

AUG 20 1930

MISSOURI STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

Do not use this space.

1. PLACE OF DEATH

County **Buchanan**
Township
City **St. Joseph,** (No. **2114 So. 9th street**)

Registration District No. **85**
Primary Registration District No. **1001**

File No. **21999**
Registered No. **027**
St. _____ Ward _____

2. FULL NAME **Edna Paulsgrove**

(a) Residence No. **2114 So. 9th St.** St. _____ Ward _____
(Usual place of abode) (If nonresident, give city or town and State)

Length of residence in city or town where death occurred **20** yrs. mos. ds. How long in U. S., if of foreign birth? yrs. mos. ds.

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL CERTIFICATE OF DEATH

3. SEX **Female** 4. COLOR OR RACE **White.** 5. SINGLE, MARRIED, WIDOWED OR DIVORCED (write the word) **Married.**

5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF **Clarence Paulsgrove**

6. DATE OF BIRTH (MONTH, DAY AND YEAR) **July 14, 1888.**

7. AGE YEARS MONTHS DAYS If LESS than 1 day, _____ hrs. or _____ min.
42 00 8

8. OCCUPATION OF DECEASED

(a) Trade, profession, or particular kind of work **Housewife**
(b) General nature of industry, business, or establishment in which employed (or employer)
(c) Name of employer

9. BIRTHPLACE (CITY OR TOWN) **Bethany**
(STATE OR COUNTRY) **Missouri.**

10. NAME OF FATHER **Edward Mitchell**

11. BIRTHPLACE OF FATHER (CITY OR TOWN) **Illinois**
(STATE OR COUNTRY)

12. MAIDEN NAME OF MOTHER **Maria Henry.**

13. BIRTHPLACE OF MOTHER (CITY OR TOWN) **Ohio.**
(STATE OR COUNTRY)

14. INFORMANT **Clarence Paulsgrove**
(Address) **2114 So. 9th St. St. Joseph, Mo.**

15. FILED **18** **John G. [Signature]** REGISTRAR

16. DATE OF DEATH (MONTH, DAY AND YEAR) **July 14, 1930**

17. I HEREBY CERTIFY, That I attended deceased from **10:30 A.M. 7-17, 1930** to **10:45 A.M., 1930**

that I last saw her alive on **7-17 Time stated above**, and that death occurred, on the date stated above, at **11:30 A.M.**

THE CAUSE OF DEATH* WAS AS FOLLOWS:

Acute indigestion
195B
118C

(duration) _____ yrs. _____ mos. _____ ds.

CONTRIBUTORY (SECONDARY) **Hypertrophied Liver**

(duration) _____ yrs. _____ mos. _____ ds.

18. WHERE WAS DISEASE CONTRACTED?

IF NOT AT PLACE OF DEATH

8 DID AN OPERATION PRECEDE DEATH? _____ DATE OF _____

WAS THERE AN AUTOPSY? **Yes**

WHAT TEST CONFIRMED DIAGNOSIS **Gen. Symp.**

(Signed) **Blanche B. [Signature] M.D.**

7/19, 1930 (Address) **Loyan Bldg.**

*State the DISEASE CAUSING DEATH, or in deaths from VIOLENT CAUSES, state (1) MEANS AND NATURE OF INJURY, and (2) Whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.

19. PLACE OF BURIAL, CREMATION, OR REMOVAL

DATE OF BURIAL

King Hill Cemetery **July 19, 1930.**

20. UNDERTAKER

ADDRESS

Fred Clark **505 Spring**

St. Joseph

CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important.

1. The first part of the document discusses the importance of maintaining accurate records of all transactions. It emphasizes that proper record-keeping is essential for the integrity of the financial system and for the ability to detect and prevent fraud.

2. The second part of the document outlines the specific requirements for record-keeping, including the need to maintain original documents and to keep copies of all transactions. It also discusses the importance of regular audits and the need to ensure that all records are up-to-date and accurate.

3. The third part of the document discusses the consequences of failing to maintain accurate records, including the potential for financial loss and the risk of legal action. It also discusses the importance of training staff on proper record-keeping procedures and the need to ensure that all staff are aware of the importance of accurate record-keeping.

4. The fourth part of the document discusses the importance of maintaining accurate records of all transactions, including the need to maintain original documents and to keep copies of all transactions. It also discusses the importance of regular audits and the need to ensure that all records are up-to-date and accurate.

5. The fifth part of the document discusses the consequences of failing to maintain accurate records, including the potential for financial loss and the risk of legal action. It also discusses the importance of training staff on proper record-keeping procedures and the need to ensure that all staff are aware of the importance of accurate record-keeping.