

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

OFFICE OF RECORDER

COUNTY OF ALAMEDA

OAKLAND, CALIFORNIA

CERTIFICATE OF DEATH

STATE FILE NO.

STATE OF CALIFORNIA—DEPARTMENT OF PUBLIC HEALTH

REGISTRATION DISTRICT No.

6015

REGISTRAR'S NUMBER

12901

1a. NAME OF DECEASED—FIRST NAME		1b. MIDDLE NAME		1c. LAST NAME		2a. DATE OF DEATH—MONTH, DAY, YEAR		2b. HOUR	
Jennie		Mae		Geandrot		Nov. 2, 1957		4:30P M	
3. SEX	4. COLOR OR RACE	5. SPECIFY MARRIED, NEVER MARRIED, WIDOWED, DIVORCED		6. DATE OF BIRTH		7. AGE (LAST BIRTHDAY)		IF UNDER 1 YEAR	
Female	White	Widowed		Aug. 15, 1892		65 YEARS		IF UNDER 24 HOURS	
8a. USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED)		8b. KIND OF BUSINESS OR INDUSTRY		9. BIRTHPLACE (STATE OR FOREIGN COUNTRY)		10. CITIZEN OF WHAT COUNTRY			
Housewife				California		U S A			
11. NAME AND BIRTHPLACE OF FATHER			12. MAIDEN NAME AND BIRTHPLACE OF MOTHER			13. NAME OF PRESENT SPOUSE (IF MARRIED)			
Weston Campbell, N. Y.			Mk. Peterson, N. Y.						
14. WAS DECEASED EVER IN U. S. ARMED FORCES? SPECIFY YES, NO, UNKNOWN				15. SOCIAL SECURITY NUMBER		16. INFORMANT			
no				569-20-5693 D		Weston C. Geandrot			
17a. COUNTY		17b. CITY OR TOWN		17c. LENGTH OF STAY IN THIS CITY OR TOWN					
Alameda		Oakland		45 Yrs.					
17d. FULL NAME OF HOSPITAL OR INSTITUTION				17e. ADDRESS (IF NOT IN HOSPITAL OR INSTITUTION, GIVE STREET OR RURAL ADDRESS OR LOCATION. DO NOT USE P. O. BOX NUMBERS)					
Enroute to Kaiser Fdt. Hospital				Broadway and Mac Arthur.					
18a. STATE		18b. COUNTY		18c. CITY OR TOWN		18d. STREET OR RURAL ADDRESS (DO NOT USE P. O. BOX NUMBERS)			
California		Alameda		Oakland		4011 Linwood Ave.			
19a. CORONER: I HEREBY CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED ABOVE FROM THE CAUSES STATED BELOW AND THAT I HAVE HELD AN INVESTIGATION, AUTOPSY, INQUIRY ON THE REMAINS OF DECEASED AS REQUIRED BY LAW.				19b. PHYSICIAN: I HEREBY CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED ABOVE, FROM THE CAUSES STATED BELOW AND THAT I ATTENDED THE DECEASED FROM _____ AND THAT I LAST SAW THE DECEASED ALIVE ON _____					
Investigation Pending									
19c. SIGNATURE			DEGREE OR TITLE		19d. ADDRESS		19e. DATE SIGNED		
E. M. Lundgaard			M. D. Coroner		480 - 4th St., Oakland, Cal.		11-5-57		
20a. SPECIFY BURIAL, CREATION OR REMOVAL		20b. DATE		20c. CEMETERY OR CREMATORY		21. SIGNATURE OF EMBALMER (IF BODY EMBALMED)		LICENSE NUMBER	
Burial		11-5-57		Mt. View Mausoleum		Harry Robinson		2181	
22. FUNERAL DIRECTOR			23. DATE RECEIVED BY LOCAL REGISTRAR		24. SIGNATURE OF LOCAL REGISTRAR				
Robinson Brothers Mortuary			NOV 5 1957 11-18-57.		James C. ...				
25. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH (A)				25. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH (A)				APPROXIMATE	
Hemorrhage				Hemorrhage				INTERVAL	
ANTECEDENT CAUSES				ANTECEDENT CAUSES				BETWEEN	
Laceration of the aorta and liver				Laceration of the aorta and liver				ONSET AND	
Trauma.				Trauma.				DEATH	
26. CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RELATED TO THE DISEASE OR CONDITION CAUSING DEATH.				INFORMATIONAL - NOT A VALID DOCUMENT TO ESTABLISH IDENTITY					
27a. DATE OF OPERATION		27b. MAJOR FINDINGS OF OPERATION				28. AUTOPSY			
						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
29a. SPECIFY ACCIDENT, SUICIDE OR HOMICIDE		29b. PLACE OF INJURY (E.G. IN OR ABOUT HOME, FARM, FACTORY, STREET, OFFICE BUILDING)		29c. LOCATION		CITY OR TOWN		COUNTY	
ACCIDENT		Cemetery		Oakland		Alameda		California	
29d. TIME MONTH DAY YEAR HOUR OF INJURY		29e. INJURY OCCURRED		29f. HOW DID INJURY OCCUR?					
bet. 12noon-3:15P.		<input type="checkbox"/> WHILE AT WORK <input checked="" type="checkbox"/> NOT WHILE AT WORK		Drove auto into fountain					

INFORMATIONAL - NOT A VALID DOCUMENT TO ESTABLISH IDENTITY



CERTIFIED COPY OF VITAL RECORD
STATE OF CALIFORNIA, COUNTY OF ALAMEDA



This is a true and exact reproduction of the document officially registered and placed on file in the office of the Alameda County Recorder.

Patrick O'Connell
PATRICK O'CONNELL
ALAMEDA COUNTY RECORDER

DATE ISSUED

APR 29 2011

PBNC0 (Rev) 03/10

This copy is not valid unless prepared on an engraved border displaying the date, seal and signature of the Recorder.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

