2181

FILL OUT ALL BLANKS.

AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in Plain Terms, that it may be properly classified. If any item can not be obtained, insert word "unknown". Make every effort possible to secure this information. Incorrect certificates will be returned for correction.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF DEATH

PLACE OF DEATH

County Yavapai.

District Prescott.

Town Or City Prescott.

State Index - - No. 320

County Registered No. 248

Local Registrar's - No.

No. West Prescott. St.

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

FULL NAME George Merwin.

PERSONAL AND STATISTICAL PARTICULARS

SEX: Male

Color or Race: White Indian Black Chinese Mexican White

SINGLE X MARRIED WIDOWED or DIVORCED

DATE OF BIRTH: July (Month) 21 (Day) 1940 (Year)

AGE: 80 yrs. 1 mos. 21 days | If less than 1 day hrs., or min.

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

BIRTHPLACE (State or Country): Iowa.

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PARENTS

NAME OF FATHER: Do not know.

BIRTHPLACE OF FATHER (State or Country): Do not know.

MAIDEN NAME OF MOTHER: " " "

BIRTHPUACE OF MOTHER (State or country): " " "

The Above is True to the Best of My Knowledge

(Informant) Mrs Geo Merwin.

(Address) Prescott Arizona.

PLACE OF BURIAL OR REMOVAL: Prescott Ariz

DATE OF BURIAL OR REMOVAL: Sept 14. 1920

UNDERTAKER: Lester Ruffner,

ADDRESS: Prescott Ariz.

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH: Sept (Month) 11 (Day), 1920 (Year)

I hereby certify that I attended deceased from Apr 1919 to Sept 1920; that I last saw him alive on Sept 10 1920 and that death occurred on the date stated above at 10 A M. The DISEASE or INJURY causing death was as follows:

Carcinoma of Rectum

(Duration)) 3 yrs. mos days

Was disease contracted in Arizona? Yes

If not, where?

CONTRIBUTORY

(Duration) yrs. mos. days

(Signed) H T Southworth

Sept 15 1920 (Address) Prescott Ariz

*In death from violent causes state (1) means of injury, and (2) whether Accidental, Suicidal, or Homicidal.

LENGTH OF RESIDENCE

At place of death yrs. mos. ds. In Ariz. 54 mos. ds.

Former or Usual Residence

Filed Sept. 14, 1920 Harry T. Southworth Local Registrar.

Filed 10/6/20 John [illegible] County Registrar

Southworth