

2011

BUREAU OF VITAL STATISTICS ARIZONA STATE BOARD OF HEALTH STANDARD CERTIFICATE OF DEATH

1. PLACE OF DEATH
County: Navajo, State: Arizona, District or Township: Snowflake, City: Snowflake, No. 12, St., Ward
2. FULL NAME: Joseph Alvin Rencher
(a) Residence. No. (Usual place of abode) St., Ward (If non-resident, give city or town and State)
Length of residence in city or town where death occurred 12 yrs. mos. ds. How long in U. S. if of foreign birth? yrs. mos. ds.

PERSONAL AND STATISTICAL PARTICULARS

3. SEX: m. 4. COLOR or RACE: W. 5. SINGLE, MARRIED, WIDOWED or DIVORCED: Married
5a. If married, widowed, or divorced: HUSBAND of Nettie Hunt Rencher
6. DATE OF BIRTH (month, day and year): Apr. 8, 1868
7. AGE: 61 Years, Months, Days
8. OCCUPATION OF DECEASED: (a) Trade, profession, or particular kind of work: Farmer
9. BIRTHPLACE (city or town) (State or country): Pine Valley, Idaho; Washington Co.
10. NAME OF FATHER: Unk. Rencher
11. BIRTHPLACE OF FATHER: (city or town) (State or country)
12. MAIDEN NAME OF MOTHER: Elizabeth Hilpat
13. BIRTHPLACE OF MOTHER: (city or town) (State or country) South Carolina

14. Informant: Ben J. Rencher, (Address) Snowflake Ariz.
15. Filed: Nov 20, 1929 J. H. Frost Registrar.

MEDICAL CERTIFICATE OF DEATH

16. DATE OF DEATH (month, day, and year) Nov 16, 1929
17. I HEREBY CERTIFY, That I attended deceased from Nov 15, 1929 to Nov 15, 1929 that I last saw him alive on Nov 15, 1929 and that death occurred, on the date stated above, at 1 a. m. The CAUSE OF DEATH* was as follows: Peritonitis
CONTRIBUTORY (Secondary)
18. Where was disease contracted if not at place of death?
Did an operation precede death? Date of
Was there an autopsy?
What test confirmed diagnosis? (Signed) B. J. Cole, M. D. Dec 20, 1929 Standard Ariz
* State the Disease Causing Death, or in deaths from Violent Causes, state (1) Means and Nature of Injury, and (2) whether Accidental, Suicidal, or Homicidal. (See reverse side for additional space.)

19. PLACE OF BURIAL, CREMATION OR REMOVAL: Snowflake Arizona DATE OF BURIAL: Nov 18, 1929
20. UNDERTAKER: Wm. H. Smith ADDRESS: Snowflake

DEPARTMENT OF HEALTH, BUREAU OF VITAL STATISTICS, ARIZONA STATE BOARD OF HEALTH, STANDARD CERTIFICATE OF DEATH