

STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

## CERTIFICATE OF DEATH

PLACE OF DEATH  
 County of Muhlenberg  
 Vol. No. 134 Registrar District No. 7+257094  
 Inc. Town Chatham Primary Registration District No. 6844  
 City (No. \_\_\_\_\_) St. \_\_\_\_\_ Ward \_\_\_\_\_  
 FULL NAME Follie B. Fortney

File No. \_\_\_\_\_

Registered No. \_\_\_\_\_

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

## PERSONAL AND STATISTICAL PARTICULARS

1 SEX Male  
 2 COLOR OR RACE White  
 3 SINGLE MARRIED WIDOWED OR DIVORCED (Write the word) Married  
 4 DATE OF BIRTH March 18, 1877  
 7 AGE 47 yrs. 2 mos. 12 ds. IF LESS than 1 day... hrs. 0 min.  
 8 OCCUPATION (a) Trade, profession, or particular kind of work... Housekeeper  
 (b) General nature of industry, business or establishment in which employed (or employer)

9 BIRTHPLACE (State or country) Ky.10 NAME OF FATHER George Coff11 BIRTHPLACE OF FATHER (State or country) Ky.12 MAIDEN NAME OF MOTHER Mary Mylen13 BIRTHPLACE OF MOTHER (State or country) Ky.

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) Wayne Fortney  
 (Address) Chatham Ky

15 Sept 28 1924  
 Filed \_\_\_\_\_ 1924 by J. Warren REGISTRAR

## MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH Aug 30, 1924  
 (Month) (Day) (Year)

I HEREBY CERTIFY, That I attended deceased from April 10, 1924 to Aug 30, 1924 that I first saw her alive on Aug 22, 1924 and that death occurred on the date stated above at 6 a.m. The CAUSE OF DEATH\* was as follows:  
Tuberculosis

(Duration) 4 yrs. 4 mos. 8 ds.

Contributory (SECONDARY) (Duration) 1 yrs. mos. ds.

(Signed) L. Roy Myler, M. D.  
Aug 30, 1924 (Address) Chatham Ky

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

15 LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRANSIENTS OR RECENT RESIDENTS)

At place 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 Fortney Ky

DATE OF BURIAL Aug 31, 1924

20 UNDERTAKER J. Thomas

ADDRESS \_\_\_\_\_