

CENSUS TRACT
104

REGISTRATION DISTRICT
4423
REGISTERED RESIDER
104

NEW YORK STATE
DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

0 0 0 0 0 0 9 5 5 6 5

STATISTICAL DISTRICT
C
B

1 NAME, FIRST LAST
LE ROY IRVING SMITH
SEX MALE FEMALE
DATE OF BIRTH DEC 30 1935

2 AGE AT DEATH
73 YEARS
3 CAUSE OF DEATH
RESPIRATORY ARREST
4 OCCUPATION
OIL DEALER

5 LOCALITY OF DEATH
ST. LAW
6 HOSPITAL OR OTHER INSTITUTION
GOVERNEUR ESTIMABLE HOSP.

7 STATE OF BIRTH
NEW YORK
8 COUNTRY OF BIRTH
USA
9 MARITAL STATUS
MARRIED

10 RACE
WHITE
11 SEX OF DECEASED
MALE
12 SEX OF REPORTER
FEMALE

13 OCCUPATION
OIL DEALER
14 NAME AND ADDRESS OF FATHER
IRVING P. SMITH

15 LOCALITY OF BIRTH
NEW YORK ST. LAW
16 LOCALITY OF DEATH
GOVERNEUR

17 STREET AND NUMBER OF RESIDENCE
134 PARK ST. 13642
18 NAME OF FATHER
IRVING P. SMITH

19 NAME OF REPORTER
MARGORIE M. SMITH
20 ADDRESS OF REPORTER
134 PARK ST. GOVERNEUR NY

21 MANNER OF DEATH
CREMATION
22 NAME AND ADDRESS OF FUNERAL HOME
BURR-GREEN FEDERAL HOME INC. GOVERNEUR NY

23 SIGNATURE OF REPORTER
Bonnie Reed
24 DATE OF REPORT
DEC 31 1985

25 SIGNATURE OF PHYSICIAN
A. Bashir
26 DATE OF DEATH
DEC 30 1985

27 DEATH CAUSED BY
RESPIRATORY ARREST
28 OTHER SIGNIFICANT CONDITIONS
BRONCHOPNEUMONIA
TERMINAL METASTASIS

29 SPECIFY IF ACCIDENT, HOMICIDE, SUICIDE, UNDETERMINED, PENALTY, INVESTIGATION
NO

30 PLACE OF BIRTH
ST. LAW
31 PLACE OF DEATH
GOVERNEUR

32 LOCATION OF DEATH
ST. LAW

112
33

LEGAL MEMBERSHIP WHERE NECESSARY PER.

00

0

1629

7

lung cancer coded assigned by NYS nosologist

CONVENTIONS: IF ANY SENSE HAVE MADE TO INDICATE CAUSE AS STATING THE UNDERLYING CAUSE LAST.

RTV WESTON 007426

EXHIBIT 2