

The Special Attention of Physicians is respectfully invited to the Remarks below, and to the List of Diseases on the back of this Certificate.



CERTIFICATE OF DEATH.

TO THE HEALTH OFFICER, DISTRICT OF COLUMBIA.

(H)

Permit No. 53648

Date of Death Sept. 28th 1886.

Full Name of Deceased John W. Norwood

Sex male

Age 48 Years Months Days.

Color White

Married, ~~Single~~, ~~Widow~~, or ~~Widower~~, [Cross out the words not required in this line.]

Occupation publisher

Birthplace New York

Duration of Residence in the District of Columbia 1 year

Nativity of Father New York Nativity of Mother New York

Place of Death, [Give Street and Number] Govt. Hosp. for the Insane

Cause of Death First, (Primary) Malarial Poisoning 1-1

Duration Second, (Immediate) Many years Inanition with acute mania

Duration of Last Sickness Two months.

All of the above information should be furnished by the Physician. In case of death by zymotic disease, please state what, if any, local cause exists to produce the same.

Place of Burial Congress

Date of Burial Sept 30th 1886

Undertaker George Burdett

Place of Business 326 Pa Ave East Address Govt Hospital for the Insane

M. P. Godding M. D.

Extract from Regulations to secure a full and correct Record of the Vital Statistics in the District of Columbia.

SECTION 4. That whenever any person shall die within the District of Columbia it shall be the duty of the physician attending such person during his or her last sickness, or of the Coroner of the District, when the case comes under his official notice, to furnish and deliver to the undertaker, or other person superintending the burial of said deceased person, a certificate, duly signed, setting forth, as far as the same may be ascertained, the name, age, color, sex, nativity, (giving State or country,) occupation, whether married or single, duration of residence in the District of Columbia, cause, date, and place of death, (giving street and number,) and duration of last sickness of such deceased person. And it shall be the duty of the undertaker, or other person in charge of the burial of such deceased person, to state in said certificate the date and place of burial, and to sign the same, to forward it to the Registrar aforesaid within twenty-four hours after such burial. Provided, That in case of death from a contagious or infectious disease, said certificate shall be so made and forwarded within eight hours after the burial. [OVER.]