

1 PLACE OF DEATH

County

Waller

536 TEXAS STATE DEPARTMENT OF HEALTH
BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF DEATH

Reg. Dis. No.

B. O. V. S.

Registered No.

80

F
O
R
M

18546

Ward

City

Prenix

(No.

St.,

2 FULL NAME

Jane Rainwater

(a) RESIDENCE, No.

St.,

(If nonresident give city or town and State)

Length of residence in city or town where death occurred

yrs.

mos.

ds. How long in U. S., if of foreign birth? yrs. mos. ds.

PERSONAL AND STATISTICAL PARTICULARS

3 SEX

4 COLOR OR RACE

5 SINGLE, MARRIED, WIDOWED OR DIVORCED (write the word)

Female Negro

Single

6 DATE OF BIRTH

(Month)

(Day)

1

(Year)

7 AGE

abt 85

yrs. mos. ds.

If less than 2 years state if breast fed

If less than 1 day

Yes

No

hrs

mins.

8 OCCUPATION

(a) Trade, profession or particular kind of work

Farmer

(b) General nature of industry, business or establishment in which employed (or employer)

9 BIRTHPLACE

(State or country)

Waller Co

10 NAME OF FATHER

Unknown

11 BIRTHPLACE OF FATHER

(State or country)

12 MAIDEN NAME OF MOTHER

13 BIRTHPLACE OF MOTHER

(State or country)

14 THE ABOVE IS TRUE

(Informant)

Sam Coleman

(Address)

Hempstead Texas

15

Filed

3/25 1929

Registrar.

MEDICAL PARTICULARS

16 DATE OF DEATH

March 22

(Month)

(Day)

1929

(Year)

17 I HEREBY CERTIFY, That I attended deceased from

, 192 , to

, 192

that I last saw h alive on , 192

and that death occurred on the date stated above, at m.

The CAUSE OF DEATH* was as follows:

No Doctor

(duration) yrs. mos. ds.

Contributory

(Secondary)

(duration) yrs. mos. ds.

18 Where was disease contracted?

if not at place of death?

Did an operation precede death? Date of

Was there an autopsy?

What test confirmed diagnosis?

(Signed) , M. D.

, 192 (Address)

*State the disease Causing Death, or in deaths from Violent Causes, state (1) Means and Nature of Injury, and (2) whether Accidental, Suicidal or Homicidal.

19 PLACE OF BURIAL OR REMOVAL

Waller Co

DATE OF BURIAL

3 23 1929

20 UNDERTAKER

Tom B. Bony

ADDRESS

Hempstead Texas