

Form E-3

2898
RECORD OF A DEATHFull Name Frank Templeton
(Type or Print) (First) (Middle) (Last)Place of death Greenville, Piscataquis, Me.
(Town) (County) Write RURAL, if soDate of death 10/9/52 Length of Stay 50 Years
in this placeFull Name of Hospital or Institution Rea, N. Main St.
(If in neither, give house address)Usual Residence North Main St.
(Home Address) (Write Rural, if so)
Greenville, Me.
(P.O.) (State)Legal Residence Greenville, Piscataquis, Me.
(Town) (County) (State)Sex M Color or race WMarried, Never Married, Widowed, Divorced MarriedDate of birth 2/15/76 Age in years (last birthday) 76Months | Days | Hours | Minutes
If under 1 yearOccupation Guide, canoe & Boat Builder
(Kind of business or industry)Birthplace Willimantic, Maine
(Town & State or foreign country)Citizen of what country? USAFather's Name Frank TempletonMother's Name Emily SearsWar Service Social Security No. 019-14-1048Informant Frank & Hubert Templeton

Medical Certification Part I

Duration

(a) Coronary occlusion 10 yrsAngina Pectoris 4 yearsDue to (b) Sclerosing blood vessels 5 years

Due to (c)

Part II

Date of Operation Operation Findings

Autopsy Yes () No XAccident, Suicide
or HomicidePlace of
Injury

1a Town and County

Time of
Injury

(Date) (Hour)

a.m. Injury while

p.m. at work? Yes () No ()

How did injury occur?

Attendant at Death F. J. Dritham, MD
(Name)10/9/52
(Date)

4201

Burial, Cremation or Removal? Burial
Date 10/12/52
Cemetery, Lot 452, Section Greenville,
Town Greenville, State Maine
Funeral Director C. J. Harvey
Greenville, Maine. 10/12/52
(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.

J. W. [Signature]
Signature

Clerk of

Greenville,

Maine.