U.S.S.R.

- - -

 Registrar's office at the <u>Skelevatskii</u> village Soviet
 Book # <u>5</u>

Of <u>Voznesenskii</u> <u>D</u>istrict <u>Zaporizhzhia</u> Region From year 192<u>5</u>.

People's Commissariat

RECORD OF DEATH # 5 (general)

#_1_ of men count # __ of female count

1. Date of the record entry	: "_ <u>7</u> " day of the month of <u>March</u> 192 <u>5</u> 2. Last name, first name, patronymic	
of the departed: <u>Wilm I</u>	van Ivanovich	
3. Gender <u>male</u> 4. Ag	ge (year, month, and day of birth, or number of years since birth)	
4a. If the departed is a chi	d under 1 year of age, specify year <u>1925</u> and month of its birth <u>3</u> .	
5. Place of residence	Region <u>Zapozizhzhia</u> District <u>Voznesenskii</u> Village <u>Iakovlevo</u>	
of the departed or	town street house #	
(Region <u>Zapozizhzhia</u> District <u>Voznesenskii</u> Village <u>Iakovlevo</u>	
6. Place of death	or town <u>Iakovlevo</u> street house #	
	If in a hospital, provide its name	
7. When died: 1925 in the month of <u>March</u> on the " <u>6</u> " day. 8. Family status of the departed <u>infant</u> .		
9. Ethnicity <u>German</u>	10. Main occupation	
	(for children under 10 years of age – occupation of the provider)	
11. Position in the job (labourer, clerk, owner or a helping member of family) <u>owner</u> .		
12. Cause of death	unknown 13. Registered as	
"dead-born" or "pronounc	ed dead"? (see foreign section III, article 4) <u>no</u> .	
Last name, first name, pat	conymic of the applicant <u>Wilm Ivan Ivanovich</u> .	
Applicant's address	_Iakovlevo, of <u>Iakovlevo village Soviet of Voznesenkii District</u>	
Names and numbers of the	documentsform from the village soviet under #	
Distinctive marks	none	

Signature of the

Head of the Registrar's Office ______.

Applicant

Registrator

Thiessen_____.