

State Board of Health  
BUREAU OF VITAL STATISTICS

CERTIFICATE OF DEATH

File No.....

Registered No. 84

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

## 1 PLACE OF DEATH

County MitchellVet. Post. Central

Inc. Town.....

City City KyRegistration District No. 1087Primary Registration District No. 2435

(No. St., Ward)

## 2 FULL NAME

Robert Crawford

## PERSONAL AND STATISTICAL PARTICULARS

3 SEX Male 4 COLOR OR RACE Col 5 Single Married Widowed or Divorced (Write the word)6 DATE OF BIRTH Dec 16 - 24  
(Month) (Day) (Year)7 AGE 2 yrs. mos. 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).....

## PARENTS

10 NAME OF FATHER Roosevelt Crawford11 BIRTHPLACE OF FATHER (State or country) Ky12 MAIDEN NAME OF MOTHER Laura Hall13 BIRTHPLACE OF MOTHER (State or country) Ky

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant) Robert Crawford(Address) Central City Ky15 Filed 12/20, 1924 a.d. Robert Crawford Registrar

## MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH Dec 18, 1924  
(Month) (Day) (Year)17 I HEREBY CERTIFY, That I attended deceased from Dec 16, 1924, to Dec 15, 1924, that I last saw him alive on Dec 15, 1924, and that death occurred on the date stated above at 8 P.M.

The CAUSE OF DEATH\* was as follows:

Influenza

(Duration) yrs. mos. ds.

Contributory (Secondary) Col

(Duration) yrs. mos. ds.

(Signed) R. B. Bailey M. D. Dec 18, 1924 (Address) Central City Ky

\*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 in the of death yrs. mos. ds. State yrs. mos. ds.

Where was disease contracted,

if not at place of death?

Former or usual residence .....

19 PLACE OF BURIAL OR REMOVAL DATE OF BURIAL Crawford, Ky Dec 19, 192420 UNDERTAKER ADDRESS John G. Gump, Central City Ky