S. No. 300
v. 10.48

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

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

State File No. 12499

FILED APR 28 1952

BIRTH NO. REG. DIST. NO. 107 PRIMARY REG. DIST. NO. 3019 Registrar's No. 48

1. PLACE OF DEATH
a. COUNTY: Dunklin
b. CITY OR TOWN (If outside corporate limits, write RURAL and give township): Kennett
c. LENGTH OF STAY (In this place): 55 yrs
d. FULL NAME OF HOSPITAL OR INSTITUTION: Dunklin Co. Memorial Hospital

2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission).
a. STATE: Mo. b. COUNTY: Dunklin
c. CITY OR TOWN (If outside corporate limits, write RURAL and give township): Kennett Mo. 0352
d. STREET ADDRESS (If rural, give location): 603 North Main St.

3. NAME OF DECEASED (Type or Print)
a. (First): James b. (Middle): O. c. (Last): Williams

4. DATE OF DEATH (Month) (Day) (Year): Mar. 4th-1952

5. SEX: Male 0
6. COLOR OR RACE: White
7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify): Married
8. DATE OF BIRTH: Apr. 25-1882
9. AGE (In years last birthday): 70 | IF UNDER 1 YEAR Months: | Days: 9 | IF UNDER 24 HRS. Hours: | Min.:

10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired): Farming
10b. KIND OF BUSINESS OR INDUSTRY: Farm
11. BIRTHPLACE (City and State or Foreign Country): Fulton County Ky
12. CITIZEN OF WHAT COUNTRY? U.S.A.

13a. FATHER'S NAME: Spencer G. Williams
13b. MOTHER'S MAIDEN NAME: Mattie Mallory
14. NAME OF HUSBAND OR WIFE: Flora Petty Williams

15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown): No. (If yes, give war or dates of service): X
16. SOCIAL SECURITY NO.: 429-16-8132
17. INFORMANT'S SIGNATURE OR NAME: Floyd Williams ADDRESS: Kennett 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, asthenia, etc. It means the disease, injury, or complication which caused death.

MEDICAL CERTIFICATION

I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Syphilis Tertiary — INTERVAL BETWEEN ONSET AND DEATH: ?

ANTECEDENT CAUSES

Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last.

DUE TO (b)

DUE TO (c)

II. OTHER SIGNIFICANT CONDITIONS

Conditions contributing to the death but not related to the disease or condition causing death.

19a. DATE OF OPERATION
19b. MAJOR FINDINGS OF OPERATION: 027X
20. AUTOPSY? YES ☐ NO ☑

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 ☐ NOT WHILE AT WORK ☐
21f. HOW DID INJURY OCCUR?

22. I hereby certify that I attended the deceased from 1 Dec, 1951, to Apr 4, 1952, that I last saw the deceased alive on 3 Apr, 1952, and that death occurred at 1:55 a m., from the causes and on the date stated above.

23a. SIGNATURE: James C. Cater M.D. (Degree or title)
23b. ADDRESS: Kennett Mo
23c. DATE SIGNED: 4 Apr 52

24a. BURIAL, CREMATION, REMOVAL (Specify): Burial
24b. DATE: 4-5-1952
24c. NAME OF CEMETERY OR CREMATORY: Oak Ridge Cemetery
24d. LOCATION (City, town, or county) (State): Kennett Mo.

DATE REC'D BY LOCAL REG.: 4-4-52
REGISTRAR'S SIGNATURE: Earl Humburg
25. FUNERAL DIRECTOR'S SIGNATURE: Lentz Service ADDRESS: Kennett Mo

(Licensed Embalmer's Statement on Reverse Side)

RECEIVED DUNKLIN COUNTY HEALTH
DEPARTMENT 4-5-52
COUNTY FILE NUMBER 452-91

APR 28 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 Edgar Rice Hard
Licensed Embalmer No. 4433
P. O. Address Kennett 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.