

Commonwealth of Kentucky
 DEPARTMENT OF HEALTH
 BUREAU OF VITAL STATISTICS
 CERTIFICATE OF DEATH

9099

1 PLACE OF DEATH

Middlesboro

County

Vet. Post. Bush Creek

Inc. Town #22

City

Registration District No. 879

Primary Registration District No. 8421

(No.)

St., Ward

File No.

Registered No. 10

If death occurred in a
institution,
indicated by
initials of
institution

2 FULL NAME

Elizabeth Ann Hyatt

PERSONAL AND STATISTICAL PARTICULARS

 3 SEX Female
 4 COLOR OR RACE White
 5 SINGLE MARRIED, WIDOWED OR DIVORCED (Write the word) Widowed

6 DATE OF BIRTH

Nov 27, 1849
(Month) (Day) (Year)

7 AGE

67 yrs. 2 mos. 27 ds.

IF LESS than
1 day ... hrs.
or ... min.?

8 OCCUPATION

 (a) Trade, Profession, or
 particular kind of work. Housewife
 (b) General nature of industry
 business or establishment in
 which employed (or employer)
9 BIRTHPLACE
(State or country)

Middlesboro Co. Kentucky

10 NAME OF
FATHER

Joseph Mathis

11 BIRTHPLACE
OF FATHER
(State or country)

Not known

12 MAIDEN NAME
OF MOTHER

Joanna Rice

13 BIRTHPLACE
OF MOTHER
(State or country)

Tennessee

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

Mrs Souell

(Informant)

(Address) Greenview Ky

15

Filed Apr 10, 1917

J. R. Kimmel

REGISTRAR

MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH

Feb 28, 1917
(Month) (Day) (Year)

17 I HEREBY CERTIFY, That I attended deceased

from Feb 17, 1917, to Feb 28, 1917,

that I last saw her alive on Feb 23, 1917,

and that death occurred on the date stated above
at 4 P.M. The CAUSE OF DEATH* was as follows:

Solar pneumonia

(Duration) ... yrs. ... mos. 11 ds.

Contributory
(SECONDARY)

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

(Signed)

Robert D. Morris, M. D.

Feb 23, 1917 (Address) Bush Creek Ky

*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENCE 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

Pleasant Hill

DATE OF BURIAL

Feb 24, 1917

20 UNDERTAKER

L. H. Stuart

ADDRESS

Bush Creek