

CERTIFICATE OF VITAL RECORD

54193

COUNTY of MERCED

MERCED, CALIFORNIA

Vol. m92 Page 27552

CERTIFICATE OF DEATH 3-92-24-000331

STATE FILE NUMBER		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
1A. NAME OF DECEDENT—FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FAMILY)	2A. DATE OF DEATH—MO, DAY, YR
ROY	ELDER	ALLEN	May 5, 1992
4. RACE	5. HISPANIC—SPECIFY	6. DATE OF BIRTH—MO, DAY, YR	7. AGE IN YEARS
White	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	December 2, 1905	86
8. STATE OF BIRTH	9. CITIZEN OF WHAT COUNTRY	10A. FULL NAME OF FATHER	10B. STATE OF BIRTH
OK	USA	Rad Gus Allen	TX
11A. FULL MAIDEN NAME OF MOTHER	11B. STATE OF BIRTH	12. MILITARY SERVICE?	13. SOCIAL SECURITY NO.
Nellie Beavers	TX	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NONE	548 40 7782
14. MARRIAGE STATUS	15. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER MAIDEN NAME)	16A. USUAL OCCUPATION	16B. USUAL KIND OF BUSINESS OR INDUSTRY
Married	Opal Lois Taber	Armourment Spec.	Aircraft
16C. USUAL EMPLOYER	16D. YEARS IN OCCUPATION	16E. YEARS IN BUSINESS	16F. YEARS IN INDUSTRY
U.S. Air Force	15		
17. EDUCATION—YEARS COMPLETED	18A. RESIDENCE—STREET AND NUMBER OR LOCATION	18B. CITY	18C. ZIP CODE
8	425 N. 7th St.	Chowchilla	93610
19A. PLACE OF DEATH	19B. IF HOSPITAL, SPECIFY ONE: IP, ER/OP, DOA	19C. COUNTY	20. NAME, RELATIONSHIP, MAILING ADDRESS AND ZIP CODE OF INFORMANT
Merced Community Med. Ct.	IP	Merced	Wilma Dietrich - Dau
19D. STREET ADDRESS—STREET AND NUMBER OR LOCATION	19E. CITY	21. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)	22. WAS DEATH REPORTED TO CORONER? REFERRAL NUMBER
301 E. 13th St.	Merced	(A) Acute myocardial infarction	<input checked="" type="checkbox"/> YES 199-92 <input type="checkbox"/> NO
23. WAS BIOPSY PERFORMED?	24A. WAS AUTOPSY PERFORMED?	24B. WAS IT USED IN DETERMINING CAUSE OF DEATH?	25. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 21
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
26. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 21 OR 25? IF YES, LIST TYPE OF OPERATION AND DATE.	27A. DECEASED ATTENDED SINCE MONTH, DAY, YEAR	27B. SIGNATURE AND DEGREE OR TITLE OF CERTIFIER	27C. CERTIFIER'S LICENSE NUMBER
	May 4, 1992	Chenn-Yow Fuh, MD	A38529
27D. DATE SIGNED	27E. TYPE ATTENDING PHYSICIAN'S NAME AND ADDRESS	28A. SIGNATURE AND TITLE OF CORONER OR DEPUTY CORONER	28B. DATE SIGNED
5-5-92	Chenn-Yow Fuh, MD 3315 North M Street Merced		
29. MANNER OF DEATH—specify one: natural, accident, suicide, homicide, pending investigation or could not be determined	30A. PLACE OF INJURY	30B. INJURY AT WORK	30C. DATE OF INJURY MONTH, DAY, YEAR
		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
32. LOCATION (STREET AND NUMBER OR LOCATION AND CITY)	33. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)	34A. DISPOSITION(S)	34B. PLACE OF FINAL DISPOSITION—NAME AND ADDRESS
		Burial	Chowchilla Dist. Cem, Chowchilla
34C. DATE MO, DAY, YEAR	34D. SIGNATURE OF LOCAL REGISTRAR	35A. LICENSE NUMBER	35B. REGISTRATION DATE
5-8-92		3670	MAY 6 1992
30A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)	30B. LICENSE NO.	30C. SIGNATURE OF LOCAL REGISTRAR	30D. SIGNATURE OF LOCAL REGISTRAR
Worden Funeral Chapel	F-909		
STATE REGISTRAR	A.	B.	C.

VS-11 (REV. 1-90)

MAKE NO ERASURES, WHITEOUTS, OR OTHER ALTERATIONS

CERTIFIED COPY OF VITAL RECORDS

001035

STATE OF CALIFORNIA  
COUNTY OF MERCED

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

DATE ISSUED: November 9, 1992

This copy not valid unless prepared on engraved border displaying date and county seal.

MERCED COUNTY RECORDER

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Central Calif. Conf. Assn the 19th day of Nov. A.D., 19 92 at 3:48 o'clock P.M., and duly recorded in Vol. M92 of Deeds on Page 27552.

FEE \$10.00

Return: Central Calif. Conf. Assn of SDA  
P.O. Box 770, Clovis, Ca. 93613

Evelyn Biehn County Clerk

By *Douglas M. Mendenhall*