

CERTIFICATE OF DEATH

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1937 JUN 1 6 350

Certificate No. 13454

BOROUGH OF MANHATTAN
Name of Institution Belleve Hospital Address 26th Street + First Avenue
PRINT FULL NAME FRANK GRANT
First Name Middle Name Last Name
Residence (usual place of abode) 136 West 17th St. Borough of Manhattan
(If nonresident, give place and State) No.

PERSONAL AND STATISTICAL PARTICULARS

4 SEX male 5 COLOR OR RACE black 6 SINGLE, MARRIED, WIDOWED, OR DIVORCED (Give the word) Widowed

8A WIFE HUSBAND OF

7 DATE OF BIRTH OF DECEDENT (Month) (Day) (Year)

9 AGE 72 yrs. mo. da. If LESS than 1 day, hrs. or min.

10 OCCUPATION
A Trade, profession, or particular kind of work done, as spinner, Sawyer, bookkeeper, etc. Writer
B Industry or business in which work was done, as silk mill, sawmill, bank, etc. Caterer
C Date deceased last worked at this occupation (month and year) 12/36 D Total time (years) spent in this occupation 36 yrs

10 BIRTHPLACE (State or country) United States Of America

11 How long in U. S. (if of foreign birth) life 12 How long resident in City of New York 45 years

13 NAME OF FATHER OF DECEDENT Frank Grant

14 BIRTHPLACE OF FATHER (State or country) United States of America

15 MAIDEN NAME OF MOTHER OF DECEDENT Fannie

16 BIRTHPLACE OF MOTHER (State or country) United States of America

17 INFORMANT Decedent

MEDICAL CERTIFICATE OF DEATH

18 DATE OF DEATH May 27th 1937
(Month) (Day) (Year)

19 I hereby certify that deceased was admitted to the institution on May 20th 1937, that I last saw him alive on the 27th day of May 1937, that he died on the 27th day of May 1937, at about 11:30 o'clock A.M.

The principal cause of death and related causes of importance were as follows: Cerebral Arteriosclerosis
Senility

Other contributory causes of importance: Cerebral Arteriosclerosis

Name of operation Date

What test confirmed diagnosis? None Was there an autopsy? M. 1
Signature _____ M. 1

20 Pathologist's Report (See Over)

Signature _____ M. 1

21 PLACE OF BURIAL East Tudor City Cem. DATE OF BURIAL June 2nd 1937

22 UNDERTAKER Maurice Anderson Pratt ADDRESS 289 W 131st St.