

THE DIVISION OF HEALTH OF MISSOURI  
STANDARD CERTIFICATE OF DEATH.

30092

State File No. ....

BIRTH NO. 1500CT 8 1951 REG. DIST. NO. 138 PRIMARY REG. DIST. NO. 5527 Registrar's No. 27

1. PLACE OF DEATH a. COUNTY <u>Hickory</u>		2. USUAL RESIDENCE (Where deceased lived. If institution; residence before admission). a. STATE <u>Missouri</u> b. COUNTY <u>Hickory</u>			
b. CITY OR TOWN (If outside corporate limits, write RURAL and give township) <u>Flemington-Tyler</u>		c. LENGTH OF STAY (In this place) <u>All of life</u>		c. CITY OR TOWN (If outside corporate limits, write RURAL and give township) <u>Flemington-Rural-Tyler T. Ship</u>	
d. FULL NAME OF HOSPITAL OR INSTITUTION <u>3 miles N. of Flemington</u>		d. STREET ADDRESS (If rural, give location) <u>3 miles N of Flemington</u>			
3. NAME OF DECEASED (Type or Print)		a. (First) <u>Jess</u>	b. (Middle) <u>Faye</u>	c. (Last) <u>Poe</u>	4. DATE OF DEATH (Month) (Day) (Year) <u>Sept 11-1951</u>
5. SEX <u>Male</u>	6. COLOR OR RACE <u>White</u>	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) <u>married</u>		8. DATE OF BIRTH <u>May 9-1908</u>	9. AGE (In years last birthday) <u>50</u>
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) <u>Farmer</u>		10b. KIND OF BUSINESS OR INDUSTRY <u>General Farming</u>		11. BIRTHPLACE (State or foreign country) <u>Flemington, MO</u>	
12. CITIZEN OF WHAT COUNTRY? <u>U.S.A.</u>		13a. FATHER'S NAME <u>Henry Poe</u>		13b. MOTHER'S MAIDEN NAME <u>Sarah Lee Tillery</u>	
14. NAME OF HUSBAND OR WIFE <u>Jessie Poe</u>		15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) <u>no</u>		16. SOCIAL SECURITY NO. <u>None</u>	
17. INFORMANT'S SIGNATURE OR NAME <u>Jessie Poe - Flemington, MO</u>		18. CAUSE OF DEATH Enter only one cause per line for (a), (b), and (c)  *This does not mean the mode of dying, such as heart failure, asthma, etc. It means the disease, injury, or complication which caused death.			
19a. DATE OF OPERATION		19b. MAJOR FINDINGS OF OPERATION		20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
21a. ACCIDENT SUICIDE HOMICIDE (Specify)		21b. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)		21c. (CITY, TOWN, OR TOWNSHIP) (COUNTY) (STATE)	
21d. TIME OF INJURY (Month) (Day) (Year) (Hour) (Minute)		21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>		21f. HOW DID INJURY OCCUR?	
22. I hereby certify that I attended the deceased from <u>June 10, 1947</u> , to <u>Sept 11, 1951</u> , that I last saw the deceased alive on <u>August 15, 1951</u> , and that death occurred at <u>7:00 A.M.</u> , from the causes and on the date stated above.					
23a. SIGNATURE (Degree or title) <u>A. E. Briggs, D.O. Coronator</u>		23b. ADDRESS <u>Wheatland, MO</u>		23c. DATE SIGNED <u>Sept. 26, 1951</u>	
24a. BURIAL, CREMATION, REMOVAL (Specify) <u>BURIAL</u>		24b. DATE <u>9-14-1951</u>		24c. NAME OF CEMETERY OR CREMATORY <u>Flemington Cemetery</u>	
24d. LOCATION (City, town, or county) (State) <u>Flemington, MO</u>		DATE REC'D BY LOCAL REG. <u>Sept 29 1951</u>		REGISTRAR'S SIGNATURE <u>Goldie E. Holley</u>	
25. FUNERAL DIRECTOR'S SIGNATURE <u>Billie Hathaway</u>		ADDRESS <u>Wheatland, MO</u>			

(Licensed Embalmer's Statement on Reverse Side)

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

RECEIVED 10-6-51

DISTRICT HEALTH OFFICE No. 3

District File Number \_\_\_\_\_

Date Filed 10-6-51 \_\_\_\_\_

APR 21 1964

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 \_\_\_\_\_

Student Embalmer No. \_\_\_\_\_

working under my personal supervision.

Student \_\_\_\_\_

Student Embalmer

Signed *Chas Gilbert Wetmore*

Licensed Embalmer No. 4267

P. O. Address *Wheatland, W.V.*

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.