



1097

COPY

Angus S. King, Jr.  
Governor

Kevin W. Concannon, Jr.  
Commissioner

STATE OF MAINE  
DEPARTMENT OF HUMAN SERVICES  
AUGUSTA, MAINE 04333-0011

SUPPLEMENTAL CERTIFICATE OF DEATH

Date: April 12, 2001

TO: Vital Statistics  
FROM: Margaret S. Greenwald, M.D., Chief Medical Examiner  
DECEDENT: Kassidy Bortner, 2000-1862 Date of Death: 11/9/2000, York, ME

The death certificate of the above named decedent contains the medical certification of the cause of death which appears below.

To properly classify this death for statistical purposes, please furnish us with the information requested. Return this form in the enclosed self addressed envelope to: CHIEF MEDICAL EXAMINER, #37 STATE HOUSE STATION, AUGUSTA, MAINE 04333.

CAUSE OF DEATH SUPPLEMENT

40. WAS AN AUTOPSY PERFORMED? YES <input type="checkbox"/> NO <input type="checkbox"/>	42. MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Suicide <input checked="" type="checkbox"/> Homicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could Not Be Determined	43. INJURY AT WORK <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	44. DATE OF INJURY (Mo, Day, Yr) Unknown	45. DESCRIBE HOW INJURY OCCURRED Assaulted by another	
41. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>			46. TIME OF INJURY Unknown <input type="checkbox"/> AM <input type="checkbox"/> PM	47. PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify) Unknown 48. LOCATION - Street and Number or Rural Route Number, City or Town, State Unknown	
49. PART I. Enter the diseases, injuries, or complications which caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line.				Approximate Interval Between Cause and Death	
CONFIDENTIAL	IMMEDIATE CAUSE (Final disease or condition resulting in death)	Multiple Blunt Force Injuries			
	Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury which initiated events resulting in death) LAST	DUE TO (OR AS A CONSEQUENCE OF)			
		DUE TO (OR AS A CONSEQUENCE OF)			
		DUE TO (OR AS A CONSEQUENCE OF)			
PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.					

SOURCE:

- Police Report
- Medical Examiner Report
- Teletype

ITEMS CHANGED: 41 - 49

PHYSICIAN'S SIGNATURE:

DATE: 4/12/2001