

STATE OF OHIO
DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS

CERTIFICATE OF DEATH

1 PLACE OF DEATH

County Ashland

Registration District No. 53

File No. 77016

Township Onwell

Primary Registration District No. 2002 Registered No. 38

or Village Onwell

No. St. Ward
(If death occurred in a hospital or institution, give its NAME instead of street and number)

or City of

Length of residence in city or town where death occurred yrs. mos. ds. How long in U. S., if of foreign birth? yrs. mos. ds.

2 FULL NAME HARLEY FENWICK PAYNE

Did Deceased Serve in
U. S. Navy or Army. 1936

(a) Residence. No. St. Ward.

(Usual place of abode)

(If nonresident give city or town and State)

PERSONAL AND STATISTICAL PARTICULARS

3. SEX Male 4. COLOR OR RACE White 5. (Single, Married, Widowed, or Divorced (write the word)) Married

5a. If married, widowed, or divorced
HUSBAND of Lenna C Payne
(or) WIFE of

6. DATE OF BIRTH (month, day, and year) Jan 9 1866

7. AGE Years Months Days If LESS than 1 day, hrs. or min.
69 11 20

8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Farmer

9. Industry or business in which work was done, as silk mill, saw mill, bank, etc. WWW

10. Date deceased last worked at this occupation (month and year)

11. Total time (years) spent in this occupation 93

12. BIRTHPLACE (city or town) Mundor
(State or country) OH

13. NAME Charles Payne

14. BIRTHPLACE (city or town) Dont know
(State or country)

15. MAIDEN NAME Matilda Rawdon

16. BIRTHPLACE (city or town) Dont know
(State or country)

17. INFORMANT Mrs Charlotte Payne Mc Bride
The Signature of

18. BURIAL, CREMATION, OR REMOVAL
Place Mundor OH Date 12-31 1935

19. FUNERAL DIRECTOR C Payne Lic. No. 1390
(Address) Onwell OH

19a. Was body embalmed yes Embalmer's Lic. No. 1728A

20. FILED 12/31 1935 H. O. Benton
Registrar.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (month, day, and year) 12/29/ 1935

22. I HEREBY CERTIFY, That I attended deceased from Feb 4/ 1935 to Dec 29/ 1935

I last saw him alive on Dec 28, 1935 death is said to have occurred on the date stated above at 7:15 a. m.

The PRINCIPAL CAUSE OF DEATH and related causes of importance in order of onset were as follows:

Thrombocortitis 1934

CONTRIBUTORY CAUSES of importance not related to principal cause:

Name of operation

23. If death was due to external causes (violence) fill in also the following:
Accident, suicide, or homicide?

Where did injury occur?

(Specify city or town, county, and State)
Specify whether injury occurred in industry, in home, or in public place.

Manner of injury

Nature of injury

24. Was disease or injury in any way related to occupation of deceased?
no

If so, specify

(Signed) J. H. Wilcox M. D.
Date 12/30/1935 Address Onwell OH