

Kentucky Post - July 29, 1926

FRANKMAN DEAD

Carpenter Had Been Ill for
Six Weeks

Following a six weeks' illness, Henry Franxman, carpenter, 80, of 1714 Garrard-st, Covington, died at his home late Wednesday from Bright's disease.

Requiem high mass will be said at St. Benedict's Church, Covington, Saturday, 9 a. m. Services will also be held at the home at 8:30 a. m. Burial will be in the Mother of God Cemetery.

Franxman was born in Germany, but came to America at an early age. He had resided in Covington for more than a half century.

He is survived by seven sons and four daughters: William, feather renovator, of 1338 Garrard-st, Covington; Joe, of Patton and Nancy streets, Covington, and Louis, at home, proprietors of a tailor shop on E. 11th-st, Covington; Henry, of E. 24th-st, Covington, owner of the Franxman Art and Gift Shop, 906 Madison-av, Covington; John E., car repairer, of E. 13th-st, Covington; Carl, lithographer, of Madison-pike, Covington; Bernard, of 1514 Holman-st, Covington; Mrs. Albert Rice, of Pine-st, Covington; Mrs. Peter Post, of 1514 Holman-st, Covington; Mrs. William Rauh, of E. 17th-st, Covington, and Mrs. Bernard Huller, of St. Augustline-st, Covington.

Franxmann, Henry 1846 - 1926

Form V. S. 1-50m-34-24		COMMONWEALTH OF KENTUCKY State Board of Health BUREAU OF VITAL STATISTICS CERTIFICATE OF DEATH		<i>An Murrell A V Office By [Signature]</i> File No. <u>48192</u> Registered No. <u>4976</u> (If death occurred in hospital or institution, give its NAME instead of street and number.)	
1 PLACE OF DEATH County <u>Kenton</u>		Registration District No. <u>190</u>			
2 FULL NAME <u>Henry Franxman</u>		Primary Registration District No. <u>2290</u>			
3 SEX <u>M.</u>		4 COLOR OR RACE <u>W.</u>		5 Single Married Widowed or Divorced <u>Widowed</u> (Write the word)	
6 DATE OF BIRTH <u>May 28th 1846</u> (Month) (Day) (Year)		7 AGE <u>80</u> yrs. <u>2</u> mos. <u>---</u> ds. IF LESS than 1 day <u>---</u> hrs. or <u>---</u> min?		16 DATE OF DEATH <u>July 28th 1926</u> 192 <u>6</u> (Month) (Day) (Year)	
8 OCCUPATION (a) Trade, profession or particular kind of work. <u>Retired</u> (b) General nature of industry, business or establishment in which employed (or employer).		9 BIRTHPLACE (State or country) <u>Germany</u>		17 I HEREBY CERTIFY, That I attended deceased from <u>July 10</u> , 192 <u>6</u> , to <u>July 28</u> , 192 <u>6</u> , that I last saw him alive on <u>July 28</u> , 192 <u>6</u> , and that death occurred on the date stated above at <u>2 P.M.</u> The CAUSE OF DEATH* was as follows: <u>Broncho pneumonia</u> <u>with chronic bronchitis</u> <u>preceding also, mitral regurgitation</u> (Duration) <u>5</u> yrs. <u>5</u> mos. <u>---</u> ds. Contributory <u>Age</u> (Secondary) <u>Age</u> (Duration) <u>---</u> yrs. <u>---</u> mos. <u>---</u> ds. (Signed) <u>A. V. Murrell</u> M. D. <u>July 28</u> , 192 <u>6</u> (Address) <u>25 E 11th St</u>	
10 NAME OF FATHER <u>William Franxman</u>		11 BIRTHPLACE OF FATHER (State or country) <u>Germany</u>		18 LENGTH OF RESIDENCE (For Hospitals, Institutions, Transients or Recent Residents) at place of death <u>---</u> yrs. <u>---</u> mos. <u>---</u> ds. In the State <u>---</u> yrs. <u>---</u> mos. <u>---</u> ds. Where was disease contracted, if not at place of death? Former or usual residence	
12 MAIDEN NAME OF MOTHER <u>Elizabeth Kelzther</u>		13 BIRTHPLACE OF MOTHER (State or country) <u>Germany</u>		19 PLACE OF BURIAL OR REMOVAL <u>Mother of Gods</u> DATE OF BURIAL <u>July 31th 1926</u>	
14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) <u>Louis Franxman</u> (Address) <u>1714 Garrard St.</u>		15 FILED <u>1926</u> REGISTRAR <u>J. Linnemann Sons</u>		ADDRESS <u>25 E 11th St</u>	