

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

Do not use this space.

2272

1. PLACE OF DEATH

County Newton Registration District No. 1046
 City Joplin (No. Route 2) Primary Registration District No. 4870

File No. _____
 Registered No. 4 _____
 State _____ Ward _____

2. FULL NAME

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

Length of residence in city or town where death occurred 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

M

4. COLOR OR RACE

W

5. SINGLE, MARRIED, WIDOWED OR DIVORCED (write the word)

SINGLE

16. DATE OF DEATH (MONTH, DAY AND YEAR) 1-22-31

17. I HEREBY CERTIFY, That I attended deceased from 1-3-31, to 1-3-31, 1931, that I last saw h. alive on _____, 1931, and that death occurred, on the date stated above, at _____ m.

THE CAUSE OF DEATH* WAS AS FOLLOWS:

Premature Birth
159
 (duration) _____ yrs. _____ mos. _____ ds.

CONTRIBUTORY (SECONDARY)

159
 (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? _____

WHAT TEST CONFIRMED DIAGNOSIS?

(Signed) W. H. Brookshier

1/3 1931 (Address) Joplin Mo

*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.

9. BIRTHPLACE (CITY OR TOWN)

(STATE OR COUNTRY) Joplin Mo

10. NAME OF FATHER

Paul Kellogg

11. BIRTHPLACE OF FATHER (CITY OR TOWN)

(STATE OR COUNTRY) Boston Okla

12. MAIDEN NAME OF MOTHER

Theresa Cogley

13. BIRTHPLACE OF MOTHER (CITY OR TOWN)

(STATE OR COUNTRY) Mo

14. INFORMANT

Chas J Kellogg
 (Address) Joplin Mo

19. PLACE OF BURIAL, CREMATION, OR REMOVAL

Joplin

DATE OF BURIAL

1/3 31

15. FILED

1/23 31 Joplin Mo
 REGISTRAR

20. UNDERTAKER

Furlott Co

ADDRESS

Joplin Mo

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

