1. Fred Kesemann M.D., 1627 N. Tucson

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ARIZONA STATE DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS

STATE FILE NO. 6402

CERTIFICATE OF DEATH

BIRTH NO.

REGISTRAR'S NO. 1236

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OF DEATH AND RESIDENCE 44

1. PLACE OF DEATH
A. COUNTY: Pima
B. LENGTH OF STAY: IN THIS TOWN 62yrs; IN ARIZONA 62yrs
C. CITY OR TOWN: Tucson ☒ IN CITY LIMITS ☐ OUTSIDE CITY LIMITS
D. FULL NAME OF HOSPITAL OR INSTITUTION (IF NOT IN HOSPITAL OR INSTITUTION, GIVE STREET ADDRESS OR LOCATION): 28 E. 15th Street

2. USUAL RESIDENCE (WHERE DECEASED LIVED. IF INSTITUTION: RESIDENCE BEFORE ADMISSION)
A. STATE: Arizona
B. COUNTY: Pima
C. CITY OR TOWN: Tucson ☒ IN CITY LIMITS ☐ OUTSIDE CITY LIMITS
D. STREET ADDRESS (IF RURAL, GIVE LOCATION): 28 E. 15th Street

DECEDENT PERSONAL DATA 162

3. NAME OF DECEASED (TYPE OR PRINT) A. (FIRST) Petra B. (MIDDLE) Soto C. (LAST) de Borgaro
4. SEX: Fem
5. COLOR OR RACE: White
6A. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): Married
6B. NAME OF SPOUSE: Esteban Borgaro
7. DATE OF BIRTH: MONTH June DAY 29 YEAR 1891
8. AGE (IN YEARS LAST BIRTHDAY): 62
IF UNDER 1 YEAR: MONTHS / DAYS
IF UNDER 24 HRS.: HOURS / MIN.
9A. USUAL OCCUPATION (GIVE KIND OF WORK DURING MOST OF LIFE EVEN IF RETIRED): Housewife
9B. KIND OF BUSINESS OR INDUSTRY: Home
10. BIRTHPLACE (STATE OR FOREIGN COUNTRY): Tucson, Ariz
11. CITIZEN OF WHAT COUNTRY?: USA
12. WAS DECEASED EVER IN U. S. ARMED FORCES? (YES, NO, OR UNKNOWN): no (IF YES, WAR OR DATES OF SERVICE)
13. SOCIAL SECURITY NO.
14A. FATHER'S NAME: Francisco Soto
14B. BIRTHPLACE (STATE OR COUNTRY): Los Angeles, Cal
15A. MOTHER'S MAIDEN NAME: Epigmemia Cortez
15B. BIRTHPLACE (STATE OR COUNTRY): Son., Mex.
16. INFORMANT'S SIGNATURE: Esteban Borgaro
ADDRESS
17. DATE OF DEATH (MONTH) October (DAY) 29, (YEAR) 1953

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CAUSE OF DEATH (ITEM 18)

18. CAUSE OF DEATH
ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), (C).
‡THIS DOES NOT MEAN THE MODE OF DYING, SUCH AS HEART FAILURE, ASTHENIA, ETC. IT MEANS THE DISEASE INJURY, OR COMPLICATION WHICH CAUSED DEATH.
PLACE DISEASE CONTRACTED.

MEDICAL CERTIFICATION

1. DISEASE OR CONDITIONS DIRECTLY LEADING TO DEATH‡ (A) Carcinomatosis — INTERVAL BETWEEN ONSET AND DEATH: 1½ yrs
ANTECEDENT CAUSES
MORBID CONDITIONS. IF ANY GIVING RISE TO THE ABOVE CAUSE (A) STATING THE UNDERLYING CAUSE LAST.
DUE TO (B) Carcinoma of Cervix — 5 yrs.
DUE TO (C)
11. OTHER SIGNIFICANT CONDITIONS
CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RELATING TO THE DISEASE OR CONDITION CAUSING DEATH.

OPERATIONS, AUTOPSY

19A. DATE OF OPERATION
19B. MAJOR FINDINGS OF OPERATION: Multiple operations 1950 & 1951
20. AUTOPSY? YES ☐ NO ☒

DEATH DUE TO EXTERNAL VIOLENCE

21A. ACCIDENT / SUICIDE / HOMICIDE (SPECIFY)
21B. PLACE OF INJURY (E.G., IN OR ABOUT HOME, FARM, FACTORY, STREET, OFFICE BLDG., ETC.)
21C. (CITY OR TOWN) (COUNTY) (STATE)
21D. TIME OF INJURY (MONTH) (DAY) (YEAR) (HOUR) M
21E. INJURY OCCURRED: WHILE AT WORK ☐ NOT WHILE AT WORK ☐
21F. HOW DID INJURY OCCUR?

MEDICAL CERTIFICATION / CORONER'S CERTIFICATION

22. I HEREBY CERTIFY THAT I ATTENDED THE DECEASED FROM 1949 TO Oct 29, 1953 THAT I LAST SAW THE DECEASED ALIVE ON ____, 19__, AND THAT DEATH OCCURRED AT 3 AM M. FROM THE CAUSES AND ON THE DATE STATED ABOVE.
23A. SIGNATURE: F. Kesemann (DEGREE OR TITLE) M.D.
23B. ADDRESS: 1627 N. Tucson Blvd Tucson
23C. DATE SIGNED: 10/30/53

FUNERAL DIRECTOR AND REGISTRAR 55

24A. BURIAL ☒ CREMATION ☐ REMOVAL ☐
24B. DATE: Oct. 31, 1953
24C. NAME OF CEMETERY OR CREMATORY: Holy Hope Cemetery
24D. LOCATION (CITY, TOWN, OR COUNTY) (STATE): Tucson, Arizona
25A. DATE REC'D BY LOCAL REG.: 10-30-53
25B. REGISTRAR'S SIGNATURE: Teresa H. Salazar Deputy
26. FUNERAL DIRECTOR'S SIGNATURE: Reilly Funeral Home — ADDRESS: Tucson, Ariz
27. EMBALMER'S SIGNATURE: Chris A. Reilly — CERT. NO. #216

FORM VS 2 REV. 1-1-53