

FEDERAL BUREAU OF INVESTIGATION
| CERTIFICATE OF DEATHState File No. _____
Cantonment's No. _____

BIRTH NO.		MIDDLE INIT. & S.	
1. Place of Death		2. Usual Residence (Where deceased lived; if institution, residence before admission)	
(a) County PAULDING	(b) State GA? (c) County PAULDING		
(d) City or Town HIRAM (RURAL)	(e) Length of Stay (in this place) 1 YEAR		
(f) (If Outside City or Town Limits, Add Rural)			
3. Name of Deceased		4. Date of Death	
(a) (Type or Print) GEORGIA ANN	(b) (Said) SINYARD	(c) (Month) 12	(d) (Year) 1949
(e) (Type or Print) GEORGIA ANN	(f) (Said) SINYARD		
(g) (Type or Print) GEORGIA ANN	(h) (Said) SINYARD		
(i) (Type or Print) GEORGIA ANN	(j) (Said) SINYARD		
5. Social Occupation (Give kind of work done during year of reporting (job, even if retired))		6. Social Security No.	
Housewife		XXXXXX	
7. Cause of Death (State or foreign country)		8. City of Death	
Paulding Co. Ga.		Paulding Co. Ga.	
9. Father's Name		10. Mother's Maiden Name	
George R Parson		Emily Wells	
11. Was Deceased Ever in U.S. Armed Forces? (Yes, No, or Unknown)		12. Social Security No.	
XXXXXX		R. F. Sinyard	
13. Cause of Death (State or foreign country)		14. Date of Death	
Paulding Co. Ga.		12/7/49	
15. Medical Certification		16. Autopsy	
(a) Condition or complication directly leading to death		YES ☐ NO ☒	
(b) Cause to above cause			
(c) Underlying cause of death			
17. Other Significant Conditions			
(State or foreign country)			
18. Date of Operation		19. Major Findings of Operation	
20. Discharge		21. Place of Death (e.g., in or about home, hotel, industry, street, other bldg., etc.)	
Discharge		Discharge	
22. Time of Death		23. How did death occur?	
Discharge		Discharge	
24. I hereby certify that I attended the deceased from _____ 1949 to _____ 1949 and that death occurred _____ 1949.			
25. Signature		26. Address	
Dr. J. P. Griffith		Hiram, Ga.	
27. Date Signed		28. Date Signed	
12/12/49		12/12/49	
29. Final Cause		30. Date	
Burial		Dec. 8, 1949	
31. Name of Cemetery or Crematory		32. Location (City or Town)	
Bethany Christian		Paulding Ga.	
33. Signature		34. Signature	
MARTIN RAINWATER FUNERAL HOME		MARTIN RAINWATER FUNERAL HOME	

Rev. 1-1-48

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STRIP: CHECK CERTIFICATE CAREFULLY