

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

RECEIVED

NOV 21 2018

95-12247

CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2017-027029

LOCAL FILE NUMBER: 2287

DATE ISSUED: 06/20/2017

FEE NUMBER: 26236

FIRST AND MIDDLE NAME(S): GARY RICHARD

LAST NAME(S): MCGEE

COUNTY OF DEATH: SPOKANE

DATE OF DEATH: JUNE 14, 2017

HOUR OF DEATH: 03:17 PM

SEX: MALE

AGE: 67 YEARS

SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO

RACE: WHITE

BIRTH DATE: MAY 22, 1950

BIRTHPLACE: SPOKANE, SPOKANE COUNTY, WASHINGTON

MARITAL STATUS: DIVORCED

SPOUSE: NOT APPLICABLE

OCCUPATION: TRUCKER DRIVER

INDUSTRY: FOOD HANDLING

EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED

US ARMED FORCES: YES

INFORMANT: JANEANE JORGENSEN

RELATIONSHIP: SIGNIFICANT OTHER

ADDRESS: 15804 E 14TH AVE, SPOKANE VALLEY, WA 99037

CAUSE OF DEATH:

A: RESPIRATORY FAILURE

INTERVAL: APPROXIMATELY 5 DAYS

B: ISCHEMIC COLITIS

INTERVAL: 14 DAYS

C: POST PROCEDURE HYPOTENSION AND RENAL FAILURE

INTERVAL: 15 DAYS

D: VENTRICULAR TACHYCARDIA

INTERVAL: 5 YEARS

OTHER CONDITIONS CONTRIBUTING TO DEATH: TOBACCO CONTRIBUTED TO CORONARY ARTERY DISEASE

DATE OF INJURY:

HOUR OF INJURY: UNKNOWN

INJURY AT WORK: UNKNOWN

PLACE OF INJURY:

LOCATION OF INJURY:

CITY, STATE, ZIP:

COUNTY:

DESCRIBE HOW INJURY OCCURRED:

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: HOSPITAL

FACILITY OR ADDRESS: PROVIDENCE SACRED HEART MEDICAL CENTER

CITY, STATE, ZIP: SPOKANE, WASHINGTON 99204

RESIDENCE STREET: 15804 E 14TH AVE

CITY, STATE, ZIP: SPOKANE VALLEY, WASHINGTON 99037-9242

INSIDE CITY LIMITS: YES COUNTY: SPOKANE

TRIBAL RESERVATION: NOT APPLICABLE

LENGTH OF TIME AT RESIDENCE: 20 YEARS

FATHER/PARENT: PATRICK HENRY MCGEE

MOTHER/PARENT: FERN JARVIS GOSSETT

METHOD OF DISPOSITION: CREMATION

PLACE OF DISPOSITION: HENNESSEY CREMATORY (PINES)

CITY, STATE: SPOKANE VALLEY, WASHINGTON

DISPOSITION DATE: JUNE 20, 2017

FUNERAL FACILITY: HENNESSEY FUNERAL HOME & CREMATORY

ADDRESS: 1315 N PINES RD

CITY, STATE, ZIP: SPOKANE VALLEY, WASHINGTON 99206

FUNERAL DIRECTOR: SCOTT H. DAHL

MANNER OF DEATH: NATURAL

AUTOPSY: NO

WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE

CAUSE OF DEATH: NOT APPLICABLE

DID TOBACCO USE CONTRIBUTE TO DEATH: YES

PREGNANCY STATUS IF FEMALE: NO RESPONSE

CERTIFIER NAME: GARY MCGEE, MD

TITLE: PHYSICIAN

CERTIFIER ADDRESS: 122 W. 7TH AVE

CITY, STATE, ZIP: SPOKANE, WASHINGTON 99204

DATE SIGNED: JUNE 16, 2017

CASE REFERRED TO ME/CORONER: NO

FILE NUMBER: NOT APPLICABLE

ATTENDING PHYSICIAN: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: DIANNA SCHROEDER

DATE RECEIVED: JUNE 20, 2017

SCANNED

NOV 26 2018

DOH 422-132 (4/16)

NOT VALID IF PHOTOCOPIED OR ALTERED



State of Idaho

DEPARTMENT OF WATER RESOURCES

Northern Region • 7600 N. Mineral Drive, Suite 100 • Coeur d'Alene, Idaho 83815-7763
Phone: (208) 762-2800 • Fax: (208) 762-2819 • Website: www.idwr.idaho.gov

C.L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

November 26, 2018

PATRICIA WASHBURN
2309 S FAWN
SPOKANE WA 99206

RE: Ownership of Coeur d'Alene-Spokane River Basin Adjudication (CSRBA) Claim No. 94-12247

Dear Water Right Claimant,

We received your supporting documentation and have updated our records accordingly. I offer my sincerest condolences for your loss. Enclosed is a copy of your amended CSRBA Notice of Claim to a Water Right so you may review the document to confirm the accuracy of the updated information.

Please contact me if you have any questions or if any further changes need to be applied to your claim. I can be reached by phone during business hours at 208-762-2800 or by email at Dawn.Lenon@idwr.idaho.gov.

Best Regards,

Dawn Lenon
Technical Records Specialist 1
Northern Region

Enclosure: Notice of Claim to a Water Right for Claim No. 94-12247