

DEPARTMENT OF SOCIAL SERVICES  
DIVISION OF HEALTH  
VITAL STATISTICS

STATE OF UTAH  
CERTIFICATE OF LIVE BIRTH

State File No. 394  
Registrar's No. 31

DEPARTMENT OF COMMERCE  
BUREAU OF THE CENSUS

1. PLACE OF BIRTH:  
 (a) County Utah  
 (b) City or town Springville  
 (c) Name of hospital or institution:  
 (d) Mother's stay before delivery:  
 In hospital or institution 17 In this community 17

2. USUAL RESIDENCE OF MOTHER:  
 (a) State Utah  
 (b) County Utah  
 (c) City or town Springville  
 (d) Street No.:

3. Full name of child Dorothy Hall  
 4. Date of birth 3-17-1942

5. Sex Female  
 6. Twin or Triplet  
 7. Number months of pregnancy 9  
 8. Is mother married? yes

FATHER OF CHILD  
 9. Full name Theron Smith Hall  
 10. Color or race W  
 11. Age at time of this birth 44 yrs.  
 12. Birthplace Springville Utah  
 13. Usual occupation Sheriff  
 14. Industry or business Utah County

MOTHER OF CHILD  
 15. Full maiden name Dorothy Luffkin Davenport  
 16. Color or race W  
 17. Age at time of this birth 38 yrs.  
 18. Birthplace Hood River Oregon  
 19. Usual occupation Housewife  
 20. Industry or business Home

21. Children born to this mother:  
 (a) How many other children of this mother are now living? 6  
 (b) How many other children were born alive but are now dead? 0  
 (c) How many children were born dead? 0

22. Mother's mailing address for registration notice:  
Springville, Utah  
 Was mother's blood tested serologically? yes Date:  
 If not, state why?

23. I hereby certify that I attended the birth of this child who was born alive at the hour of 8:27 p.m. on the date above stated and that the information given was furnished by Mrs. Dorothy Hall, related to this child as mother

24. Date received by local registrar 6-1-43  
 25. Registrar's own signature Almeda Evans  
 26. Given name added from supplemental report

Attendant's own signature M. D.  
 M. D., midwife, or other M. D.  
 Address Springville, Utah  
 Date signed 5-17-43

SDH-BHS 94 (1-78)

This is to certify that this is a true copy of the certificate on file in this office. This certified copy is issued under authority of Section 26-15-26 of the Utah Code Annotated, 1953 as Amended.  
Date Issued: JUL 26 1978

John E. Brockert  
John E. Brockert  
DIRECTOR OF VITAL STATISTICS





# Certified Certificate of Marriage

NORTH CAROLINA  
ONslow COUNTY

I, MILDRED M. THOMAS, Register of Deeds and Custodian of the  
marriage records for the County of Onslow, State of North Carolina,

hereby Certify that Clemmis Rembert Floyd, 24 years of age, of  
Lake City, S.C.

and Dorothy Hall, 32 years of age, of  
Columbus, Ga.

secured Marriage License and that according to the Return thereof were married by  
Charles A. Brown, Bishop

on the 18 day of July, 19 75, in the presence of Hilton D. Hall  
and Leona J. Walters, witnesses,  
and the License has been returned and is now a part of the records of said County.

IN TESTIMONY WHEREOF, I hereunto set my hand and affix my official seal, this 21  
day of July, 19 75.

Mildred M. Thomas  
Register of Deeds.  
Onslow County.

(OFFICIAL SEAL)

By: --, Deputy



452862

United States of America - State of New Mexico - New Mexico Vital Records and Health Statistics.

CERTIFICATE OF DEATH - Certified by Medical Investigator

Certified by Physician

Curry

Clovis

County of Death

City, Town, Location

Main form containing sections: DECEASED, PARENTS, DISPOSITION, CERTIFICATION, CAUSE OF DEATH. Includes fields for name, date of birth, sex, date of death, place of death, and cause of death (ASCVD, Asthma, HTN).

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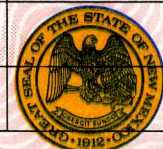
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SHADED AREAS FOR CERTIFIED COPY OF VITAL RECORD MEDICAL INVESTIGATOR - LEGAL OFFICER USE ONLY

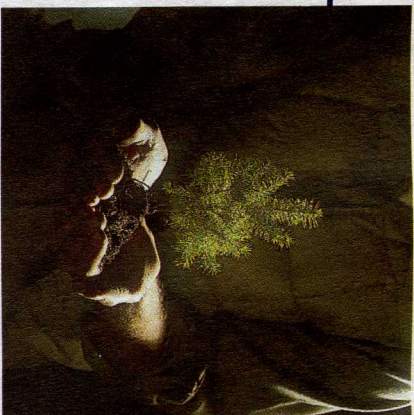
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officially registered and filed with the New Mexico Vital Records and Health Statistics, Public Health Division, Department of Health.

State Registrar DATE ISSUED 12/9/99







# The Living Memorial<sup>®</sup>

I hereby certify that a tree will be planted  
in Living Memorial, as requested  
by your funeral director, through an agreement  
between the United States Forest Service  
and Batesville Casket Company, Inc.

As a life ends, a new life begins.

*Jack David Thomas*

Chief, USDA Forest Service





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B A T E S V I L L E   C A S K E T   C O M P A N Y ,   I N C .

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One Batesville Blvd. • Batesville, Indiana 47006-7798

January 28, 2000

Ms. Sharon Wilson  
3845 Lew Wallace Drive  
Clovis, NM 88101

Dear Ms. Wilson:

Please accept our most sincere sympathy on your recent loss.

In memory of your loved one, we have arranged for a tree to be planted in a National Forest to serve as a Living Memorial. This is accomplished in cooperation with the Forest Service, United States Department of Agriculture, as part of a major endeavor to reforest the United States. This thoughtful request was made on your behalf by Muffley Funeral Home, Inc.

Although we cannot determine the exact location of the tree, you can be assured it will be planted where the need is greatest, its species and location carefully selected by the Forest Service. We know you share with us the hope that this tree will grow in full measure to bring beauty to the landscape and pleasure to all who pass its way.

Again, we extend our sympathy and feel certain you will find peace and comfort in the knowledge that every detail of the service was properly handled. The enclosed certificate acknowledges the fulfillment of the Living Memorial.

Sincerely,

David J. Hirt  
President