COUNTY OF SAN BERNARDINO DEPARTMENT OF PUBLIC HEALTH 351 MT. VIEW AVENUE, SAN BERNARDINO, CALIFORNIA 92415-0010 102 DEC 7 PH 2 56 Vol. 29 Page 28948

54864

CEPT	CIC A	TE (75 1	DEATH
CERT	$\Gamma : \bigcup \Gamma$		~: L	<i></i>

	STATE FILE NUMBER				OF CALIFORM ACK INK ONLY		-	LOCAL REGISTA	ATION DISTRICT	AND CERTIFICAT	E NUMBER
	1A. NAME OF DECEDEN	T-FRST	18. MIDDLE		1C. LAST (FAM					DAY, YR 2B. HO	
	(GIVEN)				Vauchn	<i>V</i> auchn		Sep. 27, 1991		2135	2135 F
	4. RACE		5. SPANISH/HISPANICSPECIFY		OF BIRTH-N	10, DAY, Y	, YR 7. AGE IN IF UNDER		1 YEAR IF UNDER	MINUTES	
	White		П	ī,	No Nov.	5, 1925		YEARS 65	i morins	HOURS	1
CEDENT	8. STATE OF 9. CITIZE	N OF WHAT	10A. FL	ILL NAME OF FATH		10B. STATE C	F 11A. F	ULL MAIDEN	NAME OF MO	THER 11	B. STATE O
RSONAL	BIRTH COUNT		- 1	and M. Olimorkona	a .	I BIRTH	- ום	unche M. W	ilcon	į	MI
DATA	MI USA	1.5		ur M. Olmstead	14. MARITAL	FTATUS	15 NAM	E OF SURVIVI	NG SPOUSE	F WIFE, ENTER M	
	12. MILITARY SERVICE?	.	. SOCIAL SECU	1.2	136.94 .7.	.			_		
. [NONE	383-22-9		Marrie			nd E. Vau			Countrace
Γ	16A. USUAL OCCUPATION	. 7	169. USUAL OR IND	KIND OF BUSINESS USTRY	18C. USUAL	EMPLOYER	161	D. YEARS IN OCCUPATION		ATION-YEARS	COMPLETES
	Homemaker	!	Own Ho		Self F	mployed		40		12	
	18A. RESIDENCE-STREET	AND NUMBER	R OR LOCATIO	N .			1	BB. CITY		18C. Z	IP CODE
USUAL	10210 Baseline Rd. #166							Alta Loma 91701			
SIDENCE	18D. COUNTY 18E. NUMBER OF YEARS 18F. STATE OR FOREIGN COUNTRY							20. NAME, RELATIONSHIP, MAILING ADDRESS AND ZIP CODE OF INFORMANT			
	Can Formandino			IN THIS COUNTY	L CA						
	19A, PLACE OF DEATH 19B, IF HOSPITAL SPECIFY 19C, COUNTY							Raymond E. Vaugin, Husband 10210 Baseline Rd. #156			
PLACE E		ONE: IP. ER/OP. DOA						Alta Lora, CA 91701			
OF	Community Conva			LOCATION 19E.		enarono	- 1	TIME INTERVAL		TH REPORTED TO	CORONER?
DEATH	190. STREET AUDHESS	SINEET AN	D NUMBER OR					ETWEEN ONSET		91-4953C	· D
	9620 Fremont Av	₽•	His		ntclair	10 ⁶ / ₂		AND DEATH			NO TITE
	21. DEATH WAS CAUSE				FOR A, B. AN	D C) - 단 : 근 :			23. WAS BIO	PSY PERFORMED?	
8	IMMEDIATE (A) ASP	iration	n pneum	onia 📜	ON THE VIEW	POS P.	₽	3 days	YES	Z No	
CAUSE	8	12.5	and the second			36		40 -	24A. WAS AL	JTOPSY PERFORM	ED?
OF DEATH	Bil:	ateral	nemispl	neric CVA	38.87亿万			10 days	YES		
	1 502 10 }		in the second							JSED IN DETERMIN	NING CAUSE
	DUE TO (C) HYP	ertensi	ion	1.45		Fig.		20 yrs !	YES	~."" No	
	25. OTHER SIGNIFICANT C			DEATH BUT NOT REL	ATED TO CAUSE	SIVEN IN 21 2	6. WAS OF	ERATION PERFO	RMED FOR ANY	CONDITION IN ITEM	21 OR 257
ı	None			Fig. 1		a de	IF YES, L	IST TYPE OF OPE	RATION AND DA	te. No	
	I CERTIFY THAT TO THE BE	CT DE 140 170	OWI FOCE DO	TU . 2715 etc	TIRE AND DECRE	E OR TITLE OF	PHYSICIAN	27C, PHYSIC	AN'S LICENSE !	NUMBER 27D. D	ATE SIGNED
PHYSI-	OCCURRED AT THE HOUR.	DATE AND PL	ACE STATED F	ROM THE		lett !		A04808			0/91
CIAN'S	CAUSES STATED. 27A. DECEDENT ATTENDED	SINCE DECE	DENT LAST SE	EN ALIVE	2 S 3 S 5	Grand Control of the		1		, ,,,,	
RTIFICA- TION	MONTH, DAY, YEAR	1 1	MONTH, DAY, Y	EAR 27E. TYPE	ATTENDING PH						
110N	9/19/91	1 2	9/25/91						/erae, N	ontclair	
	I CERTIFY THAT IN MY OF	INION DEATH	OCCURRED A		TURE AND TITLE	OF CORONER OF	R DEPUTY	CORONER		288. DAT	E SIGNED
	THE HOUR DATE AND PLA	CE STATED F	PROM THE CAL) SES	3					i	
DRONER'S	29. MANNER OF DEATH-	specify one: natur	ral, accident,	30A. PLACE OF INJUI	RY		309. 1	NJURY AT WOR	BOC. DATE	OF INJURY 31	. HOUR
USE	suicide, homicide, pending investiga	tion or court not	De Determinen					YES NO	t		
ONLY	32. LOCATION (STREET AN	NUMBER OF	R LOCATION A	ND CITYI	Jac said in	33. DESCRIE			D (EVENTS WH	CH RESULTED IN	INJURYI
	<u> </u>							F. *			
			OF FINAL DISP	OSITION-NAME AND A	DDRESS	34C. DATE		35A. SIGNATI	IRE OF EMBALI	KER 359	LICENSE
	34A. DISPOSITIONIS	34B. PLACE C		and the second of the second	*	I MO D	AY, YEAR	1.0	-		6787
				1240 M C St	Ontamio (CA			14:00	10 auce	i	
	HU :	Bellevue	Mauso.	1240 W. G St.		10/1/	1991		O. Cree	38. REGISTRA	TION DAT
LOCAL	BU 36A. NAME OF FUNERAL D	Bellevue	Mauso.	G AS SUCH) 36B. LIC	CENSE NO. 37	10/1/	1991 of LOCA	L REGISTRAR		38. REGISTRA	
AND	BU 36A. NAME OF FUNERAL D Draper Mortuary	Bellevue	MEUSO. PERSON ACTIN	G AS SUCH) 36B. LIG	CENSE NO. 37	10/1/	1991 of LOCA	L REGISTRAR tersen, M	.D. le	Sep. 30	
IRECTOR AND LOCAL	BU 36A. NAME OF FUNERAL D	Bellevue	Mauso.	G AS SUCH) 36B. LIC	CENSE NO. 37	10/1/	1991 of LOCA	L REGISTRAR	.D. le	38. REGISTRA	
IRECTOR AND LOCAL EGISTRAR STATE	BU 36A. NAME OF FUNERAL D Draper Mortuary	Bellevue	Mauso. PERSON ACTIN	392	CENSE NO. 37	10/1/ SIGNATURE (1991 of LOCA R. Peti	L REGISTRAR tersen, M	.D. le	Sep. 30	
IRECTOR AND LOCAL EGISTRAR	BU 36A. NAME OF FUNERAL D Draper Mortuary A. 3-10-2	Bellevue	Mauso. PERSON ACTIN	G AS SUCH) 36B. LIG	CENSE NO. 37	10/1/ SIGNATURE (1991 of LOCA R. Peti	L REGISTRAR tersen, M	.D. le	Sep. 30	
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AND LOCAL EGISTRAR STATE EGISTRAR	BU 36A. NAME OF FUNERAL D Drager Mortuary A. 2-10-2 89)	Bellevue	MAUSO. PERSON ACTIN C. MAKE	392	O. HITEOUTS, OR C	10/1/ SIGNATURE (George]	1991 of LOCA R. Peti	L REGISTRAR tersen, M	.D. le	Sep. 30	
IRECTOR AND LOCAL EGISTRAR STATE EGISTRAR 11 (REV. 3-8	BU 36A. NAME OF FUNERAL D Draper Mortuary A. 3-10-2 899)	Bellevie	MAUSO. PERSON ACTIN C. MAKE	G AS SUCH) 36B. LIC 392 D E NO ERASURES, WH	O. STEENSE NO. ST.	George I	1991 of LOCA R. Peti	tersen, M	.D. le	Sep. 30	
IRECTOR AND LOCAL EGISTRAR STATE EGISTRAR	BU 36A. NAME OF FUNERAL D Draper Mortuary A. 3-10-2 B99) 34.1 STATEO	Bellevie inector (on)	MAUSO. PERSON ACTIN C. MAKI	G AS SUCH) 36B, LIC 392 E NO ERASURES, WI-	O. STEENSE NO. ST.	George I	1991 of LOCA R. Peti	tersen, M	.D. le	Sep. 30	
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