Sı	uperintendent	Registrar's l	District_c	J. 27	shlu	ZRegistrar	's District Y · (My	1117_
19	<u>08</u> deati	IS Registere	d in the l	District of	S. CM	41101	in the Union of (7. 5	Milm
			iı	n the Cou	nty of L	Melin	,		
No.	Date and Place of Death.	Name and Surnar	ne. Sex.	Condition.	Age last Rank, Profess	ion, or Certified Cause of De	Signature Outlifut	<u>, </u>	
(1.)	(2.)	(3.)	(4.)	(5.)	Birthday Occupation (6.) (7.)	n. and Duration of Illn (8.)	eath Signature, Qualification an Residence of Informant. (9.)	When Registere (10.)	d. Signature of Registr
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7	MI	M_in the County	ON A	4:	Registrar of Births and	1 Deaths in the District of	Si Clys.	W	in the Unio
Ent	ry of the Death of	, - C	mus	wew	No. 291 to	the Entry of the Death of	is a true copy of the Registrar's	Beok of Deaths w	ithin the said Distric
		l	Witness my	hand, this		day of	19 0	No.	
•	I have examined the a	bove, and have compa	red it with the s	aid original Paci	strar's Rook 1 :	y certify that it is a true Co	Mun	MI	Registrar.
110	Intel	19.08		Priner rieß!		y ceruity that it is a true Co	Witness my hand, this	CH	day

the Copy d by the or Interim or Assist-im Super-Registrar, ert word "or "In-the case