DEC 27 1937

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

Do not use this space.

42071

1. PLACE OF DEATH
County Semiscat
Township Little Prairie
City ~~Caruthersville, Mo. R-1~~ (No. ..... St. ..... Ward)

Registration District No. 651
Primary Registration District No. 5862

File No.
Registered No. 124

2. FULL NAME John Blake Moore
(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 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~~ Viola Moore

6. DATE OF BIRTH (MONTH, DAY, AND YEAR) Jan. 26, 1888

7. AGE 54 — YEARS 49 — MONTHS 9 — DAYS 21 — If LESS than 1 day, ..... hrs. or ..... min.

OCCUPATION
8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Deputy Sheriff
9. Industry or business in which work was done, as silk mill, saw mill, bank, etc. County
10. Date deceased last worked at this occupation (month and year) Nov. 1937
11. Total time (years) spent in this occupation 1

12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Camden Tennessee

FATHER
13. NAME Thomas Moore
14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Unknown

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

17. INFORMANT (ADDRESS) Mrs Viola Moore Caruthersville, Mo. R-1

18. BURIAL, CREMATION, OR REMOVAL
PLACE Camden, Tenn. DATE 11/18 1937

19. UNDERTAKER (ADDRESS) La Forge Undt. Co. Caruthersville, Mo.

20. FILED Dec. 1 1937 Ada Martin
Registrar.

## MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) Nov. 17 4:00 P.M. 1937

22. I HEREBY CERTIFY, That I attended deceased from ....., 19....., to ....., 19.....
I last saw h— alive on ....., 19..... Death is said to have occurred on the date stated above, at 4 P.m.
The principal cause of death and related causes of importance were as follows:

Dont Know
Possibly heart trouble
fell Striking his head on a
Counter

Date of onset

Other contributory causes of importance:

1860

Name of operation ..... Date of .....
What test confirmed diagnosis? ..... Was there an autopsy? no

23. If death was due to external causes (violence), fill in also the following:
Accident, suicide, or homicide? accident Date of injury 11-17, 1937
Where did injury occur? Cottonwood Point Mo.
(Specify city or town, county, and State)
Specify whether injury occurred in industry, in home, or in public place.
public Place in a store
Manner of injury fell striking his head.
Nature of injury .....

24. Was disease or injury in any way related to occupation of deceased? no
If so, specify .....
(Signed) Jack Kelley Coroner 4 ~~M.D.~~
(Address) Hayti Mo.

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