

THIS IS A PERMANENT RECORD  
(SEE REVERSE SIDE FOR ADDITIONAL SPACE)  
OR MUNICIPAL (SEE REVERSE SIDE FOR ADDITIONAL SPACE)

LOCAL REGISTRAR'S RECORD OF DEATH  
GEORGIA STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS

N. O. V. E.  
FORM  
12

PLACE OF DEATH  
COUNTY OF Franklin

MIL. DIST. No. 264  
TOWN OR Cornesville, Ga.  
CITY No.  
IF DEATH OCCURRED IN HOSPITAL OR INSTITUTION, GIVE ITS NAME (INSTEAD OF STREET AND NUMBER.) ST. REG. DIST. No. 264 REGISTERED No. 10

2 FULL NAME Mrs. A. L. Vaughn  
RESIDENCE, CITY Cornesville, Ga.

18 LENGTH OF RESIDENCE IN CITY OR TOWN WHERE DEATH OCCURRED  
PERSONAL AND STATISTICAL PARTICULARS  
3 SEX Female 4 COLOR OR RACE white 5 SINGLE widowed  
6 MARRIED widowed  
7 MARRIED, WIDOWED, OR DIVORCED  
8 (OR) WIFE OF A. L. Vaughn  
9 DATE OF BIRTH, (MO.) Oct DAY 13 YEAR 1877  
7 AGE 40 YRS. 6 MOS. 13 DYS.  
IF LESS THAN 2 YEARS  
STATE IF BREAST FED. YES. No. IF LESS THAN 1 DAY. HRS. MINS.  
8 OCCUPATION  
(A) TRADE, PROFESSION OR PARTICULAR KIND OF WORK Franklin  
(B) GENERAL NATURE OF INDUSTRY, BUSINESS OR ESTABLISHMENT IN WHICH EMPLOYED (OR EMPLOYER)  
9 BIRTHPLACE (STATE OR COUNTRY) Franklin co. Ga.

10 NAME OF FATHER J. J. Oliver  
11 BIRTHPLACE OF FATHER (STATE OR COUNTRY) Franklin co. Ga.  
12 MAIDEN NAME OF MOTHER Mary Pitts  
13 BIRTHPLACE OF MOTHER (STATE OR COUNTRY) S.C.

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE  
(INFORMANT) L. L. Oliver  
(ADDRESS) Cornesville

15 DATE OF DEATH March 26  
16 DATE OF DEATH March 26  
17 I HEREBY CERTIFY, THAT I ATTENDED DECEASED FROM 3-20 1928 TO 3-26 1928  
THAT I LAST SAW HER ALIVE ON 3-26 1928 AND  
THAT DEATH OCCURRED, ON THE DATE STATED ABOVE, AT 9 P. M.  
THE CAUSE OF DEATH WAS Consumption

(DURATION) YRS. MOS. DYS.  
CONTRIBUTORY (SECONDARY)  
(DURATION) 5 YRS. 8 MOS. 26 DYS.  
WHERE WAS DISEASE CONTRACTED, IF NOT AT PLACE OF DEATH.  
DID AN OPERATION PRECEDE DEATH? no DATE OF  
WAS THERE AN AUTOPSY? no WHAT TEST CONFIRMED DIAG.  
NOSIS  
(SIGNED) G. M. Parker M. D.  
3-26 1928 (ADDRESS) Cornesville, Ga.  
19 PLACE OF BURIAL, CREMATION, OR REMOVAL DATE  
Cross Roads 3-27 1928  
20 UNDERTAKEN ADDRESS  
B. R. Ginn Cornesville, Ga.

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H. J. Ramsey