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CERTIFICATE OF DEATH

STATE
FILE NO.REGISTRAR'S
NUMBER

DATE OF DEATH - MONTH DAY YEAR

24 HOUR

1. NAME OF DECEASED - FIRST NAME

10. LAST NAME

ROBERT

DRUMMOND

OCT. 19. 1950

6 AM

2. SEX

Male

4. COLOR OR RACE

White

5. DATE OF BIRTH

May 17, 1885

65 YEARS

7. AGE LAST BIRTHDAY

10. CITIZEN OF WHAT COUNTRY?

United States

3. MARITAL STATUS

Married

8. KIND OF BUSINESS OR INDUSTRY

Aviation

9. BIRTHPLACE (COUNTRY)

Belfast, Ireland

11. NAME AND BIRTHPLACE OF FATHER

Elizabeth Jamieson

12. MOTHER'S NAME AND BIRTHPLACE

Norine Drummond

13. WAS DECEASED EVER IN U.S. ARMED FORCES?

None

14. SOCIAL SECURITY NUMBER

3 yrs.

15. LENGTH OF STAY IN THIS PLACE

Riverside

16. CITY OR TOWN

Beaumont

17. STATE

Calif.

18. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH

Carcinoma of Gall Bladder

19. ANTECEDENT CAUSES

Obstructive Jaundice.

20. MAJOR FINDINGS OF OPERATION

21. AUTOPSY

22. PLACE OF INJURY

23. HOW DID INJURY OCCUR?

24. DATE

25. SIGNATURE

26. DATE

27. DATE RECEIVED BY LOCAL REGISTRAR

28. SIGNATURE OF LOCAL REGISTRAR

29. SIGNATURE OF CREMATORY

30. SIGNATURE OF EMBALMER

31. SIGNATURE OF FUNERAL DIRECTOR

32. DEPARTMENT OF PUBLIC HEALTH

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