STATE OF OREGON
OREGON STATE HEALTH DIVISION
DEPARTMENT OF HUMAN RESOURCES
Vital Records Unit

CERTIFICATE OF DEATH

85-002107
BOOK 134 PAGE 377

F15905 "10" — Local File Number — State File Number

1 DECEASED NAME (First) Gertrude	(Middle) Glenna	(Last) Tershin	2 DATE OF DEATH (month, day, year) January 23, 1985
3 RACE White	4 SEX Female	5a AGE (Last birthday) 80	6 DATE OF BIRTH June 21, 1904
7 CITY, TOWN OR LOCATION OF DEATH Tualatin	8 HOSPITAL OR OTHER INSTITUTION — NAME Meridian Park Hospital	9 IF HOSP OR NSG HOME DOA OR Enter An Inpatient Specify Inpatient	10 COUNTY OF DEATH Clackamas
11 STATE OF BIRTH Idaho	12 CITIZEN OF WHAT COUNTRY U.S.A.	13 MARRIED, NEVER MARRIED, WIDOWED, DIVORCED Married	SPOUSE IF MARRIED WIDOWED Fredrick L
SOCIAL SECURITY NUMBER [redacted]	14 USUAL OCCUPATION Homemaker	14b KIND OF BUSINESS OR INDUSTRY Home	15 WAS DECEDENT EVER IN U.S. ARMED FORCES? No
16 RESIDENCE — STATE Oregon	COUNTY Clackamas	CITY, TOWN, OR LOCATION 16b Lake Oswego	STREET AND NUMBER OR R.F.D. ZIP 16d 6352 S.W. Dawn Street 97034
FATHER Coats	MOTHER 17 Ivy Holstein	INFORMANT NAME AND RELATIONSHIP TO DECEASED 18 Fredrick L. Tershin, Spouse	16e Inside City Limits Yes
19a DISPOSITION BURIAL, CREMATION, REMOVAL, MAUS Cremation	19b CEMETERY OR CREMATORY NAME Pioneer Crematorium, Inc.	19c LOCATION Portland, Or 97214	
20a FUNERAL SERVICE LICENSEE B. Lyle Pratt	20b NAME AND ADDRESS OF FACILITY Pratt Mortuary Service, 2025 SE 10th Ave Portland Or. 97214		
21a CERTIFICATION To the best of my knowledge death occurred at the time, date and place and due to the cause(s) stated. 21b [Signature] Kenneth M Douglass	21b DATE SIGNED 1/23/1985	21c HOUR OF DEATH 3:00 PM	
21d NAME AND ADDRESS OF CERTIFIER GEORGE M. DOUGLASS, M.D. 16400 S.W. Boones Ferry Rd. Lake Oswego, Oregon 97034			
22a DATE RECEIVED BY REGISTRAR JAN 25 1985	22b REGISTRAR [Signature] Kenn James		

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

(a) Respiratory Failure — Interval between onset and death: 5 days
DUE TO OR AS A CONSEQUENCE OF
(b) Aspiration pneumonia
DUE TO OR AS A CONSEQUENCE OF
(c) Subarachnoid hemmorhage — Interval between onset and death:

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

23 AUTOPSY (Specify Yes or No)	24 WAS MEDICAL EXAMINER NOTIFIED (Specify Yes or No)
No	No

25 ACCIDENT (Specify Yes or No)	26 DATE OF INJURY (Mo. Day Yr.)	26a HOUR OF INJURY	26b DESCRIBE HOW INJURY OCCURRED
No	N/A		

27 PLACE OF INJURY (At home, farm, street, factory, office building, etc.) (Specify)	28 LOCATION STREET OR R.F.D. NO.	CITY OR TOWN	STATE
NO			

RESERVED FOR REGISTRAR'S USE

ORIGINAL—VITAL STATISTICS COPY

452 REV 12 83

STATE OF OREGON, COUNTY OF MULTNOMAH) ss

DATE ISSUED APRIL 22 1985

I HEREBY CERTIFY THAT THE FOREGOING COPY HAS BEEN COMPARED BY ME WITH THE ORIGINAL DOCUMENT AND IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL CERTIFICATE, AS THE SAME APPEARS ON FILE IN THE VITAL RECORDS UNIT OF THE OREGON STATE HEALTH DIVISION AND IN MY OFFICIAL CARE AND CUSTODY.

OREGON STATE HEALTH DIVISION SEAL

Joseph D. Tarney, State Registrar

NOT VALID WITHOUT RAISED SEAL OF OREGON STATE HEALTH DIVISION

STATE OF OREGON
County of Clackamas } ss

I, Juanita N. Orr, County Clerk for the County of Clackamas, do hereby certify that the instrument of writing was received for recording in the records of said County at

1986 APR 7 PM 4:14

Witness my hand and seal affixed.

JUANITA N. ORR
County Clerk

Recording Certificate 86 12023

86 12023

FILED FOR RECORD
SKAMANIA CO. WASH
BY SKAMANIA CO. TITLE

APR 2 11 55 AM '93

P Lowry

GARY N. OLSON

BOOK 134 PAGE 878

Last Will and Testament

OF

GERTRUDE G. TERSHIN

Received
Indexed
Indexed
Filmed
Mailed

I, GERTRUDE G. TERSHIN, living in Lake Oswego, Oregon, being of sound and disposing mind and memory and not acting under duress, fraud or undue influence of any person whomsoever, do freely make, publish and declare this instrument to be my Last Will and Testament in manner and form following, revoking all other Wills and Codicils to Wills heretofore made by me.

FIRST: I nominate and appoint as my Personal Representative of my estate, my husband, FREDERICK LUCAS TERSHIN, and I direct that no bond be required of him as such, and if he cannot so serve, I nominate and appoint my daughter, GLENNA DELL HENRICI, as Personal Representative, to serve without bond.

SECOND: I order and direct that my Personal Representative as soon as possible after my death as can conveniently be done, to pay all debts, dues and liabilities that may exist at the time of my death, which shall include the expenses of my last illness and funeral.

THIRD: Not unmindful of my children, Frederick Duane Tershin and Glenna Dell Henrici, I give, devise and bequeath all of my estate, wherever situate and however held, to my husband, FREDERICK LUCAS TERSHIN, to have and to hold the same forever.

FOURTH: Should my aforesaid husband, Frederick Lucas Tershin, predecease me, or should we die in the same accident or within a short time of each other, then I give, devise and bequeath my estate as follows:

a. To my granddaughter, NITA CHABALA, the sum of

2 6 55 4cc

15699
15699

REAL ESTATE EXCISE TAX

APR 02 1993

PAID Exempt

SKAMANIA COUNTY TREASURER

RECORDER'S NOTE: PORTIONS OF THIS DOCUMENT POOR QUALITY FOR FILMING

RECORDER'S NOTE:
NOT AN ORIGINAL DOCUMENT

BOOK 134 PAGE 380

AFFIDAVIT OF SUBSCRIBING WITNESSES

STATE OF OREGON,)
) ss.
County of Multnomah.)

We, the undersigned, being sworn, each for myself say:

On the date of the foregoing Will of Gertrude G. Tershin in our presence said Gertrude G. Tershin signed the same and declared it to be her Last Will and Testament, whereupon, at her request and in her presence, we attested the Will by signing our names thereto.

To the best of my knowledge and belief, the said Gertrude G. Tershin was, at that time, over the age of 18 years and of sound mind.

Subscribed and sworn to before me this 14 day of May, 1981.

Notary Public for Oregon
My commission expires:

Affidavit of Subscribing Witnesses to
3- Last Will and Testament of GERTRUDE G. TERSHIN.