DEATH TRANSCRIPTS OF BARRY COUNTY RESIDENTS

WHO DIED OUTSIDE BARRY COUNTY

Compiled by the Michigan Department of Health

This volume (Volume 5) begins with **Kahl**
and ends with **Lynd**

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: Austin Kahle Sex: Male
Date of Death: 10/05/994 Date of Birth: 10/05/994
Fathers Name: Robert Kahle
Mothers Name: Christina Clay
Spouses Name:

Place of Death
Hospital: Metropolitan Hospital
City: Grand Rapids County: Kent

If Hospital: Inpatient SSN: - -

Residence
County: Barry
City: Yankee Springs Twp Address: 1095 Briggs Road
Zip Code: 49333

Place of Birth: Michigan
Armed Forces: No Marital Status: Never Married
Ancestry: German Race: White
Education: None

Underlying Cause of Death:

7650

Related Cause of Death (*)

117650

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 063332

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

04/17/96

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 043628

Decedents Name: Bailey Kate Karcher
Sex: Female
Date of Death: 07/02/995
Date of Birth: 07/02/995
Spouses Name:
SSN:
Fathers Name: William J Karcher
Mothers Name: Teri L Kitchen
Place of Birth: Michigan
Ancestry: German
Armed Forces: No
Race: White
Education: None
Marital Status: Never Married

Place of Death
City: Grand Rapids
County: Kent

Hospital or Other Place of Death
Metropolitan Hospital
Patient Status: Emergency Room/Outpatient

Residence
Address: 1014 Greenwood Middleville
County: Barry
City: Middleville
Zip Code: 49333

Manner of Death: Not Specified
Line 1: Premature Delivery (21 Wks)
Line 2:
Line 3:
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Never Employed
Industry:

09/17/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS

State of Residence: Michigan

File Number: 009196

Decedents Name: Elizabeth E. Kauffman
Sex: Female

Date of Death: 01/02/997
Date of Birth: 09/29/910

Spouses Name: Gayl E. Kauffman
SSN: 364-62-8377

Fathers Name: Monte Norris

Mothers Name: Lucy Mc Eldowney

Place of Birth: Indiana

Ancestry: Irish

Armed Forces: No
Race: White

Education: High School
Marital Status: Married

Place of Death

City: Lansing
County: Ingham

Hospital or Other Place of Death

Michigan Capital Med. Ctr. - Greenlawn Campus
Patient Status: Inpatient

Residence

Address: 5124 Saddle Bag Road Woodland
County: Barry

City: Woodland
Zip Code: 48897

Manner of Death: Not Specified

Line 1: Cardiopulmonary Arrest.

Line 2: Pneumonia

Line 3: Atherosclerotic Heart Disease-

Line 4:

Other Conditions: Dementia, Malnutrition.

Injury Date:

Description of Injury:

Occupation: Homemaker

Industry: Own Home

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: MAYNARD D. KAUFFMAN Sex: Male
Date of Death: 08/07/993 Date of Birth: 05/02/903 Age: 90
Fathers Last Name: KAUFFMAN

Place of Death
Hospital: Battle Creek Health Systems
City: Battle Creek County: Calhoun

If Hospital: Inpatient SSN: 365-40-0769

Residence
County: Barry
City: Baltimore Twp Address: 3506 LAWRENCE RD.
Zip Code: 49058

Place of Birth: Michigan
Armed Forces: No Marital Status: Never Married
Ancestry: German Race: White
Education: 08

Underlying Cause of Death:

7990

Related Cause of Death (*)

117990

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 48108

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

11/27/95

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT

State: Michigan

File Number: 014683

Decedents Name: Jacqueline E. Kearney
Sex: Female
Date of Death: 03/09/995
Date of Birth: 06/11/926
Spouses Name: Roy A. Kearney
SSN: 369-22-8494
Fathers Name: Arthur A. Tomes
Mothers Name: Violet V. Kelly
Place of Birth: Michigan
Hospital: Unknown
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: 4 years of college
Marital Status: Married

Place of Death

City: Emmet Twp
County: Calhoun
If Hospital:

Residence

Address: 7203 Bird Road Baltimore
County: Barry
City: Baltimore Twp
Zip Code: 49058

Manner of Death: Not Specified
Line 1: Carcinoma Of Lung
Line 2:
Line 3:
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Homemaker
Industry: Own Home

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

Decedents Name: ALICE R. KEIHL Sex: Female
Date of Death: 02/04/993 Date of Birth: 06/26/905 Age: 87
Fathers Last Name: Munch

Place of Death
Hospital: Unknown
City: Grand Rapids County: Kent

If Hospital: Inpatient SSN: 380-05-2868

Residence
County: Barry
City: Nashville Address: 204 Maple St.
Zip Code: 49073

Place of Birth: Michigan
Armed Forces: No Marital Status: Widow, Widower
Ancestry: North African Race: White
Education: 2 years College

Underlying Cause of Death:

4299

Related Cause of Death (*)

114299

Autopsy: No Findings Available: Unknown Actual Place: Nursing Home

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 8739

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

02/02/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
DEATH TRANSCRIPTS
Non-Resident Transcripts

State of Residence: Michigan

File Number: 056163

Patient Information

Decedents Name: Charles W. Kelchner
Sex: Male
Date of Death: 09/27/997
Date of Birth: 07/26/923
Spouses Name:
SSN: 166-14-8311
Fathers Name: Raymond Kelchner
Mothers Name: Susan Duke
Place of Birth: Pennsylvania
Ancestry: German
Armed Forces: Yes
Race: White
Education: High School
Marital Status: Widow, Widower

Place of Death

City: Grand Rapids
County: Kent
Hospital or Other Place of Death: Kent Comm Hospital Complex
Patient Status: Inpatient

Residence

Address: 529 North Jefferson St. Hastings
County: Barry
City: Hastings
Zip Code: 49058

Manner of Death

Manner: Not Specified
Line 1: Cardiac Arrhythmia
Line 2: Arteriosclerosis
Line 3:
Line 4:

Other Conditions: Renal Insufficiency, Congestive Heart Failure
Injury Date:
Injury Description:
Occupation: Sales Representative
Industry: Cable Products Manufacturing

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: Kendall Hart Keller Sex: Male
Date of Death: 03/04/994 Date of Birth: 02/28/920 Age: 74
Fathers Last Name: Keller

Place of Death
Hospital: Borgess Med Cen
City: Kalamazoo County: Kalamazoo

If Hospital: Inpatient SSN: 383-14-8224

Residence
County: Barry
City: Hope Twp Address: 4501 Walldorff Rd.
Zip Code: 49046

Place of Birth: Michigan
Armed Forces: Yes Marital Status: Married
Ancestry: Irish Race: White
Education: 10

Underlying Cause of Death:

436

Related Cause of Death (*)

11436
215070

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 16621

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

11/16/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

DEATH TRANSCRIPTS FOR 1998

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 002476

Patient Information

Decedents Name: Charles L. Kelley
Sex: Male
Date of Death: 01/03/1998
Date of Birth: 05/02/1918
Spouses Name: Helen L. Lewis
SSN: 368-10-4728
Fathers Name: William Kelley
Mothers Name: Lula Balke
Place of Birth: Michigan
Ancestry: German
Armed Forces: No
Race: White
Education: High School
Marital Status: Married

Place of Death

City: Kalamazoo
County: Kalamazoo
Hospital or Other Place of Death: Borgess Med Cen
Patient Status: Emergency Room/Outpatient

Residence

Address: 6190 Cherry Valley Rd.
County: Barry
City: Thornapple Twp
Zip Code: 49333

Manner of Death

Manner: Not Specified
Line 1: Arteriosclerotic Heart Disease
Line 2:
Line 3:
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: 8journeyman
Industry: Office Furnishings Manufacture

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 030273

Decedents Name: Edna L. Kemp
Sex: Female
Date of Death: 05/11/996
Date of Birth: 05/11/907
Spouses Name:
SSN: 362-38-5332
Fathers Name: George Whitman
Mothers Name: Alice Warner
Place of Birth: Minnesota
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: 08
Marital Status: Widow, Widower

Place of Death

City: Grand Rapids
County: Kent

Hospital or Other Place of Death

Butterworth Hospital
Patient Status: Inpatient

Residence

Address: 821 Pine Creek Drive Middleville
County: Barry
City: Middleville
Zip Code: 49333

Manner of Death: Not Specified
Line 1: Pneumonia
Line 2: Urinary Tract Infection
Line 3:
Line 4:
Other Conditions: Congestive Heart Failure
Injury Date:
Description of Injury:
Occupation: Retail Sales
Industry: Store Owner

02/02/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
DEATH TRANSCRIPTS
Non-Resident Transcripts

State of Residence: Michigan

File Number: 054546

Patient Information

Decedents Name: John Jr. Earl Kennedy
Sex: Male
Date of Death: 09/08/997
Date of Birth: 10/25/926
Spouses Name:
SSN: 377-22-6653
Fathers Name: John Earl Kennedy
Mothers Name: Reva Aurelia Barbee
Place of Birth: Michigan
Ancestry: French
Armed Forces: Yes
Race: White
Education: 10
Marital Status: Never Married

Place of Death

City: Bedford Twp
County: Calhoun
Hospital or Other Place of Death:
VA Medical Center - Battle Creek
Patient Status: Inpatient

Residence

Address: 11680 Case Road Assyria
County: Barry
City: Assyria Twp
Zip Code: 49021

Manner of Death

Manner: Not Specified
Line 1: Chronic Obstructive Pulmonary Disease
Line 2:
Line 3:
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Clerk
Industry: Post Office

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: Ralph S. Kenyon Sex: Male
Date of Death: 05/22/994 Date of Birth: 07/07/907 Age: 86
Fathers Last Name: Kenyon

Place of Death
Hospital: St Mary's Health Services - Grand Rapids
City: Grand Rapids County: Kent

If Hospital: Emergency Room/Outpatient SSN: 363-42-2175

Residence
County: Barry
City: Thornapple Twp Address: 12007 Green Lake Rd.
Zip Code: 49333

Place of Birth: Michigan
Armed Forces: No Marital Status: Married
Ancestry: British, Scotch, Welsh, Scotch Race: White
Education: 08

Underlying Cause of Death:

4292

Related Cause of Death (*)

114279
214279
314284
612512
627802

Autopsy: No Findings Available: No Actual Place: Hospital

Medical Examiner Case: No Mode of Death: Natural

Work Injury: No Location: Residential Institution

State File Number: 30507

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: Thelma Grace Ketchum Sex: Female
Date of Death: 08/15/994 Date of Birth: 02/22/943 Age: 51
Fathers Last Name: Robinson

Place of Death
Hospital: Borgess Med Cen
City: Kalamazoo County: Kalamazoo

If Hospital: Inpatient SSN: 362-44-7613

Residence
County: Barry
City: Orangeville Twp Address: 7755 Lindsey Road
Zip Code: 49080

Place of Birth: Kentucky
Armed Forces: No Marital Status: Married
Ancestry: American Race: White
Education: 10

Underlying Cause of Death:

1729

Related Cause of Death (*)

115701
211729

Autopsy: Yes Findings Available: Yes Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 49745

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: EVERETT R. KETTLE Sex: Male
Date of Death: 09/28/993 Date of Birth: 02/03/918 Age: 75
Fathers Last Name: Kettle

Place of Death
Hospital: Borgess Med Cen
City: Kalamazoo County: Kalamazoo

If Hospital: Emergency Room/Outpatient SSN: 384-10-0343

Residence
County: Barry
City: Barry Twp Address: 11911 Gurd Rd.
Zip Code: 49046

Place of Birth: Michigan
Armed Forces: No Marital Status: Married
Ancestry: British, Scotch, Welsh, Scotch Race: White
Education: High School

Underlying Cause of Death:

4149

Related Cause of Death (*)

114275
214279
314149
612500

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 61956

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

09/03/98

DEATH TRANSCRIPTS FOR 1998

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 024333

Patient Information

Decedents Name: Raymond L. Kidder
Sex: Male
Date of Death: 04/04/1998
Date of Birth: 02/07/1927
Spouses Name:
SSN: 378-28-0975
Fathers Name: Arthur Kidder
Mothers Name: Mina Debar
Place of Birth: Michigan
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: 10
Marital Status: Divorced

Place of Death

City: Grand Rapids
County: Kent
Hospital or Other Place of Death:
Patient Status: Inpatient
Convalescent home, nursing home, medical care facility or hospice

Residence

Address: 2740 Heath Road Rutland
County: Barry
City: Rutland Twp
Zip Code: 49058

Manner of Death

Manner: Not Specified
Line 1: Renal Failure
Line 2: Diabetes Mellitus, I I, Insulin Dependent
Line 3:
Line 4:

Other Conditions: Chf, Old Cva, Anemia
Injury Date:
Injury Description:
Occupation: Driver
Industry: Trucking

03/25/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 043164

Decedents Name: Piet Kingma
Sex: Male
Date of Death: 07/08/996
Date of Birth: 05/18/926
Spouses Name: Hennie A. M. Pen
SSN: 373-82-0100
Fathers Name: Ate Kingma
Mothers Name: Janna Vander Vaart
Place of Birth: Unknown
Ancestry: Other Western European
Armed Forces: No
Race: White
Education: 5 years of college
Marital Status: Married

Place of Death

City: Grand Rapids
County: Kent

Hospital or Other Place of Death

Butterworth Hospital
Patient Status: Inpatient

Residence

Address: 7625 Parmalee Road Thornapple
County: Barry
City: Thornapple Twp
Zip Code: 49333

Manner of Death: Not Specified
Line 1: Heart Failure
Line 2: Bowel Obstruction With Strangulated Bowel
Line 3:
Line 4:
Other Conditions: Colon Cancer With Metastasis To Liver
Injury Date:
Description of Injury:
Occupation: Minister
Industry: American Reformed Church

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

Decedents Name: SHERMAN JUNIOR KISTLER Sex: Male
Date of Death: 11/05/993 Date of Birth: 08/03/917 Age: 76
Fathers Last Name: Kistler

Place of Death
Hospital: Unknown
City: Oshtemo Twp County: Kalamazoo

If Hospital: Inpatient SSN: 368-01-4541

Residence
County: Barry
City: Prairieville Twp Address: 11295 Sunset Point Dr.
Zip Code: 49080

Place of Birth: Indiana
Armed Forces: Yes Marital Status: Widow, Widower
Ancestry: British, Scotch, Welsh, Scotch Race: White
Education: High School

Underlying Cause of Death:

4280

Related Cause of Death (*)

114280
61492
622859

Autopsy: No Findings Available: Unknown Actual Place: Nursing Home

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 69153

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: Harvey Moses Knapp Sex: Male
Date of Death: 11/19/994 Date of Birth: 03/09/926
Fathers Name: Ralph Knapp
Mothers Name: Edna Quinsey
Spouses Name: Myrna Baker

Place of Death
Hospital: Gratiot Community Hospital
City: Alma County: Gratiot

If Hospital: Emergency Room/Outpatient SSN: 385-24-2913

Residence
County: Barry
City: Prairieville Twp Address: 189 E. Shore Dr.
Zip Code: 49060

Place of Birth: Michigan
Armed Forces: Yes Marital Status: Married
Ancestry: British, Scotch, Welsh, Scotch Race: White
Education: High School

Underlying Cause of Death:

410

Related Cause of Death (*)

11410

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: No Mode of Death: Natural

Work Injury: Location:

State File Number: 069172

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 040159

Decedents Name: Richard W. Knauss
Sex: Male
Date of Death: 06/11/996
Date of Birth: 01/21/934
Spouses Name: Shirley F. Boerema
SSN: 382-26-0764
Fathers Name: Douglas Knauss
Mothers Name: Lois Schmidt
Place of Birth: Michigan
Ancestry: German
Armed Forces: No
Race: White
Education: High School
Marital Status: Married

Place of Death
City: Cadillac
County: Wexford

Hospital or Other Place of Death
Mercy Hospital - Cadillac
Patient Status: Inpatient

Residence
Address: 911 Greenwood Middleville
County: Barry
City: Middleville
Zip Code: 49333

Manner of Death: Not Specified
Line 1: Ventricular Fibrillation
Line 2: Recent Myocardial Infarction
Line 3:
Line 4:
Other Conditions: Subarachnoid Hemorrhage
Injury Date:
Description of Injury:
Occupation: Semi-driver
Industry: Van Waters & Rogers Inc.

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: Anna Marie Knorr Sex: Female
Date of Death: 08/08/994 Date of Birth: 02/22/910 Age: 84
Fathers Last Name: Seeley

Place of Death
Hospital: Unknown
City: Cooper Twp County: Kalamazoo

If Hospital: Inpatient SSN: 291-26-0110

Residence
County: Barry
City: Prairieville Twp Address: 12009 Doster Rd.
Zip Code: 49080

Place of Birth: Ohio
Armed Forces: No Marital Status: Widow, Widower
Ancestry: German Race: White
Education: High School

Underlying Cause of Death:

436

Related Cause of Death (*)

115849
21436

Autopsy: No Findings Available: Unknown Actual Place: Nursing Home

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 49809

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: Clyde, Jr. John Koopman Sex: Male
Date of Death: 04/29/994 Date of Birth: 08/24/937 Age: 56
Fathers Last Name: Koopman, Sr.

Place of Death
Hospital: Butterworth Hospital
City: Grand Rapids County: Kent

If Hospital: Inpatient SSN: 373-34-8437

Residence
County: Barry
City: Hope Twp Address: 1475 W. Sager Rd.
Zip Code: 49058

Place of Birth: Michigan
Armed Forces: No Marital Status: Married
Ancestry: Other Western European Race: White
Education: 11

Underlying Cause of Death:

1539

Related Cause of Death (*)

111539

Autopsy: No Findings Available: No Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 30338

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

05/13/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
DEATH TRANSCRIPTS

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 076668

Patient Information

Decedents Name: Jonathan L. Koops
Sex: Male
Date of Death: 12/22/997
Date of Birth: 08/31/985
Spouses Name:
SSN: 384-06-6935
Fathers Name: Larry L. Koops
Mothers Name: Jean F. Tucker
Place of Birth: Michigan
Ancestry: Other Western European
Armed Forces: No
Race: White
Education: 05
Marital Status: Never Married

Place of Death

City: Caledonia Twp
County: Kent
Hospital or Other Place of Death:
Not Classifiable
Patient Status:

Residence

Address: 2248 Parker Drive Yankee
County: Barry
City: Yankee Springs Twp
Zip Code: 49348

Manner of Death

Manner: Accidental
Line 1: Multiple Systems Trauma
Line 2:
Line 3:
Line 4:

Other Conditions:
Injury Date: 12/22/1997
Injury Description: Two Car Broadside Accident
Occupation: Student
Industry: Education

07/30/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

DEATH TRANSCRIPTS FOR 1998

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 009557

Patient Information

Decedents Name: Geraldine Eva Kramer
Sex: Female
Date of Death: 02/22/1998
Date of Birth: 06/23/1912
Spouses Name:
SSN: 382-03-6200
Fathers Name: Fred Turmell
Mothers Name: Mary Gwizdala
Place of Birth: Michigan
Ancestry: French
Armed Forces: No
Race: White
Education: 10
Marital Status: Widow, Widower

Place of Death

City: Kalamazoo
County: Kalamazoo
Hospital or Other Place of Death: Bronson Methodist Hospital
Patient Status: Inpatient

Residence

Address: 7172 Lindsey Road Orangeville
County: Barry
City: Orangeville Twp
Zip Code: 49046

Manner of Death

Manner: Not Specified
Line 1: Acute Cerebrovascular Thrombosis
Line 2:
Line 3:
Line 4:

Other Conditions: Atherosclerotic Cardiovascular Disease
Injury Date:
Injury Description:
Occupation: Automotive
Industry: Factory

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 062764

Decedents Name: Denise A. Krouse
Sex: Female
Date of Death: 09/29/995
Date of Birth: 08/13/965
Spouses Name:
SSN: 364-62-6246
Fathers Name: Lawrence Snowden
Mothers Name: Kay Jarrard
Place of Birth: Michigan
Ancestry: American
Armed Forces: No
Race: White
Education: 1 year College
Marital Status: Divorced

Place of Death
City: Lansing
County: Ingham

Hospital or Other Place of Death
Enroute to Hospital
Patient Status: DOA with hospital name

Residence
Address: 512 E. Walnut Hastings
County: Barry
City: Hastings
Zip Code: 49058

Manner of Death: Accidental
Line 1: Multiple Injuries From Auto Accident
Line 2:
Line 3:
Line 4:
Other Conditions:
Injury Date: 09/29/1995
Description of Injury: One Car Accident
Occupation: Originator
Industry: Mortgage Company

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: Clarence E. Kruger Sex: Male
Date of Death: 04/08/994 Date of Birth: 07/06/920 Age: 73
Fathers Last Name: Kruger

Place of Death
Hospital: Unknown
City: Grand Rapids County: Kent

If Hospital: Inpatient SSN: 371-18-7702

Residence
County: Barry
City: Hastings Twp Address: 2520 E. Quimby Road
Zip Code: 49058

Place of Birth: Michigan
Armed Forces: Yes Marital Status: Married
Ancestry: German Race: White
Education: 11

Underlying Cause of Death:

2500

Related Cause of Death (*)

11486
21436
314149
412500
617872
625929

Autopsy: No Findings Available: Unknown Actual Place: Nursing Home

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 23815

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

11/29/95

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT

State: Michigan

File Number: 029477

Decedents Name: Clarence C. La Bin
Sex: Male
Date of Death: 05/21/995
Date of Birth: 07/19/918
Spouses Name: Evelyn M. VanDeusen
SSN: 366-14-7531
Fathers Name: Charles LaBin
Mothers Name: Pauline Peltier
Place of Birth: Michigan
Hospital: Blodgett Mem Med Cen
Ancestry: French
Armed Forces: Yes
Race: White
Education: 09
Marital Status: Married

Place of Death

City: East Grnd Rapids
County: Kent
If Hospital: Inpatient

Residence

Address: 5140 W. Barnum Rd. Irving
County: Barry
City: Irving Twp
Zip Code: 49333

Manner of Death: Not Specified
Line 1: Mesenteric Ischemia
Line 2: Embolism To Superior Mesenteric Artery
Line 3: Atrial Fibrillation
Line 4:
Other Conditions: Recurrent Colon Cancer
Injury Date:
Description of Injury:
Occupation: Janitor-maintenance
Industry: General Motors

12/02/97

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
DEATH TRANSCRIPTS
County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 030046

Patient Information

Decedents Name: Rica La Fleur
Sex: Female
Date of Death: 05/15/997
Date of Birth: 04/14/903
Spouses Name:
SSN: 374-42-3157
Fathers Name: Tenis Gelder
Mothers Name: Alice Bergsma
Place of Birth: New York
Ancestry: Other Western European
Armed Forces: No
Race: White
Education: 08
Marital Status: Widow, Widower

Place of Death

City: Grand Rapids
County: Kent
Hospital or Other Place of Death:
Patient Status: Inpatient
Convalescent home, nursing home, medical care facility or hospice

---

Residence

Address: 13608 Bedford Rd. Johnstown
County: Barry
City: Johnstown Twp
Zip Code: 49017

Manner of Death

Manner: Not Specified
Line 1: Acute Renal Failure
Line 2: Congestive Heart Failure
Line 3:
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Homemaker
Industry: Own Home

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

Decedents Name: FLORENCE VIOLET LAKE Sex: Female
Date of Death: 03/01/993 Date of Birth: 01/16/899 Age: 94
Fathers Last Name: Crumpacker

Place of Death
Hospital: Unknown
City: Grand Rapids County: Kent

If Hospital: Inpatient SSN: 380-38-8480

Residence
County: Barry
City: Yankee Springs Twp Address: 4525 Chief Noonday Rd.
Zip Code: 49058

Place of Birth: Michigan
Armed Forces: No Marital Status: Widow, Widower
Ancestry: French Race: White
Education: 08

Underlying Cause of Death:

486

Related Cause of Death (*)

11486

Autopsy: No Findings Available: Unknown Actual Place: Nursing Home

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 15642

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 016168

Decedents Name: Claude La Londe
Sex: Male
Date of Death: 03/24/996
Date of Birth: 04/09/932
Spouses Name:
SSN: 383-30-4603
Fathers Name: Unknown
Mothers Name: Margaret Mc Cormick
Place of Birth: Michigan
Ancestry: Irish
Armed Forces: Yes
Race: White
Education: Unknown
Marital Status: Never Married

Place of Death
City: Grand Rapids
County: Kent

Hospital or Other Place of Death
Butterworth Hospital
Patient Status: Inpatient

Residence
Address: 121 N. Washington Hastings
County: Barry
City: Hastings
Zip Code: 49058

Manner of Death: Accidental
Line 1: Medical Complications Of Multiple Injuries
Line 2:
Line 3:
Line 4:
Other Conditions: Acute Ethanol Intoxication
Injury Date: 03/17/1996
Description of Injury: Struck By Car While Walking Along Street
Occupation: Unknown
Industry: Unknown

05/13/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
DEATH TRANSCRIPTS

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 076289

Patient Information

Decedents Name: Marcia Dawn Lampert
Sex: Female
Date of Death: 12/07/997
Date of Birth: 03/28/951
Spouses Name: Robert Lampert
SSN: 363-56-3668
Fathers Name: Kenneth E. Bray Sr.
Mothers Name: Mary A. Burleson
Place of Birth: Michigan
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: High School
Marital Status: Married

Place of Death

City: East Grand Rapids
County: Kent
Hospital or Other Place of Death: Blodgett Mem Med Cen
Patient Status: Inpatient

Residence

Address: 1973 North Broadway Hastings
County: Barry
City: Hastings Twp
Zip Code: 49058

Manner of Death

Manner: Not Specified
Line 1: Metastatic Small Cell Cancer, Unknown Primary
Line 2:
Line 3:
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Homemaker
Industry: Own Home

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

07/30/98

DEATH TRANSCRIPTS FOR 1998

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 002570

Patient Information

Decedents Name: Wilbur I. Lane
Sex: Male
Date of Death: 01/25/1998
Date of Birth: 08/03/1912
Spouses Name: Wilma Kabbe
SSN: 368-03-8244
Fathers Name: Charlie Lane
Mothers Name: Caddie Temple
Place of Birth: Michigan
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: High School
Marital Status: Married

Place of Death

City: Kalamazoo
County: Kalamazoo
Hospital or Other Place of Death: Borgess Med Cen
Patient Status: Inpatient

Residence

Address: 1809 Pifer Rd. Barry
County: Barry
City: Barry Twp
Zip Code: 49046

Manner of Death

Manner: Not Specified
Line 1: Abdominal Carcinomatosis
Line 2: Intestinal Cancer
Line 3:
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Payroll Clerk
Industry: Fans

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: CHARLES ALBERT LANGNER Sex: Male
Date of Death: 07/29/993 Date of Birth: 02/07/905 Age: 88
Fathers Last Name: Langner

Place of Death
Hospital: Metropolitan Hospital
City: Grand Rapids County: Kent

If Hospital: Inpatient SSN: 335-09-4978

Residence
County: Barry
City: Yankee Springs Twp Address: 12725 Park Dr.
Zip Code: 49348

Place of Birth: Illinois
Armed Forces: No Marital Status: Widow, Widower
Ancestry: German Race: White
Education: 08

Underlying Cause of Death:

436

Related Cause of Death (*)

11436
123314
132901

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 49648

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
DEATH TRANSCRIPTS

05/13/98

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 076377

Patient Information

Decedents Name: Jesse Owen Laubaugh
Sex: Male
Date of Death: 12/04/997
Date of Birth: 06/15/996
Spouses Name:
SSN: 363-21-7655
Fathers Name: Lynn L. Laubaugh
Mothers Name: Martha L. Wolfe
Place of Birth: Michigan
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: None
Marital Status: Never Married

Place of Death

City: Grand Rapids
County: Kent
Hospital or Other Place of Death: Butterworth Hospital
Patient Status: Inpatient

Residence

Address: 154 E. Broadway Woodland
County: Barry
City: Woodland
Zip Code: 48897

Manner of Death

Manner: Not Specified
Line 1: Cardiopulmonary Failure
Line 2: Progressive Neurometabolic Degenerative Disease
Line 3:
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Never Employed
Industry:

09/17/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS

State of Residence: Michigan

File Number: 014224

Decedents Name: Leona M. Lawrence
Sex: Female
Date of Death: 03/06/997
Date of Birth: 08/23/908
Spouses Name: Curtis Lawrence
SSN: 374-40-6956
Fathers Name: Fred Hart
Mothers Name: Edla Lloyd
Place of Birth: Michigan
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: High School
Marital Status: Married

Place of Death

City: Gunplain Twp
County: Allegan

Hospital or Other Place of Death

Unknown
Patient Status:

Residence

Address: 14475 Brook Lodge Rd. Barry
County: Barry
City: Barry Twp
Zip Code: 49060

Manner of Death: Not Specified

Line 1: Aspiration Secondary Alzheimer's

Line 2:

Line 3:

Line 4:

Other Conditions:

Injury Date:

Description of Injury:

Occupation: Homemaker

Industry: At Home

07/30/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
DEATH TRANSCRIPTS FOR 1998
County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 009148

Patient Information

Decedents Name: Gordon Kendall Lehman
Sex: Male
Date of Death: 02/11/1998
Date of Birth: 05/24/1956
Spouses Name: Pamela J. Bell
SSN: 375-56-6588
Fathers Name: George Lehman
Mothers Name: Helen Sue Henderlite
Place of Birth: Michigan
Ancestry: German
Armed Forces: No
Race: White
Education: High School
Marital Status: Married

Place of Death

City: Lansing
County: Ingham
Hospital or Other Place of Death: Sparrow, Edward W Hospital
Patient Status: Inpatient

Residence

Address: 6500 Gurd Road Hope
County: Barry
City: Hope Twp
Zip Code: 49058

Manner of Death

Manner: Not Specified
Line 1: Cardiac Arrest
Line 2: Pulmonary Embolism
Line 3:
Line 4:

Other Conditions: Myocardial Infarction
Injury Date:
Injury Description:
Occupation: Master Plumber
Industry: Self Employed

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 036561

Decedents Name: Eda Anna Leinaar
Sex: Female
Date of Death: 06/15/996
Date of Birth: 06/16/895
Spouses Name:
SSN: 379-24-0582
Fathers Name: Christian Hartman
Mothers Name: Elizabeth Swankoff
Place of Birth: Michigan
Ancestry: German
Armed Forces: No
Race: White
Education: 08
Marital Status: Widow, Widower

Place of Death
City: Kalamazoo Twp
County: Kalamazoo
Hospital or Other Place of Death
Nursing Home or Extended Care Facility
Patient Status: Inpatient

Residence
Address: 145 Bush St. Barry Mi
County: Barry
City: Barry Twp
Zip Code: 49046

Manner of Death: Not Specified
Line 1: Uremia
Line 2: Nephrosclerosis
Line 3: Atherosclerosis
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Homemaker
Industry: At Home

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

Decedents Name: CLIFFORD EUGENE LEONARD Sex: Male
Date of Death: 02/03/993 Date of Birth: 10/11/928 Age: 64
Fathers Last Name: LEONARD

Place of Death
Hospital: Unknown
City: Grand Rapids County: Kent

If Hospital: Unknown SSN: 377-22-5742

Residence
County: Barry
City: Prairieville Twp Address: 12438 SUNSET PT.
Zip Code: 49080

Place of Birth: Michigan
Armed Forces: No Marital Status: Married
Ancestry: North African Race: White
Education: 08

Underlying Cause of Death:

1629

Related Cause of Death (*)

111629

Autopsy: No Findings Available: Unknown Actual Place: Nursing Ho

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 8732

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

03/25/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 018849

Decedents Name: Kimberley Sue Lester
Sex: Female
Date of Death: 03/03/996
Date of Birth: 01/29/963
Spouses Name:
SSN: 368-80-6288
Fathers Name: Larry Lester
Mothers Name: Sandra Hook
Place of Birth: Michigan
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: High School
Marital Status: Never Married

Place of Death
City: Ann Arbor
County: Washtenaw
Hospital or Other Place of Death
University of Mich Hosps
Patient Status: Inpatient

Residence
Address: 8830 Wertman Road Hope
County: Barry
City: Hope Twp
Zip Code: 49046

Manner of Death: Not Specified
Line 1: Sepsis
Line 2: Pneumonia
Line 3:
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Never Worked
Industry:

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: CLIFFORD BURDETTE LEWIS Sex: Male
Date of Death: 12/30/993 Date of Birth: 11/08/917 Age: 76
Fathers Last Name: Lewis

Place of Death
Hospital: Blodgett Mem Med Cen
City: East Grnd Rapids County: Kent

If Hospital: Inpatient SSN: 368-18-6258

Residence
County: Barry
City: Yankee Springs Twp Address: 526 Bluff Drive
Zip Code: 49333

Place of Birth: Michigan
Armed Forces: Yes Marital Status: Married
Ancestry: German Race: White
Education: 08

Underlying Cause of Death:

410

Related Cause of Death (*)

11431
219345
61410

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 75956

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

03/27/98

DEATH TRANSCRIPTS

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 069446

Patient Information

Decedents Name: Vernor Max Lictka
Sex: Male
Date of Death: 11/05/997
Date of Birth: 06/08/907
Spouses Name:
SSN: 380-03-8802
Fathers Name: William C. Lictka
Mothers Name: Mattie H. Thompson
Place of Birth: Michigan
Ancestry: German
Armed Forces: Yes
Race: White
Education: High School
Marital Status: Widow, Widower

Place of Death

City: East Grand Rapids
County: Kent
Hospital or Other Place of Death:
Blodgett Mem Med Cen
Patient Status: Inpatient

Residence

Address: 133 Arnold St. Middleville
County: Barry
City: Middleville
Zip Code: 49333

Manner of Death

Manner: Not Specified
Line 1: Ventricular Tachycardia
Line 2: Arteriosclerotic Heart Disease
Line 3:
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Laborer
Industry: Factory

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 063383

Decedents Name: Lillian Irene Ligman
Sex: Female
Date of Death: 10/02/995
Date of Birth: 11/24/900
Spouses Name:
SSN: 377-22-4775
Fathers Name: Arthur William Tusch
Mothers Name: Sara Jane Lazenbe
Place of Birth: Michigan
Ancestry: German
Armed Forces: No
Race: White
Education: 08
Marital Status: Widow, Widower

Place of Death
City: Grand Rapids
County: Kent

Hospital or Other Place of Death
Butterworth Hospital
Patient Status: Inpatient

Residence
Address: 412 Westwood Lawn Hastings
County: Barry
City: Hastings
Zip Code: 49058

Manner of Death: Not Specified
Line 1: Atherosclerotic Vascular Disease
Line 2: Chronic Atrial Fibrillation
Line 3: Renal Insufficiency
Line 4: Diabetes Mellitus
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Homemaker
Industry: Own Home

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: FLORENCE F. LIND Sex: Female
Date of Death: 08/15/993 Date of Birth: 06/12/910 Age: 83
Fathers Last Name: Brearley

Place of Death
Hospital: Unknown
City: Grand Rapids County: Kent

If Hospital: Inpatient SSN: 378-34-0956

Residence
County: Barry
City: Thornapple Twp Address: 5555 Whitneyville Rd.
Zip Code: 49333

Place of Birth: Michigan
Armed Forces: No Marital Status: Widow, Widower
Ancestry: German Race: White
Education: 08

Underlying Cause of Death:

4140

Related Cause of Death (*):

114259
214140
612500
627854
63436
644019
652859
665939

Autopsy: No Findings Available: Unknown Actual Place: Nursing Home

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 49779

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

09/03/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

DEATH TRANSCRIPTS FOR 1998

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 022776

Patient Information

Decedents Name: Marilyn B. Lindberg
Sex: Female
Date of Death: 04/23/1998
Date of Birth: 06/08/1926
Spouses Name: Ernest E. Lindberg
SSN: 384-24-3089
Fathers Name: E. Earl Bristol
Mothers Name: Dorothy D. Clark
Place of Birth: Michigan
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: High School
Marital Status: Married

Place of Death

City: Battle Creek
County: Calhoun
Hospital or Other Place of Death: Battle Creek Health Systems
Patient Status: Inpatient

Residence

Address: 2025 Lacey Road Johnstown
County: Barry
City: Johnstown Twp
Zip Code: 49050

Manner of Death

Manner: Not Specified
Line 1: Carcinomatosis Whole Abdomen, Bowel Obstruction
Line 2: Carcinoma Of The Colon
Line 3:
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Homemaker
Industry: Own Home

01/15/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
DEATH TRANSCRIPTS
County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 043092

Patient Information

Decedents Name: Jerry Harvey Lindberry
Sex: Male
Date of Death: 07/10/997
Date of Birth: 06/29/936
Spouses Name: Jeanie Baldus
SSN: 378-34-4863
Fathers Name: Arnold Harvey Lindberry
Mothers Name: Irma Clara Landauer
Place of Birth: Michigan
Ancestry: German
Armed Forces: No
Race: White
Education: High School
Marital Status: Married

Place of Death

City: East Grand Rapids
County: Kent
Hospital or Other Place of Death: Blodgett Mem Med Cen
Patient Status: Inpatient

Residence

Address: 11545 Winchester Dr. Orangeville
County: Barry
City: Orangeville Twp
Zip Code: 49344

Manner of Death

Manner: Not Specified
Line 1: Pneumonia
Line 2: Emphysema
Line 3: Coronary Pulmonale
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Sales
Industry: Printing

03/25/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 062833

Decedents Name: Mary Alice Linderman
Sex: Female
Date of Death: 10/04/996
Date of Birth: 05/23/919
Spouses Name:
SSN: 383-09-5269
Fathers Name: Chester Allerding
Mothers Name: Mary Alice Wrench
Place of Birth: Michigan
Ancestry: German
Armed Forces: No
Race: White
Education: 11
Marital Status: Widow, Widower

Place of Death

City: Grand Rapids
County: Kent

Hospital or Other Place of Death

Metropolitan Hospital
Patient Status: Inpatient

Residence

Address: 290 N. Whitmore Rd. Rutland
County: Barry
City: Rutland Twp
Zip Code: 49058

Manner of Death: Not Specified
Line 1: Diffuse Lymphoproliferative Disease
Line 2:
Line 3:
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Self Employed
Industry: Linderman Polish & Buff

04/17/96

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 061781

Decedents Name: Herbert Chester Lindsey
Sex: Male
Date of Death: 10/29/995
Date of Birth: 07/28/930
Spouses Name:
SSN: 373-28-3264
Fathers Name: Chester Lindsey
Mothers Name: Zelpha Nickloy
Place of Birth: Michigan
Ancestry: American
Armed Forces: No
Race: White
Education: 1 year College
Marital Status: Divorced

Place of Death
City: Battle Creek
County: Calhoun

Hospital or Other Place of Death
Battle Creek Health Systems
Patient Status: Inpatient

Residence
Address: 1800 Stamm Road Johnstown
County: Barry
City: Johnstown Twp
Zip Code: 49050

Manner of Death: Not Specified
Line 1: Adult - Respiratory Distress Syndrome
Line 2: Pneumonia.
Line 3:
Line 4:
Other Conditions: Metastatic Lung Cancer.
Injury Date:
Description of Injury:
Occupation: Systems Analyst
Industry: Government

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT

State: Michigan

File Number: 023213

Decedents Name: Eugene R. Lingholm
Sex: Male
Date of Death: 04/25/995
Date of Birth: 05/31/929
Spouses Name: Winifred Hutchison
SSN: 352-14-9598
Fathers Name: John Lingholm
Mothers Name: Rita Nelson
Place of Birth: Illinois
Hospital: Borgess Med Cen
Ancestry: American
Armed Forces: Yes
Race: White
Education: High School
Marital Status: Married

Place of Death

City: Kalamazoo
County: Kalamazoo
If Hospital: Inpatient

Residence

Address: 927 Bridge Street Nashville
County: Barry
City: Nashville
Zip Code: 49073

Manner of Death: Not Specified
Line 1: Congestive Cardiomyopathy
Line 2: Coronary Atherosclerosis
Line 3:
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Computer System Analyst
Industry: Federal Government

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

11/16/98

DEATH TRANSCRIPTS FOR 1998

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 029564

Patient Information

Decedents Name: Clark E. Lipscomb
Sex: Male
Date of Death: 05/03/1998
Date of Birth: 07/10/1924
Spouses Name: Norma J. Quick
SSN: 373-20-8459
Fathers Name: Leonard T. Lipscomb
Mothers Name: Eva B. Clark
Place of Birth: Michigan
Ancestry: German
Armed Forces: Yes
Race: White
Education: High School
Marital Status: Married

Place of Death

City: Battle Creek
County: Calhoun
Hospital or Other Place of Death: Battle Creek Health Systems
Patient Status: Inpatient

Residence

Address: 1585 Lacye Road Johnstown
County: Barry
City: Johnstown Twp
Zip Code: 49050

Manner of Death

Manner: Not Specified
Line 1: Ischemic Cardiomyopathy
Line 2: Coronary Artery Disease
Line 3: Diabetes Mellitus Ii
Line 4:

Other Conditions: Idiopathic Vasculitis
Injury Date:
Injury Description:
Occupation: Production
Industry: United Steel & Wire

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: Rodney K. Little Sex: Male
Date of Death: 06/25/994 Date of Birth: 07/01/954 Age: 39
Fathers Last Name: Little

Place of Death
Hospital: Michigan Capital Med. Ctr. - S. Pennsylvania Campus
City: Lansing County: Ingham

If Hospital: Inpatient SSN: 365-60-5643

Residence
County: Barry
City: Nashville Address: 401 State Street
Zip Code: 49073

Place of Birth: Illinois
Armed Forces: Yes Marital Status: Divorced
Ancestry: American Race: White
Education: 10

Underlying Cause of Death:

0429

Related Cause of Death (*)

117991
213209
310429

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 42832

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

09/03/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

DEATH TRANSCRIPTS FOR 1998

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 024166

Patient Information

Decedents Name: Velma M. Long
Sex: Female
Date of Death: 04/22/1998
Date of Birth: 03/19/1915
Spouses Name:
SSN: 384-34-5358
Fathers Name: George G. Moore
Mothers Name: Isola Baker
Place of Birth: Michigan
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: High School
Marital Status: Widow, Widower

Place of Death

City: Kalamazoo
County: Kalamazoo
Hospital or Other Place of Death:
Not Classifiable
Patient Status:

Residence

Address: 8520 Cory Drive Orangeville
County: Barry
City: Orangeville Twp
Zip Code: 49046

Manner of Death

Manner: Not Specified
Line 1: Pneumonia
Line 2: Cva
Line 3:
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Homemaker
Industry: Own Home

03/25/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 036698

Decedents Name: Peter Lopez
Sex: Male
Date of Death: 06/07/996
Date of Birth: 01/18/943
Spouses Name: Ruth Helen Corlee
SSN: 265-76-0216
Fathers Name: Juan Lopez
Mothers Name: Santa Flores
Place of Birth: Unknown
Ancestry: Cuban
Armed Forces: Yes
Race: White
Education: High School
Marital Status: Married

Place of Death

City: Grand Rapids
County: Kent

Hospital or Other Place of Death

Butterworth Hospital
Patient Status: Emergency Room/Outpatient

Residence

Address: 6060 Wolverine Dr. Middleville
County: Barry
City: Middleville
Zip Code: 49333

Manner of Death: Not Specified
Line 1: Arteriosclerotic Cardiovascular Disease
Line 2:
Line 3:
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Finishing Engineer
Industry: Office Furniture

03/25/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 043356

Decedents Name: Christy Lynn Lortie
Sex: Female
Date of Death: 07/02/996
Date of Birth: 05/27/974
Spouses Name:
SSN: 216-23-9556
Fathers Name: Dennis James Lortie
Mothers Name: Margaret Ann Robbins
Place of Birth: Illinois
Ancestry: French
Armed Forces: No
Race: White
Education: High School
Marital Status: Never Married

Place of Death

City: Lowell Twp
County: Kent

Hospital or Other Place of Death

Unclassified
Patient Status:

Residence

Address: 2715 Ragla Road Carlton
County: Barry
City: Carlton Twp
Zip Code: 49058

Manner of Death: Accidental

Line 1: Multiple Traumatic Injuries

Line 2:

Line 3:

Line 4:

Other Conditions:

Injury Date: 07/02/1996

Description of Injury: Car Rear Ended By Semi Truck, Pushed, Then Burned.

Occupation: Student

Industry:

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: Charles Duane Love Sex: Male
Date of Death: 12/11/994 Date of Birth: 02/06/945
Fathers Name: Willard L. Love
Mothers Name: Vivian M. Marshall
Spouses Name:

Place of Death
Hospital: Battle Creek Health Systems
City: Battle Creek County: Calhoun

If Hospital: Inpatient SSN: 378-48-6646

Residence
County: Barry
City: Assyria Twp Address: 10817 Lacey Road
Zip Code: 49021

Place of Birth: Michigan
Armed Forces: No Marital Status: Divorced
Ancestry: British, Scotch, Welsh, Scotch Race: White
Education: High School

Underlying Cause of Death:

410

Related Cause of Death (*)

11410
214140
61486

Autopsy: Yes Findings Available: Yes Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 075254

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

04/28/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 068551

Decedents Name: Richard Lee Lovely
Sex: Male
Date of Death: 11/02/996
Date of Birth: 11/29/940
Spouses Name: June Smith
SSN: 366-42-5487
Fathers Name: Bernie Lovely
Mothers Name: Edna Conley
Place of Birth: Michigan
Ancestry: American
Armed Forces: No
Race: White
Education: High School
Marital Status: Married

Place of Death

City: Kalamazoo
County: Kalamazoo

Hospital or Other Place of Death

Borgess Med Cen
Patient Status: Emergency Room/Outpatient

Residence

Address: 11829 Cedar Street Prairieville
County: Barry
City: Prairieville Twp
Zip Code: 49080

Manner of Death: Not Specified
Line 1: Acute Myocardial Infarction
Line 2:
Line 3:
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Apprentice Printer
Industry: Paper Manufacturing

03/25/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 045767

Decedents Name: Betty Marie Ludescher
Sex: Female
Date of Death: 07/20/996
Date of Birth: 10/26/920
Spouses Name: William Ludescher
SSN: 380-20-8383
Fathers Name: Frank Quigley
Mothers Name: Dolly Logan
Place of Birth: Minnesota
Ancestry: Irish
Armed Forces: No
Race: White
Education: High School
Marital Status: Married

Place of Death
City: Yale
County: St. Clair
Hospital or Other Place of Death
Nursing Home or Extended Care Facility
Patient Status: Inpatient

Residence
Address: 1050 Charlton Dr. Hastings
County: Barry
City: Hastings
Zip Code: 49058

Manner of Death: Not Specified
Line 1: Cancer Of Pancreas-metastasis To Liver
Line 2:
Line 3:
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Homemaker
Industry: Home

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

DEATH TRANSCRIPT - STATE OF MICHIGAN
NON-COUNTY RESIDENT
THE STATE OF:
Michigan

==========

Decedents Name: Marion Jean Lynch, Jr. Sex: Male
Date of Death: 07/23/993 Date of Birth: 03/15/924 Age: 69
Fathers Last Name: Lynch, Sr.

Place of Death
Hospital: Unknown
City: Grand Rapids County: Kent

If Hospital: Inpatient SSN: 317-14-7740

Residence
County: Barry
City: Yankee Springs Twp Address: 8115 Shaw Lake Road
Zip Code: 49333

Place of Birth: Illinois
Armed Forces: No Marital Status: Married
Ancestry: Irish Race: White
Education: High School

Underlying Cause of Death:

496

Related Cause of Death (*)

11436
217813
31496
611629
62185

Autopsy: No Findings Available: Unknown Actual Place: Nursing Home

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 43080

(*) Six digits with the 1st digit being the line, the 2nd being the position within the line, and positions 3-6 being the ICD code.

03/25/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 009202

Decedents Name: Thomas L. Lynd
Sex: Male
Date of Death: 02/14/996
Date of Birth: 01/12/959
Spouses Name: Sharon Farmer
SSN: 381-46-6703
Fathers Name: Fed Winans
Mothers Name: Margaret Lynd
Place of Birth: Michigan
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: High School
Marital Status: Married

Place of Death

City: Kalamazoo
County: Kalamazoo

Hospital or Other Place of Death

Borgess Med Cen
Patient Status: Inpatient

Residence

Address: 135 W. Orchard St. Barry
County: Barry
City: Barry Twp
Zip Code: 49046

Manner of Death: Not Specified

Line 1: Pneumonia (Streptococcal)

Line 2:

Line 3:

Line 4:

Other Conditions:

Injury Date:

Description of Injury:

Occupation: Sales

Industry: Auto Parts