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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF DEATH

State Index No. 309 C

County Registered No. 191

Local Registrar's No.

PLACE OF DEATH

County Yavapai

District Prescott

Town Or City Prescott

No. 509 No. Mt. Vernon St.

(If death occurred in a Hospital or Institution, give its NAME instead of street and number.)

FULL NAME Mrs. Elizabeth Brown

PERSONAL AND STATISTICAL PARTICULARS

SEX: Female

Color or Race: X White, Indian, Black, Chinese, Mexican

X SINGLE, MARRIED, WIDOWED or DIVORCED

DATE OF BIRTH: August 7, 1894 (Month) (Day) 191 (Year)

AGE: 24 yrs. 11 mos. days | If less than 1 day hrs., or min.

OCCUPATION
(a) Trade, profession or particular kind of work: At home
(b) General nature of industry, business, or establishment in which employed or (employer):

BIRTHPLACE (State or country): Ohio

PARENTS
NAME OF FATHER: Jacob Kleck
BIRTHPLACE OF FATHER (State or country): Switzerland
MAIDEN NAME OF MOTHER: Mary Knauffsinger
BIRTHPLACE OF MOTHER (State or country): America

THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant) L. O. Brown,

(Address) Phoenix, Arizona.

PLACE OF BURIAL OR REMOVAL: Phoenix, Arizona

DATE OF BURIAL OR REMOVAL: Aug. 2, 1919

UNDERTAKER: Lester Ruffner

ADDRESS: Prescott, Arizona

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH: August 1, 1919. (Month) (Day) 191 (Year)

I hereby certify that I attended deceased from July 25 1919 to July 31 1919; that I last saw her alive on July 31 1919, and that death occurred on the date stated above at 5 a.m. The DISEASE or INJURY causing death was as follows: Pulmonary Tuberculosis

(Duration) 6 yrs. mos. days

Was disease contracted in Arizona? No

If not, where? Ohio

CONTRIBUTORY

(Duration) yrs. mos. days.

(Signed) H. T. Leuthwaite

Aug. 2, 1919. (Address)

*In deaths from VIOLENT CAUSES state (1) MEANS OF INJURY; and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.

LENGTH OF RESIDENCE

At place of death yrs. 1 mos. ds. In Arizona 1 yrs. mos. ds.

Former or Usual Residence Ohio

Filed Aug 2 1919 H. T. Leuthwaite Local Registrar

Filed 8-19 1918 [illegible] County Registrar

THE CERTIFICATE OF DEATH is to be filed with the County Registrar of the registration district in which the death occurred, and a copy of it is to be transmitted with the body of any person removed from one registration district to another, or to a point without the State.