883

R. A. WATKINS PRINTING CO., PHOENIX

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF DEATH

State Index No. 281-1
County Registered No. 93
Local Registrar's No. 4

PLACE OF DEATH

County: Navajo
District
Town
Or City: Taylor

No. ..... St.
(If death occurred in a Hospital or Institution, give its NAME instead of street and number.)

FULL NAME: Fred Hanson Bates

PERSONAL AND STATISTICAL PARTICULARS

SEX: male

Color ~~or Race~~: White ~~Indian~~ ~~Black~~ ~~Chinese~~ ~~Mexican~~

SINGLE ~~MARRIED~~ ~~WIDOWED~~ ~~or DIVORCED~~

DATE OF BIRTH: April 1, 1927 (Month) (Day) (Year)

AGE: ....yrs. ....mos ....days | 10 If less than 1 day ....hrs., or ....min.

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

BIRTHPLACE (State or country): Utah

PARENTS

NAME OF FATHER: LaSelle M. Bates

BIRTHPLACE OF FATHER (State or country): Tuba City Ariz

MAIDEN NAME OF MOTHER: Nellie Jennings

BIRTHPLACE OF MOTHER (State or country): Apache Taylor Ariz

The Above Is True to the Best of My Knowledge
(Informant)
(Address)

PLACE OF BURIAL OR REMOVAL	DATE OF BURIAL OR REMOVAL
	..... 191....
UNDERTAKER	ADDRESS

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH: April 1, 1922 (Month) (Day) (Year)

I hereby certify, that I attended deceased from ..... 191..... to ..... 191.....; that I last saw h..... alive on ..... 191....., and that death occurred on the date stated above at .....M. The DISEASE or INJURY causing Death was as follows: premature

..... (Duration) ....yrs....mos....days

Was disease contracted in Arizona?
If not, where?

CONTRIBUTORY
..... (Duration) ....yrs....mos....days

(Signed) Harriet Allen
.....191..... (Address)

*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 Arizona....yrs..mos..ds.
Former or Usual Residence

Filed Apr 1 1922 E M Kartchner Dep
E. Wakefield Local Registrar.

Filed Oct 6 1922 [signature]
County Registrar.

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.