

New Zealand Death Certificate

DECEASED

First/given name(s) **John Henry**
Surname/family name **Falloon**

(If different from above) First/given name(s) at birth -
Surname/family name at birth -

Date of death **23 September 1951**
Place of death **17 Millward Street Wellington**
Cause or causes of death **Coronary Sclerosis**
(as specified in doctor's certificate or coroner's order) **Coroner Considered Inquest Unnecessary**

Name of certifying doctor -
Date last seen alive by certifying doctor -

Sex **Male**
Age and date of birth **89 years Not Recorded**
Place of birth **Christchurch**
If not born in New Zealand number of years lived here -
Usual home address -

Usual occupation, profession or job **Retired Scaffolder**
Date of burial or cremation **25 September 1951**
Place of burial or cremation **Karori**
Age of each living daughter -
Age of each living son -

MOTHER: First/given name(s) **Not Recorded**
Surname/family name **Falloon**
(If different from above) First/given name(s) at birth -
Surname/family name at birth **Not Recorded**

FATHER: First/given name(s) **William**
Surname/family name **Falloon**
(If different from above) First/given name(s) at birth -
Surname/family name at birth -

PARENTS

Relationship status at time of death -
Relationship type **Marriage**
Age of deceased at event **22**
Place of marriage/civil union **Greymouth**
SPOUSE/ First/given name(s) **Not Recorded**
PARTNER: Surname/family name **Not Recorded**
Sex -
Age *(if living)* -

RELATIONSHIP(S)
Marriage
58
Wellington
Elizabeth
Taylor
-
Not Recorded

Certified true copy of particulars recorded by a Registrar

Issued under the seal of the Registrar on **12 September 2017**

Registration Number

1951033961