

THE CITY OF NEW YORK.
DEPARTMENT OF HEALTH.

STATE OF NEW YORK.

No. of Certificate,

CERTIFICATE AND RECORD OF DEATH 23566

Abraham Yerkes
OF
Yerkes

23566

Sex	Male	Color	White	Place of Death	612 Fulton St
Age	92 Yrs.	Mos.		Character of premises, whether tenement, etc. If hotel, hospital or other institution, state full title	11
Single, Married, Widowed or Divorced	Married			Father's Name	Isaac Yerkes
Occupation	Mechanic			Father's Birthplace	Tarrytown N.Y.
Birthplace	Port Hamilton N.Y.			Mother's Maiden Name	Kathrine Bennett
How long in U.S. (if of foreign birth)	—			Mother's Birthplace	Port Hamilton N.Y.
How long resident in City of New York	Life				

I hereby certify that I attended deceased from Dec. 20th 1908, to Dec. 24th 1908, that I last saw him alive on the 24th day of Dec. 1908, that he died on the 24th day of Dec. 1908, about 8³⁰ o'clock A. M., or P. M., and that, to the best of my knowledge and belief, the cause of his death was as follows:

HOLY CROSS CEMT. 12-27-08 J. TRACY
Cerebral Apoplexy 1597 FULTON ST
Senile Debility.

SPECIAL INFORMATION

required in deaths in hospitals and institutions and in deaths of non-residents and recent residents.

Former or usual residence } _____
How long resident } _____
at place of death } _____

Witness my hand this 25th day of Dec. 1908

(Signature)

J. R. Somers M. D.
(Residence) 96 Greene Ave

NO MUTILATED CERTIFICATE WILL BE RECEIVED

23566

Place of Burial Holy Cross
Date of Burial Dec 27 1908
Undertaker James H. Tracy
Place of Business 1597 Fulton St

RECEIVED
DEPARTMENT OF
HEALTH

DEC 26 1908 9 45

BUREAU OF RECORD
CITY OF BROOKLYN

N. B.—A certificate of death is a document of great importance. More than 25,000 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 36 hours after death, and where death has resulted from infectious or contagious disease a certificate must be furnished by him forthwith (Sanitary Code, Sections 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; any person who may become aware of a death in the manner stated shall report such death forthwith to one of the Coroners, etc., etc. (Chapter 410, Section 1773, 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:

Abortion,	Gastritis,	Peritonitis,
Cellulitis,	Erysipelas,	Phlebitis,
Childbirth,	Meningitis,	Pyæmia,
Convulsions,	Metritis,	Septicæmia,
Hæmorrhage,	Miscarriage,	Tetanus.
Gangrene,	Necrosis,	

(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.)

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 changes impair its value as a public record.

ORDER NO. 3-19-750
DATE 2-28-26
NUMBER ISSUED 1
SEARCHED mm
INDEXED mm
SERIALIZED mm
FILED mm