

Emile Paul Converse

Ohio Deaths, 1908-1953

Attached
to:

Emile Paul Converse
1861-1925 • L6KN-XZX

Name:	Emile Paul Converse
Event Type:	Death
Event Date:	19 Feb 1925
Event Place:	Massillon, Stark, Ohio
Address:	311 N. Lincoln Ave.
Gender:	Male
Age:	63
Marital Status:	Married
Race:	White
Occupation:	Contractor
Birth Date:	16 Aug 1861
Birthplace:	Navarre, Ohio
Birth Year (Estimated):	1862
Burial Date:	23 Feb 1925
Burial Place:	Navarre, Ohio
Cemetery:	St. Clement Cem.
Father's Name:	Paul Converse
Father's Birthplace:	Farance
Mother's Name:	Rebecka Echrote
Mother's Birthplace:	Stark Co., Ohio
Spouse's Name:	Elizabeth Linn



The original may contain more information than was indexed.

Record Collection:
Ohio Deaths, 1908-1953

Document Information:

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Language

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should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important. See instructions on back of certificate.

DEPARTMENT OF HEALTH
 DIVISION OF VITAL STATISTICS
 CERTIFICATE OF DEATH

1 PLACE OF DEATH
 County Stark Registration District No. 1212 File No. 11303
 Township _____ Primary Registration District No. 2423 Registered No. 64
 or Village _____ No. _____ St. _____ Ward _____
 or City of Massillon (If death occurred in a hospital or institution, give its NAME instead of street and number)
 2 FULL NAME Emile Paul Converse Did Deceased Serve in U. S. Navy or Army no
 (a) Residence, No. 311 N. Lincoln Ave. Ward _____
 Length of residence in city or town where death occurred yrs. mos. ds. How long in U. S., if of foreign birth? yrs. mos. ds.

PERSONAL AND STATISTICAL PARTICULARS
 3 SEX Male 4 COLOR OR RACE White 5 Single, Married, Widowed or Divorced (write the word) Married
 6a If married, widowed or divorced HUSBAND of E. Elizabeth Linn
 6 DATE OF BIRTH (month, day, and year) Aug. 16/1861
 7 AGE Years Months Days 63 6 3 LESS than 1 day hrs. or min.
 8 OCCUPATION OF DECEASED (a) Trade, profession, or particular kind of work Contractor
 (b) General nature of industry, business, or establishment in which employed (or employer) Building
 (c) Name of employer Self.
 9 BIRTHPLACE (city or town) Warren (State or country) Ohio
 10 NAME OF FATHER Paul Converse
 (State or country) _____
 11 BIRTHPLACE OF FATHER (city or town) _____ (State or country) _____
 12 MAIDEN NAME OF MOTHER Frances Rebecca Eckhardt
 (State or country) Stark Co., Ohio
 13 BIRTHPLACE OF MOTHER (city or town) _____ (State or country) _____

MEDICAL CERTIFICATE OF DEATH
 16 DATE OF DEATH (month, day and year) Feb. 19 1925
 17 I HEREBY CERTIFY, That I attended deceased from June 14, 1924 to Feb. 18, 1925 that I last saw him alive on Feb. 18, 1925 and that death occurred, on the date stated above, at 5 P. M.
 The CAUSE OF DEATH* was as follows:
Organic Heart Disease
 (duration) 3 yrs. 3 mos. 3 ds.
 CONTRIBUTORY (SECONDARY) _____ (duration) _____ yrs. _____ mos. _____ ds.
 18 Where was disease contracted if not at place of death? _____
 Did an operation precede death? no Date of _____
 Was there an autopsy? no
 What test confirmed diagnosis? Dr. Campbell (signed) _____ M. D.
 (Address) Massillon
 *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.)

14 Informant Mrs. Elizabeth Converse
 (Address) 311 N. Lincoln Ave
 15 Filed 2/23, 1925 J. H. Williams REGISTRAR
 19 PLACE OF BURIAL, CREMATION, OR REMOVAL Warren, Ohio
 20 UNDERTAKER, License No. 1274A ADDRESS Heitgen Sons Massillon Ohio