

DULUTH 04450.

4-1000-R.

# The United States of America,

To all to whom these presents shall come, Greeting:

WHEREAS, a Certificate of the Register of the Land Office at **DULUTH, MINNESOTA,**  
has been deposited in the General Land Office, whereby it appears that, pursuant to the Act of Congress of May 20, 1862,  
"To Secure Homesteads to Actual Settlers on the Public Domain," and the acts supplemental thereto, the claim of  
**OTTO WALTA**  
has been established and duly consummated, in conformity to law, for the **WEST HALF OF THE SOUTHWEST QUAR-**  
**TER OF SECTION TWENTY-TWO IN TOWNSHIP SIXTY NORTH OF RANGE SEVENTEEN WEST**  
**OF THE FOURTH PRINCIPAL MERIDIAN, MINNESOTA, CONTAINING EIGHTY ACRES,**

according to the Official Plat of the Survey of the said Land, returned to the GENERAL LAND OFFICE by the Surveyor-General:

NOW KNOW YE, That there is, therefore, granted by the UNITED STATES unto the said claimant the tract of Land above described;  
TO HAVE AND TO HOLD the said tract of Land, with the appurtenances thereof, unto the said claimant and to the heirs and assigns of  
the said claimant forever.

IN TESTIMONY WHEREOF, I,

**WILLIAM H. TAFT**

President of the United States of America, have caused these letters to be made  
Patent, and the seal of the General Land Office to be hereunto affixed.

GIVEN under my hand, at the City of Washington, the **TWENTIETH**

(SEAL)

day of **FEBRUARY** in the year of our Lord one thousand  
nine hundred and **ELEVEN** and of the Independence of the  
United States the one hundred and **THIRTY-FIFTH.**

By the President:

By

*Wm. H. Taft*  
*John B. Connell*  
Acting

Secretary,

Recorder of the General Land Office.

RECORD OF PATENTS: Patent Number **179120**

8-2116

1<sup>st</sup> Homestead Land Patent, above  
2<sup>nd</sup> Homestead Land Patent, below

Duluth 09245

4-1000-R.

## The United States of America,

To all to whom these presents shall come, Greeting:

WHEREAS, a Certificate of the Register of the Land Office at **Duluth, Minnesota,**  
has been deposited in the General Land Office, whereby it appears that, pursuant to the Act of Congress of May 20, 1862,  
"To Secure Homesteads to Actual Settlers on the Public Domain," and the acts supplemental thereto, the claim of  
**Otto Walta**  
has been established and duly consummated, in conformity to law, for the **northeast quarter of the northwest**  
**quarter of Section eight in Township sixty north of Range seventeen west of**  
**the Fourth Principal Meridian, Minnesota, containing forty acres,**

according to the Official Plat of the Survey of the said Land, returned to the GENERAL LAND OFFICE by the Surveyor-General:

NOW KNOW YE, That there is, therefore, granted by the UNITED STATES unto the said claimant the tract of Land above described;  
TO HAVE AND TO HOLD the said tract of Land, with the appurtenances thereof, unto the said claimant and to the heirs and assigns of  
the said claimant forever.

IN TESTIMONY WHEREOF, I, **Woodrow Wilson**

President of the United States of America, have caused these letters to be made

Patent, and the seal of the General Land Office to be hereunto affixed.

GIVEN under my hand, at the City of Washington, the **ELEVENTH**

(SEAL)

day of **AUGUST** In the year of our Lord one thousand

nine hundred and **SEVENTEEN** and of the Independence of the

United States the one hundred and **FORTY-SECOND,**

By the President: *Woodrow Wilson*  
By *M. A. Le Roy* Secretary,  
*L. B. Samart*,  
Recorder of the General Land Office.

RECORD OF PATENTS: Patent Number **596645**

0-3110

# PETITIONERS.

| NAMES   | RESIDENCE |    | NAMES             | RESIDENCE |    |
|---|-----------|----|-------------------|-----------|----|
|   | Twp.      | R. |                   | Twp.      | R. |
| Jacob Mäta  | 60        | 17 | Jacob E. Nala     | 60        | 17 |
| Elias Saaristo                                      | 60        | 17 | John Hurju        | 60        | 17 |
| Henry Jacobson                                      | 60        | 17 | John Luoma        | 60        | 17 |
| Steffan Ilkka                                       | 60        | 17 | W. A. Smith       | 60        | 17 |
| Ersk Kargala  | 60        | 17 | Jeston Kallio     | 60        | 17 |
| Matt Jacobson                                       | 60        | 17 | Thomas Saittonen  | 60        | 17 |
| John Kargala  | 60        | 17 | Senni Pongruist   | 60        | 17 |
| Karl Walden   | 60        | 17 | Umas Janninen     | 60        | 17 |
| Leander Wallin                                      | 60        | 17 | Otto Walla        | 60        | 17 |
| Henry Mattson                                       | 60        | 17 | Matt Kukka        | 60        | 17 |
| Ersk Mattson  | 60        | 17 | Matti Mäta        | 60        | 17 |
| Moore Wallin  | 60        | 17 | Carl Korpki       | 60        | 17 |
| Daniel Gyllha                                       | 60        | 17 | Jalmi Karki       | 60        | 17 |
| Galmar & Lena                                       | 60        | 17 | Prusi             | 60        | 17 |
| State of Minnesota, }<br>COUNTY OF ST. LOUIS. } ss. |           |    | Hiski J. Abelson. | 60        | 17 |

On the 12 day of July, 1916, before me, a Notary Public within and for said county, personally appeared each of the foregoing Petitioners, and each Petitioner acknowledged that he executed said petition as his own free act and deed, and each of said Petitioners at the same time being first duly sworn, did say that he is a citizen of the United States and has been for more than three months last past; that he is a resident of the State of Minnesota and has been for more than six months last past, and a resident in the territory described in the Petition hereto attached for more than thirty days last past, and that he is now a legal voter of said territory and that he is a male freeholder of said territory.

Evelina Sarkela  
Notary Public, St. Louis County, Minn.

My Commission Expires: Dec 1 1916

Petition to organize Sandy Township signed by Otto

Section of Vital Statistics  
**CERTIFICATE OF DEATH**

|  |                               |  |  |
|--|-------------------------------|--|--|
| 1. PLACE OF DEATH: STATE OF MINNESOTA<br>a. COUNTY <b>Carlton</b>  |                               | 2. USUAL RESIDENCE (Where deceased lived - If institution - residence before admission)<br>a. STATE <b>Minnesota</b><br>b. COUNTY <b>St. Louis</b> |  |
| b. VILLAGE <b>Moose Lake</b>   |                               | c. VILLAGE <b>Florenton</b>  |  |
| c. LENGTH OF STAY in 1 b. <b>16yr11mo13da</b>  |                               | d. STREET ADDRESS <b>Florenton, Minnesota</b>  |  |
| d. NAME OF (If not in hospital or institution, give street address)<br>HOSPITAL OR INSTITUTION <b>Moose Lake State Hospital</b>  |                               | e. IS RESIDENCE INSIDE CORPORATE LIMITS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO                                       |  |
| e. IS PLACE OF DEATH INSIDE CORPORATE LIMITS?<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO   |                               | f. IS RESIDENCE ON A FARM?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO  |  |
| 3. NAME OF DECEASED (Type or Print) <b>OTTO WALTA</b>  |                               | 4. DATE OF DEATH<br>Month <b>November</b> Day <b>4</b> Year <b>1959</b>  |  |
| 5. SEX <b>Male</b>   | 6. COLOR OR RACE <b>White</b> | 7. MARRIED <input type="checkbox"/> NEVER MARRIED <input checked="" type="checkbox"/>  | 8. DATE OF BIRTH<br>Month <b>11</b> Day <b>17</b> Year <b>1875</b> |
| 9. AGE (In years last birthday) <b>84</b>  |                               | 10. AGE (In years last birthday) <b>84</b>   |  |
| 10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired)<br><b>Farmer</b>   |                               | 10b. KIND OF BUSINESS OR INDUSTRY  |  |
| 11. BIRTHPLACE (State or foreign country)<br><b>Finland</b>  |                               | 12. CITIZEN OF WHAT COUNTRY?<br><b>U.S.A.</b>  |  |
| 13a. FATHER'S NAME<br><b>John Walta</b>  |                               | 13b. MOTHER'S MAIDEN NAME<br><b>Marie Mary Sophia</b>  |  |
| 14. SPOUSE'S NAME  |                               | 15. WAS DECEASED EVER IN U.S. ARMED FORCES? (If yes, give war or dates of service)<br><b>No</b>  |  |
| 16. SOCIAL SECURITY NO   |                               | 17. INFORMANT'S OWN SIGNATURE<br><b>Moose Lake State Hospital Records</b>  |  |
| 18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c))<br>PART I. DEATH WAS CAUSED BY:<br>IMMEDIATE CAUSE (a) <b>Coronary Occlusion - sudden</b><br>Conditions, if any, which gave rise to above cause (b) <b>Arteriosclerotic Cardio-vascular Disease</b><br>DUE TO (c)<br>PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE IMMEDIATE CAUSE GIVEN IN PART I (a) |                               | 19. WAS AUTOPSY PERFORMED?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO  |  |
| 19a. DATE OF OPERATION   |                               | 19b. MAJOR FINDINGS OF OPERATION   |  |
| 20a. ACCIDENT, SUICIDE OR HOMICIDE (SPECIFY)   |                               | 20b. DESCRIBE HOW INJURY OCCURRED (Enter nature of injury in Part I or Part II of item 18)   |  |
| 20c. TIME OF INJURY<br>Hour <b>11</b> Min <b>45</b> AM   |                               | 20d. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)   |  |
| 20e. INJURY OCCURRED WHILE AT <input type="checkbox"/> HOME <input checked="" type="checkbox"/> WORK   |                               | 20f. CITY, VILLAGE OR TOWNSHIP <b>Carlton Co. Minn</b>   |  |
| 21. I certify I attended the deceased on <b>June 21, 1954</b> to <b>Nov. 4, 1959</b> and that I last saw the deceased alive on <b>Nov. 4, 1959</b> and that death occurred at <b>3:45 P.M.</b> on the date stated above and to the best of my knowledge from the causes stated   |                               | 22. SIGNATURE <b>Keith E. K...</b>   |  |
| 23. SIGNATURE <b>Keith E. K...</b>   |                               | 23b. ADDRESS <b>Moose Lake, Minnesota</b>  |  |
| 23c. DATE SIGNED <b>Nov. 4, 1959</b>   |                               | 23d. LOCATION (City, village or county) <b>Moose Lake, Minn</b>  |  |
| 24. BURIAL CREMATION <b>Burial</b>   |                               | 24b. DATE <b>11-6-59</b>   |  |
| 24c. NAME OF CEMETERY OR CREMATORY <b>Sunset Memorial</b>  |                               | 24d. LOCATION (City, village or county) <b>Carlton Co. Minn</b>  |  |
| 25. DATE FILED BY LOCAL REG. <b>11/6/59</b>  |                               | 25. REGISTRAR'S SIGNATURE <b>Lud &amp; Laska</b>   |  |
| 26. SIGNATURE OF MORTICUARY OR FUNERAL DIRECTOR  |                               | 26b. ADDRESS   |  |

WRITE PLAINLY, WITH UNFADING BLACK INK  
MARGIN RESERVED FOR BINDING

MEDICAL CERTIFICATION

Signature of Sub Registrar  
11-1-1959



STATE OF MINNESOTA } SS  
COUNTY OF CARLTON }

I hereby certify that this instrument is a true and correct copy of the original certificate recorded in this office and preserved in the office of the Minnesota Department of Health, Division of Vital Statistics.

In witness whereof have hereunto set my hand and seal of said District Court, at Carlton,

Minnesota this 22 day of February 1959

Bruce D. Ahlgren  
Clerk of District Court

By Aerna McPulini  
Deputy

Death Certificate





Otto (left) with his brothers  
t



Otto Walta in the 1920's



*Otto Walta lived alone on a small farm near Virginia, Minnesota. This is his house as it looked in the 1930s.*



Walt is second man from the right



Otto Walta worked in this logging camp in the 1920's