COUNTY OF NEW YORK. STATE OF NEW YORK. CITY OF NEW YORK

No. of Certificate. 482

CERTIFICATE AND RECORD OF DEATH

OF

Chas. H. Byrne

I hereby certify that I attended deceased from Nov. 24th 1897 *to* Jan 4 1898 *that I last saw* him *alive on the* 3rd *day of* Jan'y 1898, *that* he *died on the* 4th *day of* Jan'y 1898, *about* 8 *o'clock A. M. or* ~~P. M.~~, *and that to best of my knowledge and belief, the cause of* his *death was as hereunder written:*

		Duration of Disease.
Chief Cause,	Interstitial Hepatitis	10 mos.
Contributing Cause,	Asthenia	

Sanitary Observations,

Witness my hand this 4th *day of* January 1898

Place of Burial, Calvary Cem. (SIGNATURE), John S. Warren M. D.

Date of Burial, Jan 6/98

Undertaker, S. MERRITT HOOK & SON, 710 EIGHTH AVE. NEW YORK, N. Y. RESIDENCE, 150 West 48th

Residence,

Burial permits issued at Criminal Court Building, Centre, White, Elm and Franklin Streets, { Week days, 7 A. M.–6 P. M. / Sundays and Holidays, 8 A. M.–5 P. M.

Date of Death.	Full Name.	Age, in years, mos. and days.	Color.	Single, Married or Widowed.	Occupation.	Birthplace.	How long in U. S. if foreign born.	How long resident in New York City.	Father's Name.	Father's Birthplace.	Mother's Name.	Mother's Birthplace.	Place of Death.	Last place of Residence.	Class of Dwell'g (A tenement being a house occupied by one's class of families)	Direct cause of Death.	Indirect cause of Death.	Date of Burial.
Jan. 4 1898	Charles H. Byrne	35 years	White	Widower	Pres. Brooklyn Bus Ball Clk N.Y. city	—	—	21	John Byrne	Ireland	Mary Byrne	Ireland	107 West 11th	107 West 11th	apartment	Interstitial Hepatitis	Asthenia	