

1 PLACE OF DEATH

STATE OF NEW YORK

Department of Health of The City of New York

BOROUGH OF Brooklyn

BUREAU OF RECORDS

STANDARD CERTIFICATE OF DEATH

Name of Institution Kings Co. Hospital

Register No. 22165

2 FULL NAME Michael J. Coogan

3 SEX Male 4 COLOR OR RACE white 5 SINGLE, MARRIED, WIDOWED, or DIVORCED Single

15 DATE OF DEATH Dec 7 1924

6 DATE OF BIRTH (Month) (Day) (Year)

7 AGE 64 yrs. 6 mos. 1 day. 1 hr. 0 min.

8 OCCUPATION (a) Trade, profession or particular kind of work Retired (b) General nature of industry, business or establishment in which employed (or employer)

9 BIRTHPLACE (State or country) U.S.

(A) How long in U. S. (if of foreign birth) (B) How long resident in City of New York Life

10 NAME OF FATHER Patrick Coogan

11 BIRTHPLACE OF FATHER (State or country) Ireland

12 MAIDEN NAME OF MOTHER Anna

13 BIRTHPLACE OF MOTHER (State or country) Ireland

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

Former or usual residence } 785 Myrtle Ave.

Where was disease contracted, if not at place of death?

16 I hereby certify that the foregoing particulars (Nos. 1 to 15 inclusive) are correct as near as the same can be ascertained, and I further certify that deceased was admitted to this institution on Dec 5 1924, that I last saw him alive on the 7 day of Dec 1924, that he died on the 7 day of Dec 1924, about 9:40 o'clock A. 11 P. M., and that I am unable to state definitely the cause of death; the diagnosis during his last illness was:

Chronic Corneo Valvular Disease duration yrs. mos. ds.

Contributory (Secondary) duration yrs. mos. ds.

Witness my hand this 8 day of Dec 1924 Signature W. H. Magee M.D. House Kings Co. Hospital

17 I hereby certify that I have this 8 day of 19, performed an autopsy upon the body of said deceased, and that the cause of his death was as follows:

Signature _____ M. D.

Pathologist _____ Hospital

FILED DEC 9 - 1924

18 PLACE OF BURIAL St. Johns Cemetery

DATE OF BURIAL Dec. 10, 1924

19 UNDERTAKER Chas. J. Sheehan

ADDRESS 1114 E. 34th St

1779