

CERTIFICATE OF DEATH

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1 PLACE OF DEATH: BOROUGH OF Brooklyn CERTIFICATE No. 3887
No. 260 Milford Street Ave. Character of premises, whether tenement, private, hotel, etc. Tenement2 FULL NAME (PRINT) ISAAC First Name Middle Name Last Name MADANSKY3 Residence (usual place of abode) (If nonresident, give place and State) No. 260 Milford Street Ave. St. Borough of Brooklyn

PERSONAL AND STATISTICAL PARTICULARS

4 SEX M 5 COLOR OR RACE W 6 SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word) Widowed6A WIFE } OF Mary Madansky
HUSBAND }7 DATE OF BIRTH OF DECEDENT Exact date unknown
(Month) (Day) (Year)8 AGE OF DECEDENT 68 yrs. mos. da. or min. ?
If LESS than 1 day hrs.9 OCCUPATION
A Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Contractor
B Industry or business in which work was done, as silk mill, sawmill, bank, etc. Building
C Date deceased last worked at this occupation (month and year) 1930 D Total time (years) spent in this occupation 2010 BIRTHPLACE (State or country) Russia11 How long in U. S. (if of foreign birth) 62 yrs 12 How long resident in City of New York 62 yrs.PARENTS OF DECEASED
13 NAME OF FATHER OF DECEDENT Perach Madansky
14 BIRTHPLACE OF FATHER OF DECEDENT (State or country) Russia
15 MAIDEN NAME OF MOTHER OF DECEDENT Reitza
16 BIRTHPLACE OF MOTHER OF DECEDENT (State or country) Russia17 INFORMANT son21 PLACE OF BURIAL Mount Lebanon Cem.22 UNDERTAKER Jewish Memorial Chapel Inc.

MEDICAL CERTIFICATE OF DEATH

18 DATE OF DEATH February 17, 19 40
(Month) (Day) (Year)19 I HEREBY CERTIFY, That I attended the deceased from January 7, 1940, to February 17, 1940
I last saw him alive on February 17, 1940; death is said to have occurred on the date stated above, at 11:50 A. m.The principal cause of death and related causes of importance were as follows: Duration
Coronary Sclerosis 1 yr.
Cerebral Sclerosis 1 yr.
Other contributory causes of importance:
Lobar Pneumonia 1 day

Name of operation

Date

What test confirmed diagnosis?

Was there an autopsy? noSignature Philip J. O'Connell, M. D.Address 1101 Ditmars Ave BklynDATE OF BURIAL Feb. 18, 19 40ADDRESS 1406 Pitkin Ave

TO FUNERAL DIRECTORS

Regulation 3, Section 46 of the Sanitary Code, provides that—

"No permit to remove, ship, cremate or bury the remains *** will be issued unless the funeral director applying for a permit shall sign his name **** and shall certify in writing that he has been employed by the nearest surviving relative next of kin."

FUNERAL DIRECTOR'S CERTIFICATE

I hereby certify that I have been employed, without any solicitation on my part or that of any other person, as undertaker to dispose of the remains of Isaac Madansky

by Eva Klein of 276 Exeter St.

who is the Daughter (Relationship) and the nearest surviving relative or next of kin of the deceased.

This statement is made to obtain a permit for the burial or cremation of the remains of the deceased.

(Signature) A. S. Misickoff Business Address 1406 Pitkin Ave Permit No. 27

If another undertaker in your employ is to take personal charge of the work in the care, preparation, or other disposition of such dead human body, give his name. _____ State License No. _____

Caskets containing bodies of persons dead from certain communicable diseases must be permanently sealed before removal from the place of death. Section 103 of the Sanitary Code of the Board of Health requires that every undertaker engaged for, or in charge of, the preparation and burial of the body of a person who died in the City of New York from any of the following diseases: Asiatic Cholera, Diphtheria, bubonic plague, acute anterior poliomyelitis (infantile paralysis), scarlet fever (Scarlatina) and smallpox (variola)—shall immediately place the body in a coffin or casket and permanently close and seal it with seals provided for the purpose by the Department of Health.

Removal of bodies prohibited without permit.—The regulations of the Board of Health prohibit the removal of the body of a human being who died in the City of New York, unless a permit therefor has been obtained from the Department of Health, except when such removal is ordered in connection with an investigation conducted by the Office of the Chief Medical Examiner, a District Attorney or the Police Department.

Permission to remove dead bodies granted by telephone. In keeping with these regulations, the Department of Health will grant to funeral directors by telephone, permission for the removal of a body to a home or funeral chapel, provided the application is made by a licensed undertaker who has in his possession at the time of telephoning, the following documents: (a) the certificate of death and (b) the physician's supplementary certification.

PHYSICIAN'S SUPPLEMENTARY CERTIFICATION

(Required in Connection with Telephone Application for Removal Permit.)

DEATHS THAT ARE EVEN REMOTELY ASSOCIATED WITH AN EARLIER ACCIDENT, MUST BE REFERRED TO THE MEDICAL EXAMINER.

If death has not been contributed to or caused by homicide, suicide, accident, acute or chronic poisoning, abortion, puerperal sepsis, or any suspicion of those conditions, and the funeral director desires to obtain removal permission by telephone, the physician will execute the following certification:—

I hereby certify that the death of Isaac Madansky

who died on February 17, 1940 (Date of Death), at 260 Milford St (Place of Death)

has not been contributed to or caused by any of the conditions mentioned in the above list.

Philip D. Carmel M.D. (Personal Signature of Physician), Address 1101 Dotson Ave

TO BE FILLED IN BY THE FUNERAL DIRECTOR

Date Feb. 17, 1940

Hour 4:05 (P)

Telephone Removal No. 31 granted by Russo

A. S. Misickoff (Burial Clerk)
(Undertaker)

77901
9-26-40
W.D.