

FORM U. S. NO. 101 (REV. 1-15-54)

CERTIFICATE OF DEATH

State of Illinois
Bureau of Vital Statistics

1. PLACE OF DEATH: City of Chicago Registration District No. 100 File No. 28130
County of Cook Precinct Registration District No. 271 Registration No. 37
City of Chicago State of Illinois

2. FULL NAME Lucetta Howard Brown

3. SEX Female 4. RACE OR RACES: White 5. MARRIAGE: Married

6. DATE OF BIRTH: Sept 1, 1911 7. AGE: 28 - 3 - 7

8. OCCUPATION: Housewife

9. BIRTHPLACE: Wash

10. NAME OF FATHER: Joseph Brown

11. BIRTHPLACE OF FATHER: Wash

12. MOTHER'S NAME OF MOTHER: Mary Howard

13. BIRTHPLACE OF MOTHER: Wash

14. THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE
Signature: [Signature] Location: Chicago, Ill.

15. DEED OF DEATH: Acc 16. SEXUAL IDENTITY: Female

17. CAUSE OF DEATH: Patented Poison

18. PLACE OF BURIAL: St. Michael's 19. NAME OF BURIAL PLACE: St. Michael's

20. SIGNATURE OF MINISTER: [Signature] 21. SIGNATURE OF CLERGYMAN: [Signature]