

# **TUSCANIA**

**Harvey, Walter Rountree (Sr.)  
1895 TX – 1969 TX**

## Harvey rites held Saturday

Funeral services for Walter R. Harvey Sr., 74, 118 Ireland Dr., were held Saturday afternoon in Leach Chapel at Chism and Smith Funeral Home. He died Friday morning at the Concord Nursing Home in Irving.

A retired carpenter, Harvey was a native of Waco. He was a member of the Church of Christ of Irving.

Survivors include two sons, Bryarly and Walter Jr., both of Irving; two sisters, Mrs. Jesse Wommack of Lindon, Tex., and Mrs. Oneida Hensley of Texarkana, Ark.; six grandchildren and three great-grandchildren.

Burial was at Oak Grove Cemetery.

## Harvey rites held Saturday

Funeral services for Walter R. Harvey Sr., 74, of 118 West Ireland Dr., were held Saturday afternoon in Leach Chapel at Chism and Smith Funeral Home in Irving. He died of a heart attack Friday morning at Concord Manor Nursing Home.

A retired building contractor, Harvey was born in Naples, Texas, on August 31, 1895, and was a Irving resident for 33 years. He was a veteran of World War I, during which he was attached to the Forty-second infantry division. Harvey was a member of the Church of Christ of Irving.

Survivors include two sons, Bryarly and Walter Jr. both of Irving; one brother, Adrian B. Harvey; two sisters, Mrs. Jesse Wommack of Lindon, and Mrs. Oneida Hensley of Texarkana, Ark.; six grandchildren; and three great-grandchildren.

Burial was at Oak Grove cemetery.

Left: "Irving (TX) Daily News" 5 Oct 1969 p 4 – right: "Irving (TX) Daily News" 7 Oct 1969 p 8

# Walter Harvey

U.S., Social Security Death Index, 1935-2014



Save this record?

Save

## Detail

|                        |                                   |
|------------------------|-----------------------------------|
| Name                   | Walter Harvey                     |
| Social Security Number | 466-12-9840                       |
| Birth Date             | 3 Aug 1895                        |
| Issue year             | Before 1951                       |
| Issue State            | Texas                             |
| Last Residence         | 75060, Irving, Dallas, Texas, USA |
| Death Date             | Oct 1969                          |

<https://www.ancestry.com/search/collections/3693/records/26104037>

# Walter Rountree Harvey

Texas, U.S., Death Index, 1903-2000



Save this record?

Save

## Detail

|                |                                 |
|----------------|---------------------------------|
| Name           | Walter Rountree Harvey          |
| Gender         | Male                            |
| Marital Status | Separated; Divorced (Separated) |
| Death Date     | 3 Oct 1969                      |
| Death Place    | Dallas, Texas, USA              |

<https://www.ancestry.com/search/collections/4876/records/471372>

| WW I                                                                                                                                                                                     |  | WW II |  | KOREA                                                                                                                                                                                                                                                                                                                                                                                                                  |  | ORIGINAL |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------|--|
| 1. NAME OF DECEASED - LAST - FIRST - MIDDLE (Print or Type)<br><b>HARVEY, Walter Rountree Sr.</b>                                                                                        |  |       |  | 14. NAME AND LOCATION OF CEMETERY (City and State)<br><b>Oak Grove Memorial Park<br/>Irving, Texas</b>                                                                                                                                                                                                                                                                                                                 |  |          |  |
| 2. SERVICE NUMBER<br><b>25-14-48</b>                                                                                                                                                     |  |       |  | 3. PENSION OR VA CLAIM NUMBER<br><b>XO-21-477-465</b>                                                                                                                                                                                                                                                                                                                                                                  |  |          |  |
| 4. ENLISTMENT DATE (Month, day, year)<br><b>Sept. 5, 1917</b>                                                                                                                            |  |       |  | 5. DISCHARGE DATE (Month, day, year)<br><b>May 15, 1919</b>                                                                                                                                                                                                                                                                                                                                                            |  |          |  |
| 6. STATE<br><b>Texas</b>                                                                                                                                                                 |  |       |  | 7. DECORATIONS                                                                                                                                                                                                                                                                                                                                                                                                         |  |          |  |
| 8. GRADE OR RANK<br><b>Opl.</b>                                                                                                                                                          |  |       |  | 9. BRANCH OF SERVICE, COMPANY, REGIMENT, DIVISION<br><b>U.S. Army Rainbow Division</b>                                                                                                                                                                                                                                                                                                                                 |  |          |  |
| 10. DATE OF BIRTH (Month, day, year)<br><b>August 3, 1895</b>                                                                                                                            |  |       |  | 11. DATE OF DEATH (Month, day, year)<br><b>Oct. 3, 1969</b>                                                                                                                                                                                                                                                                                                                                                            |  |          |  |
| 12. RELIGIOUS EMBLEM (Check one)<br><input checked="" type="checkbox"/> LATIN CROSS (Christian)<br><input type="checkbox"/> STAR OF DAVID (Hebrew)<br><input type="checkbox"/> NO EMBLEM |  |       |  | 13. CHECK TYPE REQUIRED<br><input type="checkbox"/> UPRIGHT MARBLE HEADSTONE<br><input type="checkbox"/> FLAT MARBLE MARKER<br><input checked="" type="checkbox"/> FLAT GRANITE MARKER<br><input type="checkbox"/> FLAT BRONZE MARKER                                                                                                                                                                                  |  |          |  |
| DO NOT WRITE HERE                                                                                                                                                                        |  |       |  | 15. This application is submitted for a stone or marker for the unmarked grave of a deceased member or former member of the Armed Forces of the U. S., soldier of the Union or Confederate Armies of the Civil War or for an unmarked memorial plot for a non-recoverable deceased member. I hereby agree to accept responsibility for proper placement at the grave or memorial plot at no expense to the Government. |  |          |  |
| FOR VERIFICATION<br><b>16 OCT 1969</b>                                                                                                                                                   |  |       |  | 16. FREIGHT STATION<br><b>Irving, Rock Island</b>                                                                                                                                                                                                                                                                                                                                                                      |  |          |  |
| B/L<br><b>Z2684528</b>                                                                                                                                                                   |  |       |  | 17. NAME OF CONSIGNEE WHO WILL TRANSPORT STONE OR MARKER<br><b>Oak Grove Memorial Park</b>                                                                                                                                                                                                                                                                                                                             |  |          |  |
| ORDERED<br><b>19 NOV 1969</b>                                                                                                                                                            |  |       |  | ADDRESS OF CONSIGNEE (Street address, City and State)<br><b>1413 E. Irving Blvd., Irving, Tex. 75060</b>                                                                                                                                                                                                                                                                                                               |  |          |  |
| CONTRACTOR<br><b>Hillsboro Monu. Works<br/>Hillsboro, Texas</b>                                                                                                                          |  |       |  | I HAVE AGREED TO TAKE THE STONE OR MARKER TO THE CEMETERY.<br>SIGNATURE OF CONSIGNEE<br><i>Jim Wilcox</i>                                                                                                                                                                                                                                                                                                              |  |          |  |
| CPL US ARMY WWI                                                                                                                                                                          |  |       |  |                                                                                                                                                                                                                                                                                                                                                                                                                        |  |          |  |

Veteran headstone application =

[https://www.ancestry.com/imageviewer/collections/2375/images/2375\\_06\\_00043-01596?usePUB=true&usePUBJs=true&pld=2773421](https://www.ancestry.com/imageviewer/collections/2375/images/2375_06_00043-01596?usePUB=true&usePUBJs=true&pld=2773421)

HARVEY WALTER ROUNTREE X <sup>10-10-92</sup> C21 477465

Corp Co G 165 Inf 42 Div K

5031 Mission St Dallas Tex A 2 070 155

Ssn 251 448 Died 10/3/69 T 214 845 F

Born 8/5/95 R

Enl 9/5/17 Dis 5/15/19 Cl 908 270

I

U. S. VETERANS BUREAU  
MAIL AND RECORDS  
Form 7202-Rev. Sept., 1936

INDEX CARD 2-12060

Veterans Administration Master Index -

1

Harvey Walter R 251,448 \*White \*Colored:  
(Surname) (Christian name) (Army serial number)

Residence: Mt Vernon Franklin TEXAS  
(Street and house number) (Town or city) (County) (State)

\*Enlisted: ~~1917~~ \*Inducted at Mt Vernon, Tex on Sept 5, 1917

Place of birth: Naples, Tex Age or date of birth: 22 1/12 yrs

Organizations served in, with dates of assignments and transfers:  
Co G 165 Inf to disch.

Grades, with date of appointment:  
Corp Dec 1/18

Engagements:

Wounds or other injuries received in action: None.

Served overseas from Jan 23/18 to Apr 24/19, from to

Honorably discharged on demobilization May 15/19, 19

In view of occupation he was, on date of discharge, reported 0 per cent disabled.

Remarks:

Form No. 724-1, A. G. O. \*Strike out words not applicable. † Dates of departure from and arrival in the U. S.  
Nov 22, 1919

TX, WWI Military Record

## HARVEY v. STATE

Court of Civil Appeals of Texas, Dallas.

23 Apr, 1965

BATEMAN, Justice.

The State of Texas and County of Dallas condemned for highway purposes a portion of a tract of land owned by appellants Walter R. Harvey, et al. The jury found in response to special issues: (1) that the market value of the land taken was \$18,440; (2) that the market value of the remainder of the land immediately before condemnation was \$5,435, and (3) immediately after condemnation \$3,675. The sole question presented for review is whether the trial court committed reversible error in admitting in evidence, and permitting the jury to take with them into the jury room, a certain chart known as State's Exhibit 16 and marked S-16.

The record filed in this court consists only of the transcript and a partial statement of facts containing only the statements of counsel and the court in connection with the introduction of the exhibit complained of and other charts. The exhibit complained of is a large card on which is printed in red crayon:

*Case of State of Texas v. Walter R. Harvey et al. -*  
*<https://www.casemine.com/judgement/us/59149affadd7b0493462dd10/amp>*

.....

*Life*



*Special to The Star-Telegram.*

WASHINGTON, Feb. 9.—Fort Worth had five men on the Tuscania, the transport which was sent down by a German submarine. They are Garland V. Howard, S. E. Landrum, J. W. Martin, Elmer Holden and James W. Abram. It probably will be several more days before the survivors are known.

Following is a complete list of Texans on the ship: Victor A. Monneer, John Weatherall and Patrick H. White, Dallas; Robert E. Bankhard, Mount Vernon; Ben Parker, Foulburg; Edgar C. Barnes, Ranger; Garvis Belew, Rockwall; Jake Antheny, R. F. D. 1, Eustace; Ben Birmingham, Corpus Christi; Milton Blankenship, Rogers; B. E. Bluhm, Autwell; Millard Boatwright, route 6, Hico; Grant Bodwell, Bogata; Grover C. Bond, Gordonville; Pat Booker, Gunsight; Ben F. Boyd, Brownwood; B. Y. Brittain, Stephenville; Milton Brown, Pilot Point; William N. Byrd, San Angelo; L. P. Carlisle, Lometa; Pablo Carralles, Yocum; John C. Cason, Bono; R. B. Chamberbliss, Lampasas; Joe R. Cisneros, San Marcos; W. L. Cook, Aquila; O. F. Crump, Stamford; Charles L. Davis, Graham; R. A. Davis, Frisco; R. E. Dayton, Donie; Albert Diaz, Mission; James M. Dickson, Gordon; C. L. Dismukes, Sour Lake; George W. Dunlap, Little River; R. L. Eastis, Sour Lake; Sam H. Eddins, Sodonig; B. Francher, Garrison; E. C. Feyrer, Weinert; Sixton Flores, Alice; James G. Ford, Mineral Wells; Roy French, Mount Pleasant; John Fuller, Gilmer; N. J. Galloway, Memphis; Mark T. Gibson, Batson; J. Q. Golightly, Stephenville; James T. Gore, Fred, Tyler county; Thomas Grohm, Sour Lake; E. L. Hamilton, Iola; H. G. Harris, Thurber; A. D. Hartline, Richardson; W. R. Harvey, Mount Vernon; Bass L. Hawthorn, Evant; William E. Howell, Kilgore; E. R. Hughes, May, Brown county.

Fort Worth Star-Telegram  
Sat, Feb 09, 1918 Page 8

Fort Worth TX

## MORE TEXANS SAFE FROM DEATH WITH TUSCANIA

International News Service.

WASHINGTON, D. C., Feb. 10.—Additional names of Texans aboard the transport Tuscania who are safe, given out today by the War Department, includes:

Isaiah D. Adams, Crockett.  
Jake Anthony, Eustace.  
Fred Arcienega, San Antonio.  
James W. Abrams, Fort Worth.  
Edgar Brand, San Antonio.  
Pedro Belton, 107 S. Leona St., San Antonio.  
Grant Bodwell, Bogata.  
Benny F. Body, Brownwood.  
Lincoln Baker, Denison.  
Edgar W. Balentine, Denton.  
Benjamin Y. Brittain, Stephenville.  
Lister D. Bolding, Thicket.  
Grover C. Bond, Gordonville.  
Bruno Bluehn, Austwell.  
Harris A. Curry, Lorena.  
John C. Cason, Bono.  
Raymond B. Chamberlain, Lampasas.  
Frank L. Childress, Gilliland.  
Clarence E. Copeland, Seymour.  
John S. Cover, San Antonio.  
Oliver F. Crump, Stanford.  
Jose R. Cisneros, San Marcos.  
Henry F. Dean, Alto.  
Phil E. Davant, Bay City.  
James M. Dickson, Gordon.  
Charlie L. Davis, Graham.  
Carl L. Dismukes, Sour Lake.  
Walter A. Ebel, Brooksshire.  
Sam H. Eddins, Ladonia.  
Robert E. Lee Fenley, Pollock.  
James G. Ford, Mineral Wells.  
Roy French, Mt. Pleasant.  
John Fuller, Gilmer.  
Mark T. Gibbs or Gibson, Batson.  
James T. Gore, Fred.  
Earl J. Graham, Elk City.  
Thomas W. Grohm, Sour Lake.  
John Q. Goughly, Stephenville.  
Pablo Gonzales, Eldridge.  
Basil Hawthorne, Evant.  
Edgar Hamilton, Iola.  
Arthur D. Hartline, Richardson.  
Walter R. Harvey, Mt. Vernon.  
Miguel Hernandez, Laredo.  
Gariand V. Howard, Fort Worth.  
Henry G. Askew, Zephyr.  
William A. Terry, Gorman.

San Antonio Express-News

Mon, Feb 11, 1918 · Page 3

List continues -

San Antonio TX

Mrs. Nina Harvey returned Monday from a visit to Mr. and Mrs. A. B. Harvey at Marshall and Mr. and Mrs. W. R. Harvey at Dallas.

The Marshall News Messenger  
Fri, Apr 11, 1941 · Page 9

Marshall TX

visit in Houston.  
Mrs. Nina Harvey, Mrs. L. A. Hensley and little son, Dwayne and Nina Jean Harvey went to Dallas Friday to visit Mr. and Mrs. W. R. Harvey.

The Marshall News Messenger  
Sun, May 25, 1941 · Page 16

Marshall TX



Mrs. Nina Harvey had as guests over the week-end her children, Mr. and Mrs. W. R. Harvey and sons, Bryarly and Walter, Jr., of Irving, Mr. and Mrs. A. B. Harvey and daughter, Nan Carol, and Joe Harvey of Marshall and Nina Jean Harvey of Bivins.

The Marshall News Messenger  
Sun, Sep 07, 1941 · Page 14

Marshall TX

## Harvey Family Has Daingerfield Reunion

News Messenger News Service

LINDEN — Members of Mrs. Daingerfield State Park Saturday and Nina Harvey's family met at Dain-Sunday for a reunion. Boating, swimming and dancing were enjoyed.

Those present were Mrs. Harvey, Mr. and Mrs. E. E. Wommack and daughters, Gwyn of Linden, Mrs. Ernestine Marshall of Dallas, and Miss Mack Wommack of Dallas; Mr. and Mrs. L. A. Hensley and son, Dwayne, Texarkana; Mrs. Era Rountree and Linda Beth Tillman, Mount Vernon.

Mr. and Mrs. W. R. Harvey, Irving; Mr. and Mrs. A. B. Harvey, Hemphill; Mr. and Mrs. John Kirby, Hemphill; Mr. and Mrs. R. A. Patterson and Patty Glass, Mr. and Mrs. Louie Meek and daughter, Barbara, Shreveport; Mr. and Mrs. Vinson Ferrell and Wesley Ferrell, Linden.

"Marshall (TX) News Messenger" Thursday 9 Jun 1949 p 5 – the 2<sup>nd</sup> & 3<sup>rd</sup> lines of the article are transposed



*"Irving (TX) News Record" Thursday 5 Apr 1956 p 17*

# Attendance Poor At Sanitation School

Only four individuals, in addition to the school cafeteria personnel, attended the Sanitation School conducted last week by the Dallas County Health Department in conjunction with the Distributive Education department of the Irving Schools.

Al Prator and Frank Hodges, County Health Department representatives expressed their disappointment in the lack of response of local restaurant and food handlers.

The school is conducted annually, free of charge, and is most beneficial to anyone preparing or handling food.

Only 15 of the persons attending, qualified for certificates.

Among those taking the course were: W.R. Harvey of Harvey's Barbecue; Karen Cooper of Lloyd's Variety Store; Mary Voirin of Tiger Den; and Mr. Ford of Farina's. School lunchroom personnel included Mmes. Marie Pickens, Supervisor; Ina Barnett, Juanita Miller, Janie Violet, Arlene Barnett, Rilletta Cooper, Eloise Burk, Lucille Walters, Lu-

cille Scoggins, Eunice Alexander, Lillie Mae Looper, Ernestine Russell, Era Paschall, Ruby Collins, Juanita Brod, Zona Story, Helen Smith, Bobbie Hanna, Lillian Zellner, Hazel Werley, Jane Hull, Myrtle Veach, Bertha Duncan, Dorothy Spears and Hilda Calhoun.

Mrs. Duncan, cafeteria manager at Schulze Elementary (East) School, has attended the classes each year since 1949.

The Irving News Record  
Thu, Jan 23, 1958 - Page 14

*Is this him? His son? Different person? - Irving TX*

POWER OF SUGGESTION:  
A package of deer meat arrived for W. R. Harvey Sr. of Irving the other day. It came from his brother who had enjoyed a successful hunt in Colorado. Despite the fact that he has a well-loaded deep freezer at no cost or inconvenience to himself, guess where Mr. Harvey will be this weekend. Hunting some deer for himself, naturally.

\*\*\*

The Irving Daily News Texan  
Thu, Nov 15, 1962 - Page 12

Irving TX

## Personal Notices

106

I AM not responsible for any debts incurred by anyone but myself. W. R. Harvey Sr., 3041 University, Irving.

"Irving (TX) Daily News" Thursday 23 Jan 1964 p 7

Wife

Mrs. Matt Brown, her sister, Mrs. Baby Brooks, brother, R. Housewright, Miss Foy Tillman and Mrs. Maude Brooks and Leonard Creel of Wylie, motored to McKinney today, attending the Fair and to visit Mrs. Baby Brooks' daughter, Mrs. G. C. Walters, while in the city.

The Courier-Gazette  
Sat, Nov 11, 1916 - Page 4

McKinney TX

Miss Foy Tillman is here from Wylie this week in attendance upon the Teachers' Institute. She is one of the able members of the faculty of the Wylie public school.

The Courier-Gazette  
Mon, Dec 18, 1916 · Page 4

McKinney TX

057-0-0-1-057-0-1 TEXAS DEPARTMENT OF HEALTH  
BUREAU OF VITAL STATISTICS 5974049  
STATE OF TEXAS CERTIFICATE OF DEATH STATE FILE NO. 53776

1. PLACE OF DEATH  
a. COUNTY Dallas  
b. CITY (If outside corporate limits, write RURAL and give precinct no.) Irving Rural 8  
c. LENGTH OF STAY (In this place) 16 yrs.  
d. FULL NAME OF HOSPITAL OR INSTITUTION Roselane  
e. STREET ADDRESS Roselane

2. USUAL RESIDENCE (Where deceased lived. If institution: institution before admission)  
a. STATE Texas b. COUNTY Dallas  
c. CITY (If outside corporate limits, write RURAL and give precinct no.) Irving, Rural 8  
d. STREET ADDRESS Roselane

3. NAME OF DECEASED  
a. (First) RAY b. (Middle) TILLMAN c. (Last) HARVEY  
4. DATE OF DEATH November 14, 1952

5. SEX Female 6. COLOR OR RACE White 7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married 8. DATE OF BIRTH March 15, 1894 9. AGE YEARS MONTHS DAYS 58 7 29 10. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Housewife 11. BIRTHPLACE (State or foreign country) Texas

12. FATHER'S NAME D.B. Tillman BIRTHPLACE Texas 13. MOTHER'S MAIDEN NAME Cora Dossan BIRTHPLACE Texas

14. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) no 15. SOCIAL SECURITY NO. no 16. INFORMANT'S SIGNATURE Walter D. Dossan

17. CAUSE OF DEATH  
Enter only one cause per line for (a), (b), and (c)  
1. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH\* (a) Heart Disease  
2. ANTECEDENT CAUSES  
\*This does not mean the mode of dying, such as heart failure, asthma, etc. It means the disease, injury, or complication which caused death.  
3. OTHER SIGNIFICANT CONDITIONS  
Conditions contributing to the death but not related to the disease or condition causing death.  
18a. DATE OF OPERATION no 18b. MAJOR FINDINGS OF OPERATION no

19. MEDICAL CERTIFICATION  
TEXAS DEPARTMENT OF HEALTH  
REC'D DEC 9 1952  
BUREAU OF VITAL STATISTICS

20a. ACCIDENT SUICIDE suicide 20b. PLACE OF INJURY (If in or about home, farm, factory, store, office, etc.) None 20c. (CITY, TOWN, OR PRECINCT NO.) (COUNTY) (STATE) Irving 8 Dallas Texas  
20d. TIME OF INJURY (Month) (Day) (Year) 11 14 52 P.M. 20e. INJURY OCCURRED WHILE AT WORK ☒ AT WORK ☐ 20f. HOW DID INJURY OCCUR? Subject hanged self

21. I hereby certify that I attended the deceased from 11-14-52 to 11-14-52, and that death occurred at 11-14-52 from the causes and on the date stated above.

22a. SIGNATURE Walter D. Dossan 22b. ADDRESS Irving Texas 22c. DATE SIGNED 11-17-52

23a. BURIAL, CREMATION, REMOVAL (Specify) Burial 23b. DATE November 16/52 23c. NAME OF CEMETERY OR CREMATORY Oak Grove Memorial Park  
23d. LOCATION (City, town, or vicinity) Irving Texas 23e. FUNERAL DIRECTOR'S SIGNATURE Blacks Funeral Home

24a. REGISTRAR'S FILE NO. 47 24b. DATE REC'D BY LOCAL REGISTRAR 11-17-52 24c. REGISTRAR'S SIGNATURE Walter D. Dossan

NOTE THE INFORMATION CALLED FOR ON THE REVERSE SIDE

[https://www.ancestry.com/imageviewer/collections/2272/images/40394\\_b062413-01212?treeid=32070673&personid=29570517825&queryId=e48be4a9-5acd-482d-a496-ae7a0d39596f&usePUB=true&\\_phsrc=iKj15713&\\_phstart=successSource&usePUBJs=true&pId=22186940](https://www.ancestry.com/imageviewer/collections/2272/images/40394_b062413-01212?treeid=32070673&personid=29570517825&queryId=e48be4a9-5acd-482d-a496-ae7a0d39596f&usePUB=true&_phsrc=iKj15713&_phstart=successSource&usePUBJs=true&pId=22186940)

Children



TEXAS STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS  
STANDARD CERTIFICATE OF BIRTH

B. O. V. S.  
FORM  
B

PLACE OF BIRTH

(1) County Dallas  
City Dallas  
Reg. Dis. No. \_\_\_\_\_ Register No. 2145  
(No. Baylor Hospital St. \_\_\_\_\_ Ward \_\_\_\_\_)

(2) FULL NAME OF CHILD Briarly Ray Harvey } If child is not yet named, make supplemental report, as directed

(3) Sex of Child Male (4) Twin, triplet, or other \_\_\_\_\_ (5) Number in order of birth \_\_\_\_\_ (6) Legitimate \_\_\_\_\_ (7) Date of Birth 8-2-1921  
(To be answered in event of plural births) (Month) (Day) (Year)

FATHER (8) FULL NAME Walter R. Harvey (9) RESIDENCE 2209 Ann Arbor (10) COLOR White (11) AGE AT LAST BIRTHDAY 25 (Years)

MOTHER (12) FULL MAIDEN NAME Foy Tillman (13) RESIDENCE 2209 Ann Arbor (14) COLOR White (15) AGE AT LAST BIRTHDAY 27 (Years)

(16) BIRTHPLACE Nepes, Tex. (17) BIRTHPLACE Mt Vernon Tex  
(18) OCCUPATION Carpenter (19) OCCUPATION Wife

(20) Number of children born to this mother, including present birth 1 Number of children of this mother now living 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was born alive 15 at 2 P M. on the date above stated.  
Dr. R. C. Reed  
(Signature) \_\_\_\_\_ (Physician or Midwife)  
Address 305 W. 1st St.  
Filed 3-1921, 192 Birdie Smith  
Registrar.

Given name added from a supplemental report \_\_\_\_\_ 192 \_\_\_\_\_

Tobin, Austin Form 32b-TD-2-21-190M. Registrar.

[https://www.ancestry.com/imageviewer/collections/2275/images/33153\\_B061461-04263?treeid=32070673&personid=29570517825&queryId=4ab20151-f3be-404d-89e5-ff560895e4af&usePUB=true&\\_phsrc=iKj15717&\\_phstart=successSource&usePUBJs=true&pld=120173631](https://www.ancestry.com/imageviewer/collections/2275/images/33153_B061461-04263?treeid=32070673&personid=29570517825&queryId=4ab20151-f3be-404d-89e5-ff560895e4af&usePUB=true&_phsrc=iKj15717&_phstart=successSource&usePUBJs=true&pld=120173631)

Son Bryarly Ray Harvey (1921-2007)



**Florida Marriage Collection, 1822-1875 and 1927-2001**



[View image](#)

[View record](#)

[Listen and explore](#)

Name **Bryarly Ray Harvey**

Marriage Date 1944

Marriage Place Escambia, Florida, USA

Spouse Mary Louise Castel

Certificate 18777

Volume 910

Source Florida Department of Health

<https://www.ancestry.com/family-tree/person/tree/32070673/person/29570517826/facts>

|             |                                                                                                                                                                                                                           |
|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name        | Mary Louise Casteel<br>[Mary Louise Harvey]<br>[Mary Clark]<br>[Mary Searcy]                                                                                                                                              |
| Gender      | Female                                                                                                                                                                                                                    |
| Race        | White                                                                                                                                                                                                                     |
| Birth Date  | 3 Oct 1923                                                                                                                                                                                                                |
| Birth Place | Ennis Ellis, Texas<br>[Ennis, Texas]                                                                                                                                                                                      |
| Death Date  | 6 Jul 1998                                                                                                                                                                                                                |
| Father      | <a href="#">William N Casteel</a>                                                                                                                                                                                         |
| Mother      | <a href="#">Roberta B Roberts</a>                                                                                                                                                                                         |
| SSN         | 461241806                                                                                                                                                                                                                 |
| Notes       | Jul 1941: Name Listed As Mary Louise Casteel; Apr 1954: Name Listed As Mary Louise Harvey; Jan 1961: Name Listed As Mary Louise Clark; Apr 1961: Name Listed As Mary Lou Searcy; 10 Jul 1998: Name Listed As Mary L Clark |

[https://www.ancestry.com/search/collections/60901/records/38396720?tid=32070673&pid=29570517917&queryId=cab5dd60-39e0-4477-8d88-98e139461b0b&\\_phsrc=iKj15719&\\_phstart=successSource](https://www.ancestry.com/search/collections/60901/records/38396720?tid=32070673&pid=29570517917&queryId=cab5dd60-39e0-4477-8d88-98e139461b0b&_phsrc=iKj15719&_phstart=successSource)

THE STATE OF TEXAS, } 131743  
County of Dallas. } ~~Box~~

To any Regularly Licensed or Ordained Minister of the Gospel, Jewish Rabbi, Judge of the District or County Court, or Justice of the Peace in the State of TEXAS—GREETING:

YOU ARE HEREBY AUTHORIZED To Celebrate the Rites of Matrimony between Mr. Bryarly Ray Harvey Sr. and Mrs. Katie Ferguson and make due return to the County Clerk of said County, within sixty days thereafter, certifying your action under this License.

WITNESS My official signature and seal of office, at office in Dallas, this 1st, day of December, A. D. 19 54.  
ED H. STEGER, County Clerk.

(L.S.) By Mabel Hawthorne, Deputy.

I, Arthur Freeman hereby certify that on the 2nd, day of December, A. D. 19 54 I united in Marriage Mr. Bryarly Ray Harvey Jr. and Mrs. Katie Ferguson the parties above mentioned.

WITNESS My hand, this 2nd, day of Dec., A. D. 19 54.  
Rev. Arthur Freeman, Southern Baptist Minister.

THE ORIGINAL OF THIS MARRIAGE LICENSE WAS ISSUED IN ACCORDANCE WITH HOUSE BILL NO. 583 PASSED BY THE 51ST LEGISLATURE OF TEXAS.

Returned and filed for record the 6 day of December, 1954 recorded the 8 day of December, 1954.  
ED H. STEGER, County Clerk.

How disposed of 1819 West Ireland, Irving, Texas. By 3/14/57 8 December 1954.  
Deputy.

[https://www.ancestry.com/imageviewer/collections/9168/images/49068\\_b581132-00724?usePUB=true&usePUBJs=true&pld=131270224](https://www.ancestry.com/imageviewer/collections/9168/images/49068_b581132-00724?usePUB=true&usePUBJs=true&pld=131270224)

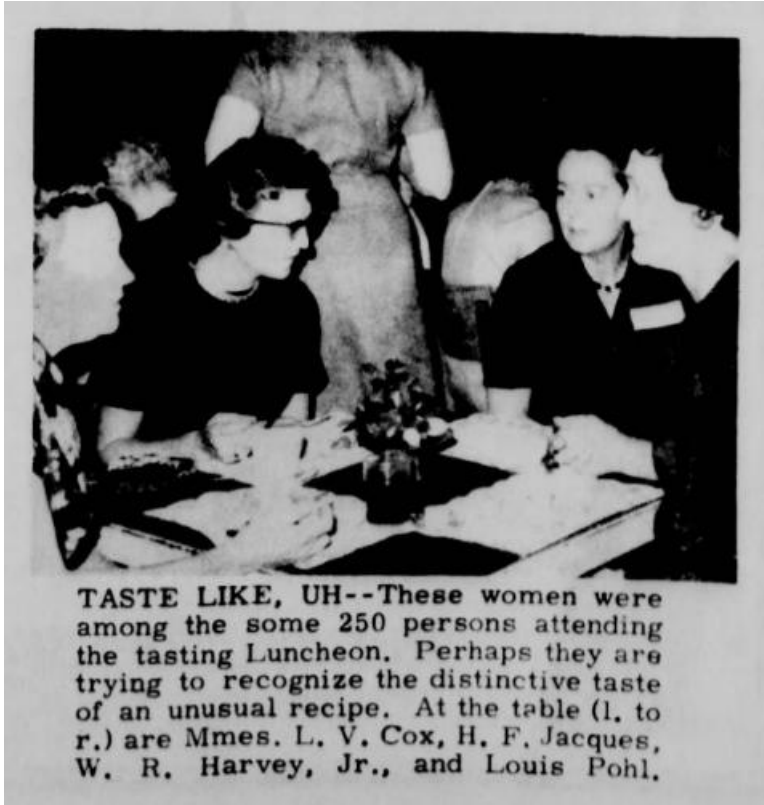
### Social Security Death Index

View record

✦ Listen and explore

|                        |                                   |
|------------------------|-----------------------------------|
| Name                   | Katie O. Harvey                   |
| Social Security Number | 460-20-8026                       |
| Birth Date             | 3 Feb 1916                        |
| Issue year             | Before 1951                       |
| Issue State            | Texas                             |
| Last Residence         | 75062, Irving, Dallas, Texas, USA |
| Death Date             | 10 Oct 2003                       |

<https://www.ancestry.com/family-tree/person/tree/32070673/person/29570517944/facts>



The Irving Daily News Texan  
Sun, Sep 20, 1964 · Page 28

Irving TX – 2<sup>nd</sup> from right

.....

TEXAS STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS  
STANDARD CERTIFICATE OF BIRTH

20243  
1923

B.O.V.S.  
FORM  
B

PLACE OF BIRTH

(1) County Dallas  
City Dallas Reg. Dis. No. 123 Register No. 123  
(No. Baylor Hospital St.; Ward)

(2) FULL NAME OF CHILD Walter Rountree Harvey Jr. If child is not yet named, make supplemental report, as directed

(3) Sex of Child Male (4) Twin, triplet, or other (5) Number in order of birth (12) Legitimate Yes (13) Date of Birth Apr 16 1923  
(To be answered in event of plural births) (Yes or no) Birth (Month) (Day) (Year)

FATHER (14) FULL MAIDEN NAME Foy Tillman  
(7) RESIDENCE 5031 Mission (15) RESIDENCE 5031 Mission  
(8) COLOR White AGE AT LAST BIRTHDAY 36 (16) COLOR White AGE AT LAST BIRTHDAY 29  
(Years) (Years)  
(9) BIRTHPLACE Dallas, Tex (17) BIRTHPLACE Franklin Co. Tex  
(18) OCCUPATION Carpenter (18) OCCUPATION Wife

(11) Number of children born to this mother, including present birth 2 Number of children of this mother now living 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(19) I hereby certify that I attended the birth of this child, who was born alive at 5:05 A. M. on the date above stated.  
Dr. J. H. Rouse  
(Signature) Dr. J. H. Rouse  
(Physician or Midwife)  
Address 610 Medicine Arts Bldg.  
File Apr 18, 1923 Birdie Smith  
Registrar.

Given name added from a supplemental report \_\_\_\_\_ 192\_\_\_\_\_  
Registrar.

Son Walter Rountree Harvey Jr. (1923-2001) -

[https://www.ancestry.com/imageviewer/collections/2275/images/33153\\_B061492-00319?usePUB=true&usePUBJs=true&pld=108856062](https://www.ancestry.com/imageviewer/collections/2275/images/33153_B061492-00319?usePUB=true&usePUBJs=true&pld=108856062)



Find A Grave 138955842

THE STATE OF TEXAS, } 57243  
County of Dallas.

To any Regularly Licensed or Ordained Minister of the Gospel, Jewish Rabbi, Judge of the District or County Court, or Justice of the Peace in the State of Texas—GREETING:

YOU ARE HEREBY AUTHORIZED To Celebrate the Rites of Matrimony between Walter R. Harvey Jr.  
and Miss Dorothy Dorety and make due return to the County Clerk of said County, within sixty days thereafter, certifying your action under this License.

WITNESS My official signature and seal of office, at office in Dallas, this 21st day of July A. D. 1945  
ED H. STEGER, County Clerk.

(L. S.) By O. H. C. Sessett Deputy.

I, Jack Merritt hereby certify that on the 24th day of July, A. D. 1945.  
I united in Marriage Walter R. Harvey Jr. and  
Dorothy Dorety the parties above mentioned.

WITNESS My hand, this 24th day of July, A. D. 1945  
Jack Merritt, Minister

Returned and filed for record the 30 day of JULY, 1945 and recorded the 30 day of JULY, 1945  
ED H. STEGER, County Clerk.

By [Signature] Deputy.  
30 JULY, 1945

How disposed of Irving, Texas.

[https://www.ancestry.com/imageviewer/collections/9168/images/49068\\_b581116-00911?pid=131196826](https://www.ancestry.com/imageviewer/collections/9168/images/49068_b581116-00911?pid=131196826)

## Dorothy Harvey

Dorothy "Mer" Harvey of Irving died Friday. Born on Sept. 6, 1923, in Irving, she was the first editor of *The Lair* newspaper of Irving High School, and she owned and operated Harvey's BBQ. She was a member of the Irving Women's Club and Northgate United Methodist Church. Services were Monday at Brown's Memorial Funeral Home with burial at Oak Grove Memorial Gardens in Irving.

Survivors include husband Walter R. Harvey Jr. of Irving; daughter Kary L. Fieseler and husband Joe Pat of Irving; son Walter R. Harvey III and wife Judy of Juneau, Alaska; and five grandchildren.

Irving News  
March 1, 2001

Find A Grave 138955868



Father

## Faded Document

**TEXAS STATE DEPARTMENT OF HEALTH**  
BUREAU OF VITAL STATISTICS  
Standard Certificate of Death.

1 PLACE OF DEATH  
State of Texas  
COUNTY OF Cass  
CITY OR PRECINCT Linden

2 FULL NAME OF DECEASED J.L. Harvey

3 LENGTH OF RESIDENCE IN CITY WHERE DEATH OCCURRED 3 yrs. 4 mos. 12 days

4 HOW LONG IN U. S. If foreign born?        yrs.        mos.        days

5 SEX Male

6 COLOR OR RACE Wh.

7 SINGLE, MARRIED, WIDOWED, OR DIVORCED (Write the word) Married

8a. If married, widowed, or divorced HUSBAND of Mrs. J.L. Harvey (or) WIFE of       

9 DATE OF BIRTH (Month, day, and year) Nov. 2, 1862

10 AGE Yrs. 67 Months        Days 25 If LESS than 1 day, — hrs. or — min.)

11 OCCUPATION OF DECEASED (a) Trade, profession or particular kind of work Salesman (b) General nature of industry, business, or establishment in which employed (or employer)       

12 BIRTHPLACE (State or country) Macon Co. Ga.

13 NAME OF FATHER Marion Harvey

14 BIRTHPLACE OF FATHER (State or country) Macon Co. Ga.

15 MAIDEN NAME OF MOTHER       

16 BIRTHPLACE OF MOTHER (State or country)       

17 Signature of Informant Mrs. E. W. Mack

18 ADDRESS Linden

19 FILED 12-24 1929 Lillian Nelson

14 DATE OF DEATH Dec 3

15 I HEREBY CERTIFY, That I attended deceased from July 1, 1927 to Dec 3, 1929 that I last saw him alive on Dec 2, 1929

16 and that death occurred on the date stated above, at        m. The CAUSE OF DEATH was as follows:  
Ptyphosis  
(duration)        yrs. 5 mos.        ds.  
CONTRIBUTORY (Secondary) Cardiac Insufficiency  
(duration)        yrs.        mos.        ds.

17 Where was disease contracted         
if not at place of death?       

18 Did an operation precede death? Yes Date of       

19 Was there an autopsy? Yes

20 What test confirmed diagnosis?       

(Signed) O. B. Taylor M. D.  
12-24 1929 (Address) Linden, Tx

21 PLACE OF BURIAL OR REMOVAL St. Vernon

22 DATE OF BURIAL       

23 UNDERTAKER W. H. Williams

24 ADDRESS Linden, Texas

Form 31b—81581-229-80M

[https://www.ancestry.com/imageviewer/collections/2272/images/40394\\_b061992-03521?pld=22377087](https://www.ancestry.com/imageviewer/collections/2272/images/40394_b061992-03521?pld=22377087)

Mother

## Texas, County Marriage Records, 1817-1965

View record

Name Jesse L Harvey  
 Gender Male  
 Marriage Date 22 Dec 1892  
 Marriage Place Morris, Texas, USA  
 Spouse Nima M Rountree  
 Film Number 001435331

<https://www.ancestry.com/family-tree/person/tree/158485743/person/232115739661/facts>

9/571

STATE OF TEXAS 034-07-1 034-08 CERTIFICATE OF DEATH 4200 35 35967

1. PLACE OF DEATH  
 a. COUNTY Class  
 b. CITY OR TOWN (If outside city limits, give precinct no.) Sinden  
 c. LENGTH OF STAY 30 yrs.  
 d. NAME OF (If not in hospital, give street address) Hospital  
 e. IS PLACE OF DEATH INSIDE CITY LIMITS? YES ☒ NO ☐

2. USUAL RESIDENCE (Where deceased lived. If institution, residence before admission)  
 a. STATE Texas b. COUNTY Class  
 c. CITY OR TOWN (If outside city limits, give precinct no.) Sinden  
 d. STREET ADDRESS (If rural, give location)  
 e. IS RESIDENCE INSIDE CITY LIMITS? YES ☒ NO ☐ f. IS RESIDENCE ON A FARM? YES ☐ NO ☒

3. NAME OF DECEASED (Type or print)  
 (a) First Nima (b) Middle Mal (c) Last Harvey  
 d. DATE OF BIRTH 6-16-1963  
 e. AGE (In years, months, days, hours, minutes)  
 f. BIRTHPLACE (State or foreign country) Texas g. CITIZEN OF WHAT COUNTRY? U.S.A.

4. USUAL OCCUPATION (Give kind of work done 10b. KIND OF BUSINESS OR INDUSTRY)  
 a. COLOR OR RACE Female b. WHITE White c. MARRIED ☒ NEVER MARRIED ☐ WIDOWED ☐ DIVORCED ☐  
 d. FATHER'S NAME Wiley B. Rountree e. MOTHER'S MAIDEN NAME Elizabeth Halbrook

5. WAS DECEASED EVER IN U.S. ARMED FORCES? (If yes, give war or dates of service) No 6. SOCIAL SECURITY NO. none 7. INFORMANT Wm. L. A. Hendley

8. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c).)  
 PART I. DEATH WAS CAUSED BY:  
 IMMEDIATE CAUSE (a) menia  
 Conditions, if any, which gave rise to above cause (a), stating the underlying cause last. DUE TO (b) ASHD  
 DUE TO (c)  
 PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE CONDITION GIVEN IN PART (a) 19. WAS AUTOPSY PERFORMED? YES ☐ NO ☐

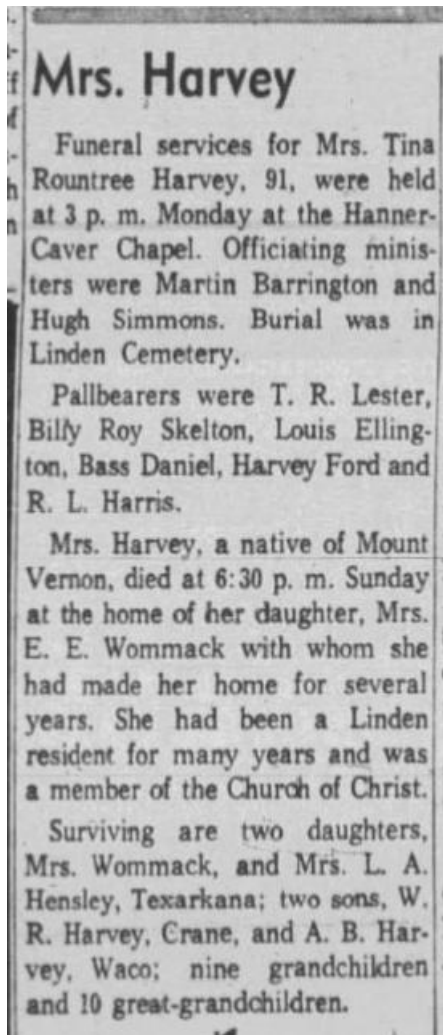
20a. ACCIDENT ☐ SUICIDE ☐ HOMICIDE ☐ 20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in Part I or Part II of Item 18.)  
 20c. TIME OF INJURY Hour 10 a.m. 4 p.m. Month June Day 16 Year 1963  
 20d. INJURY OCCURRED WHILE AT WORK ☐ NOT WHILE AT WORK ☐ 20e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office building, etc.)  
 20f. CITY, TOWN, OR LOCATION Sinden STATE Texas

21. I hereby certify that I attended the deceased from June 16 1963 to June 16 1963 and last saw the deceased alive 6:30 A.M. on the date stated above, and to the best of my knowledge, from the causes stated.  
 22a. SIGNATURE Ray S. Buecy M.D. 22b. ADDRESS Sinden 22c. DATE SIGNED 6-17-63

23a. BURIAL, CREMATION, REMOVAL (Specify) Burial 23b. DATE 6-17-1963 23c. NAME OF CEMETERY OR CREMATORY Sinden  
 23d. LOCATION (City, town, or county) Sinden (State) Texas  
 23e. REGISTRAR'S FILE NO. 1866 23f. DATE REC'D BY LOCAL REGISTRAR June 18, 1963 23g. REGISTRAR'S SIGNATURE Wayne C. Brown

TEXAS DEPARTMENT OF HEALTH  
 REC'D. JUL 10 1963  
 BUREAU OF VITAL STATISTICS  
 COUNTY STATE

[https://www.ancestry.com/imageviewer/collections/2272/images/40394\\_b062639-01487?treeid=158485743&personid=232115974082&queryId=219f1623-725d-482e-b5d5-bf1a660be1dd&usePUB=true&\\_phsrc=iKj15682&\\_phstart=successSource&usePUBJs=true&pId=22947194](https://www.ancestry.com/imageviewer/collections/2272/images/40394_b062639-01487?treeid=158485743&personid=232115974082&queryId=219f1623-725d-482e-b5d5-bf1a660be1dd&usePUB=true&_phsrc=iKj15682&_phstart=successSource&usePUBJs=true&pId=22947194)



The Marshall News Messenger  
Tue, Jun 18, 1963 · Page 2

Mistakenly identified as TINA instead of NINA in her obituary -  
Marshall TX

Survived by daughters Jessie Harvey Wommack & Oneida Harvey Hensley & sons Walter Rountree  
& Adrian Bryan Harvey

Siblings

## Jessie Elizabeth Wommack

LINDEN — Services for Jessie Elizabeth Wommack, 98, will be 2 p.m. today at Haaland Family Funeral Home in Linden with the Rev. J.R. Perkins officiating.

Burial will be in Linden Cemetery.

She died Sept. 16.

Mrs. Wommack was a member of the Church of Christ.

She was born May 18, 1894.

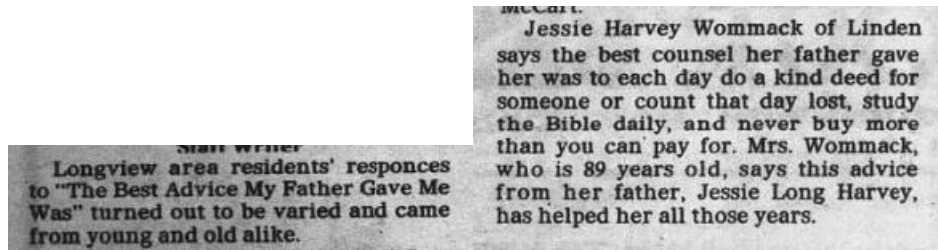
She was preceded in death by husband, Ernest; and daughters, Gwendolyn Murphy and Ernestine Whitehead.

Survivors include son-in-law, Robert Murphy of Slidell, La.; sister, Oneida Crudup of Texarkana; grandson, Chris Murphy of Dallas; and a number of nieces and nephews.

Obituary of sister *Jessie Elizabeth Harvey Wommack (1894-1992)* – “Longview (TX) News-Journal”  
Friday 18 Sep 1992 p 14



Jessie – Find A Grave 95422023



The Longview Daily News  
Tue, Jun 14, 1983 · Page 40

*Longview TX*

**Texas Death Index, 1903-2000**

View record

✦ Listen and explore

|                |                          |
|----------------|--------------------------|
| Name           | Jessie Elizabeth Wommack |
| Gender         | Female                   |
| Marital Status | Widowed                  |
| Death Age      | 98                       |
| Birth Date     | abt 1894                 |
| Death Date     | 16 Sep 1992              |
| Death Place    | Cass, Texas, USA         |
| Father         | Jess Long Harvey         |
| Mother         | Nina Mae Roundtree       |
| Case Number    | 86415                    |

<https://www.ancestry.com/family-tree/person/tree/32070673/person/29570436851/facts>



STATE OF TEXAS 034-50-2 034-00 4201 25 CERTIFICATE OF DEATH STATE FILE NO. 21939

1. PLACE OF DEATH  
a. COUNTY ASS  
b. CITY OR TOWN (If outside city limits, give precinct no.) Linden  
c. NAME OF (if not in hospital, give street address) Linden Municipal Hospital  
d. NAME OF (if not in hospital, give street address) South Main  
e. IS PLACE OF DEATH INSIDE CITY LIMITS? YES ☒ NO ☐

2. USUAL RESIDENCE (When deceased lived, if institution, residence before admission)  
a. STATE Texas  
b. COUNTY Cass  
c. CITY OR TOWN (If outside city limits, give precinct no.) Linden  
d. STREET ADDRESS (If rural, give location) South Main  
e. IS RESIDENCE INSIDE CITY LIMITS? YES ☒ NO ☐ f. IS RESIDENCE ON A FARM? YES ☐ NO ☒

3. NAME OF DECEASED (Type or print)  
(a) First ERNEST (b) Middle EDGAR (c) Last WOMMACH  
4. DATE OF DEATH 4-22-66

5. SEX Male 6. COLOR OR RACE White 7. MARRIAGE STATUS ☒ Married ☐ Never Married ☐ Widowed ☐ Divorced ☐  
8. DATE OF BIRTH Oct 28, 1889 9. AGE (In years, last birthday) 76 10. UNDER 1 YEAR ☐ 11. UNDER 34 HRS. ☐

12. USUAL OCCUPATION (Give kind of work done, or last most of working life, even if retired) Railroad 13. KIND OF BUSINESS OR INDUSTRY Railroad Agent 14. BIRTHPLACE (State or foreign country) Texas 15. CITIZEN OF WHAT COUNTRY? U.S.A.

16. FATHER'S NAME Joy Wommach 17. MOTHER'S MAIDEN NAME Lela Smith

18. WAS DECEASED IN U.S. ARMED FORCES? (Yes, no, or unknown) Yes 19. SOCIAL SECURITY NO. 444-14-5229 20. INFORMANT Mrs. P. G. Wommach

21. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c).)  
PART I. DEATH WAS CAUSED BY:  
IMMEDIATE CAUSE (a) Myocardial Infarction (b) 4 Days  
Conditions, if any, which gave rise to above cause (c):  
DUE TO (a) Myocardial Infarction  
DUE TO (b) 4 Days

PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RECORDED IN PART I:  
22a. ACCIDENT ☐ SUICIDE ☐ HOMICIDE ☐ 22b. DESCRIBE HOW INJURY OCCURRED (If none, enter "None")  
22c. TIME OF INJURY (Hour, month, day, year)  
22d. INJURY OCCURRED (Specify)  
22e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office building, etc.)  
22f. CITY, TOWN, OR LOCATION Linden COUNTY Cass STATE Texas

23. I hereby certify that I attended the deceased from 4-20-66 to 4-22-66 and last saw the deceased alive on the date stated above, and to the best of my knowledge, from the causes stated.  
24. SIGNATURE H. W. Barnett Jr. M.D. 25. ADDRESS Box 560 Linden, Texas 26. DATE SIGNED 4-25-66

27a. BURIAL, CREMATION, REMOVAL (Specify) Burial 27b. DATE 4-23-66 27c. NAME OF CEMETERY OR CREMATORY Linden Texas

28a. LOCATION Linden 28b. DATE REC'D BY LOCAL REGISTRAR 4-25-1966 28c. REGISTRAR'S SIGNATURE Wm. C. Brown

29. REGISTRAR'S FILE NO. 104

TEXAS DEPARTMENT OF HEALTH  
REC'D MAY 9 1966  
BUREAU OF VITAL STATISTICS

[https://www.ancestry.com/imageviewer/collections/2272/images/33154\\_b062712-02336?pid=981862](https://www.ancestry.com/imageviewer/collections/2272/images/33154_b062712-02336?pid=981862)



## Elizabeth Harvey Wommack Memorial Courtesy of Find a Grave

Elizaveth Harvey Wommack

Birth: May 18, 1894 Franklin County, Texas, USA

Death: Sep. 16, 1992 Cass County, Texas, USA

☆☆★☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆

: ) : "Remember Mrs. Wommack" : ) :

☆☆★☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆

Mrs. Wommack was the wife of Ernest Edgar Wommack (Born: 1889 Died: 1966).

She was the mother of Gwen Murphy and Ernestine Whitehead.

Bob Murphy was her son in law.

She had 1 grandson, Chris Murphy.

Mrs. Wommack was born and raised in Mount Vernon, Texas. She taught school in Marietta before she married.

Mr. & Mrs. Wommack married June 17, 1920

Mrs. Wommack was a great story teller and she loved telling stories about the old days.

She was a wonderful person and was always willing to help others.

Mrs. Wommack enjoyed painting and she displayed many of her beautiful oil paintings in her home.

Mrs Wommack also wrote a weekly column for the Cass County paper.

I remember the first Thanksgiving after I graduated High School, I had to work swing shift at the hospital. My family went out of town for the holiday. Mrs. Wommack invited me to her house for Thanksgiving. She cooked an entire meal for just the two of us. Thanksgiving 1983 will always be the most special and memorable Thanksgiving of my life. Mrs. Wommack was so precious.....and she was an awesome cook too.

Many lives were touched and so many memories live on because of this very precious lady.

Mrs. Wommack was a Christian, and a faithful member of the Church of Christ, in Linden, Texas.

Family links:

Children:

Ernestine *Wommack* Whitehead (1921 - 1991)\*

Gwendolyn *Wommack* Murphy (1929 - 1991)\*

Burial:

Linden Cemetery #1

Linden

Cass County

Texas, USA

Created by: Annette H

Record added: Aug 16, 2012

Find A Grave Memorial# 95422023

[https://www.ancestry.com/mediaui-viewer/collection/1030/tree/32070673/person/29570436851/media/3a9b17cb-1427-496a-a37f-c07b8f927f53?queryId=6233871f-cbe3-43cb-b869-83a71cb84678&searchContextTreeId=32070673&searchContextPersonId=29570436851&\\_phsrc=iKj15687&\\_phstart=successSource](https://www.ancestry.com/mediaui-viewer/collection/1030/tree/32070673/person/29570436851/media/3a9b17cb-1427-496a-a37f-c07b8f927f53?queryId=6233871f-cbe3-43cb-b869-83a71cb84678&searchContextTreeId=32070673&searchContextPersonId=29570436851&_phsrc=iKj15687&_phstart=successSource)

## Weiner Roast Compliments Visitor

News Messenger News Service

LINDEN, Tex. — Complimenting her guest, Walter R. Harvey, Jr., of Irving, Mrs. E. E. Wommack entertained with a weiner roast and party on the Wommack lawn Wednesday evening.

Baskets of cut flowers added to the attractiveness of the lawn.

Upon arrival the guests roasted the weiners and marshmallows, after which they were invited into the living room.

Games were directed by Ernestine Wommack. There were 20 guests.

The Marshall News Messenger  
Sun, Jul 07, 1940 · Page 11

Marshall TX

# Jessie Harvey

Texas, U.S., County Marriage Records, 1817-1965



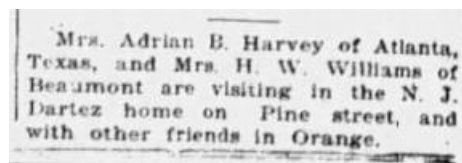
Save this record?

Save

## Detail ⓘ

|                |                                  |
|----------------|----------------------------------|
| Name           | Jessie Harvey                    |
| Gender         | Female                           |
| Marriage Date  | 17 Jun 1920                      |
| Marriage Place | Cass, Texas, USA                 |
| Spouse         | <a href="#">Ernest E Wommack</a> |
| Film Number    | 001435977                        |

<https://www.ancestry.com/search/collections/61383/records/900895800?tid=32070673&pid=29570436851&queryId=77a1eb2b-b636-4813-badb-fac784f201f9&phsrc=iKj15688&phstart=successSource>



*Brother Adrian Bryant Harvey (1898-1970) -*

The Orange Leader  
Tue, Apr 10, 1928 · Page 3

Orange TX

STATE OF TEXAS **155-012 155-00** CERTIFICATE OF DEATH **1579 14** STATE FILE NO. **82134**

|                                                                                                                                                                                                                                                                                     |                                      |                                                                                                                                                                                                              |                                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|
| 1. PLACE OF DEATH<br>a. COUNTY <b>MCLENNAN</b>                                                                                                                                                                                                                                      |                                      | 2. USUAL RESIDENCE (Where deceased lived. If institution, residence before admission)<br>a. STATE <b>TEXAS</b> b. COUNTY <b>MCLENNAN</b>                                                                     |                                          |
| b. CITY OR TOWN (If outside city limits, give precinct no.)<br><b>WACO</b>                                                                                                                                                                                                          |                                      | c. CITY OR TOWN (If outside city limits, give precinct no.)<br><b>ROBINSON</b>                                                                                                                               |                                          |
| d. NAME OF (if not in hospital, give street address)<br>HOSPITAL OR INSTITUTION <b>PROVIDENCE HOSPITAL</b>                                                                                                                                                                          |                                      | e. STREET ADDRESS (If rural, give location)<br><b>111 MEADOWBROOK</b>                                                                                                                                        |                                          |
| a. IS PLACE OF DEATH INSIDE CITY LIMITS?<br>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>                                                                                                                                                                     |                                      | a. IS RESIDENCE INSIDE CITY LIMITS?<br>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> b. IS RESIDENCE ON A FARM?<br>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |                                          |
| 3. NAME OF DECEASED<br>(Type or print)<br>a. First <b>ADRIAN</b> b. Middle <b>BRYAN</b> c. Last <b>HARVEY</b>                                                                                                                                                                       |                                      | 4. DATE OF DEATH<br><b>OCT. 29, 1970</b>                                                                                                                                                                     |                                          |
| 5. SEX<br><b>MALE</b>                                                                                                                                                                                                                                                               | 6. COLOR OR RACE<br><b>CAUCASION</b> | 7. Married <input checked="" type="checkbox"/> Never Married <input type="checkbox"/><br>Widowed <input type="checkbox"/> Divorced <input type="checkbox"/>                                                  | 8. DATE OF BIRTH<br><b>DEC. 10, 1898</b> |
| 10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired)<br><b>RET. CONTRACTOR</b>                                                                                                                                                               |                                      | 10b. KIND OF BUSINESS OR INDUSTRY<br><b>PAINT</b>                                                                                                                                                            |                                          |
| 11. BIRTHPLACE (State or foreign country)<br><b>MOUNT VERNON, TEXAS</b>                                                                                                                                                                                                             |                                      | 12. CITIZEN OF WHAT COUNTRY?<br><b>UNITED STATES</b>                                                                                                                                                         |                                          |
| 13. FATHER'S NAME<br><b>JESS LONG HARVEY</b>                                                                                                                                                                                                                                        |                                      | 14. MOTHER'S MAIDEN NAME <b>MINA ROUNDTREE</b>                                                                                                                                                               |                                          |
| 15. WAS DECEASED EVER IN U.S. ARMED FORCES?<br>(If yes, give war or dates of service)<br><b>NO</b>                                                                                                                                                                                  |                                      | 16. SOCIAL SECURITY NO.<br><b>455-20-4468</b>                                                                                                                                                                |                                          |
| 17. INFORMANT<br><b>MRS. JOSEPHINE D. HARVEY</b>                                                                                                                                                                                                                                    |                                      | 18. CAUSE OF DEATH (Enter only one cause from 1 to 100. If more than one, list them in order of importance.)<br><b>Undifferentiated adenocarcinoma liver, metastatic</b>                                     |                                          |
| 19. IMMEDIATE CAUSE<br><b>Carcinoma, Pancreas</b>                                                                                                                                                                                                                                   |                                      | 20. INTERVAL BETWEEN ONSET AND DEATH<br><b>unknown</b>                                                                                                                                                       |                                          |
| PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE CONDITION GIVEN IN PART I (a)<br><b>Ulcer, benign, gastric</b>                                                                                                                  |                                      |                                                                                                                                                                                                              |                                          |
| 21. 20a. ACCIDENT <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/><br>20b. DESCRIBE HOW INJURY OCCURRED, (Enter nature of injury in Part I or Part II of them.)<br><b>Ulcer, benign, gastric</b>                                         |                                      |                                                                                                                                                                                                              |                                          |
| 20c. TIME OF INJURY<br>Hour <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> Month <input type="checkbox"/> Day <input type="checkbox"/> Year <input type="checkbox"/>                                                                          |                                      |                                                                                                                                                                                                              |                                          |
| 20d. INJURY OCCURRED<br>While at work <input type="checkbox"/> Not while at work <input type="checkbox"/>                                                                                                                                                                           |                                      |                                                                                                                                                                                                              |                                          |
| 20e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office building, etc.)                                                                                                                                                                                         |                                      |                                                                                                                                                                                                              |                                          |
| 20f. CITY, TOWN, OR LOCATION<br>COUNTY <input type="checkbox"/> STATE <input type="checkbox"/>                                                                                                                                                                                      |                                      |                                                                                                                                                                                                              |                                          |
| 21. I hereby certify that I attended the deceased from <b>September 63</b> to <b>October 1970</b> and last saw the deceased alive on <b>October 29, 1970</b> . Death occurred at <b>6:15 P.M.</b> on the date stated above and to the best of my knowledge, from the causes stated. |                                      |                                                                                                                                                                                                              |                                          |
| 22a. SIGNATURE<br><b>George W. Berry</b>                                                                                                                                                                                                                                            |                                      | 22b. ADDRESS<br><b>M.D., 107 S. 18th, Waco, Texas</b>                                                                                                                                                        |                                          |
| 22c. DATE SIGNED<br><b>11/5/70</b>                                                                                                                                                                                                                                                  |                                      | 23a. NAME OF CEMETERY OR CREMATORY<br><b>WACO MEMORIAL PARK</b>                                                                                                                                              |                                          |
| 23b. LOCATION<br>(City, town, or county) <b>WACO, MCLENNAN CO., TEXAS</b>                                                                                                                                                                                                           |                                      | 23c. FUNERAL DIRECTOR'S SIGNATURE<br><b>WILKINSON &amp; HATCH, INC.</b>                                                                                                                                      |                                          |
| 23d. REGISTERAR'S FILE NO.<br><b>1229</b>                                                                                                                                                                                                                                           |                                      | 23e. DATE REC'D BY LOCAL REGISTRAR<br><b>NOV 10 1970</b>                                                                                                                                                     |                                          |
| 23f. REGISTERAR'S SIGNATURE<br><b>Margaret Scott</b>                                                                                                                                                                                                                                |                                      | 23g. REGISTERAR'S SIGNATURE<br><b>Margaret Scott</b>                                                                                                                                                         |                                          |

[https://www.ancestry.com/imageviewer/collections/2272/images/33154\\_b062815-02255?pid=644712](https://www.ancestry.com/imageviewer/collections/2272/images/33154_b062815-02255?pid=644712)



# Adrian Bryan Harvey

Texas, U.S., County Marriage Records, 1817-1965



Save this record?

Save 

## Detail ⓘ

|                |                                           |
|----------------|-------------------------------------------|
| Name           | Adrian Bryan Harvey                       |
| Gender         | Male                                      |
| Marriage Date  | 2 Sep 1926                                |
| Marriage Place | Cass, Texas, USA                          |
| Spouse         | <a href="#">Josephine Beatrice Deason</a> |
| Film Number    | 001435977                                 |

[https://www.ancestry.com/search/collections/61383/records/897190?tid=32070673&pid=29570436856&queryId=b9eb18cf-2a68-452e-979a-a8cc805b3acb&\\_phsrc=ikj15691&\\_phstart=successSource](https://www.ancestry.com/search/collections/61383/records/897190?tid=32070673&pid=29570436856&queryId=b9eb18cf-2a68-452e-979a-a8cc805b3acb&_phsrc=ikj15691&_phstart=successSource)

|     |     |  |             |                  |           |   |   |     |      |     |   |   |   |   |         |
|-----|-----|--|-------------|------------------|-----------|---|---|-----|------|-----|---|---|---|---|---------|
| 378 | 378 |  | Norrey Miss | 2 <sup>d</sup> 7 | A# 2 IR   | M | M | Mar | 1864 | 35  | m | 7 |   |   | Georgia |
|     |     |  | + Minnie    |                  | Wife      | M | F | May | 1872 | 28  | m | 7 | U | 4 | Texas   |
|     |     |  | Jane N      |                  | sister    | M | F | Aug | 1880 | 15  | S |   |   |   | Georgia |
|     |     |  | Jessie E    |                  | Slaughter | M | F | May | 1890 | 6   | S |   |   |   | Texas   |
|     |     |  | Halter R    |                  | son       | M | M | Aug | 1895 | 11  | S |   |   |   | Texas   |
|     |     |  | Adrian B    |                  | son       | M | M | Dec | 1897 | 2   | S |   |   |   | Texas   |
|     |     |  | Seaborn J   |                  | son       | M | M | Mar | 1900 | 3/2 | S |   |   |   | Texas   |

[https://www.ancestry.com/imageviewer/collections/7602/images/4118490\\_00299?treeid=32070673&personid=29570436857&queryId=b43ed981-0625-49cb-a948-1d075aaf1cad&usePUB=true&\\_phsrc=iKj15698&\\_phstart=successSource&usePUBJs=true&pId=70672114](https://www.ancestry.com/imageviewer/collections/7602/images/4118490_00299?treeid=32070673&personid=29570436857&queryId=b43ed981-0625-49cb-a948-1d075aaf1cad&usePUB=true&_phsrc=iKj15698&_phstart=successSource&usePUBJs=true&pId=70672114)

Brother Seaborn R. Harvey (1900-1902) – appears in 1900 census

057-1-5-1 057-1-5 CERTIFICATE OF DEATH 150 X 17 37355

STATE OF TEXAS

1. PLACE OF DEATH  
a. COUNTY **Dallas**  
b. CITY OR TOWN (If outside city limits, give precinct no.) **Dallas**  
c. LENGTH OF STAY in b. **40 yrs**  
d. NAME OF HOSPITAL OR INSTITUTION **5215 Richard**  
e. STREET ADDRESS (If rural, give location) **5215 Richard**  
f. IS PLACE OF DEATH INSIDE CITY LIMITS? **YES**  
g. IS RESIDENCE ON A FARM? **NO**

2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission)  
a. STATE **Texas**  
b. COUNTY **Dallas**  
c. CITY OR TOWN (If outside city limits, give precinct no.) **Dallas**  
d. STREET ADDRESS (If rural, give location) **5215 Richard**  
e. IS RESIDENCE INSIDE CITY LIMITS? **YES**  
f. IS RESIDENCE ON A FARM? **NO**

3. NAME OF DECEASED (Type or print)  
(a) First **Jesse** (b) Middle **Lois** (c) Last **Harvey**  
4. DATE OF DEATH **July 18, 1959**  
5. SEX **Male** 6. COLOR OR RACE **White** 7. MARRIAGE STATUS ☒ Married ☐ Never Married ☐ Widowed ☐ Divorced  
8. DATE OF BIRTH **June 1, 1902** 9. AGE in years **57** 10. MONTHS **5** 11. DAYS **17** 12. HOURS **57** 13. MINUTES **57**  
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) **Supper Club Manager** 10b. KIND OF BUSINESS OR INDUSTRY **Entertainment**  
11. BIRTHPLACE (State or foreign country) **Texas** 12. CITIZEN OF WHAT COUNTRY? **U.S.A.**  
13. FATHER'S NAME **Jess Long Harvey** 14. MOTHER'S MAIDEN NAME **Nina Roundtree**  
15. WAS DECEASED EVER IN U.S. ARMY OR NAVY? **No** 16. SOCIAL SECURITY NO. **457-54-4705** 17. INFORMANT **Delta S. Harvey**

18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c).)  
PART I. DEATH WAS CAUSED BY:  
IMMEDIATE CAUSE (a) **Carcinoma of Esophagus**  
DUE TO (b) **5-6 months**  
DUE TO (c) **5-6 months**  
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** ☒

20a. ACCIDENT ☐ SUICIDE ☐ HOMICIDE ☐ 20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in Part I or Part II)  
20c. TIME OF INJURY Hour **5:00** Month **July** Day **18** Year **1959**  
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.) **Dallas Medical Ctr.**  
20f. CITY, TOWN, OR LOCATION **Dallas** COUNTY **Dallas** STATE **Texas**

21. I hereby certify that I attended the deceased from **March 31, 1959** to **July 18, 1959** and last saw the deceased alive on **July 16, 1959**. Death occurred at **7:00** p.m. on the date stated above, and to the best of my knowledge, from the causes stated.  
22a. SIGNATURE **Henry A. Kuchman M.D.** 22b. ADDRESS **Dallas Medical Ctr.** 22c. DATE SIGNED **7-19-59**

23a. BURIAL, CREMATION, REMOVAL (Specify) **Burial** 23b. DATE **July 20, 1959** 23c. NAME OF CEMETERY OR CREMATORY **Restland Cemetery**  
23d. LOCATION (City, town, or county) **Dallas** (State) **Texas** 23e. FUNERAL DIRECTOR'S SIGNATURE **Sparkman-Brand, Inc.**  
24a. REGISTRAR'S FILE NO. **3386** 24b. DATE RECEIVED LOCAL REGISTRAR **July 19, 1959** 24c. REGISTRAR'S SIGNATURE **J.W. Bass** By **Maureen Kuchman** Acting Registrar

TEXAS DEPARTMENT OF HEALTH  
REC'D AUG 10 1959  
BUREAU OF VITAL STATISTICS

Brother Jesse Lois Harvey (1902-1959) -

[ancestry.com/search/collections/2272/records/22031404?tid=&pid=&queryId=bcd6598f-50cb-487f-a8e1-452f1a8281c5&\\_phsrc=iKj15670&\\_phstart=successSource](https://ancestry.com/search/collections/2272/records/22031404?tid=&pid=&queryId=bcd6598f-50cb-487f-a8e1-452f1a8281c5&_phsrc=iKj15670&_phstart=successSource)

**REGISTRATION CARD**—(Men born on or after February 17, 1897 and on or before December 31, 1921)

|                             |                                             |          |                                |
|-----------------------------|---------------------------------------------|----------|--------------------------------|
| <b>SERIAL NUMBER</b><br>662 | <b>1. NAME (Print)</b><br>JESSE LOIS HARVEY |          | <b>ORDER NUMBER</b><br>T 10241 |
| T                           | (First)                                     | (Middle) | (Last)                         |

**2. PLACE OF RESIDENCE (Print)**  
JEFFERSON HOTEL Dallas Texas  
(Number and street) (Town, township, village, or city) (County) (State)

[THE PLACE OF RESIDENCE GIVEN ON THE LINE ABOVE WILL DETERMINE LOCAL BOARD JURISDICTION; LINE 2 OF REGISTRATION CERTIFICATE WILL BE IDENTICAL]

**3. MAILING ADDRESS**  
JEFFERSON HOTEL Dallas Texas  
(Mailing address if other than place indicated on line 2. If same insert word same)

|                                                     |                                                                                          |                                                                                    |
|-----------------------------------------------------|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| <b>4. TELEPHONE</b><br>26101<br>(Exchange) (Number) | <b>5. AGE IN YEARS</b><br>40<br><b>DATE OF BIRTH</b><br>June 1 1901<br>(Mo.) (Day) (Yr.) | <b>6. PLACE OF BIRTH</b><br>Mt Vernon Texas<br>(Town or county) (State or country) |
|-----------------------------------------------------|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|

**7. NAME AND ADDRESS OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS**  
MRS J. L. HARVEY LINDEN TEXAS

**8. EMPLOYER'S NAME AND ADDRESS**  
SELF Blumhenn Hotel Dallas Tex

**9. PLACE OF EMPLOYMENT OR BUSINESS**  
1303 Jackson St Dallas Texas  
(Number and street or R. F. D. number) (Town) (County) (State)

I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE.

**D. S. S. Form 1**  
(Revised 1-1-42)

(over) ☆ GPO 16-21630-1

J. L. Harvey  
(Registrant's signature)



| REGISTRAR'S REPORT        |                     |                     |             |   |  |
|---------------------------|---------------------|---------------------|-------------|---|--|
| DESCRIPTION OF REGISTRANT |                     |                     |             |   |  |
| RACE                      | HEIGHT<br>(Approx.) | WEIGHT<br>(Approx.) | COMPLEXION  |   |  |
| White                     | ✓ 5' 11"            | 160                 | Sallow      |   |  |
|                           | EYES                | HAIR                | Light       | ✓ |  |
| Negro                     | Blue                | ✓                   | Ruddy       |   |  |
|                           | Gray                | Red                 | Dark        |   |  |
| Oriental                  | Hazel               | Brown               | Freckled    |   |  |
|                           | Brown               | Black               | Light brown |   |  |
| Indian                    | Black               | Gray                | Dark brown  |   |  |
|                           |                     | Bald                | Black       |   |  |
| Philipino                 |                     |                     |             |   |  |

Other obvious physical characteristics that will aid in identification:  
*Scar on Right Side of Right Eye*

I certify that my answers are true; that the person registered has read or has had read to him his own answers; that I have witnessed his signature or mark and that all of his answers of which I have knowledge are true, except as follows:

\_\_\_\_\_  
 (Signature of registrar)

Registrar for Local Board *3* *Dallas Tex*  
 (Number) (City or county) (State)

Date of registration *July 16th 1947.*

|                   |     |
|-------------------|-----|
| Local Board No. 3 | 85  |
| Dallas County     | 113 |
| Court House       |     |
| Dallas, Texas     | 003 |

(STAMP OF LOCAL BOARD)

(The stamp of the Local Board having jurisdiction of the registrant shall be placed in the above space)

16-21630-1

[https://www.ancestry.com/imageviewer/collections/2238/images/44040\\_08\\_00052-00387?queryId=23ec38b7-94f6-421b-a02e-1e9034923e19&usePUB=true&phsrc=iKj15709&phstart=successSource&usePUBJs=true&pId=20582415](https://www.ancestry.com/imageviewer/collections/2238/images/44040_08_00052-00387?queryId=23ec38b7-94f6-421b-a02e-1e9034923e19&usePUB=true&phsrc=iKj15709&phstart=successSource&usePUBJs=true&pId=20582415)

THE STATE OF TEXAS, } 46917  
County of Dallas.

To any Regularly Licensed or Ordained Minister of the Gospel, Jewish Rabbi, Judge of the District or County Court, or Justice of the Peace in the State of Texas—GREETING:

YOU ARE HEREBY AUTHORIZED To Celebrate the Rites of Matrimony between J.L. Harvey  
and Mrs. Delta Gatlin, and make due return to the County Clerk of said county, within sixty days thereafter, certifying your action under this License.

WITNESS My official signature and seal of office, at office in Dallas, this 3rd, day of February, A. D. 1944.  
ED. H. STEGER, County Clerk.

(I. S.) By O.H. Grossett Deputy.  
I, A Gospel Minister, hereby certify that on the 6th, day of February, A. D. 1944,  
I united in Marriage Mr. J. L. Harvey, and  
Mrs. Delta Gatlin, the parties above mentioned.

WITNESS My hand, this 6th, day of February, A. D. 1944.  
Wallace Mansett, Cliff Temple Baptist Church,  
Dallas, Texas.

Returned and filed for record the 11 day of FEB 1944, and recorded the 11 day of FEB 1944.  
ED. H. STEGER, County Clerk.  
By O.H. Grossett Deputy.

How disposed of Jefferson Hotel, Dallas, Texas. 11 FEB 1944

Name Mr J. L. Harvey

Marriage Date 6 Feb 1944

Marriage Place Dallas, Texas, USA

Spouse Delta Gatlin

Certificate Number 46917

[https://www.ancestry.com/imageviewer/collections/9168/images/49068\\_b581114-01057?usePUB=true&usePUBjs=true&pld=41186411](https://www.ancestry.com/imageviewer/collections/9168/images/49068_b581114-01057?usePUB=true&usePUBjs=true&pld=41186411)

# Delta Sutherland

Collin County, Texas, U.S., Marriage Index, 1800-2010



Save this record?

Save



## Detail

|                |                    |
|----------------|--------------------|
| Name           | Delta Sutherland   |
| Gender         | Female             |
| Spouse         | Earl Gathin        |
| Spouse Gender  | Male               |
| Marriage Date  | 1915               |
| Marriage Place | Collin, Texas, USA |

<https://www.ancestry.com/search/collections/9106/records/131056>



STATE OF TEXAS 057-02-2 057-01 CERTIFICATE OF DEATH 2509.23 STATE FILE NO. 17808

|                                                                                                                                                                                                                                                         |  |                                                                                                                          |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------|--|
| 1. PLACE OF DEATH<br>a. COUNTY Dallas                                                                                                                                                                                                                   |  | 7. USUAL RESIDENCE (Where deceased lived. If institution, residence before admission)<br>a. STATE Texas b. COUNTY Dallas |  |
| b. CITY OR TOWN (If outside city limits, give precinct no.) Irving                                                                                                                                                                                      |  | c. CITY OR TOWN (If outside city limits, give precinct no.) Dallas                                                       |  |
| c. LENGTH OF STAY in 1 b. 2 years                                                                                                                                                                                                                       |  | d. STREET ADDRESS (If rural, give location) 5215 Richards                                                                |  |
| d. NAME OF (If not in hospital, give street address) HOSPITAL OR INSTITUTION Irving Community Hospital                                                                                                                                                  |  | e. IS RESIDENCE INSIDE CITY LIMITS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>                  |  |
| e. IS PLACE OF DEATH INSIDE CITY LIMITS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>                                                                                                                                            |  | f. IS RESIDENCE ON A FARM? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>                           |  |
| 3. NAME OF DECEASED (If type or given)<br>a. First Delta b. Middle Sutherland c. Last Harvey                                                                                                                                                            |  | 4. DATE OF DEATH March 28, 1975                                                                                          |  |
| 5. SEX Female                                                                                                                                                                                                                                           |  | 6. COLOR OR RACE White                                                                                                   |  |
| 7. MARRIAGE STATUS<br>a. Married <input type="checkbox"/> b. Never Married <input type="checkbox"/> c. Widowed <input checked="" type="checkbox"/> d. Divorced <input type="checkbox"/>                                                                 |  | 8. DATE OF BIRTH Jan. 20, 1898                                                                                           |  |
| 9. AGE (In years last birthday) 77                                                                                                                                                                                                                      |  | 10. BIRTHPLACE (State or foreign country) Collin County, Texas                                                           |  |
| 11. BIRTHPLACE (State or foreign country) USA                                                                                                                                                                                                           |  | 12. CITIZEN OF WHAT COUNTRY? USA                                                                                         |  |
| 13. FATHER'S NAME John Sutherland                                                                                                                                                                                                                       |  | 14. MOTHER'S MARRIAGE NAME Parthenia Jane (Records Not Available)                                                        |  |
| 15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) No                                                                                                                                                                                    |  | 16. SOCIAL SECURITY NO. Unavailable                                                                                      |  |
| 17. DECEASED'S SIGNATURE Mrs. Philip Stein by m.b.                                                                                                                                                                                                      |  | 18. DECEASED'S SIGNATURE Mrs. Philip Stein by m.b.                                                                       |  |
| 19. IMMEDIATE CAUSE OF DEATH<br>NEGATIVE HEART FAILURE<br>ARTEURIOCLEROTIC HEART DISEASE<br>DIABETES MELLITUS<br>CHRONIC BRAIN SYNDROME                                                                                                                 |  | 20. INTERVIEW BETWEEN DEATH AND CLERK weeks                                                                              |  |
| 21. DISCUSS HOW INJURY OCCURRED. (Enter nature of injury in Part I or Part II of Item 18.)                                                                                                                                                              |  | 22. WAS AUTOPSY PERFORMED? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>                           |  |
| 23. TIME OF BURIAL Hour a.m. p.m. Month Day Year                                                                                                                                                                                                        |  | 24. PLACE OF BURIAL (City, town, or county) Dallas                                                                       |  |
| 25. INJURY OCCURRED                                                                                                                                                                                                                                     |  | 26. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office building, etc.)                               |  |
| 27. I hereby certify that I attended the deceased from 13 March 1975 to 28 March 1975 and last saw the deceased alive on 28 March 1975. Death occurred at 12:55 P.M. on the date stated above, and to the best of my knowledge, from the causes stated. |  | 28. ADDRESS 2101 MacArthur Blvd Irving Texas 75039                                                                       |  |
| 29. SIGNATURE J. H. Sullivan Jr M.D.                                                                                                                                                                                                                    |  | 30. DATE SIGNED 3-29-75                                                                                                  |  |
| 31. BURIAL, CREMATION, REMOVAL (Specify) Burial                                                                                                                                                                                                         |  | 32. NAME OF CEMETERY OR CREMATORY Restland Memorial Park                                                                 |  |
| 33. LOCATION (City, town, or county) Dallas                                                                                                                                                                                                             |  | 34. FUNERAL DIRECTOR'S SIGNATURE RONALD D. DENNIS 5762                                                                   |  |
| 35. REGISTRAR'S FILE NO. 99                                                                                                                                                                                                                             |  | 36. DATE REC'D BY LOCAL REGISTRAR APR 3 1975                                                                             |  |
| 37. REGISTRAR'S SIGNATURE Lloyd G. Russell by Dep. Reg.                                                                                                                                                                                                 |  | 38. REGISTRAR'S SIGNATURE Lloyd G. Russell by Dep. Reg.                                                                  |  |

[https://www.ancestry.com/imageviewer/collections/2272/images/33154\\_b062944-00747?usePUB=true&usePUBJs=true&pld=1583459](https://www.ancestry.com/imageviewer/collections/2272/images/33154_b062944-00747?usePUB=true&usePUBJs=true&pld=1583459)

100

STATE OF TEXAS 157-01-2 157-01 CERTIFICATE OF DEATH 342X46 15710

1. PLACE OF DEATH  
a. COUNTY *Dallas*  
b. CITY OR TOWN (If outside city limits, give precinct no.) *Dallas*  
c. LENGTH OF STAY *27 hrs*  
d. NAME OF (If not in hospital, give street address) HOSPITAL OR INSTITUTION *Parkland Hospital*  
e. IS PLACE OF DEATH INSIDE CITY LIMITS? YES ☒ NO ☐

2. USUAL RESIDENCE (Where deceased lived; if institution, residence before admission)  
a. STATE *Texas* b. COUNTY *Dallas*  
c. CITY OR TOWN (If outside city limits, give precinct no.) *Dallas*  
d. STREET ADDRESS (If rural, give location) *11569 Autry Hines*  
e. IS RESIDENCE INSIDE CITY LIMITS? YES ☒ NO ☐ f. IS RESIDENCE ON A FARM? YES ☐ NO ☒

3. NAME OF DECEASED  
(Type or print)  
a. First *Joe* b. Middle *Bryant* c. Last *Harvey*  
d. DATE OF DEATH *Mar 24 - 1960*  
e. SEX *Male* f. COLOR OR RACE *White* g. MARRIAGE STATUS: Married ☒ Never Married ☐ Widowed ☐ Divorced ☐  
h. AGE (in years last birthday) *55* i. IF UNDER 1 YEAR: Months *5* Days *5* Hours *5* Minutes *5*  
j. IF UNDER 24 HRS: Hours *27* Minutes *00* Seconds *00*  
k. USUAL OCCUPATION (Give kind of work done during most of last year, if retired) *Waiter* l. KIND OF BUSINESS OR INDUSTRY *Restaurant*  
m. BIRTHPLACE (State or foreign country) *Mr Vernon Tex* n. CITIZEN OF WHAT COUNTRY? *US*  
o. FATHER'S NAME *OK* p. MOTHER'S MAIDEN NAME *OK*  
q. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) *No* r. SOCIAL SECURITY NO. *OK*  
s. INFORMANT *Evelyn Harvey*

18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c).)  
PART I. DEATH WAS CAUSED BY:  
IMMEDIATE CAUSE (a) *Brain abuse*  
Conditions, if any, which gave rise to above cause (b) *Extensive infection from left orbit*  
DUE TO (c) *Carcinoma of the prostate*  
PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE CONDITION GIVEN IN PART I (a)  
20a. ACCIDENT ☐ SUICIDE ☐ HOMICIDE ☐  
20b. TIME OF INJURY: Hour *5:00* a.m. ☐ p.m. ☒  
20c. INJURY OCCURRED: ☐ WHILE AT WORK ☒ NOT WHILE AT WORK ☐  
20d. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office building, etc.) *At home*  
20e. CITY, TOWN, OR LOCATION *Dallas*  
21. I hereby certify that I attended the deceased from *3-4-60* to *3-24-60* and last saw the deceased alive on *3-24-60*. Death occurred at *7:30 a.m.* on the date stated above, and to the best of my knowledge, from the causes stated.  
22a. SIGNATURE *Milton Althaus, M.D.* 22b. ADDRESS *Parkland Hosp.* 22c. DATE SIGNED *3-24-60*  
23a. BURIAL, CREMATION, REMOVAL (Specify) *Removed* 23b. DATE *3-24-60* 23c. NAME OF CEMETERY OR CREMATORY *Cap Stone Park*  
24a. LOCATION (City, town, or county) *Irving* 24b. STATE *Texas* 24c. FUNERAL DIRECTOR'S SIGNATURE *W. W. Bass #560*  
25a. REGISTRAR'S FILE NO. *1660* 25b. DATE REC'D BY LOCAL REGISTRAR *MAR 24 1960* 25c. REGISTRAR'S SIGNATURE *J. W. Bass BY Maurine Lamm* ACTING REGISTRAR

TEXAS DEPARTMENT OF HEALTH  
REC'D APR 11 1960  
BUREAU OF VITAL STATISTICS

157-01-2

[https://www.ancestry.com/imageviewer/collections/2272/images/40394\\_b062564-01532?pld=22720055](https://www.ancestry.com/imageviewer/collections/2272/images/40394_b062564-01532?pld=22720055)

Brother Joe Bryant Harvey (1904-1960)

## Marshall Man And Dallas Girl Are Married

Miss Evelyn Paradise, of Dallas, and Joe B. Harvey, of Marshall, were married at the home of Mr. Harvey's sister, Mrs. E. E. Wommack and Mr. Wommack, in Linden at 4 o'clock Wednesday afternoon. H. B. Cash, minister of the local Church of Christ, performed the simple but impressive ceremony in the presence of members of the immediate family.

Mrs. Harvey is the daughter of Mr. and Mrs. A. F. Paradise of Irving, Texas.

Mr. Harvey is the son of Mrs. Nina Harvey of Linden. Mr. and Mrs. Harvey will be at home in Marshall, where he is employed.

The Marshall News Messenger  
Sun, May 11, 1941 · Page 18

Marshall TX

## Miss Evelyn Paradise Is Bride of Joe B. Harvey

Linden, Texas.—Miss Evelyn Paradise of Dallas and Joe B. Harvey of Marshall were married at the home of Mr. Harvey's sister, Mrs. E. E. Womack and Mr. Womack, at 4 o'clock Wednesday afternoon.

H. B. Cash, minister of the local Church of Christ, performed the ceremony in the presence of members of the immediate family.

Mrs. Harvey is the daughter of Mr. and Mrs. A. F. Paradise of Irving, Texas.

Mr. Harvey is the son of Mrs. Nina Harvey of Linden. Mr. and Mrs. Harvey will be at home in Marshall.

The Shreveport Journal  
Wed, May 14, 1941 · Page 12

Shreveport LA

\*\*\*\*\*



3A HIS 2/2  
ORIGINAL

| CHECK TYPE REQUIRED<br>(See Instructions attached)                                                                                                                                  |                                                                             | APPLICATION FOR HEADSTONE OR MARKER<br>(Please make out and return in duplicate)                                                                                                                                                                                        |                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> UPRIGHT MARBLE HEADSTONE                                                                                                                                   | ENLISTMENT DATE<br>3-30-42                                                  | SERIAL NO.<br>18080626                                                                                                                                                                                                                                                  | EMBLEM (Check one)                            |
| <input type="checkbox"/> FLAT MARBLE MARKER                                                                                                                                         | DISCHARGE DATE<br>10-28-45 <i>Honorable</i>                                 | PENSION No.<br>XC-11-712-350                                                                                                                                                                                                                                            | <input checked="" type="checkbox"/> CHRISTIAN |
| <input checked="" type="checkbox"/> FLAT GRANITE MARKER                                                                                                                             |                                                                             | STATE<br>Texas                                                                                                                                                                                                                                                          | <input type="checkbox"/> HEBREW               |
| <input type="checkbox"/> BRONZE MARKER                                                                                                                                              |                                                                             | RANK<br>SERGEANT                                                                                                                                                                                                                                                        | <input type="checkbox"/> NONE                 |
| NAME (Last, First, Middle Initial)<br>Harvey, Wiley <del>MERRILL</del>                                                                                                              |                                                                             | COMPANY<br>HEADQUARTERS                                                                                                                                                                                                                                                 |                                               |
| DATE OF BIRTH (Month, Day, Year)<br>3 August 1909                                                                                                                                   | DATE OF DEATH (Month, Day, Year)<br>12-26-53                                | U. S. REGIMENT, STATE ORGANIZATION, AND DIVISION<br>348 Fighter Group, W W II                                                                                                                                                                                           |                                               |
| NAME OF CEMETERY<br>Linden Cemetery                                                                                                                                                 |                                                                             | LOCATION (City and State)<br>Linden, Texas                                                                                                                                                                                                                              |                                               |
| SHIP TO (I CERTIFY THE APPLICANT FOR THIS STONE HAS MADE ARRANGEMENTS WITH ME TO TRANSPORT THE STONE FROM THE FREIGHT STATION TO THE CEMETERY)<br>Mrs. E. E. Wommes - Linden, Texas |                                                                             | NEAREST FREIGHT STATION (City and State)<br>Atlanta, Texas                                                                                                                                                                                                              |                                               |
| (SIGNATURE OF CONSIGNEE)                                                                                                                                                            |                                                                             | POST OFFICE ADDRESS OF CONSIGNEE<br>Linden, Texas                                                                                                                                                                                                                       |                                               |
| DO NOT WRITE HERE                                                                                                                                                                   |                                                                             | I certify this application is submitted for a stone for the unmarked grave of a veteran.<br>I hereby agree to assume all responsibility for the removal of the stone promptly upon arrival at destination, and properly place it at the decedent's grave at my expense. |                                               |
| FOR VERIFICATION<br>ORDERED<br>B/L 3921205<br>SHIPPED                                                                                                                               | FEB 18 1955<br>COLUMBUS MARBLE WORKS<br>COLUMBUS, MISSISSIPPI<br>9 MAR 1955 | Mrs. E. E. Wommes<br>APPLICANT'S SIGNATURE<br>DATE OF APPLICATION                                                                                                                                                                                                       |                                               |
| ADDRESS (Street, City, State)                                                                                                                                                       |                                                                             |                                                                                                                                                                                                                                                                         |                                               |

OQMG FORM 623  
REV 8 FEB 49

IMPORTANT—Complete Reverse Side

AGRC-FY FEB 25 1955 CH

16-11453-8 GPO

[https://www.ancestry.com/imageviewer/collections/2375/images/40050\\_2421406259\\_0400-03479?pld=1437500](https://www.ancestry.com/imageviewer/collections/2375/images/40050_2421406259_0400-03479?pld=1437500)

Brother Wiley Merrell Harvey (1909-1953)



**Gladys Lucy Tollerson**  
**Harvey Willson**  
Follow the Bloodlines

|           |                                     |
|-----------|-------------------------------------|
| Spouse    | Wiley M Harvey                      |
| Father    | Arthur Spurgeon Tolleson            |
| Mother    | Lelia Eugenia Cleveland Tolleson    |
| Children  | Nina Jean                           |
| Birth     | 1 Oct 1909 Bivins, Cass, Texas, USA |
| Death     | 25 Nov 2004 Texas, USA              |
| Residence | 1950 Cass, Texas, USA               |

[https://www.ancestry.com/search?name=Gladys+Tolleson+Harvey&gender=f&searchMode=advanced&searchType=t&spouse=Wiley+Merrell\\_Harvey&treePerson=32070673\\_29570516989](https://www.ancestry.com/search?name=Gladys+Tolleson+Harvey&gender=f&searchMode=advanced&searchType=t&spouse=Wiley+Merrell_Harvey&treePerson=32070673_29570516989)

# Gladys Tolleson

Texas, U.S., Select County Marriage Index, 1837-1965



Save this record?

Save



## Detail

|                 |                                |
|-----------------|--------------------------------|
| Name            | Gladys Tolleson                |
| Gender          | Female                         |
| Marriage Date   | 30 May 1935                    |
| Marriage Place  | Cass, Texas, United States     |
| Spouse          | <a href="#">Wiley M Harvey</a> |
| FHL Film Number | 1024891                        |

[https://www.ancestry.com/search/collections/60183/records/1107982?tid=32070673&pid=29570516989&queryId=d35f9518-5b09-448a-a915-71b180d925c7&\\_phsrc=iKj15703&\\_phstart=successSource](https://www.ancestry.com/search/collections/60183/records/1107982?tid=32070673&pid=29570516989&queryId=d35f9518-5b09-448a-a915-71b180d925c7&_phsrc=iKj15703&_phstart=successSource)



# Wiley M Harvey

Louisiana, U.S., Statewide Death Index, 1819-1964



Save this record?

Save

## Detail ⓘ

|             |                        |
|-------------|------------------------|
| Name        | Wiley M Harvey         |
| Age         | 44                     |
| Birth Year  | abt 1909<br>[abt 1909] |
| Death Date  | 26 Dec 1953            |
| Death Place | Caddo, Louisiana, USA  |

[https://www.ancestry.com/search/collections/6697/records/1771151?tid=32070673&pid=29570436860&queryId=2d3ca872-f230-4dd7-ba33-01fe30f3334e&\\_phsrc=iKj15707&\\_phstart=successSource](https://www.ancestry.com/search/collections/6697/records/1771151?tid=32070673&pid=29570436860&queryId=2d3ca872-f230-4dd7-ba33-01fe30f3334e&_phsrc=iKj15707&_phstart=successSource)

## Texas, U.S., Select County Marriage Index, 1837-1965

View record

Name **Nona Oneida Harney**  
 Gender Female  
 Marriage Date 25 Oct 1935  
 Marriage Place Cass, Texas, United States  
 Spouse Luther A Hensley  
 FHL Film Number 1024891

[https://www.ancestry.com/family-tree/person/tree/119975228/person/162700614577/facts?\\_phsrc=iKj15737&\\_phstart=successSource](https://www.ancestry.com/family-tree/person/tree/119975228/person/162700614577/facts?_phsrc=iKj15737&_phstart=successSource)

*Sister (Nona) Oneida Harvey Hensley Crudup (1912-2006)*

# Oneida Hensley Crudup

U.S., Social Security Death Index, 1935-2014



Save this record?

Save

## Detail

|                        |                                     |
|------------------------|-------------------------------------|
| Name                   | Oneida Hensley Crudup               |
| Social Security Number | 432-22-6750                         |
| Birth Date             | 2 Jul 1912                          |
| Issue year             | Before 1951                         |
| Issue State            | Arkansas                            |
| Last Residence         | 75503, Texarkana, Bowie, Texas, USA |
| Death Date             | 28 Jan 2006                         |

<https://www.ancestry.com/search/collections/3693/records/76939971>

# Oneida Hensley Crudup

Web: Obituary Daily Times Index, 1995-2016



Save this record?

Save

## Detail ⓘ

|                   |                                                                                                                     |
|-------------------|---------------------------------------------------------------------------------------------------------------------|
| Name              | Oneida Hensley Crudup                                                                                               |
| Death Age         | 93                                                                                                                  |
| Birth Date        | Abt 1913                                                                                                            |
| Death Date        | Abt 2006                                                                                                            |
| Death Place       | Texarkana, Texas                                                                                                    |
| Publication Date  | 30 Jan 2006                                                                                                         |
| Publication Place | USA                                                                                                                 |
| URL               | <a href="https://sites.rootsweb.com/~obituary/using_db.html">https://sites.rootsweb.com/~obituary/using_db.html</a> |

<https://www.ancestry.com/search/collections/70050/records/11403307>

### Abbreviations:

b = born

d = died

F: = Find A Grave ([www.findagrave.org](http://www.findagrave.org))

NOK = next-of-kin

### Name: Walter Rountree Harvey (Sr.)

Name variations:

#### Military:

On Tuscania: Camp Travis Det. 1, 165th Depot Brigade - private

Serial number: 251,448

Entered service from: Mount Vernon, Franklin TX

Sailed on "Tuscania" as: Walter R. Harvey

Next-of-kin on "Tuscania": father J.L. Harvey, Mount Vernon TX

Returned from war on: "Prinz Friedrich Wilhelm" Apr 1919

Sailed on return ship as: Walter R. Harvey

Next-of-kin on return ship & rank: mother Mrs. Nina Harvey, Mountvernon TX (cpl, Co. G, 165th Inf.)

World War I draft registration (1917): as Walter ROUNDTREE Harvey - b. 3 Aug 1896 Maple TX; res: Mount Vernon, Franklin TX. Single. Farmer for myself, 3 ½ miles east of Mount Vernon TX. Short in height, medium build. Card signed Walter R. Harvey.

World War II draft registration (1942): as Walter Rountree Harvey - b. 3 Aug 1895 Naples TX; res: 4611 Cole Ave., Irving TX. Employed at 4611 Cole Ave., Irving TX. NOK Walter R. Harvey Jr., Irving TX. "2 index finger on right hand that are injured" – Height: 5'6" – weight: 170 lbs. Registered 27 Apr 1942.

Veterans Administration Military Index:

Enlisted 5 Sep 1917

Discharged 15 May 1919

Address: 5031 Mission St., Dallas TX

Rank/unit: corporal, Co. G, 165<sup>th</sup> Infantry, 42<sup>nd</sup> Division

TX, WWI Military Record:

Walter R. Harvey, serial 251448, resident of Mount Vernon, Franklin TX. Inducted into Army at Mount Vernon TX on 5 Sep 1917 at age 22 years, 1 month. Born Naples TX. In Co. G, 165<sup>th</sup> Infantry to discharge. Promoted to corporal 1 Dec 1918. Overseas 23 Jan 1918 to 24 Apr 1919. Discharged 15 May 1919. 0% disabled.

#### **Birth & death:**

Born: 3 Aug 1895 Naples, Morris TX (WWII, TX Deaths, obituary) [also found as Maple TX on his WWI draft card, may be Naples misheard/miswritten]

Died: 3 Oct 1969 Irving, Dallas TX (heart attack, Concord Manor Nursing Home)

Find A Grave record: 138955781, presence on Tuscania indicated in text

Burial location: Irving, Dallas TX

Cemetery: Oak Grove Memorial Gardens

Tombstone: veteran flat: Texas Cpl US Army WWI

**Father: Jesse Long Harvey**, 8 Nov 1862 Macon Co. GA – 6 Dec 1929 Linden, Cass TX.

Name also found as "Jess."

Death date is 3 Dec 1929 according to TX death certificate but 6 Dec is inscribed on his tombstone].

Son of James Merrill Harvey (1813-1868, F: 76578720) & Elizabeth (Lizzie) Lonal (1823-1877, F: 76578717).

Buried in Mount Vernon City Cemetery, Mount Vernon, Franklin TX.

Find A Grave: 73121704

**Mother: Nina Mae Rountree Harvey**, 3 May 1872 TX – 16 Jun 1963 Linden, Cass TX (at the home of her daughter Jessie Harvey Wommack).

Daughter of Wiley Berry/Benjamin Rountree (1838-1918, F: 73360158) who fought for the Confederate States of America in the Civil War) & Elizabeth Autamissa Holbrook (1837-1910, F: 73360588).

Buried in Linden Cemetery, Linden, Cass TX.

Find A Grave: 103660645

Parents' marriage: 22 Dec 1892 Morris Co. TX

**Spouse: Foy Tillman Harvey**, 15 Mar 1894 Mount Vernon, Franklin TX – 14 Nov 1952 Irving, Dallas TX.

Daughter of Desire Bryarly Tillman & Cora J. Dawson.

Killed herself at age 58 years, 7 months, 29 days. TX death certificate: died at her home on Roselawn, Irving, Dallas TX. "neck broken" – "suicide" – died "instantly" – "subject hanged self." Inquest held 14 Nov 1952.

Buried in Oak Grove Memorial Gardens, Irving, Dallas TX.

Spouse Find A Grave: 138955626

Marriage: between 1920 & 1930 censuses, likely in 1920/1921. In the 1920 census, Walter is single (conducted 2 Jan 1920). In the 1930 census, Walter & Foy, both age 35, state they were age 24 at the time of their 1<sup>st</sup> marriages, which computes to 1921. Their son was born 2 Sep 1921.

#### Children:

- **Bryarly Ray Harvey**, 2 Sep 1921 Dallas, Dallas TX – 7 Jun 2007 Irving, Dallas TX. - Resident of Irving TX when his father dies in Oct 1969. - Married **Mary Louise Casteel** (3 Oct 1923 Ennis, Ellis TX-6 Jul 1998 Bakersfield, Kern CA) in 1944 in Escambia Co. FL. Mary Louise died with the surname Clark. - Husband of **Katie O'Hara Norris** (1916-2003, F: 191469702) who had previously been married to Calvin Thomas Ferguson. Bryarly & Mrs. Katie Ferguson married 2 Dec 1954 in Dallas, Dallas TX. – Katie O'Hara Norris was the daughter of Berry Stephen Norris & Hattie Worlina Freeman. Buried in Oak Grove Memorial Gardens, Irving, Dallas TX. F: 191469559
- **Walter Rountree Harvey, Jr.**, 16 Apr 1923 Dallas, Dallas TX – 9 Aug 2001 Irving, Dallas TX. - SSN 455-24-1083. - On his TX birth record, his father was W.R. Harvey, age 26, b. Naples TX & mother Foy Tillman, age 29, b. Franklin Co. TX. He was Foy's 2<sup>nd</sup> child, with 2 now living. - Husband of Dorothy Evelyn Dorety (1923-2001, F: 138955868) whom he married 24 Jul 1945 Dallas, Dallas TX. - He names his son Walter Rountree Harvey III ("Bubba"). - Died in Baylor Hospital. Resident of 5031 Mission, Irving TX at time of death. - Buried in Oak Grove Memorial Gardens, Irving, Dallas TX. F: 138955842

**Siblings:** Walter was the 2<sup>nd</sup> child.

- **Jessie Elizabeth Harvey Wommack**, 18 May 1894 Franklin Co. TX – 16 Sep 1992 Linden, Cass Co. TX. - Wife of Edgar Ernest Wommack (1889-1966, F: 151543188). His name sometimes found as Ernest Edgar Wommack. – They married in Cass Co. TX on 17 Jun 1920. - Obituary from "Longview (TX) News-Journal" 18 Sep 1992 p 14 copied above. Resident of Linden TX in Oct 1969. - Buried in Linden Cemetery, Linden, Cass TX. F: 95422023
- **Adrian Bryan ("Red") Harvey**, 10 Dec 1898 Mount Vernon, Franklin TX – 29 Oct 1970 Waco, McLennan TX. - Husband of Josephine Beatrice Deason (1905-1991, F: 161418948). – Adrian & Josephine married 2 Sep 1926 in Atlanta, Cass TX. - Paint contractor. Died of liver cancer- Buried in Waco Memorial Park, Waco, McLennan TX. F: 161418928
- **Seaborn R. Harvey**, 30 May 1900 TX – 27 May 1902. - Buried in Mount Vernon Cemetery, Mount Vernon, Franklin TX. F: 73121872
- **Jesse [buried as Jessie] Lois Harvey**, 1 Jun 1902 Mount Vernon, Franklin TX – 18 Jul 1959 Dallas, Dallas TX. - Male. Age 7 in 1910 census, age 17 in 1920 census. - Married **Mrs. Delta**



Sutherland Gatlin (1898-1975, F: 100477974) on 6 Feb 1944 in Cliff Temple Baptist Church, Dallas, Dallas TX; marriage license obtained 3 Feb 1944. Delta's earlier husband was Earl Jackson Gatlin (1896-1925) whom she married in 1915. - At time of death resided at 5215 Richard, Dallas TX. Supper club manager. Listed as son of Jess Long Harvey & Nina Roundtree [sic] on TX death record. Informant: Delta S. Harvey. Died of carcinoma of the esophagus. - Buried in Restland Cemetery, Dallas, Dallas TX. F: 100478122

- **Joe Bryant Harvey**, 15 Aug 1904 Mount Vernon, Franklin TX – 24 Feb 1960 Dallas, Dallas Co. TX. - Age 5 in 1910 census, age 15 in 1920 census. - Husband of Evelyn Paradise (1902-1974, F: 138955605). Marriage: "Marshall (TX) News Messenger" Sunday, 11 May 1941 p 18 – Miss Evelyn Paradise of Dallas TX, daughter of Mr. & Mrs. A.F. Paradise of Irving TX married Joe B. Harvey of Marshall TX, son of Mrs. Nina Harvey of Linden TX, were married at the home of Joe's sister, Mrs. E.E. Wommack & Mr. Wommack in Linden TX on Wednesday afternoon [i.e. 7 May 1941]. Officiant was minister H.B. Cash of the Church of Christ. The couple will reside in Marshall TX where Joe is employed. - Died of a brain abscess at Parkland Hospital in Dallas TX at age 55, also had prostate cancer, married to wife Evelyn. - Buried in Oak Grove Memorial Gardens, Irving, Dallas TX. F: 138955659.
- **Wiley Merrill/Merrell Harvey**, 3 Aug 1909 TX – 26 Dec 1953 Caddo Parish LA. – Married Gladys Lucy Tolleson on 30 May 1935 in Cass Co. TX. Gladys was the daughter of Arthur S. Tolleson & Lelia Eugenia Cleveland. She was born 1909 TX & died 2004 TX, buried as Gladys Lucy Willson in Laws Chapel Cemetery, Atlanta, Cass TX, F: 66113188. She had married Franklin Oliver Willson (1908-1962, F: 108858519). – In the 1940 census for Cass Co. TX, Gladys Harvey (30 TX, sales lady, department store) & her 3-year-old daughter Nina Jean Harvey (b. TX) lived with her widowed mother Lelia Tolleson (conducted 2 Apr 1940). In the 1950 census for Cass Co. TX, conducted 1 Apr 1950, Gladys Willson (40 TX) lived with her husband F. Oliver Willson (41 TX, carpenter), their son Don (b. Apr 1949 TX) & her daughter Nina Jean Harvey (13 TX). Although his middle name is spelled Merrell on his Find A Grave record, it is spelled Merrill on his WWII draft registration, veteran headstone application, marriage license – and the middle name of his paternal grandfather. - Sergeant in 348<sup>th</sup> Fighter Group, US Army Air Corps, WWII. - Buried in Linden Cemetery, Linden, Cass TX. F: 103660661
- **(Nona) Oneida Harvey Hensley Crudup**, 2 Jul 1912 TX – 28 Jan 2006 AR. - SSN 432-22-6750. - Resident of Texarkana AR in Oct 1969 & Texarkana TX at the time of her death. - Wife of Luther A. Hensley (1900-1970, F: 63040548) whom she married 25 Oct 1935 with the name Nona Oneida Harvey. - Wife of George Edward Crudup (1915-1981, F: 25330469) whom she married 3 Apr 1976 in Cass Co. TX. George had married Mildred Marie Pace on 9 Apr 1939 in Miller CO AR; George & Mildred divorced on 27 Jan 1967 in Miller Co. AR. - Buried in Central Church of Christ Cemetery, Genoa, Miller AR. F: 63040605

Notes:

The family has three people named with some version of Jess/Jesse/Jessie – Walter's father Jesse Long Harvey & Walter's sister Jessie Elizabeth Harvey (Wommack) & Walter's brother Jesse Lois Harvey (called Lois in the 1910 & 1920 censuses).

Pre-war:

Wartime:

"Austin (TX) American" 11 Feb 1918 p 1 – among the Tuscania survivors: Walter R. Harvey, Mount Vernon TX

Post-war:

"Marshall (TX) News Messenger" 10 Jul 1940 p 3 – Walter R. Harvey of Dallas, a guest at the E.E. Wommack home for the past 2 weeks, and Gwendolyn Wommack went to Marshall TX Sunday to visit Mr. & Mrs. A.B. Harvey.

Obituary:

"Irving [TX] Daily News" 7 Oct 1969 p 8 - age 74, of 118 W. Ireland Dr., Irving, retired building contractor, b. Naples TX 31 Aug 1895. Irving resident for 33 years. WWI vet with 42nd Inf. Div. Survived by 2 sons, brother, sister, burial Oak Grove

Social Security Number: 466-12-9840

Censuses:

1900 Justice Precinct 1, Franklin TX – conducted 27 Jun 1900

Jesse Harvey, 35 GA, Nov 1864, parents b. GA, married 7 years, farmer

Nina, 28 TX, May 1872, father b. AL, mother b. TN, gave birth to 4 children, 4 are living

Jessie E., 6 TX, May 1894

Walter R., 4 TX, Aug 1895

Adriain [sic] B., 2 TX, Dec 1897

Seaborn J., 2 months TX, Dec 1897

& niece Jane N. Harvey, 15 GA, Aug 1884, parents b. GA

1910 Justice Precinct 1, Franklin Co. TX – conducted 3 May 1910

Jesse L. Harvey, 48 GA, parents b. GA, in 1<sup>st</sup> marriage, married 17 years, farm laborer, working out

Nina M., 37 TX, father b. AL, mother b. TN, in 1<sup>st</sup> marriage, gave birth to 8 children, 6 are living

Jessie E., 15 TX

Walter R., 14 TX

Adrian B., 12 TX

Lois, 7 TX [son – this is Jesse Lois]

Joe B., 5 TX

Wylie M., 9 months TX

1920 Mount Vernon, Franklin TX – S. Kaufman – conducted 2 Jan 1920

Jesse L. Harvey, 57 GA, parents b. GA, salesman, nursery stock

Nina May, 47 TX, father b. AL, mother b. TN

Jessie E., 25 TX, teacher, public school

Walter R., 24 TX, carpenter, house

Adrian B., 22 TX, laborer, oil co.

Lois, 17 TX, laborer, oil co. [Jesse Lois, son]

Joe B., 15 TX

Wylie B., 10 TX

Oneida, 7 TX

& 2 boarders:

Otis D. Duncan, 22 TX, father b. GA, mother b. TX, science teacher, high school

Robert L. Mabry, 24 TX, parents b. TX, English teacher, high school

1930 Precinct 1, Dallas Co. TX – Walnut Hill Rd. – conducted 22 Apr 1930

Walter R. Harvey, 35 TX, father b. GA, mother b. TX, age 24 at 1<sup>st</sup> marriage,, carpenter, building, WWI veteran

Foy, 35 TX, parents b. TX, age 24 at 1<sup>st</sup> marriage

Bryrly R., 8 TX

Walter R. Jr., 7 TX

1940 Dallas, Dallas TX – Highway 15 – in Dallas, Dallas TX in 1935 - conducted 29 Apr 1940 – indexed as HARNEY

Walter R. Harvey [indexed as Harney], 44 TX, carpenter, building

Foy, 45 TX

Brilly, 18 TX, clerk, retail grocery store [indexed as Britty]

Walter, 17 TX

1950 Precinct 4, Dallas Co. TX – conducted 18 Apr 1950

Walter R. Harvey, 54 TX, carpenter contractor, building

Foy, 56 TX [wife]

Walter R. Jr., 27 TX, married, stock central clerk, paint company [son]

Dorothy E., 26 TX, married [daughter-in-law, i.e. Walter Jr.'s wife]