FILED DEC 8 1953

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

State File No. 39554

BIRTH NO. _____ REG. DIST. NO. 169 PRIMARY REG. DIST. NO. 5614 Registrar's No. 88

1. PLACE OF DEATH
a. COUNTY: Knox
b. CITY OR TOWN (If outside corporate limits, write RURAL and give township): near Plevna
c. LENGTH OF STAY (In this place): 9 mo
d. FULL NAME OF HOSPITAL OR INSTITUTION (If not in hospital or institution, give street address or location): Residence of daughter

2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission).
a. STATE: Mo
b. COUNTY: Knox
c. CITY OR TOWN (If outside corporate limits, write RURAL and give township): 2 Mi East of Edina, Missouri
d. STREET ADDRESS (If rural, give location): 0-S-20

3. NAME OF DECEASED (Type or Print)
a. (First): Marion
b. (Middle):
c. (Last): McSorley

4. DATE OF DEATH (Month) (Day) (Year): November 28, 1953

5. SEX: M
6. COLOR OR RACE: W
7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify): widowed
8. DATE OF BIRTH: Jan. 20, 1860
9. AGE (In years last birthday): 93 | If under 1 year: Months: | Days: | If under 24 hrs.: Hours: | Min.:

10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired): retired farmer
10b. KIND OF BUSINESS OR INDUSTRY:
11. BIRTHPLACE (State or foreign country): Knox County, Missouri
12. CITIZEN OF WHAT COUNTRY?: U.S.A.

13a. FATHER'S NAME: Alfred McSorley
13b. MOTHER'S MAIDEN NAME: Sally Allison
14. NAME OF HUSBAND OR WIFE: Georgia E. Vanskike

15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown): no
(If yes, give war or dates of service):
16. SOCIAL SECURITY NO.: none
17. INFORMANT'S SIGNATURE OR NAME: C. Burl McSorley
ADDRESS: Edina, Missouri

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) Myocarditis — INTERVAL BETWEEN ONSET AND DEATH: Nov 10-53 to Nov 28-53

ANTECEDENT CAUSES

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

DUE TO (b) Infirmities

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: 4222
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* Nov 10, 1953, *to* Nov 28, 1953, *that I last saw the deceased alive on* Nov 27, 1953 *and that death occurred at* 1:30 A *m., from the causes and on the date stated above.*

23a. SIGNATURE: E. O. Holmes (Degree or title) D.O.
23b. ADDRESS: Novelty Mo
23c. DATE SIGNED: Dec 3-53

24a. BURIAL, CREMATION, REMOVAL (Specify): burial
24b. DATE: November 29, 1953
24c. NAME OF CEMETERY OR CREMATORY: I. O. O. F. cemetary
24d. LOCATION (City, town, or county) (State): Newark, Missouri

DATE REC'D BY LOCAL REG.: Dec 5-53
REGISTRAR'S SIGNATURE: Nelle S. Hunolt
25. FUNERAL DIRECTOR'S SIGNATURE: A G Rimer
ADDRESS: Edina, Mo

(Licensed Embalmer's Statement on Reverse Side)

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

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 Mrs J. W. Hudson

Licensed Embalmer No. 2972

P. O. Address Edina 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.