

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

Do not use this space.

1. PLACE OF DEATH
 County Buchanan Registration District No. 85
 Township _____ Primary Registration District No. 1001
 City St. Joseph (No. 1617 S 19th St) St. _____ Ward _____

2. FULL NAME Benjamin Franklin Gray
 (a) Residence, No. 1617 S. 19th 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.

18998
 File No. _____
 Registered No. 655 St. _____ Ward _____

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 _____

6. DATE OF BIRTH (MONTH, DAY, AND YEAR) Jan 28 1852

7. AGE	YEARS	MONTHS	DAYS	IF LESS than 1 day, hrs. or min.
	<u>81</u>	<u>4</u>	<u>28</u>	

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

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 _____

12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Springfield Ohio

13. NAME William B Gray

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

15. MAIDEN NAME Caroline Ross

16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Unknown

17. INFORMANT E F Gray (ADDRESS) Des Moines Ia

18. BURIAL, CREMATION, OR REMOVAL PLACE Raufman home DATE June 28, 1933

19. UNDERTAKER Fleeman Funeral Home (ADDRESS) 1946 Colhoun

20. FILED 6-27-33 1933 John R. Bender Registrar.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) June 26 1933

22. I HEREBY CERTIFY, That I attended deceased from June 20th 1933, to June 27th 1933
 I last saw him alive on June 25th 1933. Death is said to have occurred on the date stated above, at 8:27 P. M.
 The principal cause of death and related causes of importance were as follows:
Arteriosclerosis Date of onset unknown
97 97
 Other contributory causes of importance: _____
 Name of operation none Date of _____
 What test confirmed diagnosis? clinical symptoms Was there an autopsy? NO

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) Arthur H. Kelley, M. D.
 (Address) St. Joseph Mo.

WRITE PLAINLY WITH UNFADING INK---THIS IS A PERMANENT RECORD

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.

JUL 20 1933

1944

1. The first part of the report deals with the general situation in the country. It is noted that the economy is in a state of depression and that the government is unable to meet its obligations. The report also mentions that the population is suffering from widespread poverty and that the government is unable to provide for their basic needs.

2. The second part of the report deals with the political situation. It is noted that the government is unable to carry out its policies and that there is a general feeling of hopelessness among the people. The report also mentions that the government is unable to maintain law and order and that there is a general feeling of lawlessness.

3. The third part of the report deals with the social situation. It is noted that the population is suffering from widespread poverty and that the government is unable to provide for their basic needs. The report also mentions that the government is unable to provide for the education and health care of the people.

4. The fourth part of the report deals with the military situation. It is noted that the government is unable to maintain a strong military and that there is a general feeling of weakness among the people. The report also mentions that the government is unable to provide for the military needs of the people.

5. The fifth part of the report deals with the international situation. It is noted that the country is unable to maintain good relations with the other countries and that there is a general feeling of isolation among the people. The report also mentions that the government is unable to provide for the international needs of the people.