

DEATHS

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		County of <u>Wentworth</u>			Division of <u>Kitchener</u>		
		No. <u>211</u>	No. <u>212</u>	No. <u>213</u>			
Surname of Deceased		Kahl	Hoogk	Reichel			
Full given Name		Theobold S. 034295	Amelia 034296	August 034297			
Place of Death, street and number or If in a Hospital or Institution give name		18 Willow St.	100 Elm St.	77 Elgin St.			
(c) Sex, (d) Racial Origin, (e) Single, Married, Widowed		a <u>M</u> b <u>German</u> c <u>Married</u>	a <u>F</u> b <u>German</u> c <u>Single</u>	a <u>M</u> b <u>German</u> c <u>Single</u>			
Age		63 yrs. 1 mos. 2 dya. hrs. min.	66 yrs. 4 mos. 30 dya. hrs. min.	81 yrs. 3 mos. 7 dya. hrs. min.			
(c) Place of Birth (d) Date of Birth		a <u>Woolwich Twp.</u> b <u>July 1, 1863</u>	a <u>Kitchener, Ont.</u> b <u>March 5, 1860</u>	a <u>Germany</u> b <u>May 1, 1845</u>			
Trade or Occupation		Button Worker, Roschman Button Co.	Dressmaker	Laborer			
Kind of Industry							
Date from which to which employed							
Length of Residence at place of death		60 yrs. in Ontario	63 yrs. in Ontario	63 yrs. in Canada	Life at place of death	Life in Ontario	Life in Canada
Name of Father		George Kahl	George Philip Hoogk	Not Known			
Birthplace of Father		Germany	Germany	Not Known			
Maiden Name of Mother		Margaret Schierholts	Elisabeth Heller	Not Known			
Birthplace of Mother		Germany	Germany	Not Known			
Name of Physician		Dr. R. W. Schnarr	Dr. J. E. Hett	Dr. L. J. Crowley			
Address		Kitchener, Ont.	Kitchener, Ont.	Kitchener, Ont.			
Name of Informant		Mrs. T. S. Kahl	P. Hoogk	Miss Gusta Reichel			
Address		18 Willow St., Kitchener, Ont.	100 Cedar St. S., Kitchener	77 Elgin St., Kitchener, Ont.			
Relation to Deceased		Wife	Brother	Daughter			
Place of Burial		Mt. Hope Cemetery, Kitchener, Ont.	East End Lutheran Cemetery Kitchener, Ont.	Mt. Hope Cemetery, Kitchener			
Date of Burial		August 4, 1926.	Aug. 6, 1926.	Aug. 10, 1926.			
Name of Undertaker		L. Seibert, Schreibers Ltd.	L. Seibert, Schreibers Ltd.	Edward Class			
Address		Kitchener, Ont.	Kitchener, Ont.	Kitchener, Ont.			
Cause of Death if no Physician attended							
Date of Death		August 2, 1926.	August 4, 1926.	August 8, 1926.			
Name of Deceased		MEDICAL CERTIFICATE OF DEATH Kahl, Theobold S.	MEDICAL CERTIFICATE OF DEATH Hoogk, Amelia	MEDICAL CERTIFICATE OF DEATH Reichel, August			
Date of Death		August 2, 1926.	August 4, 1926.	August 8, 1926.			
Date from which to which Medical Practitioner attended Deceased		from <u>Oct. 1925</u> to <u>July 31/26</u>	from <u>June 1, 1923</u> to <u>Aug. 4, 1926.</u>	from <u>Aug. 6/26</u> to <u>Aug. 1</u>			
Primary Cause of Death		Tumor of the Prostate	Anaemia	Obstructive Jaundice			
Duration		1 yrs. mos. dya.	2 yrs. 2 mos. dya.	yrs. 6 mos. dya.			
Contributory Cause of Death		Anaemia and Marasmus	Gastritis	Carcinoma of Liver			
Duration		yrs. 6 mos. dya.	yrs. mos. 3 dya.	1 yrs. mos. dya.			
(a) Did an operation precede death?		a <u>No</u> b <u>NO</u>	a <u>No</u> b <u>No</u>	a <u>No</u> b <u>1</u>			
(b) Was there an autopsy?							
Name of Physician		Dr. R. W. Schnarr	Dr. J. E. Hett	Dr. L. J. Crowley			
Address		Kitchener, Ont.	Kitchener, Ont.	Kitchener, Ont.			
Date of Return		August 3, 1926.	August 5, 1926.	August 10, 1926.			
Date received by Division Registrar		Aug. 3, 1926.	August 5, 1926.	August 10, 1926.			

I certify that the foregoing are correct Registrations of Deaths made to me during the month of August 1926 at Kitchener, Ont.
 D.R. or Sub-Registrar. Address _____