

Bornhorn, Herman Clemens 1848 - 1924

Kentucky Post - August 13, 1924

BORNHORN—Herman C., beloved husband of Mary Bornhorn (nee Emig), at his home, 308 Trevor-st, Covington, Ky., Tuesday, Aug. 12, 1924, aged 75 years. Funeral from the residence of his daughter, Mrs. Leslie Taylor, 327 Trevor-st, Saturday, Aug. 16, at 8:45 a. m. Requiem high mass at St. Joseph's Church at 9 a. m. Interment Mother of God Cemetery.

Form V. S. 1-22-21-21
1 PLACE OF DEATH

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

County Kenton File No. 18713
 Vol. No. 2 Registration District No. 790 Registered No. 916
 Inc. Town Covington Primary Registration District No. 2290
 City Covington (No. 308 Trevor St. 6 Ward)

2 FULL NAME Herman Bornhorn

PERSONAL AND STATISTICAL PARTICULARS			MEDICAL CERTIFICATE OF DEATH	
3 SEX <u>M.</u>	4 COLOR OR RACE <u>W.</u>	5 Single Married <u>Married</u> Widowed or Divorced (Write the word)	16 DATE OF DEATH <u>Aug 12th 1924</u> (Month) (Day) (Year)	
6 DATE OF BIRTH <u>Oct 25th 1848</u> (Month) (Day) (Year)			17 I HEREBY CERTIFY, That I attended deceased from <u>Jan 27</u> , 1924, to <u>Aug 12</u> , 1924, that I last saw him alive on <u>Aug 11</u> , 1924, and that death occurred on the date stated above at <u>8</u> m.	
7 AGE <u>75</u> yrs. <u>9</u> mos. <u>18</u> ds. IF LESS than day hrs or min?			The CAUSE OF DEATH* was as follows: <u>Cerebrum of Hemorrhage</u> (Duration) yrs. mos. ds.	
8 OCCUPATION (a) Trade, profession or particular kind of work <u>Retired</u> (b) General nature of industry, business or establishment in which employed (or employer)			Contributory (Secondary) (Duration) yrs. mos. ds.	
9 BIRTHPLACE (State or country) <u>Covington, KY</u>			(Signed) <u>Philip H. Dargatzis</u> , M. D. <u>8/14</u> , 1924 (Address) <u>712 Madison</u>	
PARENTS	10 NAME OF FATHER <u>Clement Bornhorn</u>	*State the Disease Causing Death, or, in deaths from Violent Causes state (1) Means of Injury; and (2) whether Accidental, Suicidal or Homicidal.		
	11 BIRTHPLACE OF FATHER (State or country) <u>Germany</u>	18 LENGTH OF RESIDENCE (For Hospitals, Institutions, Transients or Recent Residents) at place of death yrs. mos. ds. State yrs. mos. ds. Where was disease contracted, If not at place of death? Former or usual residence		
	12 MAIDEN NAME OF MOTHER <u>Elizabeth Dickman</u>	19 PLACE OF BURIAL OR REMOVAL <u>Mother of Gods</u>		
13 BIRTHPLACE OF MOTHER (State or country) <u>Germany</u>			DATE OF BURIAL <u>Aug 16</u> , 1924	
14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) <u>Mary Bornhorn</u> (Address) <u>308 Trevor St</u>			20 UNDERTAKER <u>H Linnemann Sons</u>	
15 Filed <u>Aug 14</u> 1924 <u>J. Griffe</u> Registrar			ADDRESS <u>25 E 11th St</u>	

11-2184