

Registrar of Vital Statistics Certified Copy



THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND - NOT A WHITE BACKGROUND

DELAY COMMONWEALTH OF KENTUCKY 5 P
53-23800

FEDERAL SECURITY AGENCY
U. S. PUBLIC HEALTH SERVICE
NATIONAL OFFICE VITAL STATISTICS

BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

Registration District No. 1301 Primary Registration District No. 2500

1. PLACE OF DEATH a. COUNTY <u>Rockcastle</u>		2. USUAL RESIDENCE (When deceased lived, if institution, residence before admission) a. STATE <u>Kentucky</u> b. COUNTY <u>Rockcastle</u>	
b. CITY (If multiple corporate limits, write SERIAL and give SERIAL OR TOWN <u>Mt. Vernon</u>)		c. LENGTH OF STAY (in this place)	
d. FULL NAME OF (If not in hospital or institution, give street address or institution)		4. CITY (If multiple corporate limits, write SERIAL and give SERIAL OR TOWN <u>Mt. Vernon</u>)	
3. NAME OF DECEASED a. (First) <u>John</u> b. (Middle) <u>Cook</u> c. (Last) <u>Taylor</u>		4. DATE OF DEATH (Month) (Day) (Year) <u>9-7-1953</u>	
5. SEX M. <input checked="" type="checkbox"/> W. <input type="checkbox"/>	6. COLOR OR RACE W. <input type="checkbox"/> N. <input type="checkbox"/> O. <input type="checkbox"/>	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) <u>Married</u>	8. DATE OF BIRTH <u>Dec. 24, 1863</u>
9. USUAL OCCUPATION (Give kind of work done during last 12 months, give 2 initials) <u>Electrician</u>		10. KIND OF BUSINESS OR INDUSTRY <u>30</u>	11. BIRTHPLACE (State or foreign country) <u>Rockcastle Co. Kentucky</u>
12. FATHER'S NAME <u>James Taylor</u>		13. MOTHER'S MAIDEN NAME <u>Margie Ramsey</u>	
14. WAS DECEASED EVER IN U. S. ARMED FORCES? (If yes, give year or dates of service) <u>None</u>		15. SOCIAL SECURITY NO. <u>None</u>	17. INFORMANT <u>Mrs. John Taylor</u>
18. CAUSE OF DEATH (How and why the cause for the (1), (2), and (3) is reached)		MEDICAL CERTIFICATION	
19. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH (a) <u>ursemia</u>		INTERVAL BETWEEN ONSET AND DEATH <u>3 days</u>	
ANTECEDENT CAUSE (b) <u>nephritis</u>		DUE TO (c) <u>6 mos</u>	
*This does not mean the mode of death, such as heart failure, apoplexy, etc. It merely the disease, injury, or complication which caused death.		DUE TO (d) _____	
20. OTHER SIGNIFICANT CONDITIONS (Conditions contributing to the death but not related to the disease or condition causing death)		21. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
22. MAJOR FINDINGS OF OPERATION <u>593X-109-21</u>		23. DATE OF OPERATION _____	
24. ACCIDENT (Specify) _____		25. PLACE OF INJURY (e.g., in or about home, farm, factory, store, other building)	
26. TIME (Month) (Day) (Year) OF INJURY _____		27. INJURY OCCURRED WHILE AT <input type="checkbox"/> WORK <input type="checkbox"/> AT HOME <input type="checkbox"/>	
28. HOW DID INJURY OCCUR? _____		29. DATE SIGNED <u>Sept 11-53</u>	
30. I hereby certify that I attended the deceased from <u>Mar 10-1952</u> to <u>Sept 7-1953</u> , that I last saw the deceased alive on <u>Sept 7-1953</u> , and that death occurred at <u>11:25 P.M.</u> from the causes and on the date stated above.		31. SIGNATURE <u>J.P. Cunningham M.D.</u>	
32. DATE SIGNED <u>9-9-53</u>		33. ADDRESS <u>Mt. Vernon, Ky.</u>	
34. NAME OF FUNERAL HOME <u>Funeral</u>		35. NAME OF MINISTER OR CREMATOR <u>Elwood</u>	
36. DATE RECEIVED BY LOCAL REG. <u>9/29/53</u>		37. REGISTER'S SIGNATURE <u>[Signature]</u>	
38. FUNERAL DISPOSITION <u>W.H. Coy</u>		39. ADDRESS <u>Mt. Vernon, Ky.</u>	

THE BACK OF THIS DOCUMENT CONTAINS AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

I, Sandra J. Davis, State Registrar of Vital Statistics, hereby certify this to be a true and correct copy of the certificate of birth, death, marriage or divorce of the person therein named, and that the original certificate is registered under the file number shown. In testimony thereof I have hereunto subscribed my name and placed the official seal of the Office of Vital Statistics to be affixed at Frankfort, Kentucky this 17 day of March, 2000

Sandra J. Davis
Sandra J. Davis, State Registrar

John Cook Taylor

Son of James F. Taylor & Margaret Ramsey

Husband of (1) Sarah A. "Sally" Ramsey; (2) Margaret "Fannie Warren"; (3) Emma Jane Owens