

MARGIN RESERVED FOR BINDER. WITH FADING INK—THIS IS A PERMANENT RECORD

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

County *White*

Civil Dist. *9*

OR Village *Cookeville #5*

OR City

(No. St. Ward)

STATE OF TENNESSEE

THE BOARD OF HEALTH

Bureau of Vital Statistics

CERTIFICATE OF DEATH

Registration District No. *744*

Primary Registration District No.

File No. *94*

Registered No. *5*

[If death occurred in a hospital or institution, give its NAME instead of street and number.]

2 FULL NAME *John W Goodwin*

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL CERTIFICATE OF DEATH

3 SEX

*Male*

4 COLOR OR RACE

*White*

5 SINGLE, MARRIED, WIDOWED, OR DIVORCED

*Married*

16 DATE OF DEATH

*July 11 1922*

6 DATE OF BIRTH

*Mar 16 1838*

7 AGE

*84 yrs 3 mos 75 ds*

8 OCCUPATION

*on Farm*

9 BIRTHPLACE

*Tennessee*

10 NAME OF FATHER

*John W Goodwin*

11 BIRTHPLACE OF FATHER

*Sc*

12 MAIDEN NAME OF MOTHER

*Mary Goodwin*

13 BIRTHPLACE OF MOTHER

*Sc*

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

*Monroe Seals*

*Springfield Tenn*

*July 14 1922*

*W. A. Bradley*

17 I HEREBY CERTIFY, That I attended deceased from *July 11 1922* to *July 11 1922* and that I last saw her alive on *July 11 1922* and that death occurred, on the date stated above, at *4 P.M.* The CAUSE OF DEATH was as follows:

*Cerebral Apoplexy*

Contributory [SECONDARY]

*Signed W. A. Bradley M. D. July 2 1922 Address Cookeville Tenn*

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

18 LENGTH OF RESIDENCE [FOR HOSPITALS, INSTITUTIONS, TRANSIENTS, OR RECENT RESIDENTS]

At place of death: yrs. mos. ds. State: yes. no. ds. Former or usual residence: *Sc*

19 PLACE OF BURIAL OR REMOVAL DATE OF BURIAL

*Goodwin Center 7/17 1922*

20 UNDERTAKER ADDRESS *W. A. Bradley*