

Ritchie, Burnice 1912 -1961

The Commercial-Mail (Columbia City, IN) – January 27, 1961

Find Body On Playground
 ROME CITY — The body of a man found at 11:50 a.m. Thursday on the playground of the Rome City schools was identified Thursday night as that of Burnice Ritchie, 48, former resident of Hardberly, Ky., who moved here about a year ago.
 Noble County Sheriff Russell Lindsey reported he had learned that Ritchie had been drinking with his son-in-law, Ray Skaggs Jr., Rome City, quite heavily in the Skaggs home and in Rome City taverns Wednesday night. Coroner Max J. Sneary, Avilla, reported that Ritchie apparently suffered an epileptic seizure, was unable to seek help, and died from exposure. The body was discovered in a slight gully by first graders at the west edge of the high school gymnasium.

INDIANA STATE BOARD OF HEALTH DIVISION OF VITAL RECORDS CORONER'S CERTIFICATE OF DEATH				Death No. 61-002731	
1. PLACE OF DEATH a. COUNTY Noble		2. USUAL RESIDENCE (Where deceased lived. If institution: Residence before admission) a. STATE Indiana b. COUNTY Noble			
b. CITY, TOWN, OR LOCATION Rome City		c. Length of Stay in 1b 9 weeks		c. CITY, TOWN OR LOCATION Rome City	
d. NAME OF HOSPITAL OR INSTITUTION		d. STREET ADDRESS			
e. IS PLACE OF DEATH INSIDE CITY LIMITS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		e. IS RESIDENCE INSIDE CITY LIMITS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		f. IS RESIDENCE ON A FARM? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
3. NAME OF DECEASED (Type or print) First Middle Last Burnice Ritchie		DATE OF DEATH Month Day Year Jan 26 61			
5. SEX M	6. COLOR OR RACE W-Cauc	7. MARRIED <input checked="" type="checkbox"/> NEVER MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED <input type="checkbox"/>	8. DATE OF BIRTH May 20, 12	9. AGE (In years last birthday) 48 IF UNDER 1 YEAR: Months Days Hours Min.	
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Cumulative labor		10b. KIND OF BUSINESS OR INDUSTRY		11. BIRTHPLACE (State or foreign country) Knox County Kentucky	
13. FATHER'S NAME Ritchie		14. MOTHER'S MAIDEN NAME U.S.A.			
15. WAS DECEASED EVER IN U. S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) No		15. SOCIAL SECURITY NO.		17a. INFORMANT'S NAME Mathewine Ritchie	
17. INFORMANT'S ADDRESS Rome City, Indiana		17c. RELATIONSHIP TO DECEASED wife			
18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c).) PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (a) Exposure - Freezing				INTERVAL BETWEEN ONSET AND DEATH 4 hour	
Conditions, if any, which gave rise to above cause (a), stating the underlying cause last. DUE TO (b) Alcoholic stupor				2 hour	
DUE TO (c)					
PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE CONDITION GIVEN IN PART I (a).				10. WAS AUTOPSY PERFORMED? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
20a. ACCIDENT <input checked="" type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/>		20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in Part I or Part II of item 18.)			
20c. TIME OF INJURY Hour Month Day Year a. m. p. m.					
20d. INJURY OCCURRED WHILE AT <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>		20e. PLACE OF INJURY (e. g., in or about home, farm, factory, street, office bldg., etc.)		20f. CITY, TOWN, OR LOCATION COUNTY STATE	
21. I hereby certify that I took charge of the remains described above, held an Inquiry (inquest, coroner's inquiry) thereon and from evidence obtained find that said deceased came to his death from causes stated and at 5:00 M (C. S. T.) on the above date.		22. Signature M. E. Sneary M.D. (Coroner) Address Avilla Indiana. Date Signed 1/26/61			
23a. BURIAL, CREMATION, OR DISPOSAL (Specify) Burial		23b. DATE Jan. 29, 1961		23c. NAME OF CEMETERY OR CREMATORY Fisty Cemetery	
23d. LOCATION (City, town, or county) (State) Fisty, Ky.,		24. FUNERAL DIRECTOR L. E. Bergalter & Son Kendallville,			
DATE REC'D BY LOCAL HEALTH OFFICER 2-2-61		SIGNATURE OF HEALTH OFFICER J. Chas. M.D.			