

# STANDARD CERTIFICATE OF DEATH

1. Place of Death

County Maricopa State ARIZONA

City or Town Phoenix

2. Full Name

THOMAS O'BRIEN

Address \_\_\_\_\_

Personal and Statistical Particulars

Sex	60 <del>61</del>	Single, Married, Wid- owed or Divorced
M	Amer	
S		

Age 28 yrs

Birthplace ---

Burial, Cremation or Removal:

Place Pittsburg, Pa.

Undertaker Mohn & Easterling

Medical Certificate

Date of Death Feb. 3, 1901

Cause Tuberculosis

Duration ----

W. C. Robbins  
Doctor or Attendant

Filed \_\_\_\_\_

\_\_\_\_\_  
Registrar