Mr. Mabuce

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

Do not use this space.
24777

1. PLACE OF DEATH
County St Francois
Township SX Francois
City Leadington, Mo (No. ..... St. ..... Ward)

Registration District No. 774
Primary Registration District No. 6018 B

File No. 708
Registered No. .....

2. FULL NAME Mils P. Mabuce
(a) Residence, No. Leadington, Mo 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 M.
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 Rebecca Ann Ferguson
6. DATE OF BIRTH (MONTH, DAY, AND YEAR) February 26-1864
7. AGE YEARS 73 MONTHS 4 DAYS 3. If LESS than 1 day, ... hrs. or ..... min.

OCCUPATION
8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. retired laborer
9. Industry or business in which work was done, as silk mill, saw mill, bank, etc. odd jobs
10. Date deceased last worked at this occupation (month and year) 1936
11. Total time (years) spent in this occupation 53

12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Near Copenhagen Denmark

FATHER
13. NAME Mr. Ludwig Mabuce
14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Denmark

MOTHER
15. MAIDEN NAME — Unknown
16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Unknown

17. INFORMANT (ADDRESS) Mrs. Virgie Coseman Daughter Leadington, Mo.
18. BURIAL, CREMATION, OR REMOVAL
PLACE Methodist Fredickton DATE July 1 1937
19. UNDERTAKER (ADDRESS) Alvin W. Hood Flat River, Mo
20. FILED 7-7 1937 C B Harrar Registrar.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) 6-29 1937
22. I HEREBY CERTIFY, That I attended deceased from By Inquest, 19...
I last saw him alive on June 29, 1937. Death is said to have occurred on the date stated above, at 8:30 A.m.
The principal cause of death and related causes of importance were as follows:
Jaws Verdict! 210 M
Death due to injuries received when struck
Date of onset
Other contributory causes of importance:
by a car driven by Clyde May on Highway #61
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? accident Date of injury 6-29, 1937
Where did injury occur? Leadington Mo. Hwy 61
(Specify city or town, county, and State)
Specify whether injury occurred in industry, in home, or in public place.
Public place
Manner of injury killed by car.
Nature of injury Internal injuries
24. Was disease or injury in any way related to occupation of deceased? no
If so, specify
(Signed) Elena Province, Coroner
(Address) Flat River, Mo

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.

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