Supe	erintendent Reg	gistrar's Distri	ct	Go	71-		Registrar's	District	fort-	
189	DEATHS	S Registered in				Gort-		nion of \mathcal{L}	M-	
	1	·	in t	he Count	y	of Gal	way			· · · · · · · · · · · · · · · · · · ·
No. (1.)	Date and Place of Death. (2.)	Name and Surname.	Sex. (4.)	Condition. AB	ge last irthday (6.)	Rank, Profession, or Occupation. (7.)	Certified Cause of Death and Duration of Illness. (8.)	Signature, Qualification ar Residence of Informant. (9.)	When Registered	Signature of Registrar.
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of	I have examined to	18.90	ubaren 16 Alth	t the said origin	nar æegn	sorar s Dook, and here	eby certify that it is a	true Copy. Witness		day
-	V	Ť						(/ ·//.	> Nuperin	tendent Registrar.