## WISCONSIN STATE BOARD OF HEALTH - ORIGINAL CERTIFICATE OF DEATH Rock County Courthouse, 51 S. Main St., Janesville, WI 53545 Rock County, Wisconsin Deaths Vol. 98 (46701-47350) State Death No. 47108 WILL C. SCHULZ

**TRANSCRIBED** 1. Place of Death: a) County: Dane b) City, Town, Location: Madison c) Inside City or Town Limits: Yes d) Hospital or Institution: Madison General Hospital e) Length of Stay: <u>4 Days</u> 2. Usual Residence: a) State: Wis. b) County: Rock c) City, Town, Location: Milton d) Inside City or Town Limits: ----e) Street Address: 220 Whitewater St. f) Is Residence on a Farm? -----3. Name of Deceased: Will C. Schultz 4. Date of Death: 6-14-1962 5. Sex: M 6. Color or Race: White 7. Single, Married, Widowed, Divorced: Widowed 8. Date of Birth; July 16, 1883 9. Age: Years: 78 Months: 10 **Days: 19** 10. Usual Occupation: <u>Retired Farmer</u> Kind of Business: <u>Farmer</u> 11. Birthplace: Wisc. 12. Citizen of What Country: U.S.A. 13. Father's Name: Herman Schultz 14. Mother's Maiden Name: Agusta Bentz 15. Was Deceased Ever in U.S. Armed Forces: No 16. Social Security Number: None 17. Informant: Ralph E. Schultz a) Name of Wife, if Alive: Deceased b) Age of Wife, if Alive: -----18. Part I: Cause of Death: a) <u>Sub-Dural Hematoma – 4 Mos.</u> b) Pulmonary Edema – 2 Days Part II: Other Significant Conditions: -----19. Was Autopsy Performed: Yes 20. a) Accident, Suicide, Homicide: Accident b) Describe How Injury Occurred: Fall on Ice c) Time of Injury: <u>a.m. 1-20-62</u> d) Injury Occurred While or Not While at Work: Not While At Work e) Place of Injury: <u>Farm</u> f) City, Town, Location: Milton County: Rock State: Wisc. 21. I attended the deceased from 6-10-62 to 6-15-62 and last saw him alive on 6-15-62. Death occurred at 6-15-62 12:55 p.m. on the date stated above, and to the best of my knowledge,

- 22. a) Signature: <u>Hny. N. Sueth, M.D.</u> (?) b) Address: <u>1605 S. Monroe St.</u>
  c) Date Signed: 6-15-62
- 23. a) Burial, Cremation or Removal: <u>Burial</u>
  b) Date: <u>June 18, 1962</u>
  c) Name of Cemetery or Crematory: <u>Milton Lawns</u>
  d) Location: <u>Janesville, Wisc.</u>
- 24. Name of Funeral Home and Address: <u>Albrecht Funeral Home, Milton Jct.</u> Date Received by Local Registrar: <u>June 20, 1962</u>
- 25. Funeral Director Signature: Robert J. Albrecht

from the causes stated.