

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

Do not use this space.

JUN 17 1937

19650

1. PLACE OF DEATH

15<sup>th</sup> County Camden  
Township Osage  
City Camdenton (No.       )

Registration District No. 117  
Primary Registration District No. 5167

File No. 80  
Registered No.        St.        Ward       

2. FULL NAME

George Brokelman

(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

MEDICAL CERTIFICATE OF DEATH

3. SEX Male 4. COLOR OR RACE white 5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word) married

5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF Grace Brokelman

6. DATE OF BIRTH (MONTH, DAY, AND YEAR) July 1 - 1882

7. AGE YEARS 54 MONTHS 9 DAYS 16 If LESS than 1 day, ..... hrs. or ..... min.

8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. farmer  
9. Industry or business in which work was done, as silk mill, saw mill, bank, etc. mechanic  
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) Germany

13. NAME G. Brokelman

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

15. MAIDEN NAME ?

16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) 9

17. INFORMANT Mary Brokelman (ADDRESS) Hasting Net.

18. BURIAL, CREMATION, OR REMOVAL PLACE Hasting Net. DATE April 18, 1937

19. UNDERTAKER Bob Bankro Woolery (ADDRESS) Camdenton, Mo.

20. FILED June 18, 1937 Lizzie Keller Registrar.

21. DATE OF DEATH (MONTH, DAY, AND YEAR) April 17, 1937

22. I HEREBY CERTIFY, That I attended deceased from April 17, 1937, at about 8:00 P.M. VIEWED

I last saw him alive on       , 19       . Death is said to have occurred on the date stated above, at 9 A.m.

The principal cause of death and related causes of importance were as follows:

Suicidal  
asphyxia by carbon monoxide gas.  
164  
Other contributory causes of importance: the hose from exhaust  
manipulated into car & truck  
near camdenton

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       , 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?         
If so, specify BE Woolery Coroner (Signed)        M.D.  
(Address) Camdenton, Mo., 4, 430

