

Name, *Albina Vachon Lapointe*  
 Place of Death, *Amherst*  
 No. *242* *Main* Street  
 Ward, *5* Village,  
 How long a resident, *18 years*  
 Previous residence, *Rockster N.H.*  
 If death occurred at an institution give name of same  
 How long an inmate,  
 Where from,  
 Date of Death: Year, *1928* Month, *8* Day, *1*  
 Age: Years, *40* Months, *2* Days, *7*  
 Place of Birth, *Rockster N.H.*  
 Date of Birth: Year, *1888* Month, *June* Day, *21*  
 Sex, *F* Color, *W* Married, Single, Widowed or Divorced, *Mar.*  
 Occupation, *Housewife*  
 Cause of Death, *Tuberculosis*  
 Duration, *1 year*  
 Contributing Cause,  
 Duration,  
 Name of Father, *Paul Vachon*  
 Maiden Name of Mother, *Rose Proussin*  
 Birthplace of Father, *Can*  
 Birthplace of Mother, *Can*  
 Occupation of Father, *Carpenter*  
 (Record continued over.)

Deceased was wife of *Alphonse Lapointe*  
 Widow of *David J. Lapointe*  
 Name of Physician (or other person) reporting said death, *D. L. Murray M.D.*  
 P. O. Address, *Berwick Me*  
 Place of Interment, *Rockster N.H.*  
 Date of Interment, *Aug 3-1928*  
 Name of Cemetery, *Holy Rosary*  
 Undertaker, *William Chabrette*  
 P. O. Address, *Amherst N.H.*

**The State of New Hampshire**

I hereby certify that the above death record is correct to the best of my knowledge and belief.

*Edward Smith*  
 Clerk of *Amherst N.H.*