

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

102 District

State File No. 150

FILED JAN 22 1949

BIRTH NO. _____		REG. DIST. NO. 38		PRIMARY REG. DIST. NO. 3006		Registrar's No. 21	
1. PLACE OF DEATH a. COUNTY Boone				2. USUAL RESIDENCE (Where deceased lived. If institution; residence before admission). a. STATE Missouri b. COUNTY Boone			
b. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Columbia		c. LENGTH OF STAY (in this place) 20 Years		c. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Columbia		10	
d. FULL NAME OF HOSPITAL OR INSTITUTION 513 Lyons St.				d. STREET ADDRESS (If rural, give location) 513 Lyons St.			
3. NAME OF DECEASED (Type or Print) BROOKSY LEE EDWARDS a. (First) b. (Middle) c. (Last)			4. DATE OF DEATH (Month) (Day) (Year) Jan. 14, 1949				
5. SEX Female	6. COLOR OR RACE White	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Widowed	8. DATE OF BIRTH Jan. 12, 1887		9. AGE (In years last birthday) 62	10. MONTHS 6	11. IF UNDER 1 YEAR Days
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) At Home	10b. KIND OF BUSINESS OR INDUSTRY		11. BIRTHPLACE (State or foreign country) Boone County, Mo.			12. CITIZEN OF WHAT COUNTRY? U.S.	
13a. FATHER'S NAME Wilson Hall		13b. MOTHER'S MAIDEN NAME Julia Long		14. NAME OF HUSBAND OR WIFE Cotta A. Edwards			
15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) No		16. SOCIAL SECURITY NO.	17. INFORMANT'S SIGNATURE OR NAME Mrs. Julia Blanche Roberts, Columbia, Mo				
18. CAUSE OF DEATH Enter only one cause per line for (a), (b), and (c) *This does not mean the mode of dying, such as heart failure, asthma, etc. It means the disease, injury, or complication which caused death.	MEDICAL CERTIFICATION I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Generalized Calcification ANTECEDENT CAUSES Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last. DUE TO (b) Bacteremia of Colon DUE TO (c) 153 II. OTHER SIGNIFICANT CONDITIONS Chronic Myocarditis						INTERVAL BETWEEN ONSET AND DEATH 6 Mo. 6 Mo. 6 Mo.
19a. DATE OF OPERATION 1-20-48	19b. MAJOR FINDINGS OF OPERATION Generalized Calcification - Myocarditis Melanoma to						20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
21a. ACCIDENT SUICIDE HOMICIDE (Specify)	21b. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)		21c. (CITY, TOWN, OR TOWNSHIP) (COUNTY) (STATE)				
21d. TIME OF INJURY (Month) (Day) (Year) (Hour) m.		21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>		21f. HOW DID INJURY OCCUR			
22. I hereby certify that I attended the deceased from Nov 15, 1948, to Jan 14, 1949, that I last saw the deceased alive on Jan 14, 1949, and that death occurred at 9 A.M., from the causes and on the date stated above.							
23a. SIGNATURE (Degree or title) [Signature]				23b. ADDRESS [Address]		23c. DATE SIGNED 1-15-49	
24a. BURIAL, CREMATION, REMOVAL (Specify) Burial	24b. DATE 1-16-1949	24c. NAME OF CEMETERY OR CREMATORY Mt. Horeb Cemetery		24d. LOCATION (City, town, or county) (State) Sturgeon, Mo.			
DATE REC'D BY LOCAL REG. Jan. 15 1949	REGISTRAR'S SIGNATURE Mrs. R.E. Palmer 31			25. FUNERAL DIRECTOR'S SIGNATURE ADDRESS Parker Funeral Service Columbia, Mo.			

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

RECEIVED
District Health Officer No. 9,
District File Number
Date Filed
JAN 21 1949

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 _____

Student Embalmer No. _____

working under my personal supervision.

Signed Tom M. Harg

Signed _____
Student Embalmer

Licensed Embalmer No. 4067

P. O. Address Columbia, Mo

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply the above constitutes grounds for revocation of license.)

If this body is not embalmed, fact should be so stated above.