

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

16275

1 PLACE OF DEATH

County Mullensburg

Vol. No. W. Rogers

Inc. Town Kennville Ky

City Kennville Ky

3 FULL NAME

Lucy Workliff

Registration District No. 821

Primary Registration District No. 7133

File No.

Registered No.

(If death occurred in a hospital or institution, give the name of the hospital or institution.)

PERSONAL AND STATISTICAL PARTICULARS

2 SEX Female 4 COLOR OR RACE Leah 5 SINGLE, MARRIED, WIDOWED, OR DIVORCED House Keeping

6 DATE OF BIRTH 25 July 1859

7 AGE 76 yrs. 11 mos. 0 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) House Keeping

9 BIRTHPLACE (State or country) Mullensburg

10 NAME OF FATHER John White

11 BIRTHPLACE OF FATHER (State or country) Mullensburg

12 MAIDEN NAME OF MOTHER Lucinda White

13 BIRTHPLACE OF MOTHER (State or country) W. Va.

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) Will Pittman

(Address)

15 Filed 6/24 1916 by L. B. Workliff REGISTER

MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH June 24 1916

17 I HEREBY CERTIFY, That I attended deceased from June 18, 1916 to June 18, 1916, that I last saw him alive on June 18, 1916, and that death occurred on the date stated above at 7:30 p.m. The CAUSE OF DEATH was as follows: Chronic Disease

Contributory (SECONDARY)

(Signed) J. P. Moore, M. D. June 24, 1916 (Address) Green Valley

*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. State... yrs. ... mos. ... ds.

Where was disease contracted, if not at place of death? Former or usual residence

19 PLACE OF BURIAL OR REMOVAL West End Cemetery DATE OF BURIAL June 24, 1916

20 UNDERTAKER Geo. B. George ADDRESS Kennville Ky

WRITE PLAINLY IN INK. THIS IS A PERMANENT RECORD. Every item of information should be carefully reported. All deaths should be reported immediately. Incomplete reports cause delay in the issuance of death certificates. The cause of death should be stated in plain terms, so that it may be properly classified. Exact statement of occupation is very important. See instructions on back of certificate.