

From my Edna Purviance file

Edna's Death Certificate January 1958

Gerald (Jerre) Smith
<http://jerre.com>



CERTIFICATION OF VITAL RECORD

STATE OF CALIFORNIA
DEPARTMENT OF HEALTH SERVICES

6
 FILE NO. **58-007060** - CERTIFICATE OF DEATH
 LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER **7053 775**

STATE OF CALIFORNIA - DEPARTMENT OF PUBLIC HEALTH

DECEDENT PERSONAL DATA	1. NAME OF DECEASED - GIVE NAME, MIDDLE NAME, INITIALS EDNA EDNA O'CONNOR PURVIANCE SQUIBB	3A. DATE OF BIRTH January 13, 1898	3B. SEX Female	4. COLOR OR RACE Caucasian Nevada	5. DATE OF DEATH October 21, 1958	7. AGE AT DEATH 61 YEARS	8. SOCIAL SECURITY NUMBER 573 - 07 - 2037	
	9. NAME AND BIRTHPLACE OF FATHER Madison Gates Purviance - Ill.	10. MOTHER NAME AND BIRTHPLACE OF MOTHER Louise Davoy - England	11. CITY OR TOWN, COUNTY AND STATE OF BIRTH U. S. A.	12. LAST OCCUPATION Actress	13. NAME OF LAST EMPLOYING COMPANY OR FIRM Charles Chaplin Enterprises	14. KIND OF INDUSTRY OR BUSINESS Motion Pictures	15. PRESENT OR LAST OCCUPATION OF SURVIVOR No	16. PRESENT OR LAST OCCUPATION OF SPOUSE Widowed
	17. PLACE OF DEATH Motion Picture County Home and Hosp.	18. STREET ADDRESS 23430 Ventura Blvd.	19. CITY OR TOWN, COUNTY AND STATE OF DEATH Los Angeles	20. LENGTH OF DEATH IN COUNTY OF DEATH 15 YEARS	21. LENGTH OF DEATH IN CALIFORNIA 15 YEARS	22. NAME OF EMPLOYER IN LAST PLACE EMPLOYED Myrtle N. Wooders		
	23. LAST USUAL RESIDENCE - STREET ADDRESS 336 North Beachwood Drive	24. CITY OR TOWN, COUNTY AND STATE OF USUAL RESIDENCE Los Angeles	25. NAME OF EMPLOYER IN LAST PLACE EMPLOYED Myrtle N. Wooders	26. ADDRESS 336 North Beachwood Drive Los Angeles, Calif.	27. DATE SIGNED Jan. 14, 1958	28. PHYSICIAN'S SIGNATURE William W. Collins, M.D.		
FUNERAL DIRECTOR AND LOCAL REGISTRAR	29. NAME OF FUNERAL DIRECTOR GLENN CALIFORNIA	30. DATE OF OPERATION Jan 16, 1958	31. NAME OF CEMETERY OR CREMATORY Forest Lawn Memorial Crematory	32. ADDRESS JAN 16, 1958	33. SIGNATURE OF FUNERAL DIRECTOR William W. Collins	34. SIGNATURE OF LOCAL REGISTRAR William W. Collins	35. LICENSE NUMBER 4017	
	36. CAUSE OF DEATH PART I: IMMEDIATE CAUSE Carcinoma of breast with metastases PART II: OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH Spinal							
MEDICAL AND HEALTH DATA	37. OPERATION - CHECK ONE <input checked="" type="checkbox"/> Operation performed		38. DATE OF OPERATION JAN 16, 1958		39. AUTOPSY - CHECK ONE <input checked="" type="checkbox"/> Autopsy performed			
	34. SPECIFY ACCIDENT, SUICIDE OR HOMICIDE		35. DESCRIBE HOW INJURY OCCURRED					
INJURY INFORMATION	36. INJURY OCCURRED		37. PLACE OF INJURY		38. CITY, TOWN OR LOCATION			

597786



This is to certify that this document is a true copy of the official record filed with the Office of Vital Records.
 S. Kimberly Betsh, Director and State Registrar of Vital Records
 by: *[Signature]*
 GEORGE H. PETERSON, JR., M.D., M.P.H. CHIEF ACTING STATE REGISTRAR

98 SEP 29 AM 7:46



This copy not valid unless prepared on printed matter bearing official seal and signature of Registrar

