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

1. PLACE OF DEATH
County: Pima State: Arizona
City: Ugo No. New Carmelita Hospital St.
2. FULL NAME: Florence Benton
(a) Residence, No.: Ugo, Ariz.
Length of residence in city or town where death occurred: 13 yrs. mos. ds.

MARGIN RESERVED FOR BINDING
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important. See instructions on back of certificate.

PERSONAL AND STATISTICAL PARTICULARS
3. SEX: Female
4. COLOR or RACE: White
5. SINGLE, MARRIED, WIDOWED, DIVORCED: Married
5a. If married, widowed, or divorced: HUSBAND of Henry L. Benton
6. DATE OF BIRTH: Jan 26, 1914
7. AGE: 16 Years
8. OCCUPATION OF DECEASED: Housewife
9. BIRTHPLACE: Dayton, New Mexico
10. NAME OF FATHER: Thomas Lafayette Crawford
11. BIRTHPLACE OF FATHER: Alabama
12. MAIDEN NAME OF MOTHER: Bernice Lawrence
13. BIRTHPLACE OF MOTHER: Nevada
14. Informant: U. L. Zirkle
15. Filed: Feb 6, 1930

MEDICAL CERTIFICATE OF DEATH
16. DATE OF DEATH: Jan 31, 1930
17. I HEREBY CERTIFY, That I attended deceased from Jan 27, 1930 to Jan 31, 1930.
18. Where was disease contracted?
19. PLACE OF BURIAL, CREMATION OR REMOVAL: Pima
20. UNDERTAKER: H. T. Lyons