

1017  
LOCAL REGISTRAR'S FILE NO. CERTIFICATE OF DEATH STATE OF OKLAHOMA - DEPARTMENT OF HEALTH STATE FILE NO. 16629

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|---|--|---|--|
| STATE BIRTH NO.   |  | STATE FILE NO.  |  |
| 1. PLACE OF BIRTH<br>a. COUNTY<br>Choctaw   |  | 2. GENERAL JURISDICTION (If born abroad state, if born in Oklahoma, Oklahoma; if born elsewhere, elsewhere)   |  |
| 3. CITY, TOWN, OR LOCATION<br>Hugo  |  | 4. CITY, TOWN, OR LOCATION<br>Hugo  |  |
| 5. AGE AT DEATH<br>44 years   |  | 6. STREET ADDRESS<br>Route #1   |  |
| 7. IN PLACE OF BIRTH (Indicate city, town, or location)<br>Yes <input type="checkbox"/> No <input type="checkbox"/>   |  | 8. IN RESIDENCE ON 1. NAME<br>Yes <input type="checkbox"/> No <input type="checkbox"/>  |  |
| 9. NAME OF DECEASED (Type of person)<br>First MIDDLE LAST<br>Hugo ROBERT HUGO-710 West Jackson  |  | 10. DATE OF BIRTH<br>Month Day Year<br>10 6 60  |  |
| 11. SEX<br>Male <input checked="" type="checkbox"/> Female <input type="checkbox"/>   |  | 12. RACE<br>White <input checked="" type="checkbox"/> Other <input type="checkbox"/>  |  |
| 13. MARRIAGE STATUS<br>MARRIED <input checked="" type="checkbox"/> NEVER MARRIED <input type="checkbox"/>   |  | 14. DATE OF BIRTH<br>11-1-1866  |  |
| 15. OCCUPATION (Indicate kind of work and any other kind of occupation, with V suffix)<br>BUSINESSMAN   |  | 16. BIRTHPLACE (State or foreign country)<br>Powderly, Texas  |  |
| 17. US BIRTH STATE<br>Texas   |  | 18. US BIRTH STATE<br>USA   |  |
| 19. FATHER'S NAME<br>Robert Wharton   |  | 20. MOTHER'S NAME<br>Mary Greag   |  |
| 21. WAS DECEASED EVER IN U.S. ARMED FORCES (If so, in what branch, and for what period)<br>No   |  | 22. SOCIAL SECURITY NO.<br>None   |  |
| 23. CAUSE OF DEATH (List only the cause per Secs 101, 102, and 103)<br>PART 1. CAUSE WAS CAUSED BY:<br>IMMEDIATE CAUSE OR CONDITION, if any, which gave rise to death (See 101)<br>ARTICULAR CAUSE, if any, which gave rise to death (See 102)<br>PART 2. OTHER IMMEDIATE CAUSES CONTRIBUTING TO DEATH BUT NOT ALLIED TO THE IMMEDIATE CAUSE GIVEN IN PART 1:<br>Mrs. Faye Stillwell - Soper, Okla. |  | 24. PERIOD BETWEEN DEATH AND REPORT<br>3 days   |  |
| 25. DECEASED<br>SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>  |  | 26. DECEASED HOW REPORT OCCURRED (State where of injury in Part 1 or Part 2 of Item 23)<br><input type="checkbox"/> SUICIDE <input type="checkbox"/> ACCIDENT <input type="checkbox"/> OTHER <input type="checkbox"/> |  |
| 27. TIME OF DEATH<br>MORNING <input type="checkbox"/> AFTERNOON <input type="checkbox"/> EVENING <input type="checkbox"/>   |  | 28. PLACE OF DEATH (State, county, city, town, or location)<br>Choctaw, Okla.   |  |
| 29. DATE OF DEATH<br>10-2-60  |  | 30. DATE OF BIRTH<br>10-6-60  |  |
| 31. I attended the deceased from 10-2-60 to 10-6-60 and last saw him alive on 10-6-60   |  | 32. I attended the deceased from 10-2-60 to 10-6-60 and last saw her alive on 10-6-60   |  |
| 33. SIGNATURE OF REGISTRAR<br>A. L. Williams  |  | 34. SIGNATURE OF DECEASED<br>Hugo Hugo  |  |
| 35. NAME OF FUNERAL HOME<br>Sugar Creek Crematory   |  | 36. ADDRESS OF FUNERAL HOME<br>near Soper, Oklahoma   |  |
| 37. DATE WHEN BY LOCAL LAW<br>Oct 7 1960  |  | 38. SIGNATURE OF REGISTRAR<br>A. L. Williams  |  |
| 39. SIGNATURE OF REGISTRAR<br>A. L. Williams  |  | 40. SIGNATURE OF REGISTRAR<br>A. L. Williams  |  |