## Nova Scotia Historical Vital Statistics

www.novascotiagenealogy.com

Archie N. MacKinnon, died 1941 in Brook Village, Inverness County

Item can be found in Registration Year: 1941 - Book: 180 - Page: 799



## Communities, Culture and Heritage Nova Scotia Archives

As authorized by Section 21 of the Public Archives Act, S.N.S. 1998, c. 24, I hereby certify this copy of an historical vital statistics record in the custody of the Public Archives of Nova Scotia to be a true copy that can be admitted in evidence as prima facie proof of the authenticity and correctness of this historical vital statistics record and its contents without proof of the signature or appointment of the Provincial Archivist.

Signature

Office of the Provincial Archivist

8 February 2019

FORM 6 This form if placed in an envelope, marked "Dominion Statistics-Free, penalty for improper use \$300," and properly addressed will pass through the mail "FREE" PROVINCE OF NOVA SCOTIA—CERTIFICATE OF REGISTRATION OF DEATH 13 rook V. II Municipality of 1. PLACE Registered No. (For use of Registrar General only If in City or Town Brookvilles DEATH House No. (if death occurred in a hospital or institution, give the name instead of street and m 2. LENGTH OF STAY (in years, months and days)
(a) In City, Town or Rural Division where death occurred. ..(b) In Province.. 3. NAME OF DECEASED.... (Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient) RESIDENCE No.. 5. Nationality 6. Racial Origin 7. Single, Married, (Citizenskip) Widowed or Divorced ALL ISSUE 23. DATE OF DEATH (write the word) Scolch 24. I HEREBY CERTIFY that I attended deceased from: (Province or Country) and last saw h.A. 9. DATE OF BIRTH ... (Month) (Day) CAUSE OF DEATH Years Months Days If less than one day old Immediate cause Give disease, injury or complica-tion which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc. 10. AGE in hrs. or.....min 11. Trade, profession or kind of work as spinner, teamster, office clerk, etc. Morbid conditions, if any, giving rise to immediate cause (stated in order 12. Kind of industry or business, as cottonproceeding backwards from immill, lumbering, bank, etc., mediate cause). 13. Date deceased last worked 14. Total yrs. spent in at this occupation. Other merbid conditions (if important) this occupation. contributing to death but not 15. If married give name of wife causally related to I mmediate cause. or husband of deceased .... 25. If a woman, was the death associated with pregnancy? Mickenson 26. Was there a surgical operation? Les Date of operation 17. BIRTHPLACE .Was there an autopsy?...... (Province or Country) Christene mai Honald 27. If death was due to external causes (violence) fill in also the following:-Accident, suicide or homicide?.. 19. BIRTHPLACE Manner of injury. (How sustained) Nature of injury. Specify whether injury occurred in Industry, in home, or in public place. Relationship to deceased Signed by 21. Place of Burial, Cremation or Removal STRACLOFILE Date of burial or removal. 28. Registrar's Record Number. 29. Filed March 3rd 22. UNDERTAKER.