...CE OF DEATH

County Eaton

Township ... Vermontville

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

STATE OF MICHIGAN

Department of State—Division of Vital Statistics

TRANSCRIPT OF CERTIFICATE OF DEATH—LOCAL REGISTER

Registered No. 10

[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 Agnes Gayle Flathau

PERSONAL AND STATISTICAL PARTICULARS	MEDICAL CERTIFICATE OF DEATH
SEX Female — COLOR White	DATE OF DEATH (Month) Nov (Day) 15 (Year) 1907
DATE OF BIRTH (Month) December (Day) 2 (Year) 1884	I HEREBY CERTIFY, That I attended deceased from Nov 11 1907, to Nov 15, 1907, that I saw her alive on Nov 15, 1907, and that death occurred, on the date stated above, at 5 p. M.
AGE 22 YEARS 11 MONTHS 17 DAYS	The CAUSE OF DEATH was as follows:
SINGLE, MARRIED, WIDOWED, OR DIVORCED Single	Cepto-Meningetis
AGE AT MARRIAGE, NUMBER OF CHILDREN: If married, age at (first) marriage ... years; Parent of ... children, of whom ... are living	(DURATION) 14 DAYS
BIRTHPLACE (State or country) Michigan	Contributory ... (DURATION) ... DAYS
NAME OF FATHER Carl F Flathau	(Signed) J. D. McEachan M.D.
BIRTHPLACE OF FATHER (state or country) Germany	190 (Address) Vermontville
MAIDEN NAME OF MOTHER Bertha Silka	SPECIAL INFORMATION only for Hospitals, Institutions, Transients or Recent Residents: Former or usual residence ... How long at place of death? ... Days. Where was disease contracted, if not at place of death? ...
BIRTHPLACE OF MOTHER (state or country) Germany	PLACE OF BURIAL OR REMOVAL Woodlawn Cemetery — DATE OF BURIAL Nov 17 1907
OCCUPATION Student	UNDERTAKER C. E. Hammond — ADDRESS Vermontville
THE ABOVE STATED PERSONAL PARTICULARS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF (Informant) Hollis W Campbell (Address) Cleveland Ohio	Filed Nov 18 1907 — A TRUE COPY E. H. Lindsey Registrar

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

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