

627

FILL OUT ALL BLANKS. AGE should be stated EXACTLY. PHYSICIANS should state 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.

PLACE OF DEATH

ARIZONA STATE BOARD OF HEALTH

County Yavapai  
District Prescott  
Town Prescott  
Or City

BUREAU OF VITAL STATISTICS

State Index No. 922

ORIGINAL CERTIFICATE OF DEATH

County Registered No. 92

Local Registrar's No.

No. 100 East Prescott St.  
(If death occurred in a Hospital or Institution, give its NAME instead of street and number.)

FULL NAME A. B. Kearley

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL CERTIFICATE OF DEATH

SEX Male Color or Race White  SINGLE  MARRIED  WIDOWED  or DIVORCED

DATE OF DEATH June 24 1914  
(Month) (Day) (Year)

DATE OF BIRTH June 16 1831  
(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

AGE 83 yrs. 0 mos. 0 days hrs., or min. If less than 1 day.

Death was as follows: Chronic Interstitial Nephritis

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

Was disease contracted in Arizona? 29 yrs  
If not, where? Central America  
CONTRIBUTORY (Duration) yrs. mos. days 2

BIRTHPLACE (State or country) Tenn.

(Signed) [Signature]  
June 27 1914 (Address) Prescott, Ariz.

NAME OF FATHER Kearley

BIRTHPLACE OF FATHER (State or country) Tenn.

MAIDEN NAME OF MOTHER Don't Know

BIRTHPLACE OF MOTHER (State or country) " "

THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) Jess Kearley

In deaths from VIOLENT CAUSES state (1) MEANS OF INJURY, and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.

LENGTH OF RESIDENCE At place of death 2 yrs. 0 mos. 0 ds. In Arizona 21 yrs. 0 mos. 0 ds.

(Address) Prescott, Ariz.

Former or Usual Residence Filed June 27 1914

PLACE OF BURIAL OR REMOVAL Prescott, Ariz. DATE OF BURIAL OR REMOVAL June 26 1914

Filed 7/14 1914 John W. Hume County Registrar

UNDERTAKER Lester Huffner ADDRESS Prescott, Ariz.

Filed 7/14 1914 John W. Hume County Registrar