

WRITE PLAINLY. WITH UNFADING INK—THIS IS A PERMANENT RECORD.

N. B.—Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important. See instructions on back of certificate.

1 PLACE OF DEATH

STATE OF TENNESSEE

County Putnam

STATE BOARD OF HEALTH

Bureau of Vital Statistics

Civil Dist. 1

CERTIFICATE OF DEATH 1221

Village or

Registration District No. 721

File No.

City or

Primary Registration District No. 27201

Registered No. 15

2 FULL NAME Marta Elizabeth Chate

Ward

(If death occurred in a hospital or institution, give NAME instead of street and number.)

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL CERTIFICATE OF DEATH

3 SEX F 4 COLOR OR RACE W 5 MARRIAGE STATUS Married

16 DATE OF DEATH: May 11 1928
(Month) (Day) (Year)

6 DATE OF BIRTH (Month) (Day) (Year)

17 I HEREBY CERTIFY that I attended deceased from May 11 1928 to May 11 1928 that I last saw her alive on May 11 1928 and that death occurred on the date stated above at 6 A.M.

7 AGE abt 66 If DEAF, dumb, blind, or idiotic, state day, hrs. or min.

The CAUSE OF DEATH was as follows: Organic Heart Disease

8 OCCUPATION Housework

(Duration) yrs. mos. da.

9 BIRTHPLACE (State or country) Tenn

Contributory (accidents)

10 NAME OF FATHER Walter Davis

(Duration) yrs. mos. da.

11 BIRTHPLACE OF FATHER (State or country) Tenn

Signed Lex Dyert M.D.
May 11 1928 Address Cookeville

12 MAIDEN NAME OF MOTHER Pop. Phys.

* State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES, state (1) MANNER OF INJURY; and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.

13 BIRTHPLACE OF MOTHER (State or country) Tenn

18 LENGTH OF RESIDENCE (FOR HOSPITAL, INSTITUTION, TRANSIENTS, OR RECENT RESIDENTS)
At place of death yrs. mos. da. In the State yrs. mos. da.
Where was disease contracted?
If not at place of death?
Former or present residence?

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) Beal Chate

19 PLACE OF BURIAL OR REMOVAL: Putnam Cemetery DATE OF BURIAL 5/12/28

(Address) Coke

20 UNDERTAKER: James Whitton ADDRESS: City

18 PPd. Janis 4/25 Zelma Moon REGISTRAR