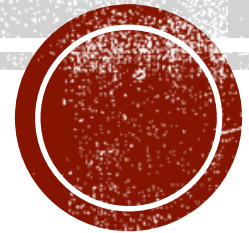


FROM CRADLE TO COFFIN

VITAL RECORDS RESEARCH IN INDIANA

Jamie Dunn • Genealogy Division • Indiana State Library



FINDING VITAL RECORDS

- What are vital records?
- What do we hope to learn?
 - Birthdate/death date
 - Place of birth/death
 - Parents' names
 - Place of burial
 - Birth order
 - Cause of death
 - Religious or civil affiliations
 - Possibly additional information



FINDING VITAL RECORDS

- Where were the records created?
 - Public records
 - Non-governmental records
- Common problems
 - Availability
 - Accessibility
 - Errors



BIRTH AND DEATH CERTIFICATES

- Where are they kept?
- What can they tell us?
- Who provided the information?
- How do we get them?



LOCATING BIRTH & DEATH CERTIFICATES

- Online databases
- Indexes

DEATH RECORD

NAME OF DECEASED	SEX	COLOR	AGE AT DEATH	DATE OF DEATH	PLACE OF DEATH	BOOK	PAGE
------------------	-----	-------	--------------	---------------	----------------	------	------

-- F --

Fahey Katie	F	W	h	Sept 3 1884	Jeffersonville	H 21	55
Fahey Mary Kenney	F	W	74	Mar 10 1920	Clarksville	H 19	103
Fairchild Clarinda	F	W	64	Jan 20 1900	Jeffersonville	H 24	8
Fairchild Laurena	F	W	66	June 3 1916	Bethlehem	H 32	29
Falk I R 5573	M	W	26	Nov 2 1907	Jeffersonville	CH 1	1

*Indiana Works Progress
Administration. WPA Index to
Death Records for Clark County,
Indiana. 1939.*



ANATOMY OF A BIRTH CERTIFICATE

- Part 1: The child

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated. This certificate to be submitted to the State Board of Health at Indianapolis, not later than the fourth of each month.

PLACE OF BIRTH		INDIANA STATE BOARD OF HEALTH DIVISION OF VITAL STATISTICS.		36049	
County of	<i>Morgan</i>	CERTIFICATE OF BIRTH.			
Township of	<i>Beau Blossom</i>	Registered No.			
or Village of	<i>Shuesville</i>	(No. St.; Ward)			
City of	FULL NAME OF CHILD <i>BERNECE TIPPS</i>			
If child is not named, make supplemental report.		{ Born } Yes		{ Alive } <i>No</i>	
Sex of Child	<i>Female</i>	Twin, Triplet, or Other	<i>X</i>	Number in order of birth	<i>X</i>
Legitimate?	<i>yes</i>	Date of Birth	<i>July 12 1908</i>		
FATHER			MOTHER		
Full Name <i>Ephraim L. Tipps</i>			Full Maiden Name <i>Laura Beasley</i>		
Residence <i>Shuesville</i>			Residence <i>Shuesville</i>		
Color or Race	<i>White</i>	Age at last Birthday	<i>31</i> (Years)		
Birthplace	<i>Morgan co</i>				
Occupation	<i>Laborer</i>				
Number of child of this mother <i>4</i>		Number of children, of this mother, now living <i>3</i>		Were precautions taken against Ophthalmia neonatorum? <i>yes</i>	
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*					
I hereby certify that I attended the birth of above child; and that it occurred on <i>July 12, 1908</i> , at <i>7 A.</i> M.					
{ * When there is no attending physician or midwife, then the householder should make this return. See instructions on back. }		(Signature) <i>W. H. Holtzman</i> (Attending physician, midwife, householder, *)			
Given or christian name added from a supplemental report		Dated		Address	
..... 190		190		<i>Shuesville</i>	
HEALTH OFFICER,		Filed		190	
.....			HEALTH OFFICER,	

Bernece Tipps Birth Certificate, 1908.
 "Indiana Birth Certificates, 1907-1940."
 Accessed April 13, 2017. Ancestry Library Edition.



ANATOMY OF A BIRTH CERTIFICATE

- Part 2: The parents

PLACE OF BIRTH
 County of Morgan
 Township of Beau Blossom
 or Village of Shivesville
 or City of _____ (No. _____ St.; _____ Ward)
INDIANA STATE BOARD OF HEALTH
 DIVISION OF VITAL STATISTICS. **36049**
CERTIFICATE OF BIRTH.
 Registered No. _____
 FULL NAME OF CHILD BERNECE TIPPS { Born } Yes
 { Alive } No
 If child is not named, make supplemental report.

Sex of Child <u>Female</u>	Twin, Triplet, or Other <u>X</u>	Number in order of birth <u>X</u>	Legitimate? <u>yes</u>	Date of Birth <u>July 12 1908</u>
----------------------------	----------------------------------	-----------------------------------	------------------------	-----------------------------------

FATHER		MOTHER	
Full Name <u>Ephraim L. Tipps</u>	Full Maiden Name <u>Laura Beasley</u>	Full Name <u>Laura Beasley</u>	Full Maiden Name _____
Residence <u>Shivesville</u>	Residence <u>Shivesville</u>	Residence <u>Shivesville</u>	Residence _____
Color or Race <u>White</u>	Age at last Birthday <u>31</u> (Years)	Color or Race <u>White</u>	Age at last Birthday <u>35</u> (Years)
Birthplace <u>Morgan co</u>	Birthplace <u>Morgan co</u>	Birthplace <u>Morgan co</u>	Birthplace _____
Occupation <u>Laborer</u>	Occupation _____	Occupation <u>Morgan co</u>	Occupation _____

Number of child of this mother 4 Number of children, of this mother, now living 3 Were precautions taken against Ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on July 12, 1908, at 7 9 M.

{ * When there is no attending physician or midwife, then the householder should make this return. See instructions on back. }

(Signature) W. H. Holtzman
 (Attending physician, midwife, householder.)

Given or christian name added from a supplemental report _____ 190 _____ Dated _____ 190 _____ Address Shivesville

Filed _____ 190 _____ HEALTH OFFICER, _____ HEALTH OFFICER, _____

Bernece Tipps Birth Certificate, 1908.
 "Indiana Birth Certificates, 1907-1940."
 Accessed April 13, 2017. Ancestry Library Edition.



PLACE OF BIRTH

County of Morgan

Township of Beau Blossom

or

Village of Shivesville

or

City of _____ (No. _____ St.; _____ Ward)

INDIANA STATE BOARD OF HEALTH

DIVISION OF VITAL STATISTICS.

36049

CERTIFICATE OF BIRTH.

Registered No. _____

FULL NAME OF CHILD BERNECE TIPPS { Born Alive } Yes ☒ No ☐

If child is not named, make supplemental report.

Sex of Child <u>Female</u>	Twin, Triplet, or Other <u>X</u>	and { Number in order of birth <u>X</u>	Legitimate? <u>yes</u>	Date of Birth <u>July 12 1908</u>
Full Name <u>Ephraim L. Tipps</u>			Full Maiden Name <u>Laura Beasley</u>	
Residence <u>Shivesville</u>			Residence <u>Shivesville</u>	
Color or Race <u>White</u>	Age at last Birthday <u>31</u> (Years)	Color or Race <u>White</u>		
Birthplace <u>Morgan co</u>		Birthplace <u>Morgan co</u>		
Occupation <u>Laborer</u>		Occupation <u>Morgan co</u>		

Number of child of this mother 4 Number of children, of this mother, now living 3 Were precautions taken against Ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on July 12, 1908, at 7 A. M.

{ * When there is no attending physician or midwife, then the householder should make this return. See instructions on back. }

(Signature) W. H. Holtzman (Attending physician, midwife, householder,*)

Given or christian name added from a supplemental report _____ 190_____ Dated _____ 190_____ Address Shivesville

HEALTH OFFICER, _____ 190_____ HEALTH OFFICER, _____

- Bernece Tipps Birth Certificate, 1908.
"Indiana Birth Certificates, 1907-1940."
Accessed April 13, 2017. Ancestry Library
Edition.*

ANATOMY OF A DEATH CERTIFICATE

- Part 1: Geography

PLACE OF DEATH		Indiana State Board of Health		18805	
COUNTY OF <u>Grant</u>		CERTIFICATE OF DEATH		Registered No. <u>120</u>	
TOWNSHIP OF <u>Sum</u>					
CITY OF		(No. R. P. & Converse Ind. St., Ward)		[If death occurred in a Hospital or Institution, give its NAME (instead of street and number.)]	
[If death occurs away from USUAL RESIDENCE give facts called for under "Special Information"]		*FULL NAME <u>Catherine Achor</u>			
PERSONAL AND STATISTICAL PARTICULARS			MEDICAL CERTIFICATE OF DEATH		
*SEX <u>Female</u>	*Color or Race <u>White</u>	*Single Married <u>Married</u>	*DATE OF DEATH <u>June 8</u> 19 <u>25</u> (Month) (Day) (Year)		
*NAME OF HUSBAND OR WIFE (of deceased) <u>Gilbert Achor</u>			I HEREBY CERTIFY, That I attended deceased from <u>Aug 16</u> 19 <u>22</u> to <u>June 8</u> 19 <u>25</u> that I last saw h ^e r alive on _____ 19____		
*DATE OF BIRTH (of deceased) <u>Dec.</u> <u>11</u> <u>1856</u> (Month) (Date) (Year)			and that death occurred, on the date stated above, at <u>11 P.M.</u>		
AGE <u>68</u> years <u>5</u> months <u>27</u> days If LESS than 1 day, ____ hrs. ____ min.			The CAUSE OF DEATH was as follows: <u>Paralysis</u>		
*OCCUPATION (a) Trade, profession, or occupation kind of work <u>At Home</u> (b) General nature of industry, business, or establishment in which employed (or employer)			Contributory <u>High Blood Pressure</u> (Duration) <u>3</u> yrs. <u>6</u> mos. ____ ds.		
*BIRTHPLACE OF DECEASED <u>Grant Co Ind.</u> (State or country)			(Signed) <u>W. S. Peterson</u> , M. D. <u>June 9</u> , 19 <u>25</u> (Address) <u>Swygge</u>		
*NAME OF FATHER <u>George W. Smith</u>			*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES state (1) MEANS OF INJURY, and (2) whether ACCIDENTAL, SUICIDAL or HOMICIDAL		
*BIRTHPLACE OF FATHER (State or country) <u>Ohio</u>			*LENGTH OF RESIDENCE (For Hospitals, Institutions, Transients or Recent Residents) At place of death ____ yrs. ____ mos. ____ ds. In the ____ State ____ yrs. ____ mos. ____ ds.		
*MAIDEN NAME OF MOTHER <u>Caroline Gilpin</u>			Where was disease contracted, if not at place of death? Farmer or Usual Residence ____		
*BIRTHPLACE OF MOTHER (State or country) <u>Ind.</u>			*PLACE OF BURIAL OR REMOVAL <u>Thrallkill Comty</u> DATE OF BURIAL <u>June 11</u> 19 <u>25</u>		
*THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) <u>Mrs Grace Spears</u>			*UNDERTAKER <u>Buchanan & Son</u> WAS THE BODY EMBALMED? <u>Yes</u>		
(Address) <u>Marion Ind.</u>			*ADDRESS <u>Marion Ind.,</u> EMBALMER'S LICENSE No. <u>696</u>		
*Filed <u>June 10, 1925</u> <u>O. W. McQuinn</u> Name and Address of Health Officer or Deputy					

Catherine Achor Death Certificate, 1925.
 "Indiana Death Certificates, 1899-2011."
 Accessed April 13, 2017. Ancestry Library Edition.



ANATOMY OF A DEATH CERTIFICATE

■ Part 2: The decedent

PLACE OF DEATH
County of Grant
Township of Sum
City of _____
(No. R. P. 2 Converse Ind. St., Ward)

Indiana State Board of Health
CERTIFICATE OF DEATH 18805
Registered No. 120

[If death occurs away from USUAL RESIDENCE give facts called for under (b) above.]

FULL NAME Catherine Achor

PERSONAL AND STATISTICAL PARTICULARS

SEX Female **Color or Race** White **Single Married Widowed or Divorced** Married

NAME OF HUSBAND OR WIFE (of deceased) Gilbert Achor

DATE OF BIRTH (of deceased) Dec. II 1856
(Month) (Date) (Year)

AGE 68 years 5 months 27 days **IF LESS than** 1 day, ____ hrs. ____ min.

OCCUPATION
(a) Trade, profession, or occupation kind of work At Home
(b) General nature of industry, business, or establishment in which employed (or employer)

BIRTHPLACE OF DECEASED Grant Co Ind.
(State or country)

PARENTS
NAME OF FATHER George W. Smith
BIRTHPLACE OF FATHER Ohio
(State or country)
MAIDEN NAME OF MOTHER Caroline Gilpin
BIRTHPLACE OF MOTHER Ind.
(State or country)

THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE
(Affirmant) Mrs Grace Spears
(Address) Marion Ind.

FILED June 10, 1925
C. M. McQuinn
Name and Address of Health Officer or Deputy

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH June 8 1925
(Month) (Day) (Year)

I HEREBY CERTIFY, That I attended deceased from Aug 16 1922 to June 8 1925 that I last saw him alive on _____ 19____ and that death occurred, on the date stated above, at 11 P.M.

The CAUSE OF DEATH* was as follows:
Paralysis

Contributory High Blood Pressure
(Secondary) (Duration) 3 yrs. 6 mos. ds.

(Signed) W. S. Peterson, M.D.
June 9, 1925 (Address) Swagler

*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES state (1) MEANS OF INJURY, and (2) whether ACCIDENTAL, SUICIDAL or HOMICIDAL

LENGTH OF RESIDENCE (For Hospitals, Institutions, Transients or Recent Residents)
At place of death ____ yrs. ____ mos. ____ ds. In the ____ yrs. ____ mos. ____ ds. State ____

Where was disease contracted, if not at place of death?
Farmer or Usual Residence ____

PLACE OF BURIAL OR REMOVAL Thrailkill Comty
DATE OF BURIAL June 11 1925

UNDERTAKER Buchanan & Son
WAS THE BODY EMBALMED? Yes

ADDRESS Marion Ind.,
EMBALMER'S LICENSE No. 696

Catherine Achor Death Certificate, 1925.
"Indiana Death Certificates, 1899-2011."
Accessed April 13, 2017. Ancestry Library Edition.



ANATOMY OF A DEATH CERTIFICATE

■ Part 3: Cause of death

PLACE OF DEATH		Indiana State Board of Health		18805	
County of	Grant	CERTIFICATE OF DEATH		Registered No. 120	
Township of	Sum	(No. R. P. 2 Converse Ind. St., Ward)		[If death occurred in a Hospital or Institution, give its NAME (instead of street and number.)]	
City of					
[If death occurs away from USUAL RESIDENCE give facts called for under "Special Information"]					
*FULL NAME Catherine Achor					
PERSONAL AND STATISTICAL PARTICULARS					
*SEX	Female	*Color or Race	White	*Single Married Widowed or Divorced (Write the word)	Married
*NAME OF HUSBAND OR WIFE (of deceased)	Gilbert Achor				
*DATE OF BIRTH (of deceased)	Dec.	II	1856		
		(Month)	(Date)	(Year)	
*AGE	68	5	27	If LESS than 1 day, hrs. or min.	
		years	months	days	
*OCCUPATION					
(a) Trade, profession, or occupation kind of work At Home					
(b) General nature of industry, business, or establishment in which employed (or employer)					
*BIRTHPLACE OF DECEASED Grant Co Ind.					
(State or country)					
*NAME OF FATHER George W. Smith					
*BIRTHPLACE OF FATHER Ohio					
(State or country)					
*MAIDEN NAME OF MOTHER Caroline Gilpin					
*BIRTHPLACE OF MOTHER Ind.					
(State or country)					
*THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE					
(Informant) Mrs Grace Spears					
(Address) Marion Ind.					
*FILED June 10, 1925					
O. M. McQuinn					
Name and Address of Health Officer or Deputy					
MEDICAL CERTIFICATE OF DEATH					
*DATE OF DEATH June 8 1925					
(Month) (Day) (Year)					
I HEREBY CERTIFY, That I attended deceased from Aug 16 1922 to June 8 1925					
that I last saw him alive on 19					
and that death occurred, on the date stated above, at 11 P.M.					
The CAUSE OF DEATH* was as follows:					
Paralysis					
(Duration) yrs. mos. 12					
Contributory High Blood Pressure					
(Secondary) (Duration) 3 yrs. 6 mos. ds.					
(Signed) W. S. Peterson, M. D.					
June 9, 1925 (Address) Swagler					
*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES state (1) MEANS OF INJURY, and (2) whether ACCIDENTAL, SUICIDAL or HOMICIDAL					
*LENGTH OF RESIDENCE (For Hospitals, Institutions, Transients or Recent Residents)					
At place of death yrs. mos. ds. In the State yrs. mos. ds.					
Where was disease contracted, if not at place of death?					
Farmer or Social Residence					
*PLACE OF BURIAL OR REMOVAL Thrailkill Comty					
DATE OF BURIAL June 11 1925					
*UNDERTAKER Buchanan & Son					
WAS THE BODY EMBALMED? Yes					
*ADDRESS Marion Ind.,					
EMBALMER'S LICENSE No. 696					

Catherine Achor Death Certificate, 1925.
 "Indiana Death Certificates, 1899-2011."
 Accessed April 13, 2017. Ancestry Library
 Edition.



ANATOMY OF A DEATH CERTIFICATE

■ Part 4: Funeral and burial

PLACE OF DEATH		Indiana State Board of Health		18805	
County of <u>Grant</u>		CERTIFICATE OF DEATH		Registered No. <u>120</u>	
Township of <u>Sum</u>		(No. R. P. 2 Converse Ind. St., Ward)		[If death occurred in a Hospital or Institution, give its NAME (instead of street and number.)]	
City of _____		FULL NAME <u>Catherine Achor</u>			
[If death occurs away from USUAL RESIDENCE give facts called for under "Special Information"]		PERSONAL AND STATISTICAL PARTICULARS		MEDICAL CERTIFICATE OF DEATH	
SEX <u>Female</u>	Color or Race <u>White</u>	Single <input type="checkbox"/> Married <input checked="" type="checkbox"/> Widowed <input type="checkbox"/> or Divorced <input type="checkbox"/> (Write the word)	DATE OF DEATH <u>June 8</u> 19 <u>25</u> (Month) (Day) (Year)		
NAME OF HUSBAND OR WIFE (of deceased) <u>Gilbert Achor</u>		I HEREBY CERTIFY, That I attended deceased from <u>Aug 16</u> 19 <u>22</u> to <u>June 8</u> 19 <u>25</u> that I last saw h ^{er} alive on _____ 19 _____			
DATE OF BIRTH (of deceased) <u>Dec. 11</u> 18 <u>56</u> (Month) (Date) (Year)		and that death occurred, on the date stated above, at <u>11 P.M.</u> The CAUSE OF DEATH* was as follows: <u>Paralysis</u>			
AGE <u>68</u> <u>5</u> months <u>27</u> days years months days		If LESS than 1 day, hrs. min.			
OCCUPATION (a) Trade, profession, or occupation kind of work <u>At Home</u> (b) General nature of industry, business, or establishment in which employed (or employer)		Contributory <u>High Blood Pressure</u> (Duration) <u>3</u> yrs. <u>6</u> mos. <u>0</u> ds.			
BIRTHPLACE OF DECEASED <u>Grant Co Ind.</u> (State or country)		(Signed) <u>W. S. Peterson</u> , M. D. <u>June 9</u> , 19 <u>25</u> (Address) <u>Swygge</u>			
NAME OF FATHER <u>George W. Smith</u>		*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES state (1) MEANS OF INJURY, and (2) whether ACCIDENTAL, SUICIDAL or HOMICIDAL			
BIRTHPLACE OF FATHER (State or country) <u>Ohio</u>		LENGTH OF RESIDENCE (For Hospitals, Institutions, Transients or Recent Residents) At place of death _____ yrs. _____ mos. _____ ds. In the _____ State _____ yrs. _____ mos. _____ ds.			
MAIDEN NAME OF MOTHER <u>Caroline Gilpin</u>		Where was disease contracted, if not at place of death? Former or Usual Residence _____			
BIRTHPLACE OF MOTHER (State or country) <u>Ind.</u>					
THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) <u>Mrs Grace Spears</u> (Address) <u>Marion Ind.</u>		PLACE OF BURIAL OR REMOVAL <u>Thrallkill Comty</u> DATE OF BURIAL <u>June 11</u> 19 <u>25</u>			
FILED <u>June 10</u> , 19 <u>25</u> <u>C. M. McQuinn</u> Name and Address of Health Officer or Deputy		UNDERTAKER <u>Buchanan & Son</u> WAS THE BODY EMBALMED? <u>Yes</u>			
		ADDRESS <u>Marion Ind.,</u> EMBALMER'S LICENSE No. <u>696</u>			

Catherine Achor Death Certificate, 1925.
 "Indiana Death Certificates, 1899-2011."
 Accessed April 13, 2017. Ancestry Library
 Edition.



CENSUS RECORDS

- Information provided varies by census.
- The census itself contains only birth information, but death information can be found in the mortality schedules.
- Indiana first appears in the census in 1820.
- There are some extant state censuses, but they usually do not contain genealogically relevant information.



CENSUS RECORDS

		to 10	to 16	16 to 18	16 to 26	to 45	45 to 64
1790 98A							83
Palmyra Township	Daniel McCre				2		1
"	Thomas Palmer	1	1			1	
"	Joshua Palmer						1
"	Robert Elliott				4		1
"	Martin Rose				1		1
"	Ephraim Darnald	2	2			1	
"	Daniel Langton		1		2		1
"	Samuel Langton				1	1	
"	David Snyder	2	1		1		1
"	Glass Cochran		2	1	1		1
"	Reasheal Manning						
"	Daniel Trece	3				1	
"	Richard Steen	3			1		1

- 1790-1840: Age ranges by gender, no birthplace

"1820 United States Federal Census." Palmyra Township, Knox County, Indiana. Accessed April 13, 2017. Ancestry Library Edition



CENSUS RECORDS

SCHEDULE L.—Free Inhabitants in Subdivision of District No. 61 in the County of Knox of Indiana enumerated by me, on the 2nd day of Sept 1850. J. M. Midner

1	2	3	DESCRIPTION.			7	8	9	10	11	12
			Age	Sex	Color, or race						
		The Name of every Person whose usual place of abode on the first day of June, 1850, was in this family.				Profession, Occupation, or Trade of each Male Person over 15 years of age.	Value of Real Estate owned.	Place of Birth. Naming the State, Territory, or Country.	Married within the year.	Attended School within the year.	Persons over 20 yrs of age who cannot read & write.
1	1	John M. Midner	43	m		Farmer	800	Indy			
		Americus "	43	f				Indy			
		Emily "	19	"				Indy			
		Levin "	12	m				"		1	
		Jacob "	7	"				"		1	
		Wendell "	3	"				"			

- 1850-1880, 1910-1940: Age and birthplace of each individual

"1850 United States Federal Census."

Subdivision of District No. 61, Knox County, Indiana.
Accessed April 13, 2017.
Ancestry Library Edition



CENSUS RECORDS

TWELFTH CENSUS OF THE UNITED STATES.

SCHEDULE No. 1.—POPULATION.

State Indiana
 County Knox
 Township or other division of county Steen Township
(Insert name of township, town, precinct, district, or other civil division, as the case may be. See instructions.)
 Name of incorporated city, town, or village, within the above-named division, _____
 Enumerated by me on the 7 day of June, 1900, Augusta J. Wheeler

- 1900: Month and year of birth and birthplace for each individual

DATE OF BIRTH.	
Month.	Year.
7	
Jan. 1852	
Mar. 1864	
Apr. 1887	

LOCATION.				NAME of each person whose place of abode on June 1, 1900, was in this family. Enter surname first, then the given name and middle initial, if any. Include every person living on June 1, 1900. Omit children born since June 1, 1900.	RELATION. Relationship of each person to the head of the family.	PERSONAL DESCRIPTION								NATIVITY.			CITIZENSHIP			
IN CITIES.		Number of dwelling-houses, in the order of valuation.	Number of family, in the order of valuation.			Color or race.	Sex.	DATE OF BIRTH.		Age at last birthday.	Whether single, married, widowed, or divorced.	Number of years married.	Mother of how many children.	Number of these children living.	Place of birth of each person and parents of each person enumerated. If born in the United States, give the State or Territory; if of foreign birth, give the Country only.			Year of immigration to the United States.	Number of years in the United States.	Naturalization.
Street.	House Number.							Place of birth of this Person.	Place of birth of FATHER of this person.						Place of birth of MOTHER of this person.					
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	
1		1	1	Bell, John	Head	W	M	Jan 1852	48	M	20			Indiana	Indiana	Indiana				
2				Mary	Wife	W	F	Mar 1864	36	M	20	2	2	Indiana	Indiana	Indiana				
3				Emma	Daughter	W	F	Jan 1887	13	S				Indiana	Indiana	Indiana				
4		2	2	Watkins, J.	Head	W	M	Nov 1871	29	M	6			Indiana	Indiana	Indiana				
5				Jennie	Wife	W	F	Aug 1867	32	M	6	4	4	Indiana	Indiana	Indiana				
6				Asa	Son	W	M	Jan 1888	12	S				Indiana	Indiana	Indiana				

“1900 United States Federal Census.” Steen Township, Knox County, Indiana. Accessed April 13, 2017. Ancestry Library Edition



MORTALITY SCHEDULES

- Conducted as part of the census in 1850, 1860, 1870, and 1880
- Covered the “census year” (June 1, 1849 to May 31, 1850, etc.)
- Not all states are online
- Indiana’s schedules are available through the Indiana State Library Digital Collections



MORTALITY SCHEDULES

Page No. 2
 Supervisor's Dist: No. 3
 Enumeration Dist: No. 38

Note A.—The Census Year begins June 1, 1879, and ends May 31, 1880.
 Note B.—In making entries in columns 6, 7, and 8, an affirmative mark only will be used, thus /, except in the case of Divorced persons, column 8, when the letter "D" is to be used.
 Note C.—For instructions relative to the entries in column 14, see back of this Schedule.
 Note D.—In column 17, note distinctly if no Physician was in attendance, thus (None).

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in Washington Tp, in the County of Hamilton, State of Indiana, from Wade.

Enumerated

1.	2.	3.			4.	5.	6.			7.	8.	9.			10.	11.	12.	13.	14.	15.	16.	17.
		Name of the person deceased	Age	Sex			Color	Single	Married			Divorced	Place of birth of this person, naming the State or Territory of the U. S. or the country, if not born in the U. S.	When was the father of this person born? (See column 3.)								
332	Chance Mauris A	12	M	W	1			Indiana	Ind	Ind			Jan	Whooping cough	1 1/2		Dr J L Benson					
346	Born Miesley	12	M	B	1			Ind	N. C.	N. C.			May	Whooping cough	7 1/2		Dr Ellis					
359	Borton Berlin	12	M	W	1			Ind	Ind	Ind			Feb	Whooping cough	1 1/2		Dr B. H. Pettigrew					
388	Mare Fremont	23	M	W	1			Ind			At school	Dec	Consumption	26		Dr J L Benson						
391	Lindley Laura L	5	F	W	1			Ind	Ind	Ohio			Nov	Membranous croup	5		Graham & Pettigrew					
400	Earl Jora F	4	F	W	1			Ind	Ind	Ind			Jan	do do	4		Dr B Pettigrew					
418	Book Milton	47	M	W	1			Ind	(Ind)	N. C.	Farmer	Sept	Paralysis caused by Wm	47		Dr B Pettigrew						
428	Moore Murro	7	M	W	1			Ind	Ind	Ind			Aug	Colera Infantum	7 1/2		Dr Ellis					
440	Lindley John P	25	M	W	1			Ind	N. C.	Ind	Farmer	Aug	Growing	0								
441	Hubbard Susannah	54	F	W	1			Ind	Ind	Ind	Keeping house	Oct	Cancer of the breast	18		Dr J McShane						

- Sections (l-r):
 - Name of decedent
 - Age, gender, race
 - Marital status
 - Birthplace of decedent and parents
 - Job of decedent
 - Month and cause of death
 - Length of residence in county
 - Name of doctor



CORONERS' INQUESTS

- Used in cases of suspicious deaths or cases where the death might result in criminal proceedings

MONROE COUNTY, INDIANA INQUESTS 1888-1973

BK	PAGE	NAME		AGE	DEATH	NATURE	DEATH INFO
3	303.	Browning	Mrs. Grace	65	04-20-1944	Natural	Heart Failure
1	191.	Bruce	John W.	55	03-17-1915	Accident	Fell from Wagon
4	197.	Brummett	Lula	46	08-14-1962	Accident	Barbiturate
2	185	Brummett	William	36	05-23-1927	Suicide	Gun Shot Wound
1	373.	Brummett	Frederick M.	6wks	11-04-1926	Natural	Bronchia
3	304.	Bruner	Jean Marie	57	06-09-1944	Suicide	Gun Shot Wound
1	236.	Buckley	Mrs. L.J.	63	01-10-1924	Accident	Suffocation from
4	452/453	Bullock	Daniel	2mo	04-20-1969	Unnatura	Pneumonia

*McCoy, Marilyn.
Monroe County
Indiana Coroners
Inquest, 1888-1973.
Bloomington, IN:
Monroe County
Historical Society,
Inc., 2001.*



SOCIAL SECURITY DEATH INDEX (SSDI)

- Includes birth and death information as well as biographical notes

Name:	Beverly I. Jones
Last Residence:	34208 Bradenton, Manatee, Florida
BORN:	22 Apr 1938
Died:	25 Oct 2005
State (Year) SSN issued:	Indiana (1954-1955)

Name:	Beverly Ilene Alt [Beverly Ilene Mitchell] [Beverly McCullough] [Beverly Jones]
SSN:	309389103
Gender:	Female
Race:	White
Birth Date:	22 Apr 1938
Birth Place:	Elkhart Elkh, Indiana [Elkhart Elk, Indiana]
Death Date:	25 Oct 2005

Father:	Robert C Alt
Mother:	Frances V Payne
Type of Claim:	Original SSN.
Notes:	Nov 1954: Name listed as BEVERLY ILENE ALT; Jan 1957: Name listed as BEVERLY ILENE MITCHELL; Oct 1971: Name listed as BEVERLY MITCHELL MCCULLOUGH; Dec 1971: Name listed as BEVERLY ILE MCCULLOUGH; 07 Aug 1985: Name listed as BEVERLY ILENE JONES; 02 Nov 2005: Name listed as BEVERLY I JONES

“U.S. Social Security Death Index, 1935-2014.” Accessed April 18, 2017. Ancestry Library Edition.

“U.S. Social Security Applications and Claims Index, 1936-2007.” Accessed April 18, 2017. Ancestry Library Edition.



NEWSPAPERS: ANNOUNCEMENTS

- Longer newspaper articles, such as obituaries, were not common until the early 20th century.

—Harvey Croy and wife have a new boy born today. Dr. Baxter was in attendance.

Auburn Courier, November 4, 1897. Accessed April 18, 2017. Newspaper Archive.

Adam Zuber, a well known resident of Mishawaka, died Monday, aged 89.

Goshen Weekly News, June 8, 1895. Accessed April 6, 2016. Newspaper Archive.



NEWSPAPERS: VITAL RECORDS COLUMNS

BIRTHS

Mr. and Mrs. Arthur Eaton, 411 North First, girl, Nancy Ellen.

Mr. and Mrs. Jack Lee McLaren, Rose Poly barrack, route 5, girl, Julia Ann.

Mr. and Mrs. Norman L. French, 1318 North Twelfth, girl, Vickie Lee.

Mr. and Mrs. Alex Nasser, 622 Third avenue, girl, Rosemary.

Mr. and Mrs. William H. Booker, 1722 Hendricks, boy, Kenneth Richard.

Mr. and Mrs. Albert E. Davis Jr., 2500 North Sixth, boy, Albert Edward.

Mr. and Mrs. Denman McLellan Pigg, 2007 North Twenty-fourth, boy, Denman McLellan Jr.

DEATHS

Clyde W. Tipps, 45 years, 25½ South Fifth. Cardiac decompensation.

Heleln G. Adams, 63 years, 1017 North Sixth. Circulatory failure.

Rose Robertson, 76 years, 324 Kent avenue. Auto accident.

William Gray, 76 years, 631 Lafayette. Cerebral hemorrhage.

Edith Graves, 72 years, 638 Walnut. Carcinoma.

Nellie Smythe Hixon, 65 years, 100 South Seventeenth. Myocarditis.

Cora Anna Baughman, 77 years, 112½ South Fourth. Jaundice.

Harry C. Warren, 70 years, 12½ South Ninth. Edema.



NEWSPAPERS: OBITUARIES

Mrs. Caroline West Dies Of Pneumonia

Mrs. Caroline West, 84, widow of William West, died early Sunday afternoon at the residence of her niece, Mrs. A. H. Rasler, of Burrows.

A resident of Burrows, she recently moved from her home to live with her niece. Mrs. West was a member of the Burrows, Christian church. Her husband preceded her in death in 1933.

Survivors include several nieces and nephews.

Funeral services were held Tuesday afternoon at the Burrows Christian church. Rev. John Stover officiated. Burial was made at Keeps Creek.

Camden Record News, March 8, 1945. Accessed April 6, 2016. Newspaper Archive.

Mrs. Cora Pearl Laymon Died From Cerebral Hemorrhage During Night

Mrs. Cora Pearl Laymon, 45, wife of William E. Laymon, city fireman, 201 Cole street was found dead in bed Thursday morning at 5:30 o'clock. Death was attributed to a cerebral hemorrhage.

Wednesday evening Mrs. Laymon complained of feeling ill. A physician was summoned, but it was not then believed that her condition was serious. At 3 o'clock Thursday morning she again complained of feeling faint and ill. When members of the family next went to her room at about 8 o'clock it was found that she had already passed away.

Surviving are the husband, William; a son, Clarence, city; three daughters, Margaret Schawatch, Bernice Burkhardt, and Norman Laymon all of this city; two sisters, Mrs. Stella Burton, Chicago; Mrs. O. J. Harrison, city; a brother, Clifford Freeman, city; the mother, Mrs. Malissa Vernon, city; and a grandchild, Jimmie Burkhardt, city.

Funeral services will be conducted Monday afternoon at 2 o'clock at the Chase and Miller chapel. Rev. Hills Avery in charge. Interment will be made in Mt. Hope cemetery.

Logansport Pharos-Tribune, December 24, 1937. Accessed April 6, 2016. Newspaper Archive.

MARY BARRY.

The funeral of Mrs. Mary Barry, 715 W. 144th St., East Chicago, who died of a heart ailment Saturday night in St. Ann hospital, Chicago, will be held at 9:30 a. m. tomorrow in the Fife chapel, 706 W. Chicago Ave., and at 10 a. m. in St. Mary church with Msgr. Michael Shea officiating. Burial will follow in Calvary cemetery, Gary.

An active member of the church, Mrs. Barry lived in East Chicago for 45 years and was the widow of the late John P. Barry.

'Surviving are a niece, Mrs. James O'Brien in Chicago.

Hammond Times, May 5, 1952. Accessed April 6, 2016. Newspaper Archive.



NEWSPAPERS: NEWS ARTICLES



Tipton Daily Tribune, December 20, 1928. Accessed April 19, 2017. Newspaper Archive.

MOST BRUTAL MURDER IN HISTORY OF COUNTY

Lude Bement and Turner Willis Knocked in the Head Monday While
They Were Sawing a Tree Down on Bement Farm North-
east of Town—Sledge Hammer Used—No Clue
to Murderer—Blood Hound on Scene
—Grand Jury Tuesday.

Winslow Dispatch, February 17, 1922. Accessed April 6, 2016. Newspaper Archive.



RELIGIOUS RECORDS

WEST GROVE MONTHLY MEETING WAYNE COUNTY, INDIANA BIRTH AND DEATH RECORD

ALBERTSON

Jesse	b 3-23-1788, s Josiah & Sarah
	d 12- 3-1879
Ann	b 1-13-1792, dt John & Alice Bailey
	d 11-28-1876
Ch: Sarah	b 6-14-1811 d 11-17-1882
Bailey	b 3-20-1813 d 9- 1-1839
Naryann	b 8- 1-1815 d 11-22-1891
Elwood	b 12- 9-1817 d 11-30-1885
William	b 7-10-1822
Elwood	b 12- 9-1817, s Jesse & Anna
Mary	b 4- 7-1821, dt Daniel & Margaret
Ch: Oliver	b 11- 1-1847
Hannah J	b 2-18-1856
Albert	b 11-21-1858
Bailey	b 12-30-1859

Martha J d 1888 ae 32y

*Dorrell, Ruth and Thomas D. Hamm, eds.
Abstracts of the Records of the Society of
Friends in Indiana, Vol. 2. Indianapolis:
Indiana Historical Society, 1996.*



FUNERAL HOME RECORDS

POCKET MEMO BOOK for Funeral Directors

Date Dec. 1, 1930 No. 38
 Funeral of Margaret May Brisco
 Address 563 2nd Phone _____
 Place of Death Ind.
 Single, Married, Widow, Widower married
 Date of Birth Aug. 27, 1871
 Age 59 Years 3 Months 4 Days
 Birthplace Ill.
 Color White Occupation Homemaker
 How long in State _____ in City _____
 Last place of residence _____
 Father's Name Will Daniels
 Birthplace Ky.
 Mother's Maiden Name Mary C. Daniel
 Birthplace Ky.
 Physician C. M. Conrad
 Address Anderson Phone _____
 Cause of Death Tuberculosis of lungs
 Cemetery Maplewood Permit No. _____
 Date Dec. 4, 1930 Time 2 P.M.
 Grave No. _____ Row No. _____ Sec. _____ Range _____
 Rev. Dr. _____
 Address _____ Phone _____
 Time of Service 2 P.M. Place Ind.
 Time leaving for Cemetery _____
 Funeral Authorized by Robert Brisco
 Relation Husband
 Address Anderson Phone _____

POCKET MEMO BOOK for Funeral Directors

Date Nov. 6, 1931 No. 90
 Funeral of Jack Lawton
 Address County Farm Phone _____
 Place of Death County Farm
 Single, Married, Widow, Widower Widowed
 Date of Birth April 26, 1835
 Age 96 Years 6 Months 11 Days
 Birthplace Tenn.
 Color White Occupation None
 How long in State _____ in City _____
 Last place of residence _____
 Father's Name Unknown
 Birthplace "
 Mother's Maiden Name "
 Birthplace "
 Physician C. A. Walton
 Address Anderson Phone _____
 Cause of Death Myocardial Infarction
 Cemetery Hunterville Ind. Permit No. _____
 Date Nov. 8, 1931 Time 2 P.M.
 Grave No. _____ Row No. _____ Sec. _____ Range _____
 Rev. Dr. _____
 Address _____ Phone _____
 Time of Service 2 P.M. Place Office
 Time leaving for Cemetery _____
 Funeral Authorized by Indians Anderson
 Relation Daughter
 Address Indianapolis Phone _____

Zook, Haroldyne Schultz, comp. Berryman
Funeral Home Record. Anderson:
Berryman Funeral Home, 1985.

CEMETERY RECORDS

- Using cemetery information
 - Original records—kept by the cemetery, if still extant
 - Indexes—often in genealogy collections or online
 - Index to original records or index made by survey
 - Grave markers



CEMETERY RECORDS

*Daughters of the American Revolution,
Benjamin Dubois Chapter.
Cemeteries in Union County, Indiana.
Liberty, IN: 1934.*

SALEM CEMETERY Cont'd.

EGAN, Michael J. 1854--1909 Clara Macy Egan 1862--1926

EGAN, Bernard Son of M. J. and C. M. Egan. 1897--1899

ELLIS, David Died 10 m. 21 1864 Age 32 years, 7 mo. 18 d.

FRY, Elsie Blanch Daughter of S. T. and Alice A. Fry. Died May 2, 1877. Age 4 yrs. 3 mo. 10 days.


GARDNER, Eunice Wife of Isaac. Daughter of Paul and Bethiah Macy. November 30, 1762--August 13, 1840

GARDNER, Elizabeth. July 23, 1800--October 11, 1833. Wife of Aaron. Daughter of Eliab Gardner and Sarah Stanton

GARDNER, Irena M. December 10, 1822--January 27, 1845. Daughter of Aaron and Elizabeth Gardner.

GARDNER, Isaac December 24, 1760--December 2, 1843. Was son of Stephen, Solomon, Richard, Richard.

CEMETERY RECORDS



MEMORIALSCEMETERIESFAMOUSCONTRIBUTE







Photo added by Cathy Griggs


Mike Nisbet

BIRTH1876
DEATH1939 (aged 62–63)
BURIALBruceville Cemetery
Bruceville, Knox County, Indiana, USA
MEMORIAL ID92725514 · [View Source](#)

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MEMORIALPHOTOS1FLOWERS0

 Add Photos

 Request Photo


Family Members

Spouse



Mary Nisbet
1890–1954

Children



Vernon Moore Nisbet*
1924–1931

*Calculated Relationship

*“Mike Nisbet Grave Marker.”
Accessed June 5, 2018. Find a Grave.*

Life Information

Grave information for Michael Nisbet, located in the Bruceville Cemetery, Washington Indiana. This headstone image, GPS location and personal data were contributed and verified by volunteers to provide you with the most valuable cemetery and genealogy data in the world.



Name	Michael Nisbet
Birth Date	15 Nov 1877
Marriage Date	11 Jan 1910
Death Date	1 Feb 1939
Cemetery Name	Bruceville Cemetery
Show More	

*“Mike Nisbet Grave Marker.”
Accessed May 5, 2017. Billion Graves.*



CEMETERY RECORDS

- Two graves, side-by-side:
- One says: "Daughter of E. A. and G. B. Vaughan, Died March 21, 1868"
- The other says: "Elizabeth Ann Wife of G. B. Vaughan... Died March 23, 1868"
- Conclusion?



*"Elizabeth Ann Vaughan Grave Marker."
Accessed April 6, 2016. Find a Grave.*



CEMETERY RECORDS

- “In Memory of David, Son of John & Ann Ewbank who came to his death by the falling of a tree, November 20, 1822, Aged 23 years”



*“David Ewbank Grave Marker.”
Accessed April 6, 2016. Find a Grave.*



CEMETERY RECORDS

- Some tombstones list only a date of death and the age of the decedent
- If the full age (years, months, days) is given, a tombstone birth calculator may be useful

Enter the person's date of death and age at death:

	Day DD	Month	Year YYYY
DEATH DATE:	<input type="text" value="18"/>	<input type="text" value="January"/>	<input type="text" value="1893"/>
Do not leave any blank spaces Use a zero instead of a space			
	Days	Months	Years
AGE AT DEATH:	<input type="text" value="5"/>	<input type="text" value="8"/>	<input type="text" value="72"/>
Do not leave any blank spaces Use a zero instead of a space			
<hr/>			
BIRTH DATE:	<input type="text" value="13"/>	<input type="text" value="May"/>	<input type="text" value="1820"/>
Click to calculate birth date:	<input type="button" value="Compute"/>	<input type="button" value="Clear"/>	

*Ancestor Search Birthday Calculator.
Accessed May 5, 2017. Ancestor Search.*



HISTORY BOOKS

- I. Ann Ewbank was born December 11, 1818; m. March 22, 1836 to Edward Ewbank, and died —, 1893, at Port William, Ohio. Ohio.
 - A. Dr. George Thomas, b. May 5, 1840; m. Oct. 10, 1860 to Cornelia Eliza Flood; d. Aug. 15, 1912; Port William, O.
 - 1. Mary, b. Jan. 15, 1862; d. Aug. 16, 1871.
 - 2. Morton, b. July 18, 1863; m. Dec. 6, 1884 to Ida Mathew; d. Aug. 5, 1943; Port William, Ohio.
 - a. Abbie Belle, b. Jan. 12, 1886; m. June 26, 1907 to Emmett K. Ewbank; d. Sept. 11, 1941; Port William, Ohio.
 - b. Matthew, b. Feb. 28, 1888; m. Aug. 22, 1908 to Lola Clevenger; New Carlisle, Ohio.
 - c. Nellie, b. Dec. 1, 1889; m. Dec. 9, 1908 to Samuel W. Brown; Clarksville, Ohio.
 - 7a. Benjamin Morton, b. July 9, 1909; m. Nov., 1936 to Bertha Ponting; Pomona, California.
 - 8a. Leo Ralph, b. Jan. 17, 1938.
 - 8b. Thomas James, b. eb. 19, 1939.
 - 8c. Judith Ann, b. July 17, 1944.

Ewbank, Richard L. and Louis B. Ewbank. John and Ann Ewbank Family. Indianapolis: Self-published, 1947.

BENJAMIN W. STEEN was born in South Carolina January 4, 1834, son of John C. and Phoebe (Gregory) Steen, and of German-Irish descent. The parents were born in South Carolina in 1805 and 1806, respectively. The father died in 1878, and the mother in 1850. The family came to Daviess County in 1837, and located in Harrison Township, where the parents died. Subject attended the subscription schools, and aided his father on the farm until twenty-one years of age, when he began for himself. He located on his present farm in 1855, and now owns 160 acres of well-improved land. He was married in 1855 to Martha R. Colbert, born January 18, 1834, in Harrison Township, daughter of Tolliver and Sarah Colbert. Mr. and Mrs. Steen have two children: Oliver B., born in 1857, and Luella, born in 1872. Oliver has been twice married; both wives are deceased.

History of Knox and Daviess County, Indiana. Chicago: Goodspeed, 1886.



FAMILY RECORDS

Condict Family Bible Records. Indianapolis: Genealogy Division, Indiana State Library. Digitized 2015.



CONTACT US

- Hours:
 - Monday-Wednesday, Friday:
8 am to 4:30 pm
 - Thursday:
8 am to 7 pm
 - Saturday:
Second Saturday each month, plus
select extra Saturdays
10 am to 4 pm
 - Closed Sundays and state holidays
- Location and Contact Info:
 - Indiana State Library
Genealogy Division
315 West Ohio Street
Indianapolis, IN 46202
 - (317) 232-3689
 - Ask a question online:
www.in.gov/library/ask.htm
 - Indiana State Library website:
www.in.gov/library
 - Genealogy Division webpage:
www.in.gov/library/genealogy

