

| | | | | | |
|--|--|---|--|---|--|
| FORM V B 1-2004 8-20-11 | | Commonwealth of Kentucky STATE BOARD OF HEALTH BUREAU OF VITAL STATISTICS | | 8267 | |
| 1 PLACE OF DEATH County <u>Harrison Co.</u> | | CERTIFICATE OF DEATH | | File No. <u>8267</u> | |
| 2 FULL NAME <u>John Klosterman</u> | | Registration District No. <u>580</u> | | Registered No. <u>306</u> | |
| 3 SEX <u>Male</u> | | 4 COLOR OR RACE <u>White</u> | | 5 SINGLE, MARRIED, WIDOWED OR DIVORCED <u>Stillborn</u> | |
| 6 DATE OF BIRTH <u>Mar 27 1916</u> | | 7 AGE <u>0 yrs. 0 mos. 0 ds.</u> | | 8 OCCUPATION (a) Trade, profession, or particular kind of work <u>Stillborn</u> (b) General nature of industry business or establishment in which employed | |
| 9 BIRTHPLACE (State or country) <u>Harrison</u> | | 10 NAME OF FATHER <u>Bernard Klosterman</u> | | 11 BIRTHPLACE OF FATHER (State or country) <u>Harrison</u> | |
| 12 MAIDEN NAME OF MOTHER <u>Dora Hanshaw</u> | | 13 BIRTHPLACE OF MOTHER (State or country) <u>Harrison</u> | | 14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) <u>Bernard Klosterman</u> (Address) <u>1916 Euclid St</u> | |
| 15 FILED <u>Apr 28, 1916</u> | | REGISTRAR <u>J. L. Schumaker</u> | | 16 DATE OF DEATH <u>Mar 27 1916</u> | |
| 17 I HEREBY CERTIFY, that I attended deceased from <u>March 27, 1916</u> to <u>March 27, 1916</u> , that I last saw him alive on <u>March 27, 1916</u> , and that death occurred on the date stated above at <u>11:30 a.m.</u> The CAUSE OF DEATH was as follows: <u>Premature death (End of 5th month of pregnancy)</u> (Duration) <u>0 yrs. 0 mos. 0 ds.</u> | | Contributory (SECONDARY) <u>None</u> (Duration) <u>0 yrs. 0 mos. 0 ds.</u> | | 18 STATE THE DISEASE CAUSING DEATH, OR, IN DEATH FROM VIOLENT CAUSES, STATE (1) MEANS OF INJURY; AND (2) WHETHER ACCIDENTAL, SUICIDAL OR HOMICIDAL. 18 LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRANSIENTS OR RECENT RESIDENTS) At place of death <u>0 yrs. 0 mos. 0 ds.</u> In the State <u>0 yrs. 0 mos. 0 ds.</u> Where was disease contracted, if not at place of death? Former or usual residence | |
| 19 PLACE OF BURIAL OR REMOVAL <u>Abolition of Gods</u> | | DATE OF BURIAL <u>Mar 28, 1916</u> | | 20 ADDRESS OF UNDERTAKER <u>306 Euclid St</u> | |