Cynthiana Democrat - February 4, 1943

MRS.-SARAH E. DEVERS

Mrs. Sarah Ellen Devers. 90 years old, died Wednesday nightsa January 27, at the home of her granddaughter, Mrs. Harry Day, and Mr. Day, on East Bridge street, after a short illness of pneumonia. The body was removed to the Whaley Pflineral Bome where it remained for funeral services held at 1 o'clock, Salurday afternoon with the Rev. Frank C. King officiating, assisted by the Rev. Charles Hollar. Burial in the Lower Curry cometery. Pall bearers, Garnett Whalen, Earl Ransdell, Clifford Ashbrook, Harry Laytart, Taylor Martin Turner. Victor Turner, Stanley Holland and James Clifford. Mrs. Devers was born in this county May 15. -1953, a daughter of the late Tommy and Sallie Fookes Prows. When 15 years of age, she married Pierce Turner, who died in 1890. Her second husband was Harry Devers. Surviving children are by the first marriage. They are: M. L. Tur-.ner, Mrs. C. F. Holland and Mrs. Keller Ashbrook, Harrison county; Mrs. Ed. Clifford, Lexington; Mrs. A. L. Laytart and Mrs. Clarence. Whalen, Sr., of Cynthiana; Harry P. Turner, Chicago, Ill., and Mrs. F. S. Ransdell, of Greenfield, Ohio. Mrs. Devers was the last remaining member of her family. She was a member of Upper Curry Methodist church, joining in her .girlhood.

DEPARTMENT OF COMMERCE BUREAU OF V Bureau of the Consus CERTIFICAT	TH OF KENTUCKY Rate File No. 1 of Health ITAL STATISTICS FE OF DEATH Primary Registration District No. 22 40
1. PLACE OF DEATH: (a) County HATTISON (b) City or town Cynthiana (if ourside city or town limits, write RURAL) (c) Name of hospital or institution: Bridge St. (if not in hospital or institution write street number or location) (d) Length of stay: In hospital or community (years, months or days)	2. USUAL RESIDENCE OF DECEASED: (a) State Ky. (b) County Harrison (c) City or town Cynthiana (if outside city or town limits, write RURAL) (d) Street No. Bridge, St. (If rural give precinct) (e) If foreign born, how long in U. S. A.7
S(a) FULL NAME SARAN Ellen Devers 3(b) If veteran, Name war A. Sex Femals 5. Color Recomplished Single, widowed, married, diverced fild wed. 4. Sex Femals 5. Color Recomplished Single, widowed, married, diverced fild wed. 6(c) Age of husband or wife Harry Devers 6(c) Age of husband or wife if alive. 7. Birth date of deceased May 15. 1853 (Month) (Day) (Year) 8. AGE: Years 8. Months 12. If less than one day hr. 13. Birthplace Harrison Co. Ky. 14. Maiden name Sallie Fooks 15. Birthplace Harrison Co. Ky. 16(a) Informant's own signature (b) Address Cynthians, Ky. (b) Address Cynthians, Ky. (c) Address Cynthians, Ky. (Date received by local registrar) (Date received by local registrar)	MEDICAL CERTIFICATION 20. DATE OF DEATH 21. I hereby certify that I attended the deceased from 10. 19.73. that I last saw him all 11.30 P.M. Immediate cause of death Cinclude pregnancy within 3 months of death) Major findings: Of operations Of autopsy 22. If death was due to external causes, fill in the following: (a) Accident, suicide, or homicide (specify) (b) Date of occurrence (c) Where did injury occur? In or about home, on farm, in industrial place, in p place? (Specify type of place) While at work? 23. Signature (a) Means of injury (b) Means of injury (c) Means of injury (c) Means of injury (d) Means of injury (e) Means of injury (f) Survive of the following: (a) Survive of the following: (b) Means of injury (c) Means of injury (d) Means of injury (e) Means of injury (f) Survive of the following: (e) Means of injury (f) Survive of the following: (g) Means of injury (h) Date of occurrence (g) Means of injury (h) Date of occurrence (g) Means of injury (h) Date of occurrence (h) Means of injury