

The Commonwealth of Massachusetts

STANDARD CERTIFICATE OF DEATH

360

QUINCY

(City or town.)

PLACE OF DEATH

Quincy, Mass. (No. 322 Billings Rd. xx. 5 Ward)

[If death occurred in a hospital or institution, give its NAME instead of street and number.]

FULL NAME Charles William Ganzel

[If married or divorced woman or widow give maiden name, also name of husband.]

RESIDENCE 322 Billings Road, Quincy, Mass.

Registered No. 196

PERSONAL AND STATISTICAL PARTICULARS

SEX Male COLOR OR RACE White SINGLE, MARRIED, WIDOWED, OR DIVORCED (Write the word) Married

DATE OF BIRTH June 19 1862 (Month) (Day) (Year)

AGE 51 yrs. 9 mos. 19 ds. or min. 7 If LESS than 1 day, hrs.

OCCUPATION

(a) Trade, profession, or particular kind of work Traveling Salesman

(b) General nature of industry, business, or establishment in which employed (or employer)

BIRTHPLACE (State or country)

Waterford, Wisc.

NAME OF FATHER

Charles W. Ganzel

BIRTHPLACE OF FATHER (State or country)

Germany

MAIDEN NAME OF MOTHER

Elizabeth Kauffman

BIRTHPLACE OF MOTHER (State or country)

Germany

THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant) Mrs. Charles W. Ganzel (Widow)

(Address) 322 Billings Rd., Quincy.

Filed Apr. 10, 1914

C. W. Ganzel REGISTRAR

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH

April 7, 1914 (Month) (Day) (Year)

I HEREBY CERTIFY that I attended deceased from Feb. 1914, to Apr. 7, 1914, that I last saw him alive on Mar. 31, 1914, and that death occurred, on the date stated above, at --- m.

The CAUSE OF DEATH* was as follows:

Epithelioma of lower lip and jaw

(Duration) 3 yrs. -- mos. -- ds.

Contributory (secondary)

(Duration) -- yrs. -- mos. -- ds.

(Signed) Fred A. Bartlett, M.D.
Apr. 9, 1914 (Address) Quincy, Mass.

* If death followed injury or violence the certificate of death must be made out by the Medical Examiner.

LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRANSIENTS, OR RECENT RESIDENTS).

At place of death -- yrs. -- mos. -- ds. In the State -- yrs. -- mos. -- ds.

Where was disease contracted, if not at place of death?

Former or usual residence

PLACE OF BURIAL OR REMOVAL

Mt. Wollaston Cemetery Quincy, Mass.

DATE OF BURIAL

Apr. 10, 1914

UNDERTAKER

John Hall

ADDRESS

Quincy.