

13581

PLACE OF DEATH  
 County Mulheberg  
 Vol. Pat. Bleaton, Ky.  
 Inc. Town Bever  
 City \_\_\_\_\_ (No. \_\_\_\_\_ St., \_\_\_\_\_ Ward)

File No. \_\_\_\_\_  
 Registered No. 59

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

FULL NAME Jesse Baker

PERSONAL AND STATISTICAL PARTICULARS

SEX Male COLOR OR RACE Color SINGLE, MARRIED, WIDOWED, OR DIVORCED (Write the word) Widower

DATE OF BIRTH May 5th 1912  
 (Month) (Day) (Year)

AGE 69 or 70 yrs. If LESS than 1 day... hrs. or... min.?

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

BIRTHPLACE (State or country) Rockport, Ky.

PARENTS  
 10 NAME OF FATHER L. Jesse Baker  
 11 BIRTHPLACE OF FATHER (State or country) Lebanon Tenn  
 12 MAIDEN NAME OF MOTHER Maggie Jones  
 13 BIRTHPLACE OF MOTHER (State or country) Mobile Ala

THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE  
 (Informant) Jack Baker  
 (Address) Bleaton Ky.

Filed May 7, 1912 W. H. Moore REGISTRAR

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH May 6, 1912  
 (Month) (Day) (Year)

HEREBY CERTIFY that I attended deceased from Feb 20, 1912, to May 5, 1912, that I last saw him alive on May 5, 1912, and that death occurred, on the date stated above, at 1 P.M.

The CAUSE OF DEATH\* was as follows:  
Heart trouble (Mitral leaf) + Complication of old age

Contributory Self exposure + Drink  
 (SECONDARY) (Duration) yrs. mos. ds. 3 ds. 4  
 (Signed) Dr. Wilson W. H., M. D.  
May 6, 1912 (Address) Bleaton

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

(18) LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRANSIENTS OR RECENT RESIDENTS)  
 At place of death 8 yrs. 4 mos. 2 ds. In the State 69 yrs. 3 mos. 20 ds.  
 Where was disease contracted, if not at place of death? River  
 Former or usual residence Bever, Ky.

PLACE OF BURIAL OR REMOVAL Mulheberg DATE OF BURIAL 5-7, 1912

UNDERTAKER J. L. Thomas ADDRESS Bleaton

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