

# DEATH NOTICE.

Pursuant to the Provisions contained in "The Administration of Estates Act, 1913".

1. Name of deceased MASKREY  
FREDERICK THOMAS
2. Birthplace and Nationality of the deceased ENGLAND.
3. Names and Addresses of the Parents of the deceased {
  - Father DECEASED
  - Mother DO
4. Age of the deceased 68 years 1 months.
5. Occupation in life of the deceased, or, ~~of a woman, of her husband~~ RETIRED PENSIONER.
6. Ordinary place of residence of the deceased, or, if a woman, of her husband {
  - 2, ROSEVIEW MANSIONS
  - TYRWITT AVENUE JOHANNESBURG.
7. Married or unmarried, widower or widow MARRIED.
  - (a) Name of surviving spouse (if any) and whether married in community of property or not {
    - MARY MASKREY (nee NANCARROW)
    - IN COMMUNITY.
  - (b) Name or names and approximate date of death of predeceased spouse or spouses {
    - N/A
  - (c) Place of last marriage JOHANNESBURG.
8. The day of the decease: on 8th JULY, 1964.
9. Where the person died {
  - House \_\_\_\_\_
  - Town or Place \_\_\_\_\_
  - District AS (6)
10. Names of children of deceased, and whether majors or minors {
  - BARBARA ZERLE (MAJOR)
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

State separately the children born of different marriages, and give the date of birth of each minor. Names must be written out in full. If there are no children, and either or both parents be dead, then give the names and addresses of the brothers and sisters of the deceased.

11. Has the deceased left any movable property? YES.
12. Has the deceased left any immovable property? NO.
13. Is it estimated that the estate exceeds £300 in value? YES.
14. Has the deceased left a will? YES. *no that get.*

Dated at JOHANNESBURG.  
 the 5th day of AUGUST 19 64. (Signature) M. Maskrey  
 (Surviving Spouse) *Deceased*  
 (Not at place of Death.)  
 (State in what capacity and whether at the time at or near the place of death.)

This notice must be filled up and signed by the nearest relative or connexion of the deceased who shall at the time be at or near the place of death, or, in the absence of such near relative or connexion, by the person who at or immediately after the death shall have the chief charge of the house in, or the place on, which the death occurred, and must be sent either to the Master, or, if the death occurred in a district wherein a seat of Provincial Government is not situate, the magistrate of the district, in duplicate, within fourteen days of the death.

REPUBLIC OF SOUTH AFRICA.

REPUBLIEK VAN SUID-AFRIKA.

ABRIDGED DEATH CERTIFICATE

VERKORTE STERFTESERTIFIKAAT

Issued in terms of Section 40 of Act No. 17 of 1923.

Uitgereik kragtens artikel 40 van Wet No. 17 van 1923.

Certified a true extract from the death register of:—

Gesertifiseer 'n ware uittreksel uit die sterfte-register van:—

Identity Number 022/858251 W.  
 Persoonsnommer \_\_\_\_\_  
 Surname Maskrey.  
 Van \_\_\_\_\_  
 First Names Frederick. Thomas.  
 Voornamen \_\_\_\_\_  
 Date of Death Eighth July 1964.  
 Datum van afsterwe \_\_\_\_\_  
 Sex Male.  
 Geslag \_\_\_\_\_  
 District of Death Johannesburg.  
 Distrik van afsterwe \_\_\_\_\_  
 Race White.  
 Ras \_\_\_\_\_  
 Age and Date of Birth 68 years. 26-5-1896.  
 Ouderdom en datum van geboorte \_\_\_\_\_  
 Marital Status Married  
 Huwelikstaat \_\_\_\_\_  
 Occupation Ex-Mechanical Engineer.  
 Beroep \_\_\_\_\_  
 Pension (if any) S.P. Railways Pension.  
 Pensioen (indien enige) \_\_\_\_\_  
 Causes of Death Cardiac failure. Contributing cause:  
 Oorsake van dood Diabetes with acute hypoglycemia  
 Duration of Disease or Last Illness months many years.  
 Duur van kwaal of laaste siekte \_\_\_\_\_  
 Medical Practitioner Dr. B. Paganab.  
 Geneesheer \_\_\_\_\_  
 Entry Number 2819/64.  
 Inskrywingsnommer \_\_\_\_\_

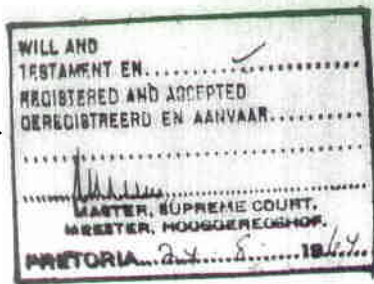
STREEKSVERTEENWOORDIGER  
 DEPT. VAN BINNELANDSE SAKKE  
 PRIVAATSAK/PRIVATE BAG II  
 14 -7- 1964  
 JOHANNESBURG  
 DEPARTMENT OF THE INTERIOR  
 REGIONAL REPRESENTATIVE

Registrar, Assistant Registrar, District Registrar.  
 Registrateur, Assistent-registrateur, Distriksregistrateur

25c

1/1 6529/64

LAST WILL AND TESTAMENT.



I, the undersigned, FREDERICK THOMAS MASKREY, presently residing at "Kingston", Mons Avenue, NEWLANDS, in the City of CAPETOWN, do hereby make this my last Will and Testament as follows :-

1.

I do hereby revoke, cancel and annul all previous wills, testaments, codicils and other acts of testamentary nature made by me prior hereto, desiring that all such shall be of no further force and effect whatsoever.

2.

As Executrix of my Will And Administratrix of my Estate I nominate, constitute and appoint my wife, MARY MASKREY to whom I am married in community of property, hereby granting to her all such powers as are authorised by law and particularly that of assumption.

EXOR

3.

I do further direct the Master of the Supreme Court to dispense with security from my said Executrix for the Administration of my said Estate.

Expt

4.

As sole and universal heiress of the whole of my Estate wheresoever situate and of whatsoever nature, I nominate, constitute and appoint my daughter, BARBARA DESPINA MASKREY, subject however, to the usufruct in favour of my wife, the said MARY MASKREY FOR THE duration of her lifetime over the whole of my Estate and effects.

5.

I do further nominate, constitute and appoint my wife, the said MARY MASKREY to be the guardian of my said daughter BARBARA DESPINA MASKREY during her minority.

Handwritten initials and signature: J.A.A., D.W.G.

6.

I reserve to myself the right at any time hereafter to make all such alterations in or additions to this my Will either by a separate act or at the foot hereof, desiring that all such alterations or additions so made under my signature shall be held as valid as if they had been inserted herein.

7.

IN WITNESS hereof

Handwritten signature: F. Maskrey

As Witnesses: I. ...

2.

7.

IN WITNESS hereof I have hereunto set my signature as ~~testator~~  
this 26<sup>th</sup> day of ~~February~~ <sup>June</sup>, 1951.

*J. M. Ashby*  
.....  
TESTATOR.

Signed by the Testator as for his last Will and Testament in the presence of us, the undersigned witnesses, then present both together and affixing our signatures hereto in the presence of the said Testator, and of each other.

AS WITNESSES :-

- 1. *J. A. Adams*
- 2. *Allen W. Adams*