

CERTIFICATE OF DEATH

STATE OF CALIFORNIA
USE BLACK INK ONLY/NO ERASURES, WHITEOUTS OR ALTERATIONS
VS-11 (REV. 7/93)

STATE FILE NUMBER

LOCAL REGISTRATION NUMBER

DECEDENT PERSONAL DATA	1. NAME OF DECEDENT—FIRST (GIVEN) JOHN			2. MIDDLE -			3. LAST (FAMILY) DOE #1				
	4. DATE OF BIRTH MM/DD/CCYY UNKNOWN		5. AGE YRS. UNK.		6. SEX MALE		7. DATE OF DEATH MM/DD/CCYY FOUND 09/04/1995		8. HOUR 1000		
	9. STATE OF BIRTH UNKNOWN		10. SOCIAL SECURITY NO. UNKNOWN		11. MILITARY SERVICE UNKNOWN 19__ To 19__ <input type="checkbox"/> NONE		12. MARITAL STATUS UNKNOWN		13. EDUCATION —YEARS COMPLETED UNKNOWN		
	14. RACE UNKNOWN		15. HISPANIC—SPECIFY <input type="checkbox"/> YES UNKNOWN <input type="checkbox"/> NO				16. USUAL EMPLOYER UNKNOWN				
	17. OCCUPATION UNKNOWN		18. KIND OF BUSINESS UNKNOWN				19. YEARS IN OCCUPATION UNKNOWN				
USUAL RESIDENCE	20. RESIDENCE—STREET AND NUMBER OR LOCATION UNKNOWN										
	21. CITY UNKNOWN		22. COUNTY UNKNOWN		23. ZIP CODE UNKNOWN		24. YRS IN COUNTY UNKNOWN		25. STATE OR FOREIGN COUNTRY UNKNOWN		
INFORMANT	26. NAME, RELATIONSHIP INYO COUNTY CORONER'S OFFICE				27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) P.O. BOX 1175, BISHOP, CALIFORNIA, 93515						
SPOUSE AND PARENT INFORMATION	28. NAME OF SURVIVING SPOUSE—FIRST UNKNOWN			29. MIDDLE UNKNOWN			30. LAST (MAIDEN NAME) UNKNOWN				
	31. NAME OF FATHER—FIRST UNKNOWN			32. MIDDLE UNKNOWN			33. LAST UNKNOWN			34. BIRTH STATE UNKNOWN	
	35. NAME OF MOTHER—FIRST UNKNOWN			36. MIDDLE UNKNOWN			37. LAST (MAIDEN) UNKNOWN			38. BIRTH STATE UNKNOWN	
DISPOSITION(S)	39. DATE MM/DD/CCYY -		40. PLACE OF FINAL DISPOSITION -								
FUNERAL DIRECTOR AND LOCAL REGISTRAR	41. TYPE OF DISPOSITION(S) PENDING			42. SIGNATURE OF EMBALMER NOT EMBALMED					43. LICENSE NO. -		
	44. NAME OF FUNERAL DIRECTOR OWENS VALLEY MORTUARY			45. LICENSE NO. FD 1026		46. SIGNATURE OF LOCAL REGISTRAR ▶			47. DATE MM/DD/CCYY		
PLACE OF DEATH	101. PLACE OF DEATH FOUND IN DESERT AREA			102. IF HOSPITAL, SPECIFY ONE: <input type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA			103. FACILITY OTHER THAN HOSPITAL: <input type="checkbox"/> CONV. HOSP. <input type="checkbox"/> RES. <input type="checkbox"/> OTHER			104. COUNTY INYO	
	105. STREET ADDRESS—STREET AND NUMBER OR LOCATION 10-12 MILES SOUTHEAST OF OLANCHA, 6500' ELEVATION							106. CITY OLANCHA			
CAUSE OF DEATH	107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D) IMMEDIATE CAUSE (A) UNDETERMINED						TIME INTERVAL BETWEEN ONSET AND DEATH		108. DEATH REPORTED TO CORONER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO REFERRAL NUMBER 95-52		
	DUE TO (B)								109. BIOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
	DUE TO (C)								110. AUTOPSY PERFORMED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
	DUE TO (D)								111. USED IN DETERMINING CAUSE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
	112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107										
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE.											
PHYSI- CIAN'S CERTIFICA- TION	114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. DECEDENT ATTENDED SINCE MM/DD/CCYY DECEDENT LAST SEEN ALIVE MM/DD/CCYY			115. SIGNATURE AND TITLE OF CERTIFIER ▶			116. LICENSE NO.		117. DATE MM/DD/CCYY		
				118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS + ZIP							
CORONER'S USE ONLY	119. MANNER OF DEATH <input type="checkbox"/> NATURAL <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/> ACCIDENT <input type="checkbox"/> PENDING INVESTIGATION <input checked="" type="checkbox"/> COULD NOT BE DETERMINED			120. INJURY AT WORK <input type="checkbox"/> UNK <input type="checkbox"/> YES <input type="checkbox"/> NO		121. INJURY DATE MM/DD/CCYY UNKNOWN		122. HOUR UNK.		123. PLACE OF INJURY UNKNOWN	
	124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY) UNKNOWN										
	125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY AND ZIP CODE) BODY FOUND IN DESERT AREA, 10-12 MILES SE OF OLANCHA, CALIFORNIA, 93549										
STATE REGISTRAR	126. SIGNATURE OF CORONER OR DEPUTY CORONER ▶ D.R. Van De Walker			127. DATE MM/DD/CCYY 09/08/1995		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER D.R. VAN DE WALKER, DEP. CORONER					
	A	B	C	D	E	F	G	H	FAX AUTH. #		CENSUS TRACT

Paul Stuart
6121 El Toro Ct.
San Jose, CA 95123
408-365-9331
November 7, 2012

Jeff,

I talked to you today regarding my research into the death of a John Doe whose body was discovered south of Olancho on 9-4-1995.

My interest is in providing a detailed history of Narcotics Anonymous to its members. I believe that John Doe herein is Robert Bruce Stone known as Bob Stone who played an important and significant part in that history. I strongly feel that Bob Stone needs to be remembered and memorialized. He was the author of My Years with Narcotics Anonymous as well as the NA World Office Manager for several years. No matter how someone dies we all can and should learn and feel the meaning and impact of another's life. In this case, Bob Stone knew he was dying of cancer and chose this means as a way out.

The membership of Narcotics Anonymous is generally ignorant of Bob Stone and particularly ignorant of his impact on their history. I feel strongly that his memory should not fade away in ignorance. I hope to present a small portion of this history as a sort of memorial to Bob Stone. Although his life and work is of primary importance, the question, "Where did he go?" is also very important just as one would want to know what happened in the death of a family member. Although some might object to uncomfortable details, I know that many of the membership believe that the truth is the only way to face life and understand it.

The questions I feel that should be answered as I can imagine members asking me are as follows:

Who discovered his body and how?

How did they identify the body?

Which members of his family were contacted and informed?

Where did the body end up?

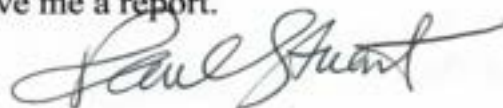
How long was he there in the desert before being discovered?

How did he get there? Was a car nearby? Surely, some car had to be found abandoned somewhere?

Is this means of suicide common? Was a search made for some chemicals in his system as well?

These are questions whose answers I would want to know about the death of a parent, sibling, or child. I am presenting Bob Stone in as close a light as a family member as many of our members feel about one another. Many simply do not know as yet that they had such a family member in Bob Stone.

On another note, perhaps you can give me a clue as to how or in what degree the Inyo Sheriff will be able or willing to also give me a report.



Leon B. Brune
Coroner



Post Office Box 1175
Bishop, California 93514
Tel: (760) 873-4266
Fax: (760) 873-1183

COUNTY OF INYO
Office of Coroner for the Southern District of Inyo County
Jeffrey E. Mullenhour – Deputy Coroner Investigator
220 East Post Street (P.O. Box 755)
Lone Pine, CA. 93545-0755
TEL: (760) 876-5657
FAX: (760) 876-5647

December 12, 2012

Mr. Paul Stuart
6121 El Toro Court
San Jose, CA 95123

RE: STONE, ROBERT BRUCE, Coroner's Case #1995-052

Mr. Stuart:

Enclosed, please find separate documents relating to the death, discovery, recovery, autopsy and final disposition of Mr. Robert Bruce Stone.

Unfortunately, there are elements of the investigation/identification process that are not in the case file.

If there is anything further that I can help you with, please let me know.

Respectfully,

Jeff Mullenhour

A handwritten signature in black ink, appearing to read "Jeff Mullenhour", with a large, stylized initial "J" and a long horizontal stroke at the end.

CORONER'S INVESTIGATION REPORT

LEON D. 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 <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 -OLANCHA, CA.		CITY OR TOWN	
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 TIME 1400
CONSULTING PHYSICIAN		CITY OR TOWN BISHOP, CALIF.		
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

INVESTIGATION SUMMARY

WITNESSES	(NAME)	(AGE)	(ADDRESS)	(TELEPHONE)
1.	Andy Kleet		1215 Ford Ave. Redondo Beach, Ca	90278
2.			Home 310 376 6883 Work 310 814 6105	
3.				
4.				

VEHICLE NO. 1	YEAR	MAKE	MODEL & COLOR	LICENSE NUMBER
OPERATOR				
PASSENGERS				
TOWING LOCATION				
VEHICLE NO. 2				
OPERATOR				
PASSENGERS				
TOWING LOCATION				
WEAPON DESCRIPTION OR METHOD				

DETAILS:

NOTIFIED 1000 HRS. ON 09/04/1995 BY INYO COUNTY DISPATCH. FIRST ARRIVAL AT OLANCHA AT 1045, AND MET DEPUTY RANDY GEIGER. I ADVISED THAT WE NEEDED MORE HELP, AND I RETURNED TO LONE PINE. AT 1300 HRS. DET. JIM JONES, ICSO, CALLED AND STATED HE, GEIGER, LEON BOYER, I.D. UNIT, AND S & R. WERE GOING TO MEET AT DIRTY SOCKS AT 1400 HRS, AND THAT A C.H.P. HELICOPTER FROM SAN BERNARDINO WAS GOING TO TAKE SOMEONE INTO LOCATE REMAINS.

JIM JONES, INVESTIGATOR IN CHARGE. LEON BOYER I.D. UNIT, GEIGER & I, WAITED FOR C.H.P. HELICOPTER. AT 1415 HOURS C.H.P. FLEW BOYER INTO SCENE (COULD NOT LAND BECAUSE OF 60 KNOT WINDS.) WE WAITED FOR RANY NIXON, S & R, TO ARRIVE, AND AT 1600 HRS. WE FOUR WHEELED DRIVED INTO DRY WASH. WE WENT TO THE CANYON ON SOUTH SIDE OF THE PLATEAU WHERE REMAINS WERE, AND WERE WITHIN A MILE OF REMAINS, WHEN C.H.P. FLEW OVER AGAIN AT OUR REQUEST, SPOTED REMAINS AND GUIDED OUR VEHICLES IN SO WE COULD DRIVE RIGHT TO SCENE ON ARRIVAL AT SCENE, I.D. UNIT, AND DET. JIM JONES DID THEIR INVESTIGATION, AND TOOK THEIR PHOTO'S. I WALKED IN THE SAME AREA THEY WERE, AND TOOK MY PHOTO'S I OBSERVED A REMAINS NAKED IN A SLEEPING BAG. FACE DOWN, BACK AND BUTTOCKS EXPOSED. AND SKIN VERY LEATHER LIKE. A PLASTIC BAG WAS OVER HEAD AREA. IT APPEARED TO HAVE DUCK TAPE OVER IT AT BACK OF NECK. CLOTHING WAS IN ORDERLY FASHION, WITH A BACK PACK TYPE BAG TO RIGHT OF BODY, AND A SMALL SHAVING TYPE KIT BAG. A DUFFLE TYPE BAG WAS AT HEAD END, AND SHOES WERE OFF TO LEFT OF BODY. SITE WAS NEATLY LAID OUT. WE UNZIPPED REST OF SLEEPING BAG, AND THEN DICOVERED PLASTIC DRAW STRAPS AROUND ANKLES, LEFT ARM DRAWN DOWN BETWEEN LEGS ATTACHED TO ANKLES. RIGHT ARM FREE WITH STRAP ON WRIST, AND A STRAP NOT USED. WE DID NOT TOUCH ANYTHING. REZIPPED SLEEPING BAG, PLACED REMAINS WITH SLEEPING BAG INTO A BODY POUCH, AND RETURNED TO BASE WITH REMAINS, ARRIVING IN LONE PINE AT 1900 HRS. I PLACED REMAINS INTO COOLER, ARRANGED TO HAVE REMAINS X-RAYED AT SO. INYO HOSPITAL AT 0700 ON 09/05/1995, AND MADE NECESSARY ARRANGEMENTS WITH BISHOP AT 0900 ON 09/05/1995 FOR DR. TENNEY TO DO AUTOPSY AT 1400 ON 09/05/1995- PHOTO'S & X-RAYS AND ALL MATERIALS COLLECTED WERE TAKEN TO BISHOP FOR OUR FORENSIC PATHOLOGIST TO REVIEW.

OFFICE USE ONLY

DATE OF REPORT 09/07/1995

Investigator

Approved by

LEON B. BRUNE
CORONER
INYO COUNTY

NO ERASURES, WHITEOUTS, OR OTHER ALTERATIONS
USE BLACK INK ONLY

BIRTH

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

PART I INFORMATION TO LOCATE RECORD

PART I INFORMATION TO LOCATE RECORD

PART II STATEMENT OF CORRECTIONS

PART II STATEMENT OF CORRECTIONS

LIST ONE
ITEM
PER LINE

I HEREBY DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

DECLARATION
OF
CERTIFYING
PHYSICIAN
OR CORONER

STATE/LOCAL
REGISTRAR
USE ONLY

PHYSICIAN/CORONER'S AMENDMENT

NO ERASURES, WHITEOUTS, OR OTHER ALTERATIONS
USE BLACK INK ONLY

☒ DEATH ☐ FETAL DEATH ☐ BIRTH

STATE FILE NUMBER

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

STATE/LOCAL REGISTRAR USE ONLY	1.	2.	3.
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PART I INFORMATION TO LOCATE RECORD

NAME AS IT APPEARS ON RECORD	1. NAME—FIRST (GIVEN) <div style="text-align: center;">JOHN</div>	2. MIDDLE <div style="text-align: center;">-</div>	3. LAST (FAMILY) <div style="text-align: center;">DOE #1</div>	4. SEX <div style="text-align: center;">MALE</div>
ADDITIONAL INFORMATION TO LOCATE RECORD	5. DATE OF EVENT—MM/DD/CCYY <div style="text-align: center;">FOUND 09/04/1995</div>	6. CITY OF OCCURRENCE <div style="text-align: center;">OLANCHA</div>	7. COUNTY OF OCCURRENCE <div style="text-align: center;">INYO</div>	

PART II STATEMENT OF CORRECTIONS

8. CERTIFICATE ITEM NUMBER	9. INFORMATION AS IT APPEARS ON ORIGINAL RECORD	10. INFORMATION AS IT SHOULD APPEAR
1.	JOHN	ROBERT
2.	-	BRUCE
3.	DOE #1	STONE
4.	UNKNOWN	10/08/1943
5.	UNK.	51
9.	UNKNOWN	CALIFORNIA
10.	UNKNOWN	567-62-2364
11.	UNKNOWN	NONE
12.	UNKNOWN	DIVORCED
13.	UNKNOWN	14
14.	UNKNOWN	WHITE
15.	UNKNOWN	NO
16.	UNKNOWN	ARTHUR SNOW BROKER
17.	UNKNOWN	SALESPERSON
18.	UNKNOWN	REAL ESTATE
19.	UNKNOWN	12
20.	UNKNOWN	630 E. TUJUNGA AVE. #1
21.	UNKNOWN	BURBANK
22.	UNKNOWN	LOS ANGELES
23.	UNKNOWN	91501
24.	UNKNOWN	51
25.	UNKNOWN	CALIFORNIA
26.	INYO COUNTY CORONER'S OFFICE	KATHY WEBBER, SISTER
27.	P.O. BOX 1175, BISHOP, CA, 93515	14450 LEFFINGWELL RD., WHITTIER, CA, 90604
28.	UNKNOWN	-
29.	UNKNOWN	-
30.	UNKNOWN	-
31.	UNKNOWN	HULON
32.	UNKNOWN	P.
33.	UNKNOWN	STONE
34.	UNKNOWN	AL
35.	UNKNOWN	DOROTHY
36.	UNKNOWN	F.
37.	UNKNOWN	CURRY
38.	UNKNOWN	MO
39.	-	

DECLARATION OF CERTIFYING PHYSICIAN OR CORONER

I HEREBY DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

11. SIGNATURE OF CERTIFYING PHYSICIAN OR CORONER 	12. DATE SIGNED—MM/DD/CCYY <div style="text-align: center;">09/28/1995</div>	13. TYPED OR PRINTED NAME AND TITLE/DEGREE OF CERTIFIER <div style="text-align: center;">LEON B. BRUNE, CORONER</div>
14. ADDRESS—STREET AND NUMBER <div style="text-align: center;">325 W. ELM ST.</div>	15. CITY <div style="text-align: center;">BISHOP</div>	16. STATE <div style="text-align: center;">CA</div>
		17. ZIP CODE <div style="text-align: center;">93514</div>

STATE/LOCAL REGISTRAR USE ONLY

18. OFFICE OF STATE REGISTRAR OR SIGNATURE OF LOCAL REGISTRAR 	19. DATE ACCEPTED FOR REGISTRATION—MM/DD/YY
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AMENDMENT OF MEDICAL AND HEALTH DATA—DEATH

STATE FILE NUMBER

USE BLACK INK ONLY—NO ERASURES, WHITEOUT, OR ALTERATIONS

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

STATE/LOCAL
REGISTRAR USE
ONLY

1

2

3

TYPE OR PRINT IN BLACK INK ONLY

PART I
INFORMATION
TO LOCATE
RECORD

1. NAME—FIRST (GIVEN)

JOHN

2. MIDDLE

—

3. LAST (FAMILY)

DOE #1

4. SEX

MALE

5. DATE OF EVENT—MM/DD/CCYY

FOUND 09/04/1995

6. CITY OF OCCURRENCE

OLANCHA

7. COUNTY OF OCCURRENCE

INYO

PART II

INFORMATION
AS IT APPEARS
ON RECORD

107. DEATH WAS CAUSED BY ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)

IMMEDIATE
CAUSE

(A)

UNDETERMINED

(B)

(C)

DUE TO

(D)

TIME INTERVAL
BETWEEN ONSET
AND DEATH

108. DEATH REPORTED TO CORONER

☒ YES☐ NO

REFERRAL NUMBER

95-52

109. BIOPSY PERFORMED

☐ YES☒ NO

110. AUTOPSY PERFORMED

☒ YES☐ NO

111. USED IN DETERMINING CAUSE

☒ YES☐ NO

112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107

113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 or 112? IF YES, LIST TYPE OF OPERATION AND DATE.

119. MANNER OF DEATH

☐ NATURAL ☐ SUICIDE ☐ HOMICIDE
☐ ACCIDENT ☐ PENDING INVESTIGATION ☒ COULD NOT BE DETERMINED

120. INJURY AT WORK

☒ YES ☐ NO

121. INJURY DATE—MM / DD / CCYY

UNKNOWN

122. HOUR

UNK.

123. PLACE OF INJURY

UNKNOWN

124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)

UNKNOWN

125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY AND ZIP CODE)

BODY FOUND IN DESERT AREA, 10-12 MILES S.E. OF OLANCHA, CALIFORNIA, 93549

PART III

INFORMATION
AS IT SHOULD
APPEAR

107. DEATH WAS CAUSED BY ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)

IMMEDIATE
CAUSE

(A)

PRESUMPTIVE ASPHYXIATION

(B)

(C)

DUE TO

(D)

TIME INTERVAL
BETWEEN ONSET
AND DEATH

MINS.

108. DEATH REPORTED TO CORONER

☒ YES☐ NO

REFERRAL NUMBER

95-52

109. BIOPSY PERFORMED

☐ YES☒ NO

110. AUTOPSY PERFORMED

☒ YES☐ NO

111. USED IN DETERMINING CAUSE

☒ YES☐ NO

112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107

NONE

113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 or 112? IF YES, LIST TYPE OF OPERATION AND DATE.

NO

119. MANNER OF DEATH

☐ NATURAL ☒ SUICIDE ☐ HOMICIDE
☐ ACCIDENT ☐ PENDING INVESTIGATION ☐ COULD NOT BE DETERMINED

120. INJURY AT WORK

☐ YES ☒ NO

121. INJURY DATE—MM / DD / CCYY

04/--/1995

122. HOUR

UNKNOWN

123. PLACE OF INJURY

DESERT AREA

124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)

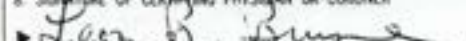
MUMMIFIED BODY FOUND IN DESERT AREA WITH PLASTIC BAG TAPED OVER HEAD.

125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY AND ZIP CODE)

BODY FOUND IN DESERT AREA, 10-12 MILES S.E. OF OLANCHA, CALIFORNIA, 93549.

DECLARATION
OF
CERTIFYING
PHYSICIAN
OR CORONER

8. SIGNATURE OF CERTIFYING PHYSICIAN OR CORONER



9. DATE SIGNED—MM/DD/CCYY

10/06/1995

10. TYPED OR PRINTED NAME AND DEGREE/TITLE OF CERTIFIER

LEON B. BRUNE, CORONER

11. ADDRESS—STREET AND NUMBER

325 W. ELM ST.

12. CITY

BISHOP

13. STATE

CA

14. ZIP CODE

93514

STATE/LOCAL
REGISTRAR USE
ONLY

15. OFFICE OF STATE REGISTRAR OR SIGNATURE OF LOCAL REGISTRAR

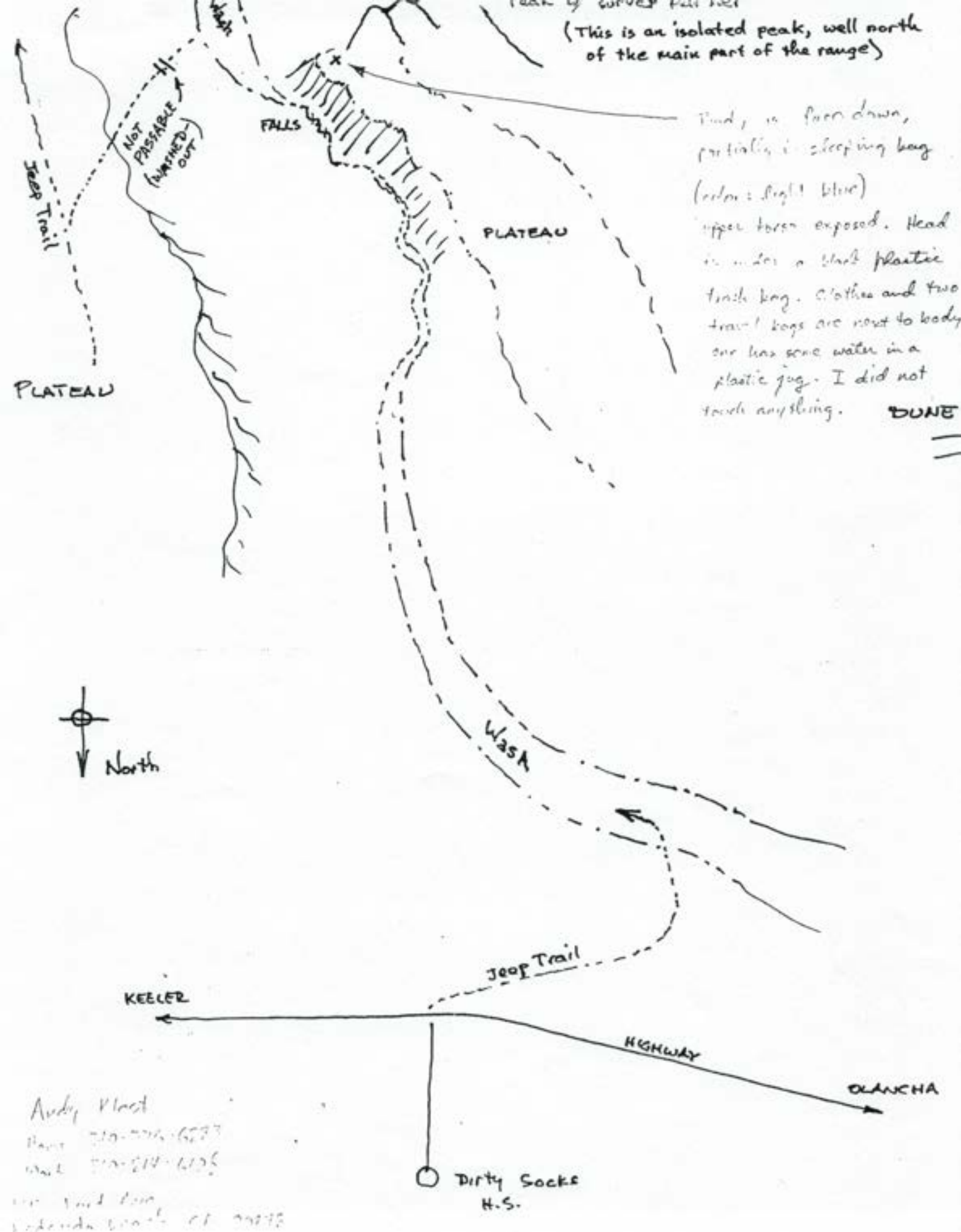
16. DATE ACCEPTED FOR REGISTRATION—MM/DD/CCYY

STATE OF CALIFORNIA, DEPARTMENT OF HEALTH SERVICES, OFFICE OF STATE REGISTRAR

VS-24 (8-1-94)
93 24437

Peak by survey fall line
(This is an isolated peak, well north
of the main part of the range)

Body is face down,
partially in sleeping bag
(color: light blue)
upper torso exposed. Head
is under a black plastic
trash bag. Clothes and two
travel bags are next to body
one has some water in a
plastic jug. I did not
touch anything. DUNE



Andy Plast
Phone 710-776-6877
Work 710-814-6126

Dirty Socks
H.S.

on road from
Lafayette south of 2000

PRELIMINARY AUTOPSY REPORT

Clascha, 1990' elevation

CASE NUMBER: 95-12 COUNTY OF Inyo

NAME OF DECEASED: John Doe

AGE: _____ BIRTH DATE: _____ month day year SEX: _____ HEIGHT: _____ WEIGHT: _____

PROBABLE DATE/HOUR OF DEATH: Found 09/09/95 DATE OF AUTOPSY: 09 05 95
MONTH DAY YEAR

AUTOPSY STARTED: 1400 AUTOPSY COMPLETED: 1540 FRESH ✓ EMBALMED _____

PATHOLOGIST: James Tenney CORONER/DEPUTY: D.R. Van der Walke

107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)

TIME INTERVAL
BETWEEN ONSET
AND DEATH

CAUSE
OF
DEATH

IMMEDIATE CAUSE (A) UNDETERMINED

DUE TO (B) _____

DUE TO (C) _____

DUE TO (D) _____

112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107

113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE

COMMENTS: _____

I HAVE EXAMINED THE ABOVE NAMED BODY AND MY TENTATIVE OPINION IS THAT
AS STATED ABOVE.

James Tenney, M.D.

TOXICOLOGY/EVIDENCE RETAINED

HEART BLOOD _____

URINE _____

BRAIN _____

LIVER _____

STOMACH CONTENTS _____

VITREOUS _____

SPLEEN _____

TESTS REQUESTED: _____

HOLD _____

LAB _____

PERFORMED BY: _____

DATE: _____

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

177

USE BLACK INK ONLY—MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

FOUND

1A. NAME OF DECEDENT—FIRST (GIVEN)		1B. MIDDLE		1C. LAST (FAMILY)		2. DATE OF BIRTH		3. DATE OF DEATH		4. SEX	
ROBERT		BRUCE		STONE		MONTH DAY YEAR 10/08/1943		MONTH DAY YEAR 09/04/1995		MALE	
5A. CITY OF DEATH OLANCHA						5B. COUNTY OF DEATH—OUTSIDE CALIF. ENTER STATE INFO					
7A. TYPED NAME AND ADDRESS OF CALIFORNIA—FUNERAL DIRECTOR OR PERSON ACTING AS SUCH OWENS VALLEY MORTUARY P.O. BOX 755, LONE PINE, CA 93545						7B. CALIF. LICENSE NUMBER —IF APPLICABLE FD 1026					
8. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE KATHY WEBBER - SISTER 14450 LEFFINGWELL RD. WHITTIER, CA 90604						9. SIGNATURE OF APPLICANT—Person taking permit Kathy Webber 10/06/1995					
10. AUTHORIZED DISPOSITIONS CHECK APPLICABLE ITEMS						FOR CORONER'S USE ONLY					
<input type="checkbox"/> A. BURIAL (INCLUDES ENTOMBMENT) <input checked="" type="checkbox"/> B. CREMATION <input checked="" type="checkbox"/> C. DISPOSITION OF CREMATED REMAINS OTHER THAN IN A CEMETERY <input type="checkbox"/> D. SCIENTIFIC USE						<input type="checkbox"/> E. TEMPORARY ENVALMENT <input type="checkbox"/> F. DISINTERMENT <input type="checkbox"/> G. SHIP IN TO CALIFORNIA <input type="checkbox"/> H. TRANSIT TO OUTSIDE OF CALIFORNIA <input type="checkbox"/> I. DISPOSITION PENDING—REMAINS LOCATED AT (Name and Address)					
10. AUTHORIZED DISPOSITIONS CHECK APPLICABLE ITEMS						FOR CORONER'S USE ONLY					
PERMIT THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT. NOTE: THIS PERMIT DOES NOT EXEMPT THE DECEASED FROM REQUIREMENTS FOR A NEW PERMIT TO SHOW FINAL DISPOSITION.						9A. AMOUNT OF FEE PAID \$7.00 9B. DATE PERMIT ISSUED 10/06/1995 9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT [Signature] 10/06/1995					
80. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH— P.O. DRAWER H INDEPENDENCE, CA 93526						9E. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH— 313 N. FIGUEROA LOS ANGELES, CA 90012					
11A. NAME AND ADDRESS OF CALIFORNIA CEMETERY N/A						11B. DATE BURIED					
12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY INDIAN WELLS VALLEY CREMATION SERVICE RIDGECREST, CALIFORNIA						12B. DATE CREMATED 10/06/95					
13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS N/A						13B. DATE RECEIVED 10/06/95					
14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED N/A						14B. DATE SHIPPED					
15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUFFICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT OF DISPOSITION SISTER'S RESIDENCE, 14450 LEFFINGWELL RD., WHITTIER, LOS ANGELES CO., CALIF.						15B. DATE OF DISPOSITION 10/09/95					
16A. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF CREMATION N/A						16B. SIGNATURE OF PERSON IN CHARGE OF CREMATION [Signature]					
17A. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF FACILITY N/A						17B. SIGNATURE OF PERSON IN CHARGE OF FACILITY [Signature]					
18A. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER N/A						18B. SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER [Signature]					
19A. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF DISPOSITION N/A						19B. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION [Signature]					
19A. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF DISPOSITION N/A						19B. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION [Signature]					
19A. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF DISPOSITION N/A						19B. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION [Signature]					

COPY 1 OF THE PERMIT ACCOMPANIES THE REMAINS TO THE STATED PLACE OF DISPOSITION. THE PERSON IN CHARGE OF DISPOSITION IS RESPONSIBLE FOR COMPLETING AND FORWARDING THE PERMIT WITHIN 10 DAYS OF DISPOSITION TO THE REGISTRAR OF THE DISTRICT IN WHICH DISPOSITION OCCURRED OR THE DISTRICT NEAREST THE POINT WHERE THE CREMATED REMAINS WERE SCATTERED AT SEA. THE LOCAL REGISTRAR MAY DESTROY ANY ORIGINAL OR DUPLICATE PERMIT AFTER ONE YEAR FROM ISSUE DATE.

COPY 1

STATE OF CALIFORNIA, DEPARTMENT OF HEALTH SERVICES, OFFICE OF STATE REGISTRAR

VS 9 (REV. 6/91)

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY—MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

FOUND

1A. NAME OF DECEDENT—FIRST (GIVEN) JOHN		1B. MIDDLE		1C. LAST (FAMILY) DOE #1		2. DATE OF BIRTH MONTH DAY YEAR UNKNOWN		3. DATE OF DEATH MONTH DAY YEAR 09/04/1995		4. SEX MALE	
5A. CITY OF DEATH OLANCHA		5B. COUNTY OF DEATH—OUTSIDE CALIF. ENTER STATE INYO		6. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE INFO CO. CORONER'S OFFICE P.O. BOX 1175 BISHOP, CA 93515		7A. TYPED NAME AND ADDRESS OF CALIFORNIA—FUNERAL DIRECTOR OR PERSON ACTING AS SUCH P.O. BOX 755, LONE PINE, CA, 93546		7B. CALIF. LICENSE NUMBER —IF APPLICABLE FD 1026		8A. SIGNATURE OF APPLICANT—(Print using pen) 09/11/95	
8B. DATE SIGNED		8C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT		8D. DATE SIGNED		8E. SIGNATURE OF CORONER'S OFFICE		8F. DATE SIGNED		8G. DATE SIGNED	
9A. AMOUNT OF FEE PAID \$7.00		9B. DATE PERMIT ISSUED 09/12/1995		9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT		9D. SIGNATURE OF CORONER'S OFFICE		9E. DATE SIGNED		9F. DATE SIGNED	
10. AUTHORIZED DISPOSITIONS CHECK APPLICABLE ITEMS		11A. NAME AND ADDRESS OF CALIFORNIA CEMETERY N/A		11B. DATE BURIED		11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL		11D. SIGNATURE OF PERSON IN CHARGE OF CREMATION		11E. SIGNATURE OF PERSON IN CHARGE OF SCATTERING	
12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY N/A		12B. DATE CREMATED		12C. SIGNATURE OF PERSON IN CHARGE OF CREMATION		12D. SIGNATURE OF PERSON IN CHARGE OF CREMATION		12E. SIGNATURE OF PERSON IN CHARGE OF CREMATION		12F. SIGNATURE OF PERSON IN CHARGE OF CREMATION	
13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS N/A		13B. DATE RECEIVED		13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY		13D. SIGNATURE OF PERSON IN CHARGE OF FACILITY		13E. SIGNATURE OF PERSON IN CHARGE OF FACILITY		13F. SIGNATURE OF PERSON IN CHARGE OF FACILITY	
14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED N/A		14B. DATE SHIPPED		14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER		14D. SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER		14E. SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER		14F. SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER	
15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUFFICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT OF DISPOSITION N/A		15B. DATE OF DISPOSITION		15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION		15D. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION		15E. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION		15F. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	
16A. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION		16B. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION		16C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION		16D. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION		16E. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION		16F. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	

COPY 1 OF THE PERMIT ACCOMPANIES THE REMAINS TO THE STATED PLACE OF DISPOSITION. THE PERSON IN CHARGE OF DISPOSITION IS RESPONSIBLE FOR COMPLETING AND FORWARDING THE PERMIT WITHIN 10 DAYS OF DISPOSITION TO THE REGISTRAR OF THE DISTRICT IN WHICH DISPOSITION OCCURRED OR THE DISTRICT NEAREST THE POINT WHERE THE CREMATED REMAINS WERE SCATTERED AT SEA. THE LOCAL REGISTRAR MAY DESTROY ANY ORIGINAL OR DUPLICATE PERMIT AFTER ONE YEAR FROM ISSUE DATE.

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Members of the Inyo County Employees Association voted overwhelmingly recently to affiliate with the 1.3 million member American Federation of State, County and Municipal Employees, the nation's largest public employee and health care workers' union.

The move comes after completion of a contract about a year ago, and during a current struggle with county administration to address salary issues for a number of employees.

According to ICEA President John Snyder, county employees saw a need

and work in the 21st century, and believed that an affiliation with the larger organization was the best way to help them achieve that goal.

"The unfortunate reality is that the administration is becoming increasingly confrontational toward county workers, both in negotiations and on day-to-day matters," Snyder said, adding that the larger union "has the professional expertise to help us match wits with the bosses in labor-management situations."

Director of Personnel for Inyo County, Gayle Todd, said the news shouldn't affect the current contract employees are working under.

ital survey will help future of facility

board of directors in June," Spencer said. "The actual approval of the survey took place at the hospital board meeting in July."

"We talked about current needs in health care across the country, and we really want the people to know that while the hospital is a big entity, it's a necessity for the whole community," Grubbe stated. "To keep it viable we have to know the needs of the community, not just the patients. We want to let people to know we're here for them."

The questionnaire, formally called the "Northern Inyo Hospital Community Assessment," was placed into employee paychecks, and delivered to the community as an insert and printed advertisement in the *Inyo Register*.

Consisting of five questions, the thrust of the assessment is to find out what services the hospital does not currently provide district residents think should be provided, and which services currently offered that should no longer be provided.

"We tried to limit it to a general idea of what people need," Grubbe explained. "We're asking them 'are

you comfortable with what's here or do we need more?'"

The deadline for returning the assessment is Sept. 30, and Spencer urges those who received the form to return it as soon as possible.

"So far, between the employees and district residents, we have received only about 100 responses," Spencer explained. "The big three answers are that people want a kidney dialysis unit, expand the emergency room area, and for us to keep pushing for the skilled nursing facility. There were others who wanted the extremes, from those who wanted many more things to others who didn't want any more services at all."

Grubbe added that they have been sounding out local civic organizations to find out what they think as well

Safe drivers should see lower premiums

By Steve Geissinger
The Associated Press

SACRAMENTO (AP) — Experienced, safe drivers who aren't on the road much will pay less than anyone else for car insurance — no matter where they live — under rules the state proposed Thursday to implement Proposition 103.

Meanwhile, younger drivers and people who drive a lot, or have a history of accidents and moving violations, will pay more.

The rules on setting premiums were immediately criticized by insurers, who said that the system won't be fair because territory will be much less of a factor.

But the regulations are a consumer triumph after eight years of struggle, according to a co-author of Proposition 103, an initiative that voters

approved in November 1988 to reduce the cost of auto insurance.

Much of Proposition 103, including provisions on calculating premiums, has been tangled in legal battles between insurers, the state, and consumer advocates, since 1988.

The new regulations proposed by Insurance Commissioner Chuck Quackenbush would replace temporary rules enacted by his predecessors. But the permanent rules will not take effect until they are reviewed by the Office of Administrative Law and go before a public hearing Dec. 1 in Los Angeles.

The new rules force insurers to reduce consideration of where a driver lives, instead requiring that insurers primarily weigh three factors: driving safety record, experience, and mileage driven annually.

ICSO investigating discovery of body

The badly-decomposed body of a yet-to-be-identified individual was discovered by hikers earlier this week in a remote location about 13 miles southeast of Olancho.

According to Lt. Bill Lutze with the Inyo County Sheriff's Department, an autopsy on the individual was com-

pleted Tuesday, but the exact cause of death has yet to be determined.

Lutze said the body had apparently been at the location for about six months, lending to its decomposed state. The body was found in a sleeping bag. A dental records check is being conducted in order to make positive identification.

Ticket sales strong for Millpond Music Festival

Let a variety of music ring through your ears at the Millpond Traditional Music Festival the weekend of Sept. 15-17 at the Millpond Recreation Area just a few miles north of Bishop.

"Ticket sales are up and we have already exceeded last year's pre-ticket sale," Nancy Tallent, Inyo Council for the Arts spokesperson, said. "Approximately 65 percent of the phone callers requesting more information and tickets have never heard of Bishop and have no idea what our environment is like."

She added that "about 65 percent of the ticket sales are new, first-timers; many times it's due to the fact that they had such a good time last year, families have planned their vacations around attending Millpond and bringing more relatives," she said.

Headlining the festival is John Sebastian and his J Band, who will perform their blues and bluegrass jug band music. Sebastian is best known for his work with the '60s group, The Lovin' Spoonful.

Another favorite attraction is

Ramblin' Jack Elliott, who is a storyteller and musician. Elliott left home at 14 wanting to be a cowboy and ended up hitchhiking, riding trails and creating music filled with the stories of the people he met along the way. He traveled and worked with cowboys, miners, sailors, met beautiful women and mountain men.

A variety of music will include folk, blues, Cajun, gospel and Celtic. Other featured bands include Laurie Lewis and Grant Street, Bob Brozman, Sons of the San Joaquin, Queen Ida, Doyle Lawson and Quicksilver, Tannahill Weavers, Sukay, Austin Lounge Lizards and Elkwhistle.

The first day of the event, at the Friday Night Gathering, there will be many locals performing along with professional musicians. This year the gathering will be moved to the main stage. Those performing will include Bob Brozman, Ramblin' Jack Elliott and the Austin Lounge Lizards. This year tickets for the Friday gathering will be sold in advance to cut the long

wait at the gate for tickets.

Millpond offers a variety of family fun, and a lot of things for kids. There are workshops with the musicians, instrument workshops for first-time beginners, storytellers, free activities for children, including arts and crafts, music, game and puppet shows, gourmet food vendors, an arts and crafts show displaying work by local artisans, dancing, jamming, an open mike stage, and nightly dinners.

Inyo Council for the Arts is also looking for volunteers to place posters and brochures around town. Volunteers can earn tickets for their work.

For more information on prices or volunteer work call the Inyo Council for the Arts at (619) 873-8014 or 1-800-874-0669. There is no fee for Inyo and Mono students to attend the festival.

The event is sponsored by the Inyo Council for the Arts, the County of Inyo, the City of Bishop, the California Arts Council and the National Endowment for the Arts.

elling Festival es its return

International Literacy Day, Altrusa International will once again host its annual Storytelling Festival at Saturday, Sept. 9, 11 a.m. to 2 p.m. feature a number of stations located near the and volunteers will introduce youngsters to the world of reading. The stations will high- as animals, fairy tales, Disney stories, wild ew feature called "When I Grow Up." The "Own-Story" station, where children can create turn.

ipate will receive a free book of their choos- a, the Inyo Council for the Arts, and the *Inyo Herald* newspapers, while supplies last. It be characters in costume, face painting, bal- er refreshments available.

an contact either Florene Ross, 872-2215, or n, 873-8745.

Andrew Klest

1215 Ford Avenue, Redondo Beach CA 90278 (310) 376-6883

Mr. Paul Stuart
6121 El Toro Court
San Jose CA 95123

16 July 2014

Re: Stone, Robert Bruce; Inyo County Coroner's Report No. 1995-052

Dear Mr. Stuart,

After we talked on Saturday, I realized that Google Maps has a Latitude / Longitude coordinates function, that I can use to show you where I found the body.

I don't know how familiar you are with Google Maps, so I will explain briefly.

1. Open Google Maps, at this website: <https://maps.google.com/>
2. Set the map for "Satellite" to see the actual terrain (in upper right corner of map page), and select "Labels" to see the main roads, towns, and other key features.
3. Type the following numbers into the Search Box on the Google Map page: **36.3015, -117.9028**
(These numbers are the coordinates of Latitude 36.3015 degrees, and Longitude -117.9028 degrees)
4. Press "Enter" (or the "Search" button to the right of the search box).
 - This should generate a satellite map image, with an arrow pointing down at the site of the body.
 - A "bubble marker" may also appear on your map, approximately where I parked my vehicle to hike up the dry wash.
 - You can zoom in or out to see more detail of the terrain, or less, as desired. The terrain in this area is sparsely-vegetated desert, generally becoming more sandy as you go north toward Owens Dry Lake, or westward toward the sand dune field that is east of Olancho. The dry washes are mostly loose sand.
 - All roads in this area south of CA 190 blacktop road are 4WD jeep roads.
 - None of the jeep roads were marked in the field with street signs.

The body was located within about 100 feet or so of the of the position of these coordinates. This location is also consistent with my sketch map in the Coroner's report, based upon the terrain features.

(Note: 100 feet corresponds to about 0.0003 degrees latitude.)

(Also see comment below about minor error regarding the "North" arrow on my sketch map.)

My points of reference for pin-pointing this location are that I hiked up the dry wash, then climbed up the rocks that form the dry waterfalls where the creek bed zig-zags sharply just northwest of the body location, and I headed straight south toward the high point of Red Ridge. I saw the light blue sleeping bag on the relatively flat plateau to my left (east), and went over to see what it was.

My sketch map is on page 6 of the Coroner's Report No. 95-52: <http://nahistorytree.com/wp-content/uploads/2014/05/Coroners-Report.pdf>

(or page 7 if you include the cover letter from the Coroner's Office to you)

I wrote my observations for the sheriff on the right side of my sketch map that is included with the Coroner's report, and I see that these notes did not copy very well... so here is what it says:

"Body is face down, partially in sleeping bag (color: light blue). Upper torso exposed. Head is under a black plastic trash bag. Clothes and two travel bags are next to body, one has some water in a plastic jug. I did not touch anything."

One error I noticed on my sketch map: I indicated North to be straight down, but True North is actually rotated about 45 degrees to the lower left on my sketch map. This error is obvious from the compass orientation of CA190 in this area... when driving toward Death Valley, the highway heads northeast, but I sketched it as heading straight east. This error has no effect on the body location, however, because the coordinates are based upon the local features of the terrain, and not on the compass orientation.

Google Maps follow standard mapping convention, with True North oriented straight up on their maps, so my sketch map is oriented roughly up-side-down as compared to the Google Map.

And finally, here are a few words about my outdoors experience, to lend some credibility to my ability to define the precise location of the body after so many years have passed. As I mentioned in our phone conversation, I have an acute ability to remember key details of my hiking route, and to correlate these details with features on maps (Google Map, in this case). I have a lot of experience with cross-country hiking and climbing. I was an assistant instructor with the Sierra Club BMTC (Basic Mountaineering Training Program), as well as a rated leader for 3rd-class mountaineering trips with the Sierra Club. One of my specialties in the BMTC was teaching map and compass usage, terrain recognition, and route finding to the mountaineering students.

I hope this helps in your quest.

Regards,
Andy Klest