

CERTIFICATE OF DEATH

REGISTRAR'S NO. 274

BIRTH NO. 30219

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| 1. PLACE OF DEATH<br>A. COUNTY <b>Yuma</b>   |  | B. LENGTH OF STAY<br>IN THIS TOWN <input type="checkbox"/> IN ARIZONA <input type="checkbox"/>     |  | 2. USUAL RESIDENCE (WHERE DECEASED LIVED.<br>IF INSTITUTION; RESIDENCE BEFORE ADMISSION)<br>A. STATE <b>Arizona</b> B. COUNTY <b>Yuma</b>                 |  |
| C. CITY OR TOWN <b>Yuma</b>  |  | <input checked="" type="checkbox"/> IN CITY LIMITS<br><input type="checkbox"/> OUTSIDE CITY LIMITS |  | C. CITY OR TOWN <b>Yuma</b> <input type="checkbox"/> IN CITY LIMITS<br><input checked="" type="checkbox"/> OUTSIDE CITY LIMITS                            |  |
| D. FULL NAME OF HOSPITAL OR INSTITUTION (IF NOT IN HOSPITAL OR INSTITUTION, GIVE STREET ADDRESS OR LOCATION)<br><b>DOA Parkview Baptist Hospital</b> |  |  |  | D. STREET (IF RURAL, GIVE LOCATION) E. IS RESIDENCE ON A FARM?<br><b>801 Dora Ave</b> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |  |

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| 3. NAME OF DECEASED (TYPE OR PRINT)<br><b>JOHN JASON Banta</b> |  |   | 4. SEX<br><b>Male</b>                        | 5. COLOR OR RACE<br><b>Caucasian</b>     | 6A. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)<br><b>never married</b>              |
| 6B. NAME OF SPOUSE   |  | 7. DATE OF BIRTH (MONTH DAY YEAR)<br><b>Oct 21 1961</b> | 8. AGE (IN YEARS LAST BIRTHDAY)<br><b>22</b> | IF UNDER 1 YEAR MONTHS DATE<br><b>22</b> | 9A. USUAL OCCUPATION (GIVE KIND OF WORK DURING MOST OF LIFE EVEN IF RETIRED)<br><b>Child</b> |

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| 9B. KIND OF BUSINESS OR INDUSTRY<br><b>Home</b> | 10. BIRTHPLACE (STATE OR FOREIGN COUNTRY)<br><b>Arizona</b> | 11. CITIZEN OF WHAT COUNTRY?<br><b>USA</b> | 12. WAS DECEASED EVER IN U. S. ARMED FORCES? (YES, NO, OR UNKNOWN) (IF YES, WAR OR DATES OF SERVICE) | 13. SOCIAL SECURITY NO.<br><b>None</b> |
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| 14A. FATHER'S NAME<br><b>Wesley Banta, Yuma, Arizona</b> | 14B. BIRTHPLACE (STATE OR COUNTRY)<br><b>Texas</b> | 15A. MOTHER'S MAIDEN NAME<br><b>Wanda Ford</b> | 15B. BIRTHPLACE (STATE OR COUNTRY)<br><b>Arkansas</b> |
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| 16. INFORMANT'S SIGNATURE<br><i>Wesley C Banta</i> | ADDRESS<br><b>801 Dora Ave Yuma, Ariz</b> | 17. DATE OF DEATH (MONTH) (DAY) (YEAR)<br><b>November 11 1961</b> |
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| 18. CAUSE OF DEATH<br>ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), (C).<br><br>THIS DOES NOT MEAN THE MODE OF DYING, SUCH AS HEART FAILURE, ASTHMA, ETC. IT MEANS THE DISEASE, INJURY, OR COMPLICATION WHICH CAUSED DEATH.<br><br>PLACE DISEASE CONTRACTED. | MEDICAL CERTIFICATION  |  | INTERVAL BETWEEN ONSET AND DEATH<br><b>24 hrs</b> |
|  | I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH: (A) <b>Lobar Pneumonia, bilateral, Extensive</b>  |  |   |
|  | ANTECEDENT CAUSES MORBID CONDITIONS, IF ANY, GIVING RISE TO THE ABOVE CAUSE (A) STATING THE UNDERLYING CAUSE LAST. DUE TO (B) _____ DUE TO (C) _____ |  |   |
|  | II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RELATING TO THE DISEASE OR CONDITION CAUSING DEATH.                               |  |   |

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| 19A. DATE OF OPERATION<br><b>11/11/61</b> | 19B. MAJOR FINDINGS OF OPERATION<br><b>Those above by Autopsy Surgeon.</b> | 20. AUTOPSY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
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21. I HEREBY CERTIFY THAT I ATTENDED THE DECEASED FROM **11/10/1961** TO **11/10/1961**, THAT I LAST SAW THE DECEASED ALIVE ON **11/10/1961**, AND THAT DEATH OCCURRED AT **12:30 P.M.** FROM THE CAUSES AND ON THE DATE STATED ABOVE.

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| 22A. SIGNATURE (DEGREE OR TITLE)<br><i>Wesley C Banta M.D.</i> | 22B. ADDRESS<br><b>Yuma, Arizona</b> | 22C. DATE SIGNED<br><b>11/11/61</b> |
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| 23A. ACCIDENT SUICIDE HOMICIDE NATURAL CAUSE (SPECIFY) | 23B. PLACE OF INJURY (FARM, FACTORY, STREET, OFFICE BLDG., ETC.) | 23C. (CITY OR TOWN) (COUNTY) (STATE) |
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| 23D. TIME (MONTH) (DAY) (YEAR) (HOUR) OF INJURY | 23E. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/> | 23F. HOW DID INJURY OCCUR? |
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| 24A. CORONER'S SIGNATURE<br><i>Orsel G. Byrd</i> | 24B. ADDRESS<br><b>Yuma - ARIZ</b> | 24C. DATE SIGNED<br><b>11-13-61</b> |
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| 25A. BURIAL CREMATION <input type="checkbox"/> REMOVAL <input type="checkbox"/> | 25B. DATE<br><b>Nov 14, 1961</b> | 25C. NAME OF CEMETERY OR CREMATORY<br><b>Yuma Cemetery</b> | 25D. LOCATION (CITY, TOWN, OR COUNTY) (STATE)<br><b>Yuma, Arizona</b> |
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| 26A. DATE REC. BY LOCAL REG.<br><b>11-13-61</b> | 26B. REGISTRAR'S SIGNATURE<br><i>Marion Nelson</i> | 27A. FUNERAL DIRECTOR'S SIGNATURE<br><i>A. G. Dorda</i> | 27B. ADDRESS<br><b>Yuma, Arizona</b> |
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| 28A. EMBALMER'S SIGNATURE<br><i>A. G. Dorda</i> | 28B. EMBALMER'S CERT. NO.<br><b>364R</b> |
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