

Gladys Robertson

Occupant Name: Gladys Robertson

Location: Section 4, Lot 30

Date of Birth: 5/7/1892

Date of Death: 6/6/1973

Date of Burial: 1973

Veteran: No

Lot Owner: Charles Robertson

Multiple Occupants: No

Comment:



Gladys Rash Dies Today

Mrs. Gladys G. Rash, 81, 402 E. Park Avenue, died this morning at Colonial Crest Nursing Home.

She had been a resident of Hancock County since 1942.

The daughter of Stuart and Estelle (Lyons) Crewson, she was the widow of Sterling Rash, who died in 1957.

She was a member of the Greenfield Presbyterian Church

and is survived by two daughters, Mrs. Mildred Gardner, Texas and Mrs. Janet Newhouse, Indianapolis; three granddaughters, Pamela Gardner, Cynthia Newhouse and JoAnn Rogers and a sister, Mrs. Earnest Leedy, Oklahoma.

Services will be held Friday at 10 a.m. at Pasco's Memorial Mortuary, with burial at Fairview Cemetery, Brownstown at 1:30 p.m. Friday.

Friends may call after Thursday noon at the funeral home.

73-021835

INDIANA STATE BOARD OF HEALTH
MEDICAL CERTIFICATE OF DEATH

Local No. 438 State No. _____

PERMANENT INSTRUCTIONS	DECEASED-NAME <u>GLADYS</u>	FIRST <u>G.</u>	MIDDLE <u>RASH</u>	LAST <u>G.</u>	SEX <u>F</u>	DATE OF BIRTH (MONTH, DAY, YEAR) <u>5 7 1892</u>
	RACE <u>W</u>	AGE (YEARS, MONTHS, DAYS) <u>81</u>	UNDER 1 YEAR MONTHS <u>5</u>	UNDER 1 DAY HOURS <u>7</u>	DATE OF DEATH (MONTH, DAY, YEAR) <u>6 6 1973</u>	COUNTY OF DEATH <u>Greene</u>
	CITY, TOWNSHIP OR LOCALITY OF DEATH <u>Greenfield</u>	INSIDE CITY LIMITS (SPECIFY CITY OR TOWNSHIP) <u>Greenfield</u>	HOSPITAL OR OTHER INSTITUTION (NAME IF NOT LISTED, GIVE STREET AND NUMBER) <u>Colonial Crest</u>			
DECEASED	73. MARITAL STATUS (M, S, W, D, S, A, T) <u>W</u>	74. CITIZENSHIP (C, N, A, T) <u>USA</u>	75. MARRIED (C) NEVER MARRIED (N) <u>C</u>	SURVIVING SPOUSE (IF WIFE, GIVE MARRIED NAME) <u>None</u>		
LEGAL RESIDENCE WHERE DECEASED LIVED AT DEATH	76. NAME <u>Greenfield</u>	77. COUNTY <u>Greene</u>	78. SOCIAL SECURITY NUMBER <u>39-1234</u>	79. DEATH OCCURRENCE (1. DURING HOME VISIT, 2. WHILE ON TRIP, 3. WHILE IN INSTITUTION, 4. WHILE AT WORK, 5. WHILE AT SCHOOL, 6. WHILE AT RECREATION) <u>1</u>	80. KIND OF BUSINESS OR OCCUPATION <u>None</u>	81. IS RESIDENCE ON A FARM? <u>No</u>
STREET AND NUMBER	82. STREET AND NUMBER <u>402 E. Park Ave.</u>	83. CITY, TOWNSHIP OR LOCALITY <u>Greenfield</u>	84. COUNTY <u>Greene</u>	85. STATE (SPECIFY ZIP CODE) <u>IN 46140</u>	86. MARITAL STATUS (M, S, W, D, S, A, T) <u>W</u>	87. CITY OF DEATH (STATE, ZIP) <u>Greenfield, IN 46140</u>
PARENTS	88. FATHER'S NAME <u>Stuart Crewson</u>	89. MOTHER'S NAME <u>Estelle Lyons</u>	90. FATHER'S BIRTH NAME <u>Crewson</u>	91. MOTHER'S BIRTH NAME <u>Lyons</u>	92. CITY OF DEATH (STATE, ZIP) <u>Greenfield, IN 46140</u>	93. CITY OF BIRTH (STATE, ZIP) <u>Greenfield, IN 46140</u>
PART I. DEATH WAS CAUSED BY						
IMMEDIATE CAUSE <u>Acute Coronary Failure</u>						
CONDITIONS IF ANY, WHICH WERE HELD TO BE IMMEDIATE CAUSE (A), LISTED IN ORDER OF DECREASING IMPORTANCE <u>Angina pectoris with infarction</u>						
PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE <u>None</u>						
DATE & TIME OF DEATH (MONTH, DAY, YEAR, HOUR, MIN) <u>6 6 1973 8:30</u>						
SIGNATURE OF PHYSICIAN <u>Walter P. Benson MD</u>						
SIGNATURE OF DEATH REGISTRAR <u>Walter P. Benson</u>						
COUNTY CLERK <u>Walter P. Benson</u>						
DISPOSITION <u>PASCO MEMORIAL MORTUARY INC 312 E. Main Greenfield Ind.</u>						