

**Death Certificate, VA, Arlington, Robert T Bryan Jr 1974**

COMMONWEALTH OF VIRGINIA - CERTIFICATE OF DEATH  
DEPARTMENT OF HEALTH - BUREAU OF VITAL RECORDS AND HEALTH STATISTICS -  
RICHMOND

REGISTRATION  
AREA NUMBER 106

CERTIFICATE  
NUMBER 852

STATE FILE  
NUMBER 74-034927

1. FULL NAME OF DECEASED  
(first) (middle) (last)  
**ROBERT T. BRYAN JR**
2. SEX  
male female  
[x] [ ]
3. DATE OF DEATH  
(mo) (day) (year)  
Nov. 21 1974
4. AGE OF DECEASED  
82 years
5. COLOR OR RACE  
Cauc.
6. NAME OF HOSPITAL OR (if none, so state)  
INSTITUTION OF DEATH No. VA Drs. Hospital
7. COUNTY OF DEATH(if independent city, leave blank)  
Arlington
8. CITY OR TOWN (if rural, so state)  
inside city or town limits?  
yes no  
[ ] [ ]
9. STREET ADDRESS OR RT. NO. OF DEATH ,OF PLACE OF DEATH  
601 S. Carlin Springs Road
10. STATE (OR FOREIGN COUNTRY) OF DECEASED'S RESIDENCE  
Virginia
11. COUNTY OF DECEASED'S (if independent city, leave blank)  
Arlington
12. CITY OR TOWN  
inside city or town limits?  
Yes No  
[ ] [ ]
13. STREET ADDRESS OR RT. NO. OF RESIDENCE  
4301 Columbia Pike Apt. 435

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ZIP CODE  
22204

14. NAME OF FATHER OF DECEASED  
**ROBERT T. BRYAN, SR.**

15. MAIDEN NAME OF DECEASED'S  
**LULU FREELAND**

16. DECEASED CITIZEN OF WHAT COUNTRY  
USA

17. MARRIED ☒ NEVER MARRIED ☐  
WIDOWED ☐ DIVORCED ☐

18. IF MARRIED OR WIDOWED, NAME OF SPOUSE  
IF DIVORCED LEAVE BLANK  
**GERTRUDE I. BRYAN**

19. (BLANKED OUT)

20. IF VETERAN, name war, or if peacetime only, so state  
No

21. BIRTHPLACE (state or coutry)  
China

22. DATE OF BIRTH  
(mo.) (day) (year)  
Oct. 13, 1892

23. USUAL OR LAST OCCUPATION  
Retired

24. KIND OF BUSINESS OR INDUSTRY  
Lawyer

25. INFORMANT OR SOURCE OF INFORMATION  
**GERTRUDE I. BRYAN**

26. CAUSE OF DEATH (Enter only one cause per line)	INTERVAL
IMMEDIATE CAUSE (A) Shock	2 days
DUE TO (B) Pneumonia	3 days
DUE TO (C) Severe Parkinson's Disease	6 months

DATE 11/21/1974

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Transcribed from original documents by Brent R. Brian & Martha M. Brian.

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