

1. PLACE OF DEATH

STATE OF TEXAS

TEXAS DEPARTMENT OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF DEATH

41689

COUNTY OF HopkinsCITY OR VILLAGE City Sulphur Springs, Tex. Fore St.2. FULL NAME OF DECEASED G.R. Wilson, Sr.

GIVE STREET AND NUMBER OR NAME OF INSTITUTION

LENGTH OF RESIDENCE WHERE DEATH OCCURRED 13 YEARS MONTHS DAYS. (SOCIAL SECURITY NO.)RESIDENCE OF THE DECEASED { STREET AND NO. CITY Sul. Spr. COUNTY Hopkins STATE Tex.

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL PARTICULARS

3. SEX Male 4. COLOR OR RACE Wht.17. DATE OF DEATH Sept. 15, 19465. SINGLE, MARRIED, WIDOWED OR DIVORCED (WRITE THE WORD) Married18. I HEREBY CERTIFY THAT I ATTENDED THE DECEASED FROM 194 , TO 194 6. DATE OF BIRTH July 8 1901I LAST SAW HIM ALIVE ON 194 7. AGE YEARS 45 MONTHS 2 DAYS 7 IF LESS THAN 1 DAY HOURS MIN THE DEATH OCCURRED ON THE DATE STATED ABOVE AT M.

THE PRIMARY CAUSE OF DEATH WAS:

8A. TRADE, PROFESSION OR KIND OF WORK DONE Texaco AgentHeart Attact

DURATION

8B. INDUSTRY OR BUSINESS IN WHICH ENGAGED

9. BIRTHPLACE (STATE OR COUNTRY) Texas.

CONTRIBUTORY CAUSES WERE

10. NAME Levi Wilson11. BIRTHPLACE (STATE OR COUNTRY) Mo.12. MAIDEN NAME Joie Hughes13. BIRTHPLACE (STATE OR COUNTRY) Texas.14. SIGNATURE Mrs. G.R. Wilson,ADDRESS Sulphur Springs, TEXAS

IF NOT DUE TO DISEASE, SPECIFY WHETHER:

ACCIDENT, SUICIDE, OR HOMICIDE

DATE OF OCCURRENCE PLACE OF OCCURRENCE 15. PLACE OF BURIAL OR REMOVAL Trenton, TEXAS

MANNER OR MEANS IF RELATED TO OCCUPATION OF DECEASED, SPECIFY

DATE Sept. 17, 1946SIGNATURE No. 16 SIGNATURE Tapp Funeral Home (Tom Inglis)ADDRESS Sulphur Springs, TEXASADDRESS Sulphur Springs, TEXAS

20 FILE NUMBER

FILE DATE

SIGNATURE OF LOCAL REGISTRAR

POSTOFFICE ADDRESS

Oct. 4th 1946 Sulphur Springs, TEXAS

NOTE THE INFORMATION CALLED FOR ON THE REVERSE SIDE

