

COMMONWEALTH OF KENTUCKY
State Board of Health
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

19199

1 PLACE OF DEATH

County MuhlenbergVol. Pct. H. Boggess

Inc. Town.....

City.....

Registration District No. 1093Primary Registration District No. 6833

(No. St., Ward)

File No.

Registered No.

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

2 FULL NAME Mrs. Bethe Downer

PERSONAL AND STATISTICAL PARTICULARS

3 SEX Female 4 COLOR OR RACE Col. 5 Single Married Married married
Widowed or Divorced
(Write the word)6 DATE OF BIRTH 1.
(Month) (Day) (Year)7 AGE 26 yrs. mos. ds. IF LESS than 1 day hrs. or min?8 OCCUPATION
(a) Trade, profession or particular kind of work. House Keeper
(b) General nature of industry, business or establishment in which employed (or employer).9 BIRTHPLACE (State or country) Greenville Ky.10 NAME OF FATHER Jordan Sweet11 BIRTHPLACE OF FATHER (State or country) Muhlenberg12 MAIDEN NAME OF MOTHER Tobitha Lewis13 BIRTHPLACE OF MOTHER (State or country) Muhlenberg

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant) Jordan Sweet(Address) Greenville Ky.15 Filed 8/23/24 B. Wickliffe Registrar

MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH Aug. 21, 1924
(Month) (Day) (Year)17 I HEREBY CERTIFY, That I attended deceased from Aug. 18, 1924, to Aug. 21, 1924, that I last saw her alive on Aug. 20, 1924, and that death occurred on the date stated above at 7 a.m.The CAUSE OF DEATH* was as follows:
Cancer of the Stomach(Duration) yrs. 3 mos. ds.Contributory (Secondary) Gastritis of the Stomach (Duration) yrs. mos. ds.(Signed) Dr. R. T. Bailey, M. D. Aug. 22, 1924 (Address) Castroville Ky.

*State the Disease Causing Death, or, in deaths from Violent Cause 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 yrs. mos. ds. In the State yrs. mos. ds.

Where was disease contracted, if not at place of death?

Former or usual residence

19 PLACE OF BURIAL OR REMOVAL 2027 End. DATE OF BURIAL Aug. 22, 192420 UNDERTAKER Gas E. George ADDRESS Castroville Ky.