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Kentucky

Registrar of Vital Statistics

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Edwin J Brown
8585 Brady St
745
Mesa 76410



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FORM V.S. NO. 1-A
REV. 1/68

COMMONWEALTH OF KENTUCKY
DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS
CERTIFICATE OF DEATH

FILE NO. 116 73 23859

REGISTRAR'S NO. 35

Registration District No. 930 Primary Registration District No. 6857

1. DECEASED—NAME Henry Thomas Matthews		2. SEX Male		3. DATE OF DEATH (MONTH, DAY, YEAR) 9-1-73	
4. RACE (WHITE, NEGRO, AMERICAN INDIAN, ETC.) White		5. AGE—LAST BIRTHDAY (YEARS, MONTHS, DAYS) 74		6. DATE OF BIRTH (MONTH, DAY, YEAR) 11-13-1898	
7a. CITY, TOWN, OR LOCATION OF DEATH Kuttawa		7b. INSIDE CITY LIMITS (SPECIFY YES OR NO) no		7d. HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) Chestnut Oak Road, Kuttawa, Ky.	
8. STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY) Ky.		9. CITIZEN OF WHAT COUNTRY USA		10. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED, OR SINGLE Married	
11. SOCIAL SECURITY NUMBER 306-10-9672		12. USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF KIND OF BUSINESS OR INDUSTRY WORKING IN LAST YEAR) Retired Standard Oil		13. SURVIVING SPOUSE (IF WIFE, GIVE MAIDEN NAME) Standard Oil Co.	
14a. RESIDENCE—STATE Ky.		14b. COUNTY Lyon		14c. CITY, TOWN, OR LOCATION Kuttawa	
15. FATHER—NAME Veal Matthews		16. MOTHER—MAIDEN NAME Ella Wright		17. MARRIAGE LICENSE NO. None	
17a. INFORMANT—NAME Robert Matthews		17b. MAILING ADDRESS Hammond, Ind.		18. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH 26. AM '73	
18. PART I. DEATH WAS CAUSED BY: 1299 (a) Probable Heart Attack		(b) IMMEDIATE CAUSE		(c) DUE TO, OR AS A CONSEQUENCE OF	
19. PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a) Overweight and Old age		20. AUTOPSY (YES OR NO) no		21. IF YES WERE FINDINGS CONSIDERED IN DETERMINING CAUSE OF DEATH	
22a. ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY) None		22b. DATE OF INJURY (MONTH, DAY, YEAR) None		22c. HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 18)	
23a. INJURY AT WORK (SPECIFY YES OR NO) None		23b. PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, LOCATION (OFFICE BLDG., ETC. (SPECIFY)) None		23c. STREET OR R.F.D. NO., CITY OR TOWN, STATE	
24a. CERTIFICATION—PHYSICIAN: I ATTENDED THE DECEASED FROM None		24b. MONTH DAY YEAR None		24c. I DID/DID NOT VIEW THE BODY AFTER DEATH None	
25a. CERTIFICATION—MEDICAL EXAMINER OR CORONER: ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR THE INVESTIGATION, IN MY OPINION, DEATH OCCURRED ON THE DATE AND DUE TO THE CAUSE(S) STATED. None		25b. HOUR OF DEATH 9:00 AM		25c. THE DECEASED WAS PRONOUNCED DEAD None	
26a. CERTIFIER—NAME (TYPE OR PRINT) Bill Fryer		26b. SIGNATURE Bill Fryer		26c. DEGREE OR TITLE Coroner	
27a. MAILING ADDRESS—CERTIFIER None		27b. STREET OR R.F.D. NO., CITY OR TOWN, STATE Kuttawa, Ky.		27c. DATE SIGNED (MONTH, DAY, YEAR) 9-10-73	
28a. BURIAL, CREMATION, REMOVAL (SPECIFY) Burial		28b. CEMETERY OR CREMATORY—NAME Macedonia Cem		28c. LOCATION Caneville, Ky.	
29a. DATE (MONTH, DAY, YEAR) 9-11-73		29b. FUNERAL DIRECTOR—SIGNATURE Suzanne Devney		29c. ADDRESS (ZIP CODE) Box 485 Eddyville, Ky.	
30a. NAME OF EMBALMER Rowena Dunn		30b. LIC. NO. 2639		30c. REGISTRAR'S SIGNATURE Edwin J Brown	
31a. DATE RECEIVED BY LEGAL REGISTRAR 9-7-73		31b. SIGNATURE None		31c. DATE RECEIVED BY LEGAL REGISTRAR 9-7-73	

Key# 32-63-24 - LOT 25 BL-2 in BLACKMAN'S ADD. CITY OF HAMMOND.

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STATE OF KENTUCKY
LAKE COUNTY
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I, Robert N. Hurst III, State Registrar of Vital Statistics, hereby certify this to be a true and correct copy of the certificate of birth, death, marriage or divorce of the person therein named, and that the original certificate is registered under the file number shown. In testimony thereof I have hereunto subscribed my name and caused the official seal of the Office of Vital Statistics to be affixed at Frankfort, Kentucky, this 3rd day of Aug 1973.

Robert N. Hurst III
Robert N. Hurst III, State Registrar