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properly classified. If any item cannot be obtained, insert the word "unknown." Make every effort possible to secure this information. Incorrect certificates will be returned for correction.

PLACE OF DEATH **ARIZONA STATE BOARD OF HEALTH** State Index No. 408
BUREAU OF VITAL STATISTICS
 County Yavapai **CERTIFICATE OF DEATH** County Registrar No. 33
 District Verde
 Town or City Jerome No. 33 St. Local Registrar's No. 33
 (If death occurred in a Hospital or Institution, give its name instead of street and number)

PERSONAL AND STATISTICAL PARTICULARS

FULL NAME James Warren

SEX <u>Male</u>	COLOR OR RACE White Black Mexican	INDIAN OR CHINESE <u>Indian</u> Chinese	SINGLE MARRIED WIDOWED OR DIVORCED
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DATE OF BIRTH Dec. 22 - 1900
 (Month) (Day) (Year)

AGE 21 yrs. 5 mos. 24 days hrs., or min.
 If less than 1 day

OCCUPATION (a) Trade, profession or particular kind of work Sailor
 (b) General nature of industry, business, or establishment in which employed (or employer) 31

BIRTHPLACE (State or country) London England

PARENTS

NAME OF FATHER ←

BIRTHPLACE OF FATHER (State or country) ←

MAIDEN NAME OF MOTHER ←

BIRTHPLACE OF MOTHER (State or country) ←

The above is true to the best of my knowledge.
 (Informant) _____
 (Address) _____

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH June 16 - 1922
 (Month) (Day) (Year)

I hereby certify, that I attended deceased from June 12 1922, to June 16, 1922; that I last saw him alive on June 16, 1922, and that death occurred on the date stated above at 4:30 P.M. The DISEASE or INJURY causing death was as follows: Pulmonary Tuberculosis

(Duration) _____ yrs. _____ mos. _____ days

Was disease contracted in Arizona? no
 If not, where? Do not know

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

(Signed) Alcedo, M. D.
6-30, 1922 (Address) Jerome Ariz.

*In deaths from Violent Causes, state: (1), Means of Injury; and (2), Whether Accidental, Suicidal or Homicidal.

LENGTH OF RESIDENCE
 At place of death _____ years _____ months _____ days
 In Arizona _____ years _____ months _____ days
 Former or Usual Residence _____

Filed JUL 1 1922, 1922 H.W. Lewis Local Registrar.
 A True Copy
 Filed 8-21-22 John W. Flinn County Registrar.

Place of Burial or Removal Jerome Valley Date of Burial or Removal June 18 - 1922
 Undertaker Scotty McMillan Address Jerome