

STATE OF MICHIGAN.
REGISTER OF DEATHS.

PUBLIC ACT NO. 217 OF 1897.

----- of -----
(Township or Village.)
County of -----
From 8/30 1897 to 12/18/1900 189

PRESERVE WITH CARE. Begin each year with a new series of record numbers. This Register should be filled out at the time the Burial or Removal Permit is issued. It will serve as a basis of making the required returns to the County Clerk.

The Certificates of Death upon which this record is based must be mailed to the Secretary of State, Lansing, on the fourth day of the following month. Therefore it will be necessary to keep the Register written up to date in order that there may be no delay in transmitting returns.

STATE OF MICHIGAN.
BURIAL AND REMOVAL PERMITS.

In deaths from DANGEROUS COMMUNICABLE DISEASES, Permits for Burial or Removal must be issued only in accordance with the rules of the local and State Boards of Health. Registrars will be supplied by the Secretary of State with a list of dangerous communicable diseases, with their common synonyms, and with a copy of the rules approved by the State Board of Health for the transportation of bodies dead from such diseases.

Undertakers and others to whom Removal Permits are issued upon these blanks should clearly understand that they only authorize the removal of the body from the township or village in which the death occurred. They may serve as Transit Permits for bodies of persons who did not die from a dangerous communicable disease, but for the bodies of persons dead of any dangerous communicable disease, the Rules adopted by the American Association of General Baggage Agents, and approved by the State Board of Health, govern. Also a permit from the Health Officer into whose jurisdiction it is proposed to transport any body dead of a dangerous communicable disease, must be obtained, as required by Public Act No. 45 of 1895.

REGISTER OF DEATH.

No. 1

Date of Death Aug 30 1897

Full name Eva Ruemenchneider

Sex Female Color White Age 63 yrs. 6 mos. 8 days

Single, married, } Married Birthplace Austria
 widowed, divorced }

Occupation Farmers Wife

Father's name Ludwick Birthplace _____

Mother's name Eva Grezbach Birthplace _____

Disease causing death Cancer Uterous

Medical attendant Geo W Palmer

Place of burial or removal Salem Cemetery

Undertaker Geo P Slaffay

Permit granted Aug 31 1897

REGISTER OF DEATH.

No. 2

Date of Death Sept 26 1897

Full name Mary Keenan

Sex Female Color White Age 77 yrs. 4 mos. days

Single, married, widowed, divorced } Widow Birthplace Ireland

Occupation Housewife

Father's name Thos Turner Birthplace Ireland

Mother's name Bridget McHale Birthplace Ireland

Disease causing death _____

Medical attendant Robt Mc Colgan

Place of burial or removal Mt O'Connell Cemetery

Undertaker Hoffman and Son

Permit granted Sept 28 1897

REGISTER OF DEATH.

No. 3

Date of Death Oct 2nd 1897

Full name Archie Leach

Sex Male Color White Age 18 yrs 0 mos 0 days

Single, married, widowed, divorced } Single Birthplace Chelsea Mich

Occupation Painter and Paper hanger

Father's name James Leach Birthplace Pennsylvania

Mother's name Cordelia Dowser Birthplace Michigan

Disease causing death Accident & shock heart failure

Medical attendant J. W. Bruce

Place of burial or removal Oak Grove Cemetery

Undertaker Stoffan & Son

Permit granted Oct 4th 1897

REGISTER OF DEATH.

No. 4

Date of Death Nov 20 1897
Full name Albert Havens
Sex Male Color White Age 44 yrs. 10 mos. 27 days
Single, married, } Single Birthplace _____
widowed, divorced }
Occupation Farmer
Father's name Wm Havens Birthplace New Jersey
Mother's name Mary Bugby Birthplace Conn.
Disease causing death Idiocy
Medical attendant Geo W Palmer
Place of burial or removal Sylvan Cemetery
Undertaker Jr Staffan and Son
Permit granted Nov 21 1897

REGISTER OF DEATH.

No. 5

Date of Death May 15 1898

Full name Mae Welch

Sex Female Color White Age 13 yrs. 12 mos. 12 days

Single, married, }
widowed, divorced } Birthplace _____

Occupation Babe

Father's name John Walsh Birthplace Ireland

Mother's name Anna Kennedy Birthplace Ireland

Disease causing death Broncho pneumonia

Medical attendant _____

Place of burial or removal Lulvay Avenue Cemetery

Undertaker Shaffer & Co

Permit granted May 15 1898

REGISTER OF DEATH.

No. 6

Date of Death June 3 1898

Full name Mrs Fred Gilbert

Sex Female Color White Age _____ yrs. _____ mos. _____ days

Single, married, } Married Birthplace _____
widowed, divorced }

Occupation Farmer's wife

Father's name John Brown Birthplace _____

Mother's name Cash Taylor Birthplace _____

Disease causing death Apoplexy

Medical attendant Geo. N. Palmer

Place of burial or removal Sylvan Cemetery

Undertaker Geo. Steffan

Permit granted June 4 1898

REGISTER OF DEATH.

No. 7

Date of Death June 4 1898

Full name Susan Baldwin

Sex Female Color white Age 75 yrs. 11 mos. 15 days

Single, married, } Married Birthplace New York
 widowed, divorced }

Occupation House wife

Father's name Levy McIntire Birthplace N. Y.

Mother's name Betty Wilson Birthplace N. Y.

Disease causing death Paresis. Heart failure

Medical attendant Dr. Mc Colgan

Place of burial or removal Vermont Cemetery

Undertaker Geo. Staffan

Permit granted June 5 1898

REGISTER OF DEATH.

No. 8

Date of Death Nov 8 1898

Full name Evelyn Mc Nally

Sex Female Color _____ Age 55 yrs. 10 mos. _____ days

Single, married, } married Birthplace _____
 widowed, divorced }

Occupation Housewife

Father's name Silas Lewis Birthplace Conn

Mother's name Laura Perry Birthplace New York

Disease causing death Tuberculosis of Larynx

Medical attendant S. G. Bush

Place of burial or removal Maple Grove Cemetery

Undertaker Geo. Stappan

Permit granted Nov 9 1898

REGISTER OF DEATH.

No. 9

Date of Death Dec 10 1898

Full name Sophrona Cross

Sex Female Color White Age 71 yrs. 7 mos. 20 days

Single, married, } widowed Birthplace New York
widowed, divorced }

Occupation _____

Father's name Silas Loomis Birthplace Conn

Mother's name Laura Perry Birthplace New York

Disease causing death Found dead

Medical attendant _____

Place of burial or removal Sybran Center

Undertaker S. P. Mapes

Permit granted Dec 11 1898

REGISTER OF DEATH.

No. 10

Date of Death Dec 19 1898

Full name Fannie Gage

Sex Female Color _____ Age _____ yrs. _____ mos. _____ days

Single, married, } widowed Birthplace _____
widowed, divorced }

Occupation Housewife

Father's name Orren Parker Birthplace N. Y.

Mother's name Jermine May Birthplace Mass

Disease causing death Heart Failure due to dropsy

Medical attendant Robt Mc Colgan

Place of burial or removal Vermont Cemetery

Undertaker Staffan & Son

Permit granted Dec 22 1898

REGISTER OF DEATH.

No. 17

Date of Death Jan 10 1899

Full name Albert Richards

Sex Male Color White Age 44 yrs. 7 mos. days

Single, married, } Married Birthplace Michigan
widowed, divorced }

Occupation Farmer

Father's name Jas. Richards Birthplace Michigan

Mother's name Keturah Bush Birthplace Michigan

Disease causing death Pneumonia (double)

Medical attendant Robert McCollgan

Place of burial or removal Oak Grove, Chelsea

Undertaker F. Staffan & Son

Permit granted Jan 12 1899

REGISTER OF DEATH.

No. X2

Date of Death Jan 15 1899

Full name Pert Rager

Sex Male Color White Age 26 yrs. mos. days

Single, married, } Single Birthplace
widowed, divorced }

Occupation

Father's name Abner Rager Birthplace

Mother's name Agnes Rager Birthplace

Disease causing death Pistol shot caused by his own hand

Medical attendant E. H. Ward, (Coroner)

Place of burial or removal Sybau Center

Undertaker S. P. Mapes & Co

Permit granted Jan 17 1899

REGISTER OF DEATH.

No. 3

Date of Death Jan 21 1899

Full name Carrie Holzsoffel

Sex Female Color white Age 34 yrs. mos. days

Single, married, } Married Birthplace U. S.
widowed, divorced }

Occupation Housewife

Father's name Fred Eserman Birthplace Germany

Mother's name Barbara Berrise Birthplace Germany

Disease causing death Phthisis Pulmanis

Medical attendant G. W. Palmer

Place of burial or removal Freedom Cemetery

Undertaker F. Stappan & Son

Permit granted Jan 31 1899

REGISTER OF DEATH.

No. 4

Date of Death Jan 26 1899

Full name Emma Goetz

Sex Female Color White Age 2 yrs. 6 mos. _____ days

Single, married, }
widowed, divorced } _____ Birthplace Michigan

Occupation _____

Father's name Adam Goetz Birthplace Germany

Mother's name Rosena Krueger Birthplace Germany

Disease causing death Purpura Neurogicæ

Medical attendant Dr. Mc Colgan

Place of burial or removal Chelsea Mich.

Undertaker Geo. Staffen

Permit granted Feb 11 1899

REGISTER OF DEATH.

No. 5

Date of Death April 24 1899

Full name Emory Wright

Sex Male Color White Age 20 yrs. 10 mos. days

Single, married, } Single Birthplace _____
widowed, divorced }

Occupation Farmer

Father's name Seth Wright Birthplace Mich

Mother's name Lydia Walters Birthplace Ohio

Disease causing death Injuries received, shock

Medical attendant S. G. Bush

Place of burial or removal Lake Odessa

Undertaker S. A. Mapes & Co

Permit granted April 25 1899

REGISTER OF DEATH.

No. 5

Date of Death Feb 17 1899

Full name Margaret Leach

Sex Female Color White Age 71 yrs. 9 mos. days

Single, married, } Married Birthplace Ireland
widowed, divorced }

Occupation Housewife

Father's name Unknown Birthplace

Mother's name Unknown Birthplace

Disease causing death La Grippe

Medical attendant Robt. McChesman

Place of burial or removal Chelsea Mich

Undertaker S. A. Mapes & Co

Permit granted Feb 19 1899

REGISTER OF DEATH.

No. 6Date of Death Apr 291899Full name Thomas HuletSex Male Color White Age 60 yrs. mos. daysSingle, married, widowed, divorced } Married Birthplace New YorkOccupation Stone masonFather's name Vincent Hulet Birthplace New YorkMother's name Ann W. ers Birthplace " "Disease causing death ParalysisMedical attendant A. G. BustPlace of burial or removal Sylvan Center CemeteryUndertaker Geo. SteffanPermit granted May 1 1899

REGISTER OF DEATH.

No. 101

Date of Death Jan. 19, 1900 1890

Full name George Ostborg

Sex Male Color White Age 38 yrs. 10 mos. 15 days

Single, married, } Married Birthplace Germany
widowed, divorced }

Occupation Farmer

Father's name Henry Ostborg Birthplace Germany

Mother's name Helena Klumbek Birthplace Germany

Disease causing death Broncho Pneumonia

Medical attendant Robt. Mc Colgan

Place of burial or removal Salim Cemetery

Undertaker F. Staffan & Son

Permit granted Jan 25, 1900 1890

REGISTER OF DEATH.

No. 2
1900
189

Date of Death Mar 15

Full name Nancy Berry

Sex Female Color white Age 61 yrs. mos. days

Single, married, } Married Birthplace Jurisdas N.Y.
widowed, divorced }

Occupation House keeper

Father's name Mr Wadams Birthplace _____

Mother's name Nancy Wadams Birthplace _____

Disease causing death Cancer

Medical attendant J. Mc Colgan

Place of burial or removal Grass Lake

Undertaker E. J. Foster

Permit granted Mar. 19 189 1900

REGISTER OF DEATH.

No. 3

Date of Death April 21 1910 189

Full name Thomas George Wortley

Sex Male Color White Age 55 yrs. 6 mos. 27 days

Single, married, } Married Birthplace England
 widowed, divorced }

Occupation Farmer

Father's name John Wortley Birthplace England

Mother's name Ann Grimwood Birthplace England

Disease causing death Cancer of Liver

Medical attendant H J Hale

Place of burial or removal Oak Grove Chelsea Mich

Undertaker J A Mapess

Permit granted Apr 23^d 1910 189

B. G. Holtz

REGISTER OF DEATH.

No. 24Date of Death Apr 23 1890Full name William LingenSex Male Color white Age 21 yrs. 5 mos. 27 daysSingle, married, } single Birthplace Michigan
widowed, divorced }Occupation FarmerFather's name John Lingen Birthplace IrelandMother's name Ellen Savage Birthplace MichiganDisease causing death MeaslesMedical attendant H W SchmarPlace of burial or removal Oliver Chelsea IowaUndertaker Frank Staffen SonPermit granted April 24 1890 Reynolds

REGISTER OF DEATH.

No. 5

Date of Death June 8 - 1900 1890

Full name Sofra S. Stahl

Sex Female Color white Age 51 yrs. 3 mos. 1 days

Single, married, } Married Birthplace Michigan
 widowed, divorced }

Occupation N

Father's name Chas Buss Birthplace Germany

Mother's name Adria Landwehr Birthplace "

Disease causing death Heart clot & Varicose Ulesrs

Medical attendant Geo W Palmer

Place of burial or removal Oak Grove Chelsea Mich

Undertaker F. Staffan Tom

Permit granted June 9 1900 1890

REGISTER OF DEATH.

No. 6Date of Death June 6 1910Full name John GuthrieSex Male Color White Age 87 yrs. — mos. 7 daysSingle, married, } Widower Birthplace Ireland
widowed, divorced }Occupation FarmerFather's name William Guthrie Birthplace ScotlandMother's name Ann McCullough Birthplace IrelandDisease causing death Heart DiseaseMedical attendant Geo W PalmerPlace of burial or removal Sylvan CenterUndertaker J M MapsPermit granted June 9 1910

REGISTER OF DEATH.

Date of Death Aug 17 ^{No} 7 1910
 Full name Clara Merkel
 Sex female Color White Age 74 yrs. mos. days
 Single, married, } widowed Birthplace German
 widowed, divorced }
 Occupation Housewife
 Father's name M Foster Birthplace Germany
 Mother's name Unknown Birthplace Germany
 Disease causing death Bronchitis Chronic
 Medical attendant Boor McCoigan
 Place of burial or removal Mt Olivet (Peters)
 Undertaker Frank Stoffan son
 Permit granted August 19 1910

REGISTER OF DEATH.

No. 9

Date of Death Nov 16 1890

Full name Sarah Louney

Sex female Color white Age 72 yrs. mos. days

Single, married, } widow Birthplace Ireland
 widowed, divorced }

Occupation Housekeeper

Father's name John Lentan Birthplace Ireland

Mother's name Mary Smith Birthplace Ireland

Disease causing death Paralysis

Medical attendant Robt McColegan

Place of burial or removal St Mary Cem. Sylvania Mich

Undertaker Frank Staffan Sen

Permit granted Nov 17 1890

County Washtenaw

STATE OF MICHIGAN.

Township Sylvan

No. 9

Village _____

PERMIT FOR BURIAL OR REMOVAL.

Date of Death Nov 16/1910 1890

Full name Sarah Lewis Age 72

Disease causing death Paralysis

Proposed date of } 1890 Medical attendant } Robt. McColgan
burial or removal }

Proposed place of burial St Mary Sylvan Mich

Proposed place of removal _____ via _____
Undertaker J. Steffanow Address Chelsea Mich

A CERTIFICATE OF DEATH having been filed in my office in accordance with Public Act No. 217 of 1897, I hereby authorize the Burial (Burial or removal.) of the body of said deceased person as stated above. In the case of death from a dangerous communicable disease, the burial or removal must be conducted according to the rules of the local and State Boards of Health.

J. W. DeLoe Registrar of Deaths.
Dated Nov 17 1890 Clerk of Sylvan

REGISTER OF DEATH.

No. 10

Date of Death Nov 28 1890

Full name Horace Baldwin

Sex Male Color White Age 64 yrs. _____ mos. _____ days

Single, married, } widower Birthplace Michigan
 widowed, divorced }

Occupation Farmer

Father's name Horace Baldwin Birthplace Michigan

Mother's name Caroline Pierce Birthplace Michigan

Disease causing death Paralysis

Medical attendant Robt Mc Colgan

Place of burial or removal Oak Grove Chelsea

Undertaker F. Stofferan Down

Permit granted Nov 29 1890

Washburn
Sylvan

STATE OF MICHIGAN.

No. 10

PERMIT FOR BURIAL OR REMOVAL.

Date of Death Nov 29 1900 189
Name Mrs. Darius Age 64

Cause of death Paralysis

Medical attendant Robt. McColgan
Date of burial or removal 189

Place of burial Oak Grove Chelssa Mich

Place of removal via Chelssa Mich

Taker J. Hoffman M. Address

CERTIFICATE OF DEATH having been filed in my office in accordance with Public Act No. 217 of 1897, I hereby authorize the Burial (Burial or removal.)

body of said deceased person as stated above. In the case of death from a contagious communicable disease, the burial or removal must be conducted according to the rules of the local and State Boards of Health.

Registrar of Deaths.
Clerk of Sylvan

Nov 29 1900 189

REGISTER OF DEATH.

No. 11

Date of Death Dec 18 - 1900 189

Full name Orlando Abel Boyd

Sex Male Color White Age 59 yrs. 2 mos. 16 days

Single, married, widowed, divorced } Single Birthplace Michigan

Occupation Miller

Father's name Harvey L Boyd Birthplace Conn

Mother's name Mercy Peck Birthplace N. Y

Disease causing death Asthma with Heart failure

Medical attendant J. G. Bush

Place of burial or removal Sylvan Center Cemetery

Undertaker Samuel A. Mapes

Permit granted Dec 19 - 1900 189

EXTRACTS FROM PUBLIC ACT NO. 217 OF 1897, TAKING EFFECT AUGUST 29, 1897.

AN ACT to provide for the registration of deaths in Michigan and requiring certificates of death.

SECTION 1. *The People of the State of Michigan enact*, That the body of no person whose death occurs in the State shall be interred, deposited in a vault or tomb or otherwise disposed of, or removed from the township, village or city in which the death occurred, until a permit for burial or removal shall have been properly issued by the clerk of the township, village or city in which the death occurs, who shall be the registrar of deaths. * * * *

SEC. 2. Whenever any person shall die, the undertaker, householder, relative, friend, manager of institution, sexton or other person superintending the burial of said deceased person, shall cause a certificate of death to be filled out with all of the personal and family particulars required in section three of this act, and attested by the signature of a relative or some competent person acquainted with the facts. The physician who attended the deceased person during his last illness shall fill out the medical certificate of cause of death, which death certificate shall be delivered to the registrar within the time designated, if any, by the local board of health. In case of death without the attendance of a physician, or if it shall appear probable that the deceased person came to his death by unlawful or suspicious means, then the registrar shall refer the certificate to the health officer or coroner for immediate investigation and report prior to issuing the permit: *Provided*, That when the health officer is not a physician, and only in such case, the registrar is authorized to insert the facts relating to the cause of death from statements of relatives or other competent testimony. Upon the presentation of a certificate of death properly filled out and signed, the registrar shall issue a permit for the burial or removal

of the body and shall immediately record the death in the register of deaths, numbering all certificates consecutively in the order in which they are received, beginning with No. 1, for the first death that occurs in each year. In deaths from *dangerous communicable diseases*, burial or removal permits shall be granted by the registrar only in accordance with the rules of the local board of health and of the State Board of Health relating thereto.

SEC. 4. Registers of deaths shall be supplied by the Secretary of State to registrars for recording certificates of death together with all blanks required for the execution of this act. On the fourth day of each month the registrar of each township, village and city shall promptly transmit to the Secretary of State, in an official envelope provided by the State and stamped with one full letter stamp, all the certificates of death filed in his office during the preceding calendar month, with a statement of the number of deaths so reported. If no deaths occurred, he shall make a return to that effect upon a postal card blank.

SEC. 6. Any official failing or refusing to perform his duty under this act, or any undertaker violating any of its provisions, shall, upon conviction thereof, be deemed guilty of a misdemeanor, and shall be punished by a fine of not less than five dollars and not exceeding one hundred dollars, or be imprisoned in the county jail not exceeding thirty days, or suffer both fine and imprisonment at the discretion of the court. *Local registrars shall see that the provisions of this act are enforced in their jurisdictions*; the Secretary of State shall be charged with the general execution of the law and shall have supervisory power over registrars, to the end that this act shall be uniformly and effectually executed throughout the State. Prosecuting attorneys shall, upon the request of a local registrar or of the Secretary of State, assist in the enforcement of the provisions of this act.

Copies of the Registration Law in full will be supplied by the Secretary of State on application.