

[FORM to be used for making out Occasional Copies of Entries of DEATHS for transmission to the Registrar-General, and for no other purpose.]

04657896A

DEATHS Registered in the District of <u>Ballyvaughan</u> in the Union of <u>County Wick</u> in the County of <u>Wick</u>										
No.	Date and Place of Death.	Name and Surname.	Sex.	Condition.	Age last Birth-day.	Rank, Profession, or Occupation.	Certified Cause of Death, and Duration of Illness.	Signature, Qualification, and Residence of Informant.	When Registered.	Signature of Registrar.
(1.)	(2.)	(3.)	(4.)	(5.)	(6.)	(7.)	(8.)	(9.)	(10.)	(11.)
106	1827. Eighteenth November Ballyvaughan	Robert Henry Bailie	Male	Healthy	3	Labourer's Child	Whooping Cough 10 days Certified	Mary Bailie Mother Present at death Ballyvaughan	Thirtieth November 1827	J. Dickson Registrar

I, J. Dickson Registrar of Births and Deaths in the District of Ballyvaughan in the Union of County Wick in the County of Wick do hereby certify that this is a true copy of the Entry No. 106 in the Registrar's Book of Deaths, within the said District. Witness my hand this 10th day of September 1828

J. Dickson Registrar.

I have examined the above, and have compared it with the said original Registrar's Book, and hereby certify that it is a true Copy. Witness my hand this 10th day of September 1828

[Deaths S.]

J. W. Murphy Superintendent Registrar.

nta