128486

BOOK 166 PAGE 510

Return Address:

Herbert Hamblen
PO Box 250
Carson WA 98610

FILED FOR RECORD
SKAMANIA CO. WASH
BY Herb Hamblen

JUN 25 9 04 AM '97
Gary
AUDITOR
GARY M. OLSON

Please Print or Type Information.

Document Title(s) or transactions contained therein:
1. Death Certificate
2.
3.
4.

GRANTOR(S) (Last name, first, then first name and initials)
1. Hamblen, Millard B
2.
3.
4.
[ ] Additional Names on page _____ of document.

REAL ESTATE EXCISE TAX
18872
JUN 25 1997
PAID exempt
Hoffman, Deputy
SKAMANIA COUNTY TREASURER

GRANTEE(S) (Last name, first, then first name and initials)
1. Hamblen, Elsie M.
2.
3.
4.
[ ] Additional Names on page _____ of document.

LEGAL DESCRIPTION (Abbreviated: i.e., Lot, Block, Plat or Section, Township, Range, Quarter/Quarter)

[ ] Complete legal on page _____ of document

REFERENCE NUMBER(S) Of Documents assigned or released:
Affidavit of Heirship recorded in Book 65 at Page 860
[ ] Additional numbers on page _____ of document.

ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER
3-8-29-1-1-1200
[ ] Property Tax Parcel ID is not yet assigned.
[ ] Additional parcel #'s on page _____ of document.

The Auditor/Recorder will rely on the information provided on the form. The Staff will not read the document to verify the accuracy or completeness of the indexing information.

D-2 Local File Number 3/

BOOK 166 PAGE 511

WASHINGTON STATE DEPARTMENT OF HEALTH — BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

TYPE, OR PRINT IN PERMANENT INK

DECEASED

Deceased — Name (First, Middle, Last)	Millard B. Hamblen
Sex	Male
Date of Death (Month, Day, Year)	January 25, 1973
Race	White
Age — Last Birthday (Years)	60
Date of Birth	12-8-1912
County of Death	Skamania
City, Town, or Location of Death	Carson
Inside City Limits	Unincorporated
Hospital or Other Institution — Name	residence - General Delivery
State of Birth	Washington
Citizen of What Country	U.S.A.
Married, Never Married, Widowed, Divorced	married
Surviving Spouse	Elsie Marie JOHNSON Hamblen
Social Security Number	[redacted]
Usual Occupation	confectionery Store owner-operator
Residence — State	Washington
County	Skamania
City, Town or Location	Carson
Inside City Limits	unincorporated

PARENTS

Father — Name	Bart C. Hamblen
Mother — Maiden Name	MILLARD, Lena I. Hamblen

Informant — Name	Elsie Marie Hamblen
Mailing Address	General Delivery - Carson, Washington 98610

CAUSE

Part I. Death was caused by:

	Cause	Approx. interval between onset and death
(a) Immediate cause	Cardiac arrest and cardiomegaly	Approx. 10 minutes
(b) Due to, or as a consequence of	Hypertensive cardiovascular disease	
(c) Due to, or as a consequence of		

Part II. Other significant conditions: Status post operative herniorrhaphy

Autopsy	yes
If yes were findings considered in determining cause of death	yes
Accident, Suicide, Homicide, or Undetermined	Natural C.
Date of Injury	1-25-73
Hour	11 A. M.
How Injury Occurred	Cardiac arrest...
Injury at Work	No
Place of Injury	Home
Location	Carson, Washington

CERTIFIER

Certification — Physician: I attended the deceased from	1 - to
Certification — Coroner: Hour of Death	11:09 A. M.
The decedent was pronounced dead	January 25, 1973 11:05 A. M.
Certifier — Name	Eugene B. Blizard MD
Signature	Eugene B. Blizard MD
Date Signed	1-26-73
Mailing Address — Certifier	503 Rhododendron Dr. Vancouver Wash 98661

BURIAL

Burial, Cremation, Removal	burial
Cemetery or Crematory — Name	Park Hill Cemetery
Location	Vancouver, Washington
Date	1-30-1973
Funeral Home — Name and Address	Gardner's Funeral Home - P. O. Box 276 - White Salmon, Wa. 98672
Funeral Director — Signature	Kenneth N. Gardner
Registrar — Signature	D A Champaign MD
Date Received by Local Registrar	Jan. 30, 1973

THIS IS TO CERTIFY, that the foregoing is a true copy (photographic) of a record on file with the Southwest Washington Health District, Stevenson, Washington,

D A Champaign MD

Donald A. Champaign, M.D.
District Health Officer

SOUTHWEST WASHINGTON SEAL JAN

REAL ESTATE EXCISE TAX
18872
JUN 25 1997
PAID exempt
Deputy
SKAMANIA COUNTY TREASURER

By Clerk

Gary H. Martin, Skamania County Assessor
Date 6/25/97 Parcel # 3-8-29-1-1-1200