

Lexington Herald – February 6, 1952

Frank Ransdell

PARIS, Ky., Feb. 5.—Frank Ransdell 74, native of Bourbon county, died at 2 p. m. today at the home of a daughter, Mrs. Ann McKinley of Fayette county. He was a retired farmer and a member of the Leesburg Christian church.

Survivors include three daughters: Mrs. Ann McKinley, Fayette county, with whom he made his home; Mrs. Spence Roberts, Jr., Bourbon county, and Mrs. Lewis Mastin, Bourbon county; one son, Charles Ransdell, Bourbon county; two brothers, Albert Ransdell, Harrison county, and Forest Ransdell, Greenfield, Ohio; eight grandchildren and four great-grandchildren.

Funeral services will be held at 2:30 p. m. Thursday at the Old Union Christian church, conducted by the Rev. Jack Irvin and the Rev. David Friedly. Burial will be

in the Jacksonville cemetery. The body will be taken from the Davis funeral home to the residence of Mrs. McKinley at Loradale Wednesday morning.



Ransdell, Frank S 1877 - 1952

Form V. R. 1-A FEDERAL SECURITY AGENCY U. S. PUBLIC HEALTH SERVICE NATIONAL OFFICE VITAL STATISTICS		COMMONWEALTH OF KENTUCKY Department of Health BUREAU OF VITAL STATISTICS CERTIFICATE OF DEATH		FILE NO. 116 52 2237	REGISTRAR'S NO. 20
Registration District No. 500		Primary Registration District No. 5161			
1. PLACE OF DEATH a. COUNTY Fayette		2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission) a. STATE Ky b. COUNTY Fayette			
b. CITY (If outside corporate limits, write RURAL, and give township) OR Rural, Loradale		c. CITY (If outside corporate limits, write RURAL, and give township) OR Rural, Loradale.			
c. LENGTH OF STAY (to this place)		d. STREET ADDRESS (If rural, give location) Lexington 19 Loradale			
d. FULL NAME OF HOSPITAL OR INSTITUTION		d. STREET ADDRESS			
3. NAME OF DECEASED a. (First) Frank		b. (Middle) Ransdell		c. (Last) Ransdell	
4. DATE OF DEATH (Month) (Day) (Year) 2-5-1952					
5. SEX M	6. COLOR OR RACE W	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) DIV.	8. DATE OF BIRTH Jan. 25-1978	9. AGE (In years last birthday) 74	10. If Under 1 Year 11. If Under 24 Hrs 12.
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Retd. Farmer		10b. KIND OF BUSINESS OR INDUSTRY 11		11. BIRTHPLACE (State or foreign country) Bourbon County, Ky.	
12. CITIZEN OF WHAT COUNTRY? U.S.		13. FATHER'S NAME John S. Ransdell			
14. MOTHER'S MAIDEN NAME Susan McDonald				17. INFORMANT Mrs. Ann McKinley, Loradale, Fayette Co.	
15. WAS DECEASED EVER IN U. S. ARMED FORCES? (Yes, no, unknown) (If yes, give war or dates of service) No		16. SOCIAL SECURITY NO.		17. INFORMANT	
18. CAUSE OF DEATH Enter only one cause per line for (a), (b), and (c) *This does not mean the mode of dying, such as heart failure, asphyxia, etc. It means the disease, injury, or complication which caused death.		1. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Tuberculosis Cerebral Hemorrhage		INTERVAL BETWEEN ONSET AND DEATH	
		ANTECEDENT CAUSES Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last. DUE TO (b) _____ DUE TO (c) _____			
		2. OTHER SIGNIFICANT CONDITIONS Conditions contributing to the death but not related to the disease or condition causing death. Pulmonary Tuberculosis			
19a. DATE OF OPERATION		19b. MAJOR FINDINGS OF OPERATION 331X-670-16		20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
21a. ACCIDENT (Specify) SUICIDE HOMICIDE		21b. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office, etc.)		21c. (CITY, TOWN, OR TOWNSHIP) (COUNTY) (STATE)	
21d. TIME OF INJURY (Month) (Day) (Year) (Hour) m.		21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>		21f. HOW DID INJURY OCCUR?	
22. I hereby certify that I attended the deceased from 1-12-1952 to 2-5-1952, that I last saw the deceased alive on 2-3-1952, and that death occurred at 2-P. m., from the causes and on the date stated above.					
23a. DATE SIGNED 2-7-52		23b. ADDRESS Cynthia Ky.		23c. SIGNATURE (Ink or blue ink) [Signature]	
24a. BURIAL, CREMATION, REMOVAL (Specify) Burial		24b. DATE 2-7-1952		24c. NAME OF CEMETERY OR CREMATORY	
24d. LOCATION (City, town, or county) (State)		Bourbon Co. Ky.			
25a. DATE REC'D BY REG. 2/11/52		25b. REGISTRAR'S SIGNATURE H. A. Furlong		26. FUNERAL DIRECTOR Davis Funeral Home, Paris, Ky.	