

| STATE OF CALIFORNIA - DEPARTMENT OF PUBLIC HEALTH | | | | REGISTRATION DISTRICT NO. 1901 | REGISTRAR'S NUMBER 12280 | | | | | |
|---|---|----------------------------------|--|--|--|---|------------------|---------------------------|--------------|--|
| 1. NAME OF DECEASED - FIRST NAME | | 1b. MIDDLE NAME | | 1c. LAST NAME | | 2a. DATE OF DEATH - MONTH, DAY, YEAR | | 2b. HOUR | | |
| Charles | | H. | | Kyson | | July 16, 1954 | | 5:30 A.M. | | |
| 3. SEX | 4. COLOR OR RACE | 5. MARRIAGE STATUS | 6. DATE OF BIRTH | | | 7. AGE (LAST BIRTHDAY) | | IF UNDER 1 YEAR | | |
| Male | Caucasian | Married | May 17, 1883 | | | 71 YEARS | | MONTHS DAYS HOURS MINUTES | | |
| 8a. USUAL OCCUPATION | | 8b. KIND OF BUSINESS OR INDUSTRY | | 9. BIRTHPLACE | | 10. CITIZEN OF WHAT COUNTRY | | | | |
| Architect | | Architect | | California | | U.S.A. | | | | |
| 11. NAME AND BIRTHPLACE OF FATHER | | | 12. MAIDEN NAME AND BIRTHPLACE OF MOTHER | | | 13. NAME OF PRESENT SPOUSE (IF MARRIED) | | | | |
| Ezra Frank Kysor New York | | | Clara Perry Wisconsin | | | Barbara Kyson | | | | |
| 14. WAS DECEASED EVER IN U.S. ARMED FORCES? | | | 15. SOCIAL SECURITY NUMBER | | | 16. INFORMANT | | | | |
| no | | | 550-26-0799 | | | Francis Harleigh Kyson | | | | |
| 17a. COUNTY | | 17b. CITY OR TOWN | | 17c. LENGTH OF STAY IN THIS CITY OR TOWN | | | | | | |
| Los Angeles | | Los Angeles | | 71 Years | | | | | | |
| 17d. FULL NAME OF HOSPITAL OR INSTITUTION | | | | 17e. ADDRESS | | | | | | |
| | | | | 1837 North Alexandria Avenue | | | | | | |
| 18a. STATE | | 18b. COUNTY | | 18c. CITY OR TOWN | | 18d. STREET OR RURAL ADDRESS | | | | |
| California | | Los Angeles | | Los Angeles | | 1837 North Alexandria Avenue | | | | |
| 19a. CORONER | | | | | 19b. PHYSICIAN | | | | | |
| 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 ANATOMY ON THE REMAINS OF DECEASED AS REQUIRED BY LAW. | | | | | 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 March 1954 TO July 1954 AND THAT I LAST SAW THE DECEASED ALIVE ON June 24, 1954 | | | | | |
| 19c. SIGNATURE | | | DEGREE OR TITLE | | 19d. ADDRESS | | 19e. DATE SIGNED | | | |
| Richard H. Kysor M.D. | | | A. B. | | 1131 N. Vermont Ave., Los Angeles | | July 16, 1954 | | | |
| 20a. SPECIFY BURIAL | | 20b. DATE | | 20c. CEMETERY OR CREMATORY | | 21. SIGNATURE OF EMBALMER | | LICENSE NUMBER | | |
| Burial | | 7/20/54 | | Forest Lawn Memorial Park | | James C. Murray | | 3469 | | |
| 22. FUNERAL DIRECTOR | | | | 23. DATE RECEIVED BY LOCAL REGISTRAR | | 24. SIGNATURE OF LOCAL REGISTRAR | | | | |
| FOREST LAWN MEMORIAL-PARK ASSOCIATION, INC. GLENDALE, CALIF. | | | | JUL 20 1954 | | George W. W. W. | | | | |
| MEDICAL AND HEALTH DATA | 25. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH | CEREBRAL ANOXEMIA | | | | | | APPROXIMATE | | |
| | 25. ANTECEDENT CAUSES | ADAM-STOKES ATTACK | | | | | | INTERVAL | | |
| | 25. MORBID CONDITIONS, IF ANY, GIVING RISE TO THE ABOVE CAUSE (A), STATING THE UNDERLYING CAUSE LAST. | HEART BLOCK | | | | | | BETWEEN | | |
| 25. MORBID CONDITIONS, IF ANY, GIVING RISE TO THE ABOVE CAUSE (A), STATING THE UNDERLYING CAUSE LAST. | ADVANCED ARTERIO SCLEROTIC | | | | | | ONSET AND | | | |
| 25. MORBID CONDITIONS, IF ANY, GIVING RISE TO THE ABOVE CAUSE (A), STATING THE UNDERLYING CAUSE LAST. | CARDIO-VASCULAR DISEASE | | | | | | DEATH | | | |
| 26. CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RELATED TO THE DISEASE OR CONDITION CAUSING DEATH. | | | | | | | | | | |
| 27a. DATE OF OPERATION | | | 27b. MAJOR FINDINGS OF OPERATION | | | | | | 28. AUTOPSY | |
| | | | | | | | | | YES NO | |
| 29a. SPECIFY ACCIDENT, SUICIDE OR HOMICIDE | | | 29b. PLACE OF INJURY | | 29c. LOCATION | | CITY OR TOWN | | COUNTY STATE | |
| | | | | | | | | | | |
| 29d. TIME OF INJURY | | | 29e. INJURY OCCURRED | | 29f. HOW DID INJURY OCCUR? | | | | | |
| | | | WHILE NOT WHILE AT WORK AT WORK | | | | | | | |

This is a true certified copy of the record
 If it bears the seal, imprinted in purple ink,
 of the Registrar-Recorder.

FEE \$2.00 SEP 3 1975

Richard Kysor REGISTRAR-RECORDER
 LOS ANGELES COUNTY, CALIFORNIA

