

RECORD OF A DEATH IN PHILADELPHIA.

PHYSICIAN'S CERTIFICATE.

Full Name of Deceased, Michael R Powers 1051
 Sex, M Color, W State if { Chinese Japanese Indian
 Single, Married, Married State if { Widow Widower Divorced
 Date of Birth, { Year, 1870 Date of Death, { Year, 1909 Age, { Years 38
 { Month, Sept { Month, Apr { Months
 { Day, 25 { Day, 26 { Days

No Certificate will be accepted which is MUTILATED, ILLEGIBLE, INACCURATE, or any portion of which has been ERASED, INTER-LINED, CORRECTED or ALTERED, as all such changes impair its value as a public record.

(If age is less than one day, give hours.....)

I HEREBY CERTIFY That I attended deceased from Apr. 12 1909 to Apr. 26 1909
 that I last saw him alive on Apr. 26 1909 and that death occurred, on the date stated above
 at 1.30 M. The CAUSE OF DEATH was as follows:

Centr. Cardiac Dilatation
 Contributory Exhaustion following operations for Intestinal Intussusception

DURATION
 Mos. Days
 Mos. Days
 Breast Fed.
 or
 Artificially Fed

In deaths of children under 2 years of age Doctor will please state if

Signed, Edw J Moore M. D.
 Residence, 1902 N 22

This Certificate must not be issued for any other purpose than as a report to the Board of Health. Should the Physician issue a duplicate, it must be distinctly marked "Duplicate," and state why issued.

UNDERTAKER'S CERTIFICATE.

Occupation, Physician & Baseball Catcher Place of Birth, Massachusetts
 (Give occupation for all persons 14 years of age and over)
 Birthplace of Father, Ireland Birthplace of Mother, Ireland
 Name of Father, Michael Powers
 Maiden Name of Mother, Catharine Haney
 Last Place of Residence, (This need only be given when it is other than the place of death.) Jeffersonville Pa
 Place of Death, Street and No. 2019 N 22 St
 Ward, wherein death occurred, 32
 Buried from, Street and No. 2035 N. 22nd St
 Date of Burial, April 29th 1909
 Place of Burial, New Cathedral Cemetery

Frank A Hookey Undertaker.
 Residence, 1926 N 6th St

This Certificate must be exchanged at the Health Office for a Permit before burial takes place or body is removed from the City.