

DEATHS

County of EssexDivision of Sandwich South

No. 34

Smith

No. 35

Quinlan

No. 36

Shuel

Surname of Deceased

Full given Name

Place of Death, street and number or

(a) Sex, (b) Racial Origin, (c) Single, Married, Widowed

Age

(a) Place of Birth (b) Date of Birth

LAST OCCUPATION

Trade or Occupation

Kind of Industry

Date from which to which employed

FORMER OCCUPATION

Trade or Occupation

Kind of Industry

Date from which to which employed

Length of Residence

Name of Father

Birthplace of Father

Maiden Name of Mother

Birthplace of Mother

Name of Informant

Address

Relation to Deceased

Place of Burial

Date of Burial

Name of Undertaker

Address

Cause of Death if no Physician attended

Date of Death

MEDICAL CERTIFICATE OF DEATH

Name of Deceased

Date of Death

Dates from which to which Medical Practitioner Attended Deceased

CAUSE OF DEATH

Primary

Duration

Contributory

Duration

(a) Did an operation precede death? (b) Was there an autopsy?

Name of Physician

Address

Date of Return

Date received by Division Registrar

If in a Hospital or Institution give name

a Male b English c Married

73 yrs. 10 mos. 16 dys. hrs. min.

a Barrie Ont. b Dec 24. 1846

Baker Retired

Bakery

from to

Baker

Bakery

from to

few hours lifetime lifetime at place of death in Ontario in Canada

Thomas Smith

England

Hannah Ward

England

Martha A. Smith

523 Janet Ave. Windsor

Wife

Windsor

Nov. 13th. 1920

C. R. Ineson

Windsor

Nov. 9th. 1920

Thomas Smith

Nov. 9th. 1920

from

Arterio Sclerosis

2 yrs. mos. dys.

Apoplexy

yrs. mos. dys.

a No b No

Dr. Fuller

Windsor

Nov 12th 1920

April 3rd. 1922

If in a Hospital or Institution give name

a Female b Irish c Widowed

90 yrs. 5 mos. 22 dys. hrs. min.

a County. Curran Aug. 10th b Ireland 1831

Housework

Housework

from all life to

Housework

Housework

from all life to

10 yrs. 75 years 75 years at place of death in Ontario in Canada

Jeddy McGuire

Ireland. Co. Curran

Bridget McHugh

Ireland

James Quinlan

Essex

Son

Maidstone

Feb. 22nd. 1922

W. H. Richardson & Son

Essex

Old age

Feb. 19th. 1922

MEDICAL CERTIFICATE OF DEATH

Elizabeth Quinlan

Feb. 19th. 1922

from Feb. 19th. 1922

to Feb. 19th 1922

Old age

5 yrs. mos. dys.

General Debility

yrs. mos. dys.

a No b No

Dr. J. W.'Brien

Essex

Feb. 20th. 1922

April 4th 1922

If in a Hospital or Institution give name

a Male b Irish c Married

65 yrs. mos. dys. hrs. min.

a Anderson b Jan 12

Farmer

do

from to

do

from to

20 yrs. all life at place of death in Ontario in Canada

Anthony Shuel

Guelph

Jane Shuel

Ireland (Cashewm

Alex. J. Shuel

Lachlan. Mich.

Brother

St. Stephen's Cemetery

Sand. South

Jan. 23rd. 1922

W. H. Richardson & Son

Essex

Jan. 23rd. 1922

MEDICAL CERTIFICATE OF DEATH

John W. Shuel

Jan. 23rd. 1922

from Jan. 19th. 1922

to Jan. 23rd 1922

Apoplexy

yrs. mos. 5 dys.

Apoplexy

yrs. mos. dys.

a No b No

Dr. Geo Rogers

Essex

Jan. 23. 1922

April 4th 1922

DEATHS

County of *Essex*

Division of *Sandwich South*

No. 40		No. 41		No. 42	
Surname of Deceased <i>O'Neil</i>		Surname of Deceased <i>O'Neil</i>		Surname of Deceased <i>Moynahan</i>	
Full given Name <i>Glen Webster</i>		Full given Name <i>Barbara</i>		Full given Name <i>Jeremiah</i>	
Place of Death, street and number or <i>O'Neil</i>		Place of Death, street and number or <i>O'Neil</i>		Place of Death, street and number or <i>Moynahan</i>	
If in a Hospital or Institution give name		If in a Hospital or Institution give name		If in a Hospital or Institution give name	
a <i>Male</i> b <i>English</i> c <i>Single</i>		a <i>Female</i> b <i>English</i> c <i>Widowed</i>		a <i>Male</i> b <i>Irish</i> c <i>Married</i>	
Age yrs. mos. 3 dys. hrs. min.		Age yrs. mos. 13 dys. hrs. min.		Age yrs. mos. 3 dys. hrs. min.	
(a) Place of Birth (b) Date of Birth <i>Sandwich South</i> <i>May 22nd 1922</i>		(a) Place of Birth (b) Date of Birth <i>Sandwich South</i> <i>Mar. 6. 1846</i>		(a) Place of Birth (b) Date of Birth <i>St. J. Mandatone</i> <i>Mar. 22. 1837</i>	
Trade or Occupation —		Trade or Occupation <i>Housewife</i>		Trade or Occupation <i>Farmer</i>	
Kind of Industry —		Kind of Industry —		Kind of Industry <i>Farming</i>	
Date from which to which employed from — to —		Date from which to which employed from — to —		Date from which to which employed from — to —	
Trade or Occupation —		Trade or Occupation —		Trade or Occupation —	
Kind of Industry —		Kind of Industry —		Kind of Industry —	
Date from which to which employed from — to —		Date from which to which employed from — to —		Date from which to which employed from — to —	
Length of Residence at place of death <i>Lifetime</i> in Ontario <i>Lifetime</i> in Canada		Length of Residence at place of death <i>life</i> in Ontario <i>life</i> in Canada		Length of Residence at place of death <i>8 days</i> in Ontario <i>all his life</i> in Canada	
Name of Father <i>Lionel O'Neil</i>		Name of Father <i>Geo. Vollans</i>		Name of Father <i>Dennis Moynahan</i>	
Birthplace of Father <i>Sandwich South</i>		Birthplace of Father <i>England</i>		Birthplace of Father <i>County Kerry, Ireland</i>	
Maiden Name of Mother <i>Sarah Webster</i>		Maiden Name of Mother <i>Miriam Papp</i>		Maiden Name of Mother <i>Catherine Roach</i>	
Birthplace of Mother <i>Sandwich South</i>		Birthplace of Mother <i>England</i>		Birthplace of Mother <i>County Kerry Ireland</i>	
Name of Informant <i>Lionel O'Neil</i>		Name of Informant <i>Frank O'Neil</i>		Name of Informant <i>John Moynahan</i>	
Address <i>Paquette</i>		Address <i>Paquette</i>		Address <i>201 Paquette Ave Windsor, Ont.</i>	
Relation to Deceased <i>Father</i>		Relation to Deceased <i>Son</i>		Relation to Deceased <i>Son</i>	
Place of Burial <i>St. Stephens Cemetery Sand. South</i>		Place of Burial <i>St. Stephens Cemetery</i>		Place of Burial <i>Mandatone</i>	
Date of Burial <i>May 26th 1922</i>		Date of Burial <i>June 11th 1922</i>		Date of Burial <i>June 23rd 1922</i>	
Name of Undertaker <i>Jay R. Chapin</i>		Name of Undertaker <i>Jay R. Chapin</i>		Name of Undertaker <i>J. Sutton & Sons</i>	
Address <i>Windsor, Ont.</i>		Address <i>Windsor, Ont.</i>		Address <i>Windsor, Ont.</i>	
Cause of Death no Physician attended		Cause of Death —		Cause of Death —	
Date of Death <i>May 25th 1922</i>		Date of Death <i>June 9th 1922</i>		Date of Death <i>June 20th 1922</i>	
MEDICAL CERTIFICATE OF DEATH		MEDICAL CERTIFICATE OF DEATH		MEDICAL CERTIFICATE OF DEATH	
Name of Deceased <i>Glen Webster O'Neil</i>		Name of Deceased <i>Barbara O'Neil</i>		Name of Deceased <i>Jeremiah Moynahan</i>	
Date of Death <i>May 25th 1922</i>		Date of Death <i>June 9th 1922</i>		Date of Death <i>June 20th 1922</i>	
Date from which to which Medical Practitioner attended Deceased from <i>May 22nd 1922</i> to <i>May 24th 1922</i>		Date from which to which Medical Practitioner attended Deceased from <i>June 4th 1922</i> to <i>June 9th 1922</i>		Date from which to which Medical Practitioner attended Deceased from <i>Mar. 12th 1922</i> to <i>June 20th 1922</i>	
Primary <i>Convulsions</i>		Primary <i>Old age</i>		Primary <i>Endocarditis</i>	
Duration yrs. mos. 2 dys.		Duration yrs. mos. dys.		Duration yrs. mos. dys.	
Contributory —		Contributory <i>Heart Disease</i>		Contributory <i>Sudden</i>	
Duration yrs. mos. dys.		Duration yrs. mos. dys.		Duration yrs. mos. dys.	
Did an operation precede death? Was there an autopsy? a <i>No</i> b <i>No</i>		Did an operation precede death? Was there an autopsy? a <i>No</i> b <i>No</i>		Did an operation precede death? Was there an autopsy? a <i>No</i> b <i>No</i>	
Name of Physician <i>Dr. J. W. Bruen</i>		Name of Physician <i>Dr. G. W. Rogers</i>		Name of Physician <i>Dr. J. W. Bruen</i>	
Address <i>Essex</i>		Address <i>Essex</i>		Address <i>Essex</i>	
Date of Return <i>May 25th 1922</i>		Date of Return <i>June 9th 1922</i>		Date of Return <i>June 21st 1922</i>	
Date received by Division Registrar <i>May 25th 1922</i>		Date received by Division Registrar <i>June 9th 1922</i>		Date received by Division Registrar <i>June 21st 1922</i>	

I certify that the foregoing are correct registrations of deaths made to me during the month of *May* 19*22*

John M. Culliffe D.R. Address *Mandatone*

DEATHS

County of EssexDivision of Sandwich South

No. 37.

Burke

No. 38.

Grondin

No. 39.

Lepain

Surname of Deceased

Burke

Grondin

Lepain

Full given Name

Edward

Alexander

Lafters Leo

Place of Death, street and number or

If in a Hospital or Institution give name

If in a Hospital or Institution give name

If in a Hospital or Institution give name

(a) Sex, (b) Racial Origin, (c) Single, Married, Widowed

a Male b Irish c Single

a Male b French c Married

a Male b French c Married

Age

1 yrs. 2 mos. 26 dys. hrs. min.

68 yrs. 7 mos. 23 dys. hrs. min.

36 yrs. 8 mos. 6 dys. hrs. min.

(a) Place of Birth (b) Date of Birth

a Ireland b Jan 8th 1921a Malden b July 14th 1853a Sandwich b Aug 14th 1888

Trade or Occupation

Kind of Industry

Date from which to which employed

Trade or Occupation

Kind of Industry

Date from which to which employed

Length of Residence

Name of Father

Birthplace of Father

Maiden Name of Mother

Birthplace of Mother

Name of Informant

Address

Relation to Deceased

Place of Burial

Date of Burial

Name of Undertaker

Address

Cause of Death if no Physician attended

Date of Death

MEDICAL CERTIFICATE OF DEATH

Name of Deceased

Date of Death

Dates from which to which Medical Practitioner Attended Deceased

Primary

Duration

Contributory

Duration

(a) Did an operation precede death? (b) Was there an autopsy?

Name of Physician

Address

Date of Return

Date received by Division Registrar

William Burke

Sandwich South

Bernedette Mero

Sandwich South

William Burke

Maidstone

Father

Maidstone

April 4. 1922

J. Sutton & Sons

Windsor

April 3rd. 1922

Edward Burke

April 3rd. 1922from Mar 31st. 1922to April 1st. 1922

Influenza

a few days

Possibly Cerebral infection

yrs. mos. dys.

a No b No

Dr. C. C. Richardson

Windsor

April 3rd 1922April 4th 1922

Charles Grondin

Canard River

Susan Renaud

Canard River

Geo. A. Grondin

Maidstone

Son

McGregor

April 8th. 1922

Mr. Jamisse

Windsor

April 4th. 1922

Alexander Grondin

April 4th 1922from Dec 21st. 1921to April 5th 1922

Rheumatism & Neuralgia

yrs. mos. dys.

Myocarditis

yrs. mos. 10 dys.

a No b No

Dr. J. D. MacDonald

Essex

April 6th 1922April 6th 1922

Joseph Lepain

Malden Township

Amelia McLean

Malden Township

Catherine Lepain

Oldcastle

Wife

Maidstone

April 22. 1922

J. Sutton & Son

Windsor

April 20th. 1922

Lafters Leo Lepain

April 20th. 1922from April 1st. 1922to April 19th 1922

Influenza

yrs. mos. 5 dys.

Pneumonia

yrs. mos. 14 dys.

a No b No

Dr. Raymond Morand

Windsor

April 20th. 1922April 21st. 1922

I certify that the foregoing are correct registrations of deaths made to me during the month of

DEATHS

County of *Essex*Division of *Sandwich South*

No. 43		No. 44		No. 45	
Surname of Deceased		Surname of Deceased		Surname of Deceased	
Full given Name		Full given Name		Full given Name	
Place of Death, street and number or		Place of Death, street and number or		Place of Death, street and number or	
(a) Sex, (b) Racial Origin, (c) Single, Married, Widowed		(a) Sex, (b) Racial Origin, (c) Single, Married, Widowed		(a) Sex, (b) Racial Origin, (c) Single, Married, Widowed	
Age		Age		Age	
(a) Place of Birth (b) Date of Birth		(a) Place of Birth (b) Date of Birth		(a) Place of Birth (b) Date of Birth	
Trade or Occupation		Trade or Occupation		Trade or Occupation	
Kind of Industry		Kind of Industry		Kind of Industry	
Date from which to which employed		Date from which to which employed		Date from which to which employed	
Trade or Occupation		Trade or Occupation		Trade or Occupation	
Kind of Industry		Kind of Industry		Kind of Industry	
Date from which to which employed		Date from which to which employed		Date from which to which employed	
Length of Residence		Length of Residence		Length of Residence	
Name of Father		Name of Father		Name of Father	
Birthplace of Father		Birthplace of Father		Birthplace of Father	
Maiden Name of Mother		Maiden Name of Mother		Maiden Name of Mother	
Birthplace of Mother		Birthplace of Mother		Birthplace of Mother	
Name of Informant		Name of Informant		Name of Informant	
Address		Address		Address	
Relation to Deceased		Relation to Deceased		Relation to Deceased	
Place of Burial		Place of Burial		Place of Burial	
Date of Burial		Date of Burial		Date of Burial	
Name of Undertaker		Name of Undertaker		Name of Undertaker	
Address		Address		Address	
Cause of Death		Cause of Death		Cause of Death	
Date of Death		Date of Death		Date of Death	
Name of Deceased		Name of Deceased		Name of Deceased	
Date of Death		Date of Death		Date of Death	
Time from which to which attended Deceased		Time from which to which attended Deceased		Time from which to which attended Deceased	
Primary		Primary		Primary	
Duration		Duration		Duration	
Contributory		Contributory		Contributory	
Duration		Duration		Duration	
Did an operation pre-empt death?		Did an operation pre-empt death?		Did an operation pre-empt death?	
Was there an autopsy?		Was there an autopsy?		Was there an autopsy?	
Name of Physician		Name of Physician		Name of Physician	
Address		Address		Address	
Date of Return		Date of Return		Date of Return	
Date received by Division Registrar		Date received by Division Registrar		Date received by Division Registrar	
Bourque		Williams		Quarles	
Charles		Aron Vern		Minnie Hynes	
Male		Male		Female	
French		Welsh		English	
Married		Single		Married	
45 yrs.		25 yrs.		59 yrs.	
3 mos.		8 mos.		2 mos.	
dys.		dys.		28 dys.	
hrs.		hrs.		hrs.	
min.		min.		min.	
Sand. South		Wales		Prescott. Ont.	
March 13 th 1877		Oct 15 th 1896		April 6 th 1863	
Farmer		Carpenter		Housewife	
R.R.		R.R.		R.R.	
4 days		4 days		4 days	
Locomotive Fireman		Locomotive Fireman		Locomotive Fireman	
R.R.		R.R.		R.R.	
12 months		12 months		12 months	
8 mos.		8 mos.		8 mos.	
19 yrs.		19 yrs.		19 yrs.	
at place of death		at place of death		at place of death	
in Ontario		in Ontario		in Ontario	
in Canada		in Canada		in Canada	
John B. Bourque		Harry Williams		Charles Hynes	
Sandwich. Ont.		Wales		Canada	
Mary Dufour		Elizabeth Saunders		Lydia Christopherson	
Sandwich Ont.		England		England	
Daniel Paquette		Mrs. G. Beers		Dr. Robert Warren Quarles	
Paquette		Fingall Ont.		Van. Buren Arkansas. U.S.A.	
None		Sister		Husband	
McGregor		Windsor Grove Cemetery		St. Stephens Cemetery	
June 15 th 1922		June 26 th 1922		July 4 th 1922	
J. H. H. & Son		George A. Chubb		Jay R. Chapin	
Essex. Ont.		411 Church St. Windsor		Windsor. Ont.	
June 13 th 1922		June 23 rd 1922		July 3 rd 1922	
MEDICAL CERTIFICATE OF DEATH		MEDICAL CERTIFICATE OF DEATH		MEDICAL CERTIFICATE OF DEATH	
Chas. Bourque		Aron Vern Williams		Minnie Hynes Quarles	
June 13 th 1922		June 23 rd 1922		July 3 rd 1922	
from Nov. 12 th 1921		from —		from June 29 th 1922	
to June 13 th 1922		to —		to July 2 nd 1922	
Cerebral Hemorrhage		Accidental Injury		Cerebral Apoplexy	
10 dys.		75 feet		5 yrs.	
Chronic Nephritis		Cerebral Apoplexy		Cerebral Apoplexy	
5 yrs.		5 yrs.		5 yrs.	
No		Inquest Pending		No	
Dr. A. W. Keane		Dr. H. Craswell		Dr. J. W. Brien	
Essex		Windsor		Essex	
June 14 th 1922		June 24 th 1922		July 3 rd 1922	
June 27 th 1922		June 29 th 1922		July 3 rd 1922	

I certify that the foregoing are correct registrations of deaths made to me during the month of.....19.....

D.R.

Address.....

DEATHS

County of EssexDivision of Sandwich South

		No. 46	No. 47	No. 48
		Taylor	O'Neil	Smith
Surname of Deceased		<u>Taylor</u>	<u>O. Neil</u>	<u>Smith</u>
Full given Name		<u>Cora</u>	<u>Elizabeth</u>	<u>John</u>
Place of Death, street and number or				<u>Fulbot Road</u>
If in a Hospital or Institution give name				
(a) Sex, (b) Racial Origin, (c) Single, Married, Widowed		<u>Female</u> <u>African</u> <u>Single</u>	<u>Female</u> <u>English</u> <u>Married</u>	<u>Male</u> <u>English</u> <u>Married</u>
Age		<u>4</u> yrs. <u>4</u> mos. <u></u> dys. <u></u> hrs. <u></u> min.	<u>64</u> yrs. <u></u> mos. <u></u> dys. <u></u> hrs. <u></u> min.	<u>57</u> yrs. <u></u> mos. <u></u> dys. <u></u> hrs. <u></u> min.
(a) Place of Birth (b) Date of Birth		<u>Amherstburg</u> <u>June 5th 1922</u>	<u>Brockville Ont.</u> <u>1858</u>	<u>Maidstone</u> <u>June 1865</u>
Trade or Occupation			<u>Farmer's Wife</u>	<u>Farmer</u>
Kind of Industry				<u>Farming</u>
Date from which to which employed		from <u></u> to <u></u>	from <u></u> to <u></u>	from <u></u> to <u></u>
Trade or Occupation				
Kind of Industry				
Date from which to which employed		from <u></u> to <u></u>	from <u></u> to <u></u>	from <u></u> to <u></u>
Length of Residence		<u>10 days</u> <u>lifetime</u> at place of death in Ontario in Canada	<u>3 mos.</u> <u>all life</u> at place of death in Ontario in Canada	<u>all life</u> <u>all life</u> at place of death in Ontario in Canada
Name of Father		<u>James Taylor</u>	<u>Thomas Hamilton</u>	<u>John Smith</u>
Birthplace of Father		<u>Sandwich South</u>	<u>England</u>	<u>England</u>
Maiden Name of Mother		<u>Margaret Harrison</u>	<u>Bertinsbaw</u>	<u>unknown</u>
Birthplace of Mother		<u>Rochester Township</u>	<u>England</u>	<u>unknown</u>
Name of Informant		<u>Joseph Taylor</u>	<u>John O. Neil</u>	<u>James Smith</u>
Address		<u>Maidstone</u>	<u>Maidstone</u>	<u>Maidstone</u>
Relation to Deceased		<u>Uncle</u>	<u>Husband</u>	<u>Son</u>
Place of Burial		<u>Maidstone</u>	<u>St. Stephen's Cemetery</u>	<u>Maidstone</u>
Date of Burial		<u>Oct. 6th 1922</u>	<u>Oct. 31st 1922</u>	<u>Nov. 6th 1922</u>
Name of Undertaker		<u>None</u>	<u>J. Sutton & Sons</u>	<u>J. Sutton & Sons</u>
Address			<u>Windsor</u>	<u>Windsor</u>
Cause of Death if no Physician attended				
Date of Death		<u>Oct. 5th 1922</u>	<u>Oct. 29th 1922</u>	<u>Nov. 4th 1922</u>
MEDICAL CERTIFICATE OF DEATH				
Name of Deceased		<u>Cora Taylor</u>	<u>Elizabeth O. Neil</u>	<u>John Smith</u>
Date of Death		<u>Oct. 5th 1922</u>	<u>Oct. 29th 1922</u>	<u>Nov. 4th 1922</u>
Dates from which to which Medical Practitioner Attended Deceased		from <u>Oct. 1st 1922</u> to <u>Oct. 1st 1922</u>	from <u>Oct. 15th 1922</u> to <u>Oct. 29th 1922</u>	from <u></u> to <u></u>
Primary		<u>Cholera Infantum</u>	<u>Arterio Sclerosis</u>	<u>Accidental</u>
Duration		<u>8</u> yrs. <u></u> mos. <u></u> dys.	<u>2</u> yrs. <u></u> mos. <u></u> dys.	<u></u> yrs. <u></u> mos. <u></u> dys.
Contributory		<u>Sarcoma from Chlora Infantum</u>	<u>Bronchitis</u>	<u>Coroners Inquest pending</u>
Duration		<u></u> yrs. <u></u> mos. <u></u> dys.	<u>14</u> yrs. <u></u> mos. <u></u> dys.	<u></u> yrs. <u></u> mos. <u></u> dys.
(a) Did an operation precede death? (b) Was there an autopsy?		<u>No</u> <u>No</u>	<u>No</u> <u>No</u>	<u>No</u> <u>Yes</u>
Name of Physician		<u>Dr. J. A. MacDonald</u>	<u>Dr. W. Rogers</u>	<u>Dr. J. W. Brien</u>
Address		<u>Essex</u>	<u>Essex</u>	<u>Essex</u>
Date of Return		<u>Oct. 6th 1922</u>	<u>Oct. 29th 1922</u>	<u>Nov. 4th 1922</u>
Date received by Division Registrar		<u>Oct. 6th 1922</u>	<u>Oct. 29th 1922</u>	<u>Nov. 5th 1922</u>

I certify that the foregoing are correct registrations of deaths made to me during the month of

D.R.

Address

DEATHS

166

County of *Essex*Division of *Sandwich South*

Surname of Deceased		No. 49	Banwell		No. 50	Reyner		No. 51	Russette	
Full given Name		<i>Floyd Watson</i>			<i>Harry</i>			<i>Catherine</i>		
Place of Death, street and number or										
(a) Sex, (b) Racial Origin, (c) Single, Married, Widowed		If in a Hospital or Institution give name			If in a Hospital or Institution give name			If in a Hospital or Institution give name		
Age		a Male b English c Single If under one day			a Male b English c Single If under one day			a Female b French & Irish c Widow If under one day		
(a) Place of Birth (b) Date of Birth		14 yrs. 9 mos. 22 dys. hrs. min.			87 yrs. 8 mos. dys. hrs. min.			87 yrs. 8 mos. dys. hrs. min.		
Trade or Occupation		a Sandwick West b Feb. 2nd 1908			a Sand South b Dec. 21st 1922			a Ruscomb b Dec 20th 1835		
Kind of Industry		<i>School Boy</i>								
Date from which to which employed		from — to —			from — to —			from — to —		
Trade or Occupation										
Kind of Industry										
Date from which to which employed		from — to —			from — to —			from — to —		
Length of Residence		Life Life at place of death in Ontario in Canada			6 mos. 86 yrs. 86 yrs. at place of death in Ontario in Canada					
Name of Father		<i>Edward Banwell</i>			<i>Harry Reyner</i>			<i>John Mero</i>		
Birthplace of Father		<i>Ontario</i>			<i>England</i>			<i>Ruscomb</i>		
Maiden Name of Mother		<i>Jessie Watson</i>			<i>Mary Hewittha Rhoads</i>			<i>— brother</i>		
Birthplace of Mother		<i>Ont.</i>			<i>Woodlee Ont.</i>			<i>Ireland</i>		
Name of Informant		<i>Edward Banwell</i>			<i>Harry Reyner</i>			<i>Alex Russette</i>		
Address		<i>Paquette. Ont.</i>			<i>Paquette. Ont.</i>			<i>Maidstone</i>		
Relation to Deceased		<i>Father</i>			<i>Father</i>			<i>Son</i>		
Place of Burial		<i>St. Stephens Cemetery</i>			<i>On Father's farm</i>			<i>St. Alphonsus Windsor</i>		
Date of Burial		<i>Dec 9th 1922</i>			<i>Dec 21st 1922</i>			<i>Dec 27th 1922</i>		
Name of Undertaker		<i>Jay R. Chapin</i>			<i>None</i>			<i>Albany James</i>		
Address		<i>Windsor</i>						<i>Windsor</i>		
Cause of Death if no Physician attended										
Date of Death		<i>Dec 6th 1922</i>			<i>Dec 21st 1922</i>			<i>Dec 23rd 1922</i>		
MEDICAL CERTIFICATE OF DEATH										
Name of Deceased		<i>Floyd W. Banwell</i>			<i>Harry Reyner</i>			<i>Catherine Russette</i>		
Date of Death		<i>Dec 6th 1922</i>			<i>Dec 21st 1922</i>			<i>Dec 23rd 1922</i>		
Dates from which to which Medical Practitioner Attended Deceased		from <i>Nov. 30th 1922</i> to <i>Dec 6th 1922</i>			from <i>Dec 21st 1922</i> to <i>Dec 21st 1922</i>			from <i>Dec 11th 1922</i> to <i>Dec 22nd 1922</i>		
Primary		<i>Stokes Adams Disease & Heart Block</i>			<i>Still Born</i>					
Duration		yrs. mos. 7 dys.			yrs. mos. dys.			yrs. mos. dys.		
Contributory		<i>Bradycardia</i>			<i>Dead when born</i>					
Duration		yrs. mos. dys.			yrs. mos. dys.			yrs. mos. dys.		
(a) Did an operation precede death? (b) Was there an autopsy?		a No b No			a No b No			a No b No		
Name of Physician		<i>Dr. J. A. McConnick</i>			<i>Dr. J. D. MacDonald</i>			<i>Dr. J. W. Bruen</i>		
Address		<i>Walkerville</i>			<i>Essex</i>			<i>Essex</i>		
Date of Return		<i>Dec 8th 1922</i>			<i>Dec 21st 1922</i>			<i>Dec 24th 1922</i>		
Date received by Division Registrar		<i>Dec 8th 1922</i>			<i>Dec 21st 1922</i>			<i>Dec 24th 1922</i>		

I certify that the foregoing are correct registrations of deaths made to me during the month of.....19.....

D.R.

Address.....