

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 10 1934

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

Do not use this space.

1. PLACE OF DEATH
 County Greene Registration District No. 328
 Township Benton Primary Registration District No. 3017
 City Benton (No. _____) St. _____ Ward _____

2. FULL NAME Minnie Berry
 (a) Residence, No. W14 St. 2nd 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.

20167

File No. _____
 Registered No. _____
 St. _____ Ward _____

PERSONAL AND STATISTICAL PARTICULARS

3. SEX Female 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 W. A. Bracy

6. DATE OF BIRTH (MONTH, DAY, AND YEAR) Feb 28 1863

7. AGE	YEARS	MONTHS	DAYS	IF LESS than 1 day, _____ hrs. or _____ min.
	<u>81</u>	<u>3</u>	<u>30</u>	

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

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

10. Date deceased last worked at this occupation (month and year) 1929 11. Total time (years) spent in this occupation boys

12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) _____

13. NAME John Green

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

15. MAIDEN NAME Mary Sterling

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

17. INFORMANT Minnie Wilson (ADDRESS) Benton, Mo

18. BURIAL, CREMATION, OR REMOVAL
 PLACE Maple Grove DATE June 29 1934

19. UNDERTAKER Gipson's Mortuary (ADDRESS) _____

20. FILED 6-29 1934 Jess D Fair Registrar.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) June 27 1934

22. I HEREBY CERTIFY, That I attended deceased from Jan 1 1930, to June 27 1934
 Last saw her alive on June 26 1934 Death is said to have occurred on the date stated above, at 3P m.
 The principal cause of death and related causes of importance were as follows:
Hypo Static Pneumonia Date of onset 6-26-34
1882
1892
1918
 Other contributory causes of importance:
Intra-capsular fracture of femur 1930

Name of operation _____ Date of _____
 What test confirmed diagnosis? Clinical Was there an autopsy? No

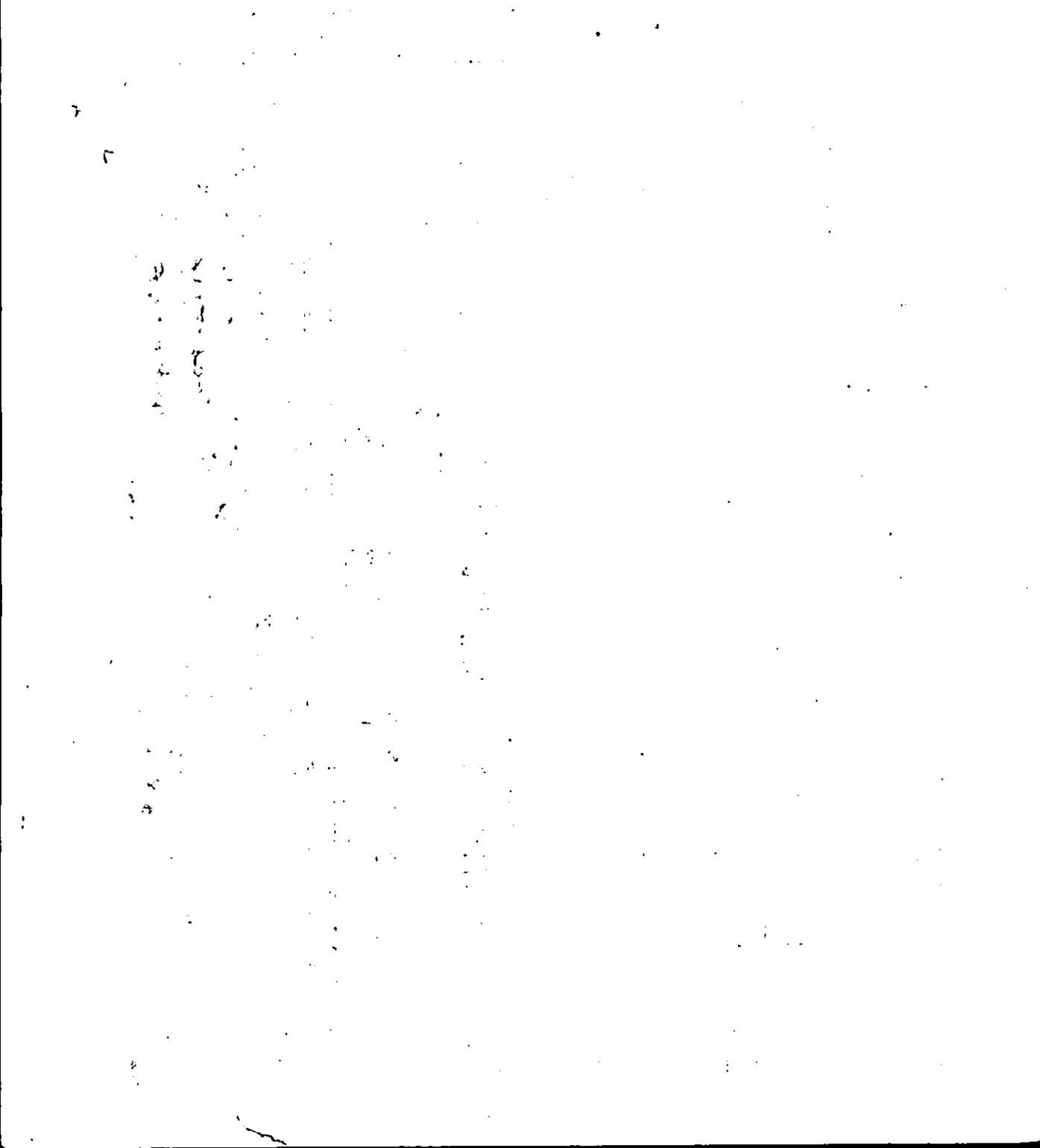
23. If death was due to external causes (violence), fill in also the following:
 Accident, suicide, or homicide? _____ Date of injury _____, 19____
 Where did injury occur? _____ (Specify city or town, county, and State)
 Specify whether injury occurred in industry, in home, or in public place. _____

Manner of injury _____
 Nature of injury _____

24. Was disease or injury in any way related to occupation of deceased? No
 If so, specify _____
 (Signed) O. P. Reeks, M. D.
 (Address) Benton, Mo

OS 62

440
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DEPARTMENT OF COMMERCE

BUREAU OF THE CENSUS

WASHINGTON

E. T. McLaugh, M. D.,
Special Agent,
Jefferson City, Mo.

Dear Sir:

It is essential that death certificates be complete in every particular in order that proper classification may be made. You are therefore requested to make every effort to obtain the following information, indicated by check marks, lacking from the death certificate.

Name: Minnie Berry
Who died at _____ on June 27 - 1934
Residence: No. _____ St. _____
(If nonresident, city or town)

Length of residence in city or town where death occurred: Years _____ Months _____ Days _____
Sex F Color or race W Single, married, widowed or divorced: _____

Date of birth _____ Age: Years 81 Months 3 Days 30

Occupation: (a) Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. (b) Industry or business in which work was done, as silk mill, saw mill, bank, etc.

Date deceased last worked at this occupation: Month _____ Year _____
Birthplace (State or country) _____
Birthplace of father (State or country) _____
Birthplace of mother (State or country) _____
Principal cause of death: Myocardial infarction
bronchial

Other contributory causes of importance Intra-capsular (fracture) femur
Name of operation _____ Date of _____
What test confirmed diagnosis? _____ Was there an autopsy? _____
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? Her home
(Specify city or town, county and State)

Specify whether injury occurred in home, in industry, in home, or in public place.

Manner of injury Fell on floor after tripping on rug
Nature of injury Intra-capsular fracture of hip
Was disease or injury in any way related to occupation of deceased? No
If so, specify _____
Name of physician Dr. Roates MD
Address of physician 903 1/2 main St Trenton Mo
Signature of Registrar Irene D Fair

This information is sought for statistical purposes only and in order that the official report may be complete and correct. Please reply promptly using the enclosed official envelope which requires no postage.

Reg. Dist. No. 328

Primary Reg. Dist. No. 3017

Very truly yours,
E. T. McLaugh M.D.
Special Agent. E.T.C.

THE UNIVERSITY OF CHICAGO

DEPARTMENT OF CHEMISTRY

MEMORANDUM

5-20167

The following is a summary of the results of the experiments conducted on the reaction of C_2H_2 with $\text{CuCl}_2 \cdot 2\text{H}_2\text{O}$ in the presence of NH_3 and H_2O . The reaction was carried out at various temperatures and pressures, and the products were analyzed by gas chromatography and mass spectrometry. The results show that the reaction proceeds via a complex intermediate, and the rate of reaction is dependent on the concentration of $\text{CuCl}_2 \cdot 2\text{H}_2\text{O}$ and NH_3 . The products are identified as C_2H_2 , C_2H_4 , and C_2H_6 . The reaction is exothermic and occurs rapidly at room temperature. The mechanism of the reaction is proposed to involve the formation of a $\text{Cu}(\text{C}_2\text{H}_2)$ complex, which then reacts with H_2O to form the products.