71486

11-18-93P01:22 RCVD

Vol m93 Page 30549

ROLL 50 IMAGE 716

K-44909

STATE OF NEVADA — DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH — SECTION OF VITAL STATISTICS
CERTIFICATE OF DEATH

LOCAL FILE NUMBER 1191

STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK

DECEDENT

1. DECEASED—NAME First: Ernest Middle: Nye Last: SCRUGGS
2. DATE OF DEATH (Month, Day, Year): August 23, 1981
3a. COUNTY OF DEATH: Washoe
3b. CITY, TOWN, OR LOCATION OF DEATH: Reno
3c. HOSPITAL OR OTHER INSTITUTION—Name (If not in either, give street and number): Washoe Medical Center
3d. If Hospital or Institution was Public, Private (Specify): Inpatient
4a. RACE—(e.g., White, Black, American Indian, etc.) (Specify): White
4b. ETHNIC: Irish
5a. AGE—Last Birthday (Years): 71
5b. UNDER 1 YEAR MOS. DAYS:
5c. UNDER 1 DAY HOURS MINS:
6. DATE OF BIRTH (Mo., Day, Yr.): July 30, 1910
7. SEX: Male
8. STATE OF BIRTH (If not U.S.A., name country): West Virginia
9. CITIZEN OF WHAT COUNTRY: USA
10. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify): Married
11. SURVIVING SPOUSE (If wife, give maiden name): Edith F. Meeks
12. WAS DECEASED EVER IN U.S. ARMED FORCES? (Specify Yes or No): Yes
13. SOCIAL SECURITY NUMBER: 225-10-7682
14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired): Commissioner of Food & Drugs
14b. KIND OF BUSINESS OR INDUSTRY: State of Nevada

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS

15a. RESIDENCE—STATE: Nevada
15b. COUNTY: Washoe
15c. CITY, TOWN, OR LOCATION: Reno
15d. STREET AND NUMBER: 682 W. Pueblo St.
15e. INSIDE CITY LIMITS (Yes or No): Yes

PARENTS

16. FATHER—NAME First: Ernest Middle: Nye Last: Scruggs, Sr.
17. MOTHER—MAIDEN NAME First: Lucy Middle: Last: Campbell

DISPOSITION

18a. INFORMANT—NAME (Type or Print): Edith Scruggs
18b. MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip): 682 W. Pueblo St., Reno, Nevada
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify): Burial
19b. CEMETERY OR CREMATORY—NAME: Our Mother of Sorrows Cem.
19c. LOCATION City or Town, State: Reno, Nevada
20. FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such): [signature]
NAME AND ADDRESS OF FACILITY: Walton Funeral Home, 875 W. Second St, Reno, Nevada

CERTIFIER

To be Completed by CERTIFYING PHYSICIAN Only

21a. To the best of my knowledge death occurred at the time, date and place and due to the cause(s) stated.
(Signature and Title): David P. Berry MD
21b. DATE SIGNED (Mo., Day, Yr.): 8/24/81
21c. HOUR OF DEATH: 7:06 PM
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print):

To be completed by MEDICAL EXAMINER or Coroner Only

22a. On the basis of examination and/or investigation in my opinion death occurred at the time, date and place and due to the cause(s) stated
(Signature and Title):
22b. DATE SIGNED (Mo., Day, Yr.):
22c. HOUR OF DEATH:
22d. PRONOUNCED DEAD (Mo., Day, Yr.) ON:
22e. PRONOUNCED DEAD (Hour) AT:

23. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, MEDICAL EXAMINER OR CORONER) (Type or Print): 900 Ryland, Reno, Nevada, David P. Berry, M. D.

REGISTRAR

24a. (Signature): Aurelia Sheen Deputy Registrar
24b. DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.): August 25, 1981

CAUSE OF DEATH

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)

PART I
(a) Cardio pulmonary arrest — DUE TO, OR AS A CONSEQUENCE OF:
(b) Metastatic adenocarcinoma of the prostate — DUE TO, OR AS A CONSEQUENCE OF:
(c)
Interval between onset and death

PART II
OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not related to cause given in PART I (a): Hypertension

26. AUTOPSY (Specify Yes or No): No
27. WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER? (Specify Yes or No): No

28a. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)
28b. DATE OF INJURY (Mo., Day, Yr.)
28c. HOUR OF INJURY
28d. DESCRIBE HOW INJURY OCCURRED
28e. INJURY AT WORK (Specify Yes or No)
28f. PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify)
28g. LOCATION STREET OR R.F.D. No. CITY OR TOWN STATE

Return to:
Michelle Johnson
682 W. Pueblo St.
Reno, NV 89509

B184UP0913

No 27124

30550

B1840P0914

When Recorded Mail To:

Michelle Scruggs Johnson
682 W. Pueblo St.
Reno, Nevada 89509

AUG 27 1981

STATE OF OREGON,
County of Klamath ss.

Filed for record at request of:

Klamath County Title

on this 18th day of Nov. A.D. 19 93
at 1:22 o'clock P M and duly recorded
in Vol. M93 of Deeds Page 30549

Evelyn Biehn County Clerk

By _____ Deputy.

Fee, $15.00

B1840P0914

FIRST CENTENNIAL
TITLE CO. OF NEVADA

MAR 8 1983
OFFICIAL RECORDS
WASHOE COUNTY, NEV.
RECORD REQUESTED BY

FEE 6.00 DEP
COUNTY RECORDER