

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

STATE OF CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

Form 5

PLACE OF DEATH, Dist. No. 3701 (To be inserted by Registrar)

County of San Diego City or Town of San Diego, Calif. or Rural Registration District

STATE OF CALIFORNIA DEPARTMENT OF PUBLIC HEALTH VITAL STATISTICS

140-21 29-010658 Local Registered No. 289

STANDARD CERTIFICATE OF DEATH

FULL NAME MACLOVIA LLATA DE DORIA

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

MARGIN RESERVED FOR BINDING WRITE PLAINLY WITH UNFADING INK - THIS IS A PERMANENT RECORD READ THE INSTRUCTIONS ON BACK OF THIS CERTIFICATE

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL CERTIFICATE OF DEATH

SEX Female COLOR OR RACE Mexican SINGLE, MARRIED, WIDOWED, OR DIVORCED Married

DATE OF DEATH February 6, 1929

Married, widowed, or divorced HUSBAND of (or) WIFE of Manuel Doria

I HEREBY CERTIFY, That I attended deceased from

DATE OF BIRTH November 16, 1866

Jan 28th 1927, to Feb 6th 1929

AGE 62 years 2 months 21 days or min.

that I last saw her alive on Feb 5th 1929 and that death occurred on the date stated above at 1:45 AM m.

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

The CAUSE OF DEATH was as follows: Bronchitis Pneumonia.

BIRTHPLACE (State or country city or town) Jimenez Tamps, Mexico

Contributory (Duration) - years - months - days

NAME OF FATHER Ramon Llata

Where was disease contracted if not at place of death?

BIRTHPLACE OF FATHER (city or town) (State or Country) Spain

Did an operation precede death? No Date of

MAIDEN NAME OF MOTHER Guadalupe Salinas

Was there an autopsy? No

BIRTHPLACE OF MOTHER (city or town) (State or Country) Jimenez, Tamps Mexico

What was confirmed diagnosis? (Phys. Exam. Signed) L.H. Redelings M.D. 2-6-1929 (Address) San Diego, Calif.

LENGTH OF RESIDENCE At Place of Death - years - months - days (Primary registration district) (If nonresident, give city or town and state) Linares, Mexico In California - 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.)

THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) R. Bonham (Address) 1752-4th St., San Diego, Cal.

PLACE OF BURIAL OR REMOVAL Linares, Mexico DATE OF BURIAL OR REMOVAL Feb. 8, 1929

UNDERTAKER Bonham Brothers Mortuary San Diego, Calif. EMBALMER'S LICENSE NO. 1740

FILED 2-7-29 Alex H. Loomis M.D. Registrar or Deputy

This is to certify that this document is a true copy of the official record filed with Vital Records.

DATE ISSUED

James Greene MD MS

JAMES GREENE, MD, MS STATE REGISTRAR OF VITAL RECORDS

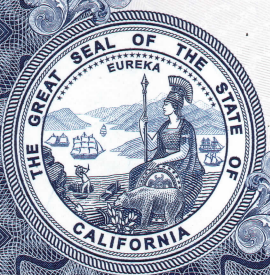
MAY 21 2019

This copy is not valid unless prepared on an engraved border, displaying the date, seal and signature of the State Registrar.

CACDPH--04



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ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE