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DEPARTMENT OF COMMERCE  
BUREAU OF THE CENSUS  
**FILED FEB 9 1943**

STATE BOARD OF HEALTH OF MISSOURI  
STANDARD CERTIFICATE OF DEATH

State File No. ....  
Registrar's No. **49**

Registration District No. **94** Primary Registration District No. **40.5-8 40.6.2**

**1. PLACE OF DEATH:**  
(a) County **Caldwell**  
(b) City or town **Cowgill**  
(If outside city or town limits, write "RURAL" and name of township)  
(c) Name of hospital or institution:  
**1**  
(If not in hospital or institution, write street number or location)  
(d) Length of stay: In hospital or institution.....  
In this community **1 yr** (Specify whether years, months or days)

**2. USUAL RESIDENCE OF DECEASED:**  
(a) State **Mo.** (b) County **Caldwell**  
(c) City or town **Cowgill**  
(If outside city or town limits, write "RURAL")  
(d) Street No. **1303**  
(If rural, give location)  
(e) Citizen of foreign country? **No** (Yes or No)  
If yes, name country.....

**3. (a) PRINT FULL NAME** **Sarah E. Connor**  
**3. (b) If veteran,** name war..... **3. (c) Social Security** No. **L**

**MEDICAL CERTIFICATION**  
**20. DATE OF DEATH:** Month **Jan.** day **28<sup>th</sup>**  
year **1943** hour **1** minute **40 P. M.**

**4. Sex** **F** **5. Color or race** **wh** **6. (a) Single, widowed, married,** **Divorced**  
**6. (b) Name of husband or wife** **David Connor** **6. (c) Age of husband or wife if** **5** years  
**7. Birth date of deceased** **Dec 5 1853**  
(Month) (Day) (Year)

**21. I hereby certify that I attended the deceased from** **Jan. 9**, 19**43**, to **Jan 28<sup>th</sup>**, 19**43**  
that I last saw her alive on **Jan. 28<sup>th</sup>**, 19**43**  
and that death occurred on the date and hour stated above.

**8. AGE:** Years **82** Months **1** Days **23**  
If less than one day hr. min.

Immediate cause of death: **Lobar Pneumonia**  
Due to **Shock and old age, she had a bad fall.**  
Due **Jan. 9<sup>th</sup>**

**9. Birthplace** **Ill.**  
(City, town, or county) (State or foreign country)

Other conditions (Include pregnancy within 3 months of death)  
**O.C. Kilbourn**

**10. Usual occupation** **Housewife**

Major findings: Of operations.....  
Of autopsy.....  
**PHYSICIAN**  
Underline the cause to which death should be charged statistically.

**11. Industry or business**

**12. Name** **Unknown** **9**

**13. Birthplace** **Unknown** **9**  
(City, town, or county) (State or foreign country)

**14. Maiden name** **Unknown** **9**

**15. Birthplace** **Unknown** **9**  
(City, town, or county) (State or foreign country)

**16. (a) Informant** **Mrs. Kit Phillips**

**(b) Address** **Brymer, Mo.**

**17. (a) Burial, cremation, or removal** **Skinner Cem.** **(b) Date thereof** **1-31-43**  
(Month) (Day) (Year)

**(c) Place: burial or cremation** **Skinner Cem.**

**18. (a) Signature of funeral director** **Bernard J. Mead**

**(b) Address** **Brymer, Mo.**

**19. (a) 1-28-43** **(b) E. R. Thompson**  
(Date received local registrar) (Registrar's signature)

**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?**

While at work? (Specify type of place) (e) Means of injury.....

**23. Signature** **O.C. Kilbourn** (M. D. or other) **✓**

**Address** **Cowgill, Mo.** **Date signed** **Jan 28<sup>th</sup> 1943**

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

MOTHER FATHER

1151

**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.....

*Donald F. Mead*

Licensed Embalmer No. *2501*

P. O. Address.....

*Graymer, 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  
STANDARD CERTIFICATE OF DEATH

State File No. 1734

Registration District No. 44

Primary Registration District No. 4062

Registrar's No. 49

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

1. PLACE OF DEATH:

(a) County Caldwell

(b) City or town Cougill

(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 \_\_\_\_\_ (years, months or days)

3. (a) PRINT FULL NAME Sarah E. Connor

3. (b) If veteran, name war \_\_\_\_\_ 3. (c) Social Security No. \_\_\_\_\_

4. Sex F 5. Color or race W 6. (a) Single, widowed, married, divorced \_\_\_\_\_

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

7. Birth date of deceased: see (Month) 5 (Day) 1905 (Year)

8. AGE: Years 89 Months 0 Days 0 If less than one day \_\_\_\_\_ min.

9. Birthplace: \_\_\_\_\_ (City, town, or county) \_\_\_\_\_ (State or foreign country)

10. Usual occupation \_\_\_\_\_

11. Industry or business \_\_\_\_\_

12. Name \_\_\_\_\_

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

14. Maiden name \_\_\_\_\_

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

16. (a) Informant \_\_\_\_\_

(b) Address \_\_\_\_\_

17. (a) \_\_\_\_\_ (b) Date thereof \_\_\_\_\_ (Month) (Day) (Year)

(c) Place: burial or cremation \_\_\_\_\_

18. (a) Signature of funeral director \_\_\_\_\_

(b) Address \_\_\_\_\_

19. (a) \_\_\_\_\_ (b) \_\_\_\_\_ (Registrar's signature)

2. USUAL RESIDENCE OF DECEASED:

(a) State \_\_\_\_\_ (b) County \_\_\_\_\_

(c) City or town \_\_\_\_\_ (If outside city or town limits, write "RURAL")

(d) Street No. \_\_\_\_\_ (If rural, give location)

(e) Citizen of foreign country? \_\_\_\_\_ (Yes or No)

If yes, name country \_\_\_\_\_

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month \_\_\_\_\_ Day \_\_\_\_\_ Year 1943 Minute \_\_\_\_\_ M.

21. I hereby certify that I attended the deceased from \_\_\_\_\_ 19\_\_\_\_; that I last saw him/her alive on \_\_\_\_\_ 19\_\_\_\_; and that death occurred on the date and hour stated above. Immediate cause of death: Labor Pneumonia

Due to Shock of old age, she had a bad fall Jan 9

Due to \_\_\_\_\_

Other conditions (include pregnancy within 3 months of death) 66a

Major findings: Of operations \_\_\_\_\_ Of autopsy \_\_\_\_\_

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) accident

(b) Date of occurrence Jan. 9

(c) Where did injury occur? Cougill, Caldwell, Mo.

(d) Did injury occur in or about home, on farm, in industrial place, in public place? at home of daughter

While at work? no (Specify type of place) (e) Means of injury fall

23. Signature A. Kilbourn (M. D. or other) \_\_\_\_\_ Address \_\_\_\_\_ Date signed \_\_\_\_\_

SUPPLEMENTARY

1. The first part of the document discusses the importance of maintaining accurate records of all transactions and activities. It emphasizes that proper record-keeping is essential for transparency and accountability, particularly in financial matters. The text notes that without clear documentation, it becomes difficult to track expenses, revenues, and other critical data points.

2. The second section addresses the challenges associated with data management and storage. It highlights the need for secure and scalable solutions to handle large volumes of information. The document suggests that investing in robust IT infrastructure is crucial to ensure that data remains safe and accessible over time. Additionally, it mentions the importance of regular backups and disaster recovery plans to mitigate risks.

3. The third part of the document focuses on the role of technology in streamlining operations. It describes how automation and digital tools can significantly reduce manual errors and improve efficiency. The text provides examples of various software applications used in business processes, such as CRM systems for customer relationship management and ERP systems for enterprise resource planning. It also touches upon the importance of training employees to effectively utilize these technologies.

4. The fourth section discusses the impact of regulatory changes on business operations. It notes that staying up-to-date with the latest laws and regulations is a constant challenge for organizations. The document suggests that companies should establish a dedicated compliance team or consult with legal experts to ensure they are fully adhering to all applicable rules. It also mentions the importance of conducting regular audits to identify and address any potential non-compliance issues.

5. The fifth part of the document explores the importance of customer feedback and satisfaction. It states that understanding customer needs and preferences is key to long-term success. The text recommends implementing various feedback mechanisms, such as surveys, focus groups, and social media monitoring, to gather valuable insights. It also emphasizes the need for prompt and effective responses to customer concerns to build trust and loyalty.

6. The sixth section discusses the importance of financial planning and budgeting. It notes that a well-defined financial strategy is essential for the long-term sustainability of any organization. The document suggests that companies should regularly review their budgets and adjust them as needed to reflect changing market conditions. It also mentions the importance of maintaining a healthy cash flow and managing debt effectively.

7. The seventh part of the document focuses on the importance of human resources and talent management. It states that having a skilled and motivated workforce is a significant competitive advantage. The text discusses various strategies for attracting, developing, and retaining top talent, including offering competitive salaries, providing professional development opportunities, and fostering a positive work environment. It also mentions the importance of diversity and inclusion in the workplace.

8. The eighth section discusses the importance of innovation and research and development. It notes that staying ahead of the competition often requires investing in new technologies and processes. The document suggests that companies should allocate resources to R&D and encourage a culture of experimentation and creativity. It also mentions the importance of protecting intellectual property through patents and other legal means.

9. The ninth part of the document focuses on the importance of sustainability and corporate social responsibility (CSR). It states that modern consumers are increasingly concerned about the environmental and social impact of the companies they support. The text suggests that companies should adopt sustainable practices, such as reducing carbon footprints and supporting social causes, to enhance their reputation and attract socially conscious investors.

10. The final section of the document provides a summary of the key points discussed and offers some concluding thoughts. It reiterates the importance of a holistic approach to business management, where all these factors are considered and integrated into a cohesive strategy. The document concludes by expressing optimism about the future of business and the potential for continued growth and innovation.