

Permit for Burial will be issued only on this form of Report correctly filled out with ink.

BUREAU OF VITAL STATISTICS.

DEPARTMENT OF HEALTH: CITY OF CHICAGO.

8673
17625

UNDERTAKER'S REPORT OF DEATH.

1. Name of Deceased (in full) Charles F. Briody

2. Sex: Male Color: White 3. Place of Birth: Lansingburg N.Y.
(State, or Country, if outside of Chicago.)

4. Age: 43 years — months — days. 5. Lived in Illinois 2 years.

6. Died on the 22 day of June 1903, at about 10 a.m.

7. ~~Single~~, Married, Widowed, ~~Divorced~~. Occupation: Waterman

8. Place of Death: 5924 Carpenter Ward 31 Sanitary Division 13

9. Place of Burial: Troy, N.Y. 10. Undertaker: Nagel & Johnson License No. 13

Date of Burial: June 23 1903 Address: 5907 P. St. Chicago

Hour: 2 P. M. Tel: Met 2651

PHYSICIAN'S CERTIFICATE OF CAUSE OF DEATH.
(See "Suggestions as to the Certificate of Cause of Death" on back of Report.)

I hereby Certify, That, to the best of my knowledge and belief, the cause of death of the above named and described deceased was as hereunder written:

CAUSE OR CAUSES OF DEATH Immediate and Determining	Dilatation of the heart			
	with Epistaxis			
Contributing Cause or Complication	Edema of the lungs			
	Hypertension			

DURATION OF CAUSE OR CAUSES.			
Years	Months	Days	Hours
5	0	0	0

Witness my hand, This 22nd day of June 1903 (Signature: Wm. H. ...)
Address: 5907 P. St. Chicago

See "Instructions to Undertaker," on Back of Report.

ILLINOIS
STATE BOARD OF HEALTH
RECORDED