

3. No. 2  
1-5-42  
5-17-42  
1 X 2575

DEPARTMENT OF COMMERCE  
BUREAU OF THE CENSUS

STATE BOARD OF HEALTH OF MISSOURI  
STANDARD CERTIFICATE OF DEATH

State File No. **22026**  
Registrar's No. **32**

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

8  
2  
0

FILED JUL 10 1943  
Registration District No. **225**

Primary Registration District No. **4335**

1. PLACE OF DEATH:

(a) County **Moniteau**

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

(c) Name of hospital or institution: **None**  
(If not in hospital or institution, write street number or location)

(d) Length of stay: In hospital or institution **No** (Specify whether)

In this community **77 years** (years, months or days)

2. USUAL RESIDENCE OF DECEASED:

(a) State **Missouri** (b) County **Moniteau 68**

(c) City or town **Tipton**  
(If outside city or town limits, write "RURAL") **2**

(d) Street No. \_\_\_\_\_ (If rural, give location) **0**

(e) Citizen of foreign country? **No** (Yes or No)  
If yes, name country **Native**

3. (a) PRINT FULL NAME **John Guyde Springer**

3. (b) If veteran, name war **None**

3. (c) Social Security No. **None**

4. Sex **Male** 5. Color or race **White**

6. (a) Single, widowed, married, divorced **Widower**

6. (b) Name of husband or wife **Lida Springer**

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

7. Birth date of deceased **April 4 1861**  
(Month) (Day) (Year)

8. AGE: Years Months Days If less than one day

**82 2 10** hr. min.

9. Birthplace **Wayne County Ohio**  
(City, town, or county) (State or foreign country)

10. Usual occupation **Carpenter**

11. Industry or business **Retired Carpenter**

12. Name **Joseph Springer**

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

14. Maiden name **Ellen Guyde**

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

16. (a) Informant **Harry Springer**

(b) Address **Tipton, Missouri**

17. (a) **Burial** (b) Date thereof **6/16/1943**  
(Burial, cremation, or removal) (Month) (Day) (Year)

(c) Place: burial or cremation **Moreau Cemetery**

18. (a) Signature of funeral director **James E. Richard**

(b) Address **Tipton, Mo**

19. (a) **June 15 1943** (b) **Miss Leta Ferguson**  
(Date received local registrar) (Registrar's signature)

MOTHER FATHER

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month **June** day **14th.**  
year **1943** hour **9** minute **45 A.** M.

21. I hereby certify that I attended the deceased from **April 2**  
**1942** to **June 14 1943**

that I last saw him alive on **June 14 1943**  
and that death occurred on the date and hour stated above.

Immediate cause of death **Cardiac Insufficiency**  
**Arteriosclerosis**

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

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

Other conditions **Senility & Chronic nephrosis**  
(Include pregnancy within 3 months of death)

Major findings: **131K**

Of operations \_\_\_\_\_

Of 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? \_\_\_\_\_

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

(e) Means of injury \_\_\_\_\_

23. Signature **J. P. Le...**  
Address **Tipton, Mo** Date signed **6/14/43**

871

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

Signed Jewell E. Richards  
Licensed Embalmer No. 2466  
P. O. Address TIPTON 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.

*Handwritten notes:* 12/14/42, 2491 21, 12/14/42