ARIZONA STATE DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS

STATE FILE NO. 7503

CERTIFICATE OF DEATH

BIRTH NO.

REGISTRAR'S NO. 2935

1. PLACE OF DEATH
A. COUNTY: Maricopa
B. LENGTH OF STAY: IN THIS TOWN 35 yrs; IN ARIZONA 35 yrs
C. CITY OR TOWN: Phoenix — ☒ IN CITY LIMITS ☐ OUTSIDE CITY LIMITS
D. FULL NAME OF HOSPITAL OR INSTITUTION (IF NOT IN HOSPITAL OR INSTITUTION, GIVE STREET ADDRESS OR LOCATION): Memorial Hospital

2. USUAL RESIDENCE (WHERE DECEASED LIVED. IF INSTITUTION: RESIDENCE BEFORE ADMISSION)
A. STATE: Arizona
B. COUNTY: Maricopa
C. CITY OR TOWN: Phoenix — ☒ IN CITY LIMITS ☐ OUTSIDE CITY LIMITS
D. STREET ADDRESS (IF RURAL, GIVE LOCATION): 19 E. Roanoke Ave.
E. IS RESIDENCE ON A FARM? YES ☐ NO ☐

3. NAME OF DECEASED (TYPE OR PRINT): A. (FIRST) MARTIN B. (MIDDLE) C. (LAST) MORRIS
4. SEX: Male
5. COLOR OR RACE: White
6A. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): Single
6B. NAME OF SPOUSE: None
7. DATE OF BIRTH: MONTH June DAY 2 YEAR 1889
8. AGE (IN YEARS LAST BIRTHDAY): 68
IF UNDER 1 YEAR: MONTHS DAYS
IF UNDER 24 HRS.: HOURS MIN.
9A. USUAL OCCUPATION (GIVE KIND OF WORK DURING MOST OF LIFE EVEN IF RETIRED): Cook
9B. KIND OF BUSINESS OR INDUSTRY: Construction
10. BIRTHPLACE (STATE OR FOREIGN COUNTRY): Ireland
11. CITIZEN OF WHAT COUNTRY? U.S.
12. WAS DECEASED EVER IN U. S. ARMED FORCES? (YES, NO, OR UNKNOWN): Yes (IF YES, WAR OR DATES OF SERVICE): W. W. I
13. SOCIAL SECURITY NO.: 526-07-8512
14A. FATHER'S NAME: Unknown
14B. BIRTHPLACE (STATE OR COUNTRY): Ireland
15A. MOTHER'S MAIDEN NAME: Unknown
15B. BIRTHPLACE (STATE OR COUNTRY): Ireland
16. INFORMANT'S SIGNATURE: Gabriel Roseland, 19 E. Roanoke Ave.
17. DATE OF DEATH (MONTH) November (DAY) 10 (YEAR) 1957

18. CAUSE OF DEATH — ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), (C).
‡THIS DOES NOT MEAN THE MODE OF DYING, SUCH AS HEART FAILURE, ASTHENIA, ETC. IT MEANS THE DISEASE, INJURY, OR COMPLICATION WHICH CAUSED DEATH.
PLACE DISEASE CONTRACTED:

MEDICAL CERTIFICATION
I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH‡ (A) Multiple Myeloma; unknown — INTERVAL BETWEEN ONSET AND DEATH
ANTECEDENT CAUSES MORBID CONDITIONS, IF ANY, GIVING RISE TO THE ABOVE CAUSE (A) STATING THE UNDERLYING CAUSE LAST.
DUE TO (B)
DUE TO (C)
II. OTHER SIGNIFICANT CONDITIONS CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RELATING TO THE DISEASE OR CONDITION CAUSING DEATH.

19A. DATE OF OPERATION
19B. MAJOR FINDINGS OF OPERATION
20. AUTOPSY? YES ☒ NO ☐

21. I HEREBY CERTIFY THAT I ATTENDED THE DECEASED FROM I HEREBY CERTIFY THAT I EXAMINED THE BODY OF THE DECEASED, 11-11, 1957 THAT I LAST SAW THE DECEASED ALIVE ON, 19, AND THAT DEATH OCCURRED AT 11:25 P.M. 11-10 FROM THE CAUSES AND ON THE DATE STATED ABOVE.

22A. SIGNATURE (DEPUTY) MARICOPA COUNTY MEDICAL EXAMINER: Manuel B. Jaques M.D.
22B. ADDRESS: Phoenix
22C. DATE SIGNED: 11-11-57

23A. ACCIDENT ☒ SUICIDE ☐ HOMICIDE ☐ NATURAL CAUSE ☐ (SPECIFY): Accident
23B. PLACE OF INJURY (E.G., IN OR ABOUT HOME, FARM, FACTORY, STREET, OFFICE BLDG., ETC.): 1st St + Jefferson
23C. (CITY OR TOWN) Phoenix (COUNTY) Ariz. (STATE) Arizona
23D. TIME OF INJURY (MONTH) 11 (DAY) 5 (YEAR) 57 (HOUR) 9:57 AM
23E. INJURY OCCURRED WHILE AT WORK ☒ NOT WHILE AT WORK ☐
23F. HOW DID INJURY OCCUR? Car accident struck by car

24A. CORONER'S SIGNATURE: Al J. Flood Coroner
24B. ADDRESS: West Phoenix Pct
24C. DATE SIGNED: 11-12-57

25A. BURIAL ☒ CREMATION ☐ REMOVAL ☐
25B. DATE: Nov. 13, 1957
25C. NAME OF CEMETERY OR CREMATORY: St. Francis
25D. LOCATION (CITY, TOWN, OR COUNTY) (STATE): Phoenix
26A. DATE REC. BY LOCAL REG.: 11/12/57
26B. REGISTRAR'S SIGNATURE: Beulah Johnston
27A. FUNERAL DIRECTOR'S SIGNATURE: Charles A. Wernick
27B. ADDRESS: 330 N. 2d Ave., Phx
28. EMBALMER'S SIGNATURE: Charles A. Wernick
28B. EMBALMER'S CERT. NO.: 371-A

FORM VS-2 REV. 3-16-55 OCR-001
Whitney & Murphy Funeral Home, Phx

CE OF DEATH 17 17
9 AND 29
AL RESIDENCE 0317
DECEDENT PERSONAL DATA 1 1 2 169 9 X 57
CAUSE OF DEATH (ITEM 18) 8 1 7 4 0 0
OPERATIONS, AUTOPSY 1
MEDICAL ERTIFICATION 29 13 1
DEATH DUE TO EXTERNAL VIOLENCE 3
CORONER'S ERTIFICATION 5
FUNERAL DIRECTOR AND REGISTRAR 85 2 1 3 5