

1145

STANDARD CERTIFICATE OF DEATH  
DEPARTMENT OF COMMERCE  
BUREAU OF THE CENSUS

ARIZONA STATE DEPARTMENT OF HEALTH  
DIVISION OF VITAL STATISTICS

4056

1. Place of Death: (a) County Navajo (b) City or Town Snowflake (c) Location Snowflake (d) Length of Stay: In Hospital or Institution \_\_\_\_\_; In Community \_\_\_\_\_; In Arizona \_\_\_\_\_ (Specify whether years, months or days)

2. Usual Residence of Deceased: (a) State Arizona (b) County Navajo (c) City or Town Snowflake (d) Street No. \_\_\_\_\_ (Specify whether years, months or days)

3. (a) FULL NAME Gerald Flake Jarvis (b) If Veteran name war \_\_\_\_\_ (c) Citizen of foreign country (Yes or No) \_\_\_\_\_ (d) Social Security No. \_\_\_\_\_

4. Sex Male 5. Race White Indian  Negro  Oriental  6. (a) Single, married, widowed or divorced \_\_\_\_\_ (b) Name of husband or wife \_\_\_\_\_ (c) Age of husband or wife, if alive \_\_\_\_\_ yrs.

7. Birthdate of deceased April 22 48 (Month) (Day) (Year)

8. AGE: Years 6 Months 2 Days 14 If less than one day hrs. \_\_\_\_\_ min. \_\_\_\_\_

9. Birthplace Snowflake Arizona (City, town or county) (State or Country)

10. Usual Occupation \_\_\_\_\_

11. Industry or Business \_\_\_\_\_

12. Name Jesse Rufon Jarvis (City, town or county) (State of Country)

13. Birthplace Lakeside Arizona (City, town or county) (State of Country)

14. Maiden Name Rilla Johnson (City, town or county) (State or Country)

15. Birthplace Lakeside Ariz (City, town or county) (State or Country)

16. (a) Informant's own signature Rilla Johnson (b) Address Snowflake

17. (a) Burial, Cremation or Removal Removal (b) Place Lakeside (c) Date July 8 1948

18. (a) Embalmer's Signature \_\_\_\_\_ (b) Funeral Director Russell Lakes (c) Address Snowflake Ariz

19. (a) July 18 1948 (Date received Local Registrar) (b) Blanche Flake (Registrar's Signature)

20. DATE OF DEATH (Month, day and year) July 7 1948 TIME (Hour and minute) \_\_\_\_\_ M.

21. I hereby certify that I attended the deceased from July 4 1948 to July 7 1948 that I last saw him alive on July 7 1948 and that death occurred on the date and hour stated above.

Immediate cause of death Pneumo-pneumonia

Other conditions Congenital heart trouble (Include pregnancy within 3 months of death)

Major findings: \_\_\_\_\_ Of operations \_\_\_\_\_ Of autopsy \_\_\_\_\_

22. If death was due to external causes, fill in the following: (a) Accident, suicide or homicide (specify) \_\_\_\_\_ (b) Date of occurrence \_\_\_\_\_ (c) Where did injury occur? \_\_\_\_\_ (City or Town) \_\_\_\_\_ (County) \_\_\_\_\_ (State) \_\_\_\_\_ (d) Did injury occur in or about home, on farm, in industrial place, in public place? \_\_\_\_\_ (Specify type of place) \_\_\_\_\_ While at work? \_\_\_\_\_ (c) Means of injury \_\_\_\_\_

23. Signature J. N. Hayward Address Snowflake Date signed 7/19/48

DURATION 5 days

PHYSICIAN \_\_\_\_\_

Underline the cause to which death should be charged statistically