DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

STATE BOARD OF HEALTH OF MISSOURI

STANDARD CERTIFICATE OF DEATH

State File No. 31765 A

FILED DEC 2 1958 Registration District No. 247

Primary Registration District No. 6162

Registrar's No.

1. PLACE OF DEATH:

(a) County Stone

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

(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)

2. USUAL RESIDENCE OF DECEASED:

(a) State Mo (b) County Stone

(c) City or town Reeds Spring
(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

3. (a) PRINT FULL NAME Robert Daniel Emmerson

3. (b) If veteran, name war

3. (c) Social Security No.

4. Sex male

5. Color or race Estelle

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

6. (b) Name of husband or wife Emerson

6. (c) Age of husband or wife if alive 52 years

7. Birth date of deceased 7 (Month) 1 (Day) 1894 (Year)

8. AGE: Years 54 Months 2 Days 12 If less than one day hr. min.

9. Birthplace Coffeyville, (City, town, or county) Kan. (State or foreign country)

10. Usual occupation Tomato canner

11. Industry or business Canning

FATHER
12. Name D.R.Emerson
13. Birthplace (City, town, or county) Ohio (State or foreign country)

MOTHER
14. Maiden name Sarah Fisher
15. Birthplace ? (City, town, or county) Ohio (State or foreign country)

16. (a) Informant R.C.Emerson
(b) Address Reeds Spring

17. (a) Burial (Burial, cremation, or removal) (b) Date thereof 9-15-48 (Month) (Day) (Year)
(c) Place: burial or cremation Yocum Pond Cem.

18. (a) Signature of funeral director [signature]
(b) Address [illegible]

19. (a) Nov. 29. 58 (Date received local registrar) (b) Mrs J. Elmer Brookman (Registrar's signature)

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month Sept. day 13th, year 1948 hour 4 minute A M.

21. I hereby certify that I attended the deceased from 1946, 19 to 1948, 19; that I last saw him alive on 9-12-48, 19; and that death occurred on the date and hour stated above.

	Duration
Immediate cause of death Bronchial Asthma	9 yr
Due to	
Due to	
Other conditions (Include pregnancy within 3 months of death)	
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)

(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 W.P. Cottrell MD (M. D. or other)

Address W.P.Cottrell Date signed

(Licensed Embalmer's Statement on Reverse Side) Reeds Spring MO

#2730

Robert D. Emerson

Filed for record this 11 day of Dec
A. D. 1951 at 4 o'clock — minutes M.

J. FRANK TAYLOR,
Circuit Clerk and Ex-officio Recorder.

J Frank Taylor Deputy

DEC 29 1958

STATE OF MISSOURI } ss
COUNTY OF STONE } ss

IN THE RECORDER'S OFFICE

I, J. Frank Taylor, Recorder of said County, do hereby certify that the within instrument of writing was on the 11 day of Dec A. D. 1951, at 4 P. M., duly filed for record, and [illegible] at page 155 [illegible] 87

IN TEST [illegible] my official seal of [illegible] and affixed A. D. 1951 11 Dec

J Frank Taylor Recorder
Cat Benson Deputy

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 [signature]

Licensed Embalmer No. 2277

P. O. Address Branson 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.