

Bureau of CONNECTICUT STATE I	DEPARTMENT OF HEALTH						
Medical Cert	ificate of Death						
1. PLACE OF DEATH							
County New Haven							
Township New Howen	or Village or						
City New Haven No.	d in a hospital or institution, give its NAME instead of street and number)						
	os. ds. How long in U. S. If of foreign birth? yrs. mos. ds.						
4 1 2	y						
(a) Residence: No. 75 / Highlan	A aste. Ward						
(Usual place of abode)	(If nonresident give city or town and State)						
UNDERTAKER'S CERTIFICATE 3. SEX 4. COLOR OR RACE 5. SINGLE, MARRIED, WIDDWED,	MEDICAL CERTIFICATE OF DEATH 19. I HEREBY CERTIFY. That I attended deceased from						
3. SEX 4. COLOR OR RACE 5. SINGLE, MARRIED, WIDOWED, OB_DIVORCED (write the word							
a IF MARRIED OR WIDOWED, (If husband, give wife's maiden name)	I last say h unalive on June 19 ,1933; death is said						
HUSBAND OF (OR) WIFE OF	to have occurred on Julie 19 at 5' 30 A.m						
14.01 19 1933	The principal cause of death and related causes of importance						
DATE OF DEATH (year, month, and day)	were as follows:						
6a. DATE OF BIRTH (year, month, and day)	- MI 22						
1/ 1 day,h	s, /						
8. Trade, profession, for particular	<u></u>						
kind of work done, as spinner,							
9. Industry or business in which work was done, as silk mill, saw mill, bank, etc. 10. Date deceased last worked at 11. Total time (years)	Other contributory causes of importance:						
saw mill, bank, etc. 10. Date deceased last worked at 11. Total time (years)							
this occupation (month and spent in this							
year) occupation							
12. BIRTHPLACE (city or town) (State or country) (State or country)	Name of operation						
I was I make marion-	What test confirmed diagnosis? Was there an autopsy? 20. If death was due to external causes (violence) fill in also the following:						
	Accident, suicide, or homicide?						
(State or country)	Where did injury occur? (Specify city or town, county, and State)						
55. 15. MAIDEN NAME CANA ROY	Specify whether injury occurred in industry, in home, or in public place.						
15. MAIDEN NAME CONA CHOS	· · · · · · · · · · · · · · · · · · ·						
(State or country) Connecting	Manner of injury						
17. INFORMANT Hartford County Kings Ho	Nature of Injury						
(Address) Harkhouse Joint,	21. Was disease or injury in any way related to occupation of deceased?						
18. BURIAL, CREMATION. OR REMOVAL Date, June 19 3	3 If so, specify						
Cemetery Springales	Physician's Signature A Yanna						
Place Gost II inker	(Address) New Haven Horp.						
Was Body Embaimed ? HJ. If so, Name of Embaimer / Mona	1 % Johnson. License No. 8 9 3						
	Mooney (Bu Phones It. John						
Signature of Licensed Embalmer or Licensed Underlaked 1. 9							
ficate received for record on:	Registrar 1/1						
99993	D. J. Callahan HSS						
and the second s	The state of the state of the state of						
The state of the s							
	A DESCRIPTION OF THE PROPERTY						
certify that this is a true transcript of	the information recorded in this office.						
3/3/							

Attest:

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 REMOVAL, TRANSIT AND BURIAL PER (Required for the removal of any deceased person or burial in town other than where death occurred) ·No. Name of Deceased Cause of Death (1) Pneumococcus Attending Physician_ Place of Death.... Undertaker___ 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 Date of Shipment i i i i thore y for a reality the cinetical named in the last no colo. Cemetery in East Windson State (This permit not legal for burial in town where person died) Form O-S 9 7-32-10M

Number of Child, 353 Particulars as to Child. Particulars as to Father. (1) Name? Particulars as to Mother. (1) Name? Edward Roy
Date and year of birth? (1) Name? Edua Ray

Town, New Britain

Town, New Britain (4) Residence? May 20, 1942 (2) About the Age? Town, Post-Office, Nationality? Nationality? French-Canadian Catholic (3) Living? (3) Living? fus..... Particulars of Committal to the Home. Particulars as to SECOND Family Home. Particulars as to FOURTH Family Home. (1) Name of person bringing child? (6) Name of person taking the child? (6) Name of person taking the child? Town in which said person lives? Town in which said person resides? Town in which said person resides? New Britain P. O. address of said person? P. O. address of said person? P. O. address of said person? 11 Day, date, and year child admitted to the Day, date, and year child leaves the Day, date, and year child leaves the Temporary Home? Temporary Home? Temporary Home? June 5, 1986 By what authority committed? Day, date, and year of child's return to the Day, date, and year of child's return to the Temporary Home? Temporary Home? Particulars as to FIRST Family Home. Particulars as to THIRD Family Home. Particulars as to FIFTH Family Home. (6) Name of person taking the child?

Boarding of

Franceis Orphan Asylum (6) Name of person taking child? (6) Name of person taking the child? Town in which said person resides? Town in which said person resides? Town in which said person resides? new Havre P. O. address of said person? P. O. address of said person? P. O. address of said person? Day, date, and year child leaves the Day, date, and year child leaves the Day, date, and year child leaves the Temporary Home? Temporary Home? Temporary Home? Thes, May 18, 1927 Day, date, and year of child's return to the Day, date, and year of the child's return to the Day, date, and year of child's return to the Temporary Home? Temporary Home? Alied Georday June 19, 1983 Temporary Home? lucared for, neglicled & defendent. Some at Diantie, Come (State Farm) I. Q. 88

Nother Done he New Britain liers with farmity while attending School Sot into trouble and sent to hore form farmine apply in 1916, when forms to the form running wild leduce is sent year and form running wild leduce is sent year and fairly good health. within I have been to govern us hup the form running wild leduce is sent for any form form running wild leduce is sent for any form running wild leduce is sent for any form running wild leduce is sent form from running wild leduce is sent for any form from running wild leduce is sent form from running wild leduce in the running w known, Pole, equirespolación la training. vols not want care of chile. Edward Ly Fren in two different hours and was difficult to manage, and had to transferred to Hagues When he stayed will typals da 5/23/33 Edward was taken to ken Haven Hospital with meningitiescondition 6/19/22 Edward died monday June 19, 1933 (about 9:30 a.m.) The many used for body of Edward buried Tuesday June 20, 1933 at 1:45 from at Church Winder Coulon of friends of Church & this grave buries Years Harold Smith was present, also her sister, altoband, line. Brown . Mr. Ridway.

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Home.

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	NAME.	Town of	BY WHOM COMMITTED.	AGE.	DATE OF	LOCATION.		
	Rivers, Edward	East Hauford	Juruile court	10+	May 27.1926	Mr. o hurs. Herleit Rivers (parents 611 Franklin Ove., Hartifad, Com.	AT DATE.	REMARKS.
-	Rivers, Archur	East Harrford	Jevrila court	8+	May 27, 1926	Mr. v Luro, Hottleib Bensle Torrington Aur., Torrington, Com. Mr. o Mrs Joseph & D' Brien 11 Brainfand Plane 80. Manchester, Com.	Aug.11, 1932 Vuas. 10, 1933	Co. pays 5:00 wh. to: 552. y. clarkes med. Red. Man. 10, 1933 By promy Co. pays 44. 12 wh. bo: 552. yr clarkes : hed.
	Rivers, William	East Hareford	Samuela court	57	May 27,1926	Lus viens Hoalist Bensle Dornington Ave. Dornington Come. Mr. o held Joseph & Brien "Brain old Place So. manchesten, Com	Aug.11,1932 mas.10, 1933	Co. pay & 5.00 wh. bd.; & 52yr. clocker, med. Ret. man. 10, 19 3 3 By paropy Co. pay & 4.50 wh. bd. & 52. y. clocked med.
								Boarding @ 5.20 for, who. 4/1/33 \$4.50 ml.
1	Ryglisgyn, Mary	new Britain	Javanile court	8+	Sapt. 18. 1986	Mrs. Thomas White Saudy Hool Oun. me Eve Hymiel (niother) 99 Hareford ave., New Britair. Com.	Aug. 25, 1927 Ole, 7, 1927	Branding 3.50 fm. write. Rt. to Howe Dre. 7. 1977 Cy frong County farmishing clother now Ort 6:1978 Your out Brand Bill ap 8. 1979 4.123 Cotto pay 14.50 wh. bd.; 500. yp. clother 2 190.
1 18.0	Rygliegyn, Æter	new Britain Ju	omile court	6+	Supt. 18, 1986 m	rs. Thos. White Saudy Howher (Swingler) 1. Eva Horwich (Swinder) 99 Heariford ava. new Britain, Course.	may 26. 1927 Dre 17. 1927	Branding @ 3.50 fr. who. Rt. to Howare Dre. 7, 1927 By front Orenty furinishing clother now, oct 1, 1928 Jos. John Brand Bill afr. 8, 1979, 41-103 Codo pay 1.50 wh. 60.; 52. yo. clother med.
	Ryglisgyn, anna	New Britain Ju	comile court.	6+	Sept. 18.1926.	rs. Ifoo White Course (availed Rother) 99 Harriford air., Thew Antain, Course.	may 36.1927 Dec. 7. 1927	Boarding 3.50 f. ah. Pet to House tree, 7, 1927 By from Oxyaly furue, hing clother was bet 1, 1928 String of Wood Bifle afr. 8. 1929 Affis Cotto pay 4.50 while ho.; 55 ye clother and