PLACE OF DEATH

County of Eaton

Township of Vermontville

or

Village of

or

City of

STATE OF MICHIGAN

Department of State—Division of Vital Statistics

TRANSCRIPT OF CERTIFICATE OF DEATH—LOCAL REGISTER

Registered No. 5

(No. ..... St.; ..... Ward)

[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 Amitica Charlotte Auer

PERSONAL AND STATISTICAL PARTICULARS

SEX: Female

COLOR: White

DATE OF BIRTH: (Month) May (Day) 31 (Year) 1835

AGE: 62 YEARS, 7 MONTHS, ... DAYS

SINGLE, MARRIED, WIDOWED, OR DIVORCED: Husband married.

AGE AT MARRIAGE, NUMBER OF CHILDREN: If married, age at (first) marriage ..... years; Parent of ..... children, of whom ..... are living

BIRTHPLACE (State or country): Ohio

NAME OF FATHER: Abraham Burman

BIRTHPLACE OF FATHER (State or country): Switzerland

MAIDEN NAME OF MOTHER: Elizabeth Zeigler

BIRTHPLACE OF MOTHER (State or country): Switzerland

OCCUPATION: Housewife

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

(Informant) James Auer

(Address) Vermontville

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH: (Month) June (Day) 3 (Year) 1905

I HEREBY CERTIFY, That I attended deceased from May 17 1905, to June 3, 1905, that I saw h[er] alive on June 3, 1905, and that death occurred, on the date stated above, at 9.30 P. M.

The CAUSE OF DEATH was as follows:

Cancer of Liver. Pylorus & Stomach. Carcinomatosis Arteriosclerosis

..... (DURATION) ..... DAYS

Contributory Bilious Peritonitis

..... (DURATION) 8 DAYS

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

June 7 1905 (Address) Vermontville

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? .....

PLACE OF BURIAL OR REMOVAL: Charlotte

DATE OF BURIAL: June 7 1905

UNDERTAKER: Van W Pendill

ADDRESS: Vermontville

Filed June 7 1905

A TRUE COPY

E. H. Pond

Registrar

MARGIN RESERVED FOR BINDING.

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

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