

KENTUCKY DEATH RECORDS, 1852-1953

Form V, R. 1-4 FEDERAL SECURITY AGENCY U. S. PUBLIC HEALTH SERVICE NATIONAL OFFICE VITAL STATISTICS		COMMONWEALTH OF KENTUCKY Department of Health BUREAU OF VITAL STATISTICS CERTIFICATE OF DEATH		State File No. 50-116-6456 Registrar's No. 31	
Registration District No. 15		Primary Registration District No. 3941			
1. PLACE OF DEATH a. COUNTY ALLEN		2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission) a. STATE KENTUCKY b. COUNTY ALLEN			
b. CITY (if outside corporate limits, write RURAL and give township) RURAL - ALLEN SPRINGS		c. LENGTH OF STAY (in this place) 10 YRS.		c. CITY (if outside corporate limits, write RURAL and give township) RURAL - ALLEN SPRINGS	
d. FULL NAME OF HOSPITAL OR INSTITUTION ALLEN SPRINGS		d. STREET ADDRESS ALLEN SPRINGS			
3. NAME OF DECEASED (Type or Print) BRODE GREEN SWINDLE		a. (First) BRODE		b. (Middle) GREEN	
e. (Last) SWINDLE		4. DATE OF DEATH (Month) (Day) (Year) 3 26 50			
5. SEX MALE		6. COLOR OR RACE WHITE		7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) WIDOWED	
8. DATE OF BIRTH 4-20-1873		9. AGE (in years last birthday) 76		10. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) FARMER	
11. BIRTHPLACE (State or foreign country) KENTUCKY		12. CITIZEN OF WHAT COUNTRY? U. S. - A.			
13. FATHER'S NAME PELIDGE SWINDLE		14. MOTHER'S MAIDEN NAME DELPHIA JENT			
15. WAS DECEASED EVER IN U. S. ARMED FORCES? NO		16. SOCIAL SECURITY NO. -		17. INFORMANT MRS. COY PARRISH	
18. CAUSE OF DEATH Enter only one cause per line for (a), (b), and (c)		I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) chronic myo. and cardiac		INTERVAL BETWEEN ONSET AND DEATH	
ANTECEDENT CAUSES *This does not mean the mode of dying, such as heart failure, asphyxia, etc. It means the disease, injury, or complication which caused death.		DUE TO (b) do not know			
II. OTHER SIGNIFICANT CONDITIONS Conditions contributing to the death but not related to the disease or condition causing death.		DUE TO (c) 4:14 - 041 - 17			
19a. DATE OF OPERATION		19b. MAJOR FINDINGS OF OPERATION		20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
21a. ACCIDENT (Specify) SUICIDE		21b. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg, etc.)		21c. (CITY, TOWN, OR TOWNSHIP) (COUNTY) (STATE)	
21d. TIME OF INJURY		21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>		21f. HOW DID INJURY OCCUR?	
22. I hereby certify that I attended the deceased from Jan 1950 to 3-26, 1950 , that I last saw the deceased alive on 28 24, 1950 , and that death occurred at 10:15 a.m. , from the causes and on the date stated above.					
23a. DATE SIGNED 4-4-50		23b. ADDRESS 123 Bowling Green		23c. SIGNATURE H. H. Freeman (Degree or title) M. D.	
24a. BURIAL, CREMATION, REMOVAL (Specify) BURIAL		24b. DATE 3-27-50		24c. NAME OF CEMETERY OR CREMATORY BANDY CEMETERY ALLEN COUNTY, KY.	
25a. DATE REC'D BY LOCAL REG. 4/10/50		25b. REGISTRAR'S SIGNATURE Herwardine H. H. H.		26. FUNERAL DIRECTOR SATTERFIELD-EAKIN-DAWSON ADDRESS BOWLING GREEN, KY.	

BRODE WAS THE SON OF PELIDGE SWINDLE AND PHILIDELPHIA EAST.
PELIDGE WAS THE SON OF JOB SWINDELL AND MARTHA DANIELS OF WILSON Co, TN.

BRODE GREEN SWINDLE

DEATH DATE: 26 MAR 1950
DEATH LOCATION: ALLEN
RESIDENCE LOCATION: ALLEN
AGE: 76
GENDER: MALE
ETHNICITY: WHITE
BIRTH DATE: 20 APR 1873
BIRTH LOCATION: KENTUCKY
FATHER'S NAME: PELIGE SWINDLE
MOTHER'S NAME: DELPHIA JENT

SOURCE INFORMATION: WWW.ANCESTRY.COM DATABASE: KENTUCKY DEATH RECORDS, 1852-1953