

1. PLACE OF DEATH		TEXAS DEPARTMENT OF HEALTH	
STATE OF TEXAS		BUREAU OF VITAL STATISTICS	
COUNTY OF TARRANT		STANDARD CERTIFICATE OF DEATH	
CITY OR PRECINCT NO. FORT WORTH TEXAS		CITY & COUNTY HOSPITAL	
2. FULL NAME OF DECEASED THOMAS JEFFERSON KIRK		GIVE STREET AND NUMBER OR NAME OF INSTITUTION	
LENGTH OF RESIDENCE WHERE DEATH OCCURRED 1½ YEARS MONTHS DAYS (SOCIAL SECURITY NO. NONE)			
RESIDENCE OF THE DECEASED AND NO. 1705 E. TUCKER ST. FT. WORTH		COUNTY TARRANT STATE TEXAS	
PERSONAL AND STATISTICAL PARTICULARS		MEDICAL PARTICULARS	
3. SEX Male	4. COLOR OR RACE White	17. DATE OF DEATH MAY 4th, 1941	
5. SINGLE, MARRIED, WIDOWED OR DIVORCED (WRITE THE WORD) Widowed		18. I HEREBY CERTIFY THAT I ATTENDED THE DECEASED FROM 4-28 1941 TO 5-4 1941	
6. DATE OF BIRTH September 9th, 1861		I LAST SAW HIM ALIVE ON 5-4 1941	
7. AGE YEARS MONTHS DAYS IF LESS THAN 1 DAY		THE DEATH OCCURRED ON THE DATE STATED ABOVE AT 12:40 P.M.	
79 6 25	HOURS MIN	THE PRIMARY CAUSE OF DEATH WAS:	DURATION
8A. TRADE, PROFESSION OR KIND OF WORK DONE Farmer Retired		Gastric Stomach	
8B. INDUSTRY OR BUSINESS IN WHICH ENGAGED School Custodian			
9. BIRTHPLACE (STATE OR COUNTRY) Tenn		CONTRIBUTORY CAUSES WERE IN ANITON	
10. NAME T. Kirk		Hypertension	
11. BIRTHPLACE (STATE OR COUNTRY) Tenn		Chronic Nephritis	
12. MAIDEN NAME Elizabeth -			
13. BIRTHPLACE (STATE OR COUNTRY) Tenn		IF NOT DUE TO DISEASE, SPECIFY WHETHER: ACCIDENT, SUICIDE, OR HOMICIDE.	
14. SIGNATURE Mrs. G. E. Dwight		DATE OF OCCURRENCE	
ADDRESS 1705 E. Tucker st Fort Worth Texas TEXAS		PLACE OF OCCURRENCE	
15. PLACE OF BURIAL OR REMOVAL Forest Hill Cemetery TEXAS		MANNER OR MEANS	
DATE Monday May 5, 1941 Ft. Worth Texas		IF RELATED TO OCCUPATION OF DECEASED, SPECIFY	
16. SIGNATURE R.P. Phillips Phillips Funeral Home		SIGNATURE C. M. Gann Jr M.D.	
ADDRESS Fort Worth Texas TEXAS		ADDRESS City Co Hospital	
20. FILE NUMBER 753	FILE DATE MAY 5 1941	SIGNATURE OF LOCAL REGISTRAR J. Barker	POSTOFFICE ADDRESS Fort Worth TEXAS

NOTE THE INFORMATION CALLED FOR ON THE REVERSE SIDE

