

STATE OF NEVADA
 DEPARTMENT OF HUMAN RESOURCES
 DIVISION OF HEALTH
 VITAL STATISTICS
 STATE OF NEVADA — DEPARTMENT OF HUMAN RESOURCES
 DIVISION OF HEALTH — SECTION OF VITAL STATISTICS
 CERTIFICATE OF DEATH

94 009156

TYPE OR PRINT IN PERMANENT BLACK INK	LOCAL FILE NUMBER		DATE OF DEATH (Month, Day, Year)		STATE FILE NUMBER
	1 Robert Gayle GRUNWALD		September 25, 1994		24 Lincoln
DECEDENT	CITY, TOWN, OR LOCATION OF DEATH		HOSPITAL OR OTHER INSTITUTION—(Name if not other, give street and number)		SEX
	30 Caliente		30 Grover C Dils Medical Center		34 Inpatient
F. DEATH OCCURRED WITHIN SEE NUMBER COORDINATE OF RESERVE FILE	RACE—(e.g., White, Black, American Indian, etc.) (Specify)		AGE—Last Birthday (Years)	UNDER 1 YEAR	DATE OF BIRTH (Mo., Day, Yr.)
	5 White		7a 67	7b : : 7c : : 7d : :	8 9-30-1926
FATHER—NAME	MOTHER—MAIDEN NAME		MARRIED NEVER MARRIED, WIDOWED, DIVORCED (Specify)		SURVIVING SPOUSE (if wife, give maiden name)
	15 Nevada		15b Lincoln		15c Caliente
PARENTS	FATHER—NAME		MOTHER—MAIDEN NAME		RESIDENCE—STATE
	16 James I. Grunwald		17 Elsie Yarbrough		15d Nevada
DISPOSITION	INFORMANT—NAME (Type or Print)		MAYING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)		CITY, TOWN, OR LOCATION
	18a Claudene M. Grunwald		18b P.O. Box 24 Caliente, Nevada 89008		15e Yes
CERTIFIER	BURIAL, CREMATION, REMOVAL, OTHER (Specify)		CEMETERY OR CREMATORY—NAME		LOCATION
	19a Burial		19b Conaway Memorial Veterans		19c Caliente, Nevada
CAUSE OF DEATH	FUNERAL DIRECTOR—SIGNATURE (Or Parson, Attorney, etc.)		FUNERAL DIRECTOR LICENSE NUMBER		NAME AND ADDRESS OF FACILITY
	20a [Signature]		20b 15		20c P.O. Box 236 Caliente, Nevada 89008
CONDITIONS WHICH GAVE RISE TO IMMEDIATE CAUSE	21a 9-26-94		21c 2005		22a On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) and manner stated.
	21b [Signature]		21d [Signature]		22b [Signature]
STATEMENT OF UNDERLYING CAUSE LAST	23a [Signature]		23b [Signature]		22c [Signature]
	23c [Signature]		23d [Signature]		22d [Signature]
OTHER SIGNIFICANT CONDITIONS	24a [Signature]		24b [Signature]		24c [Signature]
	24c [Signature]		24d [Signature]		24e [Signature]
DATE RECEIVED BY REGISTRAR	25a [Signature]		25b [Signature]		25c [Signature]
	25c [Signature]		25d [Signature]		25e [Signature]
DATE RECEIVED BY REGISTRAR	26a [Signature]		26b [Signature]		26c [Signature]
	26d [Signature]		26e [Signature]		26f [Signature]
DATE RECEIVED BY REGISTRAR	27a [Signature]		27b [Signature]		27c [Signature]
	27d [Signature]		27e [Signature]		27f [Signature]
DATE RECEIVED BY REGISTRAR	28a [Signature]		28b [Signature]		28c [Signature]
	28d [Signature]		28e [Signature]		28f [Signature]
DATE RECEIVED BY REGISTRAR	29a [Signature]		29b [Signature]		29c [Signature]
	29d [Signature]		29e [Signature]		29f [Signature]
DATE RECEIVED BY REGISTRAR	30a [Signature]		30b [Signature]		30c [Signature]
	30d [Signature]		30e [Signature]		30f [Signature]



STATE REGISTRAR

Sydney Sylon

This is to certify that the above is a true and correct copy of the certificate on file in this office.

DEC 06 1999

State Registrar

Date Issued:

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First American Title

February 29, 2000

AT 28 MINUTES PAST 11 O'CLOCK

AM IN BOOK 146 OF OFFICIAL

RECORDS PAGE 516 LINCOLN

COUNTY, NEVADA.

Leslie Boucher

COUNTY RECORD

By Janice Sewer, Deputy