

PLACE OF DEATH.

COMMONWEALTH OF PENNSYLVANIA.

BUREAU OF VITAL STATISTICS.

CERTIFICATE OF DEATH.

12089

County of Indiana

Township of Burrell

or

Borough of

or

City of

Registration District No. 552

Primary Registration District No. 2755

File No.

Registered No. 132

[If death occurs away from USUAL RESIDENCE give facts called for under "Special Information."]

FULL NAME Caroline ~~Tico~~ Antoniacomi ~~Tico~~ Tico ~~Tico~~ Tico

[If death occurred in a Hospital or Institution, give its NAME instead of street and number.]

PERSONAL AND STATISTICAL PARTICULARS

SEX Female | COLOR White

DATE OF BIRTH March 18 1866
(Month) (Day) (Year)

AGE 40 years, 11 months, 5 days

SINGLE, MARRIED, WIDOWED, OR DIVORCED Married

BIRTHPLACE (State or country) Italy

NAME OF FATHER Andrieo Tico

BIRTHPLACE OF FATHER (State or country) Italy

MAIDEN NAME OF MOTHER Veronica Tico

BIRTHPLACE OF MOTHER (State or country) Italy

OCCUPATION Wife

THE ABOVE STATED PERSONAL PARTICULARS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF

(Informant) Tony Antoniacomi
(Address) Blacklick

Filed Feb 22 1907
J. P. Schulz
Registrar

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH Sept-23 1907
(Month) (Day) (Year)

I HEREBY CERTIFY, That I attended deceased from Sept-22 1907 to Sept-23 1907

that I last saw him alive on Sept-22 1907 and that death occurred, on the date stated above, at Home

The CAUSE OF DEATH was as follows:
Angina Pectoris

Contributory Rheumatism

(Duration) 1 Days

(Duration) 14 Days

(Signed) J. M. Busby M. D.
Sept-23 1907 (Address) Blacklick

SPECIAL INFORMATION only for Hospitals, Institutions, Transients, or Recent Residents.

F ANTONIAKOMI TONY (ANTONIO), MARITO DELLA DECEDUTA TICO' CAROLINA
U FIRMA QUALE PERSONA A CONOSCENZA DEI DATI IDENTIFICATIVI DELLA DECEDUTA.

Where was disease contracted?

PLACE OF BURIAL OR REMOVAL Ashville Pa | DATE OF BURIAL Feb 20 1907

UNDERTAKER W. A. Palmer & Son | ADDRESS Blacklick Pa

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD

N. B.—Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, that it may be properly classified. The "Special Information" for persons dying away from home should be given in every instance.