

MARGIN RESERVED FOR BINDING.

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

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

PLACE OF DEATH

County of Eaton

STATE OF MICHIGAN

Department of State—Division of Vital Statistics

Township of _____

TRANSCRIPT OF CERTIFICATE OF DEATH—LOCAL REGISTER

or
Village of Vermontville

City of _____ (No. _____ St.; _____ Ward)

Registered No. 11

[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 Naomi Snowold Dickinson

PERSONAL AND STATISTICAL PARTICULARS

SEX Female COLOR White

DATE OF BIRTH (Month) (Day) (Year)
July 16 1813

AGE 94 YEARS 5 MONTHS 9 DAYS

SINGLE, MARRIED, WIDOWED, OR DIVORCED Single

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 Orin Dickinson

BIRTHPLACE OF FATHER (State or country) Vermont

MAIDEN NAME OF MOTHER Salome Dickinson

BIRTHPLACE OF MOTHER (State or country) Vermont

OCCUPATION Housekeeper

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

(Informant) Mrs Nellie Church

(Address) Vermontville

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH (Month) (Day) (Year)
Dec 25 1907

I HEREBY CERTIFY, That I attended deceased from June 17, 1907, to Dec, 1907, that I saw her alive on last full date in Sept, 1907, and that death occurred, on the date stated above, at 1 P. M.

The CAUSE OF DEATH was as follows:

Senile Gangrene

(DURATION) _____ DAYS

Contributory _____ (DURATION) _____ DAYS

(Signed) C. S. Snell M. D.

Dec 24, 1907 (Address) Vermontville

SPECIAL INFORMATION only for Hospitals, Institutions, Transients or Recent Residents:

Former or usual residence _____ How long at place of death? _____

Where was disease contracted, if not at place of death? _____

PLACE OF BURIAL OR REMOVAL Woodlawn Cemetery DATE OF BURIAL Dec 28 1907

UNDERTAKER C. E. Hammond ADDRESS Vermontville

Filed Dec 27, 1907 A TRUE COPY DR Finley Registrar