

90486

CERTIFICATE OF DEATH
STATE OF CALIFORNIA
K-2910

Vol 194 Page 33900

STATE FILE NUMBER		LOCAL REGISTRATION DISTRICT AND CENSUS DISTRICT	
1A. NAME OF DECEDENT—FIRST		1B. MIDDLE	
Kenneth		Lars	
3. SEX	4. RACE	5. ETHNICITY	6. DATE OF BIRTH
Male	White	American	January 23, 1931
7. AGE		8. BIRTH NAME AND BIRTHPLACE OF MOTHER	
51		Vina Kisting - Iowa	
9. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)		10. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)	
Iowa		Never Married	
11. CITIZEN OF WHAT COUNTRY		12. SOCIAL SECURITY NUMBER	
U.S.A.		484-4-2288	
13. PRIMARY OCCUPATION		14. KIND OF INDUSTRY OR BUSINESS	
Mechanic		Service Station	
15. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)		16. CITY OR TOWN	
2814 West Victory Boulevard		Burbank	
17. COUNTY		18. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP	
Los Angeles		Vina Nielsen - Mother	
19. PLACE OF DEATH		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP	
2814 W. VICTORY #A		2814 West Victory Boulevard	
21. STREET ADDRESS (STREET AND NUMBER OR LOCATION)		Burbank, California	
22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)		23. WAS DEATH REPORTED TO CORONER?	
(A) ACUTE MYOCARDIAL INFARCTION		82-3739	
(B) ATHEROSCLEROTIC CARDIOVASCULAR DISEASE		25. WAS DECEASED PERSONAL?	
(C)		NO	
26. WAS AUTOPSY PERFORMED?		YES	
27. OTHER CONDITIONS CONTRIBUTING BUT NOT HELD TO BE IMMEDIATE CAUSE OF DEATH		28. WAS OPERATION PERFORMED FOR NEXT EXAMINATION IN REPLY TO DEATH?	
29. TYPE OF OPERATION		NO	
30. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE		31. DATE SIGNED	
32. TYPE PHYSICIAN		33. PHYSICIAN'S LICENSE NUMBER	
34. NAME AND ADDRESS		35. DATE SIGNED	
36. SPECIFY ACCIDENT, SUICIDE, ETC.		37. PLACE OF INJURY	
38. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		39. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH PRECEDED INJURY)	
40. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FOR THE CAUSES STATED.		41. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FOR THE CAUSES STATED.	
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STATE OF OREGON,
County of Klamath ss.

Filed for record at request of:

Klamath County Title Co

on this 1st day of Nov A.D. 1994
at 1:34 o'clock P.M. and duly recorded
in Vol M94 of Deeds Page 33900.

Evelyn Biehn County Clerk

By Debra M. Biehn Deputy.

Fee, \$10.00

Return: Klamath Co. Title Co

THIS IS A TRUE, CERTIFIED COPY OF THE RECORD
FILED IN THE COUNTY OF LOS ANGELES DEPARTMENT
OF HEALTH SERVICES IF IT BEARS THIS SEAL IN
PURPLE INK.

MAR 24 1992

Director of Health Services and Registrar

01-3-4-700