

Thome, Frank Ferdinand 1899 - 1924

Cincinnati Enquirer - March 2, 1924

THOME—Frank Thome, Jr., beloved husband of Adelaide Thome (nee Quick), Friday, February 29, 1924, at 9:15 p. m., aged 25 years 1 day. Funeral from the residence of his parents, 3730 Tappan av., Tuesday, March 4, at 8 a. m., with requiem high mass at St. Pius Church at 8:30 a. m.

Wm. J. J. J.
Statistics—St. Joseph's Cemetery

Office Hours: 8 a. m. to 4:30 p. m.

Undertakers ordering graves must fill out this blank and take it, together with the PRIEST'S CERTIFICATE and DEED OF LOT, to the Office of St. Joseph's Cemeteries, Rooms 7 and 8 Hulbert Block, S. E. Corner Sixth and Vine Streets.

Name of Deceased Frank J. Thome

Place of Nativity Cincinnati

Late Residence 3730 Tappan Ave.

Age 25 yrs 1 day ST. MARY

Date of Death February 29th. 1924

Date of Interment March 4th. 1924

Cause of Death Pneumonia

Parents' Name Frank and Maggie Thome (nee Winkembauser)

Physician's Name Dr. Grad

Married or Single Married

In Whose Lot Interred Frank Thome Lot 312 Range Sec. 7

	LENGTH	WIDTH	HEIGHT
Size of Coffin, Casket or Box	<u>84 in.</u>	<u>30 in.</u>	<u>25 in.</u>

Chas. H. Thoman and Son Undertaker.

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STATE OF OHIO DEPARTMENT OF HEALTH		STATE OF OHIO DEPARTMENT OF HEALTH DIVISION OF VITAL STATISTICS CERTIFICATE OF DEATH	
1 PLACE OF DEATH County <u>Hamilton</u> Registration District No. <u>454</u> File No. <u>9418</u>		Township <u> </u> Primary Registration District No. <u> </u> Registered No. <u>1210</u>	
or Village <u> </u> No. <u> </u> St. <u> </u> Ward <u> </u>		or City of <u>Cincinnati</u> (If death occurred in a hospital or institution, give its NAME instead of street and number)	
2 FULL NAME <u>Frank F. Thome</u> <u>Thome</u>		Did Deceased Serve in U. S. Navy or Army <u> </u>	
(a) Residence No. <u>3730 Gaffan</u> St. <u> </u> Ward <u> </u>		(Usual place of abode) (If nonresident give city or town and State)	
Length of residence in city or town where death occurred yrs. mos. ds.		How long in U. S. if of foreign birth? yrs. mos. ds.	
PERSONAL AND STATISTICAL PARTICULARS			MEDICAL CERTIFICATE OF DEATH
3 SEX <u>male</u>	4 COLOR OR RACE <u>white</u>	5 Single, Married, Widowed or Divorced (write the word) <u>married</u>	16 DATE OF DEATH (month, day and year) <u>2/29 1924</u>
5a If married, widowed or divorced HUSBAND of (or) WIFE of <u>Adelaide Thome</u>			17 I HEREBY CERTIFY, That I attended deceased from <u>Feb 3</u> , 19 <u>24</u> , to <u>Feb 29</u> , 19 <u>24</u>
6 DATE OF BIRTH (month, day, and year) <u>July 28th 1899</u>			that I last saw him alive on <u>Feb 29</u> , 19 <u>24</u>
7 AGE Years <u>25</u> Months <u>-</u> Days <u>1</u>	If LESS than 1 day.....hrs. or.....min.		and that death occurred, on the date stated above, at <u>9:00</u> a.m.
8 OCCUPATION OF DECEASED (a) Trade, profession, or particular kind of work <u>Machinist</u>			The CAUSE OF DEATH* was as follows: <u>Broncho Pneumonia</u>
(b) General nature of Industry, business, or establishment in which employed (or employer) <u> </u>			(duration) yrs. mos. ds. <u>9</u>
(c) Name of employer <u>W. S. Simmons Co.</u>			CONTRIBUTORY (SECONDARY) <u>Pneumonia</u> (duration) yrs. mos. ds. <u>abt 16 20</u>
9 BIRTHPLACE (city or town) <u>Cincinnati</u>			18 Where was disease contracted if not at place of death? <u> </u>
(State or country) <u> </u>			Did an operation precede death? <u>no</u> Date of <u> </u>
10 NAME OF FATHER <u>Frank J. Thome</u>			Was there an autopsy? <u> </u>
11 BIRTHPLACE OF FATHER (city or town) (State or country) <u>Cincinnati</u>			What test confirmed diagnosis? <u> </u>
12 MAIDEN NAME OF MOTHER <u>Maggie Ankenbauer</u>			(Signed) <u>Edward A. Fred</u> M. D.
13 BIRTHPLACE OF MOTHER (city or town) (State or country) <u>Cincinnati</u>			<u>3/1</u> , 19 <u>24</u> (Address) <u>3583 Colerain Ave</u>
14 Informant <u>Frank J. Thome</u>			*State the DISEASE CAUSING DEATH, or in deaths from VIOLENT CAUSES, state (1) MEANS AND NATURE OF INJURY, and (2) whether ACCIDENTAL, SUICIDAL or HOMICIDAL. (See reverse side for additional space.)
(Address) <u>3750 Gaffan Ave.</u>			19 PLACE OF BURIAL, CREMATION, OR REMOVAL <u>St. Marys Bern.</u> DATE OF BURIAL <u>March 4 1924</u>
15 Filed <u>MAR 3 - 1924</u> <u>Edward Evans</u> REGISTRAR			20 UNDERTAKER License No. <u>832 A.</u> ADDRESS <u>1655</u>
			<u>Chas. A. Thoman and Son</u> <u>Stoffen St.</u>