	APR 19 1937				BUREAU OF V	BOARD OF HEALTH VITAL STATISTICS ATE OF DEATH	Do not use this space.	
	1. PLACE OF County Township	Gra	*****************			on District No. 5367	File NoRegistered No	***************************************
	2. FULL NA! (a) Resi	MEEd	lmond Li	ndsey B	ennett	., Ward. (If no. ds. How long in U. S., if of for	aresident, give city or town	
	PERSONAL AND STATISTICAL PARTICULARS					MEDICAL CERTIFICATE OF DEATH		
	J. SEX 4. COLOR OR RACE 5. SINGLE, MARRIED, WIDOV DIVORCED (write the wo				te the word)	21. DATE OF DEATH (MONTH, DAY, AN	· · · · · · · · · · · · · · · · · · ·	, 19
	Male White Married 5A. IF MARRIED, WIDDWED, OR DIVORCED					22. L HEREBY CERT	March 28	deceased fr
	HUSBAND OF (OR) WIFE OF Mary Bennett					I last saw h. 1. m., alive on Mal	ch 28 1931	Death is s
6.	DATE OF BIRTH	(MONTH,	DAY, AND YEAR) J	UTA TO	1855	to have occurred on the date stated : The principal cause of death and rel	above, at 2 OUA ated causes of importance	were as follo
2	81		8	10	day,hrs.	Riples M	Gussiais	Date of o
	8. Trade, prokind of v	work done	. as spinner. 💢	etired	Farmer	81	A.	8-1-
ATIC	kind of work done, as spinner, Retired Farmer sawyer, bookkeeper, etc. S. Industry or business in which work was done, as silk mill,							
CCUPATION	saw mill, bank, etc							
0	O this occupation (month and spent in this occupation					Other contributory causes of imports	gce:	
12.	12. BIRTHPLACE (CITY OR TOWN). MEDBORYS. OHIO.					A		
	1					100		
FATHER	14. BIRTHPLACE (CITY OR TOWN) Ohio					What test confirmed diagnosis	Date of Was there an au	topsy? 2
	(STATE OR COURTED)					23. If death was due to external caus Accident, suicide, or homicide?		
OTHER						Where did injury occur?		
Mary Rennett.						Specify whether injury occurred in inc	lustry, in home, or in public	place.
	INFORMANT (ADDRESS) BURIAL, CREM		Fairpor	t Mo.		Manner of injury		
16.	PLACE Mt.	Ple	easant C	$\frac{1}{2}$	9/37,	Nature of injury	<u> </u>	6/1
19.	UNDERTAKER	U. C	Pilc Maysvill			If so, specify	All -	PO
	(ADDRESS) FILED 3-3	12.	137 M	15 /1 eas	le chri	(Signed) (Address) (Address)	y arrive	M.
<i>Z</i> v.		,	13 samefallable		Registrar.		aganico,	VIII.

