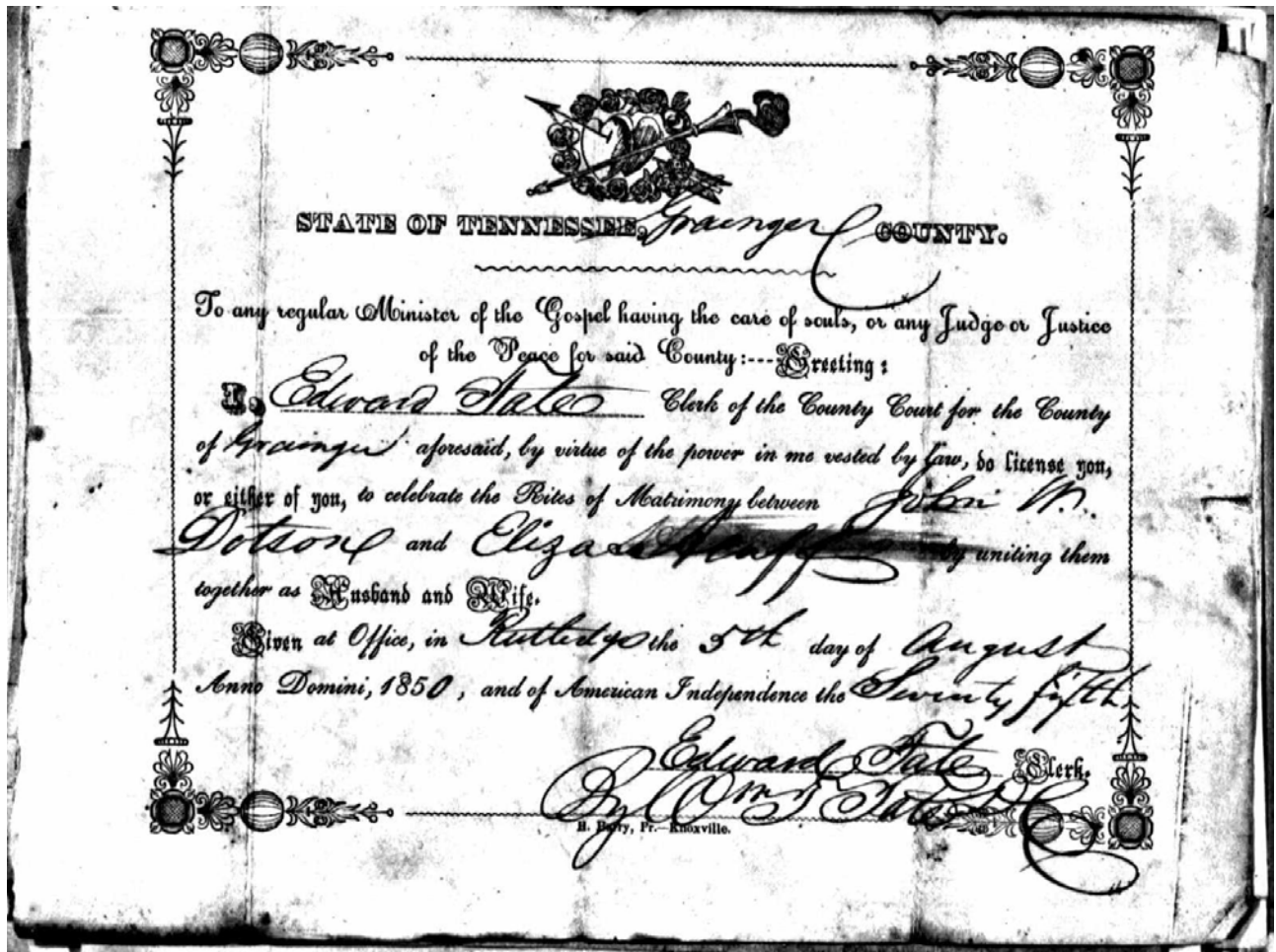




No Picture Available

Born: 07 Jan 1832 Hawkins, TN  
Married: 5 Aug 1850 John W Dotson  
Died: 11 June 1914 Hawkins, TN  
Parents: James Acuff & Sarah Harrell



Marriage bond between John W Dotson and Eliza Acuff

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD

Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state EXACTLY the cause of death, and the occupation may be properly classified. Exact statement of OCCUPATION is very important. See instructions on back of certificate.

1 PLACE OF DEATH, County <u>Hawkins</u>		STATE OF TENNESSEE STATE BOARD OF HEALTH Bureau of Vital Statistics CERTIFICATE OF DEATH		561 84
Civil Dist. <u>7</u> or Village <u>Church Hill</u> or City <u>Law</u> (No. _____, St.; _____ Ward)	Registration District No. <u>43707</u>	File No. _____		
2 FULL NAME <u>Eliza Dotson</u>		Primary Registration District No. <u>43707</u> Registered No. _____ <small>(If death occurred in a hospital or institution, give its NAME instead of street and number.)</small>		
PERSONAL AND STATISTICAL PARTICULARS		MEDICAL CERTIFICATE OF DEATH		
3 SEX <u>Female</u>	4 COLOR OR RACE <u>White</u>	5 SINGLE, MARRIED, WIDOWED, OR DIVORCED <u>widowed</u> <small>(Write the word)</small>	16 DATE OF DEATH <u>June 11, 1914</u> <small>(Month) (Day) (Year)</small>	
6 DATE OF BIRTH <u>January 7, 1832</u> <small>(Month) (Day) (Year)</small>		17 I HEREBY CERTIFY, That I attended deceased from <u>June 2, 1914</u> , to <u>June 11, 1914</u> , that I last saw her alive on <u>June 11, 1914</u> , and that death occurred, on the date stated above, at <u>9 am</u> .		
7 AGE <u>52</u> yrs. <u>5</u> mos. <u>4</u> ds. If LESS than 1 day, ____ hrs. or ____ min.?	8 OCCUPATION (a) Trade, profession, or particular kind of work <u>at home</u> (b) General nature of industry, business, or establishment in which employed (or employer) _____		The CAUSE OF DEATH* was as follows: <u>Protrusion Heart failure</u> <u>205a</u>	
9 BIRTHPLACE (State or country) <u>Granger County, Tenn</u>		Contributory _____ (Duration) ____ yrs. ____ mos. ____ ds.		
PARENTS	10 NAME OF FATHER <u>James Acuff</u>	(Signed) <u>J. M. Reeser</u> , M. D. (Duration) ____ yrs. ____ mos. ____ ds.		
	11 BIRTHPLACE OF FATHER (State or country) <u>Granger County, Tenn</u>	(Address) <u>Church Hill, Tenn</u>		
	12 MAIDEN NAME OF MOTHER <u>Eliza Acuff</u>	*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES, state (1) MEANS OF INJURY; and (2) whether ACCIDENTAL, SUICIDAL, OR HOMICIDAL.		
13 BIRTHPLACE OF MOTHER (State or country) <u>Granger County, Tenn</u>		18 LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRANSIENTS, OR RECENT RESIDENTS) At place of death ____ yrs. ____ mos. ____ ds. In the State ____ yrs. ____ mos. ____ ds. Where was disease contracted, if not at place of death? _____ Former or usual residence _____		
14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) <u>H. G. Bradley</u> (Address) <u>Church Hill, Tenn</u>		19 PLACE OF BURIAL OR REMOVAL <u>Union</u> DATE OF BURIAL <u>June 12, 1914</u>		
15 Filed <u>June 12, 1914</u> <u>D. S. Marusa</u> REGISTRAR		20 UNDERTAKER <u>Jim Reeser</u> ADDRESS <u>Church Hill, Tenn</u>		

Death Certificate for Eliza Acuff Dotson  
Document from online research at Ancestry.com