

PLACE OF DEATH

STATE OF MICHIGAN

County of Caton

Department of State—Division of Vital Statistics

TRANSCRIPT OF CERTIFICATE OF DEATH—LOCAL REGISTER

Township of _____
 or
 Village of Vermontville
 or
 City of _____ (No. _____ St.; _____ Ward)

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 Adeline Amanda Clough

PERSONAL AND STATISTICAL PARTICULARS

SEX Female COLOR White

DATE OF BIRTH (Month) Aug (Day) 18 (Year) 1816

AGE 96 YEARS 1 MONTHS 6 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) Vermont

NAME OF FATHER Thos Shepherd

BIRTHPLACE OF FATHER (State or country) Unknown

MAIDEN NAME OF MOTHER Abigail Hill

BIRTHPLACE OF MOTHER (State or country) Canada

OCCUPATION Housekeeper

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

(Informant) Min Clough
 (Address) W. Fille

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH (Month) Sept (Day) 24 (Year) 1912

I HEREBY CERTIFY, That I attended deceased from Sept 1 1912, to Sept 24 1912, that I saw her alive on Sept 23 1912, and that death occurred, on the date stated above, at 7 P M.

The CAUSE OF DEATH was as follows:

Old age

Contributory _____ (DURATION) 1 mo DAYS

(Signed) J. S. McEachern M. D.

Sept 20 1912 (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 Cem DATE OF BURIAL 9-26 1912

UNDERTAKER R. L. Hammond ADDRESS W. Fille

Filed Sept 25 1912 A TRUE COPY cc Ballantyne Registrar

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

MARGIN RESERVED FOR BINDING.

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