

9191

STANDARD CERTIFICATE OF DEATH
DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS

State File No. 33
Registrar's No. 9

1. Place of Death: (a) County Cochise (b) City or Town Douglas (Rural) (c) Location Co. Hospital
(If outside city limits also write RURAL) (St. & No. (or) Name of Institution)
(d) Length of Stay: In Hospital or Institution 7 Days; In Community 40 Years; In Arizona 40 Years
(Specify whether years, months or days)
2. Usual Residence of Deceased: (a) State Arizona; (b) County Cochise; (c) City or Town Douglas
(If outside city limits also write RURAL)
(d) Street No. Douglas; (e) If foreign born, in U. S. A. 93 yrs. (f) If veteran name war. 93 (g) Social Security No. -
(If NONE write the word)

3. (a) FULL NAME William Edward Gardner
4. Sex Male 5. Color or Race White 6. (a) Single, married, widowed or divorced Widower
6. (b) Name of husband or wife Currie Gardner 6. (c) Age of husband or wife, if alive endrs.
7. Birthdate of deceased 12 2 1867
(Month) (Day) (Year)
8. AGE: Years 74 Months 1 Days 13 If less than one day hrs. min.
9. Birthplace San Antonio Texas
(City, town or county) (State or Country)

10. Usual Occupation Rancher
11. Industry or Business
12. Name Alex Gardner
13. Birthplace Texas
(City, town or county) (State or Country)
14. Maiden Name Nancy Mangrum
15. Birthplace Texas
(City, town or county) (State or Country)

16. (a) Informant's own signature Betty Hardnes
(b) Address General Delivery Tucson Ariz

17. (a) Burial, Cremation or Removal Burial
(b) Place Douglas, Ariz (c) Date 1-17-42 1942
18. (a) Embalmer's Signature Gordon Perry 258-A
(b) Funeral Director Porter & Ames 29-A
(c) Address Douglas, Arizona

19. (a) Jan. 15 - 42
(Date received local Registrar)
(b) Quidamsoe
(Registrar's Signature)

20M 100% Rag 9/23/40

MEDICAL CERTIFICATION

20. DATE OF DEATH (Month, day and year) 1-15-42, 1942
TIME (Hour and minute) 2-30 AM M.
21. I hereby certify that I attended the deceased from 1-7-42, 1942 to 1-15-42, 1942
that I last saw him alive on 1-15-42, 1942
and that death occurred on the date and hour stated above.

Immediate cause of death Cardio-vascular disease
Due to _____
Due to _____
Other conditions (Include pregnancy within 3 months of death)
Major findings: Of operations _____
Of autopsy _____

DURATION
PHYSICIAN
Underline the cause to which death should be charged statistically.

22. If death was due to external causes, fill in the following:
(a) Accident, suicide or homicide (specify) _____
(b) Date of occurrence _____
(c) Where did injury occur? _____ (City or Town) _____ (County) _____ (State)
(d) Did injury occur in or about home, on farm, in industrial place, in public place? _____ (Specify type of place)
While at work _____ (e) Means of injury _____
23. Signature C. W. Callaway M. D.
Address Douglas, Arizona Date signed 1-15-42