A	63	BUREAU OF VI	BOARD OF HEALTH TAL STATISTICS TE OF DEATH
		1. PLACE OF DEATH	506
	景か	County Office Assistant Registration District N	6020
26.	TS shoul	3 as Keyfterville on	St
8	3₽ \$	2 2 FULL NAME Solvert a Patrick	
RECORD	ATION	(a) Residence. No. The state of Manual State of	Ward. (If nonresident give city or town and State) ds. How long in U.S., if of ferrigs hirth? yrs. page. ds.
불	X. I	PERSONAL AND STATISTICAL PARTICULARS	2 MEDICAL CERTIFICATE OF DEATH
MAR	XACTI	3. SEX 4. COLOR OR RACE 5. SINGLE, MARRIED, WIDOWED OR DIVORCED (write the word)	16. DATE OF DEATH (MONTH, DAY AND YEAR) JAN 14 1930
PER	ated B	5a. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF	I HEREBY CERTIFY, That I attended deceased from
<u>s</u>	te et	(OR) WIFE OF	that I last saw hat At alive on
<u>s</u>	Br	6. DATE OF BIRTH (MONTH, DAY AND YEAR) About Fract 7. AGE YEARS MONTHS DAYS II LESS than 1	THE CAUSE OF DEATH WAS AS FOLLOWS:
Ę	E shod.	7. AGE YEARS MONTHS DAYS II LESS than 1 day,hrs.	brence Caria
¥	AG	8. OCCUPATION OF DECEASED	131
<u>Z</u>	ied.	(a) Trade, profession, or	122 B (duration) 770 mas 3 40
Ž	dond A	particular kind of work	CONTRIBUTORY Partie on Leg of delilay
Ŧ	1200	business, or establishment in which employed (or employer)	LIMBL DISCORD (duration) Tro. 10 mos. do.
, S	aref ma)	(c) Name of employer	18. WHERE WAS DISEASE CONTRACTED
E	3 71	9. BIRTHPLACE (CITY OR YOUN) ADMIT HOUSE	U men AT place or ments
7	p of the	(STATE OR COUNTRY) World Answer	O DID A OPERATION AND CEDE DEATHT O DATE OF
Ĕ	ns,	Jon Anow	WAS THERE AN AUTOPSYI
Ą	n ter	(State or country) Don't Know	(Sideed) Old Aller (M. D.
_	plat	12 MAIDEN NAME OF MOTHER SOME KNAME	1-14.19 3 (Address) Koust as well
WRITE	o of the first	13. BIRTHPLACE OF MOTHER (CITY OR TOWN)	*State the Disease Causing Practs, or in deaths from Violentz Causes, state
3	y iter DEA	(STATE OR COUNTRY) Word Fenour	(1) MEANS AND NATURE OF INDUST, and (2) whether Accidental, Suicidal, or Homicidal.
	Byer OF	INFORMANT TO A STATE OF THE STA	19. PLACE OF BURIAL, CREMATION, OR REMOVAL DATE OF BURIAL
	ass	15. (Address) / Prentessible ma	County Famile Land 4 1930
•	ភ្	FILED JAMES 19130. Settle Saule REGISTERA	R. Januarianen
	\ . !		werent Harries yestervilly

