

Christ Episcopal Church Cemetery Inventory

State and Water Streets, Dover DE 19903

Lot Number: 82 Space: J

Find A Grave # 11921818

Name: **Reed, Elias Sipple**

Birth date: July 9, 1832 Death date: December 12, 1913 Burial Date: December 15, 1913 Age: 81 b. Delaware

Spouse: Alphonse(a) Elizabeth Heverin Reed (1840-1919) m. November 29, 1859 in DE

Children: Priscilla Reed Twilley (1861-1916); Heverin Sipple Reed (1864-1929); Douglas Reed (1867-1940); John C. Reed (1869-1938);

Parents: Jehu John Reed (1805-1880) and Margaret T. Sipple Reed (1815-1843)

Siblings: Jehu M. Reed (1834-1908)

Residence: Philadelphia, PA

Cause of death/Burial/Obituary:

Service/occupation information: Lawyer

Officiate: Rev. Benjamin F. Thompson

Lot Owner: Heverin S. Reed, F – J

Marker shared with family

Inscription:

Elias Sipple Reed
 1832 - 1913
 John C. Reed
 1869 - 1938
 Priscilla R.
 Wife of J. K. Twilley
 1861 - 1916
 Heverin Sipple Reed
 1864 - 1929
 E.S.R.

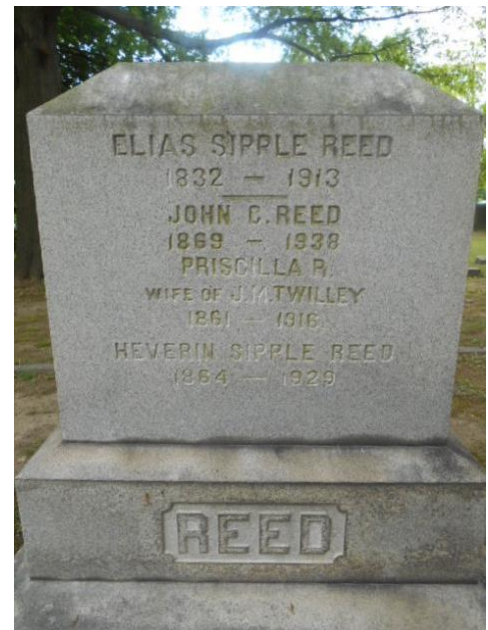
Footstone:

DIMENSIONS: H 60" x W 48" x D 26"

Footstone: H 9" x W 18" x D 10"

STYLE: Shared headstone + footstone

No repairs needed



Inventory date: March 26, 2020 Recorder: Ellen Richardson

Delaware College: attended and became a trustee. Retrieved from ancestry.com October 11, 2020

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Supremore Class.

Name	Residence	Room
DUFFIELD ASHMEAD,	Philadelphia, Pa.	No. 28
GEORGE M. BARNES,	Washington, D. C. Mr. Bunker's.	
GEORGE W. CARPENTER, JR.	Camden, N. J.	No. 34
WILLIAM S. HUNT,	West Chester, Pa.	No. 8
THEODORE C. HURD,	Framingham, Mass. Mr. Curtis'.	
THOMAS M. MILLER,	Newtown, Va.	No. 27
JAMES M. MORRISON,	Lancaster Co. Pa., Mr. Macklem's	
ISAAC M. ONIXS,	Harbitelle,	No. 20
CHARLES G. POLK,	Milford,	No. 11
ELIAS S. REED,	Frederica,	No. 11
JOHN FRAZER WOODS,	New Castle Co.	No. 25

Freshman Class.

*STEPHEN B. CACY,	Millington, Md.	No. 24
JOHN F. BAIRD,	York, Pa.	No. 24
THOMAS W. BERRY,	Washington, D. C.	No. 27
LAFAYETTE BUSHNELL,	Chilton, Mo.	No. 20
GEORGE W. CHAMBERLAIN,	Newark, Mrs. Chamberlain's.	
SAMUEL M. CLEVELAND,	Philadelphia, Pa.	do.
JAMES T. JOHNSON,	Newark, Mr. Johnson's.	
JAMES HOSSINGER,	New Castle Co. Mr. Hossinger's.	
ISAAC H. HOUSTON,	Milford,	No. 27
LONSVILLE TWEED,		No. 27

TRUSTEES.

COL. HENRY S. McCOMB,
PRESIDENT.

JOHN F. WILLIAMSON, Esq.,
VICE PRESIDENT.

GEORGE G. EVANS, Esq.,
SECRETARY AND TREASURER.

EX OFFICIO.

HIS EXCELLENCY, JAMES PONDER,
GOVERNOR OF DELAWARE.

HON. WILLIAM H. PURNELL,
PRESIDENT OF THE COLLEGE.

Trustees Representing the Original Board.

DR. LEWIS P. BUSH, S. M. CURTIS, Esq., GEORGE G. EVANS, Esq., HON. JOHN W. HOUSTON, COL. HENRY S. McCOMB, REV. JAMES McINTIRE, JOHN MILLER, Esq.	DAVID J. MURPHY, Esq., HON. GEO. B. RODNEY, ELIAS S. REED, Esq., GEORGE Z. TYBOUT, Esq., JOHN F. WILLIAMSON, Esq., RATIMELL WILSON, Esq., REV. GEO. F. WISWELL.
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Trustees on behalf of the State of Delaware.

New Castle County. DR. H. F. ASKEW, HON. BENJ. T. BIGGS, DR. ALLAN V. LESLEY, CHARLES B. LORE, Esq., JOHN A. REYNOLDS, Esq.,	Kent County. J. ALEX. FULTON, Esq., DANIEL C. GODWIN, Esq., JOHN H. MOORE, Esq., HON. GOVE SAULSBURY, JOHN B. PENNINGTON, Esq.
Sussex County. PETER F. CAUSEY, Esq., GARDNER H. WRIGHT, Esq., HON. JOHN HICKMAN,	DR. DAVID L. MUSTARD, EDWIN R. PAYNTER, Esq.

Death certificate

Form V. S. No. 5, -60M, 2-25-11.

CERTIFICATE OF DEATH.

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF HEALTH
BUREAU OF VITAL STATISTICS

1. PLACE OF DEATH.

County of _____ Registration District No. _____ File No. **126855**

Township of _____ or Borough of _____ or City of _____ Primary Registration District No. _____ Registered No. **28122**

2. FULL NAME **Elias S. Reed**

3. SEX **M**

4. COLOR OR RACE **W**

5. SINGLE, MARRIED, WIDOWED OR DIVORCED **M**

6. DATE OF BIRTH **7 9 1872**

7. AGE **41** yrs. **5** mos. **3** ds. If LESS than 1 day how many.....hrs. or.....min.?

8. OCCUPATION (a) Trade, profession, or particular kind of work **city attorney** (b) General nature of industry, business, or establishment in which employed (or employer)

9. BIRTHPLACE (State or Country) **Del**

10. NAME OF FATHER **Geo**

11. BIRTHPLACE OF FATHER (State or Country) **Del**

12. MAIDEN NAME OF MOTHER **Margaret Sipple**

13. BIRTHPLACE OF MOTHER (State or Country) **Del**

14. THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE. (Informant) **Geo Reed Esq** (Address) **866 N 23rd St**

15. Filed **12/13/13** 191... Local Registrar

16. DATE OF DEATH **12 12 1913**

17. I HEREBY CERTIFY, That I attended deceased from **3/12** 191... to **12/12** 191... that I last saw him alive on **9/20/13** and that death occurred on the date stated above, at _____ M. The CAUSE OF DEATH was as follows: **Haemia** Duration **120** mins. Contributors (Secondary) **Cholera Int. Septicemia**

Signed: **J. P. Rochester** M. D. (Address) **863 N 7th**

*State the DISEASE CAUSING DEATH, or in deaths from VIOLENT CAUSES, state (!) MEANS OF INJURY, and if whether ACCIDENTAL, SUICIDAL, OR HOMICIDAL.

18. LENGTH OF RESIDENCE (For Hospitals, Institutions, Transients or Recent Residents). At place of death.....yrs.....mos.....ds. In the _____ State.....yrs.....mos.....ds. Where was disease contracted, If not at place of death..... Formet or usual residence.....

19. PLACE OF BURIAL OR REMOVAL **Dover Del** DATE OF BURIAL **12/16/13**

20. UNDERTAKER **McKaulofm** ADDRESS **7th & Pleasant**