

PLACE OF DEATH

STATE OF MICHIGAN

Department of State—Division of Vital Statistics

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

CERTIFICATE OF DEATH

Registered No. 20
 AUG 4 1910 St. _____ Ward _____

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

FULL NAME James H. Newell

PERSONAL AND STATISTICAL PARTICULARS

1 SEX Male
 4 COLOR OR RACE White
 5 SINGLE, MARRIED, WIDOWED, OR DIVORCED Married
 (Write the word)

6 DATE OF BIRTH July 3, 1847
 (Month) (Day) (Year)

7 AGE 63 yrs. 0 mos. 19 ds. 00 min.
 If LESS than 1 day, _____ hrs.

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

9 BIRTHPLACE Ohio
 (State or territory)

10 NAME OF FATHER Henry Newell

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

12 MARRIED NAME OF MOTHER Sarah Cranstall

13 BIRTHPLACE OF MOTHER New York State
 (State or country)

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE
E. J. Newell
 (Informant)

Pittsford
 (Address)

15 July 20, 1910
Dorr Phillips
 (Registrar)

MEDICAL CERTIFICATE OF DEATH

10 DATE OF DEATH July 22, 1910
 (Month) (Day) (Year)

11 I HEREBY CERTIFY, That I attended deceased from July 8, 1910, to July 22, 1910, that I last saw him alive on July 22, 1910, and that death occurred, on the date stated above, at 8:30 p.m.

The CAUSE OF DEATH* was as follows:

Atrophic Cirrhosis Liver

Contributory 113
 (Secondary) _____ yrs. _____ mos. _____ ds.

(Sign) W. E. Alger
 _____, M. D.
 (Address) Pittsford, Mich.

*State the DISEASE CAUSING DEATH, or its death from VELOCITY CAUSE, state (1) MEANS OF INJURY; and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.

16 LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRAVELERS, OR SEASON RESIDENTS)
 At place of death _____ yrs. _____ mos. _____ ds. In the State _____ yrs. _____ mos. _____ ds.

Where was disease contracted, if not at place of death?

Factor or usual residence _____

17 PLACE OF BURIAL OR REMOVAL Pittsford
 DATE OF BURIAL July 26, 1910

18 UNDERTAKER Chas. A. Burger
 ADDRESS Pittsford