

MACON COUNTY, ILLINOIS

1934
Revision

V. S. 5

MARGIN RESERVED FOR BINDING
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD

NOTE: Local Registrars must make on this form a complete and accurate copy of the Original Certificate, and forward this copy to County Clerk on 10th day of each month. Omissions or abbreviations must not be made. Local Registrars must not issue this form to Undertakers, Physicians or others, but must use it only for preparing County Clerk's (or Local Registrar's) Copies.
Has decedent ever served in military or naval service of U. S. ? No

(37944—50M—11-34) 2-

1. PLACE OF DEATH. County of <u>Macon</u>		Registration Dist. No. <u>578</u>	STATE OF ILLINOIS Department of Public Health—Division of Vital Statistics		COUNTY CLERK'S RECORD
City of <u>Decatur</u>		Primary <u>3426</u>	CERTIFICATE OF DEATH		
Street and Number, No. <u>215 1/2 N. Main</u>		St. _____	Ward _____	Registered No. <u>77</u>	(Consecutive No.) _____
(If death occurred in a hospital or institution, give its NAME instead of street and number.)					
LENGTH OF RESIDENCE WHERE DEATH OCCURRED <u>34</u> yrs. <u>0</u> mos. <u>0</u> ds.					
1a. PLACE OF RESIDENCE: STATE <u>Illinois</u>		County <u>Macon</u>			
City or Village <u>Decatur</u>		Township _____			
Street and Number <u>215 1/2 N. Main</u>		Road Dist. _____			
2. FULL NAME <u>Joseph Hughes</u>			MEDICAL CERTIFICATE OF DEATH		
PERSONAL AND STATISTICAL PARTICULARS			21. DATE OF DEATH (month, day, and year) <u>May 1st 1936</u>		
3. SEX <u>Male</u>	4. COLOR OR RACE <u>White</u>	5. Single, Married, Widowed, or Divorced (write the word) <u>Widowed</u>	22. I HEREBY CERTIFY, That I attended deceased from <u>Feb. 22 1936</u> to <u>May 1st 1936</u>		
6a. If widowed <u>widowed</u> , occupation <u>X</u> HUSBAND of <u>Mary Ellen Hughes</u> (or <u>WIFE</u>)			I last saw him alive on <u>May 1st 1936</u> ; death is said to have occurred on the date stated above, at <u>5:15 PM</u>		
8. DATE OF BIRTH (month, day, and year) <u>Nov. 15, 1856</u>			*The principal cause of death and related causes of importance were as follows: <u>Cirrhosis of liver</u> Date of onset <u>1935</u>		
7. AGE <u>79</u> Years <u>5</u> Months <u>16</u> Days IF LESS than 1 day, _____ hrs. or _____ min.					
9. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. <u>Retired Dairy operator</u>					
10. Date deceased last worked at this occupation (month and year) <u>May 1929</u>			11. Total time (years) spent in this occupation <u>10</u>		
12. BIRTHPLACE (city or town) <u>Effingham Ill.</u>			Other contributory causes of importance: _____		
13. NAME <u>Richard Hughes</u>			23. { Was an operation performed? <u>No</u> Date of _____ For what disease or injury? _____ Was there an autopsy? <u>No</u> What test confirmed diagnosis? _____		
14. BIRTHPLACE (city or town) <u>Ireland</u>			24. If a communicable disease; where contracted? _____ Was disease in any way related to occupation of deceased? <u>No</u> If so, specify how: _____ (Signed) <u>C. Martin Wood</u> M. D. Address <u>Decatur, Ill.</u> Date <u>May 4</u> 1936 Telephone <u>2-0523</u>		
15. MAIDEN NAME <u>Rebecca Yarnell</u>					
16. BIRTHPLACE (city or town) <u>Penna</u>					
17. INFORMANT <u>Laura Dixon</u> (personal signature with pen and ink) P. O. Address <u>215 1/2 N. Main - City</u>					
18. PLACE OF BURIAL, Cremation or Removal Cemetery <u>Graceland</u>		18. DATE <u>May 4, 1936</u>			
Location <u>Decatur</u> (Township, Road Dist., Village or City)		County <u>Macon</u> State <u>Ill.</u>			
20. UNDERTAKER <u>Merle E. Crank</u> (personal signature with pen and ink) <u>J. J. Moran & Sons</u> (firm name, if any)		ADDRESS <u>Decatur Ill.</u>		25. Filed <u>May 4, 1936</u> <u>Jerome J. Heber</u> Registrar. P. O. Address <u>Decatur, Ill.</u>	

CERTIFIED COPY OR ABSTRACT OF VITAL RECORDS

STATE OF ILLINOIS }
COUNTY OF MACON } ss

OCT 21 1998

I, Stephen M. Bean, Macon County Clerk, do hereby certify that this document is a true and correct copy or abstract of the original record which is on file in the office of the COUNTY CLERK, MACON COUNTY, DECATUR, ILLINOIS.

Stephen M. Bean

STEPHEN M. BEAN
COUNTY CLERK

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

