

WASHOE COUNTY
HEALTH DISTRICT
ENHANCING QUALITY OF LIFE

PERMIT FOR DISINTERMENT OF HUMAN REMAINS

Permission is hereby requested for disinterment of the remains of:

ELIZABETH WISHON who died on Jan 29, 1977
Name of Deceased Date of Death

At Reno, The remains are now buried
Place of Death

At Mountain View Cemetery to be reinterred
Place of Burial Cemetery

At Mt. View Kingman Ariz. 1301 N. STOCKTON Hill Rd.
Place of Reinterment Kingman, AZ 86401

Steven Schwedtfeger will be in charge of all arrangements.
Name of Funeral/Cemetery Director

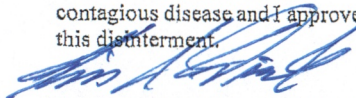
Madelyn Hendrickson
Name and Signature of Person Requesting Disinterment
(Attach a letter of request if remains taken out of County)

GRAND - Daughter
Relationship to Deceased

21275 S. LEWELLEN
Address Beavercreek Ore 97004

A certified copy of the death certificate must be attached to this permit.

APPROVED: Based on the attached
death certificate, I certify that this
death did not result from a
contagious disease and I approve
this disinterment.



District Health Officer

4/25/2022

Date

APPROVED: Signature required
only for Out-of-State removal of
human remains.

Chair
Board of County Commissioners

Date

April 22, 2022

①

Hello Board of County Commissioners,

Grandmother Elizabeth in 1956 told me her affairs were in order, and she wanted to be buried next to her deeply loved husband there in Kingman Ariz. She also said in a resigned voice she would probably have to go live with her estranged daughter, my birth mother; also estranged from me and three other half siblings.

What I came to realize as an adult was that her words were an unspoken plea and trust, that if this was to happen it would be me to see it done.

I feel I owe a debt and a life time gratefulness to Elizabeth and Judge Eddie Wishon for pulling the strings; seeing the State of Calif. remove my brother and I from our mother. This giving them temporary custody until my divorced father could remarry, and be given full custody. There were no tears shed by us as the state worker took us away. My brother was six and I was four.

For the next year and a half we were safe, loved had regular meals; and then reunited with my Father here in Oregon.

Our grandparents stayed in touch the following years. In 1956 at age nine my brother and I visited them in Kingman for the summer. It was on that visit that Grandmother told me her wish; she also said that both of their funerals and grave plots were payed for. Grandpa would pass in 1960, he is buried next to his mother, the plot on his other side still empty waiting for Elizabeth.

By about 1971 my Grandmother had moved in or by my birth mother. Details of her life from here out are fuzzy or second hand as she was under control of her daughter and the communication door was shut. I tried to send a register letter, her signature would mean she was alive. Nothing come back.

We now had two more half siblings, again by different fathers.

About a year after Grandmother's passing, the youngest brother hitch hiked up from Nev. and gave us the news of Elizabeth's death.

In 1980 on a trip through Utah I stopped to see my mother's brother, and was told of his death in the Grand Canyon one year to the day! His widow told me Elizabeth had been put in a county grove, her exact words were "poppers grave". Her voice was very much on edge, as if this was my fault. The visit only lasted under two minutes, I was more or less desmessed; I didn't know where she was buried, and there was no way to ask.

Two years ago I found Grandma was buried at the Mt. View cemetery in Reno. I began letter writing and phone calls to see what it would take to have her moved to Kingman. At that time being told I needed a "Court Order" and the expenses became overwhelming.

What has now made it possible

(4)

is the internet, email and phone help from Tommaier retired "Meals on Wheels Director" Portland Ore. Also the help from his wife Siggey.

Tom is also setting up and will be beneficiary for the "Go Fund Me," to cover expenses other than those I am able to.

Heres waiting for your approval.

Yours Truly,

Madelyn Hendrickson

21275 S. LEWELLEN Rd.

Beavercreek Ore 97004

503-632-5775- land line

Tommaier my rep.

oregon maier @ gmail.com

503-457-4104 CELL 503-632-3173 home
475

STATE OF NEVADA

CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC AND BEHAVIORAL HEALTH

VITAL STATISTICS
STATE OF NEVADA—DEPARTMENT OF HUMAN RESOURCES

DIVISION OF HEALTH—SECTION OF VITAL STATISTICS
CERTIFICATE OF DEATH

77-000391

393
TYPE, OR PRINT IN
PERMANENT INK
SEE HANDBOOK FOR
INSTRUCTIONS

USUAL RESIDENCE
WHERE DECEASED
LIVED. IF DEATH
OCCURRED IN
INSTITUTION, GIVE
RESIDENCE BEFORE
ADMISSION.

PARENTS

CAUSE

CERTIFIER

BURIAL

DECEASED—NAME		FIRST	MIDDLE	LAST	SEX	DATE OF DEATH (MONTH, DAY, YEAR)
1. Elizabeth				WISHON	2. Female	3. January 29, 1977
RACE WHITE, NEGRO, AMERICAN INDIAN, ETC. (SPECIFY)	AGE—LAST BIRTHDAY (YEARS)	UNDER 1 YEAR	UNDER 1 DAY	DATE OF BIRTH (MONTH, DAY, YEAR)	COUNTY OF DEATH	
4. White	5a. 93	5b. MOS. DAYS	5c. HOURS MIN.	6. Jan. 19, 1884	7a. Washoe	
CITY, TOWN, OR LOCATION OF DEATH		INSIDE CITY LIMITS (SPECIFY YES OR NO)	HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)			
7b. Reno		7c. Yes	7d. Reno Convalescent Center			
STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY)		CITIZEN OF WHAT COUNTRY		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)		SURVIVING SPOUSE (IF WIFE, GIVE MAIDEN NAME)
8. Tennessee		9. U.S.A.		10. Widowed		11.
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED)		KIND OF BUSINESS OR INDUSTRY		
12. [REDACTED]		13a. Housewife		13b. Own Home		
RESIDENCE—STATE	COUNTY	CITY, TOWN, OR LOCATION		INSIDE CITY LIMITS (SPECIFY YES OR NO)	STREET AND NUMBER	
14a. Nevada	14b. Washoe	14c. Reno		14d. yes	14e. 1300 Mill Street	
FATHER—NAME		FIRST	MIDDLE	LAST	MOTHER—MAIDEN NAME	
15. Gill					16.	
INFORMANT—NAME				MAILING ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP)		
17a. Helyn Thompson				17b. P.O. Box 158 Silver Springs, Nevada 89429		
PART I. DEATH WAS CAUSED BY: [ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c)]						
18. IMMEDIATE CAUSE						APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
(a) Cerebral Thrombosis						4 days
(b) Generalized Arteriosclerosis						Years
(c)						
PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a)						AUTOPSY (YES OR NO)
						19a. No
IF YES WERE FINDINGS CONSIDERED IN DETERMINING CAUSE OF DEATH						19b.
ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY)	DATE OF INJURY (MONTH, DAY, YEAR)	HOUR	HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 18)			
20a.	20b.	20c.	20d.			
INJURY AT WORK (SPECIFY YES OR NO)	PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY)	LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, STATE)				
20e.	20f.	20g.				
CERTIFICATION—PHYSICIAN:	MONTH	DAY	YEAR	MONTH	DAY	YEAR
21a. I ATTENDED THE DECEASED FROM	4	1	-74	TO	1	-29-77
21b.				21c.	1	-29-77
CERTIFICATION—MEDICAL EXAMINER OR CORONER: ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR THE INVESTIGATION, IN MY OPINION, DEATH OCCURRED ON THE DATE AND DUE TO THE CAUSE(S) STATED.			HOUR OF DEATH	THE DECEDENT WAS PRONOUNCED DEAD		
22a.			22b.	22c.		
CERTIFIER—NAME (TYPE OR PRINT)			SIGNATURE	DEGREE OR TITLE	DATE SIGNED (MONTH, DAY, YEAR)	
23a. Donald Haislip, M.D.			23b.	23c. M.D.	23d. 2-1-77	
MAILING ADDRESS—CERTIFIER			CITY OR TOWN, STATE, ZIP			
23e. 77 Pringle Way			23f. Reno, Nevada			
BURIAL, CREMATION, REMOVAL (SPECIFY)	CEMETERY OR CREMATORY—NAME		LOCATION		CITY OR TOWN	STATE
24a. Burial	24b. Mountain View Cemetery		24c. Reno		24d. Nevada	
DATE (MONTH, DAY, YEAR)	FUNERAL HOME—NAME AND ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP)					
24d. Feb. 8, 1977	25a. Ross, Burke & Knobel Mortuary; 2155 Kietzke Ln., Reno, Nv. 89502					
FUNERAL DIRECTOR—SIGNATURE			REGISTRAR—SIGNATURE	DATE RECEIVED BY LOCAL REGISTRAR		
25b. [Signature]			25c. [Signature]	25d. February 7, 1977		

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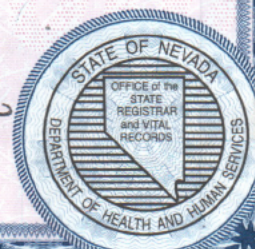
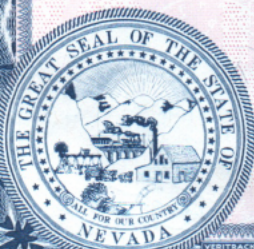
CERTIFIED COPY OF VITAL RECORDS

This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

DATE ISSUED: MAR 05 2019

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

Julie Katchear
STATE REGISTRAR



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE