

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.

OCT 23 1938

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

Do not use this space.

32788

1. PLACE OF DEATH

County MILLER

Registration District No. 562

File No. ....

Township RICHWOODS

Primary Registration District No. 5757

Registered No. ....

City IBERIA

(No. .... St. .... Ward)

2. FULL NAME DENNIS WYMAN BRUMLEY

(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)

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

6. DATE OF BIRTH (MONTH, DAY, AND YEAR) Sept. 17 1938

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

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) BRUMLEY

13. NAME ANDREW DOYB BRUMLEY

14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) MILLER, MO.

15. MAIDEN NAME FRANCIS DUNCAN

16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) MILLER MO.

17. INFORMANT Andrew Brumley (ADDRESS) Brumley, Mo

18. BURIAL, CREMATION, OR REMOVAL Mr. Brumley PLACE Brumley DATE 7/23 38

19. UNDERTAKER Ch. G. Gentry (ADDRESS) IBERIA, MO

20. FILED Oct. 7 1938 Mrs. W. A. Gentry Registrar

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) 7/26 1938

22. I HEREBY CERTIFY, That I attended deceased from 7-10 1938, to 7-26 1938

I last saw him alive on 7-26 1938 Death is said to have occurred on the date stated above, at 3 p. m.

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

Elbow-calcitis Date of onset

Other contributory causes of importance: 1912

Name of operation Date of

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? Date of injury

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) G. W. Duncan, M. D.

(Address) IBERIA, MO.

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