

Dr. Joseph N. Jones
Morningside Dr
No 64063

Copy # 49-446-3 - Second Add. to Oak Meadow
all lot 5!

0326

Registration District No. 11 ARKANSAS STATE BOARD OF HEALTH
Bureau of Vital Statistics
Certificate of Death 59 1537A

Primary Registration District No. 2117

1. PLACE OF DEATH & COUNTY Chicot 1959

2. USUAL RESIDENCE (State, Territory, Possession, or Country) Ill Cook

3. CITY, TOWN, OR LOCATION Chicago

4. PLACE OF DEATH (If not in hospital, also street address)

5. IN RESIDENCE (WITHIN CITY LIMITS) YES NO

6. IN RESIDENCE (WITHIN CITY LIMITS) YES NO

7. IN RESIDENCE ON A FARM YES NO

8. SEX Female 9. RACE Col. 10. MARRIAGE Married Never Married Widowed Divorced

11. DATE OF BIRTH Nov. 6, 1895 12. DATE OF DEATH 5/7/59

13. NAME OF DECEASED Clara B. Jones Hamilton 14. CITY OF DEATH Chicago

15. NAME OF DECEASED Allen Smith 16. NAME OF DECEASED Unknown

17. NAME OF DECEASED Christie Howard 18. NAME OF DECEASED Eudora

19. NAME OF DECEASED ... 20. NAME OF DECEASED ...

21. I attended the deceased from Feb 15, 1959 to May 7, 1959 and last saw the deceased on Mar 14, 1959

22. SIGNATURE ... 23. SIGNATURE ... 24. SIGNATURE ...

25. PART OF COUNTY OF CERTAINTY ... 26. LOCATION (City, town, or county) Chicot Cook

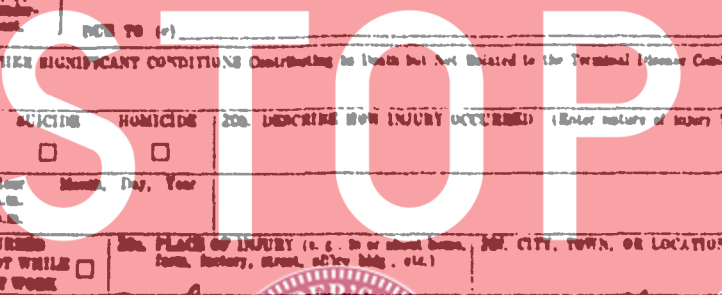
27. FUNERAL DIRECTOR L.C. Bethune ADDRESS ... 28. DATE DEATH BY LOCAL BOARD 5-17-59 29. REGISTRAR'S SIGNATURE ...

Form Vb-1 (A)-Rev. 6-54-55-12187-C-Mch. 1956 REVISION OF STANDARD CERTIFICATE Mergis Reserved for Stating

WRITE PLAINLY WITH UNFADING BLACK INK - THIS IS A PERMANENT RECORD

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STATE OF ARKANSAS
FEB 2 1959
RECORDED
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THIS IS TO CERTIFY, That the above is an exact reproduction of the original record on file in this office and of which I am legal custodian. Witness my hand and seal of the Arkansas Department of Health at Little Rock, Arkansas. (Copy not legal if it does not have raised seal).

Henry A. Robinson Jr.
State Registrar

Date
JAN -4 1989

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