

County of Eaton Department of State—Division of Local Statistics

Township of _____ or Village of Vermontville **TRANSCRIPT OF CERTIFICATE OF DEATH—LOCAL REGISTER**

Registered No. 6

[If death occurred in a Hospital or Institution, give its NAME instead of street and number. If away from usual residence, give "Special Information" below.]

FULL NAME Ann Eliza Datterlee

PERSONAL AND STATISTICAL PARTICULARS

SEX Female COLOR White

DATE OF BIRTH (Month) June (Day) 30 (Year) 1834

AGE 77 YEARS, 9 MONTHS, 9 DAYS

SINGLE, MARRIED, WIDOWED, OR DIVORCED Widowed

AGE AT MARRIAGE, NUMBER OF CHILDREN { If married, age at (first) marriage _____ years Parent of _____ children, of whom _____ are living

BIRTHPLACE (State or country) New York

NAME OF FATHER Coy

BIRTHPLACE OF FATHER (State or country) N.Y.

MAIDEN NAME OF MOTHER Don't know

BIRTHPLACE OF MOTHER (State or country) "

OCCUPATION Housekeeper

THE ABOVE STATED PERSONAL PARTICULARS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF

(Informant) Mrs. Chas. Lamb
(Address) V.ville

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH (Month) June (Day) 29 (Year) 1901

I HEREBY CERTIFY, That I attended deceased from March 3 1901, to June 29 1901, that I saw her alive on June 29 1901, and that death occurred, on the date stated above, at 2 P. M.

The CAUSE OF DEATH was as follows:
Paralysis Arteriosa
Cornea Collapse

Contributory Disease of throat
Feeble

(Signed) Chas. Lamb M. D.
June 30 1901. (Address) Vermontville

SPECIAL INFORMATION only for Hospitals, Institutions, Transients or Recent Residents:
Former or usual residence _____ How long at _____ place of death? _____ Days
Where was disease contracted, if not at place of death? _____

PLACE OF BURIAL OR REMOVAL Woodlawn DATE OF BURIAL July 1 1901

UNDERTAKER R. L. Hammond & Co. ADDRESS V.ville

Filed June 30 1901 A TRUE COPY cc-stallentuck
Registrar

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

MARGIN RESERVED FOR BINDING.

Form 93-11-05-500 bks., 100 pages. Form 100 bks., 100 pages.