

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD

N. B.—Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important. See instructions on back of certificate.

PLACE OF DEATH			North Carolina State Board of Health		36
BUREAU OF VITAL STATISTICS			TRANSCRIBED		
County	Halifax	42	REC'D. APR 7 1917		
Township	Roanoke Rapids		CERTIFICATE OF DEATH		
Town	Roanoke Rapids	Registration District No. 42-2289	Certificate No. 4		
City	RR Hospital	St. Ward	[If death occurred in a hospital or institution, give its NAME instead of street and number.]		
FULL NAME Joe Medlin			345		
PERSONAL AND STATISTICAL PARTICULARS			MEDICAL CERTIFICATE OF DEATH		
SEX	COLOR OR RACE	SINGLE, MARRIED, WIDOWED, or DIVORCED	DATE OF DEATH		
Male	White	married	Mar. 11, 1917		
DATE OF BIRTH			I HEREBY CERTIFY, That I attended deceased from		
Unknown			3-10-1917 to 3-11-1917		
AGE about 54 yrs. mos. ds.			that I last saw him alive on 3-11-1917		
OCCUPATION			and that death occurred on the date above stated, at 4:00 a.m.		
Over Reer			The CAUSE OF DEATH* was as follows:		
EDUCATIONAL ATTAINMENTS			apoplexy		
Common School			chronic interstitial nephritis		
BIRTHPLACE			Contributory (Secondary)		
Halifax County			Duration 7 yrs. mos. ds.		
NAME OF FATHER			(Signed) R. P. Beckwith, M. D.		
Mr V. Medlin			3-11-1917 (Address) Rosemary N.C.		
BIRTHPLACE OF FATHER			*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES, state (1) MEANS OF INJURY; and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.		
Halifax County			LENGTH OF RESIDENCE (For Hospitals, Institutions, Transients or Recent Residents)		
MAIDEN NAME OF MOTHER			At place of death yrs. mos. ds. In the State yrs. mos. ds.		
J. A. Fulgham			Where was disease contracted, if not at place of death? at home		
BIRTHPLACE OF MOTHER			Former or usual residence 23 Rosemary N.C.		
Halifax County			PLACE OF BURIAL OR REMOVAL		
THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE			Halifax County		
(Informant) Frank Medlin			DATE OF BURIAL		
(Address) Weldon N.C.			Mar 12, 1917		
Filed Mar. 15, 1917 W. S. Hancock			UNDERTAKER		
Registrar.			O. B. Glover		
			ADDRESS		
			Roanoke Rapids		