

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

State File No. **27891**

FILED SEP 9 - 1952

BIRTH NO. _____ REG. DIST. NO. **143** PRIMARY REG. DIST. NO. **4232** Registrar's No. **16**

1. PLACE OF DEATH
 a. COUNTY **Howell** **0460**
 b. CITY (If outside corporate limits, write RURAL and give township) OR TOWN **Willow Springs, Mo.** c. LENGTH OF STAY (in this place)
 d. FULL NAME OF HOSPITAL OR INSTITUTION

2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission).
 a. STATE **Missouri** b. COUNTY **Howell** **0460**
 c. CITY (If outside corporate limits, write RURAL and give township) OR TOWN **Willow Springs,**
 d. STREET ADDRESS (If rural, give location)

3. NAME OF DECEASED a. (First) **Jiles** b. (Middle) **Edmond** c. (Last) **Roberts** 4. DATE OF DEATH (Month) (Day) (Year) **Aug. 28, 1952**

5. SEX **Male** 6. COLOR OR RACE **White** 7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) **Married** 8. DATE OF BIRTH **Oct. 12, 1868** 9. AGE (In years last birthday) **83** 10. UNDER 1 YEAR Months **10** Days **16** 11. HOURS **0** 12. MIN. **16**

10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) **Retired Farmer** 10b. KIND OF BUSINESS OR INDUSTRY **Farm** 11. BIRTHPLACE (State or foreign country) **Missouri** 12. CITIZEN OF WHAT COUNTRY? **USA**

13a. FATHER'S NAME **Unknown** 13b. MOTHER'S MAIDEN NAME **unknown** 14. NAME OF HUSBAND OR WIFE **Sarrah Anna Roberts**

15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) **No** 16. SOCIAL SECURITY NO. **486-24-4479** 17. INFORMANT'S SIGNATURE OR NAME **Mrs. Sarrah A. Roberts** ADDRESS **Willow Spg.**

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.
 I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) **Cerebral Hemorrhage** MEDICAL CERTIFICATION
 ANTECEDENT CAUSES **Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last.** DUE TO (b) _____ DUE TO (c) _____
 II. OTHER SIGNIFICANT CONDITIONS **Conditions contributing to the death but not related to the disease or condition causing death.** INTERVAL BETWEEN ONSET AND DEATH **12 hours**

19a. DATE OF OPERATION _____ 19b. MAJOR FINDINGS OF OPERATION **331X** 20. AUTOPSY? YES NO

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) _____ 21e. INJURY OCCURRED WHILE AT WORK NOT WHILE AT WORK 21f. HOW DID INJURY OCCUR?

22. I hereby certify that I attended the deceased from **on Aug 28, 1952**, to _____, 19____, that I last saw the deceased alive on **Aug 28, 1952**, and that death occurred at _____ m., from the causes and on the date stated above.

23a. SIGNATURE **Sarrah A. Roberts** (Degree or title) 23b. ADDRESS **Willow Spg.** 23c. DATE SIGNED **Aug 30/52**

24a. BURIAL, CREMATION, REMOVAL (Specify) **Burial** 24b. DATE **8/30/52** 24c. NAME OF CEMETERY OR CREMATORY **City Cemetery** 24d. LOCATION (City, town, or county) (State) **Willow Springs, Mo.**

DATE REC'D BY LOCAL REG. **9/6/52** REGISTRAR'S SIGNATURE **Marshall Ballard** 25. FUNERAL DIRECTOR'S SIGNATURE **Burns** ADDRESS **Willow Springs, Mo.**

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

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.....

.....
working under my personal supervision.

Student Embalmer No.....

Fred W. Barnes

Signed Fred W. Barnes

Signed.....

Student Embalmer

Licensed Embalmer No. 4614

P. O. Address Willow Springs, 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.