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STATE OF OREGON — HEALTH DIVISION
Vital Statistics Section

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CERTIFICATE OF DEATH

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Local File Number — State File Number

DECEASED—NAME (First / Middle / Last)	DATE OF DEATH (month, day, year)
1. Hoyt James Buckridge	2. September 22, 1977

RACE (White, Negro, American Indian, etc. (specify))	SEX	AGE—Last birthday (years)	Under 1 year: mos. / days	Under 1 day: hours / min.	DATE OF BIRTH (month, day, year)
3. white	4. male	5a. 64	5b.	5c.	6. February 18, 1913

COUNTY OF DEATH	CITY, TOWN, OR LOCATION OF DEATH	Inside City Limits (specify yes or no)	HOSPITAL OR OTHER INSTITUTION—NAME (if not in either, give street and number)
7a. Lane	7b. Eugene	7c. yes	7d. DOA Sacred Heart Hospital

STATE OF BIRTH (If not in U.S.A., name country)	CITIZEN OF WHAT COUNTRY	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (specify)	NAME OF SPOUSE
8. Oklahoma	9. USA	10. married	11. Margaret Buckridge

SOCIAL SECURITY NUMBER	USUAL OCCUPATION (give kind of work done during most of working life, even if retired)	KIND OF BUSINESS OR INDUSTRY
12. 541-10-4865	13a. Operator of automatic stacker	13b. Paper Manufacturing Company

RESIDENCE—STATE	COUNTY	CITY, TOWN, OR LOCATION	Inside City Limits (specify yes or no)	STREET AND NUMBER OR R.F.D.
14a. Oregon	14b. Lane	14c. Noti	14d. no	14e. 22487 Highway 126

FATHER—NAME (first middle last)	MOTHER—Maiden Name (first middle last)	INFORMANT—NAME and relationship to deceased
15. James William Buckridge	16. Annie Eliza Sickles	17. Margaret Buckridge, wife

PART I. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), and (c)) — approximate interval between onset and death

18. immediate cause
(a) Acute myocardial infarction
due to, or as a consequence of:
(b) ASHD
due to, or as a consequence of:
(c)

Conditions, if any, which gave rise to immediate cause (a), stating the underlying cause last

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PART II. OTHER SIGNIFICANT CONDITIONS: conditions contributing to death but not related to cause given in Part I (a)

AUTOPSY (yes or no)	IF YES were findings considered in determining cause of death
19a. no	19b.

ACCIDENT (specify yes or no)	DATE OF INJURY (month, day, year)	HOUR	HOW INJURY OCCURRED (enter nature of injury in part I or part II, item 18)
20a. NO	20b.	20c. M.	20d.

INJURY AT WORK (specify yes or no)	PLACE OF INJURY at home, farm, street, factory, office bldg., etc. (specify)	LOCATION (street or R.F.D. No., city or town, county, state)
20e.	20f.	20g.

CERTIFICATION—PHYSICIAN: I attended the deceased from:		And Last Saw Him/Her Alive on:		I Did/Did Not view the body after death (specify)	DEATH OCCURRED (hour)	
month / day / year	month / day / year	month / day / year				
21. 7 11 77	TO 9 21 77	7 11 77		Not	5:46 A M.	at the place, on the date, and, to the best of my knowledge, due to the cause(s) stated.

PHYSICIAN—SIGNATURE	NAME (type or print) degree or Title	DATE SIGNED (month, day, year)
22a. [signature]	22b. Foster E. Keene, M. D., P.C.	22c. 9/22/77

MAILING ADDRESS—PHYSICIAN (street / city or town / state / zip)			
23. 1180 Patterson	Eugene	Oregon	97401

BURIAL, CREMATION, REMOVAL, ALAUS. (specify)	CEMETERY OR CREMATORY—NAME	LOCATION (city or town / state)		DATE (mo., day, year)
24a. Burial	24b. Lane Memorial Gardens	24c. Eugene	Oregon	24d. 9/26/77

FUNERAL DIRECTOR—SIGNATURE	FUNERAL HOME—NAME AND ADDRESS (street, city or town, state, zip)
25a. [signature] Mack Moore	25b. Chapel of Memories, 3745 W. 11th, Eugene, OR 97402

REGISTRAR—SIGNATURE	DATE RECEIVED BY LOCAL REGISTRAR	DATE RECEIVED BY STATE REGISTRAR
26a. [signature] Hale Longton, Deputy	25b. Sept. 23, 1977	27.

RESERVED FOR REGISTRAR'S USE
28.

VS-2 R-69

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STATE OF OREGON, COUNTY OF LANE

DATE September 23, 1977

THIS CERTIFIES THAT THE FOREGOING IS A CORRECT AND COMPLETE TRANSCRIPT OF A RECORD OF DEATH ON FILE WITH THE LANE COUNTY COMMUNITY HEALTH AND SOCIAL SERVICES DEPARTMENT

A. K. Hottle, Director
Registrar of Vital Statistics

(SEAL)

By Hale Longton, Deputy

Return to: Western Pioneer
1200 Executive Parkway, Ste 100
Eugene, OR 97740

NOT VALID WITHOUT RAISED SEAL OF VITAL STATISTICS, STATE OF OREGON

STATE OF OREGON: COUNTY OF KLAMATH : ss.

Filed for record at request of First American Title the 13th day of March A.D., 19 98 at 11:48 o'clock A M., and duly recorded in Vol. M98, of Deeds on Page 8219.

Bernetha G. Letsch, County Clerk

FEE $10.00

By Pauline Musselman