

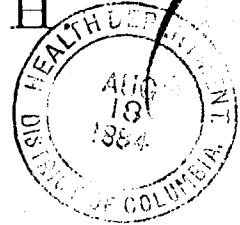
FORM No. 3.

No. 43341

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.



Permit No. 43354
 Date of Death August 17th 1884
 Full Name of Deceased Maximilian Rosenberg
 Sex Male
 Age 56 Years 5 Months 18 Days.
 Color White

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

Occupation Invalid
 Birthplace Neusatz, Hungary
 Nativity of Father Hungary Nativity of Mother Hungary
 Duration of Residence in the District of Columbia Since 1868

Place of Death, [Give Street and Number.] 310 Indiana Avenue, n.w.
 Cause of Death,
 First, (Primary) Chronic Bright's Disease
 Duration Fourteen years. 11-5-
 Second, (Immediate) Dropsy
 Duration of Last Sickness Eighteen hours

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 Congregational Church
 Date of Burial Aug 19 1884 Rufus Choate M. D.
 Undertaker W. Barker
 Place of Business 612 11th St. n.w. Address 310 Indiana Ave n.w.

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, if signed the same, to forward it to the Registrar aforesaid within twenty-four hours after such death. Provided, That in case of death from a contagious or contagious disease, said certificate shall be so made and forwarded within eight hours after.