

Ransdell, Albert 1884 - 1955

Lexington Herald – October 10, 1955

Albert Ransdell

CYNTHIANA, Oct. 9 — Albert Ransdell, 71, retired farmer, died at 11 a. m. today at his home on West Pleasant Street here after several months illness. He was a member of the Leesburg Christian Church and was a native of Bourbon County.

Survivors are his wife, Mrs. Mayme Dotson Ransdell; three sons, Clayton and Harry Ransdell, Cynthiana, and Carl Ransdell, Lexington; two daughters, Mrs. William Brown, Spokane, Wash., and Mrs. Virgil Fryman, Cynthiana; a brother, Forrest Ransdell, Greenfield, Ohio; 14 grandchildren and five great-grandchildren.

Funeral arrangements are incomplete, but burial will be in the Jacksonville Cemetery. The body is at the Smith-Rees Funeral Home.



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Form V. R. 1-A		COMMONWEALTH OF KENTUCKY		FILE NO. 116 55-20152	
FEDERAL SECURITY AGENCY		Department of Health		BUREAU OF VITAL STATISTICS	
U. S. PUBLIC HEALTH SERVICE		BUREAU OF VITAL STATISTICS		CERTIFICATE OF DEATH	
NATIONAL OFFICE VITAL STATISTICS		REGISTRATION DISTRICT NO. 670		PRIMARY REGISTRATION DISTRICT NO. 2240	
1. PLACE OF DEATH a. COUNTY HARRISON		2. USUAL RESIDENCE (Where deceased lived, if institution; residence before admission) a. STATE KENTUCKY b. COUNTY HARRISON			
b. CITY (If outside corporate limits, write RURAL and give township) OR TOWN CYNTHIANA		c. LENGTH OF STAY (in this place)		c. CITY (If outside corporate limits, write RURAL and give township) OR TOWN CYNTHIANA	
d. FULL NAME OF (If not in hospital or institution, give street address or HOSPITAL OR INSTITUTION) WEST PLEASANT STREET			d. STREET ADDRESS (If rural, give location) WEST PLEASANT STREET		
3. NAME OF DECEASED a. (First) ALBERT b. (Middle) RANDELL c. (Last) RANDELL			4. DATE OF DEATH (Month) (Day) (Year) OCT 9, 1955		
5. SEX MALE		6. COLOR OR RACE WHITE		7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) MARRIED	
8. DATE OF BIRTH OCT 2, 1884		9. AGE (In years last birthday) 71		10. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) RETIRED FARMER	
11. BIRTHPLACE (State or foreign country) BOURBON COUNTY, KENTUCKY		12. CITIZEN OF WHAT COUNTRY? USA		13. FATHER'S NAME JOHN S. RANDELL	
14. MOTHER'S MAIDEN NAME SUSAN McDONALD		15. WAS DECEASED EVER IN U. S. ARMED FORCES? (If yes, give war or dates of service) NO		16. SOCIAL SECURITY NO. 406-36-3075	
17. INFORMANT MRS MAYME DOTSON RANDELL		18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c))		MEDICAL CERTIFICATION	
i. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH (a) MYOCARDIAL INFARCTION		INTERVAL BETWEEN ONSET AND DEATH 24 hrs.		ii. OTHER SIGNIFICANT CONDITIONS	
ANTECEDENT CAUSES		DUE TO (b) CORONARY Atherosclerosis 15 yrs		DUE TO (c) ARTERIOsclerotic Heart Disease 15 yrs.	
19. DATE OF OPERATION		20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		21. MAJOR FINDINGS OF OPERATION 4200-031-16	
21a. ACCIDENT (Specify) SUICIDE HOMICIDE		21b. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)		21c. (CITY, TOWN, OR TOWNSHIP) (COUNTY) (STATE)	
21d. TIME OF INJURY (Month) (Day) (Year) (Hour) (Min)		21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE WORK <input checked="" type="checkbox"/> AT WORK <input type="checkbox"/>		21f. HOW DID INJURY OCCUR?	
22. I hereby certify that I attended the deceased from 6:30, 1955, to 10-11, 1955, that I last saw the deceased alive on 10-11, 1955, and that death occurred at 11:00 A.M., from the causes and on the date stated above.					
23a. DATE SIGNED 10/13/55		23b. ADDRESS CYNTHIANA, Ky.		23c. SIGNATURE (Doctor or title) B. C. Johnson M.D.	
24. BURIAL, CREMATION, REMOVAL (Specify) BURIAL		24b. DATE 10/11/1955		24c. NAME OF CEMETERY OR CREMATORY JACKSONVILLE CEMETERY	
24d. LOCATION (City, town, or county) (State) BOURBON COUNTY, KENTUCKY.		25a. DATE REC'D BY LOCAL REG. 10/13/55		25b. REGISTRAR'S SIGNATURE B. C. Johnson	
25c. FUNERAL DIRECTOR ADDRESS SMITH - REES CO. CYNTHIANA, KENTUCKY.		BY Odessa Kitchener Lic. # 2275			