

1 PLACE OF DEATH
 County Lehi
 Township
 Village Vermahle
 City

MICHIGAN DEPARTMENT OF HEALTH

Division of Vital Statistics

TRANSCRIPT OF CERTIFICATE OF DEATH—LOCAL REGISTER

Registered No. 11

2 FULL NAME Agnes Lide

(a) Residence No. St., Ward
 (Usual place of abode) (If non-resident give city or town and state)
 Length of residence in city or town where death occurred yrs. mos. ds. How long in U. S., if of foreign birth? yrs. mos. ds.

PERSONAL AND STATISTICAL PARTICULARS

3 SEX Female 4 Color or Race White 5 Single, Married, Widowed or Divorced (Write the word) Widowed

5a If married, widowed or divorced HUSBAND of (or) WIFE of O. J. Lide

6 DATE OF BIRTH (Month, day and year) June 21 1858

7 AGE Years Months Days If LESS than 1 day..... hrs. OR..... m'n.
66 2 3

8 OCCUPATION OF DECEASED
 (a) Trade, profession, or particular kind of work Housekeeper
 (b) General nature of industry, business, or establishment in which employed (or employer)
 (c) Name of employer. mae Larnell

9 BIRTHPLACE (city or town) (state or country) Ontario

10 NAME OF FATHER Levi Stauffer

11 BIRTHPLACE OF FATHER (city or town) (state or country) Ontario

12 MAIDEN NAME OF MOTHER Christina Ann Elliot

13 BIRTHPLACE OF MOTHER (city or town) (state or country) Ontario

14 Informant Mrs. Clara Hoffmann
 (Address) Vermahle, Mich

15 Filled 8/26, 1924 by H. Park Registrar.

MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH (Month, day and year) Aug 24 1924

17 I HEREBY CERTIFY, That I attended deceased from Aug 2, 1924, to Aug 24, 1924, that I last saw h. r. alive on Aug 24, 1924, and that death occurred on the date stated above at 6 P.M.

The CAUSE OF DEATH* was as follows:
apoplexy

(duration) yrs. mos. ds.

CONTRIBUTORY (Secondary) arteria & sclerosis
 (duration) 2 yrs. mos. ds.

18 Where was disease contracted
 If not at place of death?

Did an operation precede death? Date of

Was there an autopsy?

What test confirmed diagnosis?

(Signed) B. L. O. McRylin M. D.
8/25, 1924. Address Vermahle

19 PLACE OF BURIAL, CREMATION, OR REMOVAL Don. Mt. Date of Burial 327 1924

2 UNDERTAKER W. L. Feighner Address Verhale - Mich

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

MARGIN RESERVED FOR BINDING

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