GR 2951 BRITISH COLUMBIA. DIVISION OF VITAL STATISTICS.
Volume 592 Death registrations 004501 to 005000

OD AREA No. 4

FORM 6

This form if placed in an envelope, marked "Dominion Statistics Free, penalty for improper use $300," and properly addressed will pass through the mail "FREE"

PROVINCE OF BRITISH COLUMBIA—REGISTRATION OF DEATH

Registered No. 4751
For use of the Registrar of Births, Deaths and Marriages only

1. PLACE OF DEATH { If in Rural Municipality Sechelt
If in City, Town or Village Sechelt (Name) Street at home House No.
(If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY (in years, months and days)
(a) In Municipality where death occurred 23 years (b) In Province B.C. (c) In Canada (if immigrant) 28 years

3. NAME OF DECEASED Kean (Surname) Martha (Given name or names)

RESIDENCE No. Street City, town, village or rural municipality Sechelt Province B.C.
(Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)

4. SEX	5. NATIONALITY (Citizenship)	6. RACIAL ORIGIN	7. Single, Married, Widowed or Divorced (Write the word)
female	Canadian Scotch	Scotch	Widowed

8. BIRTHPLACE Ayrshire Scotland (Province or Country)

9. DATE OF BIRTH 14th March 1858 (Month) (Day) (Year)

10. AGE in

Years	Months	Days	If less than one day old
83	4	3	....hrs. or ....min.

OCCUPATION

11. Trade, profession or kind of work as **spinner, teamster, office clerk** etc. Woman suffer

12. Kind of industry or business, as **cotton mill, lumbering, bank,** etc.

13. Date deceased last worked at this occupation

14. Total years spent in this occupation

15. If married give name of wife or husband of deceased Robert Kean

FATHER

16. NAME Robert Kean

17. BIRTHPLACE Scotland (Province or Country)

MOTHER

18. MAIDEN NAME Martha Kean

19. BIRTHPLACE Scotland (Province or Country)

20. Signature of informant Alex Kean
Address Sechelt
Relationship to deceased Son

21. Place of Burial, Cremation or Removal Sechelt
Date of burial or removal July 19th /41

22. UNDERTAKER Nunns & Pleasance Vancouver (Name and address)

MEDICAL CERTIFICATE OF DEATH

23. DATE OF DEATH July (Month) 17th (Day) 1941 (Year)

24. I HEREBY CERTIFY that I attended deceased from:
May 23rd 1941 to July 17th 1941
and last saw h.. alive on July 17th 1941

CAUSE OF DEATH

I. **Immediate cause** Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc. (a) Congestive heart failure
due to
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause). (b) Chronic Myocarditis
due to
(c)

II. **Other morbid conditions** (if important) contributing to death but **not causally related to immediate cause.** Hypertension

93D

25. If a woman, was the death associated with pregnancy? No

26. Was there a surgical operation? No Date of operation — 19..
State findings — Was there an autopsy? No

27. If death was due to external causes (violence) fill in also the following:—
Accident, suicide or homicide? (State which) Date of injury 19..
Manner of injury (How sustained)
Nature of injury
Specify whether injury occurred in **industry,** in **home,** or in **public place**

Signed by A. Watson **M.D.**
Address Sechelt, B.C. **Date** July 18th 1941

28. District Registrar's Record Number 20(240

29. Filed July 24th 1941 Deputy (District Registrar)

WRITE PLAINLY WITH UNFADING INK
THIS IS A PERMANENT RECORD
Every item of information should be carefully supplied

Sec. 46—Vital Statistics Act makes it the duty of the Undertaker or person acting as Undertaker to obtain all the particulars required in the "Certificate of Registration of Death" and to file the same with the District Registrar who shall issue the burial permit.

(SEE REVERSE SIDE FOR INSTRUCTIONS)