

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 21 1933

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

Do not use this space.

19171

1. PLACE OF DEATH

2. County Cedar
Township Union
City Stockton (No.)

Registration District No. 165
Primary Registration District No. 5-2-31

File No.
Registered No. 38 St. Ward)

2. FULL NAME

William Denziah Burns St. Ward.

(a) Residence, No. (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) Single
5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF Infant
6. DATE OF BIRTH (MONTH, DAY, AND YEAR) Dec 20-1933
7. AGE YEARS MONTHS DAYS If LESS than 1 day, hrs. or min.
0 5 16

8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Infant
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) Stockton, Mo.

13. NAME William Tilden Burns
14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Stockton, Mo.

15. MAIDEN NAME Marie Coleman
16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Jessieville, Ark.

17. INFORMANT (ADDRESS) Marie Burns
Stockton, Mo.

18. BURIAL, CREMATION, OR REMOVAL
PLACE Younger DATE June 7 1933

19. UNDERTAKER (ADDRESS) Davis & Co
Stockton, Mo.

20. FILED July 1933 E. S. Smith
Mary Bayless Registrar.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) June 6 1933

22. I HEREBY CERTIFY That I attended deceased from

I last saw him lived with wife 1933 to June 6 1933 Death is said to have occurred on the date stated above, at Stockton, Mo.

The principal cause of death and related causes of importance were as follows:
Found dead in bed
Had not been sick
Cause of death unknown.

Other contributory causes of importance: 2000

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, 1933

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?

If so, specify

(Signed) H. A. Sumrell M. D.
(Address) Stockton, Mo.

