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County C	/ / /		7. MARRIED, NEVE WIDOWED, DIVO MARKIED	R MARRIED, RCED (Specify)	MARCH 28,	1885 9. AGE	(In years of UNDER lythday) Months	Pays Hours 2
SYLVESTER GRINDLE LENORA NEWBERRY WILLIAM HANLEY 15. WAS DECEASED EVER IN U. S. ARMED FORCES? 16. SOCIAL SECURITY NONE 18. CAUSE OF DEATH Enter only one outsupper line for (a), (b), and (c) "This does not mean the mode of spring, such a heart felling, such a heart felling or compiler ton which consued death. 10. O'LINE 11. O'THER SIGNIFICANT CONDITION 12. O'LINE 13. DATE OF OPERA TION 13. DATE OF OPERA TION 14. A'L'X 14. A'L'X 15. THE 16. SOCIAL SECURITY WILLIAM HANLEY WILLIAM HANLEY WILLIAM HANLEY DURHAM, MO WILLIAM HANLEY DURHAM, MO WILLIAM HANLEY WILLIAM HANLEY WILLIAM HANLEY DURHAM, MO WILLIAM HANLEY DURHAM WILLIAM HANLEY DURHAM WILLIAM HANLEY DURHAM, MO WILLIAM HANLEY DURHAM, MO WILLIAM HANLEY DURHAM, MO WILLIAM HANLEY DURHAM, MO WILLIAM HANLEY DURHAM WILLIAM HANLEY DURHAM, MO WILLIAM HANLEY DURHAM WILLIAM HANLEY DURHAM	10a. USUAL OCCUPAT	ION (Give kind of work kine life, even if retired)	1	NICTOV	1			COUNTRY?
18. CAUSE OF DEATH Enter only one quise per line for (a), (b), and (c) This does not mean the mote of dying, such as bear follows, exthenia, etc. It means the discussion tion which caused death. This to the other contributing to the death but not rition which caused death. This Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other contributing to the death but not rition which caused death. The Machinery of the other caused death. The Machinery of the other caused death. The other contributing to the death but not rition which caused death. The Machinery of the other caused death. The Machinery of the other caused death. The Machinery of the death out not rition which caused death. The Machinery of the the death out not ri			LEN	ORA NEW	BERRY	WILLIA	M HANLEY	<u> </u>
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21d. TIME (Month) (Day) (Year) (Bourd) (Year) (Dourd) (Year) (Y	This does not mean the mode of dying, such as heart failure, asthenia, etc. It means the dis- case, injury, or complica- tion which caused death.	ANTECEDENT CA Morbid conditions rise to the above on the underlying cau II. OTHER SIGNII Conditions contributed related to the disca	AUSES a, if any, giving DUE ause (a) stating use last. DUE FICANT CONDITION: nating to the death but se or condition causing	TO (c) (IN) S not g death. UNI	terioscler us et arter	puturisto vais el keplus	clinosio	6-8 mes 10 years 6-8 mes
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22. I hereby certify that I attended the deceased from MANCA 29, 1954, Information on the date stated above. 23. SIGNATURE Degree or title 23b. ADDRESS Degree or title 23b. ADDRESS 24c. NAME OF CEMETERY OR CREMATORY DATE RECO BY LOCAL REGISTRAR'S SIGNATURE DATE RECO BY LOCAL REGISTRAR'S SIGNATURE, 13 1-0 25 FUNERAL DIRECTOR'S \$1 GAPTURE ADDRESS Chr. 13-54 Lewistown, Mo	HOMICIDE 11	me !	bome, farm, factory, stre	et, office bldg., etc.)	Edina	ر ر	Throit	Missou
alive on April 8, 1954, and that death occurred at 3120 m., from the causes and on the date stated above. 23 SIGNATURE Degree or titled 23b. ADDRESS LASA DATE SIGNATURE 24a. BURIAL. CREAK 24b. DATE 24b. DATE 24c. NAME OF CEMETERY OR CREMATORY PURIAL CREAK 24b. DATE 1/10/54 HESTER DATE REC'D BY LOCAL REGISTRAR'S SIGNATURE ADDRESS April 8. FUNERAL DIRECTOR'S SIGNATURE ADDRESS ADDRESS ADDRESS APRIL 8. FUNERAL DIRECTOR'S SIGNATURE ADDRESS	INJURY —	0	m. WHILEAT	HAACA 2	19 1054 AM	ril 8 10	7.4 that I la	st saw the dece
TION REMOVAL COMES 14/10/54 HESTER HESTER, MISSOURI DATE REC'D BY LOCAL REGISTRAR'S SIGNATURE, 15/0 25: FUNERAL DIRECTOR'S \$1 GHATURE ADDRESS Chr. 13-54 Pelle S. Hunolf Washer J. Common, M. Lewistown, Mo	alive on Up	Ly Fle	and that deat	h occurred at Degree or title	195 Like	suffort	n the date state	above. 23c. DATE SIGN Web 4/1.
Chr. 13-54 Nelle J. Hunory Charles of armor, in Lewistown, Mo	Z4a. BURIAL. CREATION REMOVAL CREATER	ب باد⊷کست	. 1	_	TOR CREMATORY	l	_'	
	DATE REC'D BY LOC	AL REGISTRAR'S		131,0	25 FUNERAL DI RE	CTOB'S \$1 GHT/TI	URE A	DDRESS

OTA STORE AND THE SECOND COMMON PROPERTY OF STREET

**************************************	-	Student	Embalmer	No.	***************************************
working under my personal supervision.	/	. ,			A 1
		. D.	ر رصب مرکز	2	.01 /

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me, or by:

Licensed Embalmer No. 4667 P. O. Address LEWISTOWN, MISSOUR

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.