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Form 8 8-09-5m.

PLACE OF DEATH

County of Cochise  
District of  
Town of St David  
or  
City of

ARIZONA TERRITORIAL BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS  
Received at PHOENIX  
DEC 16 1909

Arizona Territorial Board of Health  
BUREAU OF VITAL STATISTICS  
ORIGINAL CERTIFICATE OF DEATH  
Ter. Index No. 275  
County Registered No. 223

(If death occurs away from USUAL (No. St., Ward.) (If death occurred in a Hospital or Institution, give its NAME instead of street and number.)

FULL NAME Rebecca Merrill

PERSONAL AND STATISTICAL PARTICULARS

LENGTH OF RESIDENCE  
At Place of Death 31 yrs 8 mos.  
In Arizona 31 yrs 8 mos.  
SEX Female COLOR OR RACE White Chinese Indian Mexican  
DATE OF BIRTH March 7<sup>th</sup> 1855  
(month) (day) (year)  
AGE 54 years 8 months 25 days

SINGLE, MARRIED, WIDOWED, OR DIVORCED Married

BIRTHPLACE (State or foreign country) Utah

OCCUPATION Housewife

NAME OF FATHER Miles Weaver  
BIRTHPLACE OF FATHER (State or foreign country) Eastern State US

MAIDEN NAME OF MOTHER Clara Clark  
BIRTHPLACE OF MOTHER (State or foreign country) Eastern State US

THE ABOVE STATED PERSONAL PARTICULARS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Informant J. G. Morrison  
(Address) Benson Arizona

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH November 29, 1909  
(month) (day) (year)  
I hereby certify, That I attended deceased from October 11<sup>th</sup> 1909 to November 29<sup>th</sup> 1909 that I last saw her alive on November 16<sup>th</sup> 1909 and that death occurred on the date stated above at 1:30 P.M.  
The DISEASE or INJURY causing DEATH was as follows;  
Bright's Disease

Where contracted Utah Duration one year  
while on visit to Utah  
Contributing cause (if any)

Where contracted \_\_\_\_\_ Duration \_\_\_\_\_  
(Signed) J. G. Morrison M.D.  
Date Nov 30 1909 Address Benson Arizona

SPECIAL INFORMATION only for Hospitals, Institutions, Transients, or Recent Residents.  
Former or Usual residence \_\_\_\_\_ How long at Place of Death \_\_\_\_\_ Days

Place of burial or removal St. David Date of burial or removal Nov 30, 1909  
Undertaker \_\_\_\_\_ Address \_\_\_\_\_

Filed Nov 30 1909 W. K. Dickman Local Register.  
Filed 12/13 1909 \_\_\_\_\_ County Register.

Incorrect certificates will be returned for correction.