

Clarence Neal – Kernersville – 1969

From [Facebook, November 1, 2021](#)

LODD history. Found this tonight, to be added to my database. Kernersville volunteer fireman Clarence C. Neal, 57, died of a heart attack at the scene of a house fire on Old US 421 on February 16, 1969. He arrived after the fire was under control, when he was subsequently stricken. He was transported to Forsyth Memorial Hospital, where he died. He was buried on February 18 at Oaklawn Memorial Gardens in Winston-Salem. Will add his death certificate in comments.

## Fireman Has Fatal Attack During Fire

**KERNERSVILLE** — Clarence Cornelius Neal, 57, of Kernersville, Rt. 6, a county volunteer fireman, died of an apparent heart attack while at a fire on old U.S. 421 west of Winston-Salem yesterday.

Reece Bauguess, Forsyth County Fire Marshal, said Neal arrived at the fire after it was under control and did not take part in the firefighting. It did not appear that the heart attack was caused by overexertion, he said.

Neal, an employe of Western Electric Co. in Winston-Salem, was given first aid with a resuscitator while he was being taken to the hospital, Bauguess said. The fire was at the home of Marvin King and did only about \$150 damage around the fireplace.

The funeral for Mr. Neal will be at 2:30 p.m. today at Cherry Street United Methodist Church. Burial will be in Oaklawn Memorial Gardens in Winston-Salem.

He was born in Forsyth County to J. M. and Miranda Pegram Neal. He was a member of the Talley's Crossing Volunteer Fire Department, Cherry Street United Methodist Church and the Walkertown Civic Club.

Surviving are his wife, Mrs. Opal Dean Neal; two daughters, Mrs. Sarah Parnell of 4324 Glenn High Road and Mrs. Carol Angel of Spartanburg, S. C.; his mother of Belews Creek, Rt. 1; a sister, Mrs. Sue Dunlap of Belews Creek, Rt. 1; and four brothers, Edwin Neal of Danbury, Rt. 1, Paul Neal of Motor Road, Winston-Salem, Fov Neal of Kernersville, Rt. 3, and James Neal of Belews Creek, Rt. 1.

The body is at Lain-Bartlett Funeral Home.

Winston-Salem Journal - Feb 18, 1969

3400		MAR 6 - 1969		NORTH CAROLINA STATE BOARD OF HEALTH OFFICE OF VITAL STATISTICS		5753	
TYPE OR PRINT IN PERMANENT BLACK INK.		REGISTRATION DISTRICT NO. 34-95		LOCAL NO. 334		CERTIFICATE OF DEATH	
1. NAME OF DECEASED <i>Clarence Cornelius Neal</i>		2. DATE OF DEATH <i>Feb. 16, 1969</i>					
3. SEX <i>Male</i>		4. COLOR OR RACE <i>White</i>		5. STATE OF BIRTH <i>North Carolina</i>		6. DATE OF BIRTH <i>Dec. 25, 1911</i>	
7. PLACE OF DEATH COUNTY <i>Forsyth</i>		8. CITY OR TOWN <i>Winston Salem</i>		9. STATE <i>North Carolina</i>		10. COUNTY <i>Forsyth</i>	
11. NAME OF HOSPITAL OR INSTITUTION <i>Forsyth Memorial Hospital</i>		12. INSIDE CITY LIMITS <i>Yes</i>		13. CITY OR TOWN <i>Kernersville</i>		14. STREET ADDRESS OR R.F.D. No. <i>Route # 6</i>	
15. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) <i>Married</i>		16. SURVIVING SPOUSE (IF WIFE, GIVE MAIDEN NAME) <i>Opal Dean Neal</i>		17. INSIDE CITY LIMITS <i>No</i>		18. KIND OF BUSINESS OR INDUSTRY <i>Western Electric Co.</i>	
19. CITIZEN OF WHAT COUNTRY? <i>USA</i>		20. SOCIAL SECURITY NUMBER <i>[REDACTED]</i>		21. USUAL OCCUPATION (KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED) <i>Western Electric Co.</i>		22. KIND OF BUSINESS OR INDUSTRY <i>Western Electric Co.</i>	
23. FATHER'S NAME <i>J. M. Neal</i>		24. MOTHER'S MAIDEN NAME <i>Miranda Pegram</i>					
25. INFORMANT'S NAME AND ADDRESS <i>Mrs. Opal Neal Rt. # 6 Kernersville N. C. 27284</i>							
26. PART I. DEATH CAUSED BY: <i>Cardiac arrest</i>		27. ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), (c)				APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
28. CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE(S), STATING THE UNDERLYING CAUSE LAST		29. (a) IMMEDIATE CAUSE <i>Cardiac arrest</i>		30. (b) DUE TO, OR AS A CONSEQUENCE OF <i>Coronary artery disease</i>		31. (c) DUE TO, OR AS A CONSEQUENCE OF	
32. PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a)		33. ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY)		34. DESCRIBE HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 18)		35. AUTOPSY? (YES OR NO) <i>No</i>	
36. 19a. TIME OF INJURY MONTH DAY YEAR HOUR <i>Feb 16 1969 11:00</i>		37. 20a. INJURY AT WORK (SPECIFY YES OR NO) <i>No</i>		38. 20b. PLACE OF INJURY (AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY)) <i>Home</i>		39. 20c. CITY OR R.F.D. COUNTY STATE <i>Kernersville Forsyth N.C.</i>	
40. CERTIFICATION—PHYSICIAN: I ATTENDED THE DECEASED FROM <i>19</i> TO <i>19</i> AND LAST SAW HIM/HER ALIVE ON <i>19</i> DEATH		41. CERTIFICATION—MEDICAL EXAMINER OR ACTING MEDICAL EXAMINER: ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR INVESTIGATION, IN MY OPINION, DEATH WAS DUE TO THE		42. CAUSE(S) STATED ABOVE, THE DECEASED WAS PRONOUNCED DEAD AT <i>11:00</i> M. ON <i>Feb 16</i> 19 <i>69</i>		43. ADDRESS <i>202 N. Falls St. Kernersville N.C.</i>	
44. SIGNATURE OF CERTIFIER <i>H. J. [Signature]</i>		45. DATE SIGNED <i>Feb 16 1969</i>		46. SIGNATURE OF FUNERAL DIRECTOR <i>[Signature]</i>		47. LICENSE NO. <i>2140</i>	
48. BURIAL, CREMATION, OTHER (SPECIFY) <i>Burial</i>		49. DATE <i>2-16-1969</i>		50. NAME OF CEMETERY OR CREMATORY <i>Oaklawn Memorial Gardens</i>		51. LOCATION (CITY, TOWN, OR COUNTY) STATE <i>Winston-Salem N.C.</i>	
52. FUNERAL HOME <i>Lain-Bartlett</i>		53. DATE REC'D BY LOCAL REG. <i>2-19-69</i>		54. SIGNATURE OF REGISTRAR <i>[Signature]</i>		55. SIGNATURE OF EMBALMER (IF EMBALMED) <i>[Signature]</i>	