

FEB 12 1968

NORTH CAROLINA STATE BOARD OF HEALTH
OFFICE OF VITAL STATISTICS
CERTIFICATE OF DEATH

1148

REGISTRATION DISTRICT NO. 32-95

LOCAL NO. 44

TYPE, OR PRINT IN
PERMANENT
BLACK INK

NAME OF DECEASED Charlotte Knowles Dunn DATE OF DEATH Jan. 9, 1968

1. Charlotte Knowles Dunn 2. Jan. 9, 1968

SEX Female COLOR OR RACE White STATE OF BIRTH North Carolina DATE OF BIRTH 10-7-19 AGE 48

PLACE OF DEATH COUNTY Durham CITY OR TOWN Durham USUAL RESIDENCE STATE North Carolina COUNTY Lenoir

NAME OF HOSPITAL OR INSTITUTION Duke Hospital INSIDE CITY LIMITS yes CITY OR TOWN Kinston

MARRIED, NEVER MARRIED, WIDOWED, DIVORCED, SPECIFY married SURVIVING SPOUSE Howell/Dunn STREET ADDRESS OR R.F.D. No. 309 Stoughs Alley INSIDE CITY LIMITS Yes

CITIZEN OF WHAT COUNTRY USA SOCIAL SECURITY NUMBER Not Know USUAL OCCUPATION Housewife (Homemaker) HOME OF BUSINESS OR INDUSTRY Home

FATHER'S NAME George Knowles MOTHER'S MARDEN NAME Lodie Sandlin

INFORMANT'S NAME AND ADDRESS Howell U. Dunn, 309 Stoughs Alley, Kinston, N.C.

PART I DEATH CAUSED BY: (WRITE ONLY ONE CAUSE PER LINE FOR NO. 18, 19, 20)

18. IMMEDIATE CAUSE: Cardiac respiratory failure
19. DUE TO OR AS A CONSEQUENCE OF: Metastatic Tumor - unknown primary
20. ONE TO OR AS A CONSEQUENCE OF: Pneumonia

PART II OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I

19a. ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED SPECIFY

20a. TIME OF INJURY MONTH DAY YEAR HOUR INJURY AT WORK PLACE OF INJURY CITY OR R.F.D. COUNTY STATE

CERTIFICATION—PHYSICIAN: APPROVES THE DECEASED FROM 1-4-68 TO 1-9-68 AND LAST SAW HIM/LER ALIVE ON 1-9-68

CERTIFICATION—MEDICAL EXAMINER OR ACTING MEDICAL EXAMINER: ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR AUTOPSY, IN MY OPINION DEATH WAS DUE TO THE

21. OCCURRED AT 4:10 am ON THE DATE STATED ABOVE, AND IN MY OPINION, FROM THE CAUSES STATED. SIGNATURE OF CERTIFIER Byron D. McLoes DATE SIGNED 1-12-68 ADDRESS Duke Hospital, Durham, N. C.

22. CAUSES STATED ABOVE, THE DECEASED WAS PREVIOUSLY DEAD AT

23a. Burial DATE Jan. 14, 1968 NAME OF CEMETERY OR CREMATORY Turkey Cemetery LOCATION Turkey, North Carolina

23b. FURNERAL HOME Edwards Funeral Home, Inc., Box 488, Kinston, N.C. 28501 SIGNATURE OF FURNERAL DIRECTOR F. Edwards LICENSE NO.

24. DATE RECD BY LOCAL REG. 25. SIGNATURE OF REGISTRAR 26. SIGNATURE OF EMBALEMER IF EMBALED

27. JAN 16 1968 28. Dr. Cedar McLoes

STATE BOARD
OF HEALTH
COPY

1990

CERTIFIED

1-9-68

FORM 8
REV. 1-66
1-68-1-100a