

Commonwealth of Massachusetts.

City of Springfield,

Aug 13 1987

I, Mary C Powers, hereby certify that I have examined the Records of deaths in said city and find recorded therein the death of William J Malone

The record is in the following words and figures, to wit:

Date of Death, Mar 31 1932  
Name and Surname of Deceased, William J Malone  
Name and Surname of Husband, - - - - -  
Sex, M Color, W Condition, W  
Age, 75 Years, - - Months, - - Days.  
Disease or Cause of Death, Broncho Pneumonia Chronic Endocarditis  
Chronic Interstitial Nephritis  
Residence, 46 Vinton St Spfld  
Place of Death, 46 Vinton St Spfld  
Place of Burial, St Michael's Cem Springfield Lot 378  
MATER DOLORES  
Occupation, Laborer  
Place of Birth, Ireland  
Name and Birthplace of Father, William Malone - Ireland  
Name and Birthplace of Mother, Elizabeth O'Connor - Ireland  
If U. S. War Veteran, specify War,

I, Mary C Powers, above named, depose and say, that I hold the office of ASST City Clerk of the City of Springfield, in the County of Hampden and Commonwealth of Massachusetts; that the Records of Births, Marriages and Deaths in said City are in my custody, and that the above is a true extract from the Records of Deaths in said City, as certified by me.

Witness my hand and the seal of the said City of Springfield, on the day and year first above written.

Mary C Powers  
ASST City Clerk