**STANDARD CERTIFICATE OF DEATH**

**West Virginia State Department of Health**

1. **PLACE OF DEATH**
   - County: Fayette
   - Town or City: Charles Town

2. **PLACE OF RESIDENCE**
   - County: Fayette
   - Town or City: Charles Town

3. **PERSONAL AND STATISTICAL PARTICULARS**
   - **SEX:** Male
   - **COLOR OR RACE:** Black
   - **MARITAL STATUS:** Widower
   - **DATE OF BIRTH:** March 5, 1882
   - **AGE AT DEATH:** 18 years
   - **CAUSE OF DEATH:** Pneumonia

4. **MEDICAL CERTIFICATE OF DEATH**
   - **DATE OF DEATH:** Dec. 9, 1907
   - **AGE AT DEATH:** 25 years
   - **MAIDEN NAME:** JONES
   - **BIRTHPLACE:** (State or Country)
   - **MOTHER'S NAME:**
   - **FATHER'S NAME:**
   - **BIRTHPLACE:** (State or Country)
   - **MAIDEN NAME:**
   - **INFANT OF DECEASED:**
   - **BURIAL, CREMATION, OR REMOVAL:**
     - Date: 12/14/1907

5. **FILING**
   - **Registrar:** M. D. McKendree

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http://www.wvculture.org/vrr/va_view.aspx?id=3648936&Type=Death

7/19/2010