

STATE OF TEXAS CERTIFICATE OF DEATH

PLACE OF DEATH: **HARRIS** RESIDENCE: **TEXAS** **HARRIS**

CITY OR TOWN: **Houston** **Harris**

STREET ADDRESS: **161 Ashbury Place** **161 Ashbury Place**

PLACE OF DEATH INSIDE CITY LIMITS: RESIDENCE INSIDE CITY LIMITS: RESIDENCE ON A FARM:

1. NAME OF DECEASED: **JAMES FRANKLIN THOMAS** 14. DATE OF DEATH: **March 31, 1972**

2. SEX: **Male** 3. COLOR OF RACE: **White** 15. DATE OF BIRTH: **March 29, 1892**

4. USUAL OCCUPATION: **Maintenance Man** 6. KIND OF BUSINESS OR INDUSTRY: **Building** 16. BIRTHPLACE (State or foreign country): **Texas** 17. CITIZEN OF WHAT COUNTRY: **USA**

12. FATHER'S NAME: **Henry Thomas** 13. SOCIAL SECURITY NO.: **466-12-4081** 18. MOTHER'S MAIDEN NAME: **Ellen Peplies**

19. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c))

PART I. DEATH WAS CAUSED BY:

IMMEDIATE CAUSE (a) **Sudden death due to Ischemic Heart Disease**

CONDITION, IF ANY, WHICH PRECEDED ABOVE CAUSE (b) _____

CAUSE (c) _____

PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE CONDITION GIVEN IN PART I:

20a. ACCIDENT: SUICIDE: HOMICIDE: 20b. DESCRIBE HOW INJURY OCCURRED: _____

20c. TIME OF INJURY: _____

20d. INJURY OCCURRED: _____ 20e. PLACE OF INJURY (e.g., In or about home, farm, factory, street, office building, etc.): _____ 20f. CITY, TOWN, OR LOCATION: _____

21. SIGNATURE: **E. P. Wagner** Death occurred **Mar. 9, 1972** at **about 3:00 P.** on the date stated above, and to the best of my knowledge and belief was caused by _____

22. BURIAL, CREMATION, REMOVAL (Specify): **Removal/Burial** DATE: **Apr. 11, 1972** NAME OF CEMETERY OR CREMATORY: **Crestal Cemetery**

23. REGISTERED FUNERAL HOME: **Crockett** STATE: **Texas** ADDRESS: **Houston, Texas 1707 Sunset Blvd.** PHONE NO.: **4-5-72**

24. REGISTRAR'S FILE NO.: **3314** DATE REC'D BY LOCAL REGISTRAR: **APRIL 6, 1972** SIGNATURE: **A. A. Allen**

STATE OF TEXAS
COUNTY OF HARRIS

I HEREBY CERTIFY THAT THE ABOVE IS A PHOTOSTATIC COPY OF A CERTIFICATE AS FILED IN THE BUREAU OF VITAL STATISTICS, CITY HEALTH DEPARTMENT, HOUSTON, TEXAS

ISSUED **April 7, 1972**
DATE

A. A. Allen
LOCAL REGISTRAR