Returned to County clerk JUN 1 - 1941

SOCIAL SECURITY NO. None

If veteran, name war

CERTIFICATE OF DEATH

MICHIGAN DEPARTMENT OF HEALTH

Bureau of Records and Statistics

State File No.

FULL NAME Mary Counterman

Local File No. 2

PLACE OF DEATH:

County Eaton

Township

City or Village Vermontville

Name of hospital (If not in hospital, give street address.)

Length of stay: In hospital In this community 40 yrs

USUAL RESIDENCE OF DECEASED:

State Mich. County Eaton

Township

City or Village Vermontville Mich.

Street No.

If foreign born, how long in U. S. A.? years

Sex	Color or Race	Single, Married, Widowed or Divorced
Female	White	Widowed

NAME OF HUSBAND or WIFE

Name John Counterman Age, if alive Dead

Birth date of deceased Nov 19 - 1884

Age: Years	Months	Days	If less than one day
56	4	12	hrs. min.

Birthplace Chester . Mich

Usual occupation Housewife

Industry or business

Father: Name Wm Ransome

Father: Birthplace Unknown

Mother: Maiden Name Unknown

Mother: Birthplace Unknown

Informant Mrs Glenn Thompson

Address Vermontville . Mich

(Burial,) cremation or removal (Circle the word which applies)

Place Vermontville . Mich.

Cemetery Woodlawn Date 4/3, 1941

Funeral director's signature K.K. Ward

Address Vermontville Mich

Filed 4-3, 1941 A. L. Bamingham Local Registrar

MEDICAL CERTIFICATION

Date of death March 31st 1941

I hereby certify that I attended the deceased from Jan. 22, 1941 to March 31, 1941. I last saw h[illegible] alive on Mar. 30, 1941. Death is said to have occurred on the date stated above at 3 P M.

	Duration
Immediate cause of death	
apoplexy	3 yrs
Other contributory causes of importance	
Major findings and dates: Of operations	
Of autopsy	

In case of violence, state if accident, homicide or suicide

Date, 19

Where did injury occur? (Specify city, county, or state)

In industry, home or public place?

Was disease or injury related to occupation of deceased?

Signature C L D McLaughlin M D

Address Vermontville . Mich.

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