

PLACE OF DEATH

TEXAS STATE DEPARTMENT OF HEALTH

59951 23

State of Texas

BUREAU OF VITAL STATISTICS

Registrar's No.

COUNTY OF Grayson

Standard Certificate of Death.

CITY OR PRECINCT Denison v

No. Street R7D No 4

2 FULL NAME OF DECEASED W. W. Covington

Residence No. Street " "

Length of residence in city where death occurred 21 yrs. mos. days

How long in U. S. If foreign born? yrs. mos. days

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL PARTICULARS

3. SEX male
4. COLOR OR RACE white
5. SINGLE, MARRIED, WIDOWED, OR DIVORCED married

16 DATE OF DEATH Dec. 10 1932

5a If married, widowed, or divorced HUSBAND of (or) WIFE of

I HEREBY CERTIFY, That I attended deceased from seen after death 1932

6 DATE OF BIRTH (Month, day, and year) March 19/1887

that I last saw him alive on Nov 16 1931

7 AGE Yrs. Months Days If LESS than 1 day, hrs. or min.
44 8 21

and that death occurred on the date stated above, at The CAUSE OF DEATH was as follows:

8 OCCUPATION OF DECEASED

(a) Trade, profession or particular kind of work Farmer
(b) General nature of industry, business, or establishment in which employed (or employer)Probably Coronary obstruction
(duration) yrs. mos. ds.
CONTRIBUTORY (Secondary) Myocarditis
(duration) 2 yrs. mos. ds.

9 BIRTHPLACE (State or country) Tennessee

18 Where was disease contracted if not at place of death?

10 NAME OF FATHER R. L. Covington

11 BIRTHPLACE OF FATHER (State or country) Tenn.

Did an operation precede death? no Date of

12 MAIDEN NAME OF MOTHER Mary Pennington

Was there an autopsy? no

13 BIRTHPLACE OF MOTHER (State or country) Tenn.

What test confirmed diagnosis? T. J. Long

14 Signature of Informant R. L. Covington

(Signed) T. J. Long M. D.

Address Denison, Tex

19 PLACE OF BURIAL OR REMOVAL Denison Cem. DATE OF BURIAL Dec 11 1932

15 FILED 11/32 19 M. M. School Registrar

20 UNDERTAKER Shott & Murray ADDRESS Denison, Tex