

STATE FILE NO.

1. PLACE OF DEATH & COUNTY: **Passaic**

2. CITY OF DEATH: **Clifton**

3. BOROUGHS: **Clifton**

4. FULL NAME OF DECEASED: **1347 corner Ave**

5. MEDICAL RESIDENCE: **2**

6. STREET ADDRESS: **1347 corner Ave**

7. CITY OF RESIDENCE: **Clifton**

8. BOROUGHS: **Clifton**

9. NAME OF DECEASED (First & Last): **Earl J. Hanson**

10. SEX: **Male**

11. COLOR OR RACE: **White**

12. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED: **Married**

13. USUAL OCCUPATION: **Wright Watchman**

14. FATHER'S NAME: **John P. Hanson**

15. DATE OF BIRTH: **Jan 19 1896**

16. PLACE OF BIRTH: **Hallbrook Mass.**

17. MOTHER'S MAIDEN NAME: **Jennie Reed**

18. INFORMANT: **Julius J. Hanson**

19. WAS DECEASED EVER IN U.S. ARMED FORCES? **Yes**

20. SOCIAL SECURITY NO.: **13790-9234**

21. CAUSE OF DEATH: **Coronary Thrombosis**

22. DISEASE OF CONDITION DIRECTLY LEADING TO DEATH: **Coronary Thrombosis**

23. ANTECEDENT CAUSES: **Atherosclerosis, Sclerotic Malike**

24. OTHER SIGNIFICANT CONDITIONS: **None**

25. MEDICAL CERTIFICATION: **Coronary Thrombosis**

26. DURATION OF ILLNESS: **2 years**

27. DURATION OF ILLNESS: **3 years**

28. DURATION OF ILLNESS: **9 years**

29. DATE OF OPERATION: **None**

30. MAJOR FINDINGS OF OPERATION: **None**

31. CITY, BOROUGHS OR TOWNSHIP: **Clifton**

32. COUNTY: **Passaic**

33. STATE: **N.J.**

34. ACCIDENT SUICIDE HOMICIDE: **None**

35. TIME OF INJURY: **None**

36. PLACE OF INJURY: **None**

37. INJURY OCCURRED: **None**

38. HOW DID INJURY OCCUR: **None**

39. I hereby certify that I attended the decedent from **Nov. 1952 to Aug. 19 1951**, that I last saw the decedent alive on **Aug. 19 1951**, and that death occurred at **6:20 P.M.** from **1951** cause and on the date stated above.

40. SIGNATURE: **Jacob Overbach, M.D.**

41. DATE: **Aug 22 1951**

42. NAME OF CLERK OR OPERATOR: **Caden Tamm**

43. ADDRESS: **465 Clifton Ave., Clifton N.J. 07011**

44. DATE SIGNED: **Aug 22 1951**

45. DATE REC'D BY LOCAL REG.: **Aug 21 1951**

46. REGISTRAR'S SIGNATURE: **W. H. Miller**

47. FURNERIAL DIRECTOR: **Andrew D. Mason**