

SOCIAL SECURITY NO.

5-16-9629

If veteran, name war

none

CERTIFICATE OF DEATH

MICHIGAN DEPARTMENT OF HEALTH

Bureau of Records and Statistics

State File No.

ULL
AME

William H. Northrup

Local File No.

1

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

49 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

Male

Color or Race

White

Single, Married, Widowed

or Divorced

Married

NAME OF HUSBAND or WIFE

Name Leta Northrup

Age, if alive

44

Birth date of deceased

2-13-

1897

Age: Years

Months

Days

If less than one day

49

0

14

hrs.

min.

Birthplace

Morgan, Mich.

Usual occupation

Merchant

Industry or business

Grocery Store

Father

Name

Theodore B. Northrup

Birthplace

Ohio

Mother

Maiden Name

Malena Williams

Birthplace

Ohio

Informant

Mrs Leta Northrup

Address

Vermontville, Mich.

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

Place

Vermontville, Mich.

Cemetery

Woodlawn

Date

3/5, 1946

Funeral director's

signature

K. K. Ward

Address

Vermontville, Mich.

Filed

3/1, 1946

G. L. Bannington

Local Registrar

MEDICAL CERTIFICATION

Date of death

2/27

1946

I hereby certify that I attended the deceased from

1935 to 2-27, 1946. I last saw him alive on

2-27, 1946. Death is said to have occurred on the

date stated above at 12:45 P. M.

Duration

Immediate cause of death

Coronary Atherosclerosis 7 days

Other contributory causes of importance

Myocardial damage

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

L. Donald Kelley, D.O.

Address

Vermontville, Mich.

435