

COUNTY OF SAN JOAQUIN

STOCKTON, CALIFORNIA

1 PLACE OF DEATH, DIST. No. 3950

California State Board of Health

County of San Joaquin

BUREAU OF VITAL STATISTICS

State Index No.

City or Town of Stockton

STANDARD CERTIFICATE OF DEATH

Local Registered No. 451

or Rural Registration District San Joaquin (Rough & Ready Island St.; Ward)

[If death occurred in a hospital or institution, give its NAME instead of street and number and fill out Nos. 18a and 18b.]

2 FULL NAME River Bridge Edna G. Walker

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL CERTIFICATE OF DEATH

3 SEX Female 4 COLOR OR RACE white 5 SINGLE, MARRIED, WIDOWED, OR DIVORCED Married

16 DATE OF DEATH Dec 1 - 1922

17 If married, widowed, or divorced HUSBAND of (or) WIFE of Robert A. Walker

17 I HEREBY CERTIFY That I attended deceased from Aug 1922 to Dec 1 1922

8 DATE OF BIRTH

that I last saw her alive on Dec 1 1922

9 AGE 42 years months days or min. If LESS than 1 day, hrs. min.

and that death occurred on the date stated above at 9 P.M. The CAUSE OF DEATH* was as follows:

10 OCCUPATION (a) Trade, profession, or particular kind of work Housewife (b) General nature of industry, business, or establishment in which employed (or employer)

Cancer of the Uterus

11 BIRTHPLACE (State or country city or town) Washington

and more (Duration) 1 years months days

12 NAME OF FATHER George Hiller

Contributory (Duration) years months days

13 BIRTHPLACE OF FATHER (city or town) do not know

18 Where was disease contracted if not at place of death?

14 MAIDEN NAME OF MOTHER Jennie Moran

Did an operation precede death? NO Date of

15 BIRTHPLACE OF MOTHER (city or town) do not know

Was there an autopsy? NO

16a LENGTH OF RESIDENCE At Place of Death 6 years months days (Primary registration district) (if nonresident, give city or town and state)

What test confirmed diagnosis? (Signed) E. L. Blackmun M. D. Dec 2 1922 (Address) Stockton, Calif

In California 27 years months days How long in U.S., if of foreign birth? years months days

*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES, state (1) MEANS OF INJURY; and (2) whether (probably) ACCIDENTAL, SUICIDAL, or HOMICIDAL. (See reverse side for additional space.)

17 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) Robert O. Moran (Address) Rough & Ready Island

19 PLACE OF BURIAL OR REMOVAL Rural Cemetery DATE OF BURIAL Dec 5 - 1922

18 Filed 12-5-22 Registered or Deputy Registrar Katherine Walker

20 UNDERTAKER De Yong & Conklin ADDRESS Stockton EMBALMER'S LICENSE No. 1317

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA COUNTY OF SAN JOAQUIN

DATE ISSUED APR 19 2012



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Kenneth W. Blakemore, Recorder SAN JOAQUIN COUNTY, CALIFORNIA

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