

OCT 28 1930

1 PLACE OF DEATH

County BatesTownship How Mt PleasantVillage ButlerCity ButlerRegistration District No. 50File No. 29082Primary Registration District No. 3004Registered No. 39(NO. Community Hospital St. Ward)²FULL NAME George Lelay Moles

[If death occurred in a hospital or institution, give its NAME instead of street and number.]

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL CERTIFICATE OF DEATH

3 SEX

Male

4 COLOR OR RACE

White

5 SINGLE MARRIED WIDOWED OR DIVORCED (Write the word)

Single

16 DATE OF DEATH

Sept71930

6 DATE OF BIRTH

Oct211907

17 I HEREBY CERTIFY, that I attended deceased from

Sept. 7, 1930, to Sept 7, 1930,that I last saw him alive on Sept 7, 1930,and that death occurred, on the date stated above, at 8:30 P.

7 AGE

22 yrs. 10 mos. 18 ds.

If LESS than 1 day, hrs. or min.?

The CAUSE OF DEATH* was as follows:

8 OCCUPATION

(a) Trade, profession, or particular kind of work

Farmer

(b) General nature of industry business, or establishment in which employed (or employer)

Accidental second
181 Degree Burns
Exploding gas tank
of Highway 71.

(Duration) yrs. mos. ds.

9 BIRTHPLACE

(City or town, State or foreign country)

near Freeman
Less Mo.

CONTRIBUTORY (Secondary)

Gas Explosion

(Duration) yrs. mos. ds.

10 NAME OF FATHER

A. N. Moles

11 BIRTHPLACE OF FATHER

Johnson les. Mo

(City or town, State or foreign country)

12 MAIDEN NAME OF MOTHER

Kay E. Badgett

13 BIRTHPLACE OF MOTHER

Rome les. W. Virginia

(City or town, State or foreign country)

(Signed) Adrian M. D.Sept 9, 1930 (Address) Adrian Mo.

*State the Disease Causing Death, or, in death from Violent Causes, state (1) Means of Injury; and (2) whether Accidental, Suicidal or Homicidal.

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant)

J. B. Sampson

(Address)

Adrian Mo.

18 LENGTH OF RESIDENCE (For Hospitals, Institutions, Transients, or Recent Residents)

At place of death yrs. mos. da. In the State yrs. mos. da.

Where was disease contracted if not at place of death?

Former or usual residence

15

Filed

Sept 9, 1930Nina L. Culver

Registrar

19 PLACE OF BURIAL OR REMOVAL

Resent Hill cem

DATE OF BURIAL

Sept 9, 1930

20 UNDERTAKER

Breath & Siffert

ADDRESS

Adrian

N. B.—Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important.

Revised United States Standard Certificate of Death

[Approved by U. S. Census and American Public Health
Association]

Statement of occupation.—Precise statement of occupation is very important, so that the relative healthfulness of various pursuits can be known. The question applies to each and every person, irrespective of age. For many occupations a single word or term on the first line will be sufficient, e. g., *Farmer or Planter, Physician, Composer, Architect, Locomotive engineer, Civil engineer, Stationary fireman*, etc. But in many cases, especially in industrial employments, it is necessary to know (a) the kind of work and also (b) the nature of the business or industry, and therefore an additional line is provided for the latter statement; it should be used only when needed. As examples: (a) *Spinner*, (b) *Cotton mill*; (a) *Salesman*, (b) *Grocery*; (a) *Foreman*, (b) *Automobile factory*. The material worked on may form part of the second statement. Never return "Laborer," "Foreman," "Manager," "Dealer," etc., without more precise specification, as *Day laborer, Farm laborer, Laborer—Coal mine*, etc. Women at home, who are engaged in the duties of the household only (not paid *Housekeepers* who receive a definite salary), may be entered as *Housewife, Housework*, or *At home*, and children, not gainfully employed, as *At school* or *At home*. Care should be taken to report specifically the occupations of persons engaged in domestic service for wages, as *Servant, Cook, Housemaid*, etc. If the occupation has been changed or given up on account of the DISEASE CAUSING DEATH, state occupation at beginning of illness. If retired from business, that fact may be indicated thus: *Farmer (retired, 6 yrs.)* For persons who have no occupation whatever, write *None*.

Statement of cause of death.—Name, first, the DISEASE CAUSING DEATH (the primary affection with respect to time and causation), using always the same accepted term for the same disease. Examples: *Cerebrospinal fever* (the only definite synonym is "Epidemic cerebrospinal meningitis"); *Diphtheria* (avoid use of "Croup"); *Typhoid fever* (never report "Typhoid pneumonia"); *Lobar pneumonia*; *Bronchopneumonia* ("Pneumonia," unqualified, is indefinite); *Tuberculosis of lungs, meninges, peritoneum*, etc., *Carcinoma, Sarcoma*, etc., of (name origin; "Cancer" is less definite; avoid

use of "Tumor" for malignant neoplasms); *Measles; Whooping cough; Chronic valvular heart disease; Chronic interstitial nephritis*, etc. The contributory (secondary or intercurrent) affection need not be stated unless important. Example: *Measles* (disease causing death), *29 ds.*; *Bronchopneumonia* (secondary), *10 ds.* Never report mere symptoms or terminal conditions, such as "Asthenia," "Anaemia" (merely symptomatic), "Atrophy," "Collapse," "Coma," "Convulsions," "Debility" ("Congenital," "Senile," etc.), "Dropsy," "Exhaustion," "Heart failure," "Haemorrhage," "Inanition," "Marasmus," "Old age," "Shock," "Uraemia," "Weakness," etc., when a definite disease can be ascertained as the cause. Always qualify all diseases resulting from childbirth or miscarriage, as "*PUERPERAL septicaemia*," "*PUERPERAL peritonitis*," etc. State cause for which surgical operation was undertaken. For VIOLENT DEATHS state MEANS OF INJURY and qualify as ACCIDENTAL, SUICIDAL, OR HOMICIDAL, or as *probably* such, if impossible to determine definitely. Examples: *Accidental drowning; Struck by railway train—accident; Revolver wound of head—homicide; Poisoned by carbolic acid—probably suicide*. The nature of the injury, as fracture of skull, and consequences (e. g., *sepsis, tetanus*) may be stated under the head of "Contributory." (Recommendations on statement of cause of death approved by Committee on Nomenclature of the American Medical Association.)

Adrian Youth Dies of Burns Caused
By Exploding Motorcycle

Sept 7 1930
5-29082

Clay Moles, aged about 23 years, son of Mr. and Mrs. D. Moles of Adrian, died at the Community hospital in this city Sunday night about 9:30 o'clock from burns received when the motorcycle he was riding exploded and enveloped his clothing in flames. The accident occurred on the highway about one mile south of Adrian at 11 o'clock Sunday morning.

It is understood that young Moles was unfamiliar with the operation of the machine, which he had borrowed from another Adrian youth, and was operating the controls himself for the first time. He left the filling station on the highway at the southeast corner of Adrian for a short ride down the highway. Some distance south of Adrian, it is understood, he passed a tourist car also going south. The driver of the car noticed that young Moles' clothing was afire and attempted to overtake Moles to warn him and assist in extinguishing the small flames. Apparently the youth was unmindful of his burning clothing which was caused by leaking gasoline from the machine. At the Rush corner Moles turned the motorcycle and started back toward Adrian. He had gone only about one hundred yards when he lost control of the motorcycle and it crashed. The gasoline tank exploded as the crash occurred and Moles was enveloped by the burning gasoline. The tourist, with the aid of a robe from his car, extinguished the flames as quickly as possible but not until the youth had been horribly burned. He was rushed to the Community hospital here and physicians called to attend him, but they were able to give him only temporary relief from the burns.

The remains were removed to Adrian where burial will be made.

MYSTERIES

Solved Riddles That Still Puzzle
Authorities Here and Abroad

The Origin of the Stars and Stripes

AT THE outbreak of the American Revolution most of the states adopted flags of their own. The Connecticut troops who participated in the battle of Bunker Hill had a banner bearing the coat of arms of their state with the motto, "Qui Transtulit Sustinet." The Massachusetts troops fought under the words, "An Appeal to Heaven," while early New York records allude to other different standards. The men at Lexington had neither uniforms nor flags, but at Bunker Hill, two months later, the Colonial troops presented much more the appearance of an organized army.

Later came the "Beware" and "Don't Tread On Me." tags and the snake flag was used by the southern states from 1776 to June, 1777. A chain of thirteen links, a ring, a tiger and a field of wheat were also used as fighting devices.

In October 1775, Washington wrote to two officers who were about to take command of cruisers: "Please fly on some flag by which our vessels may know each other." The first "stripe flag" is said to have been flung to the breeze at Washington's headquarters at Cambridge, Mass., in January, 1776. This flag had thirteen stripes, alternating red and white. But was this the first American flag?

John Paul Jones has left it on record that the "flag of America" was hoisted by his own hand on his vessel, the Alfred, this being the first time that this emblem was ever displayed on a man of war, but no exact date for the display of the Jones flag is given. It may have been before the Washington flag at Cambridge or after but it was undoubtedly before the adoption of a flag by congress on June 14, 1777. In fact, although June 14 is celebrated as "Flag Day," there seems to be considerable reason to doubt that that is the correct day for the anniversary.

According to the available