

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

32056

State File No.

FILED OCT 7 1952

REG. DIST. NO. 155 PRIMARY REG. DIST. NO. 3127 Registrar's No. 147

0492

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

1. PLACE OF DEATH a. COUNTY Jasper		2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission). a. STATE Missouri b. COUNTY Jasper	
b. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Webb City		c. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Joplin	
d. FULL NAME OF HOSPITAL OR INSTITUTION Jane Chinn Hospital		d. STREET ADDRESS (If rural, give location) 2618 Yuma	
3. NAME OF DECEASED (Type or Print) a. (First) Harold b. (Middle) W. c. (Last) Gulick		4. DATE OF DEATH (Month) (Day) (Year) Sept. 24, 1952	
5. SEX Male	6. COLOR OR RACE White	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married	8. DATE OF BIRTH June 8, 1907
9. AGE (In years last birthday) 45		IF UNDER 1 YEAR Months 3 Days 16	IF UNDER 24 HRS. Hours 16 Min.
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Gage reader		10b. KIND OF BUSINESS OR INDUSTRY Spencer Chemical Co.	
11. BIRTHPLACE (City and State or Foreign Country) Sarcoxie, Missouri		12. CITIZEN OF WHAT COUNTRY USA	
13a. FATHER'S NAME Bert W. Gulick		13b. MOTHER'S MAIDEN NAME Maude E. McDonald	
14. NAME OF HUSBAND OR WIFE Ester M. Gulick			
15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) unknown		16. SOCIAL SECURITY NO. unknown	
17. INFORMANT'S SIGNATURE OR NAME Ester M. Gulick, 2618 Yuma, Joplin		ADDRESS	
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, ashenia, etc. It means the disease, injury, or complication which caused death.		MEDICAL CERTIFICATION I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Septicemic Appendicitis with Peritonitis ANTECEDENT CAUSES Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last. DUE TO (b) Intestinal Obstruction DUE TO (c) II. OTHER SIGNIFICANT CONDITIONS Toxemia due to retention of nitrogenous products	
19a. DATE OF OPERATION 9-16-52		19b. MAJOR FINDINGS OF OPERATION Septicemic Appendicitis Intestinal Obstr.	
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) (Min.)		21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>	
21f. HOW DID INJURY OCCUR 5501			
22. I hereby certify that I attended the deceased from Sept 16, 1952 , to Sept 24, 1952 , that I last saw the deceased alive on Sept 24, 1952 , and that death occurred at 11:45 AM , from the causes and on the date stated above.			
23a. SIGNATURE [Signature]		23b. ADDRESS [Address]	
23c. DATE SIGNED 9-25-52			
24a. BURIAL, CREMATION, REMOVAL (Specify) Burial		24b. DATE 9-27-52	
24c. NAME OF CEMETERY OR CREMATORY Ozark Memorial		24d. LOCATION (City, town, or county) (State) Joplin, Missouri	
DATE REC'D BY LOCAL REG. 9-27-52		REGISTRAR'S SIGNATURE John Lewis Dep. Reg.	
25. FUNERAL DIRECTOR'S SIGNATURE Steve Parker		ADDRESS Mortuary, Joplin, Mo.	

RECEIVED 10-6-52
Jasper County Health Office

County File Number 52/10/765

Date Filed 10-6-52

FEB 27 1953

OCT 10 1952

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 *F. M. Jones*

Licensed Embalmer No. 2319

P. O. Address *Joplin 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.