

MTC 36907

STATE OF ILLINOIS ORIGINAL
HENRY MORNER, GOVERNOR
Department of Public Health—Division of Vital Statistics

CERTIFICATE OF DEATH

Registered No. 552 (Cumulative No.)

1. PLACE OF DEATH: County of Cook Registration District 4318 31552
City of Darien (Village, City, Town, or Township) Precinct 4318
(If death occurred in a hospital or institution, give its NAME instead of street and number.)
Street and Number, 502 WASHINGTON BLVD Ward 5
Length of Time at Place Where Death Occurred: 5 yrs. 0 mos. 0 ds.

2. FULL NAME: RAYMOND FRANCIS SHANNON 932

PERSONAL AND STATISTICAL PARTICULARS

3. SEX: Male 4. COLOR OR RACE: White 5. Status, Married, Widowed, or Divorced: Married
6. If married, widowed, or divorced, name of spouse: Madeline L. Shannon
7. DATE OF BIRTH: Aug 10 1888
8. AGE: 20 yrs. 11 mos. 29 ds. IF LESS than 1 day, state in hours and minutes.

9. Trade, profession, or particular kind of work done, as spinner, weaver, bookbinder, etc.: Manufacturing
10. Industry or business in which work was done, as silk mill, saw mill, bank, etc.: Blk. Material
11. Date deceased last worked at this occupation (month, day, and year): June 1933 12. Total time (years) spent in this occupation: 6

12. BIRTHPLACE (city or town): Chicago, Ill. (State or country)

FATHER: 13. NAME: John F. Shannon 14. BIRTHPLACE (city or town): Philadelphia, Pa. (State or country)

MOTHER: 15. MAIDEN NAME: Catherine M. McCarthy 16. BIRTHPLACE (city or town): Chicago, Ill. (State or country)

17. INFORMANT: Madeline L. Shannon (personal designation with pen and ink)
P. O. Address: 502 Washington Blvd. Darien, Ill.

18. PLACE OF BURIAL: Calvary 19. DATE: August 1, 1939
Cemetery: Calvary Location: Chicago, Ill. (Township, Precinct, District, Village or City)
County: Cook State: Illinois

20. UNDERTAKER: Da Decon Address: Darien, Ill.
(personal signature with pen and ink) (firm name, if any)

21. DATE OF DEATH (month, day, and year): Aug 9, 1939 1039
22. I HEREBY CERTIFY, That I attended deceased from 1-1 to 15-1 1939.
I last saw him alive on 8/8/39, 1939; death is held to have occurred on the date stated above, at 1502 S.T.
The principal cause of death and related causes of importance were as follows: Emphysema, Pneumonia, Sun
Other contributory causes of importance: Chronic suppurative pneumonia, Arteriosclerosis
23. (Was an operation performed?) no Date of —
(For what disease or injury?) —
Was there an autopsy? no
What test confirmed diagnosis? usual
24. If a communicable disease; where contracted? —
Was disease in any way related to occupation of deceased? no
If so, specify how: —
(Signed) J. W. T. P. M. D.
Address: Oak Park, Ill.
Date: 8/9/39 1939 Telephone: 5111 1839
"M. D."—State the disease causing death. All cases of death from "violence, casualty, or any sudden means" must be referred to the coroner. See Section 10 Coroner's Act.
25. Filed Aug 10, 1939 by Ed. M. Wells, M.D. Registrar.
P. O. Address: Oak Park, Ill.

26. Has decedent ever served in military or naval service of U. S.? Yes

APR 23 1996

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the record as made from the original certificate for the person named therein and that this certificate was established and filed with the Department of Public Health in accordance with the Statutes of Illinois.

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of AmeriTitle the 16th day of May A.D., 19 96 at 3:12 o'clock PM, and duly recorded in Vol. M96 of Deeds on Page 14155.

FEE \$10.00

Return: AmeriTitle

By Bernetha G. Letsch, County Clerk
Cherry Russell