				in the	County	of lety	Me	Min		· · · ·	
No. (1)	Date and Place of Death (2)	Name and Surname (3)	Sex (4)	Condition (5)	Age last Birthday (6)	Occupation	Certified Cause of Death and Duration of Illness (8)	Residence of Informant	1	Signature of Registrar	
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		Witness	my hand	, this	· · ·	12 day	of	rue 19/7			"Assistant" or "Ir terim" as the cas may be.
	have examined the above	and have remained 1.1		orid Outside 1 To - 1	ofnova T	de and l	-my	Witness my hand, this		*Registrer.	