

PLACE OF DEATH

STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS  
CERTIFICATE OF DEATH

30892

County Russell

File No.

Vol. Pat.

Registration District No. 1010Registered No. 57Ino. Town MouchetPrimary Registration District No. 7491

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

City

St.

Ward

FULL NAME Lucy Stegal

## PERSONAL AND STATISTICAL PARTICULARS

## MEDICAL CERTIFICATE OF DEATH

1 SEX Female 4 COLOR OR RACE White 5 SINGLE, MARRIED, WIDOWED, OR DIVORCED (Write the word)16 DATE OF DEATH 10 / 11 / 1918  
(Month) (Day) (Year)6 DATE OF BIRTH Nov. 25, 1877  
(Month) (Day) (Year)17 I HEREBY CERTIFY, That I attended deceased from 10/10, 1918, to 10/11, 1918, that I last saw her alive on 10/11, 1918, and that death occurred on the date stated above at 10 a.m. The CAUSE OF DEATH\* was as follows:  
Pneumonia7 AGE 40 yrs. 11 mos. 1 ds. IF LESS than 1 day... hrs. or... min.?

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

9 BIRTHPLACE (State or country) Ky10 NAME OF FATHER Robert StegalContributory (Secondary) (Duration) 3 yrs. 3 mos. 3 ds.11 BIRTHPLACE OF FATHER (State or country) Ky(Signed) Geo. Mitchell M. D. 10/12, 1918 (Address) Mouchet Ky12 MAIDEN NAME OF MOTHER Virginia Mitchell13 BIRTHPLACE OF MOTHER (State or country) Ky

\*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES state (1) MEANS OF INJURY; and (2) whether ACCIDENTAL, SUICIDAL OR HOMICIDAL

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

18 LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRAIN SIGHTS OR RECENT RESIDENCES) In the State... yrs... mos... ds. Where was disease contracted, if not at place of death? Former or usual residence

(Informant) Lucy Stegal(Address) 1012 8 Eva. Central, Ky.

19 PLACE OF BURIAL OR REMOVAL DATE OF BURIAL

15 Oct 12, 1918James Campbell & Co. Oct 12, 1918File 1012 1918 Eva. Central, Ky. REGISTERARGeo. Mitchell ADDRESS