

THE HEALTH AND HOSPITAL CORPORATION OF MARION COUNTY
DIVISION OF PUBLIC HEALTH

1841 CITY-COUNTY BUILDING - INDIANAPOLIS, IND.

Three
FEE ~~2.00~~ DOLLARS
NUMBER PHOTOSTATS MADE

1

CERTIFIED COPY OF RECORD OF DEATH OF

*Mussey's
Great Grandmother
Georgina Franklin
Shea*

*Franklin
maiden
name*

NAME OF DECEASED Female Shea DATE OF DEATH 3-16-1893

PLACE OF DEATH, COUNTY MARION CITY, TOWN, OR LOCATION Indianapolis, Indiana

SEX Female WIDOWED NEVER MARR.
MARRIED DATE OF BIRTH N/S AGE 30

IF UNDER 1 YR.		IF UNDER 24 HRS.	
HRS.	MIN.	HRS.	MIN.

FATHER'S NAME N/S MOTHER'S MAIDEN NAME N/S

CAUSE OF DEATH
PART I. IMMEDIATE CAUSE (A) Valvular Heart Trouble

CONDITIONS, IF ANY WHICH GIVE RISE TO ABOVE CAUSE (A) STATING THE UNDERLYING CAUSE LAST. }
DUE TO (B) _____
DUE TO (C) _____

OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE CONDITION GIVEN IN PART I (A)

PART II _____

DATE OF BURIAL 3-1893 CEMETERY N/S LOCATION _____

CERT. NO. OR VOL. AND PAGE C-V.#4-Pg.#328 DEATH CERTIFIED BY H. Peachum

DATE FILED 3-1893

DATE ISSUED 1-29-1981

L. Knotts CLERK

NOT VALID UNLESS MACHINE NUMBERED
AND SIGNED WITH MULTICOLOR RIBBON

NUMBERED
58326
THRU
58326



DIRECTOR OF PUBLIC HEALTH M. D.
Franklin

*Mussey's
or
grandmother*