

RECORD OF A DEATH

Calista Ridley Templeton

Full Name (Type or print) (First) (Middle) (Last)

Place of death Greenville Piscataquis Me
(Town) (County) Write RURAL, if so.Date of death June 7, 1949 Length of Stay 60 Yr
in this placeFull name of Burial place or Institution Dud Marsh Road
(If in neither, give house address)Usual Residence Dud Marsh Road
(House Address) Write RURAL, if so.
Greenville Jct. Me.
(P.O.) (State)Legal Residence Greenville Piscataquis Me
(Town) (County) (State)

Sex F Color or race W

Married, Never Married, Widowed, Divorced Widowed

Date of Birth Jan 7, 1860 Age in years (last birthday) 89

If under 1 year Months Days Hours Minutes

Occupation Housewife
(Kind of business or industry)Birthplace Hudson, Me.
(Town & State or foreign country)

Citizen of what country? Am.

Father's Name Joseph Ridley

Mother's Name Mary Robbins

Was Deceased ever in U. S. Armed Forces?
no

(Yes, No, or Unknown) (If yes, give war or dates of service)

Social Security No. none

Informant H. A. Templeton

Medical Certification (Accurate Copy, Item 18 from Certificate Form C)

Direct cause of death (18, I, a) Senility

Interval to Death 2 Yrs

Due to (b) Right femur broken Mar 9, 45

Due to (c) Bedridden since

had one kidney removed over 60

years ago.

Other Conditions (If)

Date of Operation

Operation Findings

Autopsy: Yes () No (X)

Accident, Suicide or Homicide Place of Injury

In Town and County

962X

Time of Injury _____ a.m. Injury while
(Date) (Hour) p.m. at work? Yes () No ()

How did injury occur? _____

Attendant at Death F. J. Pritham, MD (Name) (Title)

Greenville Jct, Maine. (Address) (Date signed)

Burial, Cremation or Removal? Burial
Date 6/9/1949

Cemetery, Lot _____, Section _____

Town Milo, Me. State _____

Funeral Director O. C. Harvey

Greenville, Maine. June 9, 1949
(Address) (Date of Filing)

State of Maine

I hereby certify that the above record of death is correct to the best of my knowledge and belief.

Signature

Clerk of Greenville, Me. Maine.