

STANDARD CERTIFICATE OF DEATH

510
WRITE PLAINLY—USING UNFADING BLACK INK—MAKE A PERMANENT RECORD

BIRTH NO. _____ REG. DIST. NO. 164 PRIMARY REG. DIST. NO. 4252 Registrar's No. 74

1. PLACE OF DEATH a. COUNTY <u>Johnson</u>		2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission). a. STATE <u>Missouri</u> b. COUNTY <u>Johnson</u>	
b. CITY (If outside corporate limits, write RURAL and give town) <u>Centerview</u>		c. CITY (If outside corporate limits, write RURAL and give township) OR TOWN <u>Centerview</u>	
c. LENGTH OF STAY (in this place) <u>43</u>		d. STREET ADDRESS (If rural, give location) <u>Centerview. MO.</u>	
d. FULL NAME OF HOSPITAL OR INSTITUTION <u>Home, Centerview, Mo.</u>			

3. NAME OF DECEASED (Type or Print) a. (First) <u>Sarah</u> b. (Middle) <u>Alice</u> c. (Last) <u>Van Blarcum</u>			4. DATE OF DEATH (Month) (Day) (Year) <u>June. 25, 1954</u>		
5. SEX <u>female</u>		6. COLOR OR RACE <u>white</u>		7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) <u>WIDOW</u>	
8. DATE OF BIRTH <u>2, Aug. 1860</u>		9. AGE (In years last birthday) <u>93</u>		10. CITIZEN OF WHAT COUNTRY? <u>U.S.A.</u>	
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) <u>house wife</u>		10b. KIND OF BUSINESS OR INDUSTRY <u>home.</u>		11. BIRTHPLACE (State or foreign country) <u>Quincy. Ill</u>	

13a. FATHER'S NAME <u>William Sproat.</u>		13b. MOTHER'S MAIDEN NAME <u>Mary E. Sproat.</u>		14. NAME OF HUSBAND OR WIFE <u>W.I. Van Blarcum.</u>	
15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) <u>no</u>		16. SOCIAL SECURITY NO. <u>no</u>		17. INFORMANT'S SIGNATURE OR NAME ADDRESS <u>Rex Van Blarcum. Centerview. MO.</u>	

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.	I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) <u>Cerebral Arteriosclerosis</u>		INTERVAL BETWEEN ONSET AND DEATH <u>6 mo.</u>
	ANTECEDENT CAUSES 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		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) <u>334X</u>	
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?	

22. I hereby certify that I attended the deceased from 6-1-1954, to 6-25, 1954, that I last saw the deceased alive on 6-24, 1954 and that death occurred at 4:30 m., from the causes and on the date stated above.

23a. SIGNATURE <u>R. Lee Cook, M.D.</u>		23b. ADDRESS <u>Warrensburg</u>		23c. DATE SIGNED <u>6-25-54</u>	
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24a. BURIAL, CREMATION, REMOVAL (Specify) <u>burial</u>		24b. DATE <u>27, June, 1954</u>		24c. NAME OF CEMETERY OR CREMATORY <u>Plesant Grove</u>		24d. LOCATION (City, town, or county) (State) <u>Johnson Co. MO.</u>	
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DATE REC'D BY LOCAL REG <u>June 26, 1954</u>		REGISTRAR'S SIGNATURE <u>Savannah Cuthbert</u>		25. FUNERAL DIRECTOR'S SIGNATURE ADDRESS <u>Sweeney Phillips. Warrensburg. MO.</u>	
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RECEIVED
JUN 28 1954
RECEIVED

JOHNSON COUNTY HEALTH DEPT.

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.....

.....
working under my personal supervision.

Student Embalmer No.....

Signed.....
Student Embalmer

Signed J. Earl Priest

Licensed Embalmer No. 3878

P. O. Address Warrensburg

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.