


1. PLACE OF DEATH		TEXAS DEPARTMENT OF HEALTH	
STATE OF TEXAS		BUREAU OF VITAL STATISTICS	
COUNTY OF <u>Bexar</u>		STANDARD CERTIFICATE OF DEATH	
CITY OR PRECINCT NO. <u>San Antonio</u>		407 Mission St. GIVE STREET AND NUMBER OR NAME OF INSTITUTION.	
2. FULL NAME OF DECEASED <u>Frank Browning</u>			
LENGTH OF RESIDENCE WHERE DEATH OCCURRED <u>30</u> YEARS <u>00</u> MONTHS <u>00</u> DAYS. (SOCIAL SECURITY NO. _____)			
RESIDENCE OF THE DECEASED   STREET AND NO. <u>407 Mission St.</u> CITY <u>San Antonio</u> COUNTY <u>Bexar</u> STATE <u>Texas</u>			
PERSONAL AND STATISTICAL PARTICULARS		MEDICAL PARTICULARS	
3. SEX <u>male</u>		17. DATE OF DEATH <u>May 19, 1948</u>	
4. COLOR OR RACE <u>white</u>		18. I HEREBY CERTIFY THAT I ATTENDED THE DECEASED FROM _____ TO _____	
5. SINGLE, MARRIED, WIDOWED OR DIVORCED (WRITE THE WORD) <u>married</u>		CORONER'S STATEMENT I LAST SAW HIM ALIVE ON _____ 1948	
6. DATE OF BIRTH <u>October 29, 1882</u>		THE DEATH OCCURRED ON THE DATE STATED ABOVE AT <u>11:30 P.M.</u>	
7. AGE <u>65</u> YEARS <u>6</u> MONTHS <u>20</u> DAYS IF LESS THAN 1 DAY _____ HOURS _____ MIN		THE PRIMARY CAUSE OF DEATH WAS: <u>Burning of Shack</u>	
8A. TRADE, PROFESSION OR KIND OF WORK DONE <u>clerk</u>		DURATION _____	
8B. INDUSTRY OR BUSINESS IN WHICH ENGAGED <u>Bexar County Clerk's Office</u>		CONTRIBUTORY CAUSES WERE _____	
9. BIRTHPLACE (STATE OR COUNTRY) <u>Falmouth, Kentucky</u>			
10. NAME <u>Fenton Browning</u>			
11. BIRTHPLACE (STATE OR COUNTRY) <u>Kentucky</u>			
12. MAIDEN NAME <u>unknown</u>			
13. BIRTHPLACE (STATE OR COUNTRY) <u>unknown</u>		IF NOT DUE TO DISEASE, SPECIFY WHETHER: <u>Accident</u>	
14. SIGNATURE <u>Raymond Dugosh</u>		ACCIDENT, SUICIDE, OR HOMICIDE	
ADDRESS <u>118 Thomas Jefferson Dr., San Antonio, TEXAS</u>		DATE OF OCCURRENCE <u>5/19/48</u>	
15. PLACE OF BURIAL OR REMOVAL <u>Mission Burial Park San Antonio, TEXAS</u>		PLACE OF OCCURRENCE <u>407 Mission St. San Antonio, Texas</u>	
DATE <u>May 22, 1948</u>		MANNER OR MEANS <u>Caught in burning house</u>	
16. SIGNATURE <u>Akers Funeral Home</u>		IF RELATED TO OCCUPATION OF DECEASED, SPECIFY SIGNATURE <u>Frank Taylor</u>	
ADDRESS <u>441 Main Avenue, San Antonio, TEXAS</u>		ADDRESS <u>Bexar County Courthouse, San Antonio, TEXAS</u>	
20. FILE NUMBER <u>1833</u>		SIGNATURE OF LOCAL REGISTRAR <u>Stuart C. Fisher</u>	
FILE DATE <u>MAY 21 1948</u>		POSTOFFICE ADDRESS <u>SAN ANTONIO, TEXAS</u>	

NOTE THE INFORMATION CALLED FOR ON THE REVERSE SIDE