	MAY 20 1937	BUREAU OF \	BOARD OF HEALTH /ITAL STATISTICS ATE OF DEATH	Do not use this space.
	1. PLACE OF DEATH County Officery	Dorder and a District	347	File No. 16454
7	Township		ion District No. 2018	Pile No. 1 UT J T
į				St. Ward)
-	2. FULL NAME A: Na	nie		·····
	(a) Residence, No.		L.,Ward.	
	(Usual place of abode) Length of residence in city or town where death	occurred // yrs. mos.		nresident, give city or town and State) reign birth? yrs. mos. ds.
	PERSONAL AND STATISTICAL PARTICULARS		MEDICAL CERTIFICATE OF DEATH	
3. :	SEX 4. COLOR OR RACE 5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word)		21. DATE OF DEATH (MONTH, DAY, AND YEAR) 44 - 8	
12	male white maniel		22 I HEREBY CERTIFY, That I attended deceased from	
5A.	A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF		11/	, to april 7 19
	(OR) WIFE OF Mabel Harrier			19.37. Death is sa
	DATE OF BIRTH (MONTH, DAY, AND YEAR) 44 - 1/- 1865		to have occurred on the date stated	above, at 7.75 / m.
7. /	AGE YEARS MONTHS	DAYS If LESS than 1 day,hrs.	_	ated causes of importance were as follow
	7/ //	77 ormin.	Myocardial It	chair
Z O	8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.		Filmony 1	le
Ĕ	9 Industry or husiness in which			- 2
CCUP,	work was done, as silk mill, saw mill, bank, etc.			2
8	 Date deceased last worked at this occupation (month and 	11. Total time (years)	Other contributory causes of imports	nce:
	year)	occupation 4	Julacu culori	ant land
12.	2. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY)		One year da	ation follows
R	13. NAME 7 km known		7led	
FATHER	1			Date of
	14. BIRTHPLACE (CITY OR TOWN)			Was there an autopsy?
нея	15. MAIDEN NAME Office Renaura			es (violence), fill in also the following:
F	7			
žΙ	16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) WELLINGTON		Where did injury occur?	
17. INFORMANT Mallel Havier (ADDRESS) allutan, mo 18. BURIAL, CREMATION, OR REMOVAL				
			Manner of injury	
		TE # // 37	()	·
	Not and inlink		24. Was disease or injury in any way related to occupation of deceased? 24	
19.	(ADDRESS)	mpr -	(Signed)	Matika WI
	11 13 00 11 19	VIII & B Par	(Address)	' 17

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