VANSICKLER, ROSE A. [R97/187]

Foreign

CERTIFICATE OF DEATH.

No. of Burial Permit. [illegible]

DISTRICT OF COLUMBIA.

No. of Record. 3825

FULL INSTRUCTIONS FOR THE GUIDANCE OF THOSE USING THIS BLANK, AND SPACE FOR REMARKS MAY BE FOUND ON THE OTHER SIDE.

HEALTH DEPARTMENT MAR 23 1902 DISTRICT OF COLUMBIA.

1. **Date of this Death** march 21, 1902 190
2. **Full Name of Deceased** Rose Ann Van Sicklin.
   If an unnamed infant, insert full names of both parents.
3. **Sex:** ~~Male~~ Female
4. **Age:** Years 23 Months — Days —
5. **Color.** White. ~~Colored.~~ ~~Indian.~~ ~~Chinese.~~ ~~Japanese.~~
6. **Conjugal Condition.** ~~Single.~~ Married. ~~Widowed.~~ ~~Divorced.~~

Under sex, color and conjugal condition, strike out the words not applicable.
Under color, the term "colored" includes all of African descent, whether of pure or mixed blood.

7. **Occupation** none
8. **Birthplace of Deceased** Wash. D.C.
9. **Birthplace of Father** Wash. DC
10. **Birthplace of Mother** Wash D.C.

If born in the United States, give State, Territory or District; otherwise, give country.

11. **Duration of Residence in this District** [illegible]
12. **Place of Death** Hartford Conn
13. **Cause of Death**
    Primary [illegible]
    Immediate [illegible]
    Duration.
14. **If Death Occurred in an Institution, give:**
    Name of Institution [illegible]
    Length of Time Deceased was an Inmate [illegible]
15. **If Deceased did not Die at his or her Residence, give:**
    Place of Residence [illegible]

I hereby certify that I attended the deceased professionally during [illegible] last illness.

[illegible] M. D.,
Address [illegible]

To be Filled Out and Signed by the Undertaker:

Place of Burial Congressional Date of Burial Mar 23 1902

If Body is to be Buried Outside of the District, state:

Route of Transportation [illegible] Date of Removal [illegible] 190

Signature John B. Wright Undertaker,
Address 3 [illegible] 10th St NW

REMOVAL PERMIT.

Office of Registrar of Deaths.

[illegible] Conn.

The Certificate of Death required by Law having been received and recorded, permission is hereby given to remove the body of Rose Ann Van Sicklin

To [illegible] for interment.

Maiden Name, if wife or widow, [illegible]

Place of Death, Town, Hartford

Date of Death, March 21 Sex, fem Color, blk

Occupation, none Age, 23 Yrs. Mos. Days.

~~Single, Married, Widow, Widower, Divorced.~~ Erase words not required.

Birthplace, Town, Washington D.C.

Father's Name, John H. Wells

Mother's Name, Ann Gordon

Cause of Death { Primary, [illegible] Secondary, or Immediate

Name of person giving Certificate of Death, [illegible]

Name of Undertaker, or person in charge of removal, John B. Wright

J. J. Lomax Registrar.

Deaths, E.

of death

recorded, terment.

registrar. death, to

closed in has been

registrar.

R97/187