

## The Commonwealth of Massachusetts

## STANDARD CERTIFICATE OF DEATH

1 PLACE OF DEATH

Pittsfield

(No.)

House of Mercy

St.

Ward)

Pittsfield  
(City or town.)

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

2 FULL NAME

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

3 RESIDENCE

Main St., Dalton, Mass.

Registered No. 47

## PERSONAL AND STATISTICAL PARTICULARS

4 SEX

M

5 COLOR OR RACE

W

6 SINGLE,  
MARRIED,  
WIDOWED,  
OR DIVORCED  
(Write the word)

Married

7 DATE OF BIRTH

Sept. 21, 1870  
(Month) (Day) (Year)

8 AGE

46 yrs. 3 mos. 23 ds.

If LESS than  
1 day.....hrs.  
or.....min.?

9 OCCUPATION

(a) Trade, profession, or  
particular kind of workFactory Employee  
Electrical Works

10 BIRTHPLACE

(State or country)

Massachusetts

(Duration) yrs. mos. ds.

11 NAME OF  
FATHER

James Garry

Contributory  
(SECONDARY)

(Duration) yrs. mos. ds.

12 BIRTHPLACE  
OF MOTHER

(State or country)

Ireland

(Signed) Albert C. England, M.D.  
Jan. 13, 1917 (Address) Pittsfield, Mass.13 MAIDEN NAME  
OF MOTHER

Margaret McCue

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

14 BIRTHPLACE  
OF MOTHER

(State or country)

Ireland

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

At place of death yrs. mos. da. In the State yrs. mos. da.

Where was disease contracted,  
if not at place of death?Former or  
usual residence

16 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant)

Mrs. James Garry

17 PLACE OF BURIAL OR REMOVAL

Fairview Cemetery  
Dalton, Mass.

DATE OF BURIAL

Jan. 15, 1917

18 ADDRESS

(Address)

Dalton, Mass.

19 UNDERTAKER

Kenneley &amp; Hale

ADDRESS

Pittsfield

20 REGISTRAR