	0	OHIO DEPARTM	ITAL STATISTICS	A HAMI	
Reg. Dist. No	392		- The state of the	State File No.	37173
Primary Reg. Dist.	No. 8187	CERTIFICAT	The same of the sa	Registrar's No. 26	37
I. PLACE OF	EATH	i	2. USUAL RESIDENCE (Where deceased lived, If institution; residence before admit the both the before admit the best of the before admit the best of th		
b. CITY IT outsid OR and give VILLAGE	tognship	rite RURAL c. LENGTH OF STAY	c. CITY III outside corps OR VILLAGE Colum	rate limits, write RURA	and give township)
d. FULL MAME OF HOSPITAL OF INSTITUTION	790 Jaco	der institution, give street address or location)	d. STREET (If rural, give lo	cation)	au
. NAME OF DECEASED (TYPE OF PRINT	Halter	b. (Middle)	Gerber (Last)	4. DATE (Mont)	(Day) (Yest)
male /	vhite	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)	8. DATE OF SIRTH	9. AGE (In years last birthday) Mon	the Days Hours Min.
HOLLES	ON Alating their of	DUSTRY OF BUSINESS OF IN	11. BIRTHPLACE (State or Toretes	country)	12. CITIZEN OF WHAT COUNTRY?
13. EATHER'S NAME Edward Gerber			14. MOTHER'S MAIDEN HAME Margaret Gerina		
U. S. ARMED FOR	YER IN CES?	16. SOCIAL SECURITY NO.	17. INFORMANTS SI	GNATURE GEL	
ncause of Death  Inter only one dispersion of Condition Discourse for Discourse Discou				44 X	INTERVAL BETWEEN OMSET AND DEATH
This does not mean the mode of dying, such as bears failure, aschemia, etc. It means the disease,		tions, if any, giving DUE TO (b)	Helitersia		
injury, or complica- tion which caused death.		ICANT CONDITIONS tribating to the death but not related or condition causing death.	.,		
Pa. DATE OF OPERA-	196. MAJOR FINDINGS OF OPERATION				Yes No
21e. ACCIDENT SUICIDE HOMICIDE	(Specify)	21b. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office building, forest,	216. (CITY, VILLAGE, OR TO	WNSHIP) (COUN	TY) (STATE)
	(Day) (Year) (1		211. HOW DID INJURY OCCU	r)	
22.1 hereby certif		ded the deceased from Mar.		19.105	and that death
230. SIGNATURE	Herry	Degree or title:  Mi A.  24c, NAME OF CEMETERY	236. ADDRESS ESC	OCATION (City, town,	23c. DATE SIGNED  19 185)  or county) (State)
244. BURIAL, CREMA- TION, KENOVAL (Special)	6.22.19	51. Breen Lac		lucatees	12
BIRTH NO.	Do not write in t	this space	E. D Marka	BALMER	(Lic. No.)
DATE REC'D BY LOCAL	REGISTRAPS SIG	Ciridele	25, FUNERAL DIRECTOR'S SIGN		(ric. Ho.)