

DEC 6 1934

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

Do not use this space.

39018

1. PLACE OF DEATH

County DeKalb
Township
City Kennett, Mo. (No.)

Registration District No. 288
Primary Registration District No. 4172

File No.
Registered No.
St. Ward

2. FULL NAME

(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>White</u>	5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word) <u>Married</u>
5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF <u>Betty Allen</u>		
6. DATE OF BIRTH (MONTH, DAY, AND YEAR) <u>Aug 17 - 1888</u>		
7. AGE	YEARS <u>46</u>	MONTHS <u>3</u>
	DAYS <u>10</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>Life Insurance</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

FATHER	12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) <u>Illinois</u>
	13. NAME <u>James Allen</u>
MOTHER	14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) <u>Illinois</u>
	15. MAIDEN NAME <u>Jennie Manning</u>
	16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) <u>Illinois</u>
	17. INFORMANT (ADDRESS) <u>Mr. Eraver C. Allen Kennett, Mo.</u>
18. BURIAL, CREMATION, OR REMOVAL	19. UNDERTAKER (ADDRESS)
PLACE <u>DeKalb</u> DATE <u>11-18</u> 19 <u>34</u>	<u>Rev. H. Jones Kennett, Mo.</u>
20. FILED <u>11-27</u> 19 <u>34</u>	<u>Arthur Davis</u> Registrar.

2 MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) 11/16 1934

22. I HEREBY CERTIFY, That I attended deceased from no physician, 1934 attendance , 19
I last saw him alive on , 19 Death is said

to have occurred on the date stated above, at 2:40 p.m.
The principal cause of death and related causes of importance were as follows:

By being killed in an auto -
mobile collision caused by
his own negligent and
reckless driving at an excessive rate of
speed while in an intoxicated condition
Other contributory causes of importance: I

Name of operation 910 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? Accident Date of injury Nov 16 1934
Where did injury occur? 3 miles north of Kennett, County of DeKalb
(Specify city or town, county, and State)
Specify whether injury occurred in industry, in home, or in public place. Public Place
Manner of injury In an automobile collision
Nature of injury fractured skull, broken bones, etc.

24. Was disease or injury in any way related to occupation of deceased? no
If so, specify
(Signed) J. J. Higdon Coronor
(Address) Kennett, Mo.

