



COMMONWEALTH OF MASSACHUSETTS
CITY OF PITTSFIELD
OFFICE OF THE CITY CLERK

March 7, 2011

I, Linda M. Tyer, hereby certify that I have examined the Records of Death in said city and find recorded therein the death of **MARY SHERIDAN**

The record is in the following words and figures, recorded as Record No. 77, in Book 11, Page 108, to wit:

Date of Death: **FEBRUARY 3, 1920**

Name and Surname of Deceased: **MARY SHERIDAN**

Name and Surname of Spouse: **JAMES SHERIDAN**

Sex: **F** Color: **W** Condition: **W**

Age **87** Years, --- Months, --- Days

Disease or Cause of Death: **CHRONIC BRONCHITIS**

Residence: **41 MAPLEWOOD AVENUE, PITTSFIELD, MASSACHUSETTS**

Place of Death: **41 MAPLEWOOD AVENUE, PITTSFIELD, MASSACHUSETTS**

Place of Burial: **ST. JOSEPH'S CEMETERY, PITTSFIELD, MASSACHUSETTS**

Occupation: **---**

Veteran: **---**

Birthplace: **MOLONE, NEW YORK**

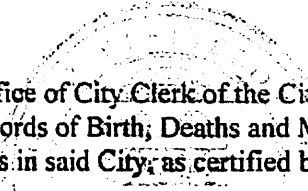
Name and Birthplace of Father: **NEIL McCAFFREY: IRELAND**

Maiden Name and Birthplace of Mother: **NANCY CARROLL: IRELAND**

Date of Record: **FEBRUARY 9, 1920**

I, Linda M. Tyer, depose and say that I hold the office of City Clerk of the City of Pittsfield, in the County of Berkshire and Commonwealth of Massachusetts, that the records of Birth, Deaths and Marriages in said City are in my custody, and that the above is a true extract from the records in said City, as certified by me.

WITNESS my hand and the seal of the City of Pittsfield on the day and year first written above.


Linda M. Tyer
City Clerk