HVS-20112—250M—5-59
(100 Cert. per book) 1

(Fee for this Certificate, $1.00)

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF HEALTH
VITAL STATISTICS

№ 920491

LOCAL REGISTRAR'S CERTIFICATION OF DEATH

Registered No. 64

Full Name of Deceased: Albert (First) Morgan (Middle) Clifford (Last)

Usual Address: 94 Stanton Road (Number, Street) Shickshinny (City or town) Luzerne (County) Pa. (State)

Place of Death: Kingston (City, Borough or Township) Luzerne (County) Pennsylvania

Date of Death: 9-21-1916 Social Security No. 187-32-2826 Race White

Marital Status: Married Sex: Male Date of Birth: 3-29-1897

Occupation: Mail Carrier Birthplace: Nanticoke, Pa.

If Veteran, which War: World War I Veteran's Serial No.: 1925979 73

	Interval between Onset and Death
Disease or Condition Leading Directly to Death (a): Carcinoma of left lung	8 months
Due to (b):	
Due to (c):	

Accident, Suicide or Homicide: How did injury occur:

Name and Title of Person Who Certified Cause of Death (M.D., D.O., Coroner): R. E. Crompton

Address: (Street) Shickshinny, Pa. (City)

This is to certify that the information here given is correctly copied from an original certificate of death duly filed with me as Local Registrar. The original certificate will be forwarded to the Division of Vital Statistics, Harrisburg, Pennsylvania for permanent filing.

DEPARTMENT OF HEALTH COMMONWEALTH OF PENNSYLVANIA

Miss Vivian L. Jones (Local Registrar of Vital Statistics) 40-376 (District No.)

157 Washington St. Edwardsville Pa. (Street Address, City, Borough, Township)

Feb. 23 1961 (Date Received by local Registrar)

Feb. 23 1961 (Date of Issue of This Certification)