

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

RECEIVED

95-11682

APR 03 2018

CERTIFICATE OF DEATH

IDWR/NORTHERN

CERTIFICATE NUMBER: 2015-025301

LOCAL FILE NUMBER: 3506

DATE ISSUED: 09/15/2015

FEE NUMBER: 0003201069

GIVEN NAMES: DIANE CUTHILL
LAST NAME: THOREN

COUNTY OF DEATH: SPOKANE
DATE OF DEATH: SEPTEMBER 09, 2015
HOUR OF DEATH: 06:09 P.M.
SEX: FEMALE
AGE: 62 YEARS

SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: NO, NOT HISPANIC
RACE: WHITE

BIRTHDATE: JANUARY 14, 1953
BIRTHPLACE: WEST SEATTLE, KING CNTY, WASHINGTON

MARITAL STATUS: MARRIED
SPOUSE: TERRY W. THOREN

OCCUPATION: TREASURER
INDUSTRY: UTILITY
EDUCATION: MASTER'S DEGREE
US ARMED FORCES? NO

INFORMANT: TERRY W. THOREN
RELATIONSHIP: HUSBAND
ADDRESS: 16022 N HEATHERGLEN COURT, SPOKANE, WA 99208

PLACE OF DEATH: HOSPITAL
FACILITY OR ADDRESS: PROVIDENCE SACRED HEART MEDICAL CENTER
CITY, STATE, ZIP: SPOKANE, WASHINGTON 99204

RESIDENCE STREET: 16022 N HEATHERGLEN COURT
CITY, STATE, ZIP: SPOKANE, WASHINGTON 99208
INSIDE CITY LIMITS? NO
COUNTY: SPOKANE
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 19 YEARS

FATHER: JAMES MACFARLANE CUTHILL
MOTHER: JEANNE MARCELLA PALM

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: HERITAGE CREMATORY
CITY, STATE: SPOKANE, WA
DISPOSITION DATE: SEPTEMBER 16, 2015

FUNERAL FACILITY: HERITAGE FUNERAL HOME
ADDRESS: 508 N. GOVERNMENT WAY
CITY, STATE, ZIP: SPOKANE WA 99224
FUNERAL DIRECTOR: KOBY L. MAY

- CAUSE OF DEATH:
- A. VENTRICULAR FIBRILLATION
INTERVAL: < 10 MINUTES
 - B. SEPSIS
INTERVAL: < 48 HOURS
 - C. PYELONEPHRITIS
INTERVAL: > 72 HOURS
 - D.
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

DATE OF INJURY:
HOUR OF INJURY:
INJURY AT WORK?
PLACE OF INJURY:

LOCATION OF INJURY:

CITY, STATE, ZIP:
COUNTY:
DESCRIBE HOW INJURY OCCURRED:

MANNER OF DEATH: NATURAL
AUTOPSY: YES

AVAILABLE TO COMPLETE THE CAUSE OF DEATH? NO
DID TOBACCO USE CONTRIBUTE TO DEATH? UNKNOWN
PREGNANCY STATUS, IF FEMALE: NOT APPLICABLE

CERTIFIER NAME: JEREMY GRAHAM, DO
TITLE: OSTEOPATHIC PHYSICIAN
CERTIFIER
ADDRESS: 101 W. 8TH AVENUE
CITY, STATE, ZIP: SPOKANE WA 99204
DATE SIGNED: SEPTEMBER 14, 2015

STATUS OF DECEDENT, IF A TRANSPORTATION INJURY:
NOT APPLICABLE

ITEM(S) AMENDED: NONE

NUMBER(S): NONE
DATE(S): NONE

CASE REFERRED TO ME/CORONER: NO
FILE NUMBER: NOT APPLICABLE
ATTENDING PHYSICIAN:
JEREMY GRAHAM DO

LOCAL DEPUTY REGISTRAR:
SANDRA HUNS
DATE RECEIVED: SEPTEMBER 15, 2015

