

CERTIFICATE OF DEATH

REGISTRAR'S NO. 290

4
E OF DEATH
AND
AL RESIDENCE
X-

DECEDENT
PERSONAL
DATA

155

CAUSE
OF
DEATH
FEM 18)

OPERATIONS
AUTOPSY

MEDICAL
RTIFICATION

DEATH
DUE TO
EXTERNAL
VIOLENCE

CORONER'S
RTIFICATION

FUNERAL
RECTOR
AND
REGISTRAR

BIRTH NO.		1. PLACE OF DEATH A. COUNTY <u>Gila</u>		B. LENGTH OF STAY IN THIS TOWN <u>4 Mos.</u> IN ARIZONA <u>43 Yrs.</u>		2. USUAL RESIDENCE (WHERE DECEASED LIVED, IF INSTITUTION: RESIDENCE BEFORE ADMISSION) A. STATE <u>Arizona</u> B. COUNTY <u>Maricopa</u>	
C. CITY OR TOWN <u>Globe</u>		<input type="checkbox"/> IN CITY LIMITS <input checked="" type="checkbox"/> OUTSIDE CITY LIMITS		C. CITY OR TOWN <u>Phoenix</u>		<input checked="" type="checkbox"/> IN CITY LIMITS <input type="checkbox"/> OUTSIDE CITY LIMITS	
D. FULL NAME OF HOSPITAL OR INSTITUTION (IF NOT IN HOSPITAL OR INSTITUTION, GIVE STREET ADDRESS OR LOCATION) <u>Roosevelt Lake</u>				D. STREET ADDRESS (IF RURAL, GIVE LOCATION) <u>2936 N. 8th Ave.</u>			
3. NAME OF DECEASED (TYPE OR PRINT) <u>Sidney</u>		A. (FIRST)		B. (MIDDLE) <u>F.</u>		C. (LAST) <u>Newman</u>	
4. SEX <u>Male</u>		5. COLOR OR RACE <u>White</u>		6A. MARRIED, NEVER MARRIED, WIDDED, DIVORCED (SPECIFY) <u>Married</u>			
6B. NAME OF SPOUSE <u>June Elizabeth</u>		7. DATE OF BIRTH MONTH <u>2</u> DAY <u>20</u> YEAR <u>1907</u>		8. AGE (IN YEARS LAST BIRTHDAY) <u>47 Yrs.</u>		9A. USUAL OCCUPATION (GIVE KIND OF WORK DURING MOST OF LIFE EVEN IF RETIRED) <u>Dist. Plant Mgr.</u>	
9B. KIND OF BUSINESS OR INDUSTRY <u>Telephone Co.</u>		10. BIRTHPLACE (STATE OR FOREIGN COUNTRY) <u>California</u>		11. CITIZEN OF WHAT COUNTRY? <u>USA</u>		12. WAS DECEASED EVER IN U. S. ARMED FORCES? (YES, NO, OR UNKNOWN) (IF YES, WAR OR DATES OF SERVICE) <u>No</u>	
13. SOCIAL SECURITY NO. <u>526-03-2288</u>		14A. FATHER'S NAME <u>George Newman</u>		14B. BIRTHPLACE (STATE OR COUNTRY) <u>Unknown</u>		15A. MOTHER'S MAIDEN NAME <u>June E. Ackley</u>	
15B. BIRTHPLACE (STATE OR COUNTRY) <u>Unknown</u>		16. INFORMANT'S SIGNATURE <u>By Telephone</u>		ADDRESS <u>Phoenix, Ariz.</u>		17. DATE OF DEATH (MONTH) (DAY) (YEAR) <u>Jan. 21, 1955</u>	
18. CAUSE OF DEATH ENTER ONLY ONE CODE PER LINE FOR (A), (B), (C). <u>9278</u> ‡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 CONDITION DIRECTLY LEADING TO DEATH: (A) <u>Drowning</u> DUE TO (B) <u>-</u> DUE TO (C) <u>-</u> II. OTHER SIGNIFICANT CONDITIONS CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RELATING TO THE DISEASE OR CONDITION CAUSING DEATH.				INTERVAL BETWEEN ONSET AND DEATH	
19A. DATE OF OPERATION		19B. MAJOR FINDINGS OF OPERATION <u>after death on June 1 1955</u>				20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
21. I HEREBY CERTIFY THAT I ATTENDED THE DECEASED FROM _____, 19____, AND THAT DEATH OCCURRED AT _____, 19____, THAT I LAST SAW THE DECEASED ALIVE ON _____, 19____, AND THAT DEATH OCCURRED AT _____, 19____, FROM THE CAUSES AND ON THE DATE STATED ABOVE.							
22A. SIGNATURE (DEGREE OR TITLE) <u>Nelson D Brayton</u>		22B. ADDRESS <u>Miami, Arizona.</u>		22C. DATE SIGNED <u>6/1/55</u>			
23A. ACCIDENT (SPECIFY) <u>suicide</u> SUICIDE HOMICIDE NATURAL CAUSE		23B. PLACE OF INJURY (E.G., IN OR ABOUT HOME, FARM, FACTORY, STREET, OFFICE BLDG., ETC.) <u>Roosevelt Lake Ariz</u>		23C. (CITY OR TOWN) (COUNTY) (STATE) <u>Phoenix, Arizona</u>			
23D. TIME (MONTH) (DAY) (YEAR) (HOUR) OF INJURY <u>Jan 21, 1955 M</u>		23E. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input checked="" type="checkbox"/>		23F. HOW DID INJURY OCCUR? <u>Drowning</u>			
24A. CORONER'S SIGNATURE <u>Robt de Shute</u>				24B. ADDRESS <u>Globe, Arizona</u>		24C. DATE SIGNED <u>6/1/55</u>	
25A. BURIAL <input type="checkbox"/> CREMATION <input type="checkbox"/> REMOVAL <input checked="" type="checkbox"/>		25B. DATE <u>June 1, 1955</u>		25C. NAME OF CEMETERY OR CREMATORY <u>A. L. Moore Mortuary</u>		25D. LOCATION (CITY, TOWN, OR COUNTY) (STATE) <u>Phoenix, Arizona.</u>	
26A. DATE REC. BY LOCAL REG. <u>6-1-55</u>		26B. REGISTRAR'S SIGNATURE <u>Dennis Nussler</u>		27A. FUNERAL DIRECTOR'S SIGNATURE <u>D. J. Miller</u>		27B. ADDRESS <u>Phoenix Ariz</u>	