

Name
in
Full

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at	Town Salisbury P. G. H. Co.		County Wicomico		MARYLAND		
Date of death	1908	Month Dec.	Day 11 th	Age	Years 86	Months 5	Days 26
Sex	Male		Color or Race	Colored		Birth- place	Fruitland Md.
Occupation	Laborer		Where Residing if not at place of death		In Salisbury Md.		
Married, Single or Widowed	Widower		Name of Wife or Husband		Not Known		
Father's Name	Frost Pullett				Father's Birthplace	Wicomico Co. Md.	
Mother's Maiden Name	Not Known				Mother's Birthplace	Not known	
Name of person giving Information	A. G. Morris				How related to deceased	None	

CAUSES OF DEATH

125

PHYSICIAN
OR CORONER

Primary	Enlarged prostate & tags		How long	Several Mths.
Immediate	Incontinence and sloughing of prostate, secondary		How long	
Are the name, age, sex, color, date and place correctly given above?	Yes		Signature of Physician	F. H. Clemmons M. D.
			Address	Salisbury Md.
Accident or Suicide				