

Henry Howard - s/o John Covey Howard & Mary Morris

March 1, 1931-4-31-34

COMMONWEALTH OF KENTUCKY
State Board of Health
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

3994

County Harlan File No. _____
 Reg. Dist. 8 Registration District No. 660 Registered No. 6
 Inc. Town Wallins Ky Primary Registration District No. 5546
 City _____ (No. _____ St. _____ Ward _____)
 (If death occurred in a hospital or institution, give its NAME instead of street and number)

2 FULL NAME Henry Howard
 (a) Residence, No. Wallins Ky St. _____ Ward _____
 (b) Place of birth _____ (State or country) _____
 Length of residence in city or town where death occurred yrs. mos. ds. (If foreign, give city or town and State or country)

| PERSONAL AND STATISTICAL PARTICULARS | | | MEDICAL CERTIFICATE OF DEATH | |
|--|-------------------------------------|--|---|---|
| 3 SEX <u>M</u> | 4 COLOR OR RACE <u>W. Am.</u> | 5 Single, Married, Widowed, or Divorced <u>Married</u> | 10 DATE OF DEATH <u>Feb 9 1931</u> | 11 I HEREBY CERTIFY that I attended deceased from <u>Sept 1 1930</u> to <u>Feb 9 1931</u> and that death occurred on the date stated above at <u>7:30</u> and that death occurred on the date stated above at <u>7:30</u> |
| 6 If married, widowed, or divorced HUSBAND or (or) WIFE of <u>Elizabeth Howard</u> | 8 DATE OF BIRTH <u>July 13 1858</u> | 7 AGE <u>72</u> yrs. <u>8</u> mos. <u>26</u> ds. | The CAUSE OF DEATH* was as follows: <u>Acute Myocardial Infarction</u> <u>+ Cardiac Renal Disease</u> <u>45</u> | |
| 9 OCCUPATION OF DECEASED (a) Trade, profession or particular kind of work <u>Farmer</u> (b) General nature of industry, business or establishment in which employed (or employer) | | | Contributory (Secondary) <u>Essentially 100%</u> (Duration) <u>2</u> yrs. <u>0</u> mos. <u>0</u> ds. | |
| 10 BIRTHPLACE (city or town) <u>Harlan Ky</u> (State or country) | | | 12 WICKIE WAS DISEASE CONTRACTED If not at place of death? <u>Wallins Ky</u> | |
| PARENTS 11 NAME OF FATHER <u>John C. Howard</u> 12 BIRTHPLACE OF FATHER (city or town) <u>Wallins Ky</u> (State or country) <u>Harlan Ky</u> 13 MOTHER NAME OF MOTHER <u>Polly Morris</u> 14 BIRTHPLACE OF MOTHER (city or town) <u>Wallins Ky</u> (State or country) <u>Harlan Ky</u> | | | 13 Did an operation precede death? <u>No</u> Date of _____ Was there an autopsy? <u>No</u> What test confirmed diagnosis? <u>Physical Exam</u> (Signed) <u>W. L. Langhorne</u> M. D. <u>Feb 10 1931</u> (Address) <u>Wallins Ky</u> | |
| 15 (Informant) <u>Elizabeth Howard</u> (Address) <u>Wallins Ky</u> | | | *Since the Disease Causing Death, or, in deaths from Violent Causes, state (1) Means and nature of Injury; and (2) whether Accidental, Suicidal or Homicidal. (See reverse side for additional space.) | |
| 16 Filed <u>Feb 16 1931</u> <u>Better Withard</u> Registrar | | | 17 PLACE OF BURIAL OR REMOVAL <u>Wallins Ky</u> DATE OF BURIAL <u>Feb 11 1931</u> (UNDERTAKER) <u>J. L. Lawson</u> ADDRESS <u>Wallins Ky</u> | |

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.

Date of birth differs from date on headstone (July 12, 1957). In addition, based on the age on the death certificate, his birth date would have been June 14, 1858 (not July 13, 1859 as listed). The year on the headstone matches up with census records and is considered most accurate so headstone date is being used instead of death certificate.