

22492

Texas State Board of Health

PLACE OF DEATH

County Travis

STANDARD CERTIFICATE OF DEATH

City Austin

Registered No. 45

(No. St. Ward)
(If death occurred in a hospital or institution, give its NAME instead of street and number.)

26328

FULL NAME James L. Fitcher Stark

PERSONAL AND STATISTICAL PARTICULARS

SEX Male COLOR OR RACE White SINGLE, MARRIED, WIDOWED, OR DIVORCED Single
(Write the words)

DATE OF BIRTH Dec 2 1913
(Month) (Day) (Year)

AGE 10 yrs. mos. ds.

OCCUPATION
(a) Trade, profession, or particular kind of work
(b) General nature of industry, business or establishment in which employed (or employer)

BIRTHPLACE (State or country) Texas

NAME OF FATHER H. L. Stark

BIRTHPLACE OF FATHER (State or country) Texas

MAIDEN NAME OF MOTHER Miss Hill

BIRTHPLACE OF MOTHER (State or country) Texas

(THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE)
(Informant) James L. Fitcher Stark
(Address) Orange St.

FILED Jan 24 1914 S. R. Hedrick
REGISTRAR

MEDICAL PARTICULARS

DATE OF DEATH Dec 2 1913
(Month) (Day) (Year)

I HEREBY CERTIFY, that I attended deceased from 191... to 191...
that I last saw him alive on 191...
and that death occurred on the date stated above at 31 ...
The CAUSE OF DEATH is as follows:
Stillbirth
(Duration) ... yrs. mos. ds.

CO-MORBIDITY (Secondary) ... (Duration) ... yrs. mos. ds.

(Signed) Howell Hill M. D.
Jan 12 1914 (Address) Austin Texas

PHASE OF DISEASE CAUSING DEATH, or, in deaths from violent causes, state (1) MEANS OF INJURY, and (2) whether ACCIDENTAL, SUICIDAL or HOMICIDAL.

LENGTH OF RESIDENCE (For Hospitals, Institutions, Transients, or Recent Residents.)
At place of death ... yrs. mos. ds. in the State ... yrs. mos. ds.
Where was disease contracted if not at place of death?
Former or usual residence ...

PLACE OF BURIAL OR REMOVAL Orange Texas DATE OF BURIAL 12/2/13

BURERTAKER W. Wood ADDRESS Austin

MARGIN RESERVED FOR BINDING

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD
N. B.—Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important.