

PLACE OF DEATH

County Hillsdale
 Township Jefferson
 or Village Pittsford
 or City (No. _____) St. _____ Ward _____

STATE OF MICHIGAN

Department of State - Division of Vital Statistics

CERTIFICATE OF DEATH

MAR 5 1910

Registered No. 11

[If death occurred in a hospital or institution, give its NAME instead of street and number.]

FULL NAME Ernest De Kolt

PERSONAL AND STATISTICAL PARTICULARS

1 SEX Male 2 COLOR OR RACE White 3 SINGLE, MARRIED, WIDOWED, OR DIVORCED (Write the word)
 4 DATE OF BIRTH Feb 10, 1910
 (Month) (Day) (Year)
 5 AGE _____ yrs. _____ mos. _____ ds. OR _____ mos. _____ ds. OR _____ yrs. _____ mos. _____ ds. IF LESS than 1 day - 3 hrs. or min.?

6 OCCUPATION
 (a) Trade, profession or particular kind of work
 (b) General nature of industry, business, or establishment in which employed (or employer)

7 BIRTHPLACE (State or country) Michigan8 NAME OF FATHER Ernest De Kolt9 BIRTHPLACE OF FATHER (State or country) New York10 MARRIED NAME OF MOTHER Lora Adams11 BIRTHPLACE OF MOTHER (State or country) Pa.

12 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Infernal) Ernest D. Kolt(Address) Dunkirk, N.Y.Filed Feb. 25, 1910. Don Phillips

MEDICAL CERTIFICATE OF DEATH

13 DATE OF DEATH Feb 10, 1910
 (Month) (Day) (Year)14 I HEREBY CERTIFY, That I attended deceased from Feb 10 - 1910, 191
 191 Feb 10 - 1910, 191
 that I last saw him alive on Feb 10 - 1910, 191
 and that death occurred, on the date stated above, at 9 P.M.

The CAUSE OF DEATH* was as follows:

Congestive Heart Disease
Patulous Foramen Ovale

(Disease) yrs. mos. ds.

Contributory (Secondary) (Disease) yrs. mos. ds.

(Signed) W. E. Allegier M. D.
 191 (Address) Pittsford Mich

*State the DISEASE CAUSING DEATH, or its cause from FOREIGN CAUSE, state (1) NATURE OF INJURY; and (2) whether ACCIDENTAL, SUICIDE, or HOMICIDE.

15 LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRANSIENTS, OR REGULAR RESIDENTS)
 At place of death yrs. mos. ds. In the State yrs. mos. ds.When was disease ascertained?
 If not at place of death?
 Former or usual residence16 PLACE OF BURIAL, OR REMOVAL Pittsford DATE OF BURIAL Feb 11, 191017 UNDERTAKER Chas A. Burger ADDRESS Pittsford