

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

DEATH REPORT FORM

12-121 CERTIFICATE OF DEATH

BOOK 147 PAGE 827

| | | | | | |
|---|---|---|---|---|---|
| 1. NAME Dolores | 2. MIDDLE NAME Yvonne | 3. GENDER BEACLE | 4. SEX Female | 5. DEATH DATE AND TIME May 12, 1983 | 6. DEATH DATE AND TIME May 12, 1983 |
| 7. AGE AT DEATH 60 | 8. UNDER 1 YEAR No | 9. INJURY DAY Aug 8, 1982 | 10. INJURY MONTH August | 11. INJURY YEAR 1982 | 12. INJURY PLACE Coos Bay, Or |
| 13. DEATH PLACE Vancouver | 14. DEATH DATE AND TIME May 12, 1983 | 15. DEATH MONTH May | 16. DEATH YEAR 1983 | 17. DEATH HOUR 12:00 PM | 18. DEATH MINUTE 00 |
| 19. DEATH STATUS Married | 20. SURVIVING SPOUSE'S NAME Arthur C. Beagle | 21. SURVIVING SPOUSE'S ADDRESS 7704 NE 61st Ave | 22. SURVIVING SPOUSE'S CITY/TOWN/STATE Vancouver, WA | 23. SURVIVING SPOUSE'S ZIP CODE 98661 | 24. SURVIVING SPOUSE'S GENDER Male |
| 25. MARITAL STATUS Married | 26. MARRIED SINCE Accountant | 27. MARRIED SINCE 7704 NE 61st Ave | 28. MARRIED SINCE Vancouver, WA | 29. MARRIED SINCE 98661 | 30. MARRIED SINCE White |
| 31. MARRIED SINCE 5/14/83 | 32. MARRIED SINCE Uniservice Crematorium | 33. MARRIED SINCE 7704 NE 61st Ave | 34. MARRIED SINCE Vancouver, WA | 35. MARRIED SINCE 98661 | 36. MARRIED SINCE White |
| 37. MARRIED SINCE 5/14/83 | 38. MARRIED SINCE Memorial Cremation Mortuary | 39. MARRIED SINCE 7704 NE 61st Ave | 40. MARRIED SINCE Vancouver, WA | 41. MARRIED SINCE 98661 | 42. MARRIED SINCE White |
| 43. DEATH DATE AND TIME 5/12/83 | 44. PLACE OF DEATH 1225 | 45. DATE AND TIME 5/12/83 | 46. PLACE OF DEATH 1225 | 47. DATE AND TIME 5/12/83 | 48. PLACE OF DEATH 1225 |
| 49. NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER Paul Wallace, M.D. | 50. NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER 3914 N. Kaiser Center Dr. Portland, OR 97227 | 51. NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER None | 52. NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER None | 53. NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER None | 54. NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER None |
| 55. DISEASE, INJURY, OR COMPLICATION WHICH CAUSED THE DEATH Heart attack | 56. DISEASE, INJURY, OR COMPLICATION WHICH CAUSED THE DEATH Heart attack | 57. DISEASE, INJURY, OR COMPLICATION WHICH CAUSED THE DEATH Heart attack | 58. DISEASE, INJURY, OR COMPLICATION WHICH CAUSED THE DEATH Heart attack | 59. DISEASE, INJURY, OR COMPLICATION WHICH CAUSED THE DEATH Heart attack | 60. DISEASE, INJURY, OR COMPLICATION WHICH CAUSED THE DEATH Heart attack |
| 61. OTHER IMPORTANT CONDITIONS - CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE UNDERLYING CAUSE OF DEATH None | 62. OTHER IMPORTANT CONDITIONS - CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE UNDERLYING CAUSE OF DEATH None | 63. OTHER IMPORTANT CONDITIONS - CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE UNDERLYING CAUSE OF DEATH None | 64. OTHER IMPORTANT CONDITIONS - CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE UNDERLYING CAUSE OF DEATH None | 65. OTHER IMPORTANT CONDITIONS - CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE UNDERLYING CAUSE OF DEATH None | 66. OTHER IMPORTANT CONDITIONS - CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE UNDERLYING CAUSE OF DEATH None |
| 67. DATE BURIED, BURNED, OR DESTROYED 5/13/83 | 68. INJURY DATE AND TIME 5/12/83 | 69. HOUR OF DEATH 12:00 PM | 70. DESCRIBE HOW DEATH OCCURRED By heart attack | 71. DEATH NUMBER 147-827 | 72. DATE RECEIVED BY RECORDER May 14, 1983 |
| 73. PLACE AT HOME 7704 NE 61st Ave | 74. PLACE OF DEATH - AT HOME, PARK, STREET, ETC. 1225, NE 61st Ave | 75. STREET OR P.O. BOX NO., CITY/TOWN, STATE Vancouver, WA | 76. RECORDER'S SIGNATURE Right, ms. | 77. APPROVED BY Right, ms. | 78. DATE APPROVED May 14, 1983 |

SEE INSTRUCTIONS ON BACK AND HANDBOOK

RECODER'S NOTE:
NOT AN ORIGINAL DOCUMENT

CON 100-025 FORM 147 CERTIFICATE OF DEATH

FORM 147-827