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

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

Do not use this space.

1. PLACE OF DEATH
County Johnson — Registration District No. 431 — File No. 3209
Township Warrensburg — Primary Registration District No. 5588 — Registered No. 9
City ..... (No. ..... St. ..... Ward)

2. FULL NAME Mary Perrent Donoho
(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: Female
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: John Donoho
6. DATE OF BIRTH (MONTH, DAY, AND YEAR): Sep - 26 - 1877
7. AGE: YEARS 61 — MONTHS 4 — DAYS 2 — If LESS than 1 day, ... hrs. or ..... min.

OCCUPATION
8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Housewife
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): Iowa

FATHER
13. NAME: Hugh Lavory
14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY): France

MOTHER
15. MAIDEN NAME: Ellen McCoy
16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY): Ireland

17. INFORMANT (ADDRESS): John Donoho, Warrensburg
18. BURIAL, CREMATION, OR REMOVAL
PLACE Liberty Cem. DATE Jan 31 - 1938
19. UNDERTAKER (ADDRESS): Sweeney - Phillips, Warrensburg, Mo.
20. FILED Jan 31 1938 Erna Gentry, Registrar.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR): Jan - 29 - 1938

22. I HEREBY CERTIFY, That I attended deceased from Jan. 24 1938, to Jan. 29 1938
I last saw her alive on Jan. 29 1938. Death is said to have occurred on the date stated above, at 10:30 p.m.
The principal cause of death and related causes of importance were as follows:

	Date of onset
Burned to death	

Other contributory causes of importance:

Name of operation Amputation of R arm at elbow Date of Jan 25 1938
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 1-24, 1938
Where did injury occur? Johnson Co. Mo. (Specify city or town, county, and State)
Specify whether injury occurred in industry, in home, or in public place. In home
Manner of injury Fell, with R. arm in fire
Nature of injury Burn R. fore arm.

24. Was disease or injury in any way related to occupation of deceased? .....
If so, specify .....
(Signed) T. L. Bradley, M.D.
(Address) Warrensburg Mo.

RECEIVED
FEB 25 1938
BUREAU OF VITAL STATISTICS
MO. STATE BOARD OF HEALTH