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Shelby Cnty Judge of Probate, AL
04/05/1978 12:00:00 AM FILED/CERT

103
STATE OF ALABAMA
CERTIFICATE OF DEATH

STATE FILE NUMBER

DECEASED—NAME FIRST MIDDLE LAST 1. Dan M. Jones				DATE OF DEATH (MONTH, DAY, YEAR) 2. December 22, 1975	
RACE OR COLOR 3. White		SEX 4. M	AGE—LAST BIRTHDAY (YEARS) 5a. 72	UNDER 1 YEAR 5b. MOS. DAYS	UNDER 1 DAY 5c. HOURS MIN.
CITY, TOWN, OR LOCATION OF DEATH 7b. Tarrant		INSIDE CITY LIMITS (SPECIFY YES OR NO) 7c. Yes		HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) 7d. Residence - 2046 East Lake Blvd.	
STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY) 8. Alabama		CITIZEN OF WHAT COUNTRY 9. USA		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) 10. Married	
SOCIAL SECURITY NUMBER 12. [REDACTED]		USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED) 13a. Machinist		KIND OF BUSINESS OR INDUSTRY 13b. Hardie-Tynes Mfg. Co.	
RESIDENCE—STATE 14a. Alabama		COUNTY 14b. Jeff.	CITY, TOWN, OR LOCATION 14c. Tarrant	INSIDE CITY LIMITS (SPECIFY YES OR NO) 14d. Yes	STREET AND NUMBER 14e. 2046 East Lake Blvd.
FATHER—NAME FIRST MIDDLE LAST 15. Dan Mathias Jones			MOTHER—MAIDEN NAME FIRST MIDDLE LAST 16. Sarah Elizabeth Eastis		
PHYSICIAN'S NAME (IF ANY) 17a. Dr. Isa Fawal			INFORMANT—NAME 17b. Mrs. Magnolia C. Jones		
ADDRESS 17a. 8010 2nd Ave. SO. B'ham			ADDRESS 17b. 2046 East Lake Blvd. Tarrant, AL		
PART I. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), and (c))					
18. IMMEDIATE CAUSE (a) Acute Myocardial Infarction					30 minutes
CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (a), STATING THE UNDERLYING CAUSE LAST					6 years
(b) Coronary Heart Disease					
(c) Atherosclerotic Vascular Disease					Undetermined
PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH					
Chronic obstructive pulmonary disease.					
Congestive heart failure.					
AUTOPSY (YES OR NO) 19a. No					
IF YES WERE FINDINGS CONSIDERED IN DETERMINING CAUSE OF DEATH 19b.					
WAS THERE A PREGNANCY IN LAST SIX MONTHS (YES, NO, UNK.) 19c.					
INJURY AT WORK (SPECIFY YES OR NO) 20a.					
PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY) 20b.					
LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, STATE) 20c.					
HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 18) 20d.					
CERTIFICATION—PHYSICIAN: I ATTENDED THE DECEASED FROM 11/19/71 TO 12/22/75					
CERTIFICATION—CORONER OR HEALTH OFFICER: On the basis of the examination of the body and/or the investigation, in my opinion death occurred on the date and due to the cause(s) stated.					
HOUR OF DEATH 6:07 P. M.					
THE DECEDENT WAS PRONOUNCED DEAD MONTH DAY YEAR 12 22 75					
DEATH OCCURRED (HOUR) 6:07 P. M.					
CERTIFIER—PHYSICIAN, CORONER OR HEALTH OFFICER (TYPE OR PRINT) 23a. Isa A. Fawal, M. D.					
SIGNATURE 23b. [Signature]					
DEGREE OR TITLE 23c. 12/30/75					
DATE SIGNED (MONTH, DAY, YEAR)					
MAILING ADDRESS—CERTIFIER 23d. 8010 Second Ave. South, Birmingham, Alabama 35206					
STREET OR R.F.D. NO., CITY OR TOWN, STATE					
BURIAL, CREMATION, REMOVAL (SPECIFY) 24a. Burial					
CEMETERY OR CREMATORY—NAME 24b. Forest Hill					
LOCATION CITY OR TOWN STATE 24c. Jefferson County, Alabama					
DATE (MONTH, DAY, YEAR) 24d. 12/24/75					
FUNERAL HOME—NAME AND ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP) 25a. Roebuck Chapel 9012 Pkwy. East Birmingham, AL 35206					
FUNERAL DIRECTOR—SIGNATURE 25b. [Signature]					
REGISTRAR—SIGNATURE 25c. [Signature]					
DATE RECEIVED BY LOCAL REGISTRAR 25d. JAN 5 1976					

STATE OF ALABAMA
COUNTY OF JEFFERSON

This is to certify that the above is a copy of a certificate as filed in the Bureau of Statistics and Vital Records, Jefferson County Health Department, Birmingham, Alabama.

24 PAGE 666
BOOK

Health Officer
178 APR -5 AM 9:46
January 5, 1976
Date of Issue

REC-1.50
Ind. 1.00
2.50 Thomas A. Snowdon, Jr.
JUDGE OF PROBATE

Registrar of Vital Statistics
Authorized Bureau Clerk

Not Valid Without Embossed Seal of the Health Officer of Jefferson County, Alabama.

William J. Bentley