

IF REFER TO BACK OF REPORT FOR INSTRUCTIONS.

6406

Authorized by the State Board of Health,
 Sec. 4, S. State Board of Health Act, 1877.

REPORT OF DEATH.

Revised Ordinances, City of Chicago,
 Sec. 2080, 2080, 2081, 2082.

DEPARTMENT OF HEALTH: CITY OF CHICAGO.

BUREAU OF VITAL STATISTICS--DEATHS.

WM. R. KERN, COMMISSIONER OF HEALTH.

1. Name of Deceased (In full) Jacob Gastel

2. Sex: M Color: W 3. Born in Germany APR 14 1897

4. Age: 54 years — months — days. 5. Lived in Illinois 32 years.

6. Died on the 14 day of April 1897, at about 9 a M.

7. Single, Married, ~~Widowed~~. Occupation: —

8. Place of Death: 524 S. California ave Ward 12

9. Place of Burial: Waldaim 10. Undertaker: J. J. Provan License No. 128

Date: April 14 1897. Address: 1341 Washington St

PHYSICIAN'S CERTIFICATE OF CAUSE OF DEATH.

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

CAUSE OR CAUSES OF DEATH. Chief and Determining	DURATION OF CAUSE.			
	Years.	Months.	Days.	Hours.
<u>Failure of Vital forces</u>	<u>4</u>			
<u>Contributing and Consecutive Causes</u> <u>Second stroke of Paralysis</u>	<u>4</u>	<u>last</u>	<u>5</u>	

Witness my hand, This — day of — 189— } (Signature:) J. H. Fleckner M. D.
 Address: 422 Washington Boulevard