

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.

SEP 23 1938

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

Do not use this space.

1. PLACE OF DEATH

County Henry  
Township Clinton  
City Clinton Mo.

Registration District No. 347  
Primary Registration District No. 3018

File No. 29020  
Registered No. 457  
St. Mo. Ward 457

2. FULL NAME

(a) Residence, No. Calhoun R. 7th St. Ward. 457  
(Usual place of abode) Mo. (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) Single

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

6. DATE OF BIRTH (MONTH, DAY, AND YEAR) May 18 1936

7. AGE YEARS MONTHS DAYS If LESS than 1 day, ..... hrs. or ..... min.  
2 3 7

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

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) Calhoun Mo RFD

13. NAME Richard Blanchard

14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Putnam Co Mo

15. MAIDEN NAME Auro Goucher

16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) New Hampton Mo

17. INFORMANT (ADDRESS) Richard Blanchard

18. BURIAL, CREMATION, OR REMOVAL PLACE Boonville Mo DATE Aug 28 1938

19. UNDERTAKER (ADDRESS) Spare & Son

20. FILED 9-3 3881 J R Hampton Registrar.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) Aug 25 1938

22. I HEREBY CERTIFY, That I attended deceased from Aug 25 1938, to Aug 25 1938

I last saw him alive on Aug 25 1938. Death is said to have occurred on the date stated above, at 6 a.m.

The principal cause of death and related causes of importance were as follows:

Severe & Extensive Burn involving most of body surface

Fell backward in bath of scalding water sitting on

Other contributory causes of importance:  
Hot of home, tipped kettle over and water practically covered him

Name of operation none Date of no

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 Aug 24 1938

Where did injury occur? in home (Specify city or town, county, and State)

Specify whether injury occurred in industry, in home, or in public place.

Manner of injury see above

Nature of injury Severe Burn

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

If so, specify

(Signed) Estor V Dawson M. D.

(Address) Clinton Mo.

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RECEIVED

District Health Officer No. 7.

District File Number 7-38-76

Date Filed 7-14-38