PLAINTIFF'S EXHIBIT 10,001

CERTIFICATION OF VITAL RECORD

# COUNTY of SANTA CLARA

HEALTH DEPARTMENT
2220 MOORPARK AVE., SAN JOSE, CALIFORNIA 95128

REDACTED

## CERTIFICATE OF DEATH

STATE OF CALIFORNIA
USE BLACK INK ONLY

STATE FILE NUMBER | LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

**DECEDENT PERSONAL DATA**

| 1A. NAME OF DECEDENT—FIRST (GIVEN) | 1B. MIDDLE | 1C. LAST (FAMILY) | 2A. DATE OF DEATH—MO. DAY YR. | 2B. HOUR | 3. SEX |
|---|---|---|---|---|---|
| REDACTED | RILEY | REDACTED | January 3, 1991 | 0530 | M |

| 4. RACE | 5. HISPANIC OR SPANISH? | 6. DATE OF BIRTH—MO. DAY YR. | 7. AGE IN YEARS | IF UNDER 1 YEAR: MONTHS | DAYS | IF UNDER 24 HOURS: HOURS | MINUTES |
|---|---|---|---|---|---|---|---|
| WHITE | ☐ YES ☒ NO | REDACTED | 52 | | | | |

| 8. STATE OF BIRTH | 9. CITIZEN OF WHAT COUNTRY | 10A. FULL NAME OF FATHER | 10B. STATE OF BIRTH | 11A. FULL MAIDEN NAME OF MOTHER | 11B. STATE OF BIRTH |
|---|---|---|---|---|---|
| CA | U.S.A. | | AL | | OK |

| 12. MILITARY SERVICE? | 13. SOCIAL SECURITY NO. | 14. MARITAL STATUS | 15. NAME OF SURVIVING SPOUSE OR WIFE, ENTER MAIDEN NAME |
|---|---|---|---|
| 59 TO 59 ☒ NONE | | DIVORCED | |

| 16A. USUAL OCCUPATION | 16B. USUAL KIND OF BUSINESS OR INDUSTRY | 16C. USUAL EMPLOYER | 16D. YEARS IN OCCUPATION | 17. EDUCATION—YEARS COMPLETED |
|---|---|---|---|---|
| SUPERVISOR | ASBESTOS REFIN | KCAC | 28 | 12 |

**USUAL RESIDENCE**

| 18A. RESIDENCE—STREET AND NUMBER OR LOCATION | 18B. CITY | 18C. ZIP CODE |
|---|---|---|
| REDACTED | KING CITY | 93930 |

| 18D. COUNTY | 18E. NUMBER OF YEARS IN THIS COUNTY | 18F. STATE OR FOREIGN COUNTRY | 20. NAME, RELATIONSHIP, MAILING ADDRESS AND ZIP CODE OF INFORMANT |
|---|---|---|---|
| MONTEREY | 57 | CALIFORNIA | REDACTED |

**PLACE OF DEATH**

| 19A. PLACE OF DEATH | 19B. IF HOSPITAL, SPECIFY OTHER OR DROP. DOA | 19C. COUNTY |
|---|---|---|
| Stanford Hospital | IP | Santa Clara |

| 19D. STREET ADDRESS—STREET AND NUMBER OR LOCATION | 19E. CITY | TIME INTERVAL BETWEEN ONSET AND DEATH | 22. WAS DEATH REFERRED TO CORONER? |
|---|---|---|---|
| 300 Pasteur Drive | Palo Alto | | ☒ YES 007-10 ☐ NO |

**CAUSE OF DEATH**

21. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)

IMMEDIATE CAUSE (A) Pending

DUE TO (B)

DUE TO (C)

| 23. WAS BIOPSY PERFORMED? | 24A. WAS AUTOPSY PERFORMED? | 24B. WAS IT USED IN DETERMINING CAUSE OF DEATH? |
|---|---|---|
| ☐ YES ☒ NO | ☒ YES ☐ NO | ☒ YES ☐ NO |

25. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 21

4149

26. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 21 OR 25? (IF YES, LIST DATE AND REASON)

12/27/90 Bypass Graft

**PHYSICIAN'S CERTIFICATION**

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.

27B. SIGNATURE AND DEGREE OR TITLE OF CERTIFIER | 27C. CERTIFIER'S LICENSE NUMBER | 27D. DATE SIGNED

27A. DECEDENT ATTENDED SINCE (MONTH, DAY, YEAR) | DECEDENT LAST SEEN ALIVE (MONTH, DAY, YEAR)

27E. TYPE ATTENDING PHYSICIAN'S NAME AND ADDRESS

AMENDED

1 OF 2

**CORONER'S USE ONLY**

I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.

28A. SIGNATURE AND TITLE OF CORONER OR DEPUTY CORONER: Julian E. Edwards M.D. Coroner | 28B. DATE SIGNED: 1/9/91

| 29. MANNER OF DEATH | 30A. PLACE OF INJURY | 30B. INJURY AT WORK? | 30C. DATE OF INJURY (MONTH, DAY, YEAR) | 31. HOUR |
|---|---|---|---|---|
| Pending | | ☐ YES ☐ NO | | |

32. LOCATION (STREET AND NUMBER OR LOCATION AND CITY) | 33. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)

**FUNERAL DIRECTOR AND LOCAL REGISTRAR**

| 34A. DISPOSITION | 34B. PLACE OF FINAL DISPOSITION—NAME AND ADDRESS | 34C. DATE MO. DAY YEAR | 35. SIGNATURE OF EMBALMER | 35B. LICENSE NUMBER |
|---|---|---|---|---|
| BURIAL | KING CITY CEMETERY KING CITY CALIFORNIA | JAN141991 | CHRIS TIMOTHY | 7723 |

| 36A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH) | 36B. LICENSE NO. | 37. SIGNATURE OF LOCAL REGISTRAR | 38. REGISTRATION DATE |
|---|---|---|---|
| WHITEHURST GRIM CHAPEL | 519 | Stephen A. Coray M.D. | JAN 14 1991 |

**STATE REGISTRAR**

| A. | B. | C. | D. | E. | F. | CENSUS TRACT |
|---|---|---|---|---|---|---|
| | | | | | | |

VS-11 (REV. 1/90) MAKE NO ERASURES, WHITEOUTS, OR OTHER ALTERATIONS

REDACTED

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA
COUNTY OF SANTA CLARA ) SS

DATE ISSUED JUN 14 1991

BY Stephen A Coray M.D

This is a true and exact reproduction of the document officially registered and placed on file in the VITAL RECORDS SECTION, DEPARTMENT OF PUBLIC HEALTH.

STEPHEN A CORAY, MD
HEALTH OFFICER AND LOCAL REGISTRAR
OF BIRTHS AND DEATHS

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

SANTA CLARA COUNTY HEALTH DEPARTMENT

UCMED00003725

CERTIFICATION OF VITAL RECORD

# COUNTY of SANTA CLARA

HEALTH DEPARTMENT
2220 MOORPARK AVE., SAN JOSE, CALIFORNIA 95128

## PHYSICIAN/CORONER'S AMENDMENT FORM

REDACTED

USE BLACK INK ONLY—MAKE NO ERASURES, WHITEOUTS, OR OTHER ALTERATIONS

REDACTED

STATE FILE NUMBER

☒ DEATH ☐ FETAL DEATH ☐ BIRTH

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

| INFORMATION AS REPORTED ON ORIGINAL CERTIFICATE | 1a. NAME—FIRST (GIVEN) | 1b. MIDDLE | 1c. LAST (FAMILY) | 1d. SEX |
|---|---|---|---|---|
| | REDACTED | REDACTED | REDACTED | M |
| | 2. DATE OF EVENT—MONTH, DAY, YEAR | 3a. CITY OF OCCURRENCE | 3b. COUNTY OF OCCURRENCE | |
| | January 3, 1991 | Palo Alto 2 of 2 | Santa Clara | |

| LIST ONE ITEM PER LINE | 4. CERTIFICATE ITEM NUMBER | 5a. INCORRECT INFORMATION ON ORIGINAL CERTIFICATE | 5b. INFORMATION AS IT SHOULD BE STATED |
|---|---|---|---|
| | 21A | Pending | Acute Bronchopneumonia and Sepsis |
| | 21B | Blank | Coronary Artery Bypass Grafts |
| | 21C | Blank | Arteriosclerotic Cardiovascular Disease |
| | 25 | Blank | Pulmonary Fibrosis |
| | 29 | Pending | Natural |

**DECLARATION OF CERTIFYING PHYSICIAN OR CORONER**

6. I, THE CERTIFYING PHYSICIAN OR CORONER HAVING PERSONAL KNOWLEDGE OF SUPPLEMENTAL INFORMATION WHICH MODIFIES THE INFORMATION ORIGINALLY REPORTED, DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

7a. SIGNATURE OF CERTIFYING PHYSICIAN OR CORONER: ▶ John E. Hauser M.D. Coroner — 7b. DATE SIGNED: 5/15/91

8a. NAME OF CERTIFYING PHYSICIAN OR CORONER (PRINT OR TYPE): John E. Hauser — 8b. DEGREE OR TITLE: M.D.

8c. ADDRESS—STREET AND NUMBER: 850 Thornton Way — 8d. CITY: San Jose — 8e. STATE: CA

**STATE/LOCAL REGISTRAR USE ONLY**

9. OFFICE OF STATE OR LOCAL REGISTRAR: ▶ Office of State Registrar of Vital Statistics

10. DATE ACCEPTED FOR REGISTRATION: JUN 06 1991

STATE OF CALIFORNIA, DEPARTMENT OF HEALTH SERVICES, OFFICE OF STATE REGISTRAR — VS 24B (Rev. 1/77) 88 50229

REDACTED

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA
COUNTY OF SANTA CLARA ) ss

DATE ISSUED JUN 14 1991

BY Stephen A. Coray M.D.

This is a true and exact reproduction of the document officially registered and placed on file in the VITAL RECORDS SECTION, DEPARTMENT OF PUBLIC HEALTH.

STEPHEN A. CORAY, MD
HEALTH OFFICER AND LOCAL REGISTRAR
OF BIRTHS AND DEATHS

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

SANTA CLARA COUNTY HEALTH DEPARTMENT

UCMED00003726

REDACTED

COUNTY OF SANTA CLARA
OFFICE OF THE MEDICAL EXAMINER-CORONER

REPORT OF AUTOPSY

REDACTED

Decedent:

Date and Time of Autopsy: January 9, 1991 at 11:15 A.M.

Autopsy At: Santa Clara County Morgue

Prosector: Angelo K. Ozoa, M.D.

Present At Autopsy: John Hewitt/Salcedo Lim
Forensic Technicians

EXTERNAL EXAMINATION:

The body is that of a well developed, well nourished adult white male which measures 69-1/2 inches in length, weighs 230 pounds, and appears somewhat older than the stated age of 51 years. The body has been recently embalmed. The scalp hair is gray and sparse. The irides are gray. Plastic eyecaps are in place over both eyes. The mouth shows natural teeth. At the base of the neck anteriorly is a tracheostomy opening which has been closed with twine. On the right side of the neck is an embalming incision measuring 3 inches in length, closed with twine. The anterior chest shows a midline surgical scar which measures 12 inches in length. On the left side of the chest at about the level of the 5th intercostal space along the anterior axillary line is an incision measuring 1-1/2 inches in length, closed with twine. On the front of the upper abdomen are three sutured incisions each measuring approximately 1/2 inch in length. A trocar button is present on the left upper abdomen. In the right groin is a partially healing longitudinal incision measuring 1-1/2 inches in length. There is an old surgical scar running from the right groin along the medial aspect of the thigh and lower leg and ending in the right ankle for a total length of 34 inches. On the opposite thigh and leg is an identical but more recent scar also measuring approximately 34 inches in length. No external evidence of recent traumatic injury is apparent.

REDACTED

INTERNAL EXAMINATION:

As previously mentioned, the body has been recently embalmed. The internal organs are examined and described in the embalmed state.

Head: The scalp, calvarium, and the base of the skull are intact and show no evidence of injury. The brain weighs 1550 grams and is symmetrical. No remarkable abnormalities or evidences of injury are apparent on the external surface or on multiple coronal sections through the cerebral hemispheres, cerebellum, or brainstem. The ventricular system is of the usual caliber. The meninges are smooth. The blood vessels comprising the Circle of Willis show minimal atherosclerosis. There is no epidural, subdural, subarachnoid, or intracerebral hemorrhage.

Neck: The hyoid, larynx, soft tissues, and cervical spine are unremarkable and show no evidence of injury. The trachea shows a tracheostomy opening at about the level of the second tracheal ring.

Body Cavities: Some fibrous adhesions are present between the parietal and visceral pleura of both chests. No calcified plaques are seen on the pleura. There is extensive fibrous scarring of the pericardium and the pericardium is intimately adherent to the pleural surface of the lower lobes of both lungs. The peritoneal cavity contains approximately 200 cc. of cloudy grayish-pink fluid which is probably a mixture of embalming fluid and gastrointestinal contents. There are several trocar perforations of the anterior abdominal wall and some of the loops of small and large intestines.

Cardiovascular System: The heart is markedly enlarged, weighing 770 grams. The walls of the left ventricle and right ventricle measure up to 2.5 cm. and 0.6 cm. in thickness, respectively. As previously described, there is extensive fibrous scarring of the pericardium and epicardium. No remarkable valvular abnormalities are seen. The myocardium shows many scattered foci of fibrous scarring. No infarcts are recognized. There is evidence of previous and more recent surgical procedures. In the proximal ascending aorta just above the level of the aortic valve are three coronary artery graft orifices, two of which are completely closed. The third is partially open. Also present are two more recent graft orifices connected to two grafts which are both patent. One of the grafts terminates on the left lateral wall of the left ventricle. The other terminates over the left

REDACTED

INTERNAL EXAMINATION (continued):

anterolateral wall of the left ventricle. The old grafts could not be identified on account of the fibrous scarring. The aorta and major aortic branches show moderate calcific atherosclerosis, especially in the lower abdominal segment and in the adjoining iliac arteries. The great veins are essentially unremarkable.

Respiratory System: The tracheobronchial tree is patent. Both lungs are markedly heavy. The right weighs 1430 grams, the left 1230 grams. The pleural surface of both lungs is coated with a thin layer of grayish-yellow exudate, especially over both lower lobes. There is mild fibrous thickening of the pleura but no calcified plaques are present. The cut surface shows bronchopneumonic consolidation of both lungs together with fibrosis of the pulmonary parenchyma. The pulmonary arteries contain varying amounts of postmortem blood clots.

Liver: The liver weighs 3310 grams and exhibits both acute and chronic congestion. The gallbladder and bile ducts are unremarkable.

Spleen: The spleen weighs 440 grams and shows both acute and chronic congestion.

Pancreas: The pancreas is essentially unremarkable.

Endocrine System: The pituitary, thyroid, and adrenals are essentially unremarkable.

Genitourinary Tract: Each kidney weighs 270 grams and shows a somewhat grayish-yellow cut surface. The ureters and urinary bladder are unremarkable. The bladder is empty. The prostate, seminal vesicles, and testes exhibit no remarkable abnormalities. The scrotum, however, is moderately edematous.

Gastrointestinal Tract: The esophagus is essentially unremarkable. Except for trocar perforations, no remarkable abnormalities are noted either in the stomach, small intestines, or large intestines. The stomach is empty. The appendix is unremarkable.

Musculoskeletal System: No remarkable abnormalities or evidences of injury are apparent.

dictated: 1/9/91 AKO:ls

REDACTED

MICROSCOPIC EXAMINATION:

Heart 1 H&E): The myocardial fibers are hypertrophied. There is moderate fibroadipose thickening of the epicardium associated with focal infiltrates of chronic inflammatory cells. A section through a coronary vessel, probably one of the old grafts, shows some suture material in a markedly thickened fibrotic wall. A few other vessels are seen which show minimal atherosclerosis. No infarcts are recognized.

Lungs (8 H&E): Both lungs show acute bronchopneumonia and extensive fibrosis of the pulmonary parenchyma. A moderate degree of acute and chronic congestion is also apparent. In places, there is fibrous thickening of the pleura, but no pleural calcified plaques are present. No asbestos bodies are identified as such even on special stain (iron). In some areas beneath the pleura, some atypical cells with hyperchromatic polymorphic nuclei are noted but no definite evidence of a neoplastic process is recognized.

Liver and Spleen (2 H&E): The liver shows acute and chronic congestion and some prominence of the portal triads. The spleen is congested.

Kidneys (2 H&E): Both kidneys show some congestion and postmortem tubular changes.

Endocrines (3 H&E): Sections of thyroid and adrenals are essentially unremarkable.

Pancreas (1 H&E): Autolyzed.

Brain (2 H&E): No neoplastic or inflammatory processes are apparent in sections of cerebral cortex and cerebellum.

DIAGNOSES:

1. Arteriosclerotic cardiovascular disease:
   a) Calcific atherosclerosis of aorta, coronary arteries, and other major aortic branches.
   b) Marked cardiomegaly (770 grams).
   c) Focal ischemic myocardial fibrosis.
   d) Status post-coronary artery bypass grafts, old and recent.
   e) Pericardial-pleural adhesions.

REDACTED

DIAGNOSES (continued):

2. Acute bilateral bronchopneumonia secondary to #1-c.

3. Sepsis (by history).

4. Severe pulmonary fibrosis.

5. History of asbestos exposure, remote.

6. Embalming procedures:
   a) Embalming incisions.
   b) Trocar perforations.
   c) Plastic eyecaps.

CAUSE OF DEATH: Acute Bronchopneumonia and Sepsis.

DUE TO: Coronary Artery Bypass Grafts.

DUE TO: Arteriosclerotic Cardiovascular Disease.

CONTRIBUTORY: Pulmonary Fibrosis.

Angelo K. Ozoa, M.D.
Assistant Medical Examiner-Coroner

AKO:ls
completed: 5/15/91 ls

JUNTY OF SANTA CLARA
MEDICAL EXAMINER-CORONER
850 Thornton Way
San Jose, Calif. 95128
(408)299-5137

INVESTIGATION REPORT

REDACTED

DECEDENT: REDACTED

EVENTS SURROUNDING DEATH

This case first reported by Esther at the Santa Clara County Health Department after the Whitehurst Mortuary in King City attempted to file the death certificate in this county, that stated that other significant conditions included asbestosis.

Dr. OYER the physician signing the death certificate was contacted by the undersigned and he stated that the decedent was at Stanford because he was being worked up as a heart transplant reciever. Dr. OYER stated that the decedent for some reason was not a good candidate for this proceedure so they opted for a multiple bypass surgery which was done at Stanford seven days prior to death. Dr.OYER stated that the decedent had post operative problems in the form of sepsis, and a terminal event, hypoxia, bradycardia. Dr. OYER stated that he had questioned the decedent in detail prior to the bypass, as to his past history and that included working at a business that crushed asbestos ore in to powder for sale to other companies that made roofing material. Dr. OYER stated that the decedent's chest X-rays prior to the surgery, had shadows that were consistant with fibrosis and that he did have some pulmonary problems. Dr. OYER stated that he noted the asbestosis on the death certificate eventhough no biopsy or other diagnosis was ever made for asbestosis. He stated that he was not aware that it needed to be reported to the Coroner.

The Health Department had advised the mortuary that they were not issuing a certificate and that the body would have to be returned to this office.

It was learned later in the day that the body had been embalmed allready and that services were set for the evening of 1-7-91.

MEDICAL HISTORY

Per Dr. OYER the decedent was being worked up for heart transplant, however he was turned down due to his acute ASCVD and a option of multiple bypass was done. The decedent developed sepsis postoperative and died some seven days later. During the workup prior to the surgery the decedent's X-rays showed some shadows consistant with fibrosis and his verbal history (work) disclosed that he had been employeed in a company that crushed asbestos ore for a product to be sold to roofing material manufacturer. Dr. OYER stated that no other diagnostic work was done to determine the asbestosis.

MEDICATIONS

Not Known

DESCRIPTION OF SCENE/BODY

The decedent is seen nude in a plastic mortuary kit, in the Santa Clara County Morgue. He is cold to touch, fully embalmed with the associated trocar incisions present on the body. There is evidence of vein stripping on the legs, there is evidence of recent open heart surgery (midline surgical incision). On the left great toe is a body tag in the name of the decedent. On the right wrist I placed a Coroners body tag in the name of

1-9-91 0657H

# CERTIFICATE OF DEATH

STATE OF CALIFORNIA

USE BLACK INK ONLY

FILE NUMBER

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

1A. NAME OF DECEDENT—FIRST (GIVEN): REDACTED | 1B. MIDDLE | 1C. LAST (FAMILY): REDACTED | 2A. DATE OF DEATH—MO. DAY. YR: JANUARY 3, 1991 | 2B. HOUR: 0530 | 3. SEX: M

4. HISPANIC—SPECIFY: E | ☐ YES ☒ NO | 5. DATE OF BIRTH—MO. DAY. YR: JULY 1, 1939 | 7. AGE IN YEARS: 52 | IF UNDER 1 YEAR: MONTHS / DAYS | IF UNDER 24 HOURS: HOURS / MINUTES

6. RACE OF DECEDENT | 8. CITIZEN OF WHAT COUNTRY: U.S.A. | 10A. FULL NAME OF FATHER: REDACTED | 10B. STATE OF BIRTH: AL | 11A. FULL MAIDEN NAME OF MOTHER | 11B. STATE OF BIRTH: AL

12A. MILITARY SERVICE? — TO 19__ ☒ NONE | 12. SOCIAL SECURITY NO. | 14. MARITAL STATUS: DIVORCED | 15. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER MAIDEN NAME)

16A. USUAL OCCUPATION: ERVISOR | 16B. USUAL KIND OF BUSINESS OR INDUSTRY: Asbestos Refin. | 16C. USUAL EMPLOYER: KCAE | 16D. YEARS IN OCCUPATION: 28 | 17. EDUCATION—YEARS COMPLETED: 12

16E. RESIDENCE—STREET AND NUMBER OR LOCATION: REDACTED | 16F. CITY: KING CITY | 16G. ZIP CODE: 93930

16H. COUNTY: ITEREY | 16I. NUMBER OF YEARS IN THIS COUNTY: 52 | 16J. STATE OR FOREIGN COUNTRY: CALIFORNIA | 20. NAME, RELATIONSHIP, MAILING ADDRESS AND ZIP CODE OF INFORMANT: REDACTED

18A. PLACE OF DEATH: ANFORD MEDICAL CENTER | 18B. IF HOSPITAL, SPECIFY ONE: IP ER/OP, DOA | 18C. COUNTY: SANTA CLARA

18D. STREET ADDRESS—STREET AND NUMBER OR LOCATION: )O PASTEUR DRIVE | 18E. CITY: STANFORD

21. TIME INTERVAL BETWEEN ONSET AND DEATH | 22. WAS DEATH REPORTED TO CORONER? REFERRAL NUMBER ☐ YES ☒ NO

23. WAS BODY PREPARED? ☐ YES ☒ NO

24A. WAS AUTOPSY PERFORMED? ☐ YES ☒ NO

24B. WAS IT USED IN DETERMINING CAUSE OF DEATH? ☐ YES ☐ NO

25. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 21: ASBESTOSIS

26. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 21 OR 25? IF YES, LIST TYPE OF OPERATION AND DATE: NO

27. CAUSE OF DEATH

| | | |
|---|---|---|
| IMMEDIATE CAUSE (A) | BRADYCARDIA Abnormally slow heartbeat | FIFTEEN MINUTES |
| DUE TO (B) | HYPOXIA O2 deficiency | SEVEN DAYS |
| DUE TO (C) | SEPSIS (Disease causing) pathogenic orgisms in blood | SEVEN DAYS |

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.

27B. SIGNATURE AND DEGREE OR TITLE OF CERTIFIER | 27C. CERTIFIER'S LICENSE NUMBER: 6066953 | 27D. DATE SIGNED: 1/3/91

27A. DECEDENT ATTENDED SINCE: MONTH, DAY, YEAR: 11-23-90 | DECEDENT LAST SEEN ALIVE: MONTH, DAY, YEAR: 1/3/91

27E. TYPE ATTENDING PHYSICIAN'S NAME AND ADDRESS: PHILIP OYER MD 300 PASTEUR DRIVE STANFORD, CA

I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.

28A. SIGNATURE AND TITLE OF CORONER OR DEPUTY CORONER | 28B. DATE SIGNED

29. MANNER OF DEATH | 30A. PLACE OF INJURY | 30B. INJURY AT WORK ☐ YES ☐ NO | 30C. DATE OF INJURY MONTH, DAY, YEAR | 31. HOUR

32. LOCATION (STREET AND NUMBER OR LOCATION AND CITY) | 33. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)

34A. DISPOSITION(S): BURIAL | 34B. PLACE OF FINAL DISPOSITION—NAME AND ADDRESS: KING CITY CEMETERY KING CITY, CALIFORNIA | 34C. DATE MO. DAY, YEAR: 1/7/91 | 35. SIGNATURE OF EMBALMER: CHRIS TIMOTHY | 35B. LICENSE NUMBER: 7723

36A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH): WHITEHURST GRIM CHAPEL | 36B. LICENSE NO.: FD 519 | 37. SIGNATURE OF LOCAL REGISTRAR | 38. REGISTRATION DATE

| A. | B. | C. | D. | E. | F. | CENSUS TRACT |
|---|---|---|---|---|---|---|
| | | | | | | |

-901 MAKE NO ERASURES, WHITEOUTS, OR OTHER ALTERATIONS

UCMED00003739