

Mary Lilley Riggs Death Certificate

PLACE OF DEATH			STATE OF MICHIGAN	
County <u>Ingham</u>			Department of State—Division of Vital Statistics	
Township _____ or Village _____ or			CERTIFICATE OF DEATH	
City <u>Lansing</u> (No. <u>536 Larch st</u> St.; _____ Ward)			OCT 4 - 1910	
FULL NAME <u>Mary Riggs</u>			Registered No. <u>311</u>	
<p>PERSONAL AND STATISTICAL PARTICULARS</p> <p>6 SEX <u>Female</u> 7 COLOR OR RACE <u>White</u> 8 SINGLE, MARRIED, WIDOWED, OR DIVORCED (Write the word) <u>widowed</u></p> <p>9 DATE OF BIRTH <u>April</u>, 1 <u>840</u> (Month) (Day) (Year)</p> <p>7 AGE <u>70</u> yrs. <u>00</u> mos. <u>00</u> ds. or <u>00</u> min. If LESS than 1 day, hrs.</p> <p>10 OCCUPATION (a) Trade, profession or particular kind of work <u>Retired</u> (b) General nature of industry, business, or establishment in which employed (or employer)</p> <p>11 BIRTHPLACE (State or country) <u>Michigan</u></p>			<p>MEDICAL CERTIFICATE OF DEATH</p> <p>12 DATE OF DEATH <u>Sept 17 - 1910</u> <u>Sept 17th</u>, 191<u>0</u> (Month) (Day) (Year)</p> <p>13 I HEREBY CERTIFY, That I attended deceased from <u>Sept 1</u>, 191<u>0</u>, to <u>Sept 17</u>, 191<u>0</u>, that I last saw her alive on <u>Sept 16</u>, 191<u>0</u>, and that death occurred, on the date stated above, at <u>2 P.</u> m.</p> <p>The CAUSE OF DEATH* was as follows: <u>Injury Causing paralysis of Extremities</u> <u>caused by falling backward on stick of Wood</u></p> <p>Contributory (SECONDARY) _____ (Duration) yrs. mos. ds.</p> <p>(Signed) <u>D. H. [Signature]</u>, M. D. <u>Sept 17</u>, 191<u>0</u> (Address) <u>Lansing</u></p> <p>*State the DISEASE CAUSING DEATH, or its death from VIOLENT CAUSES, state (1) MEANS OF INJURY; and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.</p> <p>14 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 _____</p>	
<p>10 NAME OF FATHER <u>James Lily</u></p> <p>11 BIRTHPLACE OF FATHER (State or country) <u>Michigan</u></p> <p>12 MAIDEN NAME OF MOTHER <u>Harris</u></p> <p>13 BIRTHPLACE OF MOTHER (State or country) <u>Michigan</u></p>			<p>15 PLACE OF BURIAL OR REMOVAL <u>Williamston, Mich</u> DATE OF BURIAL <u>Sept 19, 1910</u></p> <p>16 UNDERTAKER <u>W. H. Joy</u> ADDRESS <u>Lansing</u></p>	
<p>14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE</p> <p>(Informant) <u>Minnie Adams</u></p> <p>(Address) <u>Lansing, Mich.</u></p> <p>15 Filed <u>Sept 19, 1910</u> <u>Peter H. Gray</u></p>				