

CERTIFICATE OF DEATH

PLACE OF DEATH

County MitchellVol. Pat. Summers #14

Ine. Town.....

City..... (No..... St.,..... Ward)

Registration District No. 7134

Primary Registration Dist. No.....

File No. 25969Registered No. 26

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

FULL NAME Albert Eipson

PERSONAL AND STATISTICAL PARTICULARS

1 SEX Male 4 COLOR OR RACE White 5 SINGLE, MARRIED, WIDOWED, OR DIVORCED (Write the word) single6 DATE OF BIRTH Jan 6, 1903
(Month) (Day) (Year)7 AGE 9 yrs. 9 mos. 11 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) Mitchell Co Ky10 NAME OF FATHER William Eipson11 BIRTHPLACE OF FATHER (State or country) Tenn12 MAIDEN NAME OF MOTHER Florida Jung13 BIRTHPLACE OF MOTHER (State or country) Ky14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE
(Informant) James Bates
(Address) Essesville Ky15 Filed 10/18/12, 1912... S. A. Stewart
REGISTRAR

MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH 10 17, 1912
(Month) (Day) (Year)17 I HEREBY CERTIFY, That I attended deceased from Oct 12, 1912, to Oct 17, 1912,that I last saw him alive on Oct 17, 1912, and that death occurred, on the date stated above, at 5 P.m.

The CAUSE OF DEATH* was as follows:

cardiac

(Duration)..... yrs..... mos..... ds.

Contributory (SECONDARY).....

(Duration)..... yrs..... mos..... ds.

(Signed) T. J. Edge, M. D.
10/18/12 (Address) Graham 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 of death..... 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 Pleasant Hill cemetery DATE OF BURIAL 10/18, 191220 UNDERTAKER Shannon Merc Co DeJoy Ky ADDRESS.....

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