1 PLACE OF DEATH

STATE OF NEW YORK

Department of Health of The City of New York

BUREAU OF RECORDS

CERTIFICATE OF DEATH

BOROUGH OF Bronx

No. 1271 Hoe Av St.

Character of premises, whether tenement, private, hotel, hospital or other place, etc. Tenement

Registered No. 7201

2 FULL NAME Jacob Glickstein

3 SEX: Male	4 COLOR OR RACE: White
5 SINGLE, MARRIED, WIDOWED, OR DIVORCED (Write the word): Married	
6 DATE OF BIRTH: Aug (Month) 16 (Day), 1841 (Year)	
7 AGE: 76 yrs. 2 mos. 19 ds.	IF LESS than 1 day, ___ hrs. or ___ min.?
8 OCCUPATION (a) Trade, profession, or particular kind of work: Bookkeeper	
(b) General nature of industry, business or establishment in which employed (or employer): Bottles	
9 BIRTHPLACE (State or country): Austria	
10 (a) How long in U.S. (if of foreign birth): 15 yrs.	(b) How long resident in City of New York: 15 yrs.
11 NAME OF FATHER: Samuel Glickstein	
12 BIRTHPLACE OF FATHER (State or country): Austria	
13 MAIDEN NAME OF MOTHER: Don't know	
14 BIRTHPLACE OF MOTHER (State or country): Galicia	

16 Special INFORMATION required in deaths in hospitals and institutions and in deaths of non-residents and recent residents.

Former or usual residence ___

15 DATE OF DEATH: November (Month) 4 (Day) 1917 (Year)

16 I hereby certify that the foregoing particulars (Nos. 1 to 14 inclusive) are correct as near as the same can be ascertained, and I further certify that I attended the deceased from August 20 1917 to November 4 1917, that I last saw him alive on the 3rd day of November 1917, that death occurred on the date stated above at 7 A.M., and that the chief and determining cause of death was: Chronic Valvular Disease of [illegible]

duration 1 yrs. — mos. — days.

That the contributory causes were: Acute Aortic rheumatism, [illegible] + arterio-sclerosis

That autopsy was performed and the findings were: ___

Witness my hand this 4th day of Nov 1917

Signature H. M. Moritz, M. D.

Address 417 West 145th St.

FILED	17 PLACE OF BURIAL	DATE OF BURIAL
NOV 4 1917	Mt Lebanon Cem.	Nov 4 1917
	18 UNDERTAKER: M Yonnin	ADDRESS: 203 E. [illegible]