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

OCT 8 1934

Do not use this space.

30086

1. PLACE OF DEATH

County: Marion — Registration District No.: 548. — File No.:

Township: Liberty — Primary Registration District No.: 5740 — Registered No.: 60.

City: (No. U.S. Highway 61 & 24 St. Ward)

2. FULL NAME Charles Harold Hulten

(a) Residence, No. 2301 Chestnut St., 6 Ward. Hannibal Mo.
(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: Male
4. COLOR OR RACE: White
5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word): Married

5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF: Zelma Eaton Hulten

6. DATE OF BIRTH (MONTH, DAY, AND YEAR): April 19-1902

7. AGE: Years 32 — Months 3 — Days 15 — If LESS than 1 day, ...hrs. or ....min.

OCCUPATION

8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.: Salesman
9. Industry or business in which work was done, as silk mill, saw mill, bank, etc.: Iowa Biscuit Co.
10. Date deceased last worked at this occupation (month and year): Aug. 4/34
11. Total time (years) spent in this occupation: 13 yrs.

12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY): Hannibal Mo.

FATHER

13. NAME: Edward Hulten
14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY): Peoria Ill.

MOTHER

15. MAIDEN NAME: Lucy Hoffmeister
16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY): Peoria Ill.

17. INFORMANT (ADDRESS): Lucy Sowers Hannibal Mo.

18. BURIAL, CREMATION, OR REMOVAL — PLACE: Mt. Olivet Cemetery Hannibal Mo. Aug. 6, 1934

19. UNDERTAKER (ADDRESS): Roy P. Wright Hannibal Mo.

20. FILED: Aug 8, 1934 — Estelle Lee, Registrar.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR): Aug. 4 — 1934

22. I HEREBY CERTIFY, That I attended deceased from ....., 19....., to ....., 19.....

I last saw h..... alive on ....., 19..... Death is said to have occurred on the date stated above, at 9:15 P.m.

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

	Date of onset
August pending	
7:10 PM	

Other contributory causes of importance:

Name of operation: none — Date of: none

What test confirmed diagnosis? none — Was there an autopsy? no

23. If death was due to external causes (violence), fill in also the following:

Accident, suicide, or homicide? accident — Date of injury: Aug. 4, 1934

Where did injury occur? Marion County, Mo. (Specify city or town, county, and State)

Specify whether injury occurred in industry, in home, or in public place. Public Highway U.S. # 61

Manner of injury: Automobile wreck

Nature of injury: fracture of skull & [illegible]

24. Was disease or injury in any way related to occupation of deceased?

If so, specify: traveling salesman on way home in car

(Signed) Cecil E. Hubbard, M.D.

(Address) Hannibal, Mo.

Coroner, Marion Co., Mo.

N. B.—Every item of information should be carefully applied. 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.

WHITE PEARL BRAND LEGAL BLANKS — THIS IS A PERMANENT RECORD

CECIL E. SCHWARTZ
CORONER
MARION COUNTY, MISSOURI
1000 BROADWAY
HANNIBAL, MO.

OCT 8 1934

August 9th, 1934.

I hereby certify that I investigated the death of Charles H. Hulten who was killed on August 4th, 1934.

I held an inquest on August 9th and the jury returned a verdict to me that "Charles H. Hulten came to his death by accident on highway No.61 and 24 from a collision of cars driven by S. V. Delaney and Charles H. Hulten".

I examined the body of Charles H. Hulten and found he received a fractured skull and broken neck in the accident.

Signed,

Cecil E. Schwartz.

Cecil E. Schwartz, Coroner.