	Superintendent Regis	trar's District	Mounte	elidy	Registrar's	District Man	teath	
	184/ DEATHS I		District of <u>M</u> n the Count <u></u>		in the Un	nion of Mullin	reliely	
	No. Date and Place of Death. (2.)	me and Surname. Sex.	Condition. Age la Birthda (6.)	Rank, Profession, or Occupation. (7.)	Certified Cause of Death and Duration of Illness. (8.)	Signature, Qualification and Residence of Informant. (9.)	When Registered S	Signature of Registr
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