



001941138D01

DOUGLAS COUNTY, NEBRASKA

STATE OF NEBRASKA,

Plaintiff,

vs.

JACOB D. GARDNER,
a/k/a JAKE GARDNER,

Defendant.

CR # 20-3178

**MOTION TO DISMISS
INDICTMENT**

#36 **FILED**
IN DISTRICT COURT
DOUGLAS COUNTY NEBRASKA
OCT 27 2020
JOHN M. FRIEND
CLERK DISTRICT COURT

COMES NOW Frederick D. Franklin, as Special Prosecutor in the above-captioned matter and herewith moves this Court for a dismissal of the Indictment in this matter. In support of this Motion, Special Prosecutor states that on information and belief, the Defendant is now deceased. In support of said belief, our movant attaches a copy of the Defendant's Certificate of Death received from the State of Oregon Department of Human Services, the jurisdiction in which the Defendant's body was discovered.

WHEREFORE, your movant seeks a dismissal of the Indictment and that the same be granted without prejudice.

DATED: October 26, 2020

Frederick D. Franklin, #18313
Special Prosecutor

903946

I.D. TAG NO.

OREGON HEALTH AUTHORITY
CENTER FOR HEALTH STATISTICS
CERTIFICATE OF DEATH

136-2020-026895

STATE FILE NUMBER

TO BE COMPLETED BY FUNERAL FACILITY

Legal Name First Jacob	Middle David	Last Gardner	Suffix	Death Date September 20, 2020
Sex Male	Age 38 years	Social Security Number 466-55-7818	County of Death Washington	
Birthdate November 14, 1981	Birthplace El Paso, Texas		Was Decedent Ever in U.S. Armed Forces? Yes	
Residence 16220 Arbor Street		City/Town Omaha		
Residence County Douglas	State or Foreign Country Nebraska	Zip Code + 4 68130	Inside City Limits? Yes	
Marital Status at Time of Death Never married		Spouse's Name Prior to First Marriage		
Father's Name David Boyd Gardner		Mother's Name Prior to First Marriage Glenda Sue Beutler		
Informant's Name David Boyd Gardner	Telephone Number Not Available	Relationship to Decedent Father	Mailing Address P.O. Box 3280, Hillsboro, OR 97123	
Place of Death Other - Parking Lot		Facility Name		
Location of Death 356 SE 9th Avenue		City/Town or Location of Death Hillsboro	State Oregon	Zip Code + 4 97123
Method of Disposition Cremation	Place of Disposition Springer & Son Aloha Crematory	Location (City/Town and State) Aloha, Oregon		
Name and Complete Address of Funeral Facility Springer & Son Aloha Funeral Home 4150 SW 185th, Aloha, Oregon 97007				
Date of Disposition TBD	Funeral Director's Signature John S. Springer		Electronic Signature Signed	OR License Number CO-3534
Registrar's Signature Jennifer A. Woodward	Date Received September 23, 2020		Local File Number	
Amendment				

TO BE COMPLETED BY MEDICAL CERTIFIER

Was case referred to Medical Examiner? Yes	Autopsy? No	Were autopsy findings available to complete the cause of death?	Time of Death Found 1230
CAUSE OF DEATH IMMEDIATE CAUSE PERFORATING CONTACT GUNSHOT (HANDGUN) WOUND OF HEAD			Approximate Interval Onset to Death IMMEDIATE
a. Due to (or as a consequence of) ↓			
b. Due to (or as a consequence of) ↓			
c. Due to (or as a consequence of) ↓			
d. Due to (or as a consequence of) ↓			
Other significant conditions contributing to death Acute life stressor(s)			
Manner of Death Suicide	If Female Not Applicable	Did tobacco use contribute to death? No	
Date of Injury September 20, 2020	Time of Injury Unknown	Place of Injury Other - Parking Lot	Injury at Work? No
Location of Injury 356 SE 9th Avenue, Hillsboro, Oregon 97123			
Describe how injury occurred Shot self.		If transportation injury, specify.	
Name and Address of Certifier Rebecca Adele Millius 13309 SE 84th Avenue 100, Clackamas, Oregon 97015			
Name and Title of Attending Physician if Other than Certifier			Date Signed September 23, 2020
Medical Certifier Rebecca Adele Millius	Electronic Signature Signed	Title of Certifier M.D., M.E.	License Number MD25336
Amendment			



45-2CC (01/06)

I CERTIFY THAT THIS IS A TRUE AND CORRECT COPY OF THE ORIGINAL CERTIFICATE ON FILE OR THE VITAL RECORDS FACTS ON FILE IN THE OREGON CENTER FOR HEALTH STATISTICS.

DATE ISSUED:

October 15, 2020

THIS COPY IS NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

JENNIFER A. WOODWARD, Ph.D.
STATE REGISTRAR

