

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

Do not use this space.

32822

1. PLACE OF DEATH

58 County Shaw Registration District No. 501
Township Lacreek Primary Registration District No. 566
City (No.) St. Ward)

File No.
Registered No. 21

2. FULL NAME

Seaford Brown
(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

3. SEX <u>Male</u>	4. COLOR OR RACE <u>Negro</u>	5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word) <u>Divorced</u>
5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF <u>Lucy A. Brown</u>		
6. DATE OF BIRTH (MONTH, DAY, AND YEAR) <u>July 28 1873</u>		
7. AGE	YEARS	MONTHS
	<u>59</u>	<u>7</u>
		DAYS
		<u>26</u>
		If LESS than 1 day, hrs. or min.
OCCUPATION	8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. <u>Farmer</u>	
	9. Industry or business in which work was done, as silk mill, saw mill, bank, etc.	
	10. Date deceased last worked at this occupation (month and year)	11. Total time (years) spent in this occupation
MOTHER	12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) <u>Union Co Missouri</u>	
	13. NAME <u>Andrew J Brown</u>	
	14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) <u>Waverton Co Missouri</u>	
	15. MAIDEN NAME <u>Hickelstein</u>	
FATHER	16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) <u>Union Co Missouri</u>	
	17. INFORMANT <u>Safayette Brown</u> (ADDRESS) <u>Seneca, Mo</u>	
18. BURIAL, CREMATION, OR REMOVAL PLACE <u>City Cemetery</u> DATE <u>Oct 26 1932</u>		
19. UNDERTAKER <u>Thorp Audr. Co.</u> (ADDRESS) <u>Seneca, Mo.</u>		
20. FILED <u>Oct 29 1932</u> <u>D. D. Taylor</u> Registrar.		

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) October 24, 1932

22. I HEREBY CERTIFY, That I attended deceased from Oct 23 1932 to Oct 24 1932
I last saw him alive on Oct 24 1932—Death is said to have occurred on the date stated above, at 11:30 A.M.
The principal cause of death and related causes of importance were as follows:
Perforated duodenal ulcer (Date of onset Oct 23)
Peritonitis (Date of onset Oct 23)

Other contributory causes of importance:
Peritonitis

Name of operation Date of
What test confirmed diagnosis? Was there an autopsy? Yes

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) J. J. Taylor, M. D.
(Address) Seneca, Mo.

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.

NOV 25 1932

