

53-041290

CERTIFICATE OF DEATH

S-300

STATE
FILE NO

STATE OF CALIFORNIA—DEPARTMENT OF PUBLIC HEALTH

REGISTRATION
DISTRICT NO

1150

REGISTRAR'S
NUMBER

673

VET. NON-RES.	1A NAME OF DECEASED—FIRST NAME] IN MIDDLE NAME PETE FLOYD			1C LAST NAME JOHN SCOTT			2A DATE OF DEATH—MONTH, DAY, YEAR MAY 3, 1953		2B HOUR 5:45 a.		
	3 SEX Male	4 COLOR OR RACE White	5 MARRIAGE STATUS Married	6 DATE OF BIRTH DEC. 21, 1899		7 AGE—LAST BIRTHDAY 53 YEARS	IF UNDER 1 YEAR MONTHS DAYS		IF UNDER 24 HOURS HOURS MINUTES		
DECEDENT PERSONAL DATA TYPE OR PRINT NAME	8A USUAL OCCUPATION Bartender			8B KIND OF BUSINESS OR INDUSTRY Tanforan Race Track			9 BIRTHPLACE Woodland, Calif.		10 CITIZEN OF WHAT COUNTRY U.S.A.		
	11 NAME AND BIRTHPLACE OF FATHER Pete Scott-Scotland				12 MAIDEN NAME AND BIRTHPLACE OF MOTHER Unknown				13 NAME OF PRESENT SPOUSE (IF MARRIED) Mary Scott		
X	14 WAS DECEASED EVER IN U.S. ARMED FORCES? SPECIFY YES, NO UNKNOWN W. W. A.			15 SOCIAL SECURITY NUMBER 553-20-1793			16 INFORMANT Mary Scott				
	17A COUNTY San Mateo			17B CITY OR TOWN Colma			17C LENGTH OF STAY IN THIS CITY OR TOWN Lead on arrival				
PLACE OF DEATH 50-	17D FULL NAME OF HOSPITAL OR INSTITUTION Junivero Serra Hospital						17E ADDRESS Briggs Street				
18A STATE California	18B COUNTY Stanislaus		18C CITY OR TOWN Oakdale			18D STREET OR RURAL ADDRESS Rt. 2 Box 51					
PHYSICIAN'S OR CORONER'S CERTIFICATION	19A CORONER Autopsy						19B PHYSICIAN Coroner				
	19C SIGNATURE William Crosby			19D ADDRESS San Mateo County, California			19E DATE SIGNED 5/19/53				
FUNERAL DIRECTOR AND REGISTRAR	20A SPECIFY BURIAL OR CREMATION Cremation		20B DATE 5/6/53		20C CEMETERY OR CREMATORY Cypress Lawn Cemetery			21 SIGNATURE OF EMBALMER (IF BODY EMBALMED) J. D. Dope		LICENSE NUMBER 2503	
	22 FUNERAL DIRECTOR W.C. Lasswell & Co., Daly City, Calif.				23 DATE RECEIVED BY LOCAL REGISTRAR May 20, 1953			24 SIGNATURE OF LOCAL REGISTRAR J. D. Dope			
420.1 CAUSE OF DEATH ENTER ONLY ONE CAUSE PER LINE FOR 1A, B, AND C.	25 DISEASE OR CONDITION DIRECTLY LEADING TO DEATH Recent myocardial infarction, posterior		APPROXIMATE								
	25 ANTECEDENT CAUSES Recent coronary occlusion with thrombosis, right main stem coronary artery		INTERVAL								
25 OTHER CAUSES Coronary atherosclerosis.		BETWEEN									
OTHER SIGNIFICANT CONDITIONS		ONSET AND									
OPERATIONS		DEATH									
27A DATE OF OPERATION		27B MAJOR FINDINGS OF OPERATION							28 AUTOPSY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
29A SPECIFY ACCIDENT, SUICIDE OR HOMICIDE		29B PLACE OF INJURY AT HOME			29C LOCATION CITY OR TOWN		29D COUNTY		29E STATE		
29F TIME OF INJURY		29G INJURY OCCURRED <input type="checkbox"/> WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK			29H HOW DID INJURY OCCUR?						