No.	DESCRIPTION OF DECEASED			CAUSE OF DEATH	PARENTS	BURIAL	WHERE BORN	IF DECEASED WAS MARRIED		MAORI BLOOD AND TRIBE OF PARENTS	INFORMANT	REGISTRAR
	 When died. Where died. 	Name and Surname. Profession or Occupation. Usual place of residence.	1. Sex (M. or F.) 2. Age	 Causes of Death and Intervals between Onset and Death. Medical Attendant by whom certified. When he last saw Deceased (i.e., before death). 	Name and Surname of Father. Name and Surname of Mother. Maiden Surname of Mother. Profession or Occupation of Father.	When buried. Where buried.	Where born. How long in New Zealand.	Where married. At what Age married. To whom married. Age of Widow, if living.	If Issue living, state Ages each Sex	Degree of Maori blood (if any) and Tribe: (a) Deceased's Father. (b) Deceased's Mother.	 Signature (or name). Description. Residence. 	When Registered. Signature of Registrar.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
9	(1) 5 May 1967	(1) Jessie Mabel	⁽¹⁾ F	(l) Cerebrovascular	(1) Robert Gardiner	⁽¹⁾ 8 May 1967	(1)Wellington	(1) Palmerston North	M. 43	(a) Degree: -	H.E. Jones	
	(2) Public	BELL (2) Widow		accident - 12 hours Cerebral arterioscleros - many years	A	⁽²⁾ Tauranga		(2) 37		Tribe:	(2) Funeral Director	(I) 9 May 1967
1	/ Hospital Tauran		(2) 81	Hypertension - many (2) J.L. Wilson	(3)		(2) 81 years	(3) Horace Walsh Bell	F	(b) Degree:	(3) Tauranga	12: 0
/		Road, Tauranga			(4) —		, 0 000-	(4)		Tribe:		Registra

BIRTHS, DEATHS & MARGIAGES
Printout Copy Only
This is not a Certificate
2 2 NOV 2010

REGISTERED AT
REGISTRATION No. 1967 25641
REF No. 10 228333