

Permit for Burial will be issued only on this form of Report correctly filled out with ink.

BUREAU OF VITAL STATISTICS.
DEPARTMENT OF HEALTH: CITY OF CHICAGO.
UNDERTAKER'S REPORT OF DEATH.

499
8:30

31762

1. Name of Deceased (in full) James Pratt Andrews

2. Sex: Male Color: White 3. Place of Birth: Shelburne Falls, Va. Father's Birthplace: Conroy, Mo. Mother's Birthplace: Charlemont, Mass.

4. Age: 42 years, 6 months, 22 days. 5. Lived in Illinois 41 years, in Chicago 23 years, 0 months, 0 days.

6. Died on the 27 day of December 1907, at about 2:30 P.M.

7. Single, Married, Widowed, Divorced. Occupation: none

8. Place of Death: 20 Pine Grove St Ward 25

9. Place of Burial: Wm. Adams 10. Undertaker: Wm. Adams License No. 123

Date of Burial: Dec 29 1907 Address: 144 W. Clark St Tel. 11910

Hour: 7:15 M.

PHYSICIAN'S CERTIFICATE OF CAUSE OF DEATH.

(See "Suggestions as to the Certificate of Cause of Death," on back of Report.)

I Certify That, to the best of my knowledge and belief, the cause of death of the above named and described deceased was as hereunder written:

Cause or Causes of Death.	DURATION OF CAUSE OR CAUSES.			
	Years.	Months.	Days.	Hours.
Immediate and Determining Cause: <u>Pulmonary & Arterial Tuberculosis</u>	<u>1</u>	<u>-</u>	<u>-</u>	<u>-</u>
Contributing Cause or Complication: <u>Fracture</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>

Witness my hand, This 27 day of December 1907.

(Signature): Emil V. Beck M. D.

Address: 173 Lake View Tel. 805 L. 7

STATE OF ILLINOIS, } ss.
County of Cook, }

I, STANLEY T. KUSPER, JR., County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County, do hereby certify that the attached is a true and correct copy of the original Record on file, all of which appears from the records and files in my office.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the City of Chicago, in said County.

[Handwritten signature]