

PLACE OF DEATH

STATE OF MICHIGAN

414

County of Ottawa

Department of State—Division of Vital Statistics

Township of Allendale

CERTIFICATE OF DEATH

Registered No. 10

Village of _____

City of _____ (No. _____ St.; _____ Ward)

[If death occurred in a Hospital or Institution, give its NAME instead of street and number. If away from usual residence, give "Special Information" below.]

FULL NAME Harmon J. Herrington

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL CERTIFICATE OF DEATH

SEX Male COLOR White

DATE OF DEATH (Month) June (Day) 28 (Year) 1909

DATE OF BIRTH (Month) April (Day) 16 (Year) 1856

I HEREBY CERTIFY, That I attended deceased from June 23, 1909, to June 23, 1909, that I last saw him alive on June 23, 1909, and that death occurred, on the date stated above, at 2 P. M.

AGE 53 years, 2 months, 12 days

The CAUSE OF DEATH was as follows:
Pernicious Anemia

SINGLE, MARRIED, WIDOWED, OR DIVORCED Married

AGE AT MARRIAGE, NUMBER OF CHILDREN { If married, age at (first) marriage 21 years
Parent of 7 children, of whom 4 are living

BIRTHPLACE (State or country) Michigan

NAME OF FATHER Kenneth Herrington

Contributory 54

BIRTHPLACE OF FATHER (State or country) York State

RESIDENCE NAME OF MOTHER Sarah J. Jovel

BIRTHPLACE OF MOTHER (State or country) Michigan

OCCUPATION Farmer

(Signed) Seth Nibbelink M. D.
6/30 1909 (Address) Allendale, Mich.

SPECIAL INFORMATION only for Hospitals, Institutions, Trains or Street Railroads:
Former or usual residence _____ How long at place of death? _____ Days _____
Where was disease contracted, if not at place of death? _____

THE ABOVE STATED PERSONAL PARTICULARS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF

PLACE OF BURIAL OR REMOVAL Allendale DATE OF BURIAL June 30 1909

(Informant) Mr. Harmon Herrington

ADDRESS J. J. Walbank Allendale

(Address) Robinson No. 1

J. J. Walbank Registrar