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appy recording return to: Thainney a. Frake 1159 Grand Oce 1009 albany OR 97321	ACCIDENT [Soecily Yes or No] DATE OF INJURY (No, Day, Yr] POUR OF INJURY OF INJURY OCCURRED 26a NO 26b 266 M 26d M 26d NUJURY AT WORK PLACE OF INJURY—At nome, farm, street, factory. LOCATION STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE 26e 269 M 26d STREET OR R.F.D. NO. CITY OR TOWN STATE	ITE RECEIVED BY REGISTRAR (Mo., Day, Yr.) TE RECEIVED BY REGISTRAR (Mo., Day, Yr.) REGISTRAR January 7, 1980 [ENTER ONLY ONE CAUSE PERLINE FOR [a], [6], A COLLEGE OF: COLUMN COL	ا 10 ما استا ا	Albany General Hospital To Albany General Hospital To Albany General Hospital To Albany General Hospital To Albany General Hospital Spouse (if Married) Spouse (if Married) Spouse (if Married) Williams (in the set of Mind of Business or Industry NUMBER U. S. 10 Married 10 Married	2

STATE OF OREGON COUNTY OF LINN

This certifies that the foregoing is a reproduction of a record of death on file with the Linn County Department of Wealth Services.

Date The Statistics

NOT VALID WITHOUT RAISED SEAL OF LINN COUNTY DEPARTMENT OF HEALTH SERVICES

21244

9544

STATE OF OREGON, County of Klamath

Filed for record at request of:

Mountain Title Co on this 17th day of September A.D., 19 92 at 2:06 o'clock P.M. and duly recorded in Vol. M92 of Deeds Page 21243. Evelyn Bighn County Clerk
By Description Deputy.

Fee, \$15.00

STATE OF OREGON County of Deschutes
I hereby certify that the within instrument of writing was received for Record the 17 day of May A.D. 1982 at// M o'clock A M., and recorded in Book 364 on Page 630 Records