

NORTH CAROLINA DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
 DIVISION OF POSTMORTEM MEDICOLEGAL EXAMINATION
 OFFICE OF THE CHIEF MEDICAL EXAMINER

Chapel Hill, North Carolina 27599-7580

REPORT OF INVESTIGATION BY MEDICAL EXAMINER

OCME USE ONLY
 15-6738
 Case number
 OCT 13 1995
 Date received
 Res NR

DECEDENT: Patricia Dail Kimberly Kimble
First Middle Last Suffix
 RESIDENCE: 2104 Brandon Station Ct, Pleasant Garden, Guilford
Number and Street City, State County
 AGE: 28 (9/14/67) SEX: Male Female Unknown
 RACE: Black Native American Oriental White Unknown
 HISPANIC ORIGIN: Yes No Unknown

INFORMATION ABOUT OCCURRENCE

DATE	TIME	ADDRESS OR FACILITY	COUNTY
10/9/95	pm	2104 Brandon Station Ct, Pleasant Garden	Guilford
10/9/95	pm	"	Guilford
VIEW OF BODY		<input type="checkbox"/> Scene of death <input type="checkbox"/> Hospital <input type="checkbox"/> Funeral home <input type="checkbox"/> Other _____ <input checked="" type="checkbox"/> Not viewed	
DATE NOTIFIED	10/9/95 9:30 pm	LAW ENFORCEMENT AGENCY: <u>Guil. Co Sheriff Dept.</u>	
LAST KNOWN TO BE ALIVE	10/9/95 ~ 3pm??	OFFICER: <u>Det DeBerry</u> TELEPHONE: <u>292-16832</u>	
		Death occurred while in custody: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	

CAUSE OF DEATH: None M.E. Authorized Non-M.E. Autopsy facility: OCME-CH
 TOXICOLOGY: Mailed Obtained by pathologist Reason not obtained: _____
 CLINICAL ALCOHOL DONE, RESULT: _____ By whom: _____

PROBABLE CAUSE OF DEATH: Pending
Gunshot wound
 DUE TO _____
 DUE TO _____
 DUE TO _____

OCME REVIEW		SDC
1. <u>Gunshot wound at the head</u>	DUE TO	<input checked="" type="checkbox"/> None <input type="checkbox"/> AL <input type="checkbox"/> Dictated <input type="checkbox"/> COG
2. _____	DUE TO	
3. _____	DUE TO	
4. _____	DUE TO	

CONTRIBUTING CONDITIONS
 Natural Accident Homicide Suicide Undetermined
 Reviewer: KE Date: 11-15-95
 Information in this block supersedes that contained in space at left.

CONTRIBUTING CONDITIONS
 MANNER OF DEATH:
 Natural Accident Homicide Suicide Pending

I certify that after receiving notice of the death described herein I took charge of the body and made inquiries regarding the cause of death in accordance with Article 16 of Chapter 130A of the N.C. General Statutes and the information contained herein regarding such death is true and correct to the best of my knowledge and belief.

Signature of Medical Examiner: Janice Alford Date: 10/24/95 County of Appointment: Guilford M.E. Number: 141028

Why was body not viewed by M.E.

REPORT OF INVESTIGATION BY MEDICAL EXAMINER

USE ONLY
157-1738
[Stamp]

DECEASED: [Name]
RESIDENCE: [Address]
AGE: 28 (M/F) SEX: Male RACE: White
HISPANIC ORIGIN: No

INFORMATION ABOUT OCCURRENCE

DATE	TIME	ADDRESS OR FACILITY	COUNTY
10/10/02	7:00 PM	201 [Address]	[County]
10/12/02	9:00 AM	[Address]	[County]

CAUSE OF DEATH: [Cause]
MANNER OF DEATH: [Manner]
BY WHOM: [Signature]

DATE	TIME	BY WHOM
10/10/02	7:00 PM	[Signature]

Signature: [Signature]
Date: 10-12-02

NARRATIVE SUMMARY OF CIRCUMSTANCES SURROUNDING DEATH

Arrived @ scene of home fire & fire extinguished, fire personnel found a body in middle of house, in crawl space, where the floor had burned through. Body was burned beyond recognition, but family on scene, stated this was residence of named person on front of this form. Lengthy fire investigation to be done & this writing, but @ present, fire personnel are advising a ~~possible~~ questionable origin of fire & questionable nature. Dr. Hessling contacted & advised to have Mr. Cross Transport to Core Morgue & investigation by Police & Fire Investigators

Reportedly, Patricia Kibble left work early to do some yard work for co-workers. She was to attend a prayer meeting that night. Her husband called her brother from his work & stated that he had phoned home & couldn't reach his wife & that she should have arrived at the prayer meeting, but he didn't so could he go & check on her. When her brother arrived on the scene, the house was in flames ~ 8:30 PM, so he called 911. Fire investigation found a gas can nearby, a 40 cal Glock handgun in a nearby bedroom ~ 8 feet from the body. The body had been thru to the crawl space because of intense heat directly to the area around

PROSE: To document the findings of a medical examiner investigation. When completed, this form constitutes a report to the Chief Medical Examiner as required by G.S. 130A-385(a). Her. A dresser was turned over & the house looked narrower
 PREPARATION: The investigating medical examiner completes all appropriate information, and signs the certification statement on the front of the form.
 DISTRIBUTION: Mail original copy to the Office of the Chief Medical Examiner, Chapel Hill, NC 27599-7580.
 POSITION: This form is maintained by the Chief Medical Examiner in accordance with the current records disposition schedule published by the N.C. Division of Archives and History.
 NOTES: Additional copies may be ordered from the Office of the Chief Medical Examiner, Chapel Hill, NC 27599-7580.