DEATH TRANSCRIPTS OF BARRY COUNTY RESIDENTS

WHO DIED OUTSIDE BARRY COUNTY

Compiled by the Michigan Department of Health

This volume (Volume 11) begins with **Weih**

and ends with **Zientara**

12/02/97

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

State of Residence: Michigan

File Number: 036481

Patient Information

Decedents Name: William Weih
Sex: Male
Date of Death: 06/03/997
Date of Birth: 04/10/920
Spouses Name:
SSN: 385-09-8192
Fathers Name: George Weih
Mothers Name: Kunigunde Grethlein
Place of Birth: Germany
Ancestry: German
Armed Forces: Yes
Race: White
Education: 10
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: 1408 Fairview Hastings
County: Barry
City: Hastings
Zip Code: 49058

Manner of Death

Manner: Not Specified
Line 1: Uremia
Line 2: Diabetes
Line 3:
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Contractor
Industry: Draperies

03/25/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 036531

Decedents Name: Ruth L. Weiss
Sex: Female
Date of Death: 05/31/996
Date of Birth: 04/21/936
Spouses Name: Leigh L. Weiss Ii
SSN: 316-34-9065
Fathers Name: Frank Henckel
Mothers Name: Murial Smith
Place of Birth: Indiana
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: 3 years College
Marital Status: Married

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

Residence
Address: 7844 South Wall Lake
County: Barry
City: Hope Twp
Zip Code: 49035

Manner of Death: Not Specified
Line 1: Large Right Lung Ca With Metastasis
Line 2: Pleural Effusion Bilat
Line 3: Anemia
Line 4: Thrombocytopenia
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Cook- Nursing Home
Industry: Chesterton Health Care Center

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

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

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Decedents Name: REATHA A. WELLS Sex: Female
Date of Death: 08/17/993 Date of Birth: 04/09/923 Age: 70
Fathers Last Name: BRUCE

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

If Hospital: Inpatient SSN: 377-54-0909

Residence
County: Barry
City: Maple Grove Twp Address: 10032 BIVENS ROAD
Zip Code: 49073

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

Underlying Cause of Death:

1830

Related Cause of Death (*)

117991
215315
311830
321990

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 48121

(*) 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: 063094

Decedents Name: Anna M. Wensl
Sex: Female
Date of Death: 09/25/995
Date of Birth: 09/04/933
Spouses Name: Charles A. Wensel
SSN: 334-24-5689
Fathers Name: Robert J. Patton
Mothers Name: Luella Ott
Place of Birth: Illinois
Ancestry: 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: Emergency Room/Outpatient

Residence
Address: 4869 N. Bay Rd. Barry
County: Barry
City: Barry Twp
Zip Code: 49046

Manner of Death: Not Specified
Line 1: Ischemic Heart Disease
Line 2:
Line 3:
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Homemaker
Industry: At Home

01/15/98

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

State of Residence: Michigan

File Number: 049399

Patient Information

Decedents Name: Marie Ann West
Sex: Female
Date of Death: 08/08/997
Date of Birth: 11/12/922
Spouses Name:
SSN: 383-32-8764
Fathers Name: Arthur Terry
Mothers Name: Alma Lovett
Place of Birth: Alabama
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: 08
Marital Status: Divorced

Place of Death

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

Residence

Address: 10716 Stoney Pt. Dr. Prairieville
County: Barry
City: Prairieville Twp
Zip Code: 49046

Manner of Death

Manner: Not Specified
Line 1: Respiratory Insufficiency
Line 2: Kidney Failure
Line 3: Diabetes Mellitus
Line 4:

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

04/28/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 076742

Decedents Name: Beth I. Wester
Sex: Female
Date of Death: 12/21/996
Date of Birth: 09/18/949
Spouses Name:
SSN: 378-46-0437
Fathers Name: Raymond J. Helrigel
Mothers Name: Lois A. Nagel
Place of Birth: Michigan
Ancestry: German
Armed Forces: No
Race: White
Education: High School
Marital Status: Widow, Widower

Place of Death
City: Bowne Twp
County: Kent

Hospital or Other Place of Death
Unclassified
Patient Status:

Residence
Address: 2303 Solomon Rd. Irving
County: Barry
City: Irving Twp
Zip Code: 49333

Manner of Death: Not Specified
Line 1: Cervix Cancer
Line 2:
Line 3:
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Housewife
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: 001211

Patient Information

Decedents Name: Mary Lynn Westerman
Sex: Female
Date of Death: 01/27/1998
Date of Birth: 10/18/1939
Spouses Name: H. Thomas Kyvig
SSN: 384-38-5237
Fathers Name: Lloyd La Vasseur
Mothers Name: May Bushey
Place of Birth: Michigan
Ancestry: Other North, Central and South American
Armed Forces: No
Race: White
Education: 5 years of college
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: 6091 Assyria Road Maple
County: Barry
City: Maple Grove Twp
Zip Code: 49073

Manner of Death

Manner: Not Specified
Line 1: Metastatic Adenocarcinoma Of The Breast
Line 2: Malignant Pleural Effusion
Line 3:
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Administrator/ Director
Industry: Civic Theater

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

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

==========

Decedents Name: James B. Wetmore Sex: Male
Date of Death: 12/23/994 Date of Birth: 02/12/911
Fathers Name: James B. Wetmore Sr.
Mothers Name: Maude M. Maloon
Spouses Name:

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

If Hospital: Inpatient SSN: 303-12-3012

Residence
County: Barry
City: Yankee Springs Twp Address: 2256 Parker Dr.
Zip Code: 49348

Place of Birth: Illinois
Armed Forces: No Marital Status: Widow, Widower
Ancestry: British, Scotch, Welsh, Scotch Race: White
Education: High School

Underlying Cause of Death:

2500

Related Cause of Death (*)

11486
21438
312500

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 077008

(*) 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.

03/05/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
DEATH TRANSCRIPTS
Non-Resident Transcripts

State of Residence: Michigan

File Number: 062841

Patient Information

Decedents Name: Frank Clifford Weyerman
Sex: Male
Date of Death: 10/06/997
Date of Birth: 11/12/906
Spouses Name:
SSN: 370-10-8866
Fathers Name: Fredrick F. Weyerman
Mothers Name: Wilemina Bordendorf
Place of Birth: Michigan
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:
St Mary's Health Services - Grand Rapids
Patient Status: Inpatient

Residence

Address: 317 W. Green St. Hastings
County: Barry
City: Hastings
Zip Code: 49058

Manner of Death

Manner: Not Specified
Line 1: Multiple Myeloma
Line 2:
Line 3:
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Tool & Die Maker
Industry: Factory

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

03/05/98

DEATH TRANSCRIPTS

Non-Resident Transcripts

State of Residence: Michigan

File Number: 062650

Patient Information

Decedents Name: Marian E. Wheeler
Sex: Female
Date of Death: 10/05/997
Date of Birth: 02/08/910
Spouses Name:
SSN: 366-07-7449
Fathers Name: Willard Ickes
Mothers Name: Mary Freeman
Place of Birth: Michigan
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: 2 years College
Marital Status: Widow, Widower

Place of Death

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

Residence

Address: 5007 First St. Hope Mi
County: Barry
City: Hope Twp
Zip Code: 49046

Manner of Death

Manner: Not Specified
Line 1: Aspiration
Line 2: Cerebrovascular Accident
Line 3: Arteriosclerotic Disease
Line 4: Congestive Heart Failure

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

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

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

==========

Decedents Name: Norma Jean Wichterman Sex: Female
Date of Death: 08/12/994 Date of Birth: 11/13/927 Age: 66
Fathers Last Name: Newberry

Place of Death
Hospital: Unknown
City: Penfield Twp County: Calhoun

If Hospital: SSN: 381-24-9467

Residence
County: Barry
City: Assyria Twp Address: 7770 West Lake Rd.
Zip Code: 49021

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

Underlying Cause of Death:

4140

Related Cause of Death (*)

114140
612503
624029

Autopsy: No Findings Available: Unknown Actual Place: Home

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 48414

(*) 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: Barbara A. Wilson Sex: Female
Date of Death: 08/23/994 Date of Birth: 01/06/907 Age: 87
Fathers Last Name: Brown

Place of Death
Hospital: Unknown
City: Springfield County: Calhoun

If Hospital: Inpatient SSN: 370-16-0473

Residence
County: Barry
City: Prairieville Twp Address: 11740 Fords Point Drive
Zip Code: 49080

Place of Birth: Michigan
Armed Forces: No Marital Status: Divorced
Ancestry: British, Scotch, Welsh, Scotch Race: White
Education: 1 year College

Underlying Cause of Death:

4140

Related Cause of Death (*)

117991
214280
314140
41797

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

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 48400

(*) 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: David F. Whipple Sex: Male
Date of Death: 10/04/994 Date of Birth: 09/18/907
Fathers Name: Jasper A. Whipple
Mothers Name: Alma Thomas
Spouses Name:

Place of Death
Hospital: Northern Mich Hospital
City: Petosky County: Emmet

If Hospital: Inpatient SSN: 383-03-1182

Residence
County: Barry
City: Orangeville Twp Address: 7887 Guernsey Lake Rd.
Zip Code: 49046

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

Underlying Cause of Death:

4349

Related Cause of Death (*)

114349
61(52
629289

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 062076

(*) 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: Levia Mae Whipple Sex: Female
Date of Death: 05/03/994 Date of Birth: 12/01/909 Age: 84
Fathers Last Name: Murray

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

If Hospital: Inpatient SSN: 377-22-6477

Residence
County: Barry
City: Orangeville Twp Address: 7887 Guernsey Rd.
Zip Code: 49046

Place of Birth: Georgia
Armed Forces: No Marital Status: Married
Ancestry: British, Scotch, Welsh, Scotch Race: White
Education: 06

Underlying Cause of Death:

436

Related Cause of Death (*)

11436
214019
314273
61486
622859

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 30134

(*) 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: Harlow I. White Sex: Male
Date of Death: 12/01/993 Date of Birth: 03/20/900 Age: 93
Fathers Last Name: White

Place of Death
Hospital: Unknown
City: Ionia County: Ionia

If Hospital: Inpatient SSN: 713-05-2192

Residence
County: Barry
City: Nashville Address: 817 Reed Street
Zip Code: 49073

Place of Birth: Michigan
Armed Forces: Yes Marital Status: Divorced
Ancestry: British, Scotch, Welsh, Scotch Race: White
Education: 08

Underlying Cause of Death:

4149

Related Cause of Death (*)

114279
214149
61185

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

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 75459

(*) 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: 067330

Decedents Name: Parker Harmon Whitney
Sex: Male
Date of Death: 11/05/996
Date of Birth: 12/20/929
Spouses Name: Barbara J. Bundy
SSN: 373-28-3644
Fathers Name: Fred H. Whitney
Mothers Name: Alberta J. Leslie
Place of Birth: Vermont
Ancestry: French
Armed Forces: No
Race: White
Education: 11
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: 14665 Uldricks Drive Johnstown
County: Barry
City: Johnstown Twp
Zip Code: 49017

Manner of Death: Not Specified

Line 1: Left Ventricular Dysfunction

Line 2: Severe Atherosclerotic Heart Disease

Line 3:

Line 4:

Other Conditions: Coma

Injury Date:

Description of Injury:

Occupation: Pressman

Industry: Paperboard Industry

03/25/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 035282

Decedents Name: Frances V. Whittelsey
Sex: Female
Date of Death: 06/11/996
Date of Birth: 05/23/904
Spouses Name:
SSN: 725-10-9224
Fathers Name: Richard E. Poff
Mothers Name: Wilhemenia Timm
Place of Birth: Michigan
Ancestry: German
Armed Forces: No
Race: White
Education: 4 years of college
Marital Status: Widow, Widower

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

Residence
Address: 8260 Assyria Road Maple
County: Barry
City: Maple Grove Twp
Zip Code: 49073

Manner of Death: Not Specified
Line 1: Septicemia
Line 2: Acute Urinary Tract Infection
Line 3:
Line 4:
Other Conditions: Coronary Artery Disease
Injury Date:
Description of Injury:
Occupation: Office Secretary
Industry: Railroad

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

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

==========

Decedents Name: MYRTLE M. WHITTEMORE Sex: Female
Date of Death: 05/16/993 Date of Birth: 05/18/916 Age: 76
Fathers Last Name: Craven

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

If Hospital: Inpatient SSN: 385-14-3634

Residence
County: Barry
City: Hastings Address: 528 E. Grant St.
Zip Code: 49058

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

Underlying Cause of Death:

4149

Related Cause of Death (*)

114279
214149

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 29887

(*) 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: 027636

Decedents Name: August Morris Wickland
Sex: Male
Date of Death: 05/13/995
Date of Birth: 02/28/907
Spouses Name: Dorothy Beldon
SSN: 368-03-9929
Fathers Name: August M. Wickland
Mothers Name: Maude Unknown
Place of Birth: Minnesota
Hospital: Pipp Community Hospital
Ancestry: Norwegian, Swedish Danish
Armed Forces: Yes
Race: White
Education: 10
Marital Status: Married

Place of Death

City: Plainwell
County: Allegan
If Hospital: Inpatient

Residence

Address: 4960 Marsh Rd. Orangeville
County: Barry
City: Orangeville Twp
Zip Code: 49344

Manner of Death: Not Specified
Line 1: Congestive Heart Failure
Line 2: Coronary Heart Disease
Line 3:
Line 4:
Other Conditions: Severe Cerebral Vascular Disease
Injury Date:
Description of Injury:
Occupation: Photo Engraver
Industry: Commercial Printing

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 063175

Decedents Name: Edward James Wilbur
Sex: Male
Date of Death: 10/21/995
Date of Birth: 03/03/954
Spouses Name: Susan Holman
SSN: 376-62-3053
Fathers Name: Edward P. Wilbur
Mothers Name: Shirley A. Black
Place of Birth: Michigan
Ancestry: German
Armed Forces: No
Race: White
Education: 1 year College
Marital Status: Married

Place of Death

City: Kalamazoo
County: Kalamazoo

Hospital or Other Place of Death

Bronson Methodist Hospital
Patient Status: Inpatient

Residence

Address: 12893 Burrows Road Prairieville
County: Barry
City: Prairieville Twp
Zip Code: 49046

Manner of Death: Not Specified

Line 1: Alcoholic Cirrhosis

Line 2: Chronic Alcohol Abuse

Line 3:

Line 4:

Other Conditions:

Injury Date:

Description of Injury:

Occupation: Quality Control

Industry: Automotive Manufacturing

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

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

Decedents Name: Leon Claude Wilbur Sex: Male
Date of Death: 05/10/993 Date of Birth: 05/18/918 Age: 74
Fathers Last Name: Wilbur

Place of Death
Hospital: VA Medical Center - Battle Creek
City: Bedford Twp County: Calhoun

If Hospital: Inpatient SSN: 715-01-0390

Residence
County: Barry
City: Johnstown Twp Address: 12280 North Ave.
Zip Code: 49021

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

Underlying Cause of Death:

1629

Related Cause of Death (*)

111629
61496
62486

Autopsy: No Findings Available: Unknown Actual Place: Other Institution

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 28371

(*) 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: 009470

Decedents Name: Thelma R. Will
Sex: Female
Date of Death: 02/13/996
Date of Birth: 10/17/925
Spouses Name:
SSN: 245-28-5079
Fathers Name: Dobe Rodgers
Mothers Name: Isabel Obright
Place of Birth: South Carolina
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: High School
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: 750 N. Airport Rd. Hastings
County: Barry
City: Hastings
Zip Code: 49058

Manner of Death: Not Specified
Line 1: Respiratory Insufficiency
Line 2: Emphysema
Line 3:
Line 4:
Other Conditions: Congestive Heart Failure, Inanition
Injury Date:
Description of Injury:
Occupation: Laborer
Industry: Factory

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

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

Decedents Name: Richard Don Williams Sex: Male
Date of Death: 08/30/994 Date of Birth: 08/14/944
Fathers Name: Fred Williams
Mothers Name: Lulu Henderson
Spouses Name: Joyce E. Bateman

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

If Hospital: Inpatient SSN: 365-46-6964

Residence
County: Barry
City: Baltimore Twp Address: 3800 Lawrence Road
Zip Code: 49058

Place of Birth: Tennessee
Armed Forces: Yes Marital Status: Married
Ancestry: British, Scotch, Welsh, Scotch Race: White
Education: 2 years College

Underlying Cause of Death:

410

Related Cause of Death (*)

11410
214149
610389
624279

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 056576

(*) 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: Roberta M. Wills Sex: Female
Date of Death: 12/16/994 Date of Birth: 09/27/954
Fathers Name: Jayce Robert Wills
Mothers Name: Helen E. Banas
Spouses Name:

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

If Hospital: Inpatient SSN: 384-62-5116

Residence
County: Barry
City: Barry Twp Address: 11250 Manning Lake Road
Zip Code: 49046

Place of Birth: Michigan
Armed Forces: No Marital Status: Never Married
Ancestry: British, Scotch, Welsh, Scotch Race: White
Education: 3 years College

Underlying Cause of Death:

4519

Related Cause of Death (*)

114151
214519
617140
624160
634599
642780

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 075270

(*) 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: 023537

Decedents Name: Anna E. Willyard
Sex: Female
Date of Death: 04/22/995
Date of Birth: 01/27/904
Spouses Name:
SSN: 369-68-0103
Fathers Name: W. C. Johnston
Mothers Name: Petranella Bos
Place of Birth: Michigan
Hospital: Unknown
Ancestry: Other Western European
Armed Forces: No
Race: White
Education: 08
Marital Status: Widow, Widower

Place of Death

City: Grand Rapids
County: Kent
If Hospital: Inpatient

Residence

Address: 316 Grand Rapids St. Middleville
County: Barry
City: Middleville
Zip Code: 49333

Manner of Death: Not Specified
Line 1: Pulmonary Fibrosis
Line 2: Chronic Obstructive Pulmonary Disease
Line 3:
Line 4:
Other Conditions: Chronic Renal Failure, Arteriosclerotic Cardiovascular Disease With Congestive Heart Failure
Injury Date: 04/22/1995
Description of Injury: Collapsed At Villa Elizabeth
Occupation: Housewife
Industry: Own Home

02/02/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
DEATH TRANSCRIPTS
Non-Resident Transcripts

State of Residence: Michigan

File Number: 055908

Patient Information

Decedents Name: Kenneth Scott Wilson
Sex: Male
Date of Death: 09/06/997
Date of Birth: 04/13/966
Spouses Name:
SSN: 384-62-6340
Fathers Name: Kenneth James Wilson
Mothers Name: Tamara Lynn Gunders
Place of Birth: Michigan
Ancestry: Other Western European
Armed Forces: No
Race: White
Education: 2 years College
Marital Status: Never 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: 2045 Hammond Rd. Irving
County: Barry
City: Irving Twp
Zip Code: 49058

Manner of Death

Manner: Not Specified
Line 1: Ventricular Fibrillation
Line 2: Cardiogenic Shock
Line 3: Chronic Dilated Cardiomyopathy
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Mechanic
Industry: Trucking Company

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

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

==========

Decedents Name: Floyd Beachler Wilt Sex: Male
Date of Death: 07/27/994 Date of Birth: 05/22/917 Age: 77
Fathers Last Name: Wilt

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

If Hospital: Inpatient SSN: 203-07-3237

Residence
County: Barry
City: Hastings Address: 495 Rork Rd.
Zip Code: 49058

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

Underlying Cause of Death:

2041

Related Cause of Death (*)

110389
212880
22558
312041

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 43402

(*) 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: 055826

Decedents Name: Dena H. Winick
Sex: Female
Date of Death: 08/30/996
Date of Birth: 08/19/913
Spouses Name:
SSN: 378-36-0326
Fathers Name: Abraham Epstein
Mothers Name: Hilda Unknown
Place of Birth: Michigan
Ancestry: Other Easter European
Armed Forces: No
Race: White
Education: 08
Marital Status: Widow, Widower

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

Residence
Address: 506 E. Woodlawn Hastings
County: Barry
City: Hastings
Zip Code: 49058

Manner of Death: Not Specified
Line 1: Crohn's Disease
Line 2: Sepsis
Line 3: Malnutrition
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Co-owner
Industry: General Merchandise Department

09/03/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

DEATH TRANSCRIPTS FOR 1998

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 022791

Patient Information

Decedents Name: Arthur James Winters
Sex: Male
Date of Death: 04/10/1998
Date of Birth: 12/05/1902
Spouses Name:
SSN: 385-38-3265
Fathers Name: Charles Winters
Mothers Name: Edith Hartwell
Place of Birth: Michigan
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: 08
Marital Status: Widow, Widower

Place of Death

City: Marshall
County: Calhoun
Hospital or Other Place of Death: Oaklawn Hospital
Patient Status: Inpatient

Residence

Address: 14761 S. Kellogg School RBarry
County: Barry
City: Barry Twp
Zip Code: 49060

Manner of Death

Manner: Not Specified
Line 1: Pneumonia
Line 2: Respiratory Failure
Line 3: Sepsis
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Farmer
Industry: Dairy & Crop Farm

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

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

==========

Decedents Name: ESTELLE VIRGINIA WISEMAN Sex: Female
Date of Death: 08/08/993 Date of Birth: 08/16/900 Age: 92
Fathers Last Name: Starks

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

If Hospital: Inpatient SSN: 379-14-4887

Residence
County: Barry
City: Hastings Address: 1027 North Church St.
Zip Code: 49058

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

Underlying Cause of Death:

5990

Related Cause of Death (*)

110389
215990
617854
622500

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 49591

(*) 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: 070374

Decedents Name: Walter J. Wisotzke
Sex: Male
Date of Death: 11/19/995
Date of Birth: 02/18/918
Spouses Name: Elizabeth Welker
SSN: 395-01-1718
Fathers Name: Joseph Wisotzke
Mothers Name: Helen Pruski
Place of Birth: Wisconsin
Ancestry: Polish
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: Inpatient

Residence
Address: 718 S. Washington Hastings
County: Barry
City: Hastings
Zip Code: 49058

Manner of Death: Not Specified
Line 1: Ruptured Abdominal Aortic Aneurysm
Line 2:
Line 3:
Line 4:
Other Conditions: Right Renal Tumor, Large
Injury Date:
Description of Injury:
Occupation: Supervisor
Industry: Brewery

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

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

Decedents Name: AUGUST J. WOLF Sex: Male
Date of Death: 04/03/993 Date of Birth: 06/22/908 Age: 84
Fathers Last Name: WOLF

Place of Death
Hospital: Unknown
City: Dorr Twp County: Allegan

If Hospital: SSN: 367-22-6870

Residence
County: Barry
City: Yankee Springs Twp Address: 11275 CHIEF NOONDAY
Zip Code: 49333

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

Underlying Cause of Death:

1541

Related Cause of Death (*)

111541
121991
612859
62496
634280

Autopsy: No Findings Available: Unknown Actual Place: Home

Medical Examiner Cases: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 21069

(*) 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.

12/02/97

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

State of Residence: Michigan

File Number: 023192

Patient Information

Decedents Name: Harold C. Woodard
Sex: Male
Date of Death: 04/19/997
Date of Birth: 03/01/909
Spouses Name:
SSN: 380-05-4812
Fathers Name: John Woodard
Mothers Name: Nora Kinney
Place of Birth: Michigan
Ancestry: British, Scotch, Welsh, Scotch Irish
Armed Forces: No
Race: White
Education: 2 years College
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: 100 Lentz St., Apt. D Nashville
County: Barry
City: Nashville
Zip Code: 49073

Manner of Death

Manner: Not Specified
Line 1: Prostate Carcinoma With Metastasis
Line 2:
Line 3:
Line 4:

Other Conditions: Pneumonia
Injury Date:
Injury Description:
Occupation: Self Employed
Industry: Service Station

11/16/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

DEATH TRANSCRIPTS FOR 1998

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 029193

Patient Information

Decedents Name: Thomas F. Woodward
Sex: Male
Date of Death: 05/03/1998
Date of Birth: 04/12/1907
Spouses Name: Agnes Kelley
SSN: 364-10-6888
Fathers Name: David E. Woodward
Mothers Name: Elizabeth Stettler
Place of Birth: Ohio
Ancestry: German
Armed Forces: No
Race: White
Education: 5 years of college
Marital Status: Married

Place of Death

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

Residence

Address: 1785 Edwin Drive Yankee
County: Barry
City: Yankee Springs Twp
Zip Code: 49348

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: Mechanical Engineer
Industry: Paper Goods Co.

12/02/97

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

State of Residence: Michigan

File Number: 029767

Patient Information

Decedents Name: Frederick G. Wright
Sex: Male
Date of Death: 05/26/997
Date of Birth: 12/16/947
Spouses Name:
SSN: 371-48-6859
Fathers Name: Charles Wright
Mothers Name: Eleanor Yonker
Place of Birth: Michigan
Ancestry: Other Western European
Armed Forces: Yes
Race: White
Education: 5 years of college
Marital Status: Divorced

Place of Death

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

Residence

Address: 11300 East Shore Drive Delton
County: Barry
City: Barry Twp
Zip Code: 49046

Manner of Death

Manner: Not Specified
Line 1: Acute Myocardial Infarction
Line 2: Coronary Artery Disease
Line 3:
Line 4:

Other Conditions: Hypertension, Hyperlipidemia
Injury Date:
Injury Description:
Occupation: Sales Person
Industry: Business Machines

07/30/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

DEATH TRANSCRIPTS FOR 1998

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 001182

Patient Information

Decedents Name: Robert Donald Wright
Sex: Male
Date of Death: 01/22/1998
Date of Birth: 04/30/1923
Spouses Name: Evelyn H. Hunt
SSN: 386-12-6330
Fathers Name: George Wright
Mothers Name: Rose Marie La Vallee
Place of Birth: Michigan
Ancestry: French
Armed Forces: Yes
Race: White
Education: 08
Marital Status: Married

Place of Death

City: Battle Creek
County: Calhoun
Hospital or Other Place of Death:
Patient Status: Inpatient
Convalescent home, nursing home, medical care facility or hospice

Residence

Address: 2497 East Hickory Road
County: Barry
City: Johnstown Twp
Zip Code: 49017

Manner of Death

Manner: Not Specified
Line 1: Pneumonia
Line 2: Parkinson's Disease
Line 3:
Line 4:

Other Conditions:
Injury Date:
Injury Description:
Occupation: Sales Clerk
Industry: Furniture Store

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 013965

Decedents Name: Tye Lee Wyatt
Sex: Male
Date of Death: 02/29/996
Date of Birth: 02/29/996
Spouses Name:
SSN:
Fathers Name: Nicholas Wyatt
Mothers Name: Lindsay London
Place of Birth: Michigan
Ancestry: German
Armed Forces: No
Race: White
Education: None
Marital Status: Never Married

Place of Death
City: Plainwell
County: Allegan

Hospital or Other Place of Death
Pipp Community Hospital
Patient Status: Inpatient

Residence
Address: 6199 Rook Road Orangeville
County: Barry
City: Orangeville Twp
Zip Code: 49080

Manner of Death: Not Specified
Line 1: Chorioamnionitis
Line 2:
Line 3:
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: None
Industry: None

07/30/98

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

DEATH TRANSCRIPTS FOR 1998

County of Residence <> County of Occurrence

State of Residence: Michigan

File Number: 002511

Patient Information

Decedents Name: Carl Matthew Wyman
Sex: Male
Date of Death: 01/09/1998
Date of Birth: 04/28/1936
Spouses Name: Nellie Darlene Stacey
SSN: 369-34-7995
Fathers Name: Peter G. Wyman
Mothers Name: Gladys Ward
Place of Birth: Michigan
Ancestry: American Indian
Armed Forces: No
Race: American Indian
Education: 10
Marital Status: Married

Place of Death

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

Residence

Address: 5962 Osborne Road Barry
County: Barry
City: Barry Twp
Zip Code: 49046

Manner of Death

Manner: Not Specified
Line 1: Metastatic Adenocarcinoma Of The Lung
Line 2:
Line 3:
Line 4:

Other Conditions: Bullous Emphysema
Injury Date:
Injury Description:
Occupation: Truck Driver
Industry: Supply Company

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

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

==========

Decedents Name: Sylvester Yerge Sex: Male
Date of Death: 11/14/994 Date of Birth: 12/31/930
Fathers Name: William H. Yerge
Mothers Name: Irene Hissong
Spouses Name: Wanda Boze

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

If Hospital: Inpatient SSN: 372-28-2443

Residence
County: Barry
City: Barry Twp Address: 11787 Fair Lake Dr.
Zip Code: 49046

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

Underlying Cause of Death:

4140

Related Cause of Death (*)

117855
21)967
318782
324140
61586

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 069776

(*) 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.

07/30/98

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

State of Residence: Michigan

File Number: 002593

Patient Information

Decedents Name: Elaine Beatrice Yetter
Sex: Female
Date of Death: 01/01/1998
Date of Birth: 03/15/1914
Spouses Name:
SSN: 369-44-5879
Fathers Name: Asa Harvey
Mothers Name: Mary Elizabeth Canute
Place of Birth: Michigan
Ancestry: Norwegian, Swedish Danish
Armed Forces: No
Race: White
Education: 4 years of college
Marital Status: Widow, Widower

Place of Death

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

Residence

Address: 2252 Parker Drive Yankee
County: Barry
City: Yankee Springs Twp
Zip Code: 49348

Manner of Death

Manner: Not Specified
Line 1: Adenocarcinoma Of The Left Lung
Line 2:
Line 3:
Line 4:

Other Conditions: Atherosclerotic Heart Disease
Injury Date:
Injury Description:
Occupation: Teacher
Industry: Public School

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

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

==========

Decedents Name: Dwain Martin Yoho Sex: Male
Date of Death: 01/06/994 Date of Birth: 10/20/933 Age: 60
Fathers Last Name: Yoho

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

If Hospital: Inpatient SSN: 363-22-2017

Residence
County: Barry
City: Baltimore Twp Address: 1000 Bristol Road
Zip Code: 49050

Place of Birth: Michigan
Armed Forces: No Marital Status: Married
Ancestry: Irish Race: White
Education: 10

Underlying Cause of Death:

496

Related Cause of Death (*)

11496
615789
627330

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 1387

(*) 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: Gary L. Yonkman Sex: Male
Date of Death: 12/15/994 Date of Birth: 09/14/969
Fathers Name: Jerry Yonkman
Mothers Name: Sharon Brigham
Spouses Name:

Place of Death
Hospital: Unknown
City: Berlin Twp County: Ionia

If Hospital: SSN: 369-90-6646

Residence
County: Barry
City: Woodland Address: 384 N. Main St.
Zip Code: 48897

Place of Birth: Michigan
Armed Forces: No Marital Status: Divorced
Ancestry: Other Western European Race: White
Education: High School

Underlying Cause of Death:

8129

Related Cause of Death (*)

11(54
618129

Autopsy: No Findings Available: Unknown Actual Place: Other

Medical Examiner Case: No Mode of Death: Accident

Work Injury: No Location: Street and Highway

State File Number: 076323

(*) 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: ROSE E. ZASADIL Sex: Female
Date of Death: 03/03/993 Date of Birth: 04/03/907 Age: 85
Fathers Last Name: Kotrba

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

If Hospital: Inpatient SSN: 340-07-8337

Residence
County: Barry
City: Yankee Springs Twp Address: 1885 Patterson Rd.
Zip Code: 49348

Place of Birth: Illinois
Armed Forces: No Marital Status: Married
Ancestry: Other Easter European Race: White
Education: 08

Underlying Cause of Death:

5570

Related Cause of Death (*)

117635
215570
314409
614349

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Unknown Mode of Death: Natural

Work Injury: Location:

State File Number: 15661

(*) 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: Robert A. Zautcke Sex: Male
Date of Death: 09/13/994 Date of Birth: 02/26/921
Fathers Name: Herman Zautcke
Mothers Name: Pearl Ladd
Spouses Name: Helen G. Salinas

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

If Hospital: Inpatient SSN: 391-18-8754

Residence
County: Barry
City: Prairieville Twp Address: 110 Little Long Lake
Zip Code: 49060

Place of Birth: Wisconsin
Armed Forces: Yes Marital Status: Married
Ancestry: German Race: White
Education: High School

Underlying Cause of Death:

185

Related Cause of Death (*)

117860
127990
212859
31185

Autopsy: No Findings Available: Unknown Actual Place: Hospital

Medical Examiner Case: Yes Mode of Death: Natural

Work Injury: Location:

State File Number: 56624

(*) 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: 015807

Decedents Name: Erna Zeimanis
Sex: Female
Date of Death: 03/19/996
Date of Birth: 06/17/923
Spouses Name:
SSN: 369-34-9550
Fathers Name: Alexander Rudzits
Mothers Name: Alma Unknown
Place of Birth: Unknown
Ancestry: Other Easter European
Armed Forces: No
Race: White
Education: 2 years College
Marital Status: Widow, Widower

Place of Death

City: Kalamazoo
County: Kalamazoo

Hospital or Other Place of Death

Borgess Med Cen
Patient Status: Emergency Room/Outpatient

Residence

Address: 1460 Northwood Drive Hope
County: Barry
City: Hope Twp
Zip Code: 49046

Manner of Death: Not Specified
Line 1: Metastatic Colon Cancer
Line 2: Adenocarcinoma Right Colon, Regionally Advanced
Line 3:
Line 4:
Other Conditions: Chronic Obstructive Pulmonary Disease
Injury Date:
Description of Injury:
Occupation: Homemaker
Industry: Own Home

03/25/97

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
DEATH TRANSCRIPTS
Non-County Residents

State of Residence: Michigan

File Number: 028207

Decedents Name: Jordan R. Zientara
Sex: Male
Date of Death: 05/06/996
Date of Birth: 01/13/925
Spouses Name: Beverly Boven
SSN: 353-12-7618
Fathers Name: Walter Zientara
Mothers Name: Katherine Springer
Place of Birth: Illinois
Ancestry: German
Armed Forces: Yes
Race: White
Education: 2 years College
Marital Status: Married

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

Residence
Address: 11622 Spring Point Drive
County: Barry
City: Prairieville Twp
Zip Code: 49080

Manner of Death: Not Specified
Line 1: Ischemic Heart Disease
Line 2: Renal Failure (Chronic)
Line 3: Diabetes Mellitus Type I
Line 4:
Other Conditions:
Injury Date:
Description of Injury:
Occupation: Photo Engraver
Industry: Printing Business