

N. B.—Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important.

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

Do not use this space.

35396

1. PLACE OF DEATH

County Cutler
Township Liberty
City Liberty (No.)

Registration District No. 720
Primary Registration District No. 5951

File No.
Registered No. 10 St. Ward

2. FULL NAME

Charles Barnhouse
(a) Residence, No. St. Ward
(Usual place of abode)

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. (If nonresident, give city or town and State)

PERSONAL AND STATISTICAL PARTICULARS

3. SEX Male 4. COLOR OR RACE White 5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word) Widowed

5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF Caroline Poyle

6. DATE OF BIRTH (MONTH, DAY, AND YEAR) Feb 22, 1951

7. AGE YEARS 80 MONTHS 7 DAYS 24 If LESS than 1 day, hrs. or min.

8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Farmer

9. Industry or business in which work was done, as silk mill, saw mill, bank, etc. Farm

10. Date deceased last worked at this occupation (month and year) July 1951 11. Total time (years) spent in this occupation 44

12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Noble Co. Ohio

13. NAME George Barnhouse

14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Ohio

15. MAIDEN NAME Rose Ann McEune

16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) New Jersey

17. INFORMANT T.B. Barnhouse (ADDRESS) Summa Mo

18. BURIAL, CREMATION, OR REMOVAL PLACE McEune Cemetery DATE Oct 17, 1931

19. UNDERTAKER Camstock Mearns (ADDRESS) Unionville Mo

20. FILED Nov 10, 1931 E. E. McCallum Registrar

1 MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) Oct 16, 1931

22. I HEREBY CERTIFY, That I attended deceased from , 1931, to Oct 16, 1931. I last saw him alive on Aug 21, 1931. Death is said to have occurred on the date stated above at 9 A.M.

The principal cause of death and related causes of importance were as follows:

Carcinoma of
W. & F. rect.
52
Date of onset

Other contributory causes of importance:

Name of operation Date of

What test confirmed diagnosis? Was there an autopsy?

23. If death was due to external causes (violence), fill in also the following: Accident, suicide, or homicide? Date of injury , 19

Where did injury occur? (Specify city or town, county, and State)
Specify whether injury occurred in industry, in home, or in public place.

Manner of injury

Nature of injury

24. Was disease or injury in any way related to occupation of deceased? No

If so, specify (Signed) P. J. Hunt, M. D.

(Address) Coatsville Mo

