



## Health Department Death Registers

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# Cass County

97

Vil. of *Lathrop*  
77421—FLOWER PRESS CO., PRINTERS, BOSTONERS AND BINDERS

Date Received		DATE OF DEATH		FULL NAME OF DECEASED	Sex	Color	Single, Married or Widowed	AGE			PLACE OF BIRTH	DISEASE OR CAUSE OF DEATH	OCCUPATION	FULL NAMES OF PARENTS		BIRTHPLACE OF PARENTS		NAME AND ADDRESS OF ATTENDING PHYSICIAN
		Month	Day					Years	Mos.	Days				Father	Mother	Father	Mother	
3/27/1900		Mar	24	Human Bone	M	W	D						Alcoholicism	Saloon Keeper			Her.	J. J. Rodwell.





# REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

Vil. of Lathrop Cass Co.

Date Received		DATE OF DEATH		FULL NAME OF DECEASED	Sex	Color	Single, Married or Widowed	AGE			PLACE OF BIRTH	DISEASE OR CAUSE OF DEATH	OCCUPATION	FULL NAMES OF PARENTS		BIRTHPLACE OF PARENTS		NAME AND ADDRESS OF ATTENDING PHYSICIAN
		Month	Day					Years	Mos.	Days				Father	Mother	Father	Mother	
3/27/1900		Mar	24	William Walker	M	W							Alcoholicism	Saloon Keeper	Gen.			J. F. Rodwell.

Attending Physician \_\_\_\_\_ of \_\_\_\_\_  
 Reported by W. B. Strand Jr. of Walker  
 Received for record on the \_\_\_\_\_ Disease contracted at \_\_\_\_\_  
 day of \_\_\_\_\_ 19\_\_\_\_

Attending Physician \_\_\_\_\_ of \_\_\_\_\_  
 Reported by W. B. Strand Jr. of Walker  
 Received for record on the \_\_\_\_\_ Disease contracted at \_\_\_\_\_  
 day of \_\_\_\_\_ 19\_\_\_\_

# REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

98

Twp. of *Byron*

Cass Co.

*Cowan Amber*

Date Received	DATE OF DEATH		FULL NAME OF DECEASED	Sex	Color	Single, Married or Widowed	AGE			PLACE OF BIRTH	DISEASE OR CAUSE OF DEATH	OCCUPATION	FULL NAMES OF PARENTS		BIRTHPLACE OF PARENTS		NAME AND ADDRESS OF ATTENDING PHYSICIAN
	Month	Day					Years	Mos.	Days				Father	Mother	Father	Mother	
9-5	June	24	<i>George Jones</i>	<i>M</i>	<i>W</i>	<i>M</i>	<i>67</i>	<i>5</i>	<i>25</i>	<i>Utica</i>	<i>Dyspepsia</i>		<i>Jesse</i>	<i>Maithy</i>	<i>Eng</i>		<i>McDowell</i> <i>Staples</i> ✓
	Aug	16	<i>Benjamin F. Underhill</i>	<i>"</i>	<i>"</i>	<i>"</i>	<i>56</i>	<i>6</i>	<i>3</i>	<i>Chester</i>	<i>Bright's disease</i>		<i>William</i>	<i>Love</i>			

Twp. of