S. No. 2
M—5-42
-17-39
X32873

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

STATE BOARD OF HEALTH OF MISSOURI

STANDARD CERTIFICATE OF DEATH

9973

State File No.

FILED APR 7 1943

Registration District No. 71

Primary Registration District No. 3012

Registrar's No. 236

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

1. PLACE OF DEATH:

(a) County Clay

(b) City or town Excelsior Springs, Missouri
(If outside city or town limits, write "RURAL" and name of township)

(c) Name of hospital or institution:
Veterans Administration Facility 0
(If not in hospital or institution, write street number or location)

(d) Length of stay: In hospital or institution 13 days (Specify whether
In this community 13 days years, months or days)

2. USUAL RESIDENCE OF DECEASED: 999

(a) State Oklahoma (b) County ? 34

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

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

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

If yes, name country - 2

3. (a) PRINT FULL NAME James Vernon Milligan

3. (b) If veteran, name war World War I

3. (c) Social Security No. Yes-not remembered

4. Sex Male

5. Color or race White 0

6. (a) Single, widowed, married, divorced Single 0

6. (b) Name of husband or wife --

6. (c) Age of husband or wife if alive years

7. Birth date of deceased September 22, 1886 (Month) (Day) (Year)

8. AGE: Years 56 Months 5 Days 11 If less than one day hr. min.

9. Birthplace Chattanooga, Tenn. (City, town, or county) (State or foreign country) /

10. Usual occupation Painter and Interior Decorator unemployed

11. Industry or business " "

FATHER
12. Name Father, Granville Milligan
13. Birthplace -- (City, town, or county) North Carolina (State or foreign country) /

MOTHER
14. Maiden name Edna Ellis
15. Birthplace -- (City, town, or county) Georgia (State or foreign country) /

16. (a) Informant Hospital Records, Veterans Administration, Excelsior Springs, Mo.
(b) Address

17. (a) Removal (Burial, cremation, or removal) (b) Date thereof 3-7-43 (Month) (Day) (Year)
(c) Place: burial or cremation Wadsworth, Kansas

18. (a) Signature of funeral director Claude Prichard
(b) Address Excelsior Springs, Missouri

19. (a) 3-7-43 (Date received local registrar) (b) Mrs Sadie Redman (Registrar's signature)

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month March day 5 year 1943 hour 10:55 minute A. M.

21. I hereby certify that I attended the deceased from February 21, 1943, to March 5, 1943 that I last saw him alive on March 5, 1943 and that death occurred on the date and hour stated above.

Immediate cause of death Tuberculosis, pulmonary, chronic, bilateral, active.

Due to

Due to

13 P

Other conditions Tuberculosis of the larynx
(Include pregnancy within 3 months of death)
Tuberculosis of 4th Cervical Vertebra

Major findings:
Of operations

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

23. Signature Chas J Hufnagel (M. D. or other) 0

Address CHAS. J. HUFNAGEL, M.D. Veterans Administration Excelsior Springs, Mo. Date signed 3-5

(Licensed Embalmer's Statement on Reverse Side)

RECEIVED
District Health Officer No. 8,

District File Number .....

Date Filed 4-5-43

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 Robert May

Licensed Embalmer No. 4182

P. O. Address Excelsior Springs, 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.