

# SOUTH CAROLINA DEATH RECORDS, 1821-1955

p. 10

CAUSE OF DEATH in plain terms so that it may be properly classified. Exact statement of OCCUPATION is very important. See instructions on back of certificate.

**CERTIFICATE OF DEATH**  
STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of Health

File No.—For State Registrar Only.  
**15043**

1. PLACE OF DEATH  
County of York  
Township of Broad River  
or  
Inc. Town of .....

Registration District No. 4015 Registered No. 35  
(For use of Local Registrar)  
(If death occurred in a Hospital or Institution give its NAME instead of street and number.)

2. FULL NAME William Alexander Ramsey Residence In City.....Yrs.....Mos.....Days.

PERSONAL AND STATISTICAL PARTICULARS			MEDICAL CERTIFICATE OF DEATH		
3 SEX <u>Male</u>	4 COLOR OR RACE <u>White</u>	5 MARRIAGE <u>Married</u>	16 DATE OF DEATH <u>September 20, 1921</u>		
6 DATE OF BIRTH <u>July 14, 1881</u>			17 I HEREBY CERTIFY, That I attended deceased from .....		
7 AGE <u>40 yrs. 2 mos. 6 dys.</u>			18 Where was disease contracted If not at place of death? .....		
8 OCCUPATION <u>Farmer</u>			19 ..... to ..... that I last saw h. alive on .....		
9 BIRTHPLACE <u>York Co. S.C.</u>			m. The CAUSE OF DEATH* was as follows: <u>Killed by lightning</u>		
10 NAME OF FATHER <u>J. P. Ramsey</u>			Contributory (SECONDARY) .....		
11 BIRTHPLACE OF FATHER <u>Cleveland Co. N.C.</u>			18 Where was disease contracted If not at place of death? .....		
12 MAIDEN NAME OF MOTHER <u>Mary Jane Erwin</u>			Did an operation precede death? Date of .....		
13 BIRTHPLACE OF MOTHER <u>York Co. S.C.</u>			Was there an autopsy? .....		
14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) <u>J. P. Ramsey</u> (Address) <u>Hickory Grove, S.C.</u>			What test confirmed diagnosis? (Signed) <u>D. N. Miller</u> M. D. <u>Oct 5, 1921</u> (Address) <u>Hickory Grove</u>		
15 <u>Oct 3, 1921</u> LOCAL REGISTRAR			*State the Disease Causing Death, or, in deaths from Violent Causes state (1) Means of Injury; and (2) whether Accidental, Suicidal or Homicidal.		
			19 Place of Burial or Removal <u>Hickory Grove Cem.</u> DATE OF BURIAL <u>Sept. 21, 1921</u>		
			20 UNDERTAKER <u>J. M. Wilkinson</u> ADDRESS <u>Hickory Grove S.C.</u>		

GRANDSON OF JOHN & MARGARET RAMSEY, GREAT GRANDSON OF  
ALEXANDER RAMSEY & AGNES DYE

**WILLIAM A RAMSEY**

DEATH DATE: 20 SEP 1921  
AGE AT DEATH: 40 YEARS  
BORN: 1881  
GENDER: MALE  
COLOR: WHITE  
COUNTY OF DEATH: YORK  
CERTIFICATE NUMBER: O15043

SOURCE INFORMATION: WWW.ANCESTRY.COM DATABASE: SOUTH CAROLINA DEATH RECORDS, 1821-1955