

RICHARD OLIVER

BORN

FEB. 12, 1930

DIED

APR. 5, 1939

Medical Certificate of Death

1. PLACE OF DEATH

County New Haven
Township _____ or Village _____ or
City New Haven No. St. Raphael Hosp. St. _____ Ward _____
(If death occurred in a hospital or institution, give its NAME instead of street and number)
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

Richard Oliver
(a) Residence: No. Highland Heights St. _____ Ward _____
(Usual place of abode) (If nonresident give city or town and State)

UNDERTAKER'S CERTIFICATE

3. SEX Male 4. COLOR OR RACE White 5. SINGLE, MARRIED, WIDOWED,
OR DIVORCED (write the word) Single

6a. IF MARRIED OR WIDOWED, (If husband, give wife's maiden name)
HUSBAND OF _____
(OR) WIFE OF _____

6. DATE OF DEATH (year, month, and day) 1939 Apr. 5

6a. DATE OF BIRTH (year, month, and day) 1930 Feb. 12

7. AGE In Years _____ Months _____ Days _____ If LESS than
9 1 24 1 day, _____ hrs, _____ min.

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

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

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

11. Total time (years) spent in this occupation

12. BIRTHPLACE (city or town) Hartford
(State or country) Conn

13. NAME Raymond Oliver

14. BIRTHPLACE (city or town) New Hampshire
(State or country)

15. MAIDEN NAME Anna Gireb

16. BIRTHPLACE (city or town) Wallingford
(State or country) Conn

17. INFORMANT Albert Redway, Sup't
(Address) H.F.D. Co. Temporary Home

18. BURIAL, CREMATION, OR REMOVAL Date, Apr. 6 '39

Cemetery Springdale

Place East Windsor, Conn

Was Deceased a Veteran? Yes If so, give War _____
Was Body Embalmed? Yes If so, Name of Embalmer Thomas W. Johnson

MEDICAL CERTIFICATE OF DEATH

19. I HEREBY CERTIFY That I attended deceased from Mar 27, 1939 to Apr 5, 1939

I last saw him alive on Apr 5, 1939; death is said to have occurred on Apr 5 at 7:30 P. m.

The principal cause of death and related causes of importance were as follows:

Tuberculosis

Date of onset 3/27/39

Other contributory causes of importance:

Lobar Pneumonia
Septicemia

4/4/39
4/4/39

Name of operation 0 Date of _____

What test confirmed diagnosis? X-ray Was there an autopsy? no

20. If death was due to external causes (violence) fill in also the following:

Accident, suicide, or homicide? _____ Date of injury _____, 19 _____

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 _____

21. Was disease or injury in any way related to occupation of deceased? No

If so, specify _____

Physician's Signature William J. Hogan, M.D.

(Address) 412 Whalley Ave. New Haven, Conn.

Company _____ Regiment _____

Licence No. 873

This certificate received for record on:

By: Frederick Mignone Registrar

I certify that this is a true transcript of the information recorded in this office.

Attest:

Patricia E. Clark
PATRICIA CLARK, Registrar

Dated at New Haven, Connecticut, U.S.A., this 02 day of SEPTEMBER 2021

NOT VALID WITHOUT SEAL OF CERTIFYING OFFICIAL

Always write with black ink.

CONNECTICUT STATE DEPARTMENT OF HEALTH

0464

REMOVAL, TRANSIT AND BURIAL PERMIT

(Required for the removal of any deceased person or burial in town other than where death occurred)

Name of Deceased Richard Oliver Date of Death April 5-1939 No. _____
Age, 9 years 1 months 12 days, Sex Male Race or Color White
Cause of Death (1) Measles (2) _____
Attending Physician W. J. Logan MD Address New Haven Ct
Place of Death St. Raphael Hosp. Embalmer T. W. Johnson No. 873
Undertaker Thos. U. Johnson Address Windsor Locke Conn

The Certificate of death and the undertaker's statement having been recorded that the body has been prepared for removal or burial in accordance with the state statutes and sanitary code,

THIS CERTIFICATE is authority for REMOVAL.

FROM Richard Oliver New Haven TO East Windsor Conn
FROM _____ TO _____
Via auto Date of Shipment _____

Escort _____
and Burial in Sprague Cemetery in East Windsor State Conn
Date April 6-1939 at Registrar of New Haven

(This permit not legal for burial in town where person died)

ANDREW R. OLIVER

Andrew Richard Oliver, ten-

years-old son of Mrs. Ann Oliver, of New Haven, and grandson of Mrs. Bessie Giret of this city, died yesterday at St. Raphael's hospital, New Haven, after a three weeks' illness of measles and pneumonia. He was a pupil in the third grade of Highland Heights school, New Haven.

The funeral will be held this morning at 10:30 o'clock at the Johnson funeral home in Windsor Locks, with services at St. Mary's church, that town, at 11 o'clock.
