ARIZONA STATE DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS

STATE FILE NO. 7704

CERTIFICATE OF DEATH

BIRTH NO.

REGISTRAR'S NO. 61

1. PLACE OF DEATH
A. COUNTY: Yuma
B. CITY (IF OUTSIDE CORPORATE LIMITS, WRITE RURAL) OR TOWN: Yuma, rural
C. LENGTH OF STAY IN THIS PLACE: 1 day; IN ARIZONA: 1-day
D. FULL NAME OF HOSPITAL OR INSTITUTION (IF NOT IN HOSPITAL OR INSTITUTION, GIVE STREET ADDRESS OR LOCATION): 16 mi E. on Highway 80

2. USUAL RESIDENCE (WHERE DECEASED LIVED. IF INSTITUTION: RESIDENCE BEFORE ADMISSION).
A. STATE: California
B. COUNTY:
C. CITY (IF OUTSIDE CORPORATE LIMITS, WRITE RURAL) OR TOWN: Oakland
D. STREET ADDRESS (IF RURAL, GIVE LOCATION): 1464 8th Street

3. NAME OF DECEASED (TYPE OR PRINT)
A. (FIRST): GENERAL
B. (MIDDLE): GRANT
C. (LAST): GREER Jr.

4. SEX: Male

5. COLOR OR RACE: Negro

6. MARRIED / NEVER MARRIED / WIDOWED / DIVORCED: ☐ / ☐ / ☐ / ☒

7. DATE OF BIRTH: MONTH Mar, DAY 8, YEAR 1921

8. AGE: YEARS / MONTHS / DAYS

IF UNDER 24 HOURS: HOURS / MIN.

9A. USUAL OCCUPATION (GIVE KIND OF WORK DURING MOST OF LIFE, EVEN IF RETIRED): Minister

9B. KIND OF BUSINESS OR INDUSTRY: Ministry

10. BIRTHPLACE (STATE OR FOREIGN COUNTRY): not available

11. CITIZEN OF WHAT COUNTRY? USA

12. WAS DECEASED EVER IN U. S. ARMED FORCES? (YES, NO, OR UNKNOWN): yes (IF YES, WAR OR DATES OF SERVICE): WW 2

13. SOCIAL SECURITY NO. 432-03-6578

14A. FATHER'S NAME: General Grant Greer Sr.

14B. BIRTHPLACE (STATE OR COUNTRY): not available

15A. MOTHER'S MAIDEN NAME: not available

15B. BIRTHPLACE (STATE OR COUNTRY): not available

16. INFORMANT'S SIGNATURE: London Evans ADDRESS: London Evans, 1464 8th St Oakland Calif

17. DATE OF DEATH (MONTH) December (DAY) 23 (YEAR) 1952

18. CAUSE OF DEATH
ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), (c).
+THIS DOES NOT MEAN THE MODE OF DYING, SUCH AS HEART FAILURE, ASTHENIA, ETC. IT MEANS THE DISEASE INJURY, OR COMPLICATION WHICH CAUSED DEATH.
PLACE DISEASE CONTRACTED.

MEDICAL CERTIFICATION

I. DISEASE OR CONDITIONS DIRECTLY LEADING TO DEATH+ (a) Skull Fracture — INTERVAL BETWEEN ONSET AND DEATH: 5 min

ANTECEDENT CAUSES
MORBID CONDITIONS, IF ANY, GIVING RISE TO THE ABOVE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.
DUE TO (b) auto accident
DUE TO (c)

II. OTHER SIGNIFICANT CONDITIONS
CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RELATING TO THE DISEASE OR CONDITION CAUSING DEATH.

19A. DATE OF OPERATION:

19B. MAJOR FINDINGS OF OPERATION:

20. AUTOPSY? YES ☐ NO ☒

21A. ACCIDENT / SUICIDE / HOMICIDE (SPECIFY): Accident

21B. PLACE OF INJURY (E. G., IN OR ABOUT HOME, FARM, FACTORY, STREET, OFFICE BLDG., ETC.): Highway 80 16 mi East of

21C. (CITY OR TOWN) (COUNTY) (STATE): Yuma Yuma Arizona

21D. TIME OF INJURY (MONTH) (DAY) (YEAR) (HOUR): 12-23-52 10:15P M

21E. INJURY OCCURRED WHILE AT WORK ☐ NOT WHILE AT WORK ☒

21F. HOW DID INJURY OCCUR? Collision of Buick with truck & trailer; thru carlessness of driver of Buick

22. I HEREBY CERTIFY THAT I ATTENDED THE DECEASED FROM never, 19____, TO ____, 19____, THAT I LAST SAW THE DECEASED ALIVE ON ____, 19____, AND THAT DEATH OCCURRED AT 10:20P FROM THE CAUSES AND ON THE DATE STATED ABOVE.

23A. SIGNATURE: Ezsel C. Byrd (DEGREE OR TITLE): Coroner

23B. ADDRESS: Yuma - Arizona

23C. DATE SIGNED: 12-26-52

24A. BURIAL / CREMATION / REMOVAL: ☐ / ☐ / ☒

24B. DATE: 12-27-52

24C. NAME OF CEMETERY OR CREMATORY:

24D. LOCATION (CITY, TOWN, OR COUNTY) (STATE): Oakland, California

25A. DATE REC'D BY LOCAL REG.: 12-27-52

25B. REGISTRAR'S SIGNATURE: Marie Wilson

26. FUNERAL DIRECTOR'S SIGNATURE: R E Johnson ADDRESS: The Johnson Mortuary, Inc. Box 310 Yuma, Arizona

27. EMBALMER'S SIGNATURE: R E Johnson

CERT. NO. 246A

FORM VS 2 REV. 20M