

Ontario Vital Statistics Death Registration Form 1869-1895

	General No.	General No.
Microfilm #		
Registration #		
County		
Division		
Name and Surname of Deceased		
When Died		
Sex - Male or Female		
Age		
Rank or Profession		
Where Born		
Certified Cause of Death, and duration of		
Name of Physician, if any		
Signature, description and residence of		
When Registered		
Religious Denomination of Deceased		
Signature of Registrar		
Remarks		