


## DEATH CERTIFICATE (DEATH INSPECTION FINDINGS)

(To be filled in by coroner – also for still born)

1 First and last name of the deceased (also gender name), or indication whether still birth or died nameless; in this case indication about parents of the child still born or died nameless:	Last name, print if possible MACPHERSON Duncan	Alvin
2 Gender:	male – female	Children: legitimate / illegitimate
3 Indications of Birth	Day: <u>03rd</u> Month: <u>February</u> In ..... Region:.....	Year: <u>1966</u> Hour: Country:.....
4 Religion (with children: that of the parents) and Marital Status		single, XXXXXXXXXXXXXXX
5. Citizenship	Canada	
6. Profession (if wives who do not have own profession: the one of the husband; if children: the one of the father):		
7. Residence and Dwelling (exact address)		Saskatoon, Canada
8. Time and Place of Death:	Discovery: Day: <u>18</u> Month: <u>July</u> Place: <u>Stubai Glacier – Slope</u> <u>6167 Neustift</u>	Year: <u>2003</u> Hour: <u>15:15 pm</u> <u>Schaufelschuss</u>
9. If children still born or died in first year: indications about weight, length, or age of fetus:	grams:.....cm:.....	L.M.....
10. Is the child a child of multiple birth?	yes - no	
11. Cause of Death, in	German or Latin scientific terms	Time between beginning of illness and death
a) Ailment which caused death or illness/es leading to death:	Poly Trauma after fall into crevasse	
b) Noticeable resulting illness/es which caused immediate death (not to enter cause of death, such as Heart Paralysis, Circulatory Failure, Respiratory Paralysis, etc.)		
c) Other significant ailments which existed at time of death		

12. If death by force (suicide, homicide, manslaughter, death by accident): exact details about manner as well as cause of death by force:	(i.e. suicide through gas poisoning, run over by car, etc.)  Fall into glacier crevasse	
13. Is speed-up of funeral necessary?	yes - no. Cause:.....	.....
14. Name and address of attending physician		
15. Identity of Deceased was established by:	Constabulary Neustift	16. Day and Hour of Inspection of Death:  July 18, 2003, 22:00 pm

17. Special Comments (i.e. Indication of Day of Funeral):

No concerns exist by the physician regarding the funeral.

Signature and stamp of Coroner

Fulpmes, July 21, 2003