

SCHEDULE C-DEATHS

County of *Persh* Division of *Fullarton*

No.	No.	No.
014001	014002	014003
Name and Surname of Deceased. <i>Duncan Brown</i>	Name and Surname of Deceased. <i>Ernest Hay</i>	Name and Surname of Deceased. <i>Milton Cleveland Kramer</i>
When Died. <i>July 4th 1893</i>	When Died. <i>August 16th 1893</i>	When Died. <i>September 16th 1893</i>
Sex—Male or Female. <i>M</i>	Sex—Male or Female. <i>M</i>	Sex—Male or Female. <i>M</i>
Age. <i>70 yrs</i>	Age. <i>22 yrs. 8 mos</i>	Age. <i>9 months 10 days</i>
Rank or Profession. <i>Farmer</i>	Rank or Profession. <i>2d Farrier, Son</i>	Rank or Profession. <i>Farmer</i>
Where Born. <i>Scotland</i>	Where Born. <i>Ontario</i>	Where Born. <i>Dakota U. S.</i>
Certified Cause of Death and duration of illness. <i>Heart Disease Several years</i>	Certified Cause of Death and duration of illness. <i>Shock following amputation of thigh for tubercular disease Several yrs</i>	Certified Cause of Death and duration of illness. <i>Summer Complaint 2 weeks</i>
Name of Physician, (if any). <i>Dr Wood</i>	Name of Physician, (if any). <i>Dr Armstrong</i>	Name of Physician, (if any). <i>Dr Smith L. Meyer</i>
Signature, Description and Residence of Informant. <i>E. G. Wood</i>	Signature, Description and Residence of Informant. <i>W. Armstrong, Fullarton</i>	Signature, Description and Residence of Informant. <i>Farmer, Fullarton</i>
When Registered.	When Registered.	When Registered.
Religious Denomination of Deceased. <i>Presbyterian</i>	Religious Denomination of Deceased. <i>Presbyterian</i>	Religious Denomination of Deceased. <i>parents, Evan, Assoc.</i>
Signature of Registrar. <i>J. D. Wilson</i>	Signature of Registrar. <i>J. D. Wilson</i>	Signature of Registrar. <i>J. D. Wilson</i>

REMARKS.

No.	No.	No.
014004	014005	014006
Name and Surname of Deceased. <i>Sarah Mahaffey</i>	Name and Surname of Deceased. <i>Meda Blanch Pym</i>	Name and Surname of Deceased. <i>Barbara Clark</i>
When Died. <i>September 22nd 1893</i>	When Died. <i>September 30th 1893</i>	When Died. <i>November 24th 1893</i>
Sex—Male or Female. <i>F</i>	Sex—Male or Female. <i>F</i>	Sex—Male or Female. <i>F</i>
Age. <i>80 yrs</i>	Age. <i>18 days</i>	Age. <i>76 yrs</i>
Rank or Profession. <i>Widow</i>	Rank or Profession. <i>Farmers Child</i>	Rank or Profession. <i>Widow</i>
Where Born. <i>Ireland</i>	Where Born. <i>Ontario</i>	Where Born. <i>Scotland</i>
Certified Cause of Death and duration of illness. <i>Old age</i>	Certified Cause of Death and duration of illness. <i>Cholera Morbus 10 days</i>	Certified Cause of Death and duration of illness. <i>Old age Several yrs</i>
Name of Physician, (if any). <i>Dr Wood</i>	Name of Physician, (if any). <i>Dr Young</i>	Name of Physician, (if any). <i>Dr Armstrong</i>
Signature, Description and Residence of Informant. <i>Daniel Mahaffey Farmer, Fullarton</i>	Signature, Description and Residence of Informant. <i>Wm Pym Farmer Fullarton</i>	Signature, Description and Residence of Informant. <i>J. D. Stewart Traveller Knessdale</i>
When Registered.	When Registered.	When Registered.
Religious Denomination of Deceased. <i>Presbyterian</i>	Religious Denomination of Deceased. <i>parents, Methodist</i>	Religious Denomination of Deceased. <i>Presbyterian</i>
Signature of Registrar. <i>J. D. Wilson</i>	Signature of Registrar. <i>J. D. Wilson</i>	Signature of Registrar. <i>J. D. Wilson</i>

REMARKS.