

Commonwealth of Kentucky

STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

CERTIFICATE OF DEATH

PLACE OF DEATH

County McCracken

Vol. No. Redland, Ky

Inc. Town Redland, Ky

City 4. Miller, near Paducah, Ky

Registration Dist. 721

File No. 10420

Primary registration district No. 26762

Registered No. 19

FULL NAME J. J. Banfield

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

PERSONAL AND STATISTICAL PARTICULARS

SEX M COLOR OR RACE W SINGLE, MARRIED, WIDOWED, OR DIVORCED (Write the word) Widowed

DATE OF BIRTH Apr 1, 1857
(Month) (Day) (Year)

AGE 61 yrs. 4 mos. 6 ds. If LESS than 1 day... hrs. or... min.?

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

BIRTHPLACE (State or county) Russell, Ky.

10 NAME OF FATHER Reuben, Banfield

11 BIRTHPLACE OF FATHER (State or county) Russell, Ky.

12 MAIDEN NAME OF MOTHER Jane, Wick

13 BIRTHPLACE OF MOTHER (State or county) Hoffman Co.

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE
(Informant) George, Banfield
(Address) Cypress, Ind.

15 Filed 4/8, 1911

REGISTRAR

MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH Apr 8, 1911
(Month) (Day) (Year)

17 I HEREBY CERTIFY, That I attended deceased from Apr 1, 1911, to Apr 7, 1911, that I last saw him alive on " " 1911, and that death occurred, on the date stated above, at 2 a.m.
The CAUSE OF DEATH* was as follows: 4/7/11

Pneumonia
(Duration) 14 yrs. 14 mos. 6 ds.

Contributory (SECONDARY) (Duration) 4/8 yrs. 1 mos. 0 ds.

(Signed) B. A. Washburn, M. D.
4/8, 1911 (Address) Paducah

*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 0 yrs. 0 mos. 0 ds. In the State 0 yrs. 0 mos. 0 ds.
Where was disease contracted, if not at place of death?
Former or usual residence

19 PLACE OF BURIAL OR REMOVAL Calvert, City, Ky DATE OF BURIAL 4/8, 1911

20 UNDERTAKER James & Popper, Paducah ADDRESS Paducah

B. B.—Every item of information should be carefully supplied. AGE should be stated EXACTLY. REGISTRAR 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.

WRITE PLAINLY, WITH SPARING INK—THIS IS A PERMANENT RECORD

FOR BINDING