



Crown

No. of Certificate,

STATE OF NEW YORK.

CERTIFICATE AND RECORD OF DEATH

1445

Margaret <sup>OF</sup> Beattie

Sex	Female	Color	White	Place of Death	2449 3 <sup>rd</sup> Av
Age	48	Yrs.		Character of premises, whether tenement, private, etc. If hotel, hospital or other institution, state full title.	Tenement
Married	Married	Mos.		Father's Name	John J. Beattie
Occupation	Housewife	Days		Father's Birthplace	New York
Birthplace	New York			Mother's Maiden Name	Mary A. Horan
How long in U.S. if foreign birth				Mother's Birthplace	New York
How long resident in City of New York	Life				

I hereby certify that I attended deceased from March 22 1904, to March 26 1904, that I last saw her alive on the 26<sup>th</sup> day of March 1904, that she died on the 26 day of March 1904, about 9<sup>15</sup> o'clock A. M. or P. M., and that to the best of my knowledge and belief, the cause of death was as follows:

Acute Labor Pneumonia

Contributory Pulmonary Oedema (Duration) Yrs. Mos. 4 Days.  
 (Duration) Yrs. Mos. Days.

SPECIAL INFORMATION

to be filled in deaths in hospitals and institutions and deaths of non-residents and recent residents

Former or usual residence, }

How long resident at place of death, }

(11)-(11-2001)

Witness my hand this 27<sup>th</sup> day of March 1904

(Signature) Edwin Brennan (M. D.)

(Residence) 265 Alex Av



1445

Place of Burial, *Flatbush Cemetery*  
 Date of Burial, *March 28 1904*  
 Undertaker, *Henderson*  
 Place of Business, *690 10 ave*

N. B.—A certificate of death is a document of great importance. More than 23,000 copies of such certificates are issued annually from this office, for use here and abroad as legal proof of death. It is essential, therefore, that the particulars called for shall be given **correctly, legibly, and as fully as possible.**

### TO PHYSICIANS.

1. The attending physician must furnish a certificate to the Department of Health within 24 hours after death, and where death has resulted from infectious or contagious disease, a certificate must be furnished by him **forthwith** (Sanitary Code, Section 135 and 161).
2. All physicians practicing in the City of New York (including those in public institutions) must be registered in the Bureau of Records (Sanitary Code, Section 160).
3. If a person dies from **criminal violence or by a casualty, or suddenly while in apparent health, or when unattended by a physician or in prison, or in any suspicious or unusual manner**, the case must be referred to the Coroner's office (Chapter 410, Section 1772, Laws of 1882).
4. Certificates **will be returned for additional information**, which give any of the following diseases, without explanation, as the sole cause of death:

<b>Abortion,</b>	<b>Gastritis,</b>	<b>Peritonitis,</b>
<b>Cellulitis,</b>	<b>Erysipelas,</b>	<b>Phlebitis,</b>
<b>Childbirth,</b>	<b>Meningitis,</b>	<b>Pneumia,</b>
<b>Convulsions,</b>	<b>Metritis,</b>	<b>Septicæmia,</b>
<b>Hæmorrhage,</b>	<b>Miscarriage,</b>	<b>Tetanus.</b>
<b>Gangrene,</b>	<b>Necrosis,</b>	

(Any one of these may be the result of an injury, and thus be a subject for investigation by a Coroner. If it is not, the certificate should make that fact plain).

5. No certificate giving "**Heart failure,**" "**Dropsy,**" or other **mere symptom**, as the sole cause of death, will be accepted, unless accompanied by a satisfactory written explanation.

### TO UNDERTAKERS.

1. No burial permit can be obtained without a proper certificate.
2. Certificates must be written throughout in black ink.
3. No certificate will be accepted which is **mutilated, illegible, inaccurate**, or any portion of which has been **erased, interlined, corrected or altered**, as all such change impair its value as a public record.