

## PLACE OF DEATH

County Baginaw

Township

or Village Cheraming

or City

(No. 411)

## STATE OF MICHIGAN

Department of State--Division of Vital Statistics

## CERTIFICATE OF DEATH

Registered No. 16St.;  Ward)

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

FULL NAME Serena C. Chapman

## PERSONAL AND STATISTICAL PARTICULARS

SEX Female COLOR OR RACE White SINGLE, MARRIED, WIDOWED, OR DIVORCED married  
(Write the word)DATE OF BIRTH March 2<sup>nd</sup>, 1843  
(Month) (Day) (Year)AGE 71 yrs. 4 mos. 8 ds. OR 40 min.?  
If LESS than 1 day, hrs. min.?OCCUPATION  
(a) Trade, profession or particular kind of work House Keeping  
(b) General nature of industry, business, or establishment in which employed (or employer)BIRTHPLACE (State or country) OhioPARENTS  
10 NAME OF FATHER Henry E. Vincent11 BIRTHPLACE OF FATHER (State or country) P. O.12 MAIDEN NAME OF MOTHER Rhoda Clark13 BIRTHPLACE OF MOTHER (State or country) Ohio

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant) W. P. Walker(Address) Cheraming15 Filed July 15, 1914. A. Stevens REGISTRAR

## MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH July 10<sup>th</sup>, 1914  
(Month) (Day) (Year)17 I HEREBY CERTIFY, That I attended deceased from about 15 mo., 1911, to July 10, 1914, that I last saw her alive on July 9, 1914, and that death occurred, on the date stated above, at 40 m.

The CAUSE OF DEATH\* was as follows:

Prognathic in brain  
control 18 mo  
ago second attack  
div date.  
(Duration) yrs. 18 mos. ds.Contributory (SECONDARY) \_\_\_\_\_  
(Duration) yrs. mos. ds.(Signed) G. L. Dreyfus, M. D.  
July 11, 1914 (Address) Cheraming

\* State (1) DISEASE CAUSING DEATH, or in deaths from VIOLENT CAUSES, state (2) MEANS OF INJURY; and (3) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.

18 LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRANSIENTS, OR RECENT RESIDENTS)

At place of death yrs. mos. ds. In the State yrs. mos. ds.

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

Former or usual residence \_\_\_\_\_

19 PLACE OF BURIAL OR REMOVAL Cheraming DATE OF BURIAL July 13, 191420 UNDERTAKER W. P. Walker ADDRESS Cheraming