

STATE OF OHIO
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

PLACE OF DEATH.

County of Harrison

Township of Monroe

Registration District No. 335

File No. 3305

Village of

Primary Registration District No. 4816

Registered No. 2

City of (No. St. Ward)

(If death occurs away from
USUAL RESIDENCE
give facts called for under
"Special Information.")

(If death occurred in a
Hospital or institution,
give its NAME instead
of street and number.)

FULL NAME Mary Anne Paige

PERSONAL AND STATISTICAL PARTICULARS

SEX Female COLOR OR RACE White
DATE OF BIRTH Aug 15 1833
(Month) (Day) (Year)

AGE 79 years, 5 months, 1 days.

SINGLE, MARRIED,
WIDOWED, OR DIVORCED Widow

BIRTHPLACE (State or Foreign Country) Ohio

OCCUPATION Housewife

NAME OF FATHER Nathan Hadley

BIRTHPLACE OF FATHER (State or Foreign Country) Do not know

MAIDEN NAME OF MOTHER Sarah Elizabeth Lillis

BIRTHPLACE OF MOTHER (State or Foreign Country) England

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

(Informant) Joe Paige
(Address) Bowerston, O.

Filed Jan 18 1913

Miss Lela Bowen
Deputy Registrar.

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH Jan 16 1913
(Month) (Day) (Year)

I HEREBY CERTIFY, That I attended deceased from Jan 15 1913 to Jan 16 1913
that I last saw her alive on Jan 15 1913
and that death occurred, on the date stated above, at 12

M. The CAUSE OF DEATH was as follows:

apoplexy
Cerebral Hemorrhage
(Duration) 1 Days

Contributory (Duration) Days

(Signed) J. M. McHaffey M. D.
Jan 18 1913 (Address) Bowerston, O.

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 Tunnel Hill DATE OF BURIAL Jan 10 1913
UNDERTAKER Geo. J. Jones ADDRESS Bowerston, O.