

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

State File No. **40566**

FILED JAN 8 1952

BIRTH NO. _____ REG. DIST. NO. **1** PRIMARY REG. DIST. NO. **5006** Registrar's No. **346**

1. PLACE OF DEATH a. COUNTY Adair		2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission). a. STATE Missouri b. COUNTY Adair	
b. CITY (If outside corporate limits, write RURAL and give town or township) R.R.#2 Greentop		c. CITY (If outside corporate limits, write RURAL and give township) Greentop	
c. LENGTH OF STAY (In this place) Life		d. STREET ADDRESS (If rural, give location) R. R. #2	
d. FULL NAME OF HOSPITAL OR INSTITUTION R.R.#2, Greentop, Mo.			

3. NAME OF DECEASED (Type or Print)	a. (First) Newton	b. (Middle) Eugene	c. (Last) Western	4. DATE OF DEATH (Month) (Day) (Year) Dec. 21, 1951
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5. SEX Male	6. COLOR OR RACE White	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married	8. DATE OF BIRTH Sept. 22, 1878	9. AGE (In years last birthday) 73	IF UNDER 1 YEAR Months	IF UNDER 4 HRS. Days	Hours	Min.
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10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Farmer	10b. KIND OF BUSINESS OR INDUSTRY Farming	11. BIRTHPLACE (State or foreign country) Adair County, Missouri	12. CITIZEN OF WHAT COUNTRY? U.S.A.
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13a. FATHER'S NAME Herbert N. Western	13b. MOTHER'S MAIDEN NAME Rachael Ann Knight	14. NAME OF HUSBAND OR WIFE Alta Ann Phelps Western
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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. None	17. INFORMANT'S SIGNATURE OR NAME Mrs. Alta Western, Greentop, Mo.	ADDRESS
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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, asthenia, etc. It means the disease, injury, or complication which caused death.	MEDICAL CERTIFICATION		INTERVAL BETWEEN ONSET AND DEATH 5 months 10 years 12 years
	I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Cerebral thrombosis		
	II. OTHER SIGNIFICANT CONDITIONS Conditions contributing to the death but not related to the disease or condition causing death. Coronary sclerosis Hypertension (essential)		
19a. DATE OF OPERATION		19b. MAJOR FINDINGS OF OPERATION	

19a. DATE OF OPERATION	19b. MAJOR FINDINGS OF OPERATION	20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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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)
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21d. TIME OF INJURY (Month) (Day) (Year) (Hour)	21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>	21f. HOW DID INJURY OCCUR?
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22. I hereby certify that I attended the deceased from **12/21, 1951** to **12/21, 1951**, that I last saw the deceased alive on **Dec. 21, 1951**, and that death occurred at **4:15 p.m.**, from the causes and on the date stated above.

23a. SIGNATURE Donald M. Roberts (Degree of title)	23b. ADDRESS Queen City, Missouri	23c. DATE SIGNED 12/22/51
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24a. BURIAL, CREMATION, REMOVAL (Specify) Burial	24b. DATE 12/23/51	24c. NAME OF CEMETERY OR CREMATORY New Harmony	24d. LOCATION (City, town, or county) (State) Schuyler County, Mo
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DATE REC'D BY LOCAL REG. 12-23-51	REGISTRAR'S SIGNATURE Kate Lambert	25. FUNERAL DIRECTOR'S SIGNATURE [Signature]	ADDRESS Kirksville, Mo.
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WRITE PLAINLY—USING UNFADING BLACK INK—MAKE A PERMANENT RECORD

JAN 11 1952

Date Received: JAN 2
DISTRICT HEALTH OFFICE #
District File Number 1-52
Date Filed: JAN 5 1952

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.

Student
Student Embalmer

Signed *John B. Cooper*

Licensed Embalmer No. *4119*

P. O. Address. *Kirkville, 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.