

*Death Record for John Kurpiel*  
*Son of Mateusz Kurpiel & Katarzyna Nowak*

The Commonwealth of Massachusetts			303
STANDARD CERTIFICATE OF DEATH			
PLACE OF DEATH		(City or town.)	
(No. <u>161 Millbury</u> St. <u>        </u> Ward)		[If death occurred in a hospital or institution, give its NAME instead of street and number.]	
FULL NAME <u>John Kurpiel</u>			
[If married or divorced woman or widow give maiden name, also name of husband.]			
RESIDENCE <u>Worcester</u>		Registered No. <u>        </u>	
PERSONAL AND STATISTICAL PARTICULARS		MEDICAL CERTIFICATE OF DEATH	
SEX <u>Male</u>	COLOR OR RACE <u>W</u>	DATE OF DEATH <u>Dec 20, 1912</u>	
SINGLE, MARRIED, WIDOWED, OR DIVORCED (Write the word) <u>Single</u>		(Month) (Day) (Year)	
DATE OF BIRTH <u>Oct 30, 1912</u>		I HEREBY CERTIFY that I attended deceased from <u>Dec 17, 1912</u> , to <u>Dec 20, 1912</u> , that I last saw him alive on <u>Dec 20, 1912</u> and that death occurred, on the date stated above, at <u>6 p.m.</u>  The CAUSE OF DEATH* was as follows: <u>Broncho-pneumonia.</u>	
AGE <u>1</u> yrs. <u>20</u> mos. <u>        </u> ds. or <u>        </u> min.?			
OCCUPATION (a) Trade, profession, or particular kind of work <u>        </u> (b) General nature of industry, business, or establishment in which employed (or employer) <u>        </u>			
BIRTHPLACE (State or country) <u>Worcester</u>		(Duration) <u>        </u> yrs. <u>        </u> mos. <u>4</u> ds. Contributory (SECONDARY) <u>        </u> (Duration) <u>        </u> yrs. <u>        </u> mos. <u>        </u> ds. (Signed) <u>Peter O'Shea</u> , M.D. <u>Dec 21, 1912</u> (Address) <u>Worcester</u>	
NAME OF FATHER <u>Mateus</u>		* If death followed injury or violence the certificate of death must be made out by the Medical Examiner. LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRANSIENTS, OR RECENT RESIDENTS), At place of death <u>        </u> yrs. <u>        </u> mos. <u>        </u> ds. In the State <u>        </u> yrs. <u>        </u> mos. <u>        </u> ds. Where was disease contracted, if not at place of death? <u>        </u> Former or usual residence <u>        </u>	
BIRTHPLACE OF FATHER (State or country) <u>Austria</u>			
MAIDEN NAME OF MOTHER <u>Katarzyna Nowak</u>			
BIRTHPLACE OF MOTHER (State or country) <u>Austria</u>		PLACE OF BURIAL OR REMOVAL <u>Worcester</u> DATE OF BURIAL <u>Dec 21, 1912</u> UNDERTAKER <u>Lucian Karolkewicz</u> ADDRESS <u>Worcester</u>	
THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) <u>Mateus Kurpiel</u> (Address) <u>Worcester</u> Filed <u>Dec 23, 1912</u> REGISTRAR			