Death Record for Arnold Gibson Son of Clark Gibson and Maryetta Olds

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ODICIAL ACTION	E OF DEATH VERMONT Special Information for Hospitals, Institutions, Transients, or Non-Residents. Former, or Usual Residence. How long at place of death. If in Hospital or Institution give its name.
PERSONAL AND STATISTICAL PARTICULARS	MEDICAL CERTIFICATE OF DEATH
Single, Married, Widowed or Divorced Date of birth Month Day 7 Year, 1859 Age 6 years mos. 27 days Occupation (If none so state) Birthplace (State or Country) Name of husband or wife, if married Hotta, Jouldan Name of Father (State or Country) Maiden name of Mother Married Walls Birthplace of Mother (State or Country) Maiden name of Mother Married Hotta Birthplace of Mother (State or Country) The above stated personal particulars are true to the best of my knowledge and belief. Informant Married Hotta Address Place of burial. Address Married 19.25 Undertaker. Date of burial. Address Married 19.25 Undertaker. To be filled by person issuing burial permit.	Date of death Month March Day / Year 192.8 I hereby certify that I attended the deceased from The March Control of the date stated above at
[See instructions on back]	Gerrie M. Putnam, Town blirk

Death Record for Arnold Gibson Son of Clark Gibson and Maryetta Olds

3 CERTIFICATE OF DEATH STATE OF VERMONT Place of Death: County Washington City (or) Town Worcester Ward Street and No. Full Name Arnold R. Gibson Special Information for Hospitals, Institutions, Transients, or Non-Residents. Former, or Usual Residence How long at place of death If in Hospital or Institution give its name PERSOMAL AND STATISTICAL PARTICULARS Sex Male Color or race White Single, Married, Widowed or Divorced Married Date of birth Month Aug. Year 1859 Day 17 68 years Age 6 mos. 27 days Occupation (If none so state) Farmer Birthplace (State or Country) Island Pond, Vt. Name of husband or wife, if married Hattie Fadden Clark Gibson Name of Father Birthplace of Father (State or Country) Canada Maryetta Olds Maiden name of Mother Birthplace of Mother (State or Country) Canada. The above stated personal particulars are true to the best of my Mrs. Arnold R. Gibson Informant knowledge and belief. Address Worcester, Vt. Place of burial Worcester, Vermont. Date of burial March 16, 1928. Undertaker Barber & Lavier Address Montpelier, Vt. To be filled by person issuing burial permit MEDICAL CERTIFICATE OF DEATH Year 1928 Date of death Month March Day 14 I hereby certify that I attended the deceased from.....to..... no medical attendance that I last saw h.... alive on192..... and that death occurred on the date stated above at..... To the best of my knowledge and belief the cause of death was as follows: CAUSE OF DEATH (See instructions on back) Chief **Unknown Natural Causes** Contributing Sudden death. Circumstances reported to States Attorney, who authorized certificate without autopsy. Duration Where contracted Signed Clarence H Burr M.D. Date March. 14 Address Montpelier Filed March 15, 1928 [See Instructions on back] [signed] Jessie M. Putnam, Town Clerk