

FILED NOV 22 1954

STANDARD CERTIFICATE OF DEATH

State File No.

BIRTH NO. 77679772-54 REG. DIST. NO. 274 PRIMARY REG. DIST. NO. 3052 Registrar's No. 402

1. PLACE OF DEATH a. COUNTY Pettis		2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission). a. STATE Missouri b. COUNTY Rolla	
b. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Sedalia		c. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Sedalia, Missouri	
c. LENGTH OF STAY (in this place) 36 hrs.		d. STREET ADDRESS (If rural, give location) Route 2, Otterville, Mo.	
d. FULL NAME OF HOSPITAL OR INSTITUTION Woodland Hospital			

3. NAME OF DECEASED (Type or Print) TWIN SON OF MR. & MRS. RAYMOND COLE			4. DATE OF DEATH (Month) (Day) (Year) Nov. 18, 1954		
a. (First)	b. (Middle)	c. (Last)	Month	Day	Year

5. SEX Male	6. COLOR OR RACE White	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) WIDOWED	8. DATE OF BIRTH Nov. 17, 1954	9. AGE (In years last birthday) 1	IF UNDER 1 YEAR Months 1	IF UNDER 12 HRS. Hours 12	Min. 3
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10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) *****		10b. KIND OF BUSINESS OR INDUSTRY *****		11. BIRTHPLACE (City and State or Foreign Country) Sedalia, Mo.		12. CITIZEN OF WHAT COUNTRY? U.S.A.	
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13a. FATHER'S NAME Raymond Cole		13b. MOTHER'S MAIDEN NAME Emmadian McCoy		14. NAME OF HUSBAND OR WIFE *****	
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15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give part or dates of service) No	16. SOCIAL SECURITY NO. *****	17. INFORMANT'S SIGNATURE OR NAME ADDRESS Raymond Cole, Rt. 2, Otterville, Mo.			
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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 1. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Premature labor & Delivery INTERVAL BETWEEN ONSET AND DEATH 2 days			
ANTECEDENT CAUSES Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last. DUE TO (b) Premature separation of placenta		DUE TO (c) Twin birth, other Twin was still born			
II. OTHER SIGNIFICANT CONDITIONS Conditions contributing to the death but not related to the disease or condition causing death. Still born					

19a. DATE OF OPERATION	19b. MAJOR FINDINGS OF OPERATION 7615			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 11/17, 1954, to 11/19, 1954, that I last saw the deceased alive on 11/18, 1954, and that death occurred at 6:30 P. m., from the causes and on the date stated above.

23a. SIGNATURE (Degree or title) H. L. Holden MD		23b. ADDRESS 1116 W. 3rd Sedalia, Mo		23c. DATE SIGNED 11/19/54	
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24a. BURIAL, CREMATION, REMOVAL (Specify) Burial	24b. DATE Nov. 18, 1954	24c. NAME OF CEMETERY OR CREMATORY Camp Branch	24d. LOCATION (City, town, or county) (State) Rural Pettis County, Mo.		
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DATE REC'D BY LOCAL REG. 11/19/54	REGISTRAR'S SIGNATURE Levina Abbott	FEDERAL DIRECTOR'S SIGNATURE William W. ...	ADDRESS Sedalia, Mo.		
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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 P. E. Baker

Licensed Embalmer No. 2419

P. O. Address Seclavia 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.