



DEATH CERTIFICATE

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

No 2978

118513

FULL NAME OF DECEASED (First)			(Middle)	(Last)
Edward				Knouff
ADDRESS (Street and Number)				
German Hospital - 267 N. 5th St.				
SEX	RACE	MARITAL STATUS	DATE OF BIRTH (Mo., Day, Yr.)	AGE
M	W	Married	-----	33 Yrs. - Mos. - Days
OCCUPATION			BIRTHPLACE	
Fireman			Philadelphia	
NAME OF FATHER			BIRTHPLACE	
-----			-----	
MAIDEN NAME OF MOTHER			BIRTHPLACE	
-----			-----	
DATE OF DEATH		CAUSE OF DEATH		
Sept. 14, 1900		uraemia		
NAME OF PHYSICIAN			ADDRESS	
E. H. Moore			-----	
PLACE OF BURIAL OR REMOVAL				BURIAL DATE
Holy Cross Cemetery				Sept. 18, 1900
UNDERTAKER			ADDRESS	
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Return of a Death in the City of Philadelphia.
6200 **PHYSICIAN'S CERTIFICATE.**

- Name of Deceased, Edward Knouff
- Color, W
- Sex, M
- Age, 33
- Married or ~~Single~~
- Date of Death, Sept. 14, 1900
- Cause of Death, uraemia
- Street and Number from which Patient was received.
German Hospital, 267 N. 5th St.

Edward H. Moore, M. D.

Undertaker's Certificate in Relation to Deceased.

- Occupation, Fireman
- Place of Birth, Phila da
- When a Minor, { Father, Mother, } X
- Ward, 29/6
- Street and Number, 267 N. 5th St.
- Date of Burial, Sept. 18th 1900
- Place of Burial, Holy Cross Ch.

Chas. E. Krosky Undertaker.
Residence, 526 N. 4th St.