CERTIFICATION OF VITAL RECORD

07-09-93A09:49 RCVD

County of Ventura

64329

800 SOUTH VICTORIA AVENUE Vol M93 Page 16498

VENTURA, CALIFORNIA 93009

CERTIFICATE OF DEATH 5600 0939

STATE OF CALIFORNIA

STATE FILE NUMBER — LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

DECEDENT PERSONAL DATA

1A. NAME OF DECEDENT—FIRST	1B. MIDDLE	1C. LAST	2A. DATE OF DEATH (MONTH, DAY, YEAR)	2B. HOUR
Mervin	Oliver	Teig	April 1, 1986	2338

3. SEX	4. RACE/ETHNICITY	5. SPANISH/HISPANIC	6. DATE OF BIRTH	7. AGE	IF UNDER 1 YEAR MONTHS	IF UNDER 1 YEAR DAYS	IF UNDER 24 HOURS HOURS	IF UNDER 24 HOURS MINUTES
Male	White	NO	April 24, 1913	72 YEARS	—	—	—	—

8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)	9. NAME AND BIRTHPLACE OF FATHER	10. MAIDEN NAME AND BIRTHPLACE OF MOTHER
MN	Carl John Teig — IL	Julie Berve — IL

11A. CITIZEN OF WHAT COUNTRY	11B. IF DECEASED WAS EVER IN MILITARY GIVE DATES OF SERVICE	12. SOCIAL SECURITY NUMBER	13. MARITAL STATUS	14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)
U.S.A.	19 UKN TO 19 UKN	545 38 8859	Married	Angelina Hernandez

15. PRIMARY OCCUPATION	16. NUMBER OF YEARS THIS OCCUPATION	17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)	18. KIND OF INDUSTRY OR BUSINESS
Custodian	20	Ventura Unified Sch. Dist.	Education

USUAL RESIDENCE

19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)	19B.	19C. CITY OR TOWN
129 Don Filipe Way		Ojai

19D. COUNTY	19E. STATE	20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP
Ventura	CA	Angelina Teig 129 Don Felipe Way Ojai, CA 93023

PLACE OF DEATH

21A. PLACE OF DEATH	21B. COUNTY	21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)	21D. CITY OR TOWN
Ojai Hospital	Ventura	1306 Maricopa Highway	Ojai

CAUSE OF DEATH

22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)

		INTERVAL BETWEEN ONSET AND DEATH
IMMEDIATE CAUSE (A)	Metastatic Pulmonary Carcinoma	MONTHS
CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST. DUE TO, OR AS A CONSEQUENCE OF (B)	— — —	— —
DUE TO, OR AS A CONSEQUENCE OF (C)	— — —	— —

24. WAS DEATH REPORTED TO CORONER?	25. WAS BIOPSY PERFORMED?	26. WAS AUTOPSY PERFORMED?
NO	Yes	No

23. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 22A: Arteriosclerotic Heart Disease

27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION: Biopsy DATE: June 1985

PHYSICIAN'S CERTIFICATION

28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. I ATTENDED DECEDENT SINCE (ENTER MO. DA. YR.)	I LAST SAW DECEDENT ALIVE (ENTER MO. DA. YR.)	28B. PHYSICIAN (SIGNATURE AND DEGREE OR TITLE)	28C. DATE SIGNED	28D. PHYSICIAN'S LICENSE NUMBER
7-10-73	4-1-86	Richard H. Gordinier, M.D.	4/3/86	G-7890

28E. TYPE PHYSICIAN'S NAME AND ADDRESS: Richard H. Gordinier, M.D. 204 Pirie Rd. Ojai, CA

INJURY INFORMATION

29. SPECIFY ACCIDENT, SUICIDE, ETC.	30. PLACE OF INJURY	31. INJURY AT WORK	32A. DATE OF INJURY—MONTH, DAY, YEAR	32B. HOUR
N/A	— — —	— —	— — —	— —

33. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN): — — —

34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY): — — —

CORONER'S USE ONLY

35A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. AS REQUIRED BY LAW I HAVE HELD AN (INQUEST-INVESTIGATION)	35B. 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
Burial	April 4, 1986	Ivy Lawn Cemetery - Ventura, CA	4383 Harold F. Clausen

40A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)	40B. LICENSE NO.	41. LOCAL REGISTRAR—SIGNATURE	42. DATE ACCEPTED BY LOCAL REGISTRAR
Clausen Funeral Home	F-731	Sarah L. Miller, M.D.	APR 03 1986

STATE REGISTRAR	A.	B.	C.	D.	E.	F.

VS-11 (1-83)

956894

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA } SS.
COUNTY OF VENTURA }

DATE ISSUED JUN 09 1993

This is a true and exact reproduction of the document officially registered and placed on file with the VENTURA COUNTY RECORDER

Richard D. Dean
RICHARD D. DEAN
COUNTY RECORDER

This copy not valid unless prepared on engraved border displaying seal and signature of County Recorder.

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Angie E. Teig the 9th day of July A.D., 19 93 at 9:49 o'clock A M., and duly recorded in Vol. M93, of Deeds on Page 16498.

Evelyn Biehn County Clerk

FEE $10.00 By Deputy

Return: David A. Wood, Box 538, Waterford, Ca. 95386