

No. 300  
-10-47  
5-17-39  
I 3906

FILED OCT 6 1948

Registration District No. **43**

Primary Registration District No. **3007**

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

1. PLACE OF DEATH: **Butler**

(a) County **Butler**

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

(c) Name of hospital or institution **Lucy Lee Hospital**  
(If not in hospital or institution, write street number or location)

(d) Length of stay: In hospital or institution **3 days**  
(Specify whether years, months or days)

In this community **3 days**  
(Specify whether years, months or days)

3. (a) PRINT FULL NAME **Ellen Lucinda Cobb**

3. (b) If veteran, name war **XXX**

3. (c) Social Security No. **XXX**

4. Sex **Female**

5. Color or race **White**

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

6. (b) Name of husband or wife **George W. Cobb**

6. (c) Age of husband or wife if alive **85** years

7. Birth date of deceased **December 5 1866**  
(Month) (Day) (Year)

8. AGE: Years **82** Months **5** Days **8**

If less than one day **X** hr. **X** min.

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

10. Usual occupation **House wife**

11. Industry or business **Home**

MOTHER FATHER

12. Name **John Allen McKinnis**

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

14. Maiden name **Mary Kemp**

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

16. (a) Informant **Clarence Cobb**

(b) Address **Patterson Missouri**

17. (a) **Burial** (b) Date thereof **Sept. 13, 1948**  
(Burial, cremation, or removal) (Month) (Day) (Year)

(c) Place: burial or cremation **Coldwater, Missouri**

18. (a) Signature of funeral director **Thomas W. Gish**

(b) Address **412 Hickory St. Poplar Bluff, Mo.**

19. (a) **9/29/48** (b) **[Signature]**  
(Date received local registrar) (Registrar's signature)

2. USUAL RESIDENCE OF DECEASED:

(a) State **Missouri** (b) County **Wayne**

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

(d) Street No. **2 1/2 miles east on farm to market road**  
(If rural, give location)

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

If yes, name country **XX**

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month **Sept.** day **11**  
year **1948** hour **6** minute **10** P.M.

21. I hereby certify that I attended the deceased from **Sept. 9** to **Sept 11**, 19**48**  
that I last saw her alive on **Sept. 11**, 19**48**,  
and that death occurred on the date and hour stated above.

Immediate cause of death **Chronic Myocardial Disease** **1 da**

Due to **Cerebral Hemorrhage** **5 da**

Due to **Hypertension** **?**

Other conditions (Include pregnancy within 3 months of death)

Major findings: Of operations **[Signature]**

Of autopsy **[Signature]**

PHYSICIAN **[Signature]**

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? **[Signature]** (Specify type of place)

(e) Means of injury **[Signature]**

23. Signature **[Signature]** (M. D. or Trustee)

Address **Poplar Bluff, Mo.** Date signed **9/29/48**

RECEIVED  
District Health Office No. 2,  
District File Number 1044-1256  
Date Filed 6-2-44

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**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 Martin E. Bowler

Licensed Embalmer No. 4426

P. O. Address Richmont, Va

**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.**