

CERTIFICATE OF DEATH

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| BIRTH NO. 04 | | 1. PLACE OF DEATH A. COUNTY Gila | | 2. USUAL RESIDENCE A. STATE Arizona | | REGISTRAR'S NO. 27 | |
| CE OF DEATH | | B. CITY (IF OUTSIDE CORPORATE LIMITS, WRITE TOWN OR RURAL) Globe | | C. LENGTH OF STAY IN THIS PLACE IN ARIZONA 2 days 33yrs | | B. COUNTY Gila | |
| 1980 | | D. FULL NAME OF HOSPITAL OR INSTITUTION Gila General Hospital | | D. STREET ADDRESS 146 Ruiz Canyon | | (IF RURAL, GIVE LOCATION) | |
| AL RESIDENCE | | 3. NAME OF DECEASED (TYPE OR PRINT) Charles Palmer | | C. (LAST) | | 4. SEX male | |
| 5 | | 6. MARRIED NEVER MARRIED DIVORCED WIDOWED 3 | | 7. DATE OF BIRTH Nov 29 1884 | | 8. AGE 67 | |
| DECEDENT | | 9. KIND OF BUSINESS OR INDUSTRY laborer-constr. | | 10. BIRTHPLACE (STATE OR FOREIGN COUNTRY) U. S. A. | | 11. CITIZEN OF WHAT COUNTRY? U. S. A. | |
| PERSONAL DATA | | 14A. FATHER'S NAME (unknown) Palmer | | 14B. BIRTHPLACE (STATE OR COUNTRY) unknown | | 15A. MOTHER'S MAIDEN NAME unknown | |
| 352 | | 16. INFORMANT'S SIGNATURE Gila County Welfare Board, Globe, Arizona | | 17. DATE OF DEATH March 19, 1952 at 9:00p.m. | | 15B. BIRTHPLACE (STATE OR COUNTRY) unknown | |
| 4331 | | 18. CAUSE OF DEATH ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), (C). HEART FAILURE Coronary Fibrosclerosis | | 19A. DATE OF OPERATION | | 19B. MAJOR FINDINGS OF OPERATION | |
| OF DEATH (ITEM 18) | | 19C. DATE OF OPERATION | | 19D. MAJOR FINDINGS OF OPERATION | | 19E. DATE OF OPERATION | |
| PERATIONS, AUTOPSY | | 21A. ACCIDENT SUICIDE HOMICIDE | | 21B. PLACE OF INJURY (E. G., IN OR ABOUT HOME, FARM, FACTORY, STREET, OFFICE BLDG., ETC.) | | 21C. (CITY OR TOWN) (COUNTY) (STATE) | |
| DEATH DUE TO EXTERNAL VIOLENCE | | 21D. TIME (MONTH) (DAY) (YEAR) (HOUR) M | | 21E. INJURY OCCURRED WHILE AT WORK AT WORK | | 21F. HOW DID INJURY OCCUR? | |
| MEDICAL CORONER'S CERTIFICATION | | 22. I HEREBY CERTIFY THAT I ATTENDED THE DECEASED FROM 10:45p 19 52 TO 11 Mar 52 THAT I LAST SAW THE DECEASED ALIVE ON 19 May 19 52 AND THAT DEATH OCCURRED AT 9 M. FROM THE CAUSES AND ON THE DATE STATED ABOVE. | | 23A. SIGNATURE M.O. Wheeler MD | | 23B. ADDRESS Globe, Ariz | |
| FUNERAL DIRECTOR AND REGISTRAR | | 24A. BURIAL CREMATION REMOVAL | | 24B. DATE March 22, 1952 | | 24C. NAME OF CEMETERY OR CREMATORY Globe Cemetery | |
| 2 | | 25A. DATE REC'D BY LOCAL REG. 3-24-52 | | 25B. REGISTRAR'S SIGNATURE James Wheeler | | 25C. REGISTRAR'S SIGNATURE James Wheeler | |
| 970246 | | 26. FUNERAL DIRECTOR'S SIGNATURE ADDRESS Globe, Arizona. | | 27. EMBARKER'S SIGNATURE | | 28. CENT. NO. #323 | |