

36-103F

RECEIVED

MAR 08 2011

DEPARTMENT OF
WATER RESOURCES

I am writing to ask that you remove Mr. Basil Zink
Name from our water right as he is deceased.

Enclosed please find a copy of his death certificate.

Thank you.

M. J. H. Zink

updated- 3-8-11
WR report mailed out

STATE OF IDAHO
CERTIFICATION OF VITAL RECORD

STATE OF IDAHO
DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS

CERTIFICATE OF DEATH

Date Filed AUGUST 08, 2008

State File No. 2008-06410

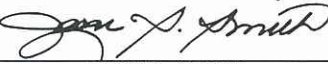
DECEDENT - LEGAL NAME BASIL LESTER ZINK			
SEX MALE	SOCIAL SECURITY NUMBER 518-30-0638	AGE 84 YEARS	DATE OF BIRTH APRIL 05, 1924
BIRTHPLACE NAPER, NEBRASKA		PLACE OF RESIDENCE HAGERMAN, IDAHO	
MARITAL STATUS AT TIME OF DEATH MARRIED		NAME OF SURVIVING SPOUSE (If wife, maiden name) MYRLE HYDE	WAS DECEDENT EVER IN U.S. ARMED FORCES? YES
FATHER - NAME ROYAL HAWLEY ZINK			BIRTHPLACE MISSOURI
MOTHER - MAIDEN NAME VERA MAE THIBAUT			BIRTHPLACE NEBRASKA
METHOD OF DISPOSITION BURIAL		FUNERAL SERVICE LICENSEE DWAIN MARK DEMARAY	
NAME AND ADDRESS OF FUNERAL FACILITY DEMARAY FUNERAL SERVICE, GOODING, IDAHO			
DATE OF DEATH AUG. 02, 2008	TIME OF DEATH 7:40 A.M.	CITY, TOWN OR LOCATION OF DEATH GOODING, IDAHO	COUNTY OF DEATH GOODING
CAUSE OF DEATH (underlying cause last) a. ASPIRATION PNEUMONIA			Approximate Interval Between Onset and Death HOURS YEARS
b. ESOPHAGEAL DYSMOTILITY			
c.			
d.			
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above NONE STATED			WAS AN AUTOPSY PERFORMED? NO
MANNER OF DEATH NATURAL	NAME OF CERTIFIER MARK D. SPENCER, M.D.		TITLE PHYSICIAN
CORONER SUBSEQUENT CERTIFICATION IF NECESSARY			
EXTERNAL CAUSES ONLY			
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?
LOCATION WHERE INJURY OCCURRED			
DESCRIPTION OF HOW INJURY OCCURRED			

This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO BUREAU OF VITAL RECORDS AND HEALTH STATISTICS.

AUGUST 25, 2008

DATE ISSUED: _____

This copy is not valid unless prepared on engraved border displaying state seal and signature of the Registrar.


JANE S. SMITH
STATE REGISTRAR

