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[FORM to be used for making out Occasional Copies of Entries of DEATHS for transmission to the Registrar-General, and for no other purpose.]

DEATHS Registered in the District of <u>Ardee</u> in the Union of <u>Ardee</u> in the County of <u>South</u>										
No. (1.)	Date and Place of Death. (2.)	Name and Surname. (3.)	Sex. (4.)	Condition. (5.)	Age last Birth-day. (6.)	Rank, Profession, or Occupation. (7.)	Certified Cause of Death, and Duration of Illness. (8.)	Signature, Qualification, and Residence of Informant. (9.)	When Registered. (10.)	Signature of Registrar. (11.)
	1890 Eighteenth 19 October Hoathstown	Maryanne Moohan	F	Spinster	15 years	Farmer's daughter	Meningitis 4 months certified	Patrick Moohan Father present at death Hoathstown	Twenty Second November 1890	Thos Jos Moore Registrar

[This Form is to be used for making out Occasional Copies of Entries of Deaths for transmission to the Registrar-General, and for no other purpose.]

Thos Jos Moore Registrar of Births and Deaths in the District of Ardee in the Union of Ardee in the County of South do hereby certify that this is a true copy of the Entry No. 19 in the Registrar's Book of Deaths, within the said District. Witness my hand this 4th day of June 1891

Thos Jos Moore Registrar.

I have examined the above, and have compared it with the said original Registrar's Book, and hereby certify that it is a true Copy. Witness my hand this 20th day of July 1891

[Deaths S.]

Thomas M. Dringford Superintendent Registrar.

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