

8972

Form 2.

No. of corresponding entry in Register Book of Deaths to be inserted here by the Registrar.

34

County of Westchester

STATE OF NEW YORK.

CERTIFICATE OF DEATH,

In the Town (Village) City of New Castle

1. Full Name of Deceased (If an infant was named, give parents' names.) John Yerkes
2. Age 86 years 10 months 2 days. Sex male Color (Rare, if other than the White.) —
3. Single, Married, Widowed (Cross out words not required in this line.) — 4. Occupation Farmer
5. Birthplace (Add State or Country.) New York (How long in the United States, if of foreign birth.) —
6. Father's Name and Birthplace N. J. (State or Country) —
7. Mother's Name and Birthplace N. J. (State or Country) —
8. Place of Death (If an institution, state its name.) New Castle (How long transient here.) — (If dying away from home, give Street Address below.) —
9. Date and Hour of Death:—Died on the 4 day of Aug. 1882

FOR GENEALOGICAL RESEARCH ONLY

10. I hereby report this Death, and certify that the foregoing statements are true according to the best of my knowledge.

(Signature and title of Agent of Registrar.)

H. F. Patch

11. I hereby Certify, That I attended the deceased from May 1 1882, to Aug 4 1882, that I last saw him Aug. 3 1882, that he died on the 4 day of Aug. 1882, about 3 o'clock P. M., and that to the best of my knowledge and belief the cause of his death was as hereunder written:

Chief and Determining

General Exhaustion

Consecutive and Contributing

Old Age

Duration of Disease in Years, Months, Days, or Hours.

2 mths.

The duration of each Disease when given, is reckoned from its commencement until death.

Sanitary observations

Witness my hand this — day of — 188—

of Burial Permit

Chappin

(Signature)

H. F. Patch

M. D.

at Burial

Residence,

Chappin

of Undertaker

N. Y.