

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

Do not use this space.

1. PLACE OF DEATH

101 County Shannon
Township Winona
City _____ (No. _____ St. _____ Ward _____)

Registration District No. 873
Primary Registration District No. 6074

File No. 25329
Registered No. _____

2. FULL NAME

Nancy Catherine Bramhall
(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.

PERSONAL AND STATISTICAL PARTICULARS

3. SEX F 4. COLOR OR RACE W 5. SINGLE, MARRIED, WIDOWED OR DIVORCED (write the word) Widow

5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF John A. Bramhall

6. DATE OF BIRTH (MONTH, DAY AND YEAR) Mar 21 1854

7. AGE YEARS MONTHS DAYS If LESS than 1 day, hrs. or min.
79 3 24

8. OCCUPATION OF DECEASED

(a) Trade, profession, or particular kind of work _____
(b) General nature of industry, business, or establishment in which employed (or employer) _____
(c) Name of employer _____

9. BIRTHPLACE (CITY OR TOWN)

(STATE OR COUNTRY) Ozark Co Mo

10. NAME OF FATHER Wm Alden Williams

11. BIRTHPLACE OF FATHER (CITY OR TOWN) (STATE OR COUNTRY) Ky

12. MAIDEN NAME OF MOTHER Lucinda Humphrey

13. BIRTHPLACE OF MOTHER (CITY OR TOWN) (STATE OR COUNTRY) Ky

14. INFORMANT Chas Holliman
(Address) Winona Mo

15. FILED 7-15-1933 Mabel Rollins
REGISTRAR

MEDICAL CERTIFICATE OF DEATH

16. DATE OF DEATH (MONTH, DAY AND YEAR) Jul 15 1933

17. I HEREBY CERTIFY, That I attended deceased from June 1 1933, to July 15 1933, that I last saw him alive on June 15 1933, and that death occurred, on the date stated above, at 11:30 A.M.

THE CAUSE OF DEATH* WAS AS FOLLOWS:

Cardio Vascular Disease
myocarditis

CONTRIBUTORY (SECONDARY)

18. WHERE WAS DISEASE CONTRAILED

IF NOT AT PLACE OF DEATH _____

DID AN OPERATION PRECEDE DEATH? no DATE OF _____

WAS THERE AN AUTOPSY? no

WHAT TEST CONFIRMED DIAGNOSIS

(Signed) Frank Hyde M. D.

July 17, 1933 (Address) By M. Rollins

*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.

19. PLACE OF BURIAL, CREMATION, OR REMOVAL

New Cemetery Winona Mo

DATE OF BURIAL

Jul 16 1933

20. UNDERTAKER

None

ADDRESS

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.

AUG 26 1933

2. Project Overview

The project is a multi-phase initiative aimed at improving the efficiency of the current system and ensuring that all data is accurately recorded and analyzed.

The project is divided into three main phases: Phase 1 involves the initial setup and data collection; Phase 2 involves the implementation of the new system; and Phase 3 involves the final evaluation and reporting.

Phase 1 is currently in progress, and the data collection process is well underway. The implementation of the new system is scheduled for the second quarter of the year.

Phase 2 is expected to be completed by the end of the year, and the final evaluation will be conducted in the first quarter of the following year.

The project is being managed by a dedicated team, and all stakeholders are kept informed of the progress and any potential risks.

The project is a critical component of the organization's strategic plan, and its successful completion is essential for achieving the organization's long-term goals.

The project is being managed in accordance with the organization's standard operating procedures, and all activities are documented and reported on a regular basis.

The project is a complex undertaking, and it is essential that all team members work closely together to ensure the successful completion of the project.

The project is being managed in a transparent and accountable manner, and all stakeholders are encouraged to provide input and feedback throughout the process.

The project is a key priority for the organization, and it is essential that all team members remain committed to the project's success.

The project is being managed in a flexible and adaptive manner, and the team is prepared to respond to any changes or challenges that may arise.

The project is a complex and challenging task, but the team is confident that it will be completed successfully and on time.

The project is a critical component of the organization's strategic plan, and its successful completion is essential for achieving the organization's long-term goals.