2439

RETURN OF A DEATH.

County of Pima.
Territory of Arizona.

CITY OF

TUCSON.

No. of Record. ~~1863~~

No. of Burial Permit. 1862

NO INCOMPLETE RETURN WILL BE ACCEPTED.

No. 1. *Name in full* Truman Roberts Andrews ✓

2. *Color*

WHITE.
~~MEXICAN~~.
~~BLACK (Ne~~gro or mixed).
~~INDIAN~~.
~~CHINESE~~.
JA~~PANES~~E.

3. *Sex*

MALE.
F~~EMA~~LE.

4. *Conjugal Condition*

SINGLE.
~~MARRI~~ED.
~~WIDOW~~ED.
DI~~VORC~~ED.

NOTE: For questions 2, 3 and 4, strike out words not appropriate.

5. *Date of Death* — Year 1902, Month Dec, Day 1st

6. *Date of Birth* — Year 1879, Month June, Day —

7. *Age* — Years 23, Months 5, Days —

8. *Occupation* Student

(Return occupation for all persons 10 years of age and over.)

9. *Place of Birth* New York
10. *Birthplace of Father* Vermont
11. *Birthplace of Mother* "

STATE OR COUNTRY

12. *Disease or Cause of Death:*

CHIEF CAUSE Pulmonary Tuberculosis — DURATION. 6 years

CONTRIBUTING CAUSE

PLACE WHERE DISEASE WAS CONTRACTED, if other than place of death Vermont

13. *Place of Death:* No. Asburn Place S. ~~Street~~ W. City ... Ward

If death occurred in an institution, give name of same — — — —

Length of time deceased was an inmate — — — — and previous residence — — — —

14. *Late Residence* Tucson A. T.

LENGTH OF RESIDENCE (in city) 3 months

UNDERTAKER O. C. Parker

PLACE OF INTERMENT Shelburne Vermont

SIGNATURE W. W. Fenner M.D.
(Of physician or informant.)

DATE OF CERTIFICATE Dec 1st, 1902

FILL OUT WITH INK AND WRITE PLAINLY