

## 1. PLACE OF DEATH

## CERTIFICATE OF DEATH

File No.—For State Registrar Only.

County of RichlandSTATE OF SOUTH CAROLINA.  
Bureau of Vital Statistics  
State Board of Health

13426

Township of .....

Registration District No. 389Registered No. 672

or

Inc. Town of .....

(For use of Local Registrar)

or

City of .....

(If death occurred in a hospital or in attention given the NAME instead of street and number.)

2. FULL NAME Hyman J. Scoggin

Residence In City..... Yrs. Mos. Days.

## PERSONAL AND STATISTICAL PARTICULARS

## MEDICAL CERTIFICATE OF DEATH

3 SEX M 4 COLOR OR RACE W 5 SINGLE, MARRIED, WIDOWED, OR DIVORCED. Married  
(Write the word)16 DATE OF DEATH Aug 16<sup>th</sup> 1923  
(Month) (Day) (Year)

6 DATE OF BIRTH .....

17 I HEREBY CERTIFY that I attended deceased from July 26  
1923 to Aug 16, 1923 that I last saw him alive on Aug 167 AGE 37 yrs. 0 mos. 0 days. 1 year if less than 1 day. 0 hrs. or 0 min.?18 7 P. m. The CAUSE OF DEATH\* was as follows: .....8 OCCUPATION (a) Trade, profession, or particular kind of work. Pitcher  
(b) General nature of industry, business, or establishment in which employed (or employer). Cola B. B. ClubCerebral tumor  
(Duration)..... yrs. mos. 21 days9 BIRTHPLACE (State or Country) Texas

Contributory (SECONDARY) .....

10 NAME OF FATHER Mr Scoggin11 BIRTHPLACE OF FATHER (State or Country) Texas12 MAIDEN NAME OF MOTHER Sout Koon13 BIRTHPLACE OF MOTHER (State or Country) " "

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant) E. W. Walker  
(Address) Charleston S.C.18 Where was disease contracted? at place of death?Did an operation precede death? NO Date of .....Was there an autopsy? 1 1/2What test confirmed diagnosis? Autopsy(Signed) J. Hyman Scoggin M. D.  
19 (Address) Richland, S.C.

\*State the Disease Causing Death, or, in Cases from Violent Causes state (1) Means of Injury, and (2) whether Accidental, Suicidal or Homicidal.

20 Aug 17 1923 A. J. Seran  
LOCAL REGISTRAR18 Place of Burial or Removal Winters Tex DATE OF BURIAL 8-16-2320 UNDERTAKER Wm. W. Winters ADDRESS Columbia