

FILED FEB 11 1948  
Registration District No. **797**

Primary Registration District No. **1002**

WRITE PLAINLY—USE UNFADING BLACK INK—MAKE A PERMANENT RECORD

**1. PLACE OF DEATH:**  
(a) County **Jackson**  
(b) City or town **Kansas City**  
(If outside city or town limits, write "RURAL" and name of township)  
(c) Name of hospital or institution:  
**On Santa Fe diesel cab, Train # 7, Union Station**  
(If not in hospital or institution, write street number or location)  
(d) Length of stay: In hospital or institution \_\_\_\_\_  
(Specify whether) \_\_\_\_\_  
In this community **Death occurred upon arrival in**  
years, months or days **Kansas City.**

**3. (a) PRINT FULL NAME** **ROY EARL DAVIS**  
3. (b) If veteran, name war **World War No. 1**  
3. (c) Social Security No. **711-14-6999**

4. Sex **Male** 5. Color or race **White**  
6. (a) Single, widowed, married, divorced **Married**  
6. (b) Name of husband or wife **Mary Brodie Davis**  
6. (c) Age of husband or wife if alive **45** years  
7. Birth date of deceased **February 3 1900**  
(Month) (Day) (Year)

8. AGE: Years Months Days If less than one day  
**47 11 28** hr. min.

9. Birthplace **Emporia Kansas**  
(City, town, or county) (State or foreign country)

10. Usual occupation **Fireman**

11. Industry or business **Santa Fe Railroad**

MOTHER FATHER  
12. Name **Walter A. Davis**  
13. Birthplace **Unknown**  
(City, town, or county) (State or foreign country)  
14. Maiden name **Tinniey Searcy**  
15. Birthplace **Kentucky**  
(City, town, or county) (State or foreign country)

16. (a) Informant **Mrs. Roy E. Davis**  
(b) Address **Route # 3, Emporia, Kansas**

17. (a) **Removal** (b) Date thereof **2-1-48**  
(Burial, cremation, or removal) (Month) (Day) (Year)

(c) Place: burial or cremation **Emporia, Kansas**

18. (a) Signature of funeral director **Freeman Mortuary**  
(b) Address **Kansas City, Mo.**

19. (a) **2-1-48** (b) **Sheraldine Holmes**  
(Date received local registrar) (Registrar's signature)

**2. USUAL RESIDENCE OF DECEASED:**  
(a) State **Kansas** (b) County **Lyon**  
(c) City or town **Route # 3, Emporia, Kansas**  
(If outside city or town limits, write "RURAL")  
(d) Street No. \_\_\_\_\_ (If rural, give location)  
(e) Citizen of foreign country? **No.** (Yes or No)  
If yes, name country \_\_\_\_\_

**MEDICAL CERTIFICATION**

20. DATE OF DEATH: Month **February** day **1st**  
year **1948** hour **Eight** minute **55** A.M.

21. I hereby certify that I attended the deceased from **born**, 19\_\_\_\_, to \_\_\_\_\_, 19\_\_\_\_;  
that I last saw him alive on \_\_\_\_\_, 19\_\_\_\_,  
and that death occurred on the date and hour stated above.

Immediate cause of death **Coronary thrombosis**  
Due to **arteriosclerosis**

Due to \_\_\_\_\_  
Other conditions **94A**  
(Include pregnancy within 3 months of death)

Major findings:  
Of operations \_\_\_\_\_  
Of autopsy **as above**

PHYSICIAN  
Underline the cause to which death should be charged statistically.

22. If death was due to external causes, fill in the following:  
(a) Accident, suicide, or homicide (specify) \_\_\_\_\_  
(b) Date of occurrence \_\_\_\_\_  
(c) Where did injury occur? \_\_\_\_\_ (City or town) (County) (State)  
(d) Did injury occur in or about home, on farm, in industrial place, in public place?  
While at work? \_\_\_\_\_ (Specify type of place)  
(e) Means of injury **3**

23. Signature **[Signature]** (M. D. or other)  
Address **1424 1st St** Date signed **2-1-48**

FEB 13 1948

APR 21 1948

FEB 18 1948

JUN 5 1956

JUN 1 6 1949

FEB 1 1 1948

FEB 23 1950

STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me, or by.....

....., Registered Apprentice No.....  
working under my personal supervision.

Signed Willie H. Bennett

Licensed Embalmer No. 44 38

P. O. Address K. C. Mo.

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license.)

If this body is not embalmed, fact should be so stated above.