

FEB 27 1934

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

Do not use this space.

1720

1. PLACE OF DEATH

County Lafayette  
Township Freedom  
City                      (No.                     )

Registration District No. 457  
Primary Registration District No. 15671-B

File No.                       
Registered No. 1051 Ward                     

2. FULL NAME

Doc C. Makrenbrock

(a) Residence, No.                      St.                      Ward                       
(Usual place of abode)

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. (If nonresident, give city or town and State)

PERSONAL AND STATISTICAL PARTICULARS

3. SEX Male 4. COLOR OR RACE White 5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word) Widowed

5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (or) WIFE OF Mary Makrenbrock

6. DATE OF BIRTH (MONTH, DAY, AND YEAR) Jan 25 - 1880

7. AGE YEARS 53 MONTHS 11 DAYS 8 If LESS than 1 day, hrs. or min.

8. Trade, profession, or particular kind of work done, as spianer, sawyer, bookkeeper, etc. Farmer  
9. Industry or business in which work was done, as silk mill, saw mill, bank, etc.  
10. Date deceased last worked at this occupation (month and year)  
11. Total time (years) spent in this occupation

12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Lafayette Co, Missouri

13. NAME Ernest Makrenbrock

14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Lafayette Co, Missouri

15. MAIDEN NAME Unknown

16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY)                     

17. INFORMANT (ADDRESS) Mrsley Makrenbrock Concordia Mo

18. BURIAL, CREMATION, OR REMOVAL PLACE W. E. Cemetery DATE Jan 5 - 1934

19. UNDERTAKER (ADDRESS) N. F. Deussing Concordia, Mo

20. FILED Jan 4 1934 Concordia Shryman Registrar

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) Jan 18 - 1934

22. I HEREBY CERTIFY That I attended deceased from Oct 20 1933 to Jan 5 1934

I last saw him alive on Dec 21 1933 Death is said to have occurred on the date stated above, at 105 P. M.

The principal cause of death and related causes of importance were as follows:

Carlinoma (Stomach)  
1933  
1934  
Other contributory causes of importance:  
Peptic Ulcer 10 yrs  
Standing 4 1/2

Name of operation                      Date of                     

What test confirmed diagnosis?                      Was there an autopsy?                     

23. If death was due to external causes (violence), fill in also the following:  
Accident, suicide, or homicide?                      Date of injury                     , 19                      
Where did injury occur?                      (Specify city or town, county, and State)  
Specify whether injury occurred in industry, in home, or in public place.

Manner of injury                       
Nature of injury                     

24. Was disease or injury in any way related to occupation of deceased? NO  
If so, specify                     

(Signed) E. H. Johnston, M. D.  
(Address) Concordia

