

1 PLACE OF DEATH

County JacksonCivil Dist. 13OR
VillageOR
City (No. , St.; Ward)

STATE OF TENNESSEE

STATE BOARD OF HEALTH

Bureau of Vital Statistics

CERTIFICATE OF DEATH

Registration District No. 44413Primary Registration District No. 13

395

File No. 95-Registered No. 95-

[If death occurred in a hospital or institution, give its NAME and street and number.]

2 FULL NAME Joshary Taylor Painter

PERSONAL AND STATISTICAL PARTICULARS

3 SEX Male 4 COLOR OR RACE White 5 SINGLE, MARRIED, WIDOWED, OR DIVORCED Married
(Write the word)6 DATE OF BIRTH Oct - 25 - 1849
(Month) (Day) (Year)7 AGE 74 yrs. 4 mos. 28 ds. If LESS than 1 day, hrs. or min.?8 OCCUPATION
(a) Trade, profession, or particular kind of work. Farmer 000
(b) General nature of industry, business, or establishment in which employed (or employer) ✓9 BIRTHPLACE (State or country) Tenn10 NAME OF FATHER Henry Painter11 BIRTHPLACE OF FATHER [State or country] Ky.12 MAIDEN NAME OF MOTHER Catherine Brown13 BIRTHPLACE OF MOTHER [State or country] Tenn.

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

[Informant] P. H. Painter[Address] Whitfield15 Filed 6-14-24 J. H. Charles REGISTRAR

MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH March 24, 1924
(Month) (Day) (Year)

17 I HEREBY CERTIFY, That I attended deceased from 191 to 191

that I last saw him alive on 191

and that death occurred, on the date stated above, at 1030 M

The CAUSE OF DEATH* was as follows:

Had no M.D. 2054

[Duration] yrs. mos. ds.

Contributory [SECONDARY]

[Duration] yrs. mos. ds.

Signed _____ M. D.

, 191 Address _____

* State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES, state (1) MEANS OF INJURY; and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.

18 LENGTH OF RESIDENCE [FOR HOSPITALS, INSTITUTIONS TRANSIENTS, OR RECENT RESIDENTS]

At place of death 74 yrs. 4 mos. 28 ds. In the 74 yrs. 4 mos. 28 ds. State 74 yrs. 4 mos. 28 ds.
Where was disease contracted, if not at place of death?

Former or usual residence _____

19 PLACE OF BURIAL OR REMOVAL

McCain Cemetery DATE OF BURIAL 3-26-2420 UNDERTAKER None ADDRESS None