

52-09-007803

PROVINCE OF BRITISH COLUMBIA DEPARTMENT OF HEALTH AND WELFARE - DIVISION OF VITAL STATISTICS REGISTRATION OF DEATH

DO NOT USE BALL POINT PEN

1. PLACE OF DEATH

Name of city or place: Creston Name of Municipality (if any): Creston Street or road: Vancouver ST House No.: 51

2. LENGTH OF STAY In Municipality where death occurred: 10 mos In Province: 42 yrs In Canada (if immigrant) (in years, months and days): 42 yrs

3. PRINT FULL NAME OF DECEASED: HEATH JOSEPH (Surname or family name) (All given or Christian names in full)

4. PERMANENT RESIDENCE OF DECEASED: Name of city or place: Creston Name of Municipality (if any): Creston Street or road: Vancouver ST House No.: 51

5. SEX: M. 6. CITIZENSHIP: Can Eng 7. RACIAL ORIGIN: Married 8. Single, Married, Widowed or Divorced (Write the word): Married 9. BIRTHPLACE: Torquay Eng (City or Place and Province or Country)

10. Date of Birth: Apr 14 1875 11. AGE: 77 Years 3 Months 22 Days (If less than one day hrs. or min.)

12. (a) Trade, profession or kind of work as logger, fisherman, office clerk, etc.: Gardener (b) Kind of industry or business, as logging, fishing, bank, etc.: (If labourer specify kind of work above) (If "Housewife" in own home answer "At Home")

13. Date deceased last worked at this occupation: 1932 14. Total years spent in this occupation: 14 yrs

15. If married, widowed or divorced give name of husband or maiden name of wife of deceased: Heath and Mary Cross

16. Name of father: Heath (Surname or family name) (All given or Christian names)

17. Maiden name of mother: Not known (Surname or family name) (All given or Christian names)

18. Birthplace - Father: Eng Mother: Eng (City or Place and Province or Country) (City or Place and Province or Country)

19. I certify the foregoing to be true and correct to the best of my knowledge and belief. Given under my hand at: Creston this 5 day of Aug 1952 Signature of informant: Elizabeth Adams Relationship to deceased: Daughter (Married woman not to use Husband's initials or given names) Address of informant: Creston BC (House No.) (Name of street) (Name of City, Municipality or Place) (Province or State)

20. Burial, Cremation or Removal: Burial Date: Aug 8 1952 (State which) (Month by name) (Date) (Year)

Place of Burial or Cremation: Creston Name of Cemetery: Creston Village (Municipality, etc., where Cemetery located)

21. Undertaker: Henderson Name: Henderson Address: Creston BC (Name of City, Municipality or Place) (Province or State)

MEDICAL CERTIFICATE OF DEATH

22. DATE OF DEATH: Aug 5 1952 (Month by name) (Date) (Year)

23. I HEREBY CERTIFY that I attended deceased from Aug 1 1952 to Aug 5 1952, and last saw him alive on Aug 5 1952

CAUSE OF DEATH: (a) Hemiplegia due to (or as a consequence of) 3 days (b) Arteriosclerosis due to (or as a consequence of) 5+ yrs (c) Antecedent causes: Morbid conditions, if any, giving rise to the above cause, stating the underlying condition last. II Other significant conditions contributing to the death, but not related to the disease or condition causing it.

24. If a woman, was the death (a) Associated with pregnancy? (b) Duration: weeks. (c) Was there a delivery? ..

25. Was there a recent surgical operation? .. (b) Date of operation: 19 (c) State findings of operation (d) Was there an autopsy? ..

26. If death was due to external causes (violence) fill in also the following: (a) Accident, suicide or homicide? (b) Date of injury: 19 (c) Manner of injury: (State which) (How sustained) (d) Nature of injury: (e) Specify whether injury occurred in industry, in home or in public place

27. Signed by: Guy R Smith Designation: M.D., Coroner, etc. Address: Creston Date: 2/8/1952

28. Print name of M.D., Coroner, etc., whose signature appears above: Guy R Smith

29. Notations

30. I hereby certify that the above return was made to me at Creston, B.C. Date: August 8th 1952 District Registration No.: 32752 (Signature of District Registrar)

MARGIN RESERVED FOR BINDING. WRITE PLAINLY, WITH UNFADING INK. THIS IS A PERMANENT RECORD. CITIZENSHIP (NATIONALITY) is defined in terms of the country to which the person owes allegiance. The term "Canadian" should be used as descriptive of a person who was born in Canada or who has rights of Citizenship in Canada, unless he or she has subsequently become the citizen of another country. RACIAL ORIGIN is defined in terms of the people or race to which the person—traced through the father—belongs, whether English, Irish, Scottish, French, German, Russian, Ukrainian, etc. The terms "Canadian" or "American" should not be used for RACIAL ORIGIN, as they express CITIZENSHIP (NATIONALITY).

DO NOT WRITE BELOW DOUBLE LINE OFFICE USE ONLY

In case of stillbirth consult reverse side before making out certificate.