

# REGISTER

No.	Date of Report 1896	1. Name 2. Sex and Color.	1. Age 2. Occupation.			DATE OF DEATH.			Single, Married, Widower or Widow.	1. Nationality 2. Where Born.		How long Resident in this State. YEAR							
			1. Year	Month	Days	Month	Day	Year.		L. E. & P. E.	1.		2.	1.	2.				
	Sept 10	1 S. H. Servitt 2 Sex, Male Color, White	1	Year	Month	Days	86	Sept	21	1896	Widower	1	New Jersey	11	1	Walt	2	Joseph	
	Sept 22	1 Joseph Miller 2 Sex, Male Color, White	1	Year	Month	Days	17	Aug	26	1896	Single	1	American	17	1	Har	2	Lyf.	
	Oct 5	1 Theresia Henscher Jr. 2 Sex, Female Color, White	1	Year	Month	Days	22	Sept	2	1896	Married	1	Bavaria		1	7. Ho	2	Phille	
	Oct 5	1 Mrs. Ediga Wahnsch 2 Sex, Female Color, White	1	Year	Month	Days	46	Sept	3	1896	Married	1			1	7. Ho	2	Lyf.	
	Oct 5	1 Rachel Schiffer 2 Sex, Female Color, White	1	Year	Month	Days	65	Sept	8	1896	Married	1			1	7. Ho	2	Accu	
	Oct 5	1 Mattie Evans 2 Sex, Female Color, White	1	Year	Month	Days	23	Sept	12	1896	Married	1	Kentucky		1	7. Ho	2	Lyf.	
	Oct 5	1 Mary Janeat 2 Sex, Female Color, White	1	Year	Month	Days	24	Sept	20	1896	Single	1	German		1	7. Ho	2	Lyf.	
	Oct 5	1 Miss Elora Johnson 2 Sex, Female Color, White	1	Year	Month	Days	25	Sept	28	1896	Single	1	Illinois		1	7. Ho	2	Lyf.	
	Oct 5	1 Rosa Paitel 2 Sex, Female Color, White	1	Year	Month	Days	30	Sept	28	1896	Married	1	Ill		1	7. Ho	2	Ph	
	Oct 7	1 Fattie Boyd 2 Sex, Girl Color, White	1	Year	Month	Days	2	10	Sept	1	1896	Single	1	Scotch Irish	2	1	7. Ho	2	Wes
	Oct 7	1 John Thomson 2 Sex, Male Color, White	1	Year	Month	Days	49	Sept	1	1896	Widower	1	Germany		1	7. Ho	2	Lyf.	
	Oct 7	1 Ed G. Guey 2 Sex, Male Color, White	1	Year	Month	Days	28	Sept	6	1896	Single	1	Ireland		1	7. Ho	2	Lyf.	
	Oct 7	1 Samuel Netherburn 2 Sex, Male Color, White	1	Year	Month	Days	58	Sept	7	1896	Widower	1	U.S.		1	7. Ho	2	Lyf.	

# OF DEATHS.

Nationality Where Born	How long Resident in this State.	1. Place of Death.		1. Completion.			1. Place of Burial.		Name of Undertaker.	Name and Residence of Physician Relieving Certificate.
		1. Cause of Death	2. Duration of Complication.	2. Duration of Complication.	3. Duration of Disease.	2. Date of Burial.	3. Name of Undertaker.			
	11	1 Waldron Illinois	1	1 Waldron Ill.	1	J. Speicher	E. L. Beckner			
		2 Impassible of old age		2 Sept 6 '96	2	Hankakee	Waldron Ill.			
			3 One month							
	17	1 Hankakee	1	1 7/8 1/2	1		W. Magruder			
		2 Typhoid fever		2 Aug 25 1896	2		7/8 1/2			
			3 21 days							
		1 Hospital Ill.	1	1 Chatsworth Ill.	1		Dr. M. Savenport			
		2 Phthisis Pulmonalis		2	2		Hospital Ill.			
			3							
		1 Hospital Ill.	1	1 Peru Ill.	1		Dr. M. Savenport			
		2 Typhoid fever		2	2		Hospital Ill.			
			3							
		1 Hospital Ill.	1	1 Isabel Ill.	1		G. H. Bradley			
		2 Acute Dysentary		2	2		Hospital Ill.			
			3							
		1 Hospital Illinois	1	1 Hospital Ill.	1		G. H. Bradley			
		2 Typhoid Fever		2	2		Hospital Ill.			
			3 2 weeks							
			3							
			3							
		1 Hospital Ill.	1	1 Hospital	1		G. H. Bradley			
		2 Typhoid Fever		2	2		Hospital Ill.			
			3 2 weeks							
			3							
		1 Hospital Illinois	1	1 Onskall Ill.	1		G. H. Bradley			
		2 Typhoid fever		2	2		Hospital Ill.			
			3 4 weeks							
			3							
		1 Hospital	1	1 Chicago Ill.	1		G. H. Bradley			
		2 Phthisis pulmonalis		2	2		Hospital Ill.			
			3							
		1 Glauke City	1	1 Brindwood	1	Hassmeyer	Dr. E. Porter			
	2	2 Membrane of Spleen		2 Three days	2	Sept. 30	Essex Ill.	Glauke City		
			3 One day							
		1 I. E. H. I.	1	1 Terminal Dementia	1	Hospital	J. W. Walker			
		2 Cerebral Dementia		2 Four years	2	Cemetery	I. E. H. I.			
			3							
		1 I. E. H. I.	1	1 Terminal Dementia	1	Hospital	J. W. Walker			
		2 Cerebral Dementia		2 unknown	2	Cemetery	I. E. H. I.			
			3 5 days							
		1 I. E. H. I.	1	1 Terminal Dementia	1	Hospital	J. W. Walker			
		2 Cerebral Dementia		2 4 years	2	Cemetery	I. E. H. I.			
			3							