2326

1994
25
0900
BIRTH NO.

DEPARTMENT OF PUBLIC HEALTH CERTIFICATE OF DEATH DIVISION OF VITAL STATISTICS
STATE OF TENNESSEE

DEATH NO. 65-018605

THIS BECOMES A LEGAL RECORD WHEN PROPERLY EXECUTED AND WILL BE PLACED IN PERMANENT FILE.

T[redacted] WRITE PLAINLY. O[redacted] PERMANENT BLUE OR BLACK INK ACCEPTABLE. SIGNATURE MUST BE IN PERMANENT BLUE OR BLACK INK.

PHYSICIAN WHO ATTENDED DECEASED DURING LAST ILLNESS MUST GIVE WELL-DEFINED CAUSE OF DEATH [redacted] EXECUTIN[redacted] CATE MU[redacted] AND SIG[redacted] CERTIFICA[redacted] 72 HOURS SIGNATURE [redacted] DELEGATED

018605X1965

CAUSE O[redacted]

DO NOT GIV[redacted] DYING SUCH FAILURE, ETC. GIVE [redacted] EASE, INJ[redacted] COMPLICATION WHICH CAUSED DEATH.

FUNERAL DIRECTOR OR PERSON DISPOSING OF BODY, MUST FILE CERTIFICATE WITH LOCAL REGISTRAR WITHIN 72 HOURS AFTER DE[redacted] AND PRIOR TO TR[redacted]RTATION BY CO[redacted] CARRIER OR REMOVAL FROM STATE.

ALL ITEMS ARE TO BE COMPLETE AND ACCURATE.

FORM 120

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE — PUBLIC HEALTH SERVICE

1. NAME	First: William	Middle: Arthur	Last: Noles	2. DATE OF DEATH	Month: July	Day: 23	Year: 1965

3. COLOR OR RACE	4. SEX	5. SINGLE, MARRIED, WIDOWED, DIVORCED (SPECIFY)	6. DATE OF BIRTH Month Day Year	7. AGE (IN YEARS LAST BIRTHDAY)	IF UNDER 1 YR. MONTHS	IF UNDER 1 YR. DAYS	IF UNDER 24 HRS. HOURS	IF UNDER 24 HRS. MINS.
white	male	married	Feb 10, 1886	79				

8. PLACE OF DEATH
- A. COUNTY: Davidson
- B. CIVIL DISTRICT:
- C. CITY OR TOWN: Nashville
- D. LENGTH OF STAY IN THIS PLACE:
- E. NAME OF HOSPITAL OR INSTITUTION (If not in Hospital or Institution, Give Street Address or Location): Baptist
- F. INSIDE CITY LIMITS? YES [X] NO [ ]

9. USUAL RESIDENCE OF DECEASED (Where Deceased Lived. If Institution, Residence Before Admission)
- A. STATE: Tenn
- B. COUNTY: Carroll
- C. CIVIL DISTRICT: 15
- D. CITY OR TOWN: Buena Vista
- E. INSIDE CITY LIMITS? YES [ ] NO [X]
- F. STREET ADDRESS (OR LOCATION): Route 1
- G. IS RESIDENCE ON A FARM? YES [X] NO [ ]

10A. USUAL OCCUPATION (Kind of Work Done During Most of Working Life, Even If Retired)	10B. KIND OF BUSINESS OR INDUSTRY	11. SOCIAL SECURITY NUMBER	12. WAS DECEASED EVER IN U.S. ARMED FORCES? YES, NO, OR UNKNOWN	IF YES, GIVE WAR OR DATES OF SERVICE
Farming	Own farm		No	

13. BIRTHPLACE (State or Foreign Country)	14. CITIZEN OF WHAT COUNTRY?	15. NAME OF HUSBAND OR WIFE
Tennessee	U S	Minnie Selph Noles

16. FATHER'S NAME	17. MOTHER'S MAIDEN NAME	18. INFORMANT ADDRESS
J E Noles	Amanda Bond	Mrs W A Noles, Buena, Vista, Tenn 1

MEDICAL CERTIFICATION

19. CAUSE OF DEATH — Enter only one cause per line for (A), (B), (C)

PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (A): Gram negative septicemia (Pseudomonas Aero.) — INTERVAL BETWEEN ONSET AND DEATH: ? 2 wks

Conditions, if any, which gave rise to above cause (A); stating the underlying cause last

DUE TO (B): Subacut myeloid Leukemia — ? - years

DUE TO (C): — 2043 252

PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RELATED TO TERMINAL DISEASE CONDITION GIVEN IN PART I (A)

20. WAS AUTOPSY PERFORMED? YES [ ] NO [X]

21A. ACCIDENT	SUICIDE	HOMICIDE
[ ]	[ ]	[ ]

21B. DESCRIBE HOW INJURY OCCURRED (Enter nature of injury in Part I or Part II of Item 19)

21C. TIME OF INJURY: HOUR A.M. P.M. MO. DAY YR.

21D. INJURY OCCURRED: WHILE AT WORK [ ] NOT WHILE AT WORK [ ]

21E. PLACE OF INJURY (In or About Home, Farm, Factory, Street, Office Building, etc.)

21F. PLACE OF INJURY — CITY, TOWN OR RURAL — COUNTY — STATE

22. I HEREBY CERTIFY THAT THE DECEASED DIED ON THE DATE AND FROM THE CAUSE STATED ABOVE
SIGNATURE: John H. Overall Jr. M.D. [X] D.O. [ ] OTHER (SPECIFY) [ ]
ADDRESS: Mid State Baptist Hospital Nashville, Tenn.
DATE: 2 Aug '65

23A. BURIAL, CREMATION, REMOVAL (SPECIFY)	23B. DATE OF BURIAL, CREMATION, OR REMOVAL	23C. NAME OF Cemetery or Crematory	23D. LOCATION CITY, TOWN OR COUNTY	STATE
Burial	July 25, 1965	Pleasant Hill	Benton County	Tennessee

24. FUNERAL DIRECTOR ADDRESS	25. REGISTRATION DIST. NO.	26. DATE SIGNED BY LOCAL REG.	27. REGISTRAR'S SIGNATURE
Robert L. Dilday — Huntingdon, Tenn	21901	8-4-65	Geo. T. Hunt