

CERTIFICATE OF DEATH

4 DATE OF DEATH 5 AND 25	1. PLACE OF DEATH A. COUNTY Gila		B. LENGTH OF STAY IN THIS TOWN IN ARIZONA 17 Yrs 20 Yrs		2. USUAL RESIDENCE (WHERE DECEASED LIVED, IF INSTITUTION: RESIDENCE BEFORE ADMISSION). A. STATE Arizona , B. COUNTY Gila	
	C. CITY OR TOWN Miami		<input checked="" type="checkbox"/> IN CITY LIMITS <input type="checkbox"/> OUTSIDE CITY LIMITS		C. CITY OR TOWN Miami	
3. NAME OF DECEASED (TYPE OR PRINT) Juan T. Mendiolola		4. SEX Male		5. COLOR OR RACE Mexican		
6. HARRIED, NEVER HARRIED, WIDOWED, DIVORCED (SPECIFY) Married		7. DATE OF BIRTH MONTH Jan DAY 6 YEAR 1908		8. AGE (IN YEARS IF UNDER 1 YEAR IF UNDER 24 HRS. DAYS HOURS MIN.) 51 Yrs		
9. KIND OF BUSINESS OR INDUSTRY Copper Mine		10. BIRTHPLACE (STATE OR FOREIGN COUNTRY) Arizona		11. CITIZEN OF WHAT COUNTRY? U.S.A.		
14A. FATHER'S NAME Manuel Mendiolola		14B. BIRTHPLACE (STATE OR COUNTRY) Mexico		15A. MOTHER'S MAIDEN NAME Francisca Lujan		
16. INFORMANT'S SIGNATURE <i>Carlos Mendiolola</i>		17. DATE OF DEATH (MONTH) Sept. (DAY) 8, (YEAR) 1953		18. CAUSE OF DEATH ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), (C). Self inflicted gun shot wound		
19. DATE OF OPERATION Sept 17 1953		19A. MAJOR FINDINGS OF OPERATION		20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
21A. ACCIDENT SUICIDE Suicide		21B. PLACE OF INJURY (E. G., IN OR ABOUT HOME, FACTORY, STREET, OFFICE BLDG., ETC.) Home		21C. (CITY OR TOWN) (COUNTY) (STATE) Miami Gila Ariz		
21D. TIME (MONTH) (DAY) (YEAR) (HOUR) Sept 8 53 12:15 P M		21E. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input checked="" type="checkbox"/>		21F. HOW DID INJURY OCCUR?		
22. I HEREBY CERTIFY THAT I ATTENDED THE DECEASED FROM [Signature] AND THAT DEATH OCCURRED AT [Signature] M. FROM THE CAUSES AND ON THE DATE STATED ABOVE.		23A. SIGNATURE OF REGISTRAR OR TITULAR		23B. ADDRESS Miami, Arizona.		
23. DATE SIGNED 9/10/53		24. BURIAL <input checked="" type="checkbox"/> CREATION <input type="checkbox"/> REMOVAL <input type="checkbox"/>		24C. NAME OF CEMETERY OR CREMATORY Pinal Cemetery		
25A. DATE REC'D BY LOCAL REG. Sept 17 1953		25B. REGISTRAR'S SIGNATURE <i>Robert D. Taylor</i>		25C. DATE SIGNED 9/10/53		
26. FUNERAL DIRECTOR'S SIGNATURE <i>John P. ...</i>		26. ADDRESS Miami, Arizona.		27. EMBLIMER'S SIGNATURE <i>...</i>		
27. CERT. NO. 2498		28. REGISTRAR'S SIGNATURE <i>...</i>		29. ADDRESS Miami, Arizona.		