

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

18950

PLACE OF DEATH  
County Rowan  
Vol. Rowan No. 1  
Ind. Rowan No. 1

Registration District No. 13/8  
Primary Registration District No. 13/8

File No. \_\_\_\_\_  
Registered No. 8  
To each issued by  
the State Board of Health

City \_\_\_\_\_ No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_  
FULL NAME Morgan Ingram

PERSONAL AND STATISTICAL PARTICULARS

SEX Boy COLOR OR RACE White  
SINGLE MARRIED DIVORCED WIDOWED (Strike the word)

DATE OF BIRTH March 13 1921

AGE 1 yr 4 mo 20 d IF LESS THAN 1 yr. give mo. da.

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

BIRTHPLACE (State or country) Rowan Co.

NAME OF FATHER Richard Ingram

BIRTHPLACE OF FATHER (State or country) Monroe Co.

MOTHER'S NAME Minnie Ingram

BIRTHPLACE OF MOTHER (State or country) Rowan Co.

Informant: Richard Ingram

Address: Rowan Co.

Aug 1st Mrs. W. M. Blair

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH Aug 1 1922

I HEREBY CERTIFY, That I attended deceased from July 14 1922 to July 31 1922, that last seen him alive on July 31 1922 and that death occurred on the date stated above at Rowan Co. The CAUSE OF DEATH was as follows:

Gastric Enteritis

Sex: Male Age: 1 yr 4 mo 20 d

Contributory (Specify): \_\_\_\_\_

Signature: Dr. H. H. Blair

Physician (Name, Address, and Title) Rowan Co.

Where was disease contracted, if not at place of death \_\_\_\_\_

Farmer or small holder \_\_\_\_\_

PLACE OF BURIAL OR REMOVAL James Blair

DATE OF BURIAL Aug 1st 1922

Signature: Mrs. J. M. Blair

Address: Salt Lick

WRITES PLAINLY, WITH EMPHASIS AND IN A PROMINENT RECORD. N.B.—Every item of information should be accurately ascertained. AGE should be stated EXACTLY. PARTICULARS should be stated in full. Do not leave any blank space, or leave it empty, or insert "0". Exact statement of OCCUPATION is very important. All instructions on back of certificate.

1922