

SOCIAL SECURITY NO.

If veteran, name war

CERTIFICATE OF DEATH

MICHIGAN DEPARTMENT OF HEALTH

Bureau of Records and Statistics

State File No.

608116

FULL NAME

Martha E. Ward

Local File No.

717-5

PLACE OF DEATH:

County Wayne

Township

City or village Detroit

Name of hospital Arnold Home
(If not in hospital, give street address.)

Length of stay: In hospital 2 yrs In this community 2 yrs

USUAL RESIDENCE OF DECEASED:

State Michigan County Shiawassee

Township

City or village Owosso

Street no. 118 N. Lansing St.

Citizen of foreign country? no

If yes, name country

Sex Female Color or Race White Single, Married, Widowed or Divorced Widowed

MEDICAL CERTIFICATION

Date of death June 1st

1943

I hereby certify that I attended the deceased from Dec 16, 1942 to 6-1-43. I last saw him alive on 5-27-43. 1943. Death is said to have occurred on the date stated above at 2:30 A. M. Duration

Immediate cause of death

Chronic Myocarditis

Other contributory causes of importance

arteriosclerosis

Major findings and dates:
Of operations

Of autopsy

In case of violence, state if accident, homicide or suicide

Date

19

Where did injury occur?

(Specify city, county, or state)

In industry, home or public place?

Was disease or injury related to occupation of deceased? no

Signature

Address

4528 Hillside

NAME OF HUSBAND or WIFE

Name Wellington Ward Age, if alive

Birth date of deceased July 21, 1853 . 19

Age: Years Months Days If less than one day hrs. min.
83 10 11

Birthplace Ohio
Usual occupation Housewife

Industry or business

Father Name George Essig Birthplace Pennsylvania
Mother Maiden name Fidelia ? Birthplace Unknown

Informant Wellington Ward
Address Birmingham, Michigan

Burial, cremation or removal (Circle the word which applies)

Place Owosso, Michigan

Cemetery Oak Hill Date June 1943

Funeral director's signature *Edward J. ...*

Address Jennings-Lyons Chapel, Owosso

Filed JUN 2 1943

Local Registrar