

S. No. 2
4-13-40
5-17-39
I X23135

REC JUL 27 1942

Registration District No. 542.541

Primary Registration District No. 5730

Registrar's No. 107

63
0
0
WRITE PLAINLY—USE UNFADING BLACK INK—MAKE A PERMANENT RECORD

1. PLACE OF DEATH:

(a) County Marion

(b) City or town Rural Jefferson
(If outside city or town limits, write "RURAL" and name of township)

(c) Name of hospital or institution:
(If not in hospital or institution, write street number or location)

(d) Length of stay: In hospital or institution _____ (Specify whether)

In this community entire life years, months or days

3. (a) PRINT FULL NAME William Bradford Barbarick

3. (b) If veteran, name war ✓

3. (c) Social Security No. ✓

4. Sex Male 5. Color or face White 6. (g) Single, widowed, married, divorced Married

6. (b) Name of husband or wife Emma Barbarick 6. (c) Age of husband or wife if alive 49 years

7. Birth date of deceased November 5 1887
(Month) (Day) (Year)

8. AGE: Years 54 Months 8 Days 19 If less than one day hr. min.

9. Birthplace Gasconade Missouri
(City, town, or county) (State or foreign country)

10. Usual occupation Farmer

11. (a) Name James J. Barbarick

12. (a) Birthplace Gasconade Missouri
(City, town, or county) (State or foreign country)

(b) Maiden name Ruth Mae Barrett Love

12. (b) Birthplace Missouri
(City, town, or county) (State or foreign country)

(a) Informant Mrs Barbarick

(b) Address Belle - Mo.

17. (a) Burial (b) Date thereof 7/26/1942
(Burial, cremation, or disposal) (Month) (Day) (Year)

(c) Place: burial or cremation Liberty Cemetery

18. (a) Signature of funeral director Wassman Funeral Service

(b) Address Belle - Mo.

19. (a) 7/27/42 (b) Berna Bassett
(Date received local registrar) (Registrar's signature)

2. USUAL RESIDENCE OF DECEASED:

(a) State Missouri (b) County Marion 63

(c) City or town Rural 0
(If outside city or town limits, write "RURAL")

(d) Street No. _____ (If rural, give location)

(e) If foreign born, how long in U. S. A.? 0 years

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month July day 24th year 1942 hour _____ minute _____ M.

21. I hereby certify that I attended the deceased from birth 6-1937 to July 24-1942 and that death occurred on the date and hour stated above.

Immediate cause of death Tubercular Pulmonary Hemorrhage

Due to Tuberculosis of the lungs

Due to _____

Other conditions 136
(Include pregnancy within 3 months of death)

Major findings: Of operations none

Of autopsy none

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? _____

(Specify type of place) While at work _____ (e) Means of injury 0

23. Signature W. P. Carroll (M. D. or other) _____

Address Belle, Mo. Date signed 7-26-42

-625
127/42

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

Chester J. Sasser

Licensed Embalmer No.

4178

P. O. Address

Bland - 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, fact should be so stated above.

MISSOURI STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS

State of Mo
County of Marion } ss.

State File No.

AFFIDAVIT FOR CORRECTION OF A RECORD

Local Registrar's No.

On this 28 day of August, 1942, before me appears Frank W. Bassett, who, upon his oath, states that the original record of ^{birth} death for William Bradford Barbarek, died ^{born} July 24, 1942, in the State of Missouri, and which was filed at On, 1942, should be corrected as follows:

Item No. 20 should read.....

Instead of.....

Item No. 21 should read Feb. 6 1937 to July 24, 1942

Instead of Oct 6, 1935 till July 24 1942

Item No. should read.....

Instead of.....

The above is true to the best of my knowledge, information and belief.

(SEAL)

Affiant Frank W. Bassett Relationship.

Vienna Mo
Present Address.

Subscribed and sworn to before me this 28 day of August, 1942.

My Commission expires August 15-1943 W. H. Halber Notary Public.

Affidavits containing erasures will not be accepted; draw one line through error and write above it.

24765

Handwritten text, possibly a signature or name, located in the lower left quadrant.