

**MISSOURI STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH**

Do not use this space.

30644

1. PLACE OF DEATH

County Henry Registration District No. 349
 Township Springfield Primary Registration District No. 5375
 City Clinton Mo. (No. _____) St. _____ Ward _____

File No. _____
 Registered No. 15
 St. _____ Ward _____

2. FULL NAME

(a) Residence. No. _____ St. _____ Ward _____
 (Usual place of abode) (If nonresident, give city or town and State)

Length of residence in city or town where death occurred yrs. mos. ds. How long in U. S., if of foreign birth? yrs. mos. ds.

PERSONAL AND STATISTICAL PARTICULARS

3. SEX ♂ 4. COLOR OR RACE W 5. SINGLE, MARRIED, WIDOWED OR DIVORCED (write the word) Married

5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF _____

6. DATE OF BIRTH (MONTH, DAY AND YEAR)

7. AGE YEARS MONTHS DAYS If LESS than 1 day, _____ hrs. or _____ min.

8. OCCUPATION OF DECEASED

(a) Trade, profession, or particular kind of work no
 (b) General nature of industry, business, or establishment in which employed (or employer)
 (c) Name of employer

9. BIRTHPLACE (CITY OR TOWN)

(STATE OR COUNTRY) Henry Mo.
 10. NAME OF FATHER Thomas E. Gellespie
 11. BIRTHPLACE OF FATHER (CITY OR TOWN) Joplin Mo.
 (STATE OR COUNTRY) Kansas
 12. MAIDEN NAME OF MOTHER Jessie M. Hale
 13. BIRTHPLACE OF MOTHER (CITY OR TOWN) Clinton
 (STATE OR COUNTRY) Mo.

14.

INFORMANT J. Fisher
 (Address) Clinton Mo. R. 8

15.

FILED Sep 20 19 29 Mrs. A. A. Gray REGISTRAR

MEDICAL CERTIFICATE OF DEATH

16. DATE OF DEATH (MONTH, DAY AND YEAR) Sept 19 1929

17. I HEREBY CERTIFY, That I attended deceased from _____, 19____ to _____, 19____ that I last saw him alive on Sept 18 1929, and that death occurred, on the date stated above, at 4:30 a. m.

THE CAUSE OF DEATH* WAS AS FOLLOWS:

Premature Birth
15 6 1/2 mo
159 (duration) yrs. mos. ds.

CONTRIBUTORY (SECONDARY)

16 1/2 (duration) yrs. mos. ds.
 18. WHERE WAS DISEASE CONTRACTED

IF NOT AT PLACE OF DEATH

DID AN OPERATION PRECEDE DEATH? _____ DATE OF _____

WAS THERE AN AUTOPSY? _____

WHAT TEST CONFIRMED DIAGNOSIS? _____

(Signed) Chas. Stanley, M. D.
 , 19____ (Address) Clinton Mo.

*State the DISEASE CAUSING DEATH, or in deaths from VIOLENT CAUSES, state (1) MEANS AND NATURE OF INJURY, and (2) Whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.

19. PLACE OF BURIAL, CREMATION, OR REMOVAL

Mrs. Olive DATE OF BURIAL 9-19 1929

20. UNDERTAKER

J. Fisher ADDRESS Clinton Mo.

WRITE PLAINLY, WITH OUPRADING INK. Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state USE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important.

WRITE PLAINLY, WITH OUPRADING INK

1948

The following information was obtained from the records of the
 Department of the Interior, Bureau of Land Management, on the
 subject of the above-captioned tract of land. The tract is
 situated in the County of [County Name], State of [State Name].
 The tract is bounded on the north by [Description], on the
 south by [Description], on the east by [Description], and on
 the west by [Description]. The tract is approximately [Area]
 acres in area. The tract is owned by [Owner Name], who
 is the holder of the title to the tract. The tract is
 subject to a mortgage in favor of [Mortgagee Name]. The
 mortgage is for the sum of [Amount] dollars. The mortgage
 was executed on [Date] and is recorded in the public
 records of the County of [County Name], State of [State Name].
 The mortgage is in full force and effect. The tract is
 not subject to any other liens or encumbrances. The tract
 is being offered for sale by the Department of the Interior,
 Bureau of Land Management, and is being sold at public
 auction on [Date] at [Location]. The minimum bid for the
 tract is [Amount] dollars. The Department of the Interior,
 Bureau of Land Management, is the owner of the tract and
 is offering the tract for sale in order to raise money for
 the Government. The Department of the Interior, Bureau of
 Land Management, is the owner of the tract and is offering
 the tract for sale in order to raise money for the
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