

John Doe

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD
CrimeShadows.com
MENDOCINO COUNTY
UKIAH, CALIFORNIA

CERTIFICATE OF DEATH
STATE OF CALIFORNIA

2300-563 043

STATE FILE NUMBER		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
1A. NAME OF DECEDENT—FIRST	1B. MIDDLE	1C. LAST	2A. DATE OF DEATH (MONTH, DAY, YEAR)
JOHN	NMN	DOE	FOUND July 8, 1979
3. SEX	4. RACE	5. ETHNICITY	6. DATE OF BIRTH
Male	Unk	Unk	1966-1967
7. AGE	8. BIRTH NAME AND BIRTHPLACE OF BIRTH		2B. HOUR
13-14 YEARS	Unk		1620
9. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)		10. BIRTH NAME AND BIRTHPLACE OF BIRTH	
Unk		Unk	
11. CITIZEN OF WHAT COUNTRY		12. SOCIAL SECURITY NUMBER	
Unk		Unk	
13. PRIMARY OCCUPATION		14. MARITAL STATUS	
Unk		Unk	
15. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)		16. NUMBER OF YEARS THIS OCCUPATION	
Unk		Unk	
17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)		18. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER SURVIVAL)	
Unk		Unk	
19. USUAL RESIDENCE—CITY OR TOWN		19. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER SURVIVAL)	
Unk		Unk	
19A. COUNTY		19B. STATE	
Unk		Unk	
20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP		21. COUNTY	
Mendocino County Sheriff/Coroner		Unk	
951 Low Gap Road		Unk	
Ukiah, Ca. 95482		Unk	
21A. PLACE OF DEATH		21B. CITY OR TOWN	
Unk		Unk	
21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)		21D. CITY OR TOWN	
Unk		Unk	
22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE FOR LINE FOR A, B, AND C)		23. THIS DEATH REPORTED TO CORONER?	
(A) Unknown - skeletal remains		Yes	
(B) Unknown - skeletal remains		No	
(C) Unknown - skeletal remains		No	
24. THIS DEATH REPORTED TO CORONER?		25. WAS DEATH PERFORMED?	
Yes		No	
26. Was Autopsy Performed?		27. Was Operation Performed For Any Condition In Items 24 or 25?	
No		No	
28. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE, 28B. PHYSICIAN—FURNISH NAME AND ADDRESS OR TITLE		29C. DATE ISSUED	
Approx. 7-8-1978		Unk	
29. SPECIFY ACCIDENTS, SUICIDE, ETC.		30. PLACE OF INJURY	
Unknown		Unknown	
31. INJURY AT WORK		32A. DATE OF INJURY—MONTH, DAY, YEAR	
Unk		Approx. 7-8-1978	
32B. HOUR		33. DESCRIBE HOW INJURY OCCURRED (ENTER WHICH RESULTED IN INJURY)	
Unk		Unk	
34. DATE OF DEATH		35. CORONER	
6-9-80		THOMAS W. JOURNAL	
36. DEATH REPORTED TO CORONER?		37. DATE—MONTH, DAY, YEAR	
Yes		6-10-80	
38. NAME AND ADDRESS OF CEMETERY OR CREMATOR		39. ENTAILED? LICENSE NUMBER AND SIGNATURE	
Ukiah Cemetery, Ukiah, California		not entailed	
40. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)		41. DATE ACCEPTED BY LOCAL REGISTRAR	
Zimmerman Mortuary		JUN 10 1980	
42. DATE ACCEPTED BY LOCAL REGISTRAR		43. SIGNATURE OF LOCAL REGISTRAR	
JUN 10 1980		Craig M. McMillon	

STATE OF CALIFORNIA
COUNTY OF MENDOCINO } SS DATE ISSUED OCT 30 2008



This is a true and exact reproduction of the document officially registered and placed on file in the office of the MENDOCINO COUNTY CLERK-RECORDER.

Susan M. Panochak
MENDOCINO COUNTY CLERK-RECORDER

This copy not valid unless prepared on engraved border displaying date, seal and signature of Clerk-Recorder.

