

RETURN OF A DEATH
IN THE CITY OF PHILADELPHIA.

3444

PHYSICIAN'S CERTIFICATE.

1. Name of Deceased,

Roseanna McGrath

2. Color,

White

3. Sex,

Female

4. Age,

Fifty (55) Eight

5. Married or Single,

Married

6. Date of Death,

August 10th 1891

7. Cause of Death,

Phthisis Pulmonalis & Chronic
Gastritis

David G. Heffell M. D.

Residence

5th & 40th & Harford Ave

UNDERTAKER'S CERTIFICATE IN RELATION TO DECEASED.

8. Occupation,

Housekeeper

9. Place of Birth,

Ireland

10. When a Minor,

Name of Father,

Name of Mother,

11. Ward,

34th

12. Street and Number,

936 N. 47th Street

13. Date of Burial,

August 13th 1891

14. Place of Burial,

Cathedral Cemetery

Thomas Kennally

Undertaker.

Residence

4541 Lancaster Ave.

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