SCHEDULE C.—DEATHS.

County of

Division of

	No.	No.	No.
Name and Surname of Deceased.			
When Died.			
Sex—Male or Female.			
Age.			
Rank or Profession.			
Where Born.			
Certified cause of Death and duration of Illness.			
Name of Physician, if any.			
Signature, Description and Residence of Informant.			
When Registered.			
Religious Denomination of Deceased.			
Signature of Registrar.			
REMARKS.			

	No.	No.	No.
Name and Surname of Deceased.			
When Died.			
Sex—Male or Female.			
Age.			
Rank or Profession.			
Where Born.			
Certified cause of Death and duration of Illness.			
Name of Physician, if any.			
Signature, Description and Residence of Informant.			
When Registered.			
Religious Denomination of Deceased.			
Signature of Registrar.			
REMARKS.			

I hereby certify the foregoing to be the true and correct entries of all Deaths returned to me for the half-year ending

Given under my hand, this day of A.D. 18

Division Registrar of

SCHEDULE C.—DEATHS.

County of Grey

Division of Durham

	✗ No. 1	✗ No. 3	✗ No. 5
Name and Surname of Deceased.	Jno Harrison Edge	Nathl Campbell	Sarah Mighton
When Died.	10th March 84	14th April 88	29th April 84
Sex—Male or Female.	M	M	F
Age.	93 ✓	58 ✓	59 ✓
Rank or Profession.	Ship Carpenter	Weaver	—
Where Born.	Ireland	Scotland	England
Certified cause of Death and duration of Illness.	Old Age ✓	Drowned ✓	Ulcer ✓
Name of Physician, if any.	None	None	None
Signature, Description and Residence of Informant.	Geo Whetstone Durham	Mr Campbell	Geo Mighton Durham
When Registered.	15th May 184	22nd April 1884	10th May 1884
Religious Denomination of Deceased.	C of England	Baptist	C. Eng
Signature of Registrar.	J Wonder	J Wonder	J Wonder
REMARKS.	005521	005522	005523

	✗ No. 2	✗ No. 4	✗ No. 6
Name and Surname of Deceased.	Wm Caldwell	Louisa Florence Marshall	Mary Gamble
When Died.	14th Augt 1883	5th April 84	10th May 184
Sex—Male or Female.	M	F	F
Age.	46 ✓	2 Years ✓	Three Weeks ✓
Rank or Profession.	Shoemaker	—	—
Where Born.	Ireland	Canada	Canada
Certified cause of Death and duration of Illness.	Heart disease ✓	Croup ✓	Bronchitis ✓
Name of Physician, if any.	Dr Jamieson & Gunn	Dr Jamieson	None
Signature, Description and Residence of Informant.	Mr Caldwell Lanham	K L Marshall Lanham	Sarah Gamble Lanham
When Registered.	21st April 1884	22 April 184	12th May 184
Religious Denomination of Deceased.	Baptist	C Eng	C. England
Signature of Registrar.	J Wonder	J Wonder	J Wonder
REMARKS.	005524	005525	005526

I hereby certify the foregoing to be the true and correct entries of all Deaths returned to me for the half-year ending 30th June 1884

Given under my hand, this 15th day of July A.D. 1884

Solomon Allen Division Registrar of Durham