

ED APR 16 1943  
Registration District No. **291**

Primary Registration District No. **4493**

1. PLACE OF DEATH:

(a) County **PUTNAM**

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

(c) Name of hospital or institution:  
**MONROE HOSPITAL AND CLINIC**  
(If not in hospital or institution, write street number or location)

(d) Length of stay: In hospital or institution **4 DAYS**  
(Specify whether years, months or days)

In this community **LIFE TIME**

2. USUAL RESIDENCE OF DECEASED:

(a) State **MISSOURI** (b) County **PUTNAM**

(c) City or town **UNIONVILLE**  
(If outside city or town limits, write "RURAL")

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

(e) Citizen of foreign country? **NO** (Yes )  
If yes, name country \_\_\_\_\_

3. (a) PRINT FULL NAME **DAR) OBADIAH BROWN**

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

3. (c) Social Security No. \_\_\_\_\_

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month **MARCH** day **14**  
year **1943** hour **4** minute **15** A. M.

4. Sex **MALE** 5. Color or race **WHITE** 6. (a) Single, widowed, married, divorced **SINGLE**

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

7. Birth date of deceased: **MARCH 10 1914**  
(Month) (Day) (Year)

21. I hereby certify that I attended the deceased from **MAR-9**, 19**43**, to **MAR-14**, 19**43**  
that I last saw him alive on **MAR 14**, 19**43**  
and that death occurred on the date and hour stated above.

8. AGE: Years **29** Months **0** Days **4** If less than one day \_\_\_\_\_ hr. \_\_\_\_\_ min.

Immediate cause of death **BRONCHO PNEUMONIA** **5-40**

Due to **INFLUENZA** **2 WKS.**

Due to **CHRONIC BRONCHITIS** **10 YRS**  
**ASTHMA**

9. Birthplace **PUTNAM Co. Mo.**  
(City, town, or county) (State or foreign country)

Other conditions (Include pregnancy within 3 months of death) **30**

10. Usual occupation **Auto Mechanic**

11. Industry or business **Garage**

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

PHYSICIAN \_\_\_\_\_

Underline the cause to which death should be charged statistically.

MOTHER FATHER { 12. Name **FRED O BROWN**

{ 13. Birthplace **PUTNAM Co. Mo.**  
(City, town, or county) (State or foreign country)

{ 14. Maiden name **ISEY FERN ALLEN**

{ 15. Birthplace **PUTNAM Co. Mo.**  
(City, town, or county) (State or foreign country)

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? \_\_\_\_\_

16. (a) Informant **F O Brown**

(b) Address **UNIONVILLE MISSOURI**

17. (a) **BURIAL** (Burial, ~~cremation~~) (b) Date thereof **MARCH 17, 1943**  
(Month) (Day) (Year)

(c) Place: burial or cremation **FRIENDSHIP CEMETERY**

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

23. Signature **J Neal Martin** (M. D. or other) \_\_\_\_\_  
Address **Unionville** Date signed **3/16/43**

18. (a) Signature of funeral director **Sam Stork FUNERAL HOME**

(b) Address **Unionville Mo. By J W Somatek**

19. (a) **4/3/1943** (Date received local registrar) (b) **[Signature]** (Registrar's Signature)

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

26  
10

9

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.

RECEIVED

District Health Officer No. 10

District File Number 4-43-762

Date Filed APR 15 1943

Signed James W Pomstock

Licensed Embalmer No. 4197

P. O. Address Unionville 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.