

r. Bishop

ARIZONA STATE DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS

STATE FILE NO.

7386

CERTIFICATE OF DEATH

1. PLACE OF DEATH
A. COUNTY Gila
C. CITY OR TOWN Globe

2. USUAL RESIDENCE (WHERE DECEASED LIVED, IF INSTITUTION; RESIDENCE BEFORE ADMISSION).
A. STATE Arizona.
C. CITY OR TOWN Globe IN CITY LIMITS OUTSIDE CITY LIMITS
D. STREET ADDRESS 430 Parker St. (IF RURAL, GIVE LOCATION)

3. NAME OF DECEASED (TYPE OR PRINT)
A. (FIRST) Robert B. (MIDDLE) Lee C. (LAST) Mc. Broom
4. SEX Male 5. COLOR OR RACE White

6. MARRIED, NEVER MARRIED, WIDDED, DIVORCED (SPECIFY)
Married

7. DATE OF BIRTH
MONTH Aug. DAY 6 YEAR 1866

8. BIRTHPLACE (STATE OR FOREIGN COUNTRY)
Missouri

9. USUAL OCCUPATION (GIVE KIND OF WORK DURING MOST OF LIFE, EVEN IF RETIRED).
Cowboy

10. BIRTHPLACE (STATE OR FOREIGN COUNTRY)
U.S.A.

11. CITIZEN OF WHAT COUNTRY?
U.S.A.

12. WAS DECEASED EVER IN U. S. ARMED FORCES? (YES, NO, OR UNKNOWN) (IF YES, WAR OR DATES OF SERVICE)
No

13. SOCIAL SECURITY NO.

14. FATHER'S NAME
Unknown

15. MOTHER'S MAIDEN NAME
Unknown

16. INFORMANT'S SIGNATURE
Emma Hacking ADDRESS Globe, Ariz.

17. DATE OF DEATH
(MONTH) Dec. (DAY) 1, (YEAR) 1953

18. CAUSE OF DEATH
ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), (C).
(A) Inttra - abdominal malignant tumor - type undetermined
(B) Due to (B)
(C) Due to (C)

19. DATE OF OPERATION
19A. MAJOR FINDINGS OF OPERATION
19B. SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RELATING TO THE DISEASE OR CONDITION CAUSING DEATH.

20. AUTOPSY?
YES NO

21. PLACE OF INJURY (E. G., IN OR ABOUT HOME, FARM, FACTORY, STREET, OFFICE BLDG., ETC.)
21C. (CITY OR TOWN) (COUNTY) (STATE)

22. I HEREBY CERTIFY THAT I ATTENDED THE DECEASED FROM Nov 4 1953 TO Nov 30 53 THAT I LAST SAW THE DECEASED ALIVE ON Nov 30 1953 AND THAT DEATH OCCURRED AT 5:30 A.M. M. FROM THE CAUSES AND ON THE DATE STATED ABOVE.

23. SIGNATURE (DECEASED OR HEIR)
Robert Lee McBroom 23B. ADDRESS Globe, Arizona. 23C. DATE SIGNED 12/2/53

24. BURIAL CREMATION 24A. DATE Dec. 3, 1953 24B. NAME OF CEMETERY OR CREMATORY Pinal Cemetery 24C. LOCATION (CITY, TOWN, OR COUNTY) (STATE) Miami, Arizona.

25. DATE REC'D BY LOCAL REG. 12-6-53 25A. REGISTRAR'S SIGNATURE James Samuel 25B. FUNERAL DIRECTOR'S SIGNATURE James Samuel ADDRESS 24419 CERT. NO. 24419