITY				TIME INTERVAL 22. WAS DEATH REPORTED TO CORONER				
		AS CAUSED BY: (E	-	Y ONE CAUSE		OS ANGI			AND DEATH	YES	SY PERFORM		] No
CAUSE	IMMEDIATE CAUSE	(A) CARD		ARRZS		/			3634111	YES	SV PERFORM		***
			. ,-		4				24		TOPSY PERFO		
DEATH	DUE TO	(B) ATRIA	L F	IBRICL	ATIO	N			TEARS.	L YES	JSED IN DETE		CAUSE
	DUE TO	(C) ATHE-1	2 SCLE	-RUS19	5	<u>. 14.</u> - 1		•	TEARS	OF DE	ATH? NO		
	25. OTHER SIG	NIFICANT CONDITIONS	CONTRIBUTIN	G TO DEATH BU	JT NOT RELAT	ED TO CAUSE	GIVEN IN 21	26. WAS OF	ERATION PERFORME	D FOR ANY	CONDITION IN		OR 257
	I CERTIFY THAT	TO THE BEST OF MY	NOWLEDGE	Drami I					NU				
PHYSI- CIAN'S	OCCURRED AT .			UEATH : 2	2713. SIGNATUR	RE AND DEGI	EE OR TITLE OF	CERTIFIER	' 27C, CERTIFIER'S	LICEUSE N	UMBER 1 275		SIGNER
CIAN'S	CAUSES STATE			D FROM THE	SIGNATUR	RE AND DEGI	EE OR TITLE OF	LACT	GUSA	LICENSE N			SIGNED 7 I
CIAN'S	CAUSES STATE 27A. DECEDEN MONTH,	THE HOUR, DATE AND ED. T ATTENDED SINCE DEI DAY, YEAR		SEEN ALIVE	PZE. TYPE AT	TENDING F	HYSICIAN'S NA	ME AND	GUST	SON PA		15/	SIGNED
CIAN'S ERTIFICA-	CAUSES STATE  27A. DECEDEN  MONTH.  1 2 /	T ATTENDED SINCE DET	MONTH, DA	SEEN ALIVE	► () 17E. TYPE AT 4620 W.	BEVER	HYSICIAN'S NA	LOS	OUT SATA	SON PA	RK M.D	/ <sub>15/</sub>	91
CIAN'S ERTIFICA- TION	I CERTIFY THAT THE HOUR, DAT STATED.	TATTENDED SINCE DECEMBER OF THE PROPERTY OF T	MONTH, DA	SEEN ALIVE	► () 17E. TYPE AT 4620 W.	BEVER	HYSICIAN'S NA	LOS	OUT SATA	SON PA	RK M.D	15/	<b>?!</b>
CIAN'S ERTIFICA- TION  ORONER'S USE	CAUSES STATE  27A. DECEDEN MONTH.  1 CERTIFY THAT THE HOUR, DAT STATED.	T ATTENDED SINCE DET	MONTH, DA	SEEN ALIVE	► () 17E. TYPE AT 4620 W.	BEVER	HYSICIAN'S NA	LOS	ANGELES,	SON PA	RK M.D	/ <sub>15/</sub>	NED
CIAN'S ERTIFICA- TION  DRONER'S	CAUSES STATE  27A. DECEDEN MONTH.  1 CERTIFY THAT THE HOUR, DAT STATED.  29. MANNER O suicide, homicide, pt	T ATTENDED SINCE DET DAY, YEAR  T IN MY OPINION DEAT TE AND PLACE STATED	MONTH, DA	SEEN ALIVE IV. YEAR O AT CAUSES	4620 W.	BEVER	HYSIGIAN'S NA RLY BLVD.	LOS R DEPUTY	ANGELES, CORONER  JURY AT WORK	SON PA CALIF.	28B. C	DATE SIG	NED JR
CIAN'S ERTIFICA- TION  ORONER'S USE	CAUSES STATE  27A. DECEDEN MONTH,  1 CERTIFY THAN 1 CERTIFY THAN STATED.  29. MANNER O suicide, homicide, pa  32. LOCATION	D. IT ATTENDED SINCE DEC DAY, YEAR  1 O	CEDENT LAST MONTH, DA  IM OCCURRED FROM THE Stural, accident, not be determine	FROM THE SEEN ALIVE V, YEAR CAUSES 30A. PLAC	4620 W. 28A. SIGNATURE	BEVEL	HYSIGIAN'S NA RLY BLVD.	LOS R DEPUTY	ANGELES,	SON PA CALIF.	28B. C	DATE SIG	NED JR
CIAN'S ERTIFICATION  ORONER'S USE ONLY  FUNERAL BIRECTOR	CAUSES STATE 27A. DECEDEN MONTH,  1 CERTIPY THAT THE HOUR, DAT STATED.  32. LOCATION  34A. DISPOSIT  CR/SCG	TI ATTENDED SINCE DEI DAY, YEAR  9 0 1 Fin MY OPINION DEAT 15 AND PLACE STATED 16 DEATH—Specify one: na 16 miner investigation of could in (STREET AND NUMBER TIONIS) 34B, PLACE SEA SCATTE SEA LONG	TH OCCURRED FROM THE STUDIES OF LOCATION CO.	TO SEEM ALIVE  SEEM ALIVE  O AT CAUSES  30A. PLACE  N AND CITY)  ISPOSITION—N.  SEA OFF CALIF.	4620 W. 4620 W	BEVER	HYSICIAN'S NA RLY BLVD.  OF CORONER O  33. DESCRI	LOS R DEPUTY  30B. II	DORRESS WILL ANGELES, CORONER  JUNEY AT WORK JUNEY AT WORK JUNEY OCCURRED (6	SON PACALIF.	OF INJURY	DATE SIGNATE S	NED JR
CIAN'S ERTIFICA- TION  DRONER'S USE ONLY  FUNERAL BIRECTOR AND LOCAL	CAUSES STATE  27A. DECEDEN MONTH,  1 CERTIFY THAI THE HOUR, DAI STATED.  29. MANNER O Suicide, homicide, po suicide, homicide, po SICAL DISPOSI  CR/SCG  PIERCE  PIERCE	TI ATTENDED SINCE DEL DAY, YEAR OF THE AND PLACE STATED FE DEATH—Specily one: namenag investigation of could r (STREET AND NUMBER STATE)  SEA JONG FUNCTION OF THE SPECIAL SPE	CEDENT LAST MONTH, DA MONTH, DA L/ 7 / TH OCCURRED FROM THE Stural, accident, not be determined for LOCATION LO	TO SEEM ALIVE  SEEM ALIVE  O AT CAUSES  30A. PLACE  N AND CITY)  ISPOSITION—N.  SEA OFF CALIF.	4620 W. BBA. SIGNATURE OF INJURY THE COLL LOS AND	BEVER	HYSICIAN'S NA RLY BLVD.  OF CORONER O  33. DESCRI	LOS R DEPUTY  30B. II	DORRESS WILL ANGELES, CORONER  JUNEY AT WORK JUNEY AT WORK JUNEY OCCURRED (6	SON PACALIF.	OF INJURY	DATE SIGN 31. HOL IN INJUR	NED
CIAN'S ERTIFICA. TION  DRONER'S USE ONLY  UNERAL IRECTOR AND LOCAL EGISTRAR  STATE	CAUSES STATE  27A. DECEDEN MONTH,  ( 2 / 1  I CERTIFY THAI  THE HOUR, DAI  STATED.  29. MANNER O  suide, homicide, po  suide, homicide, po  CR/SCG  36A. NAME OF	TI ATTENDED SINCE DEL DAY, YEAR OF THE AND PLACE STATED FE DEATH—Specily one: namenag investigation of could r (STREET AND NUMBER STATE)  SEA JONG FUNCTION OF THE SPECIAL SPE	CEDENT LAST MONTH, DA MONTH, DA MONTH, DA MONTH, DA MONTHE FROM THE STURING THE CONTROL OF FINAL DIESE AT SEACH, REPENSON AC LINGHAM	TO SEEM ALIVE  SEEM ALIVE  O AT CAUSES  30A. PLACE  N AND CITY)  ISPOSITION—N.  SEA OFF CALIF.	4620 W. 28A. SIGNATURE  THE COLL LOS ANG	BEVER	HYSICIAN'S NA RLY BLVD.  OF CORONER O  33. DESCRI	LOS R DEPUTY  30B. II	ANGELES, CORONER  JURY AT WORK JURY AT WORK JURY OCCURRED (6	SON PACALIF.  30C. DATE MONTE	OF INJURY OAV, YEAR	31. HOLIN INJUR	NED
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CIAN'S ERTIFICA. TION  DRONER'S USE ONLY  UNERAL RECTOR AND LOCAL RGISTRAR  STATE EGISTRAR  11 (REV. 1-5	CAUSES STATE  27A. DECEDEN MONTH.  1 CERTIFY THAT THE HOUR, DAT STATED.  32. LOCATION  34A. DISPOSI  CR/SCG  36A. NAME OF PIERCE O"CONNO  A.	TI ATTENDED SINCE DEI DAY, YEAR  9 0 10 IN MY OPINION DEAT 1E AND PLACE STATED 1F DEATH—Specify one: no 1ending investigation of could in (STREET AND NUMBER TIONIS) 34B, PLACE SCATTE SCATTE SCATTE SCATTE LONG 1F UNERAL DIRECTOR FOR BROS. CUNNI DR	CEDENT LAST MONTH, DA LA	TO SEEN ALIVE  SEEN ALIVE  CAUSES  30A. PLAC  M AND CITY)  SEA OFF  CALIF,  TING AS SUCH)  C.	4620 W. 28A. SIGNATUR  THE COLL LOS AND SOB. LICEN  D.  URES. WHITE	RESS AST GELES (15E NO. 3	HYSICIANS NA RLY BLVD.  OF CORONER OF  34C. DATE MO. C  OJAN-19  F.  STHER ALTERA  THIS IS A  FILED IN T  OF HEALT	ME AND LOS R DEPUTY 30B. II 30B. II 1991 OF LOGAL TRUE COUNTER K.	ANGELES, CORONER  JUNY AT WORK  JUNY OCCURRED TO  STA. SIGNATURE  NOT EMB.  REGISTRAR  F.  RETIFIED COPY TY OF LOS ANG CES IF IT BEA	SON PA CALIF.  30C. DATE MONTP VENTS WHICH OF EMBALM ALMED  CE  7 OF THIS RRS THIS	OF INJUSY CONTROL OF RESULTED  BE RESULTED  BE RESULTED  BE RESULTED  CRECORD  PARTMENT  SEAL IN	31. HOLIN INJUR	NED
CIAN'S ERTIFICA. TION  DRONER'S USE ONLY  UNERAL IRECTOR AND LOCAL IGISTRAR STATE EGISTRAR 11 (REV. 1-5	CAUSES STATE 27A. DECEDEN MONTH.  1 CERTIPY THAT THE HOUR, DAT STATED.  29. MANNER O SUICIDE, MONTH, CR/SCG 36A. NAME OF PIERCE O"CONNO A.  TATE OF C	TI ATTENDED SINCE DEL DAY, YEAR ON TO THE AND PLACE STATED FOR THE AND PLACE STATED SCATTING TO THE AND PLACE SCATTING S	CEDENT LAST MONTH, DA LA COMMINION OF FINAL DI CR AT SEACH. PERSON AC NIGHAM	TO SEEN ALIVE  SEEN ALIVE  CAUSES  30A. PLAC  M AND CITY)  SEA OFF  CALIF,  TING AS SUCH)  C.	4620 W. 28A. SIGNATUR  THE COLL LOS AND SOB. LICEN  D.  URES. WHITE	RESS AST GELES (15E NO. 3	HYSICIANS NA RLY BLVD.  OF CORONER OF  34C. DATE MO. C  OJAN-19  F.  STHER ALTERA  THIS IS A  FILED IN T  OF HEALT	ME AND LOS R DEPUTY 30B. II 30B. II 1991 OF LOGAL TRUE COUNTER K.	DORRESS WILL ANGELES, CORONER  JUNY AT WORK  JES NO JUNY OCCURRED (6  35A. SIGNATURE  NOT EMB  REGISTBAR  F.  ERTIFIED COPPTY OF LOS ANGES IF IT BEA	SON PA CALIF.  30C. DATE MONTP VENTS WHICH OF EMBALM ALMED  CE  7 OF THIS RRS THIS	OF INJUSY CAN DE RESULTED  BE RESULTED  BE RESULTED  CRECORD  PARTMENT  SEAL IN	31. HOLEN IN INJURENTE NUMBER ATTOM	NED
CIAN'S ERTIFICA. TION  DRONER'S USE ONLY  UNERAL IRECTOR AND LOCAL IGISTRAR STATE EGISTRAR 11 (REV. 1-5	CAUSES STATE 27A. DECEDEN MONTH.  1 CERTIPY THAT THE HOUR, DAT STATED.  29. MANNER O SUICIDE, MONTH, CR/SCG 36A. NAME OF PIERCE O"CONNO A.  TATE OF ( THE OF ( THE OF ( THE OF CONNO THE OF	TI ATTENDED SINCE DEL DAY, YEAR PO DAY, YEAR PO DAY, YEAR PO DE NI PE AND PLACE STATED FOR THE AND PLACE STATED SCATTING INVESTIGATION OF COURS OF THE PROPERTY OF THE PROPERT	CEDENT LAST MONTH, DA LA COMMINION OF FINAL DI CR AT S BEACH, PERSON AC NIGHAM	SEEN ALIVE  O AT CAUSES  O AT CAUSES  N AND CITY)  ISPOSITION—N. SEA OFF CALIF. THING AS SUCH)  C.  AKE NO ERAS	AME AND ADDIT THE COAL LOS ANGE IN THE COAL LOS ANGE IN THE COAL LOS ANGE IN THE COAL COAL COAL COAL COAL COAL COAL COAL	RESS AST GELES (38 No. 13 No.	HYSICIAN'S NA RLY BLVD.  OF CORONER OF  33. DESCRI  34C. DATE MO. E  OO JAN 191  E.  THIS IS A  FILED IN T  OF HEALT  PURPLE IN	ME AND LOS IN DEPUTY  JOB. IN JOAY, YEAR JOS LOS TRUE CHE COUNH SERVI	DDRESS WILL ANGELES, CORONER  JUNY AT WORK  JES NO JUNY OCCURRED (6  35A. SIGNATURE  NOT EMB  REGISTBAR  F.  Director of Heal	SON PA CALIF.  30C. DATE MONTP VENTS WHICH OF EMBALM ALMED  CE  7 OF THIS RRS THIS RRS THIS CHARLES DELEGE RRS THIS CHARLES DELEGE RRS THIS CHARLES DELEGE CHARLES DELEGE RRS THIS CHARLES DELEGE CHARLES	OF INJUSY CAR OF INJUSY YEAR OF INJUSY YEAR OF INJUSY TRACE OF THE OF INJUSY TRACE OF INJ	DATE SIGN 31. HOLD IN INJUR 5B. LICE NUM FRATION 1. 8 1	NED
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