8191—OS—9-67.

OR PRINT IN ANENT INK

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

LOCAL FILE NUMBER 10528

STATE FILE NUMBER 30394

DECEASED

1. DECEASED—NAME: FIRST Florence; MIDDLE Pearle; LAST Hargus
2. SEX: female
3. DATE OF DEATH (MONTH, DAY, YEAR): December 30, 1968
4. RACE (WHITE, NEGRO, AMERICAN INDIAN, ETC.) (SPECIFY): White
5a. AGE—LAST BIRTHDAY (YEARS): 76
5b. UNDER 1 YEAR: MOS. / DAYS
5c. UNDER 1 DAY: HOURS / MIN.
6. DATE OF BIRTH (MONTH, DAY, YEAR): Sept. 16, 1892
COUNTY OF DEATH: King
7b. CITY, TOWN, OR LOCATION OF DEATH: Renton
7c. INSIDE CITY LIMITS (SPECIFY YES OR NO): Yes
7d. HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER): Renton Terrace Nursing Home
8. STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY): Kansas
9. CITIZEN OF WHAT COUNTRY: USA
10. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): widowed
11. SURVIVING SPOUSE (IF WIFE, GIVE MAIDEN NAME):
12. SOCIAL SECURITY NUMBER: 532-28-7140
13a. USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED): Cook
13b. KIND OF BUSINESS OR INDUSTRY: U. of Washington dormitory
14a. RESIDENCE—STATE: Wash.
14b. COUNTY: King
14c. CITY, TOWN, OR LOCATION: Renton
14d. INSIDE CITY LIMITS (SPECIFY YES OR NO): yes
14e. STREET AND NUMBER: 8908 So. 133rd

RESIDENCE IF DECEASED IF DEATH OCCURRED IN INSTITUTION, GIVE LENGTH OF TIME BEFORE DEATH.

PARENTS

15. FATHER—NAME: FIRST George; MIDDLE W.; LAST Bailey
16. MOTHER—MAIDEN NAME: FIRST Rachel; MIDDLE; LAST Yost

17a. INFORMANT—NAME: Virginia Mitchell
17b. MAILING ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP): 13012 80th Ave. So., Seattle, Wash. 98178

CAUSE

PART I. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c))

18. IMMEDIATE CAUSE
(a) 4 3 1-9
DUE TO, OR AS A CONSEQUENCE OF:
(b) CVA
DUE TO, OR AS A CONSEQUENCE OF:
(c)

CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (a), STATING THE UNDERLYING CAUSE LAST

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH: (a) (b) reuden (c)

PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a)

19a. AUTOPSY (YES OR NO): No
19b. IF YES WERE FINDINGS CONSIDERED IN DETERMINING CAUSE OF DEATH

20a. ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY):
20b. DATE OF INJURY (MONTH, DAY, YEAR):
20c. HOUR: M.
20d. HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 18):
20e. INJURY AT WORK (SPECIFY YES OR NO):
20f. PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY):
20g. LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, STATE):

O.K. LEO M. SOWERS
KING COUNTY CORONER
FEB 14 1969
BY H. Hopkins

CERTIFIER

21a. CERTIFICATION—PHYSICIAN: I ATTENDED THE DECEASED FROM (MONTH DAY YEAR) 3-20-67 TO (MONTH DAY YEAR) 21b. 12-30-68
21c. AND LAST SAW HIM/HER ALIVE ON (MONTH DAY YEAR) 12-5-68
21d. I DID/DID NOT VIEW THE BODY AFTER DEATH: not
21e. DEATH OCCURRED (HOUR): 9:45 A.M. AT THE PLACE, ON THE DATE, AND, TO THE BEST OF MY KNOWLEDGE, DUE TO THE CAUSE(S) STATED.

22a. CERTIFICATION—CORONER: ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR THE INVESTIGATION, IN MY OPINION, DEATH OCCURRED ON THE DATE AND DUE TO THE CAUSE(S) STATED. HOUR OF DEATH:
22b. THE DECEDENT WAS PRONOUNCED DEAD (MONTH DAY YEAR HOUR): M.

23a. CERTIFIER—NAME (TYPE OR PRINT): J. S. Arnason
23b. SIGNATURE: J. S. Arnason
DEGREE OR TITLE: MD
23c. DATE SIGNED (MONTH, DAY, YEAR): 12/30/68
23d. MAILING ADDRESS—CERTIFIER: Medical Dental Building; STREET OR R.F.D. NO.; CITY OR TOWN: Seattle; STATE: Wash.; ZIP: 98101

BURIAL

24a. BURIAL, CREMATION, REMOVAL (SPECIFY): Cremation
24b. CEMETERY OR CREMATORY—NAME: Mt. Olivet Cemetery
24c. LOCATION: CITY OR TOWN: Renton; STATE: Washington
24d. DATE (MONTH, DAY, YEAR): 1/3/69
25a. FUNERAL HOME—NAME AND ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP): Stokes Mortuary, 400 So. 3rd Street, Renton, Wash. 98055
25b. FUNERAL DIRECTOR—SIGNATURE: Hazel Long
26a. REGISTRAR—SIGNATURE: S.P. Lehman M.D.
26b. DATE RECEIVED BY LOCAL REGISTRAR: JAN 8 1969

JAN 6