



# DEATH CERTIFICATE

CITY OF PHILA. • DEPT. OF RECORDS  
VITAL STATISTICS  
620 CITY HALL ANNEX, PHILA., PA. 19107

No 3176  
133032

FULL NAME OF DECEASED (First)			(Middle)	(Last)
Charles			Jr	Ferguson
ADDRESS (Street and Number)				
2512 N. Broad St.				
SEX	RACE	MARITAL STATUS	DATE OF BIRTH (Mo., Day, Yr.)	AGE
M	W	-----	-----	26 Yrs. Mos. Days
OCCUPATION			BIRTHPLACE	
Baseball Player			Virginia	
NAME OF FATHER			BIRTHPLACE	
-----			-----	
MAIDEN NAME OF MOTHER			BIRTHPLACE	
-----			-----	
DATE OF DEATH		CAUSE OF DEATH		
April 29, 1888		Typho Malarial Fever		
NAME OF PHYSICIAN			ADDRESS	
Thomas J. Yarrow			-----	
PLACE OF BURIAL OR REMOVAL				BURIAL DATE
Charlottesville, Va.				April 30, 1888
UNDERTAKER			ADDRESS	
-----			-----	

I hereby certify the above to be a correct copy of a Death Certificate filed in this office.

JAN 21 1974  
(Date Issued)

Allen Weind (Registrar)

## RETURN OF A DEATH IN THE CITY OF PHILADELPHIA. PHYSICIAN'S CERTIFICATE.

- Name of Deceased,
- Color,
- Sex,
- Age,
- Married or Single,
- Date of Death,
- Cause of Death,

Chas. J. Ferguson,  
White  
Male  
Twenty-six years.  
Married,  
April 29th, 1888.  
Typho-Malarial Fever,

Th. Yarrow M.D.

Residence, 1335 N. Broad St.

### UNDERTAKER'S CERTIFICATE IN RELATION TO DECEASED.

- Occupation,
- Place of Birth,
- When a Minor, { Name of Father, ---  
Name of Mother, ---
- Ward,
- Street and Number,
- Date of Burial,
- Place of Burial,

Base Ball Pitcher,  
Virginia

28 2512 N Broad St  
April 30/88  
Charlottesville Virginia

Ward H. Schuford Undertaker.

Residence, 2054 N 6 St