MISSOURI STATE BOARD OF HEALTH Do not use this space. BUREAU OF VITAL STATISTICS CERTIFICATE OF DEATH 1. PLACE OF DEATH County. Registration District No..... Primary Registration District No...... Registered No..... City. TATAGUDOU TO 2. FULL RAME. (a) Residence, No. (Usual place of abode) (If nonresident, give city or town and State) Length of residence in city or town where death occurred mos. O da. How long in U. S., if of foreign birth? mos. PERSONAL AND STATISTICAL PARTICULARS MEDICAL CERTIFICATE OF DEATH 3. SEX 4. COLOR OR RACE SINGLE, MARRIED, WIDOWED, OR 21. DATE OF DEATH (MONTH, DAY, AND YEAR) . 19 ) ソ DIVORCED (write the word) narried That I attended descared from 5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF ..., 19 3. 9 Death is said / 2 6. DATE OF BIRTH (MONTH, DAY, AND YEAR) to have occurred on the date stated above, at. The principal cause of death and related causes of importance were as follows: 7. AGE YEARS MONTHS If LESS than 1 DAYS day, .....hrs. Date of onset 10 or ...... min. Trade, profession, or particular kind of work done, as spinner, 60 sawyer, bookkeeper, etc ..... 9. Industry or business in which work was done, as silk mill, saw mill, bank, etc. 10. Date deceased last worked at 11. Tetal time (years) this occupation (month and year) occupation A 12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) 13. NAME Name of operation OF DEATH in plain terms, What test confirmed diagnosis?..... Was there an autopsy?.... 14. BIRTHPLACE (CITY OR TOWN). (STATE OR COUNTRY) 23. If death was due to external causes (violence), fill in also the following: 15. MAIDEN NAME Where did injury occur?.....(Specify city or town, county, and State) 16. BIRTHPLACE (CITY OR TOWN). (STATE OR COUNTRY) Specify whether injury occurred in industry, in home, or in public place. 17. INFORMANT (ADDRESS) Manner of injury..... If so, specify... (ADDRESS (Signed) Registrar.

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State of Missouri, County of Moniteau.

On this 9th day of August, 1934, personally appeared before me, a notary public within and for the county of Moniteau, in the state of Missouri, William Andrew Howard, whose post office address is California, Moniteau county, Missouri, and a creditable person worthy of belief, and who being duly sworn, upon his oath deposes and says that he is a brother of Rosa F. Howard, who married Henry Strother, and who at the date of her death, which occured on June 22nd, 1934, in Callaway county, Missouri, was known as Rosa F.Strother; that he is now in possession of the Family bible of his father and that the dates of the birth of each child of his father were recorded in said family bible at the time of the birth of each child; that said dates, names of each child was written in said bible by my father; that his child, Rosa F. Howard as shown by said bible, was born on Junery 12th, 1869; that the date given in the death certificate of Rosa F.Strother, who is the same person as Rosa F.Howard, is is wrong, it being given as 1867, which said correct date is as above stated Juneary 12th, 1869.

This affiant personally knows from the Bible record that said date last given is the correct date and that he now has in possession the family bible in which birth date is recorded, and is willing to submit said bible for the inspection of any personally interested in said date.

William Andrew Howard.

Subscribed and sworn to before me this 9th day of August, 1934.

My commission as Notary Public will

expire on Rugust 19 1936.

In witness whereof I have hereunto subscribed my name and affixed my seal this 9th day of August.

Notary Public.

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