T-71-41

Texas State Department of Health

AUSTIN, TEXAS

December 9, 1971

Mr. David L. Bayliss
NIOSH
Federal Office Building, Room 8409
550 Main Street
Cincinnati, Ohio 45202

Dear Mr. Bayliss:

Enclosed is a copy of our certificate No. 82838-70 showing that James W. McMillan died November 17, 1970 in Tyler, Smith County, Texas.

A search of our indexes fails to show that we have records of the deaths of Leroy L. Leed and Charles H. Dobbins.

The fee for the three searches of our files is $4.50, which amount may be forwarded to me with this letter.

Sincerely yours,

W. D. Carroll
STATE REGISTRAR

WDC/js
Encl.

T-71-41

CERTIFICATE OF DEATH

STATE FILE NO. [illegible]

TEXAS DEPARTMENT OF HEALTH — BUREAU OF VITAL STATISTICS

1. PLACE OF DEATH
- a. COUNTY: Smith
- b. CITY OR TOWN (If outside city limits, give precinct no.): Tyler
- c. LENGTH OF STAY in 1b: 16 Years
- d. NAME OF HOSPITAL OR INSTITUTION (If not in hospital, give street address): 4120 Easy Street
- e. IS PLACE OF DEATH INSIDE CITY LIMITS? YES [X] NO [ ]

2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission)
- a. STATE: Texas
- b. COUNTY: Smith
- c. CITY OR TOWN (If outside city limits, give precinct no.): Tyler
- d. STREET ADDRESS (If rural, give location): 4120 Easy Street
- e. IS RESIDENCE INSIDE CITY LIMITS? YES [X] NO [ ]
- f. IS RESIDENCE ON A FARM? YES [ ] NO [X]

3. NAME OF DECEASED (Type or print): (a) First: James (b) Middle: W (c) Last: McMillan

4. DATE OF DEATH: November 17, 1970

5. SEX: Male

6. COLOR OR RACE: White

7. Married [X] Never Married [ ] Widowed [ ] Divorced [ ]

8. DATE OF BIRTH: December 16, 1905

9. AGE (In years last birthday): 64 | IF UNDER 1 YEAR: Months / Days | IF UNDER 24 HRS.: Hours / Minutes

10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired): Engineer

10b. KIND OF BUSINESS OR INDUSTRY: Pittsburg-Corning Corp.

11. BIRTHPLACE (State or foreign country): Houston, Texas

12. CITIZEN OF WHAT COUNTRY? U.S.A.

13. FATHER'S NAME: James Wilmer McMillan, Sr.

14. MOTHER'S MAIDEN NAME: Mary Ida Crump

15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown): No | (If yes, give war or dates of service): - - -

16. SOCIAL SECURITY NO.: 449-07-7092

17. INFORMANT: Mrs. Bonnie G. McMillan

MEDICAL CERTIFICATION

18. PART I. DEATH WAS CAUSED BY: (Enter only one cause per line for (a), (b), and (c).) | INTERVAL BETWEEN ONSET AND DEATH

- IMMEDIATE CAUSE (a): Malignant mesothelioma of lung — 4/4/69
- DUE TO (b): (Fine particulate asbestos several yrs. date unknown)
- DUE TO (c):

CONDITIONS, IF ANY, WHICH GAVE RISE TO ABOVE CAUSE (a), STATING THE UNDERLYING CAUSE LAST.

TEXAS DEPT. OF HEALTH REC'D DEC 14 1970 VITAL STATISTICS

PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE CONDITION GIVEN IN PART I(a)

19. WAS AUTOPSY PERFORMED? YES [ ] NO [X]

20a. ACCIDENT [ ] SUICIDE [ ] HOMICIDE [ ]

20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in Part I or Part II of Item 18.)

20c. TIME OF INJURY: Hour a.m./p.m. Month Day Year

20d. INJURY OCCURRED: WHILE AT WORK [ ] NOT WHILE AT WORK [ ]

20e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office building, etc.)

20f. CITY, TOWN, OR LOCATION | COUNTY | STATE

21. I hereby certify that I attended the deceased from 4/6 1969 to 11/17/70 19__ and last saw the deceased alive on 11/17/70 19__. Death occurred at [illegible] m. on the date stated above, and to the best of my knowledge, from the causes stated.

22a. SIGNATURE: [illegible signature] MD (Degree or title)

22b. ADDRESS: Tyler, Texas

22c. DATE SIGNED: 11/30/70

23a. BURIAL, CREMATION, REMOVAL (Specify): Removal

23b. DATE: November 19, 1970

23c. NAME OF CEMETERY OR CREMATORY: Waco Memorial Park

23d. LOCATION (City, town, or county): Waco (State): Texas

24. FUNERAL DIRECTOR'S SIGNATURE: BWT- [illegible signature] F.D. 1930 [illegible]

25a. REGISTRAR'S FILE NO.: 827

25b. DATE REC'D BY LOCAL REGISTRAR: 11/24/70

25c. REGISTRAR'S SIGNATURE: [illegible signature] M.D.

VS-112, REV. 1/58