

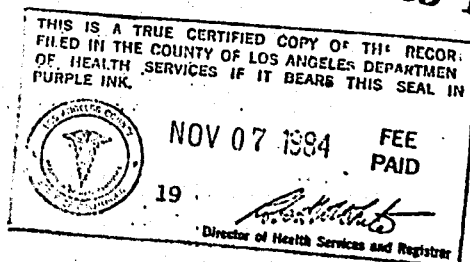
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CERTIFICATE OF DEATH STATE OF CALIFORNIA

STATE FILE NUMBER		1A. NAME OF DECEDENT—FIRST		1B. MIDDLE		1C. LAST		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER			
		WILLIAM		W.		GLEASON		2A. DATE OF DEATH (MONTH, DAY, YEAR) 2B. HOUR			
3. SEX		4. RACE/ETHNICITY		5. SPANISH/HISPANIC		6. DATE OF BIRTH		7. AGE		IF UNDER 1 YEAR	
Male		White/American		NO		February 22, 1928		56 YEARS		MONTHS DAYS HOURS MINUTES	
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)		9. NAME AND BIRTHPLACE OF FATHER		10. BIRTH NAME AND BIRTHPLACE OF MOTHER		11. CITIZEN OF WHAT COUNTRY		12. SOCIAL SECURITY NUMBER		13. MARITAL STATUS	
Ohio		Hal Gleason-Ohio		Caretta S. Watson-Ohio		U. S. A.		296-22-9809		Married	
15. PRIMARY OCCUPATION		16. NUMBER OF YEARS THIS OCCUPATION		17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)		14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)		18. KIND OF INDUSTRY OR BUSINESS		19. CITY OR TOWN	
Corporate Security		13		Bank of America		Ruth Walker		Bank Security		Burbank	
19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)		19B. COUNTY		19C. CITY OR TOWN		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP		21. TYPE OF OPERATION		22. DATE SIGNED	
2221 Monterey Avenue		Los Angeles		Burbank		Ruth Gleason-Wife 2221 Monterey Avenue Burbank, California 91506		Media Transcription		1-12-84	
21A. PLACE OF DEATH		21B. COUNTY		21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)		21D. CITY OR TOWN		23. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 22A		24. WAS DEATH REPORTED TO CORONER?	
St. Joseph Medical Center		California		501 S. Buena Vista Street		Burbank		None		No	
22. DEATH WAS CAUSED BY IMMEDIATE CAUSE		(A) Metastatic Carcinoma of Lung		(B) Due to, or as a consequence of		(C) Due to, or as a consequence of		25. WAS BIOPSY PERFORMED?		26. WAS AUTOPSY PERFORMED?	
		10 mri						Yes		No	
28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES I ATTENDED DECEDENT SINCE I LAST SAW DECEDENT ALIVE (ENTER MO, DA, YR.)		28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE		28C. DATE SIGNED		28D. PHYSICIAN'S LICENSE NUMBER		29. SPECIFY ACCIDENT, SUICIDE, ETC.		30. PLACE OF INJURY	
1-13-84 11-6-84		Gilbert J. Hum, 2625 W. Alameda Ave. #326, Burbank, Ca.		11-6-84		A-1857					
31. INJURY AT WORK		32A. DATE OF INJURY—MONTH, DAY, YEAR		32B. HOUR		33. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)		35. CORONER—SIGNATURE AND DEGREE OR TITLE	
										35C. DATE SIGNED	
36. DISPOSITION		37. DATE—MONTH, DAY, YEAR		38. NAME AND ADDRESS OF CEMETERY OR CREMATORY		39. EMBALMER'S LICENSE NUMBER AND SIGNATURE		40A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)		40B. LICENSE NO.	
Burial		Nov. 12, 1984		Valhalla Memorial Park, N. Hollywood, Ca.		James E. Austin		Pierce Brothers Valhalla		F-916	
41. LOCAL REGISTRAR—SIGNATURE		42. DATE ACCEPTED BY LOCAL REGISTRAR		43. FEE PAID		44. DIRECTOR OF HEALTH SERVICES AND REGISTRAR		45. RETURN TO		46. RETURN TO	
Ruth I. Gleason		NOV 07 1984		FEE PAID		19					



STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Ruth I. Gleason
 of Feb. A.D., 19 93 at 11:56 o'clock A.M., and duly recorded in Vol. M93
 of Deeds on Page 3189

FEE \$10.00

Return: Ruth I. Gleason
 2221 Monterey Ave., Burbank, Ca. 91506

Evelyn Biehn
 By Pauline M. Muelen
 County Clerk