

CORONER'S INVESTIGATION REPORT

LEON B. BRUNE

CORONER
INYO COUNTY

File No. 95-52

Investigation Upon the Body of
JOHN DOE

FIRST NAME MIDDLE NAME LAST NAME

Classification

- ☐ NATURAL DEATH.....
- ☐ TRAFFIC ACCIDENT.....
- ☐ SUICIDE.....
- ☐ HOMICIDE.....
- ☐ MISC. VIOLENT ACCIDENT.....
- ☒ UNDETERMINABLE.....

DECEDENT PERSONAL DATA

SEX MALE	AGE 25-30	HEIGHT	WEIGHT	EYES	HAIR
RACE	COMPLEXION	SCARS AND MARKS			
DATE OF BIRTH		BIRTHPLACE		CITIZENSHIP	
OCCUPATION		EMPLOYING COMPANY OR FIRM			
MARITAL STATUS <input type="checkbox"/> NEVER MARRIED <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED					
SOCIAL SECURITY NUMBER	VETERAN STATUS	HOW IDENTIFIED		FINGERPRINTS <input type="checkbox"/> FBI <input type="checkbox"/> CII	

RESIDENCE

LAST USUAL RESIDENCE—STREET ADDRESS	CITY OR TOWN	STATE
TEMPORARY OR MILITARY ADDRESS	CITY OR TOWN	STATE

INJURY INFORMATION

PLACE OF INJURY 12 MILES SOUTH-SOUTH EAST	CITY OR TOWN OLANCHA	COUNTY INYO	STATE CA
DATE OF INJURY	TIME OF INJURY	<input type="checkbox"/> WHILE AT WORK <input checked="" type="checkbox"/> NOT WHILE AT WORK	

PLACE OF DEATH

PLACE OF DEATH 12 MILES SOUTH-SOUTH EAST (OPEN DESERT) MOUNTAINS		CITY OR TOWN OLANCHA		STATE CA	
DATE OF DEATH FOUND 09/04/1995	TIME OF DEATH FOUND 0900	NAME OF INFORMANT ANDY KLEST	DATE 09/04/1995	TIME 0900	

NEXT OF KIN

NEAREST RELATIVE	RELATIONSHIP	STREET ADDRESS	CITY OR TOWN	STATE
OTHER RELATIVE				

MEDICAL DATA

CAUSE OF DEATH			
AUTOPSY — Check One: <input type="checkbox"/> No Autopsy Performed <input type="checkbox"/> Autopsy Performed — Gross Findings Used in Determining Above Stated Causes of Death		PATHOLOGIST DR. TENNEY	DATE 09/05/1995
CONSULTING PHYSICIAN		CITY OR TOWN BISHOP, CALIF.	TIME 1400
BLOOD SAMPLE TAKEN BY	SITE, DRAWN FROM	DATE	TIME

LABORATORY EXAMINATIONS

<input type="checkbox"/> ALKALOIDS	<input type="checkbox"/> BARBITURATES	<input type="checkbox"/> CARBON MONOXIDE	<input type="checkbox"/> ETHYL ALCOHOL	<input type="checkbox"/> HEAVY METALS	<input type="checkbox"/> OTHER
TOXICOLOGICAL ANALYSIS RESULTS:					

DISPOSITION OF REMAINS AND PROPERTY

<input type="checkbox"/> No Property	<input type="checkbox"/> Property Found And Inventoried	PROPERTY RELEASED TO	DATE	<input type="checkbox"/> Property Still Held Pending Release to Legal Representative
MORTUARY MAKING FIRST CALL OWNES VALLEY MORTUARY		REQUEST OF: INYO COUNTY S.O.		
FUNERAL DIRECTOR O.V.M.	CEMETERY OR CREMATORY	<input type="checkbox"/> BURIAL <input type="checkbox"/> CREMATION <input type="checkbox"/> REMOVAL	DATE	

Other Side For Investigation Summary