

F AIRVIEW CEMETERY • BROWNSTOWN, INDIANA

V. E. Albertson, Jr.

Occupant Name: V. E. Albertson Jr.

Location: Section B

Date of Birth: 4/20/1918

Date of Death: 8/17/1918 Unknown

Date of Burial: 1918

Veteran: No

Multiple Occupants: No

Comment:



PERSONAL AND STATISTICAL PARTICULARS		MEDICAL CERTIFICATE OF DEATH	
PLACE OF DEATH County of <u>Madison</u> INDIANA 82 Township of <u>Brownstown</u> Town of <u>Brownstown</u> City of _____ (No. _____ St. _____ Ward _____)		Indiana State Board of Health CERTIFICATE OF DEATH 260898 Registered No. 14	
FULL NAME <u>Vierra Albertson</u> COLOR OF HAIR <u>White</u> SEX <u>Male</u> RACE <u>White</u> MARRIED, WIDOWED, OR DIVORCED <u>Single</u> DATE OF BIRTH <u>April 20 1918</u> AGE <u>3</u> months <u>27</u> days <u>0</u> weeks <u>0</u> months <u>0</u> years		DATE OF DEATH <u>Aug 17 1918</u> I HEREBY CERTIFY, that I attended deceased from <u>July 20 1918</u> to <u>Aug 17 1918</u> that I last saw him alive on <u>Aug 17 1918</u> and that death occurred, on the date stated above, at <u>12:00 M.</u> The CAUSE OF DEATH was as follows: <u>Encephalitis 104</u>	
PLACE OF BIRTH <u>Brownstown Ind.</u> NAME OF MOTHER <u>V. E. Albertson</u> NAME OF FATHER <u>California</u> NAME OF SPOUSE <u>Margaret Pinebald</u> NAME OF CHILDREN <u>Supriana</u> NAME OF NEXT OF KIN <u>V. E. Albertson</u> ADDRESS OF NEXT OF KIN <u>26 North California St. Indianapolis Ind.</u> DATE OF DEATH BY <u>Aug 17 1918</u> NAME AND ADDRESS OF HEALTH OFFICER OR DEPUTY <u>Dr. R. M. ...</u>		CONTRIBUTORY (Secondary) _____ (Diploma) _____ (Signed) <u>Dr. ...</u> M. D. <u>Aug 17 1918</u> Address <u>Brownstown</u> *RECORD AND EXHIBIT CONTAINING DEATH OF DECEASED TO BE FILED IN THE OFFICE OF THE BOARD OF HEALTH, AND TO BE MADE AVAILABLE IN DEPARTMENT OF HEALTH. LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRANSPORTS, OR RECENT RESIDENTS) At place of death _____ In the _____ Where was disease contracted _____ If not at place of death _____ Name of _____ PLACE OF BURIAL OR REMOVAL <u>Brownstown Ind.</u> DATE OF BURIAL <u>Aug 18 1918</u> WHOSE THE BODY IS <u>Dr. Albertson</u> WAS THE BODY EMBALMED? <u>No.</u> ADDRESS <u>Brownstown Ind.</u> ENTAILMENT'S LICENSE NO. <u>359</u>	