

Scheffer, Margareth 1898 - 1899

DEPARTMENT OF HEALTH, CITY OF COVINGTON.	
Name of Child.	Margreth Scheffer
Sex.	female
Color or Race.	white.
Date of Birth.	November 3. 1898
Place of Birth.	829 Bakewell str.
Ward.	
Full Name of Father.	William Scheffer
Father's Residence.	829 Bakewell str.
Father's Birthplace.	Germany
Father's Occupation.	Driver
Full Name of Mother.	Philomena Scheffer
Mother's Residence.	829 Bakewell str.
Mother's Maiden Name.	Mrs. Lambers.
Mother's Birthplace.	Cincinnati O.
Remarks:	

No. 9824
475
Report of a BIRTH, Attended by
Signature: *Wm. Lambers*
Date: November 3. 1898
Address: 829 Bakewell str.

Scheffer, Margareth 1898 - 1899

CITY OF COVINGTON, KY.
DEPARTMENT OF HEALTH. No.
BUREAU OF VITAL STATISTICS.

No. 2276
CERTIFICATE OF DEATH. 313

1.—Full name of deceased Margare Schaffer

2.—*White, Colored. 3.—*Male, Female. 4.—Age, years, 5 months, days.

5.—*Single, Married, Widower, Widow. 6.—Occupation,

7.—Place of birth, Italy 8.—If foreign born, how long in U. S. years.

9.—How long resident in city, Life years. 10.—Father's Name, Max Schaffer

11.—Father's birthplace, Germany 12.—Mother's Name, Philomena

13.—Mother's birthplace, U. S.

14.—Place of death, No. 819 Bakerwell St Ward

15.—Place of Residence, No. 819 " " " " Ward

16.—Private, Tenement, Public Institution. 17.—Date of death, April 11-1899

18.—Cause of death, { Remote or Predisposing Diphtheria
Immediate Memoritis

19.—Duration of last illness, 20.—I certify that I attended the above named in last illness.

1.—Date of interment, April 12 1899 M. H. Crosswell M. D.

2.—Place of interment, St. Marys Cem. Covington Address

3.—Name of Undertaker, William Schaeffer

DO NOT DRAW A LINE THROUGH WORDS NOT REQUIRED.