

This Constitutes one Certificate, to be returned to the Health Office on Saturday of each week, before 12 M.

15276

RETURN OF A DEATH

◆ IN THE CITY OF PHILADELPHIA ◆

CORONER'S CERTIFICATE.

1. Name of deceased, George Keibel
2. Color, white
3. Sex, male
4. Age, 46 years
5. Married or single, widower
6. Date of Death, Jan 22nd 1896
7. Cause of Death, Myocardial infarction from a fall

J. H. Ashbridge Coroner.

Personal

UNDERTAKER'S CERTIFICATE IN RELATION TO DECEASED.

8. Occupation, Clerk
9. Place of Birth, Pateron Pa.
10. When a Minor { Name of Father, _____
Name of Mother, _____
11. Ward, 2d Ward
12. Street and Number, 1549 26 13 St
13. Date of Burial, Jan. 25-
14. Place of Burial, Levering Cem
D. W. Suffer

Undertaker.

Residence, 145 26 13 St