

No. 97975

The Special Attention of Physicians is Respectfully Invited to the Remarks below, and to List of Diseases on Back of this Certificate.

# Health Department, City of Baltimore.

Permit No. 97975 Office of Registrar of Vital Statistics. Ward 12 1/4

The Physician who attended any person in a last illness, is responsible for the presentation of this Certificate, accurately filled out, to the Undertaker or other person superintending the burial, within twenty-four hours after the death of said deceased, or sooner, if requested so to do, under penalty of law.

NO PERMIT FOR BURIAL CAN BE OBTAINED WITHOUT A PROPER CERTIFICATE

## CERTIFICATE OF DEATH.

B

Date of Death, Feb 12<sup>th</sup> 1867.

Full Name of Deceased, { Write legibly and spell correctly. If an Infant not named, give names of parents. } James Wallace.

Sex, Male or Female, { Cross out the word not required in this line. }

Age, 68 Years, — Months, — Days

Color, White.

Married, Single, Widow or Widower, { Cross out the words not required in this line. }

Occupation, Lawyer.

Birth Place, { State or country, and how long in the United States, if of foreign birth. } Maryland

Duration of Residence in the City of Baltimore, About two weeks

Place of Death, { Give Street and Number. } 1120 Bolton St.

Cause of Death, { First (Primary), Cancer of Bladder. Second (Immediate), Asthenia. }

Duration of Last Sickness, Eight weeks

All the above information should be furnished by the Physician.

Place of Burial, Cambridge Md

Date of Burial, Feb 14/80

{ Undertaker, Stanford & Wilson } Alan P. Smith, M. D. Medical Attendant.

{ Place of Business, 35 Park Ave } Address,

Extract from Regulations of the Board of Health to secure a full and correct record of the Vital Statistics in the City of Baltimore.

SECTION 2. And be it further enacted and ordained, That whenever any person shall die in the said city, it shall be the duty of the Physician who attended during his or her last sickness, or the Coroner, when the case comes under his notice, to furnish within twenty-four hours after the death, to the Undertaker or other persons superintending the Burial, a certificate setting forth as far as the same can be ascertained, the full name, sex, age, and condition (whether married or single) of the person deceased, and the cause and date of death.

[OVER.]