

STATE OF MICHIGAN
 Department of State—Division of Vital Statistics

CERTIFICATE OF DEATH

County Lecount Registered No. 21
 Township or Village or City Blair Arbor (No. 58 St.; Ward) 21
 FEB 6 1914

PLACE OF DEATH
 County Lecount
 Township or Village or City Blair Arbor

FULL NAME Mary Ann Sheridan

PERSONAL AND STATISTICAL PARTICULARS			MEDICAL CERTIFICATE OF DEATH	
1 SEX <u>Female</u>	2 COLOR OR RACE <u>White</u>	3 SINGLE, MARRIED, WIDOWED, OR DIVORCED (Write the word) <u>Widowed</u>	10 DATE OF DEATH <u>January 17, 1914</u> (Month) (Day) (Year)	
4 DATE OF BIRTH <u>September 3, 1837</u> (Month) (Day) (Year)			11 I HEREBY CERTIFY, That I attended deceased from _____, 191, to _____, 191, that I last saw h _____ alive on _____, 191, and that death occurred, on the date stated above, at _____ m.	
5 AGE <u>76</u> yrs. <u>4</u> mos. <u>14</u> ds. <u>02</u> min. 7			The CAUSE OF DEATH* was as follows: <u>Mitral Regurgitation</u>	
6 OCCUPATION (a) Trade, profession or particular kind of work <u>Housewife</u> (b) General nature of industry, business, or establishment in which employed (or employer)			(Duration) yrs. <u>4</u> mos. ds.	
7 BIRTHPLACE (State or country) <u>Baltimore Md</u>			Contributory (SECONDARY) (Duration) yrs. mos. ds. (Signed) <u>X</u> <u>Treated by physician in residence</u> <u>Name residence</u> 191 (Address)	
PARENTS	8 NAME OF FATHER <u>John Bell</u>	*State the DISEASE CAUSING DEATH, or if death from VIOLENT CAUSES, state (1) MEANS OF INJURY; and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.		
	9 BIRTHPLACE OF FATHER (State or country) <u>England</u>	12 LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRAVELERS, OR RECENT RESIDENTS) At place of death yrs. mos. ds. In the State yrs. mos. ds. Where was disease contracted? If not at place of death? Former or usual residence		
	10 MAIDEN NAME OF MOTHER <u>Mary A Bell</u>	13 PLACE OF BURIAL OR CREMATION <u>Port Auila Country</u>		
11 BIRTHPLACE OF MOTHER (State or country)			DATE OF BURIAL <u>Jan 21, 1914</u>	
14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) <u>Chas A Sheridan</u> (Address) <u>Blair Arbor Mich</u>			15 UNDERTAKER <u>C. Blockman</u> Address <u>Empson Mich</u>	
15 Filed <u>Jan 20, 1914</u> <u>Geo F. Dago</u> REGISTRAR				