

No. 2  
11-10-35  
5-17-39  
I X21492

State File No. \_\_\_\_\_

Registration District No. 396

Primary Registration District No. 42 B3

Registrar's No. \_\_\_\_\_

1. PLACE OF DEATH:

(a) County Jackson  
(b) City or town Buckner  
(c) Name of hospital or institution:  
at her home in Buckner Hotel  
(If not in hospital or institution, write street number or location)  
(d) Length of stay: In hospital or institution \_\_\_\_\_  
(Specify whether \_\_\_\_\_)  
In this community 12 yrs 6 mos  
(years, months or days)

2. USUAL RESIDENCE OF DECEASED:

(a) State Missouri (b) County Jackson  
(c) City or town Buckner  
(If outside city or town limit, write "RURAL")  
(d) Street No. none  
(If rural, give location)  
(e) If foreign born, how long in U. S. A.? XX years.

8. (a) PRINT FULL NAME Mrs. Agnes Anne Hollywood

3. (b) If veteran, name war XX 3. (c) Social Security No. yes Confined no

4. Sex Female 5. Color or race White 6. (a) Single, widowed, married, divorced Widow

6. (b) Name of husband or wife J.H. Hollywood (deceased) 6. (c) Age of husband or wife if alive \_\_\_\_\_ years

7. Birth date of deceased Aug 25 1864  
(Month) (Day) (Year)

8. AGE: Years 75 Months 10 Days 22 If less than one day \_\_\_\_\_ hr. \_\_\_\_\_ min.

9. Birthplace Marshall Mo.  
(City, town, or county) (State or foreign country)

10. Usual occupation Cook and housekeeper

11. Industry or business Fred Mistler

12. Name Fred Mistler

13. Birthplace Germany  
(City, town, or county) (State or foreign country)

14. Maiden name Miss Martha Hall

15. Birthplace Ky  
(City, town, or county) (State or foreign country)

16. (a) Informant Miss Georgia Mistler

(b) Address Buckner Mo.

17. (a) Buckner Mo. (b) Date thereof June 18  
(Burial, cremation, or removal) (Month) (Day) (Year)  
(c) Place: burial or cremation Buckner Mo.

18. (a) Signature of funeral director V. M. Reppert  
(b) Address Buckner Mo.

19. (a) June 17 - 1940 (b) John W. Robertson  
(Date received local registrar) (Registrar's signature)

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month June day 16 1940  
year 1940 hour 10 minute 30 A. M.

21. I hereby certify that I attended the deceased from May 9  
1940, to June 16, 1940;  
that I last saw her alive on June 14, 1940;  
and that death occurred on the date and hour stated above.

Immediate cause of death Carcinoma of Stomach

Due to \_\_\_\_\_  
Due to 14-10

Other conditions \_\_\_\_\_  
(Include pregnancy within 3 months of death)

Major findings: Of operations no operations  
Of autopsy no autopsy

Duration \_\_\_\_\_  
PHYSICIAN \_\_\_\_\_  
Underline the cause to which death should be charged statistically.

22. If death was due to external causes, fill in the following:

(a) Accident, suicide, or homicide (specify) \_\_\_\_\_  
(b) Date of occurrence \_\_\_\_\_  
(c) Where did injury occur? \_\_\_\_\_  
(City or town) (County) (State)  
(d) Did injury occur in or about home, on farm, in industrial place, in public place? 358  
While at work? \_\_\_\_\_ (Specify type of place)  
(e) Means of injury \_\_\_\_\_

23. Signature John W. Robertson (M. D. or other) MD  
Address Buckner Mo. Date signed June 17-40

WRITE PLAIN UNFADING BLACK INK—MAKE A PERMANENT RECORD

MOTHER

**STATEMENT BY LICENSED EMBALMER**

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me, or by.....

....., Registered Apprentice No. ....  
working under my personal supervision.

Signed

*H. M. Reppert*

Licensed Embalmer No. 2321

P. O. Address Buolmer Mo.

**Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license.)**

**If this body is not embalmed, above space should be left blank.**

S - 21906 June 10 - 1940

Mrs. Agnes Hollywood was thought to have received some Social Security benefits in some way- but there are no records left at her old home of what these were, or of what the serial number of her case might have been. It is thought that perhaps the checks have a number on them, but of course these checks are not retained long at the home.

We do not know how to obtain her case number, unless it might be recorded somewhere in Jefferson City Mo.