If vataran name war	E OF DEATH MENT OF HEALTH State File No. Local File No.
PLACE OF DEATH: County Township City or Village Vimontalle Name of hospital 369 West Main St. (If not in hospital, give street address.) Length of stay: In hospital In this community	USUAL RESIDENCE OF DECEASED: State Much: County Eaton Township City or Village Virmontville Street No. 369 West Main Street If foreign born, how long in U. S. A.? years
Sex Color or Race Single, Married, Widowed or Divorced Willow NAME OF HUSBAND or WIFE Name Frank Age, if alive Used Birth date of deceased Married, Widowed or Divorced Willow NAME OF HUSBAND or WIFE Name Frank Age, if alive Used Birth date of deceased Married, Widowed or Divorced Willow NAME OF HUSBAND OF WIFE Name Frank Age, if alive Used Birth date of deceased Married, Widowed or Divorced Willow NAME OF HUSBAND OF WIFE Name Frank Age, if alive Used Birth date of deceased Married, Widowed or Divorced Willow NAME OF HUSBAND OF WIFE Name Frank Age, if alive Used Birth date of deceased Married, Widowed or Divorced Willow NAME OF HUSBAND OF WIFE Name Frank Age, if alive Used Birth date of deceased Married, Widowed or Divorced Willow NAME OF HUSBAND OF WIFE Name Frank Age, if alive Used Birth date of deceased Married, Widowed or Divorced Willow NAME OF HUSBAND OF WIFE Name Frank Age, if alive Used Age: Years Months Days If less than one day	MEDICAL CERTIFICATION Date of death November 16 1946 1 hereby certify that I attended the deceased from 1970. 6 19.3.5 to 1946. I last faw here alive on 1946. I last faw here alive on 1946. 1 last faw here alive on
Birthplace Virgoritalle Township Usual occupation Natived Industry or business	Immediate cause of death. Actuis Selevers 11 yrs
Name milton more Birthplace New York Maiden Name Lydia Heninense	Other contributory causes of proportance.
Informant Francis Kroger Address Vermontville. Mich.	Major findings and dates: Of operations. Of autopsy
Place V emontville, mili. Cometery Word lawn Date Nov. 18, 1946	In case of violence, state if accident, homicide or suicide
Address V emontville mich . Pilod N. N. 18', 1946 a. L. Barninghom	(Specify city, county, or state) In industry, home or public place? Was disease or injury related to occupation of deceased? Signature Lamontally Medicine

...years

alive on lon the

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