



[Health Department Death Registers](#)

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Redwood County

Vil. of

Morgan

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

662

Redwood Co. J. L. Adams, M.D.

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	Year					Years	Mos.	Days				Father	Mother	Father	Mother	
4/7	Feb	15	1885	Wm. G. Baafa	M	W	S	1	11	15	Minn	Bronchitis-Pneumonia		Carl	Wilhelmina	Ger.	Ger.	J. L. Adams Morgan
	"	23	1885	Pearl Albrecht	F	"	"	1	5	4	"	"		Ed. H.	Antoinette	Winn.	"	"
10/20	May	27	1885	Erastus Goodwin	M	W	W	85			N. Y.	Old age		Peter Goodwin	Sarah	N. Y.		C. P. Gibson
	July	10	1885	Clara Lyman	F	"	M	66			N. Y.	Chloroform		Geo. Pryor		N. Y.		H. R. Pease, C. P. Gibson
	"	10	1885	Mrs. P. R. Pease	"	"	"	70			Canada	Paralysis		Brown		Ireland		"
	Aug	26	1885	George Smith	M	"	S	60			"	Dysentery		Geo. Smith	Christina	Scotland		"
	Sept	24	1885	Harley R. Robbins	"	"	S	14			Winn	Appendicitis		David Robbins	Minnie	La	Winn	C. P. Gibson
11/22	May	23	1885	Acacia Homing	"	"	"	9	1		"	Pneumonia		Geo.	Hettie	Ger.	"	H. Schlegel
1-11-1900	Jan	31	1885	Mrs. Geo. W. Dickinson	F	"	M	29	7	15	"	Organic Heart Dis. - Miscarriage		Richard Porter	Harriet Lucina Porter	U.S.A.		H. R. Pease
	Dec	7	1885	Frederick Strauss Line	M	"	"	86	6	7	Ger.	Atrophy of Liver				Ger.		C. P. Gibson
	"	27	1885	Rome	"	"	S			3	Winn	Convulsions		Aug. H.	Theresa Bogardus	Wis		Wm. Palmer
	"	30	1885	Ada Keyner	F	"	"			27	"	Abdominal tumor		Joseph.	Katy Kapetyky	Ger		-

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

662

Vil. of

Morgan

Redwood Co. J. L. Adams M.D.

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	
4/7	May	15	Mrs. G. Baaka	M	"	D	1	11	15	Minn	Bronchitis		Carl	Wilhelmina	Sw.	Sw.	J. L. Adams Morgan
	"	23	Pearl Albrecht	F	"	"	1	5	4	"	"		Ed. H.	Antonette	Winn.	"	"
10/20	May	27	Erastis Goodwin	M	W	W	85			N. Y.	Old age		Peter Goodwin	Sarah	N. Y.		C. P. Gibson
	July	10	Clara Lyman	F	"	M	66			N. Y.	Chloroform		Geo. Pryor		N. Y.		L. R. Pease C. P. Gibson
	"	10	Mrs. P. R. Pease	"	"	"	70			Canada	Paralysis		Brown		Iceland		"
	Aug	26	George Smith	M	"	D	60			"	Dysentery		Geo. Smith	Christina	Scotland		"
	Sept	24	Harley R. Robbins	"	"	D	14			Minn	Appendicitis		David Robbins	Minnie	La	Minn	C. P. Gibson
11/22	May	23	Acord Homing	"	"	"	9	1		"	Pneumonia		Geo.	Mattie	Sw.	"	H. Schlegel
1-11-1900	Jan	31	Mrs. Geo. W. Dickinson	F	"	M	29	7	15	"	Organic Heart Dis. - Miscarriage		Richard Porter	Harriet Lucia Gibbs	U.S.A.		L. R. Pease
	Dec	2	Fredrick Strane Line	M	"	"	86	6	7	Sw.	Atrophy of Liver		Aug. W.	Minneapolis	Sw.		C. P. Gibson
	"	27	Rome	"	"	D			3	Minn	Convulsions		Joseph.	Katy Kapetkyky	Sw.		Wm. Palmer
	"	30	Ada Teyner	F	"	"			27	"	Abdominal Tumor						-

DIED 1899 May 3rd at Redwood Falls, Redwood Co., Minn.

Cause of Death: Primary Kidney & Bladder trouble

Contributing, 19 mos service in Civil War

Name, Jonas Spalburg Residence, ☒ ☐

Color, W Sex, M Age, 72 7 5 Married, ☒

When Born, Minn Occupation, Horse Man

Father: Name, Wm Birthplace, N. Y.

Mother: Maiden Name, Catherine Kelly Birthplace, "

Undertaker: Name, C Burial: Place, "

Residence, No. of Permit,

Vil. of *Morgan*

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

662

Redwood Co. *J. L. Adams M.P.*

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	
4/7	Feb	15	<i>Mrs. G. Paapa</i>	<i>M</i>	<i>H</i>	<i>S</i>	<i>1</i>	<i>11</i>	<i>15</i>	<i>Minn</i>	<i>Broncho-Pneum</i>		<i>Carl</i>	<i>Wilhelmina</i>	<i>Ger.</i>	<i>Ger.</i>	<i>J. L. Adams Morgan</i>
	"	23	<i>Pearl Albrecht</i>	<i>F</i>	"	"	<i>1</i>	<i>5</i>	<i>4</i>	"	"		<i>Ed. H.</i>	<i>Antonette</i>	<i>Minn.</i>	"	"
10/20	May	27	<i>Erastus Goodwin</i>	<i>M</i>	<i>W</i>	<i>W</i>	<i>85</i>			<i>N. Y.</i>	<i>Old age</i>		<i>Peter Goodwin</i>	<i>Sarah</i>	<i>N. Y.</i>		<i>C. P. Gibson</i>
	July	10	<i>Clara Lyman</i>	<i>F</i>	"	<i>M</i>	<i>66</i>			<i>N. Y.</i>	<i>Chloroform</i>		<i>Geo. Pryor</i>		<i>N. Y.</i>		<i>J. R. Pease C. P. Gibson</i>
	"	10	<i>Mrs. P. R. Pease</i>	"	"	"	<i>70</i>			<i>Canada</i>	<i>Paralysis</i>		<i>Brown</i>		<i>Iceland</i>		"
	Aug	26	<i>George Smith</i>	<i>M</i>	"	<i>S</i>	<i>60</i>			"	<i>Dysentery</i>		<i>Geo. Smith</i>	<i>Christina</i>	<i>Scotland</i>		"
	Sept	24	<i>Harley R. Robbins</i>	"	"	<i>S</i>	<i>14</i>			<i>Minn</i>	<i>Appendicitis</i>		<i>David Robbins</i>	<i>Minnie</i>	<i>La</i>	<i>Minn</i>	<i>C. P. Gibson</i>
11/22	May	23	<i>Acacia Homing</i>	"	"	"		<i>9</i>	<i>1</i>	"	<i>Pneumonia</i>		<i>Geo.</i>	<i>Nellie</i>	<i>Ger.</i>	"	<i>H. Schlegel</i>
1-11-1900	Jan	31	<i>Mrs. Geo. W. Dickinson</i>	<i>F</i>	"	<i>M</i>	<i>29</i>	<i>7</i>	<i>15</i>	"	<i>Organic Heart Dis. - Miscarriage</i>		<i>Richard Porter</i>	<i>Harriet Lucina Porter</i>	<i>U.S.A.</i>		<i>J. R. Pease</i>
	Dec	2	<i>Fredrick Strauss Line</i>	<i>M</i>	"	"	<i>86</i>	<i>6</i>	<i>7</i>	<i>Ger.</i>	<i>Atrophy of Liver</i>				<i>Ger.</i>		<i>C. P. Gibson</i>
	"	27	<i>Rome</i>	"	"	<i>S</i>			<i>3</i>	<i>Minn</i>	<i>Convulsions</i>		<i>Aug. H.</i>	<i>Theresa Bogardus</i>	<i>N. Y.</i>		<i>Wm. Palmer</i>
	"	30	<i>Ada Tynner</i>	<i>F</i>	"	"		<i>2</i>	<i>27</i>	"	<i>Abdominal tumor</i>		<i>Joseph.</i>	<i>Katy Kapetyky</i>	<i>Ger.</i>		"

Attending Physician *J. R. Pease* of *Redwood Falls*
Reported by *C. P. Gibson* of _____
Received for record on the _____ Disease contracted at _____
day of _____ 19____

Vil. of *Auburn*

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

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Redwood Co. *G.W. Root*

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	Year					Years	Mos.	Days				Father	Mother	Father	Mother	
7-11	May	14			Female	W	S	6	5	20	St. Paul	Tubercular Meningitis		Henry J.	Ira		Minn	G.W. Root

Vil. of *Walnut Grove* *J. F. Hennault*

7-11	Jan	19			Female	W	S	0	0	8	Walnut Grove	Born sickly		G. J.	Mertie	Pa.	Wis.	C. J. Remington Walnut Grove
8-12	Feb	8			Male	"	"	0	0	5	"	Convulsions		A. J.	Sarah	La.	Minn.	Dr. M. D. Boise
9-16	May	18			Male	"	M	59	7	9	Germany	Dropsy Mitral regurgitation 10-10						
	July	28			Male	"	S	5	10	29	Walnut Grove	Crushed by R. R. car		E. C.	Olena		Conn	
	Aug	15			Female	"	S	3	5		"	Summer Complaint		G. W.	Alice	Ohio	Minn	
11-11	Oct	11			Male	"	M	70	10		It.	Abscess Heart Failure		H. W.		Mass	It.	C. J. Remington

664

Redwood Co.

Twp. of Brookville	Robb. Wilson
12/6 Nov 3 Martin Schuly	M W D I 14 Minn Summer Complaint Librecht Amelia Gen Sullivan Springfield ✓

665

Geo. Posen

7721--Process Form Co., Printers, 214-216 West Third St., Minneapolis, St. Paul, Minn.																			
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			
9-6	Aug	14	Emrad Rath	M	W	D	1	5		Minn	Bailey & Co. Minneapolis		Chas.	Sophie		Minn		H.A. Karen Lankford	✓

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Redwood Co.

[illegible]

Twp. of *Homer*

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

667

Redwood Co. *F. Hoemaker*

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	
6/2	May	16	<i>Hoerner</i>	<i>M</i>	<i>W</i>	<i>S</i>	<i>4</i>	<i>10</i>	<i>28</i>	<i>Germany</i>	<i>Premature Birth weakness</i>		<i>Fred G.</i>	<i>Hesumak</i>	<i>Minn</i>	<i>Minn</i>	<i>Schlegel Redwood Falls</i>
		25	<i>Hoerner</i>	<i>F</i>	<i>"</i>	<i>"</i>			<i>9</i>	<i>"</i>					<i>"</i>	<i>"</i>	<i>Hoemaker</i>
7-3	June	3	<i>Wilhelmina Hoerner</i>	<i>"</i>	<i>"</i>	<i>M</i>	<i>52</i>	<i>7</i>	<i>23</i>	<i>Germany</i>	<i>Peritonitis Intestinal Obstruction</i>		<i>C. Erdener</i>	<i>Christine</i>	<i>Germany</i>		<i>"</i>

Twp. of *Johnsonville*

J. H. Marvin

7/4	July	10	<i>Amelia Scharff</i>	<i>F.</i>	<i>W.</i>	<i>M.</i>	<i>42</i>	<i>10</i>	<i>28</i>	<i>Germany</i>	<i>Childbirth Hemorrhage caused by Placenta Praevia</i>		<i>Volkrath</i>	<i>"</i>	<i>Ger.</i>	<i>Ger.</i>	<i>Korur</i>	<i>Lamberton</i>
4/25	July	21	<i>Alvin E. Olson</i>	<i>M</i>	<i>"</i>	<i>S</i>			<i>5 27</i>	<i>Minn</i>	<i>Whooping cough</i>		<i>John</i>	<i>Betty</i>		<i>Ind</i>		
		4	<i>Hansen</i>	<i>"</i>	<i>"</i>	<i>P</i>				<i>"</i>	<i>Still born</i>		<i>Martin</i>	<i>Mary</i>				
6/12	May	26	<i>Andrew Istene</i>	<i>"</i>	<i>"</i>	<i>M</i>	<i>58</i>	<i>7</i>		<i>Austria</i>	<i>Dropsy Chr. Nephritis</i>		<i>Andrew</i>	<i>Katrina</i>	<i>Austria</i>	<i>Austria</i>	<i>Rothenberg</i>	<i>Springfield</i>

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

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Twp. of *Kintire*

Redwood Co.

A.O. Gunnestad

Date Received	DATE OF DEATH Month Day		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
							Years	Mos.	Days				Father	Mother	Father	Mother	
<i>7/7</i>	<i>Apr 6</i>	<i>June 5</i>	<i>Kristoffer A. Wick</i> <i>John Theodor Anderson</i>	<i>M</i>	<i>W</i>	<i>M</i>	<i>60</i>	<i>5</i>	<i>4</i>	<i>Norway</i> <i>Sweden</i>	<i>Exposure to cold + Excessive drinking</i> <i>Inhaling Gas at Hotel in St. Paul</i>	<i>alcohol</i>	<i>Armand A. Gust</i>	<i>Esebjorg Kristina</i>	<i>Norway</i> <i>Sweden</i>		<i>A.R. Hawes</i> <i>St Paul Co</i>

Twp. of *Lamberton*

A.A. M. Leland

<i>7-21</i>	<i>June 16</i>		<i>Grace M W D</i>	<i>M</i>	<i>W</i>	<i>D</i>	<i>3</i>			<i>Lamberton</i>	<i>Spasms</i>		<i>August Geo. H.</i>	<i>Augusta Jennie</i>	<i>Am</i> <i>N. Y.</i>	<i>Minn</i>	<i>C.P. Nelson</i>
<i>10/9</i>	<i>Sept 15</i>		<i>Willard F " "</i>	<i>F</i>	<i>"</i>	<i>"</i>	<i>1</i>	<i>15</i>		<i>"</i>	<i>Marasmus</i>	<i>125</i>					

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

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Twp. of *Kintire*

Redwood Co.

A.O. Gunnestad

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	
<i>8/7</i>	<i>Apr</i>	<i>6</i>	<i>Kristoffer A. Wick</i>	<i>M</i>	<i>W</i>	<i>M</i>	<i>60</i>	<i>5</i>	<i>4</i>	<i>Norway</i>	<i>Exposure to cold + Excessive drinking ^{alcohol}</i>	<i>Alcohol</i>	<i>August A. Gust</i>	<i>Ecegeborg Kristina</i>	<i>Norway</i>	<i>Sweden</i>	<i>A.R. Hawes</i> <i>St Paul Co</i>
	<i>June</i>	<i>5</i>	<i>John Thorsten Anderson</i>	<i>"</i>	<i>"</i>	<i>A</i>	<i>18</i>	<i>10</i>	<i>14</i>	<i>Sweden</i>	<i>Inhaling Gas at Hotel in St. Paul</i>						

DIED *1899 Oct 28* at *Kintire* *Redwood* COUNTY

Cause of Death: Primary *diarrhoea* Duration,

Contributing

Name, *Conrad J. Longfield* Residence, *do.*

Color, *W* Sex, *M* Age, *9* Married, *24*

When Born, *Minn* Occupation,

Father: Name, *Christina* Birthplace, *Norway*

Mother: Maiden Name, *Jennie* Birthplace, *"*

Undertaker: Name, *"* Burial: Place, *"*

Residence, *"* No. of Permit, *"*

Twp. of *Lamberton*

A.A. M. Leland

<i>7-21</i>	<i>June</i>	<i>16</i>	<i>Guise M W D</i>	<i>3</i>	<i>Lamberton</i>	<i>Spasms</i>	<i>11</i>	<i>25</i>	<i>August</i>	<i>Augusta</i>	<i>Sum</i>	<i>N.Y.</i>	<i>Minn</i>	<i>C.P. Nelson</i>
<i>10/9</i>	<i>Sept</i>	<i>15</i>	<i>Willow F " "</i>	<i>1</i>	<i>15</i>	<i>"</i>			<i>Geo. H.</i>	<i>Jennie</i>				

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

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Twp. of *Kintire*

Redwood Co.

A.O. Gunnestad

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	Year					Years	Mos.	Days				Father	Mother	Father	Mother	
<i>8/7</i>	<i>Apr</i>	<i>6</i>	<i>1860</i>	<i>Kristoffer A. Wik</i>	<i>M</i>	<i>W</i>	<i>M</i>	<i>60</i>	<i>5</i>	<i>4</i>	<i>Norway</i>	<i>Exposure to cold + Excessive drinking ^{alcohol}</i>	<i>Guest</i>	<i>Amund A. Egeberg</i>	<i>Kristina</i>	<i>Norway</i>	<i>Sweden</i>	<i>A.R. Hawes</i> <i>St Paul Co</i>
	<i>June</i>	<i>5</i>	<i>1865</i>	<i>John Theodor Anderson</i>	<i>"</i>	<i>"</i>	<i>A</i>	<i>18</i>	<i>10</i>	<i>12</i>	<i>Sweden</i>	<i>Inhaling Gas at Hotel in St. Paul</i>						

Attending Physician *H.P. Dodge* of *Bellevue*
 Reported by *A.O. Gunnestad* of *"*
 Received for record on the _____ Disease contracted at _____
 day of _____ 19____

Twp. of *Lamberton*

A.A. M. Leland

<i>7-21</i>	<i>June</i>	<i>16</i>		<i>Grace</i>	<i>M</i>	<i>W</i>	<i>D</i>	<i>3</i>	<i>Lamberton</i>	<i>Spasms</i>	<i>11-5</i>	<i>August</i>	<i>Augusta</i>	<i>Sum</i>	<i>N.Y.</i>	<i>Muir</i>	<i>C.P. Nelson</i>
<i>10-9</i>	<i>Sept</i>	<i>15</i>		<i>Willow</i>	<i>F</i>	<i>"</i>	<i>"</i>	<i>1</i>	<i>15</i>	<i>"</i>	<i>Moruenus</i>		<i>Geo. H.</i>	<i>Jennie</i>			

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J. C. Misen

77921—VICTORIA PASS CO., Printers, Stationers and Blank Book Manufacturers, St. Paul, Minn.																		
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		
10/3	Sept	10	Engene Jzigruhagen	M	W	D	8	6	4	America	Accident		Gust	Ida	America	Butler		
Twp. of New Artn J.S. Grole																		
3/6	Jan	21	Mary Parsons	F	W	D	26	1	29	Canada	La Grippe		Watt	Jane	Can.	Can.		
10/6	Sept	2	Earnest Lusher	M	"	"	10	5		Merrie	Lightning		A. Lusher	M	Smithland	Red Hawk Cr		

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

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Twp. of North Hero

Redwood Co. H. F. Knight

7721—FROSTEN PAPER CO., Printers, Stationers and Blank Book Manufacturers, St. Paul, Minn.																			
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			
2/4	Jan'y	11	Andrew A. Ledenborg	M	W	W	80	6	11	Sweden	Paralysis & Old Age	Farmer	Andrew	Anna	Sweden	Sweden	L. B. Crandall	Lamberton	✓
	"	29	Rolla B. Davidson	"	"	M	30	3	0	Sw.	Ht. jaundice	"	Wm.	Mary	Sw.	Sw.	A. B. Hines	Redwood Falls	✓
	"	25	Carrie Torneum	F.	"	"	48	2	0	Norway	Pneum.		Hans	Maren	Norway	Norway	Mitchell	Tracy	✓
3/16	Feb'y	17	Marie Evanson	"	"	"	36	0	0	Sw. A.	Nephritis & Urine Calculus	Housekeeper	Hans P. Hultstrom	-	"	"	A. J. Kover	Lamberton	✓
10/20	Aug	16	Victor Ledenborg	M	"	D		6	18	North Hero	Infantile Trouble		Thomas	Sigra	Finland	"			✓
	Sept	21	John F. Baird	"	"	W	69	8	7	N. Y.	Inflam. Stomach		Abiah				E. P. Nelson	"	✓

Twp. of Paxton

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

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Twp. of *Redwood Falls* *Redwood Co.* *Clark Shaver*

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	
11/8	Oct	18	Frank E. Babcock	M	W	M	33	7	7	Minn	Gun Shot Suicide	11-25	Erwin L.	Orla M.			
	"	"	Adie Helle	F	"	"	38	7		Wis	" Murdered		A. J. Wells	Adelaide		N. Y.	
	"	"	Martin W. Sanders	M	"	L	16	1	21	"	" Murdered		Edwin W. Sanders	Adeline W.		Wis	
	"	"	Hes. L. Babcock	"	"	"	5	11	13	Minn	" Murdered		Frank E.	" " Babcock	Minn	Wis	
	"	"	Robt. W. Babcock	"	"	"	4	6	12	"	" Murdered		" "	" " "	"	"	

Twp. of *Shenandoah* *L. Hallam*

4/20	Jan	10	Randolph King	M	W	A			22	Minn			Bruce King	Katie		Minn	
11/9	"	10	Eliza Degroat	F	B	W	72			N. Y.	Old age						
	Oct	31	Vincent Hohmann	M	W	M	82	11		Ger	Dropsy						Rothenberg
	Nov	3	Rocina Panorman	F	"	"	51			Mich	Suicide Cut through Ribs						
12/8	"	20	Michael Fagan	M	"	"	75			Ireland	Heart Failure						Dr. Pease
	"	27	Eliza Meynes	F	"	"	66	3	9	England	Paralysis		Headley		England		C. P. Hibern

Twp. of *Sherman*

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

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Redwood Co. *J. F. Pittman*

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		
<i>2/27</i>	<i>Feb</i>	<i>9</i>	<i>Mrs. Kahle</i>	<i>M</i>	<i>W</i>	<i>D</i>	<i>0</i>	<i>3</i>	<i>24</i>	<i>Denmark</i>	<i>Apoplexy</i>	<i>Labourer</i>	<i>Christ</i>	<i>Mary</i>	<i>Den.</i>	<i>Den.</i>	<i>Dr. M. F.</i>	☒
			<i>Ull Christensen</i>	<i>"</i>	<i>"</i>	<i>M</i>	<i>51</i>	<i>0</i>	<i>0</i>	<i>Denmark</i>	<i>Consumption</i>				<i>Den.</i>	<i>Den.</i>	<i>C. P. Gibson</i>	☒
<i>3/14/1900</i>	<i>Mar</i>	<i>5</i>	<i>Infant</i>	<i>"</i>	<i>"</i>	<i>D</i>			<i>3 hrs</i>	<i>Sherman</i>	<i>Asphyxia neonatorum</i>		<i>John C.</i>	<i>Josephine</i>	<i>Den.</i>	<i>Den.</i>	<i>B. Cole</i>	☒

Twp. of *Springdale* *E. E. Nichols*

<i>3/1</i>	<i>Jan</i>	<i>7</i>	<i>Peter Hestman</i>	<i>M</i>	<i>W</i>	<i>M</i>	<i>68</i>	<i>8</i>	<i>24</i>	<i>Sweden</i>	<i>Bronch. & La Grippe</i>	<i>Farmer</i>	<i>Peter</i>	<i>—</i>	<i>Sweden</i>	<i>Sweden</i>	<i>H. M. Workman</i>	<i>Tracy</i>	☒
	<i>Nov</i>	<i>19</i>	<i>Sarah J. Beers</i>	<i>F</i>	<i>"</i>	<i>M</i>	<i>78</i>	<i>4</i>	<i>15</i>	<i>Den.</i>	<i>La Grippe</i>		<i>Jos. Burnside</i>	<i>Phoebe</i>	<i>Virginia</i>	<i>Virginia</i>	<i>C. D. Remington</i>	<i>Valued house</i>	☒
<i>5/1</i>	<i>Mar</i>	<i>8</i>	<i>Lars Erickson</i>	<i>M</i>	<i>"</i>	<i>M</i>	<i>69</i>	<i>8</i>	<i>1</i>	<i>Nor</i>	<i>Cancer Stomach</i>		<i>Erie Jensen</i>	<i>Mrs.</i>	<i>Norway</i>	<i>Norway</i>	<i>Rempe</i>	<i>St. Paul</i>	☒
<i>5/31</i>	<i>Apr</i>	<i>1</i>	<i>John Welch</i>	<i>"</i>	<i>"</i>	<i>W</i>	<i>81</i>			<i>Ireland</i>	<i>old age</i>		<i>John</i>	<i>Mollie</i>	<i>Ireland</i>	<i>England</i>	<i>Goslee</i>	<i>Tracy</i>	☒

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

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Twp. of *Sum Down*

Redwood Co. J. H. Higgins

7721—FORDER PRESS CO., Printers, Stationers and Blank Book Manufacturers, St. Paul, Minn.										Redwood Co.		J. T. Rogers		FULL NAMES OF PARENTS		BIRTHPLACE OF PARENTS		NAME AND ADDRESS OF ATTENDING PHYSICIAN	
Date	DATE OF DEATH			FULL NAME OF DECEASED	Sex	Color	Single, Married or Widowed	AGE			PLACE OF BIRTH	DISEASE OR CAUSE OF DEATH	OCCUPATION	Father	Mother	Father	Mother		
Received	Month	Day	Years					Mos.	Days										
2/9	Jan	24	Lilma A. Bredvold	F.	W.	S.	5	6	21	Sumdown Sp.	Pneumonia		Martin	Grace	Norway	Norway	C. Rothberg	Springfield	✓
3/7	Feb	12	Leri C. Christenson	M.	W.	"	0	2	22	"	Cramps in stomach		"	Mary	Denmark	Winn.	C. Rothberg	"	✓
2/10	Feb	13	Mabel Larsen	F.	"	"	0	4	24	"	Brain fever		Herhard	"	Winn	"	C. Rothberg	"	✓
8/7	July	5	Arion Henry Herskin	M.	"	"	1		17	"	Pneumonia		Henry	Mary	Wis		J. Sullivan	"	✓

Twp. of *Swedes Forest*

L. O. Gimmetad

5/6	Apr	13	Lewis H. Sandgren	M	W	M	40	10	11	Denmark	Lung fever		Martin H.	Mattie	Denmark	Selma	Sacred Heart	✓
10/10	Sept	8	Martin A. Knutson	"	"	"	10	6	8	Winn	Heart Failure		Ole	Lie	Norway			✓
11-1900	Dec	31	Chas D. M. Gimmetad	F	"	"				"	Paralysis - under morphine		Mitias	Christiana H.	Nor.	Winn	Bridge	✓

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

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Twp. of *Three Lakes* Redwood Co. *M. Nelson*

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	
<i>4/5</i>	<i>Feb</i>	<i>1</i>	<i>Robt. Nelson</i>	<i>M.</i>	<i>W.</i>	<i>S</i>	<i>21</i>	<i>8</i>	<i>16</i>	<i>Minn.</i>	<i>Epilepsy</i>		<i>Mathias</i>	<i>Janet</i>	<i>N.Y.</i>	<i>Scot.</i>	<i>C. P. Linton Redwood Falls</i> ✓
<i>7-7</i>	<i>June</i>	<i>27</i>	<i>Wanogel Prokasek</i>	<i>"</i>	<i>"</i>	<i>m</i>	<i>89</i>			<i>Austria</i>	<i>old age</i>		<i>Lucas</i>	<i>Barbara</i>	<i>Austria</i>		✓
<i>8/8</i>	<i>July</i>	<i>28</i>	<i>Albert bet</i>	<i>"</i>	<i>"</i>	<i>"</i>	<i>56</i>	<i>3</i>	<i>7</i>	<i>Genie</i>	<i>Run away Accident</i>				<i>Ger</i>		<i>Palmer</i> ✓

Twp. of *Underwood* *A. H. Morgan*

<i>7/13</i>	<i>Jan</i>	<i>15</i>	<i>Harry Tungren</i>	<i>M.</i>	<i>W.</i>	<i>S.</i>	<i>3</i>	<i>4</i>	<i>27</i>	<i>Minn.</i>	<i>Inflam. of Lungs</i>		<i>Peter A.</i>	<i>Mudla</i>	<i>Sweden</i>	<i>Sweden</i>	<i>Nation Wood Lake</i> ✓
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REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

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Twp. of *Gail*

Redwood Co. *Archibald Melloy*

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	
4/5	May	7	Annie J. J. J. J.	F	W	S	7	1	7	Ill	Pneum. of lungs.	Farming	Samuel	Louise	Switz.	Ill.	L. S. Crandall
	"	10	Augusta Kuty	"	"	"	0	11	0	Minn.	Lung fever	"	Wm.	Caroline	Sw.	Wis.	Hubert
3/8	Apr	3	Orley Longbottom	"	"	"			3	Ill			John	Elizabeth	Can.		Dr. S. C.
7-6	Jan	10	Valentine Roth	M	"	M	63	7	22	Ger.	Inflam. Brain		Valentine	Barbara	Sw.		Dr. S. C.
2/10/1900	Dec	14	William J. Linnings	"	"	"	51	1		Canada	Heart disease		John	Mary Ann	Canada		Dr. S. C.
	"	21	Hansel	"	"	S			4	Minn	Not known		Max Hansel	Elizabeth	Minn	Canada	Dr. S. C.

Twp. of *Gail*

J. S. Barber

7-8	June 14	Lloyd Jackson Fraser	M	W	S	10	11			Ger.	Inflam. Bowels		J. S. Fraser	Matthie M.	Virginia		J. S. Hill
11/10	Oct 12	Harriet Margaret Hill	F	"	S	8	6			Minn	Leukemia		Heckman Hill	Mary	Minn		J. S. Hill

REGISTER OF DEATHS IN THE STATE OF MINNESOTA.

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Twp. of *Waterbury*

Redwood Co. *John Greuda*

Date Received	DATE OF BIRTH		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	
3/6	July	12	Stratton	F.	W	S	0	1	14	Minn	La Grippe		Frank	Sarah	Am.	Am.	
	"	19	Eddy Miller	M	"	"	0	0	19	"	Chicken Pox		Wm M.	Minnie	La.	Ger.	Korn Lamberton
	"	24	Conrad	"	"	"	0	0	12	"	Scamps		Will L.	Alvina	Minn.	Minn.	
4/8	Nov	10	John Preuss	"	"	"	0	0	13	"	La Grippe		Jacob	Rosie	Ger.	Ger.	
6/6	Apr	10	Paul Masche	"	"	M	60	5	15	Ger.	Dropsy O.K.	q. 5					Crandall
10/5	Sept	15	Frank	"	"	D			11	Minn			Harzel	Maggie	Austria	Minn	
	"	20	Edward Andersen	"	"	"		8	12	"	Cholera Infantum		Albert	Mary	Ger		L. J. Crandall
11/7	Oct	13	Lenny Christine Hees	F	"	"		2	4	"	Stomach Trouble		Jacob	Barbara	"		"
1-6-1900	Dec	7	Minnie Lubber	M	"	W	64	3		Ger	Stroke Paralysis						

Twp. of *Westline*

John Casserty J. J. Reed

6/30	Feb	14	Maggie Mohler	F	W	D	1	10	23	Westline	Strangulated		J. J. Mohler	Maggie Rock	O	La	
1-5-1900	Dec	24	Albert N. Aram	M	"	M	24	6	24	Pa	Heart Disease		Karl	Pauline Fely	Ger.		

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M. Jennings

Two of