DISTRICT No.	51	łQQ
RECISTRATION	No	4255

REGISTRAR OF VITAL STATISTICS COUNTY OF TOMPKINS 1287 TRUMANSBURG ROAD ITHACA, NEW YORK 14850

TRANSCRIPT CERTIFICATE OF DEATH

1.	Place of death	Ithaca, New Y	ork_			
2.	Usual residence	***				
3.	Full name of deceased	Evaline F	H. Whitl	ock		 Ne
	Date of death					tol.
5.	Sex Female 6. Color or	r Race ***	·	7. Marital status	Married	
8.	Husband or wife of	* * *	••••			/ !
9.	Date of birth mo,	day	yr. 10. Age	56 yrs. 10) mos. 26 d	<i>∆ra</i> ay s
11.	Birthplace Barton, N.Y.		13. Occi	upation	***	
	Father's Name Halse					
15.	Mother's Maiden Name	***	••••••			
16.	Was deceased ever in U. S. Arm		o unknown] [] War	or dates of Service	N/A	
	Social Security No.		•			
18.	Name and Address of Informan	t	* * *			
19.	Cause of DeathTube	rculosis	,			
24.	Certified to by W.A. Lawren	ıce	, M.D.,	as attending physici	an, health officer, coro	ner
	Place of Burial East	•				
26.	Undertaker***					
	·	ierehy Certify;	inal record a fice, and that thereof. In II my signature of Tompkins	is entered in the deal the said transcript in the said transcript in the said transcript in the said transcript in the said the official Corthis	ng transcript with the or th register filed in this is a true and faithful co I have hereunto affin porate Seal of the Cou	of- opy xed nty
N	*** unknown [/A not applicable		· C	ta S. K	gistrar, Deputy Registr	 rar.