Obituary dated May 13, 1937

Funeral services held Sunday at the home with burial at Cane Springs Cemetery on Monday for Mrs. Annis McQueen Durbin, 67 who died at her home at Pryse on Friday morning of paralysis. She was the daughter of Barney and Jane Reese McQueen and was united in marriage to Elijah Curtis Durbin on March 15, 1891. To this union ten children were born. Mrs. Durbin has been a member of the Catholic Church for the past 35 years, a devoted mother and highly respected by all who knew her. Besides her husband, she is survived by three daughters; Mrs. Shelby Howell, Mrs. Floyd Reid and Mrs. James Lane; six sons, Pius, Jeff, John David, Beverly and Silas; 26 grandchildren, three sisters, four brothers. Funeral services conducted by Rev. Father Poole.

1-PLACE OF DEATH	NWEALTH OF KENTUCKY Department of Health EAU OF VITAL STATISTICS FILE No. 13015	F
County County	RTIFICATE OF DEATH	1
Vot. Pot Registre	District No.	
Inc. Town Primary	gistration District No. 45	
PULL NAME CASES	red in a Abepital or institution, give its NAME instead of street and m	
(Usual place of a ode) Longth of residence in city or town where death conurred yes.	(if nonresident, give city or town and it	tate)
PERSONAL AND STATISTICAL PARTIC	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	
3. GEN 4. COLOR OR RACE 5. Single, Married, Wild	" " " " " " " " " " " " " " " " " " "	10
Ji W District (write	22HEREBY CERTIFY_That I attended decease	
Sa. If married, widowed, or diversed HUSBARD of (or) WiFE of	- 1013 to 341H	10.3
Control of the contro	I last w halive on, 10, death to have occurred on the date stated above, at	m.
6. DATE OF BIRTH 7. AGE Years Months Days	The principal cause of death and related causes of imp in order of onset were as follows:	Date o
46		onset
8. Trade, profession, or particular	- and anni.	
	per gra	
Industry or business in which work was done, as alik mill, sawmill, bank, etc.		
10. Date deceased last worked at this occupation (month and spent in this	Contributory causes of importance not related to principal cause:	
12. BIRTHPLACE Lee Ce		_
13. NAME ONCO	ne v	_
14. BIRTHPLACE	What test confirmed diagnosis? Was there an autops:	,, 7
	23. If death was due to external causes (violence) fit to a	_
15. MAIDEN NAME .	Accident, suicide, or homicide?date of injury	
16. BIRTHPLACE	Where did injury occur? (Specify city or town, county, and Specify whether injury occurred in industry, in home,	Stat
17. INFORMANT Deg Diesy Joze	public place.	or
(Address) Luck	Manner of Intern	_
B. PURIAL CREMATION, OF REMOVAL	Manner of injury	_
masse of the gar may	24. Was disease or injury in any way related to occupat	tion
9. UNDERTAKER CORELLE	deceased? If so, specify	
(Address)	(Signed) BSB madely	4.
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	Registrer. (Address)	I