

LOCAL FILE NUMBER

CERTIFICATE OF DEATH
Michigan Department of Public Health

DEC 16 1975 137597
STATE FILE NUMBER

DECEASED—NAME FIRST MIDDLE LAST Polano L. Armstrong		SEX Male	DATE OF DEATH (MONTH, DAY, YEAR) November 2, 1975
RACE WHITE, NEGRO, AMERICAN INDIAN, ETC. (SPECIFY) White	AGE—LAST BIRTHDAY (YEARS) 50 77	UNDER 1 YEAR MOS. DAYS 5b	UNDER 1 DAY HOURS MIN. 5c
CITY, VILLAGE, OR TOWNSHIP OF DEATH Pontiac		DATE OF BIRTH (MONTH, DAY, YEAR) June 4, 1908	COUNTY OF DEATH Oakland
STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY) Michigan	CITIZEN OF WHAT COUNTRY U.S.A.	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) Married	SURVIVING SPOUSE (IF WIFE, GIVE MAIDEN NAME) Lena L. Hakeman
SOCIAL SECURITY NUMBER 363-36-0900-A	USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED) Millwork	KIND OF BUSINESS OR INDUSTRY Armstrong Millworks	
RESIDENCE—STATE Michigan	COUNTY Oakland	CITY, VILLAGE OR TOWNSHIP Highland	STREET AND NUMBER 2924 W. Highland Rd.
FATHER—NAME FIRST MIDDLE LAST Clarence T. Armstrong		MOTHER—MAIDEN NAME FIRST MIDDLE LAST Margaret Davison	
INFORMANT—NAME Mrs. Lena Armstrong		MAILING ADDRESS 2924 W. Highland Rd., Highland, Michigan 48038	
PART I. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c))			APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
IMMEDIATE CAUSE (a) Acute Myocardial infarction DUE TO, OR AS A CONSEQUENCE OF:			
CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (a), STATING THE UNDERLYING CAUSE LAST (b) (c)			
PART II. OTHER SIGNIFICANT CONDITIONS, CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a)			IF YES WERE FINDINGS CONSIDERED IN DETERMINING CAUSE OF DEATH
Thrombocytopenia			19b. Yes
ACCIDENT, SUICIDE, HOMICIDE, (SPECIFY)	DATE OF INJURY (MONTH, DAY, YEAR)	HOUR	HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 18)
INJURY AT WORK (SPECIFY YES OR NO)	PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY)	LOCATION	(STREET OR R.F.D. NO., CITY OR TOWN, STATE)
CERTIFICATION—PHYSICIAN: I ATTENDED THE DECEASED FROM	MONTH DAY YEAR 9 29 69 TO 9 23 75	AND LAST SAW HIM/HER ALIVE ON MONTH DAY YEAR 9 23 75	I DID/DID NOT VIEW THE BODY AFTER DEATH. 21b.
CERTIFICATION—MEDICAL EXAMINER OR CORONER: ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR THE INVESTIGATION, IN MY OPINION, DEATH OCCURRED ON THE DATE AND DUE TO THE CAUSE(S) STATED.		HOUR OF DEATH M. 22b. 11	THE DECEDENT WAS PRONOUNCED DEAD MONTH DAY YEAR HOUR 2 75 4 A.M.
CERTIFIER—NAME (TYPE OR PRINT) N. Krieger, M.D.		SIGNATURE	DEGREE OR TITLE M.D.
MAILING ADDRESS—CERTIFIER 402 Union Street		CITY OR TOWN Milford	STATE Mich.
BURIAL, CREMATION, REMOVAL (SPECIFY) Burial	CEMETERY OR CREMATORY—NAME West Highland Cemetery	LOCATION	CITY, VILLAGE, TWP. OR COUNTY Highland, Michigan
DATE Nov. 5, 1975	FUNERAL HOME—NAME AND ADDRESS Richardson & Lynch, 404 C. Liberty, Milford, Mich. 48042	STATE ZIP 48042	
FUNERAL DIRECTOR—SIGNATURE G. H. ...	REGISTRAR—SIGNATURE Lynnda L. Crowell	DATE RECEIVED BY LOCAL REGISTRAR NOV 4 1975	

DEC 16 1975

PLACE AND DEATH OCCURRED IN INSTITUTION, GIVE RESIDENCE BEFORE ADMISSION.

PARENTS

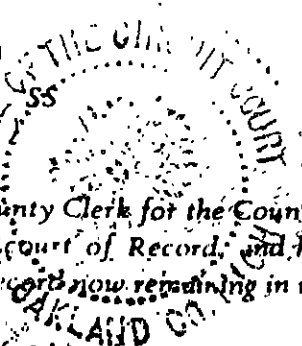
CAUSE

CERTIFIER

BURIAL

B-36
8-68
300M

STATE OF MICHIGAN)
COUNTY OF OAKLAND)

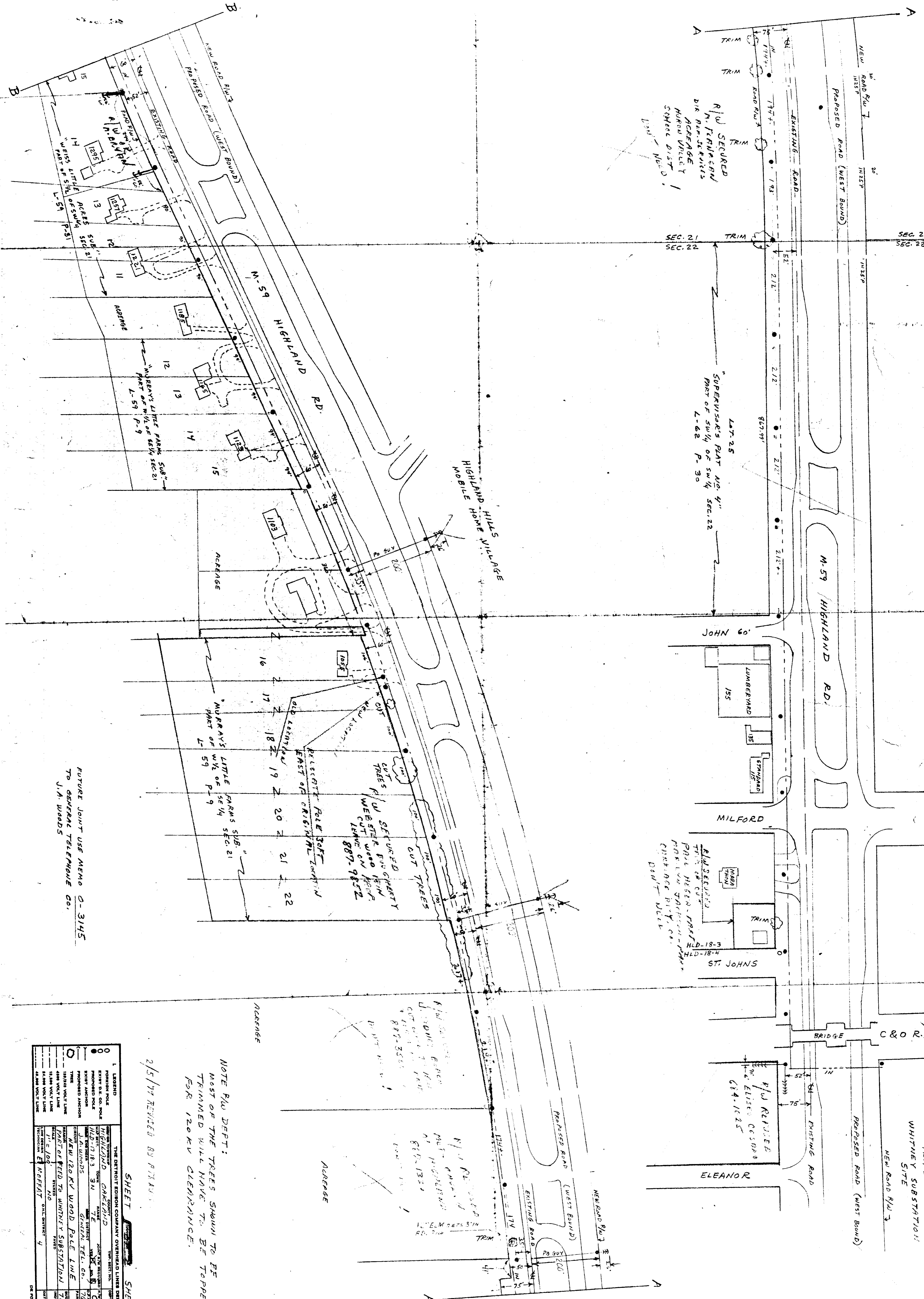


I, Lynn D. Allen, County Clerk for the County of Oakland, Clerk of the Circuit Court thereof, the same being Court of Record, and having a Seal, do hereby certify that the foregoing is a copy of the record now remaining in my office.

In testimony whereof, I have hereunto set my hand and affixed the Seal of said Court this 7th day of February, 19 80

LYNDA L. CROWELL, Clerk - Register of Deeds.
BY Lynnda L. Crowell
Deputy Clerk

RECORDED FROM OF WAY NO. 33276



FUTURE JOINT USE MEMO O-3145
TO GENERAL TELEPHONE CO.
J.A. WOODS

NOTE P/W DEPT:
MOST OF THE TREES SHOWN TO BE
TRIMMED WILL HAVE TO BE TOPPED
FOR 120KV CLEARANCE.

2/5/77 REVISED BY PPK/AV

LEGEND	
○	PROPOSED POLE
●	EXISTING POLE
○	PROPOSED ANCHOR
●	EXISTING ANCHOR
—	120KV VOLT LINE
—	48KV VOLT LINE
—	15KV VOLT LINE
—	4100 VOLT LINE

SHEET		SHEETS	
PROJECT NO.	11-5100	DATE	11-5-78
DESIGNER	J.A. WOODS	CHECKED	K.A.H.
DATE	11-5-78	SCALE	AS SHOWN

DETROIT EDISON CO.
PROPERTY
WHITNEY SUBSTATION
SITE