

VERIFY PRESENCE OF WATERMARK HOLD TO LIGHT TO VIEW

6010552

COMMONWEALTH OF VIRGINIA

1 PLACE OF DEATH DEPARTMENT OF HEALTH - DIVISION OF VITAL RECORDS
COUNTY OF Washington
MAGISTERIAL DISTRICT OF Abingdon
INC. TOWN OF Abingdon
CITY OF Town
REGISTRATION DISTRICT NO. 550
REGISTERED NO. 10396

2 FULL NAME William Hagg
(A) RESIDENCE No. 133 Main
Length of residence in city or town where death occurred 62 yrs.

PERSONAL AND STATISTICAL PARTICULARS
3 SEX Male
4 COLOR OR RACE White
5 SINGLE, MARRIED, WIDOWED, OR DIVORCED Married
6 DATE OF BIRTH July 30 1893
7 AGE 90 years 9 months 25 days
8 OCCUPATION OF DECEASED Harmer Maker

MEDICAL CERTIFICATE OF DEATH
16 DATE OF DEATH April 25 1924
17 I HEREBY CERTIFY, THAT I ATTENDED DECEASED FROM Nov 8 1822 TO Apr 25 1924
AND THAT DEATH OCCURRED, ON DATE STATED ABOVE, AT 4 P. M. THE CAUSE OF DEATH WAS AS FOLLOWS: Cardio-Vascular Renal Disease

9 BIRTHPLACE Abingdon Va
10 NAME OF FATHER Martin Hagg
11 BIRTHPLACE OF FATHER Abingdon Va
12 MAIDEN NAME OF MOTHER Sally Anderson
13 BIRTHPLACE OF MOTHER Abingdon Va

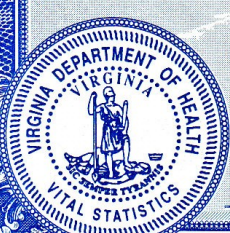
CONTRIBUTORY (SECONDARY)
18 WHERE WAS DISEASE CONTRACTED IF NOT AT PLACE OF DEATH?
DID AN OPERATION PRECEDE DEATH?
WAS THERE AN AUTOPSY?
WHAT TEST CONFIRMED DIAGNOSIS?
(SIGNED) W W Mc Chesney M. D.
5/11/1924 (ADDRESS) Abingdon Va

14 INFORMANT W. G. Hagg (Son)
15 FILED May 6 1924 J. L. Keller REGISTRAR

19 PLACE OF BURIAL, CREMATION, OR RE-MOVAL
20 UNDERTAKER

VOID IF ALTERED OR ERASED

VOID IF ALTERED OR ERASED



This is to certify that this is a true and correct reproduction or abstract of the official record filed with the Virginia Department Of Health, Richmond, Virginia
DATE ISSUED June 2, 2014
Janet M. Rainey, State Registrar

Do not accept unless on security paper with the seal of Virginia Department of Health, Vital Statistics in the lower left hand corner. Section 32.1-272, Code of Virginia, as amended.

VS 15B