

ALABAMA

Center for Health Statistics

DEPARTMENT OF COMMERCE Bureau of the Census		Standard Certificate of Death		State File No. 14975
STATE OF ALABAMA 1876		Registrar's No. 3737026		3737026
1. PLACE OF DEATH:		2. USUAL RESIDENCE OF DECEASED:		
County <u>Jefferson</u> Beat No. <u>3737026</u>		State <u>Alabama</u>		
City or Town <u>Birmingham</u> <small>(If outside corporate limits of city or town write RURAL)</small>		County <u>Jefferson</u> Beat No. _____		
Street address <u>Jefferson Hillman Hospital</u> <small>(If in hospital or institution, give name only)</small>		City or Town <u>Birmingham</u> <small>(If outside corporate limits of city or town write RURAL)</small>		
Length of stay in place of death <u>20 Minutes</u> <small>(Specify in years, months and days)</small>		Street address <u>212 No. 26th St.</u> <small>(If rural, give R. F. D. and Box No.)</small>		
3. (a) FULL NAME <u>Harrison Lee</u>		3. (c) Social Security No. <u>000</u>		If Foreign Born How Long in U. S.? Yrs.
3. (b) if veteran, name war _____		3. (c) Social Security No. _____		
4. Sex <u>Male</u>	5. Color or Race <u>Colored</u>	6. (a) Single, widowed, married, divorced <u>Married</u>		
6. (b) Name of husband or wife <u>Queen Ester Lee</u>		6. (c) Age of husband or wife if alive <u>30</u> years		
7. Birth date of deceased <u>November - 1906</u> <small>(Month) (Day) (Year)</small>		7. Birth date of deceased <u>Nov. 1906</u> <small>(Month) (Day) (Year)</small>		
8. AGE: Years <u>38</u> Months <u>8</u> Days _____ If less than one day _____ hr. _____ min.				
9. Birthplace <u>Marengo County, Alabama</u> <small>(City, town, or county) (State or foreign country)</small>				
10. Usual occupation <u>Barber</u>				
11. Industry or business _____				
MOTHER	12. Name <u>Harly Lee</u>			
	13. Birthplace <u>— Wash</u> <small>(City, town, or county) (State or foreign country)</small>			
	14. Maiden name <u>Lottie Lee</u>			
FATHER	15. Birthplace <u>— Wash</u> <small>(City, town, or county) (State or foreign country)</small>			
	16. Informant's signature <u>X (wife) Queen Ester Lee</u>			
	16. Address <u>212 No. 26th St., Birmingham</u>			
17. Place: burial or cremation <u>Robert Cemetery</u> Date <u>8/11/1946</u> <small>(Burial, cremation, or removal) (Month) (Day) (Year)</small>				
18. Name of Undertaker <u>Mary E. Strong</u>				
18. Address <u>400 - 7th St. S.W.</u>				
19. (a) <u>8/10/46</u> (b) <u>[Signature]</u> <small>(Date received and Registrar's signature)</small>				
		MEDICAL CERTIFICATION		
		20. Date of death: Month <u>August</u> day <u>5</u> year <u>1946</u>		
		21. I hereby certify that I attended the deceased from <u>8:45 P.M. August 5, 1946</u> , to <u>9:05 P.M. August 5, 1946</u> and that death occurred on the date stated above at <u>9:05 P.M.</u>		
		Immediate cause of death <u>Hemorrhage</u>		
		Due to <u>Gun shot wounds of chest and Abdomen</u>		
		Other conditions (Include pregnancy within 3 months of death) _____		
		Name of operation <u>166</u>		
		Date of operation <u>10.3</u>		
		At autopsy _____		
		22. If death was due to external causes, fill in the following: <u>Blow</u>		
		(a) Accident, suicide, or homicide (specify) <u>homicide</u>		
		(b) Date of occurrence <u>August 5 1946</u>		
		(c) Where did injury occur? <u>Birmingham Jefferson Ala.</u> <small>(City or town) (County) (State)</small>		
		(d) Did injury occur in or about home, on farm, in industrial place, in public place? <u>Public</u> <small>(Specify type of place)</small>		
		While at work? <u>Robert J. Smiley</u> (M. D. or other)		
		23. Signature <u>[Signature]</u> Date Signed <u>8-8-46</u>		

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NOTE INSTRUCTIONS ON OTHER SIDE

ANY ALTERATIONS VOID THIS DOCUMENT

This is an official certified copy of the original record filed in the Center of Health Statistics, Alabama Department of Public Health, Montgomery, Alabama. 2019-462-009-7

November 6, 2019

Nicole H. Rushing
Nicole Henderson Rushing
State Registrar of Vital Statistics