

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.

DEC 13 1937  
ISOLATION HOSPITAL

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

Do not use this space.

39598

1. PLACE OF DEATH  
 County..... Registration District No. **791**  
 Township..... Primary Registration District No. **1008**  
 City **St. Louis** (No. ....) St. .... Ward **23**

2. FULL NAME **Mallie Jones**  
 (a) Residence, No. **217 Soulard St.** St. .... Ward **23**  
 (Usual place of abode)  
 Length of residence in city or town where death occurred **7** yrs. .... mos. .... ds. How long in U. S., if of foreign birth? yrs. .... mos. .... ds. (If nonresident, give city or town and State)

File No. ....  
 Registered No. **10585**  
 St. .... Ward

PERSONAL AND STATISTICAL PARTICULARS

3. SEX **Female** 4. COLOR OR RACE **Colored** 5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word) **Married**

5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF **Fred Jones**

6. DATE OF BIRTH (MONTH, DAY, AND YEAR) **Union**

7. AGE YEARS **30** MONTHS ..... DAYS ..... If LESS than 1 day, ..... hrs. or ..... min.

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

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 .....

12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) **Tuscaloosa Alabama**

13. NAME **Unknown**

14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) **Unknown**

15. MAIDEN NAME **Rose Rayal**

16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) **Tuscaloosa Alabama**

17. INFORMANT **A. Lane**  
 (ADDRESS) **5600 Arsenal**

18. BURIAL, CREMATION, OR REMOVAL  
 PLACE **Father's Dictator** DATE **Nov 18** 19**37**  
**Old Burk**

19. UNDERTAKER (ADDRESS) **162-129 St. J. Bredeck**

20. **NOV 15 1937** Registrar.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) **Nov. 13, 1937**

22. I HEREBY CERTIFY, That I attended deceased from **Nov. 13, 1937**, to **Nov. 13, 1937**  
 I last saw him alive on **Nov. 13, 1937**. Death is said to have occurred on the date stated above, at **11:40 p.m.**  
 The principal cause of death and related causes of importance were as follows:  
 (Date of onset)

**Poliomyelitis. Expedient 6-27**

Other contributory causes of importance: **10**

Name of operation **none** Date of .....

What test confirmed diagnosis? **clinical** Was there an autopsy? **yes**

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 .....  
 (Signed) **H. J. Block**, M. D.  
 (Address) **5600 Arsenal**

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The first part of the document  
 discusses the general principles  
 of the system. It is divided  
 into several sections, each  
 dealing with a different aspect  
 of the overall process. The  
 second part of the document  
 provides a detailed description  
 of the various components  
 and their interactions. This  
 section is particularly  
 important as it explains the  
 underlying mechanisms that  
 make the system work. The  
 final part of the document  
 contains a summary of the  
 key findings and conclusions  
 drawn from the study.

The following table provides  
 a summary of the data  
 collected during the  
 experiment. The data shows  
 that the system performs  
 well under a variety of  
 conditions. The results  
 are consistent with the  
 theoretical predictions  
 and provide strong evidence  
 for the effectiveness of  
 the proposed system.

In conclusion, the system  
 described in this document  
 is a significant improvement  
 over existing methods. It  
 offers a more efficient and  
 reliable way of handling  
 the data. The results of  
 the study are highly  
 encouraging and suggest  
 that the system has the  
 potential to be widely  
 adopted in the future.