

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.

JUN 23 1936

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

Do not use this space.

20019

1. PLACE OF DEATH MAYION
 County HANNIBAL Registration District No. 247
 Township Mayion Primary Registration District No. 3029
 City HANNIBAL (No. Turning Hospital) St. _____ Ward _____
 Registered No. 160

2. FULL NAME KATE GENTSY
 (a) Residence, No. LEYERING HOOSP. St. 6th Ward. R.F.D., PEESY, 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. 1/2 ds. How long in U. S., if of foreign birth? yrs. mos. ds.

PERSONAL AND STATISTICAL PARTICULARS

| | | | | |
|---|--|---|---|--|
| 3. SEX <u>FEMALE</u> | 4. COLOR OR RACE <u>WHITE</u> | 5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word) <u>MARRIED</u> | | |
| 5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF <u>JOHN P. GENTSY</u> | | | | |
| 6. DATE OF BIRTH (MONTH, DAY, AND YEAR) <u>FEB. 2ND 1869</u> | | | | |
| 7. AGE | YEARS <u>67</u> | MONTHS <u>3</u> | DAYS <u>22</u> | If LESS than 1 day, _____ hrs. or _____ min. |
| OCCUPATION | 8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. <u>AT HOME</u> | | | |
| | 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) <u>MONROE Co. Mo.</u> | | | | |
| FATHER | 13. NAME <u>ALBERT VANDRYENDES</u> | | | |
| | 14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) <u>N. K.</u> | | | |
| MOTHER | 15. MAIDEN NAME <u>SARAH CARTER</u> | | | |
| | 16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) <u>Mo.</u> | | | |
| 17. INFORMANT <u>ERNEST GENTSY</u> (ADDRESS) <u>PEESY, Mo.</u> | | | | |
| 18. BURIAL, CREMATION, OR REMOVAL PLACE <u>PRESANTHILL - NEAR PEESY, MO.</u> DATE <u>MAY 25, 1936</u> | | | | |
| 19. UNDERTAKER <u>ROY P. Schwanitz</u> (ADDRESS) <u>Hannibal, Mo.</u> | | | | |
| 20. FILED <u>May 25, 1936</u> <u>H. C. Fisher</u> Registrar. | | | | |

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) MAY 24, 1936

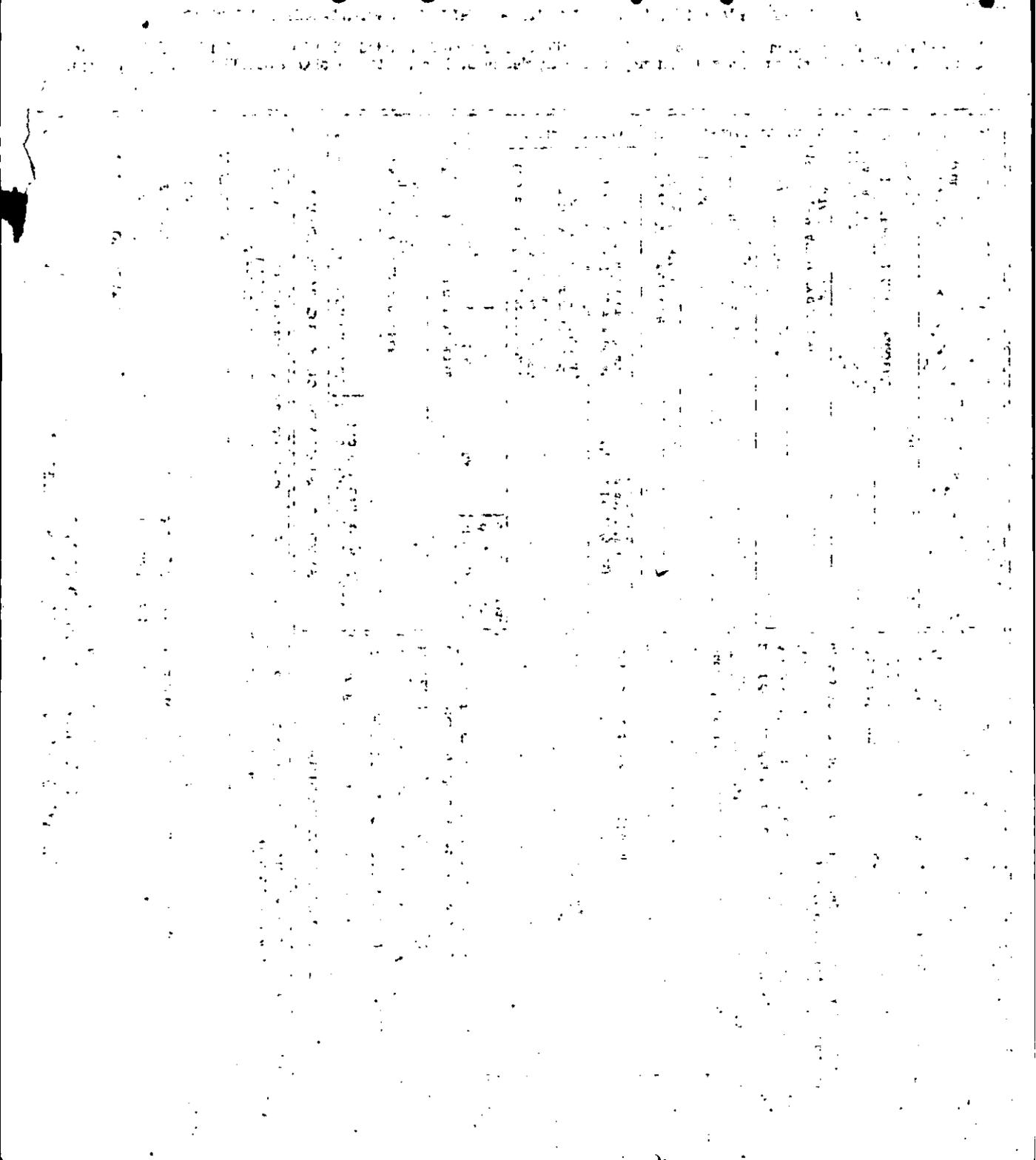
22. I HEREBY CERTIFY, That I attended deceased from May 23, 1936 May 24, 1936
 I last saw her alive on May 23, 1936 Death is said to have occurred on the date stated above, at 1:55 p.m.
 The principal cause of death and related causes of importance were as follows:
Fracture of skull
Shock
 Other contributory causes of importance: 206

Name of operation None Date of _____
 What test confirmed diagnosis? Yes Was there an autopsy? Yes

23. If death was due to external causes (violence), fill in also the following:
 Accident, suicide, or homicide? No Date of injury May 23, 1936
 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 R. D. Taylor
 Nature of injury Fracture skull

24. Was disease or injury in any way related to occupation of deceased?
 If so, specify _____
 (Signed) J. O. Schellman M. D.
 (Address) Hannibal, Mo.



CECIL E. SCHWARTZ
CORONER
MARION COUNTY, MISSOURI
1000 BROADWAY

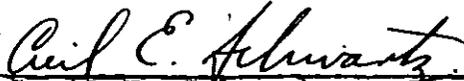
HANNIBAL, MO. May 24, 1936.

State of Missouri)
County of Marion)

"We, the jury, having been duly sworn and affirmed by Cecil E. Schwartz, Coroner of Marion County, Missouri, diligently to inquire and due presentment make, in what manner and by whom KATE GENTRY whose dead body was found at Levering Hospital, Hannibal, Mason Township, Marion County, Missouri on the 24th day of May A. D. 1936, came to her death, after having heard the evidence, and upon full inquiry concerning the facts, and a careful examination of said body, do find that the deceased came to her death in motor bus operated by St. Louis & Hannibal Railway Co. in collision with freight train operated by same company, caused by inefficient driver of motor bus due to inexperience, and of negligence of company in providing proper protection to driver from interference from passengers during emergency."

.....
Kate Gentry was injured in Ralls Co., Missouri on May 23, 1936 and died in Hannibal, Mo. Death was accidental.

Signed,


Cecil E. Schwartz,
Coroner, Marion Co., Mo.