

STATE OF MICHIGAN
Department of State—Division of Vital Statistics

PLACE OF DEATH
County Kalamazoo
Township Jefferson
Village _____
City _____ (No. _____) Ward _____

PLACE OF DEATH
Registered _____
Ward _____
If death occurred in a hospital or institution give its name, location of street and number.

FULL NAME Katherine L. Dillon

PERSONAL AND STATISTICAL PARTICULARS

1 SEX Female 2 COLOR OR RACE White 3 MARRIAGE, MARRIED, UNMARRIED, DIVORCED, OR SEPARATED (Write the word) Widowed

4 DATE OF BIRTH Nov 13 1825
(Month) (Day) (Year)

5 AGE 84 yrs. 10 mos. 0 ds. 0 hrs. 0 min.

MEDICAL CERTIFICATE OF DEATH

6 DATE OF DEATH Sept 13 1910
(Month) (Day) (Year)

7 I HEREBY CERTIFY, That I attended deceased from Sept 12 1910 to Sept 12 1910, that I last saw her alive on Sept 12 1910, and that death occurred, on the date stated above, at 2 P.M.

The CAUSE OF DEATH is as follows:

old age

8 OCCUPATION
(a) Trade, profession or particular kind of work None
(b) General nature of industry, business, or establishment in which employed (or employer)

9 BIRTHPLACE (City, Town, or County) New York State

10 NAME OF FATHER John Fiddler

11 BIRTHPLACE OF FATHER (State or Country) New York State

12 MARRIED NAME OF MOTHER Unknown

13 BIRTHPLACE OF MOTHER (State or Country) Unknown

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE.

(Informant) Moses Dillon

(Address) Pittsford

15 Sept 29 M. C. Dorr Phillips

Contributory (Secondary) Pyemetry

(Name) Mrs. Estlin
Sept 13 1910 (Address) Caseo Mich

*Was the Deceased Carried Home, or is death from Venereal Disease, with (1) Name of Inoculator; and (2) whether Accidental, Suicidal, or Homicidal.

16 LENGTH OF RESIDENCE (In Hospital, Institution, Workhouse, or Prison) (Specify Institution)
In this State _____ yrs. _____ mos. _____ ds. In the _____ State _____ yrs. _____ mos. _____ ds.
Where was death contracted, if not at place of death?
Form to be used in Michigan

17 PLACE OF BURIAL, OR CREMATION Pittsford DATE OF BURIAL Sept 19 1910

18 SIGNATURE OF MINISTER, CLERGYMAN, OR OTHER PERSON PRESENT AT BURIAL Thomas A. Buzen ADDRESS Pittsford