

SOCIAL SECURITY NO.

If veteran, name war

## CERTIFICATE OF DEATH

MICHIGAN DEPARTMENT OF HEALTH

Bureau of Records and Statistics

State File No.

22527032

FULL  
NAME

Laurabelle Thorne

Local File No.

227

## PLACE OF DEATH:

County Genesee

Township

City or village Flint

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

Length of stay: In hospital 6 hrs In this community Life

## USUAL RESIDENCE OF DECEASED:

State Michigan County Genesee

Township Flint

City or village 2258 W. Bristol Rd.

Street no.

Citizen of foreign country? No

If yes, name country

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

## NAME OF HUSBAND or WIFE

Name Garth Thorne Age, if alive 36

Birth date of deceased February 2, 1908

Age: Years 34 Months 0 Days 21 If less than one day hrs. min.

Birthplace Flint Township

Usual occupation Housewife

Industry or business

Father Name Heeman Muchler

Birthplace Flint Township

Mother Maiden name Mary Badgley

Birthplace Mundy Township

Informant Garth Thorne

Address 2258 W. Bristol Rd.

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

Place Flint Township

Cometary Bristol Date Feb. 26, 1942

Funeral director's signature Algee - Gundry Co.

Address Flint, Michigan

Filed 2-24-42 Gunday M. D. Local Registrar

## MEDICAL CERTIFICATION

Date of death February 23, 1942

I hereby certify that I attended the deceased from Feb 21, 1942 to Feb. 22, 1942 I last saw him alive on Feb 23, 1942 Death is said to have occurred on the date stated above at 7:45 P.M.

Immediate cause of death

Eclampsia - 3-4 day;  
acute yellow atrophy of liver 3-4 day;  
multiple brain hemorrhage, 12 hr.

Other contributory causes of importance

Pregnancy undelivered 7 1/2 mo.

Major findings and dates:

Of operations

Of autopsy: acute yellow atrophy of liver  
multiple brain hemorrhage

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 Chris E. Snyder

Address Swartz Creek Mich