

581- Revised 1910

P. F. Pillsbury & Co., Inc. and Public Health Statisticians, Chicago

CERTIFICATE AND RECORD OF DEATH OF

Registered No. _____

1. Full Name Clara Sheppard

2. (a) Sex F (b) Color W (c) Single Married Widowed Divorced

3. (a) Birthplace _____ (b) Date of Birth _____

4. Age 72 Years Months _____ Days _____ Hours _____ (If less than One Day old)

5. Died on the 13th Day of Feb 1911 at about 11 A.M.

6. Last Occupation _____ (Profession, Trade or Kind of Industry or Business)

7. Previous Occupation (if any) _____

8. Place of Death Hospital Ill County of Kankakee

9. How long in State _____

10. How long in U. S. if Foreign born _____

11. (a) Name of Father _____ (b) Birthplace of Father _____ (State or Country)

12. (a) Maiden name of Mother _____ (b) Birthplace of Mother _____ (State or Country)

13. Informant Hospital Records Address Hospital Ill

14. Place of Burial Hospital Ill Date of Burial _____ Hour _____ M. Address Hospital Ill License No. _____

15. Undertaker W. A. Yates License No. _____

The foregoing stated personal particulars are true to the best of my knowledge and belief.

Physician's Certificate of Cause of Death

I **Hereby Certify** That I attended Deceased from Feb 1 1911 to 2-13 1911 That I last saw her alive on the 12th day of February 1911 That death occurred, on date stated above, at about 11 A o'clock A M., and that to the best of my knowledge and belief the cause of her death was as hereunder written.

(If UNDER ONE YEAR OLD, STATE HOW FED)

(a) Cause of Death	<u>Arteriosclerosis</u>	Duration in Years, Months, Days or Hours
(b) Contributory (Secondary)	<u>Senile Dementia</u>	

Witness my hand This 13 day of Feb 1911 (Signature) R. F. Weisbranner M. D. Address Hospital Ill

Filed in County Clerk's office, May 25 1911 By John B. Flaydell County Clerk Kankakee Co.

CERTIFICATE AND RECORD OF DEATH OF

Registered No. _____

1. Full Name Rebecca Courtney

2. (a) Sex F (b) Color W (c) Single Married Widowed Divorced

3. (a) Birthplace Indiana (b) Date of Birth _____

4. Age 77 Years Months _____ Days _____ Hours _____ (If less than One Day old)

5. Died on the Feb 6 Day of Feb 1911 at about 2:30 P.M.

6. Last Occupation Housework (Profession, Trade or Kind of Industry or Business)

7. Previous Occupation (if any) _____

8. Place of Death Hospital County of Kankakee

9. How long in State _____

10. How long in U. S. if Foreign born _____

11. (a) Name of Father _____ (b) Birthplace of Father _____ (State or Country)

12. (a) Maiden name of Mother _____ (b) Birthplace of Mother _____ (State or Country)

13. Informant _____ Address _____

14. Place of Burial Indiana Ill Date of Burial 7/7 or 7/8 Hour _____ M. Address Indiana Ill License No. 211

15. Undertaker E. H. Penner License No. _____

The foregoing stated personal particulars are true to the best of my knowledge and belief.

Physician's Certificate of Cause of Death

I **Hereby Certify** That I attended Deceased from Feb 10 1911 to Feb 5 1911 That I last saw her alive on the 5th day of Feb 1911 That death occurred, on date stated above, at about 2:25 o'clock P M., and that to the best of my knowledge and belief the cause of her death was as hereunder written.

(If UNDER ONE YEAR OLD, STATE HOW FED)

(a) Cause of Death	<u>Arteriosclerosis</u>	Duration in Years, Months, Days or Hours
(b) Contributory (Secondary)	<u>Senile Dementia</u>	

Witness my hand This 6th day of Feb 1911 (Signature) R. F. Weisbranner M. D. Address Hospital Ill

Filed in County Clerk's office, May 25 1911 By John B. Flaydell County Clerk Kankakee Co.