THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

58-030000
STATE FILE NUMBER

FILED SEP 15 1958 Registration District No. 300 Primary Registration District No. 6029 Registrar's No. 12

1. PLACE OF DEATH
a. COUNTY Reynolds
b. CITY (If outside corporate limits, give TOWNSHIP only) OR TOWN Logan Township — Inside Limits Yes ☐ No ☒
c. FULL NAME OF HOSPITAL OR INSTITUTION (If NOT in hospital, give location) 3 Mi South of Ellington in Field — Length of stay in 1b

2. USUAL RESIDENCE (Where deceased lived. If institution: Residence before admission)
a. STATE Ill b. COUNTY St. Clair
c. CITY OR TOWN Dupo 8120 8 — Inside Limits Yes ☒ No ☐
d. STREET ADDRESS (If outside, give location) 115 S. Main — Reside on Farm Yes ☐ No ☒

3. NAME OF DECEASED (Type or print) First Middle Last: William Cloyd Boy Barnes
4. DATE OF DEATH Month Day Year: Aug 31, 1958

5. SEX: Male 0
6. COLOR OR RACE: White
7. MARRIED ☒ NEVER MARRIED ☐ WIDOWED ☐ 1 DIVORCED ☐
8. DATE OF BIRTH: Aug 28, 1931
9. AGE (In years last birthday): 27 — IF UNDER 1 YEAR Months 0 Days 3 — IF UNDER 24 HRS. Hours Min.

10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired): Tractor Driver
10b. KIND OF BUSINESS OR INDUSTRY: Lewin Metals
11. BIRTHPLACE (City and state or country): Reynolds County, Mo. 0
12. CITIZEN OF WHAT COUNTRY? USA

13. FATHER'S NAME: Dora Barns
14. MOTHER'S MAIDEN NAME: Ruth Whitchurch

15. WAS DECEASED EVER IN U. S. ARMED FORCES? (Yes, no, or unknown) yes (If yes, give war or dates of service) Korean War 18 Jan 53/18 Jan 55
16. SOCIAL SECURITY NO. 499-32-1830
17. INFORMANT Virginia D. Barnes, Dupo Ill. Address 115 S. Main

MEDICAL CERTIFICATION

18. CAUSE OF DEATH [Enter only one cause per line for (a), (b), and (c).]
PART I. DEATH WAS CAUSED BY:
IMMEDIATE CAUSE (a) Coronary Occlusion — INTERVAL BETWEEN ONSET AND DEATH 1 min
Conditions, if any, which gave rise to above cause (a), stating the underlying cause last.
DUE TO (b) Severe exercise (Prob. Cong. Heart — 1 hr.
DUE TO (c) malformation. (No Ruptured vessels)
PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE CONDITION GIVEN IN PART I(a) 4201
19. WAS AUTOPSY PERFORMED? YES ☐ NO ☒ 2

20a. ACCIDENT ☐ SUICIDE ☐ HOMICIDE ☐
20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in Part I or Part II of item 18.)
20c. TIME OF INJURY Hour a. m. p. m. Month, Day, Year
20d. INJURY OCCURRED WHILE AT WORK ☐ NOT WHILE AT WORK ☐
20e. PLACE OF INJURY (e. g., in or about home, farm, factory, street, office bldg., etc.)
20f. CITY, TOWN, OR LOCATION COUNTY STATE

21. I attended the deceased from Not seen to _____ and last saw her/him alive on Not seen.
Death occurred at 12:00 PM m on the date stated above; and to the best of my knowledge, from the causes stated.

22a. SIGNATURE (Degree or title): Kenneth J Carter, D.O. 2
22b. ADDRESS: Ellington, Mo.
22c. DATE SIGNED: 9/1/58

23a. BURIAL, CREMATION, REMOVAL (Specify): Removal
23b. DATE: Sept 2'58
23c. NAME OF CEMETERY OR CREMATORY: Jefferson Barracks
23d. LOCATION (City, town, or county) (State): St. Louis, Mo.

24. FUNERAL DIRECTOR: Chas S. Pruitt — ADDRESS: Ellington, Mo.
25. DATE RECD. BY LOCAL REG.: Sept. 6-58
26. REGISTRAR'S SIGNATURE: Essie Evans.

(Licensed Embalmer's Statement on Reverse Side)

Health, Welfare, Public Service

300 -56 3

diseases in Part I must be casually related. Coroner cannot certify to a death due to natural causes.

USE ONLY BLACK INK OR RIBBON TYPEWRITE IF POSSIBLE

Reynolds C
7/12

STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was e

by me, or by ....., Student Embalmer No.....

working under my personal supervision..

Student.....
Signature of Student Embalmer

Signed Chas S. Pentt

Licensed Embalmer No.....
45

P. O. Address Ellington,

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING.
to comply with the above constitutes grounds for revocation of license).

If embalmed by a STUDENT, he also shall sign in his OWN handwriting.

If this body is not embalmed, fact should be so stated above.