

12884

24273

17765

OFFICE OF COOK COUNTY CORONER.

CERTIFICATE OF DEATH.

12884

Name of Deceased (in full)

Harry
W. L. Spence

2. Sex: *M* Color: *W* 3. Place of Birth: *Virginia* Father's Birthplace: _____ Mother's Birthplace: _____
Of deceased (State, or Country, if outside Chicago).

4. Age: *50* years _____ months _____ days. 5. Lived in Illinois *5* years, in Chicago,

Years	Months	Days
<i>5</i>	<i>-</i>	<i>-</i>

6. Died on the *17th* day of *May* 190*8* at about _____ M.

7. Single, ~~Married~~, Widowed, ~~Divorced~~ Occupation: *Clerk*

8. Place of Death: *343 N. Clark St*

9. Place of usual Residence: *343 N. Clark St* Ward: *7*

10. Place of Burial: *Elmwood* 11. Undertaker: *Allen Campbell* License No. _____

Date of Burial: *May 20* 190*8* Address: *284 N. Clark St.* License No. *5*

Hour: *12 =* M. CAUSE OF DEATH. Telephone: *W. 615*

Organic Heart-disease

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I hereby certify, that the above stated personal particulars are true to the best of my knowledge and belief, and that the cause of death of the above named and described deceased was as above written by me.

Witness my hand, This *18th* day of *May* 190*8* (Signature) *Peter M. Hoffman* Coroner or Coroner's Physicians.