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Linda A. Caniglia
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State Registrar

5003893

No.

JUN 02 2009

Date

Primary Registration District No. 27045

Borough of Eric City of Eric (No. 505 Holland St. 1st Word: Eric)

2. FULL NAME Edward Hayes

PERSONAL AND STATISTICAL PARTICULARS

3. SEX Male 4. COLOR OR RACE White 5. SINGLE, MARRIED, WIDOWED OR DIVORCED Widowed

5a. If married, widowed, or divorced HUSBAND of (or) WIFE of Ella Bray

6. DATE OF BIRTH (month, day, and year) May 7 1858

7. AGE Years 77 Months 10 Days 07 IF LESS than 1 yr. ... hrs. ... min.

8. OCCUPATION OF DECEASED Alderman City of Eric

9. BIRTHPLACE (city or town) (State or country) Ireland

10. NAME OF FATHER Patrick Hayes

11. BIRTHPLACE OF FATHER (city or town) (State or country) Ireland

12. MAIDEN NAME OF MOTHER Jessie Caudrey

13. BIRTHPLACE OF MOTHER (city or town) (State or country) Ireland

14. Informant Edward Hayes Jr. (Address) 505 Holland St. Eric Pa

15. Filed Mar 5 1926 Registrar

MEDICAL CERTIFICATE OF DEATH

16. DATE OF DEATH Mar 5 1926 (Month) (Day) (Year)

17. I HEREBY CERTIFY, That I attended deceased from Jan 13th 1926 to March 5th 1926 that I last saw him alive on 3-5-26 and that death occurred, on the date stated above, at 3:55 A.M. The CAUSE OF DEATH* was as follows: Chronic Valvular Heart Disease

90° (duration) 5 yrs. 5 mos. 00 ds.

CONTRIBUTORY (SECONDARY) Acc. Compensation (duration) yrs. 2 mos. 00 ds.

18. Where was disease contracted if not at place of death? No

Did an operation precede death? No Date of No

Was there an autopsy? No

What test confirmed diagnosis? Dr. M. P. ...

*State the DISEASE CAUSING DEATH, or in deaths from VIOLENT CAUSES, state (1) MEANS AND NATURE OF INJURY, and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL. (See reverse side for additional space.)

19. PLACE OF BURIAL, CREMATION OR REMOVAL Trinity Cemetery DATE OF BURIAL Mar 8 1926

20. UNDERTAKER W. J. OUTING & SON ADDRESS Eric Pa

