

Do not use this space.

NOV 19 1937

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

38230

1. PLACE OF DEATH

County Mercer
Township Morgan
City Princeton Mo (No.)

Registration District No. 556
Primary Registration District No. 4878

File No.
Registered No. 61
St. Ward)

2. FULL NAME

John Alexander Huston
(a) Residence No. Alberton Iowa 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 <u>Male</u>	4. COLOR OR RACE <u>White</u>	5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word) <u>widowed</u>
5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF <u>Mary A Huston</u>		
6. DATE OF BIRTH (MONTH, DAY, AND YEAR) <u>July 24 - 1858</u>		
7. AGE YEARS <u>79</u>	MONTHS <u>2</u>	DAYS <u>16</u>
8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. <u>Retired merchant</u>		
9. Industry or business in which work was done, as silk mill, saw mill, bank, etc. <u>Retail meat Gray</u>		
10. Date deceased last worked at this occupation (month and year) <u>July 1934</u>		11. Total time (years) spent in this occupation
12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) <u>Numa Iowa</u>		
13. NAME <u>George P Huston</u>		
14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) <u>Ohio</u>		
15. MAIDEN NAME <u>Candrella Paxton</u>		
16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) <u>Ohio</u>		
17. INFORMANT <u>Ralph Huston</u> (ADDRESS) <u>Princeton, Mo.</u>		
18. BURIAL, CREMATION, OR REMOVAL PLACE <u>Alberton Ia.</u> DATE <u>Oct. 12 1937</u>		
19. UNDERTAKER <u>Macl Mace</u> (ADDRESS) <u>Princeton Mo.</u>		
20. FILED <u>7/11</u> 19 <u>37</u> <u>JM Perry</u> Registrar		

21. DATE OF DEATH (MONTH, DAY, AND YEAR) Oct 10 1937

22. I HEREBY CERTIFY, That I attended deceased from Sept 1, 1937, to Oct 10, 1937
I last saw him alive on Oct 16 10, 1937 Death is said to have occurred on the date stated above, at 9:40 a.m.
The principal cause of death and related causes of importance were as follows:
Calcification of stomach
Date of onset 1935

Other contributory causes of importance:
46

Name of operation 0 Date of 6
What test confirmed diagnosis? Physd Was there an autopsy? no

23. If death was due to external cause (violence), fill in also the following:
Accident, suicide, or homicide? no 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 1
Nature of injury 1

24. Was disease or injury in any way related to occupation of deceased? no
If so, specify

(Signed) Ralph Huston M. D.
(Address) Princeton Mo.

CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important.

65
2
2

26

2
2
2

