

Commonwealth of Kentucky  
STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS  
CERTIFICATE OF DEATH

23252

PLACE OF DEATH

County

Montgomery

Vot. Pot.

4th Ward

Registration District No.

850

File No.

Registered No.

215

Inc. Town

Primary Registration District No.

2425

City

Mt. Sterling, Ky

(No.)

St.

Ward)

(If death occurred in a  
hospital or institution,  
give the NAME instead of  
street and number.)

FULL NAME

Elizabeth Pearl 190.

## PERSONAL AND STATISTICAL PARTICULARS

|   |  |  |
|---|--|--|
| 1 SEX<br>Female   | 4 COLOR OR RACE<br>White                                       | 5 SINGLE<br>MARRIED,<br>WIDOWED<br>OR DIVORCED<br>(Write the word)<br>Single |
| 6 DATE OF BIRTH<br>..... 1910<br>(Month) (Day) (Year)   |  |  |
| 7 AGE<br>2 yrs. .... mos. .... ds.  |  | IF LESS than<br>1 day ... hrs.<br>or ... min.?                               |
| 8 OCCUPATION<br>(a) Trade, profession, or<br>particular kind of work.<br>(b) General nature of industry<br>business or establishment in<br>which employed (or employer) |  |  |
| 9 BIRTHPLACE<br>(State or country)<br>Montgomery  |  |  |
| PARENTS   | 10 NAME OF FATHER<br>Carnest 1900                              |  |
|   | 11 BIRTHPLACE<br>OF FATHER<br>(State or country)<br>Menifee Co |  |
|   | 12 MAIDEN NAME<br>OF MOTHER<br>Cora Bruce                      |  |
|   | 13 BIRTHPLACE<br>OF MOTHER<br>(State or country)<br>Menifee Co |  |

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant)

(Address)\*

Filed Sept 28 1912

REGISTRAR

## MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH

Sept 26 1912  
(Month) (Day) (Year)

17 I HEREBY CERTIFY, That I attended deceased

from Sept 27 1912 to Sept 28 1912

that I last saw him alive on Sept 27 1912, and

and that death occurred on the date stated above

at 10:00 AM. The CAUSE OF DEATH was as follows:

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WRITE PLAINLY, WITH UNFADING INK--THIS IS A PERMANENT RECORD

M. B.--Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in full terms, so that it may be properly classified. Exact statement of OCCUPATION is very important. See instructions on back of certificate.