

1 PLACE OF DEATH (District No. 1401)

New York State Department of Health

DIVISION OF VITAL STATISTICS

State Reg. No. 1987

COUNTY OF ERIE

CERTIFICATE OF DEATH

Local Reg. No. 2205

CITY OF BUFFALO

(No. 500 Wyoming

St. 16 Ward)

FULL NAME

William E. Hunter

Residence No.

500 Wyoming

St. 16 Ward.

(Usual place of abode)

Years Months Days

43 9 2

(If nonresident, give city or town and state)

Years Months Days

4 Length of residence in district where death occurred

5 How long in U. S. if of foreign birth?

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL CERTIFICATE OF DEATH

6 SEX

Male

7 COLOR OR RACE

White

8 SINGLE, MARRIED, WIDOWED,

DIVORCED (Of the last word)

9a DATE OF DEATH

(month, day and year)

April 10

1934

9b IF MARRIED, WIDOWED OR DIVORCED

(OR) WIFE OF: Emily Schaeffer

10 I HEREBY CERTIFY, That I attended deceased from

March 20, 1934, to April 10, 1934

9c DATE OF BIRTH (month, day and year)

July 28th, 1886

I last saw him alive on April 9, 1934

10 AGE

Years Months Days

47

If 1 year then 1

day or less

To the best of my knowledge, death occurred on the date stated above, at 1 A. M.

11 Trade, profession, or particular

Mechanic

kind of work done, as spinner,

weaver, bookbinder, etc.

12 Industry or business in which

Kilgus & Corral

work was done, as silk mill,

Bottle Break, Mich.

13 Date deceased last worked at

14 Total time (years)

spent in this

occupation (month and

year)

4 years

15 BIRTHPLACE (City or Town)

Buffalo, N. Y.

(State or Country)

16 NAME

Charles A. Hunter

17 BIRTHPLACE (City or Town)

Canada

(State or Country)

18 MAIDEN NAME

Isabel Cherry

19 BIRTHPLACE (City or Town)

Philadelphia,

(State or Country)

Pennsylvania

20 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Signature of Informant) Victor Bengart

(Address) 500 Wyoming St.

21 PLACE OF BURIAL, CREMATION OR

DATE OF BURIAL

REMOVAL

Ridge Lawn Cemetery

April 12, 1934

22 UNDERTAKER (Name and 1934

ADDRESS, DELIVERY

Victor Bengart

Buffalo, N. Y.

23 SIGNATURE OF UNDERTAKER

Victor Bengart

24 What laboratory test ordered? For use of po.

25 Was there an autopsy? No

(Signed) Victor Bengart

April 11, 1934 (Address) 116 Mohr St.

*See reverse side for instructions

Permit issued by Victor Bengart, Date of issue

CERTIFICATE MUST BE FILED WITH THE LOCAL REGISTRAR WITHIN 72 HOURS AFTER DEATH