

Riley, Ella Culbertson 1851 - 1928

Cincinnati Post - December 20, 1928

RILEY—Ella (nee Culbertson), beloved sister of Mrs. Emma Curdis, Esther Culbertson, James Culbertson and Bernard Culbertson, at her residence, 710 Dayton av., Dayton, Ky. Funeral Saturday, Dec. 22, at 10:30 a. m. Interment Alexandria, Kentucky.

Form V. S. 1-50m-1-27-27		COMMONWEALTH OF KENTUCKY State Board of Health BUREAU OF VITAL STATISTICS CERTIFICATE OF DEATH		29659
1 PLACE OF DEATH County <u>Hamilton</u>		Registration District No. <u>202</u>		File No. _____
City <u>Dayton 13</u>		Primary Registration District No. <u>2093</u>		Registered No. <u>209</u>
2 FULL NAME <u>Ella Riley</u>		(If death occurred in a hospital or institution, give its NAME instead of street and number)		
(a) Residence. No. <u>710 Dayton</u>		St. _____ Ward _____		
Length of residence in city or town where death occurred		Length of residence in U. S., if of foreign birth?		
PERSONAL AND STATISTICAL PARTICULARS				
3 SEX <u>F</u>	4 COLOR OR RACE <u>W</u>	5 Single <u>Widow</u> Married Widowed or Divorced (Write the word)		
6a If married, widowed, or divorced HUSBAND of (or) WIFE of <u>Divorced</u>				
7 DATE OF BIRTH <u>Oct 3</u>				
8 AGE <u>77</u> yrs. _____ mos. _____ ds. IF LESS than 1 day _____ hrs. or _____ min?				
9 OCCUPATION OF DECEASED (a) Trade, profession or particular kind of work <u>at home</u>				
(b) General nature of industry, business or establishment in which employed (or employer) _____				
10 BIRTHPLACE (city or town) (State or country) <u>Leavington 15</u>				
PARENTS	10 NAME OF FATHER <u>James Culbertson</u>			
	11 BIRTHPLACE OF FATHER (city or town) (State or country) <u>Benton 15</u>			
	12 MAIDEN NAME OF MOTHER <u>Catherine Goutrey</u>			
13 BIRTHPLACE OF MOTHER (city or town) (State or country) <u>Dayton 13</u>				
14 (Informant) <u>Sarah Culbertson</u>				
(Address) <u>710 Dayton av</u>				
15 Filed <u>Dec 22, 1928</u> <u>L. R. Ray</u> Registrar				
MEDICAL CERTIFICATE OF DEATH				
16 DATE OF DEATH <u>Dec 19</u> , 19 <u>28</u>				
17 I HEREBY CERTIFY, that I attended deceased from <u>Dec 10</u> , 19 <u>28</u> to <u>Dec 19</u> , 19 <u>28</u> that I last saw h. <u>lx</u> alive on <u>Dec 19</u> , 19 <u>28</u> and that death occurred on the date stated above at <u>1 P.M.</u> The CAUSE OF DEATH* was as follows: <u>Acute myocardial infarction</u>				
Contributory <u>La grippe - Bronchopneumonia</u>				
(Duration) _____ yrs. _____ mos. <u>2</u> ds.				
18 WHERE WAS DISEASE CONTRACTED (Secondary) _____ (Duration) _____ yrs. _____ mos. <u>9</u> ds.				
19 PLACE OF BURIAL OR REMOVAL <u>Alexandria 18</u>				
DATE OF BURIAL <u>Dec 29, 1928</u>				
20 UNDERTAKER <u>Wardlaw &amp; Miller</u>				
ADDRESS <u>Dayton 13</u>				