GERMAN UNION CEMETERY THREE-GENERATION GENEALOGY

Created By: Ronald R. Prinzing

UPDATED: August 8, 2015

Surname: JONES
Given Name: MYRILE
Middle Name If April IREN

Middle Name If Any: IRENE

Gender: FEMALE

Date of Birth: JANUARY 21, 1919
Place of Birth: MINNESOTA
Date of Death: JANUARY 27, 1919

Place of Death: ERIN TOWNSHIP - RICE COUNTY - MINNESOTA

Place of Burial: GERMAN UNION CEMETERY - FOREST TOWNSHIP - RICE COUNTY -

MINNESOTA Interred: JANUARY 28, 1919 Plot Number: UNKNOWN

Father: JOSEPH CALHOUN JONES Date of Birth: NOVEMBER 25, 1881

Place of Birth: IOWA

Date of Death: JULY 10, 1918

Place of Death: ERIN TOWNSHIP - RICE COUNTY - MINNESOTA

Place of Burial: GERMAN UNION CEMETERY – FOREST TOWNSHIP – RICE COUNTY –

MINNESOTA Interred: JULY 12, 1918 Plot Number: UNKNOWN

Mother: LILLIAN MARKHAM Married Name: JONES, JOSEPH CALHOUN

Birth Date:

Place of Birth: IOWA

Date of Death: Place of Death: Place of Burial:

Marital Status: NEVER MARRIED

Children: NONE

NOTE: The Permit for Burial or Removal shows the place of burial to be UNION CEMETERY. The correct place of burial is the GERMAN UNION CEMETERY – FOREST TOWNSHIP – RICE COUNTY – MINNESOTA. ALSO NOTE Joseph Calhoon Jones and his daughter Myrile Irene Johnes are known to be buried in the German Union Cemetery. Their exact location, however, is not known. Two reliable sources put the locations as either the upper East corner or the upper West corner of the cemetery. Being that, in those days, the cemetery plot dimensions were of six feet wide by 12 feet long and todays current dimensions are of three feet wide by 12 feet long it is deemed necessary that any digging in or near plot numbers 1i, 1j, 1k, 1l in Section Number 1-A or plot numbers 8a, 8b, 8c, 8d in Section Number 3-A be done with EXTREEM caution. Source: Grace Elizabeth (Ludwig) Day and Roland Charles Prinzing, both deceased.

JONES, MYRILE IRENE

GERMAN UNION CEMETERY THREE-GENERATION GENEALOGY

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Oity of (No. 2		ownship of Exist CERTIFICATE OF DEATH		Registered No. [If death occurred in a Hospi or Institution, give its NAME stead of street and number. away from usual residence, g "Succial Information" below.]	
ity of (No.	4//		St.:	War	
mus war Marile Come &	trata				
FULL NAME Hypris Tune for					
PERSONAL AND STATISTICAL PARTICULARS	MEDICAL CERTIFICATE OF DEATH (Month) (Day) (Year)				
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AGE /		19, to		19	
Years, Months, Days	that I last sa	w halive on		, 19	
SINGLE, MARRIED, WIDOWED, OR DIVORCED		h occurred, on the date s		М.	
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NUMBER OF CHILDREN H married, age at (first) marriageyears	I have the	aa xa naa a.	to moth	us de	
(State or country)	murai	an dieuri	1-2 and	was	
NAME OF FATHER	Contributory	dead so h	(DURATION)	was	
BIRTHPLACE OF FATHER (State or country)	(Signed)	J. J. Tyska	dale	м.	
MAIDEN NAME OF MOTHER Washing	SPECIAL INFORM				
BIRTHPLACE OF MOTHER (State or country)	Former or usual residence Where was diseas	usual residence place of death ? Di Where was disease contracted,			
OCCUPATION	if not at place of d	eath 7		*******	
THE ABOVE STATED PERSONAL PARTICULARS ARE TRUE TO THE BEST OF	PLACE OF BURIAL	Comitery Louis	DATE OF BURIAL	8 19/	
(Informant) Liller Jones	UNDERTAKEN	- Walter -	The Difference of the Control of the		