

Commonwealth of Kentucky
STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

PLACE OF DEATH
County Muhlenberg
Vol. Pat. Summerville
Inc. Town _____
City _____ (No. _____ St. _____ Ward _____)

7134

File No. 20746

Registered No. 16

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

FULL NAME Barnie Ray Phillips

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL CERTIFICATE OF DEATH

SEX Male COLOR OR RACE White SINGLE, MARRIED, WIDOWED, OR DIVORCED Infant
(Write the word)

16 DATE OF DEATH Aug 22, 1912
(Month) (Day) (Year)

17 DATE OF BIRTH July 4, 1912
(Month) (Day) (Year)

17 I HEREBY CERTIFY, That I attended deceased from Aug 1st, 1912 to Aug 22, 1912 that I last saw him alive on Aug 20, 1912 and that death occurred, on the date stated above, at _____ m.

18 AGE 1. mo. 18. ds. If LESS than 1 day... hrs. or... min.?

The CAUSE OF DEATH* was as follows:
Tuberculosis

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

20 BIRTHPLACE (State or country) Muhlenberg Co

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

21 NAME OF FATHER Joy Phillips

Contributory (Secondary) _____ (Duration) _____ yrs. _____ mos. _____ ds.

22 BIRTHPLACE OF FATHER (State or country) Muhlenberg Co

(Signed) _____, M. D.
Aug 22 1912 (Address) Dr. H. Moore

23 MAIDEN NAME OF MOTHER Virgil Richard

*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENCE CAUSING, state (1) MEANS OF INJURY; and (2) whether ACCIDENTAL, SUICIDAL OR HOMICIDAL

24 BIRTHPLACE OF MOTHER (State or country) Sacramento Calif

(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 _____

25 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE
(Signature) Peter Richard
(Address) _____

19 PLACE OF BURIAL OR REMOVAL Assis creek cemetery DATE OF BURIAL Aug. 22, 1912

26 REGISTRATION Aug 22, 1912

20 UNDERTAKER J. G. Holmes ADDRESS Sacramento Ky