

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY OF SAN DIEGO
GREGORY J. SMITH
ASSESSOR/RECORDER/COUNTY CLERK

71-091791 **CERTIFICATE OF DEATH** 8000 06325
STATE FILE NUMBER STATE OF CALIFORNIA—DEPARTMENT OF PUBLIC HEALTH LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

DECEDENT PERSONAL DATA	1A. NAME OF DECEASED—FIRST NAME Royal		1B. MIDDLE NAME Raymond		1C. LAST NAME Rife		2A. DATE OF DEATH—MONTH, DAY, YEAR August 5, 1971		2B. HOUR 6:25 P.M.			
	3. SEX Male	4. COLOR OR RACE White	5. BIRTHPLACE (STATE OR FOREIGN COUNTRY) Nebraska		6. DATE OF BIRTH May 16, 1888		7. AGE (LAST BIRTHDAY) 83 YEARS		IF UNDER 1 YEAR MONTHS DAYS			
	8. NAME AND BIRTHPLACE OF FATHER Zibe Rife-Unknown			9. MAIDEN NAME AND BIRTHPLACE OF MOTHER Ida May Cheney-Unknown			10. CITIZEN OF WHAT COUNTRY U.S.A.		11. SOCIAL SECURITY NUMBER 545-28-9307		12. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) Widowed	
	14. LAST OCCUPATION Research Scientist		15. NUMBER OF YEARS IN THIS OCCUPATION 20		16. NAME OF LAST EMPLOYING COMPANY OR FIRM (IF SELF EMPLOYED, SO STATE) Self Employed		17. KIND OF INDUSTRY OR BUSINESS Medical Research					
PLACE OF DEATH	18A. PLACE OF DEATH—NAME OF HOSPITAL OR OTHER IN-PATIENT FACILITY Grossmont Hospital				18B. STREET ADDRESS (STREET AND NUMBER, OR LOCATION) 5555 Grossmont Center Drive				18C. INSIDE CITY CORPORATE LIMITS (SPECIFY YES OR NO) Yes			
	18D. CITY OR TOWN La Mesa		18E. COUNTY San Diego		18F. LENGTH OF STAY IN COUNTY OF DEATH 65 YEARS		18G. LENGTH OF STAY IN CALIFORNIA 65 YEARS					
USUAL RESIDENCE (IF DEATH OCCURRED IN INSTITUTION, ENTER RESIDENCE BEFORE ADMISSION)	19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER, OR LOCATION) 3676 Zola Street				19B. INSIDE CITY CORPORATE LIMITS (SPECIFY YES OR NO) Yes		20. NAME AND MAILING ADDRESS OF INFORMANT San Diego Public Administrator 5555 Overland Avenue, Bldg. 6 San Diego, California 92123					
	19C. CITY OR TOWN San Diego		19D. COUNTY San Diego		19E. STATE California							
PHYSICIAN'S OR CORONER'S CERTIFICATION 20713712 069.0020	21A. CORONER (I HEREBY CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED ABOVE FROM THE CAUSE STATED BELOW AND THAT I HAVE HELD ON THE REMAINS OF DECEASED AS REQUIRED BY LAW)		21B. PHYSICIAN (I HEREBY CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED ABOVE FROM THE CAUSE STATED BELOW AND THAT I HAVE HELD ON THE REMAINS OF DECEASED AS REQUIRED BY LAW)		21C. PHYSICIAN OR CORONER'S SIGNATURE AND DEGREE OR TITLE <i>[Signature]</i>		21D. DATE SIGNED 8/6/71		21E. ADDRESS 1500 E. Canyon Blvd, La Mesa, CA 92048			
	22A. SPECIFY BURIAL, ENTOMBMENT OR CREMATION Burial		22B. DATE 8-11-71		23. NAME OF CEMETERY OR CREMATORY Mount Hope Cemetery		24. EMBALMER—SIGNATURE (IF BODY EMBALMED) LICENSE NUMBER Body Not Embalmed		25. DATE ACCEPTED FOR REGISTRATION BY LOCAL REGISTRAR AUG 9 - 1971			
MEDICAL AND HEALTH DATA	29. PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (A) Myocardial Infarction		29. PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (B) Coronary occlusion		29. PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (C) Coronary insufficiency & atherosclerosis		30. PART II: OTHER SIGNIFICANT CONDITIONS— CONTRIBUTING TO DEATH BUT NOT RELATED TO THE IMMEDIATE CAUSE GIVEN IN PART I no		31. WAS OPERATION OR BIOPSY PERFORMED FOR ANY CONDITION IN ITEMS 29 OR 30? (SPECIFY OPERATION AND/OR BIOPSY) no			
	33. SPECIFY ACCIDENT, SUICIDE OR HOMICIDE		34. PLACE OF INJURY (SPECIFY HOME, FARM, FACTORY, OFFICE BUILDING, ETC.)		35. INJURY AT WORK (SPECIFY YES OR NO)		36A. DATE OF INJURY—MONTH, DAY, YEAR		36B. HOUR			
	37A. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		37B. DISTANCE FROM PLACE OF INJURY TO USUAL RESIDENCE, ITEM 19, MILES		38. WERE LABORATORY TESTS DONE FOR DRUGS OR TOXIC CHEMICALS (SPECIFY YES OR NO)		39. WERE LABORATORY TESTS DONE FOR ALCOHOL (SPECIFY YES OR NO)					
STATE REGISTRAR	A. 1	B. 801	C. 2	D.	E. 4109	F.						

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

[Signature]
Gregory J. Smith
Assessor/Recorder/County Clerk

September 16, 2005

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

