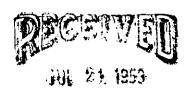
	•			ALTH OF MISS				256	R
FILED JUL 2	5 1953			PRIMARY REG. DIS			e File No.	***************************************	
I. PLACE OF DE	ATH	REG. DIST.	10. <u>3.13.</u>	2 USUAL RES					
a. COUNTY Mi	iller			a. STATE Mis	souri		an traction	Miller	edel
b. CITY (If outside or OR TOWN	Eldon	RUBAL and give	C. LENGTH OF	c. CITY (II coulds	o corporate tente	, waite RURAL			/
d. FULL NAME OF HOSPITAL OR INSTITUTION	(If not in hospital or	institution, give etree	t address or location)	d. STREET ADDRESS		gire leastles)			<u> </u>
1. NAME OF DECEASED	a. (First)	b.	(Middle)	c. (Lest)	<del></del>	4. DATE	(Month)	(Degr)	(Yes
(Type or Print)	Margare		Clark	Francis		OF DEATH J	uly :	12,.19	53.
7	COLOR OR RACE	7. MARRIED, NI WIDOWED, D	EVER MARRIED.	July 29.		9. AGE (In p.			
Female  10a USUAL OCCUPATION	White	Wido	WEOL Business or in-					12. CITIZEN	
Housewill	ing ille, even if retired)		DUSTRY	Moniteau			ri C	COUNTRY	7
3a. FATHER'S HAME			OTHER'S MAIDEN	<del>^</del>		E OF HUSBA			
di√i√e Jas	-	Y =	Grace Les			ver Fr			
15. WAS DECEASED EV	ER IN U.S. ARMED	FORCES7   16. St	OCIAL SECURITY	17. INFORMAN				ADD	RE:
(Yes, so, or unknown) (I	i har igas ann ar gege	at of service)	NO.	Mrs. Rav	Stonbo	me	נים.	son. M	
18. CAUSE OF DEATH Enter only one onine per line for (a), (b), and (c)  *This does not mean	ANTECEDENT C		MEDICAL (	CERTIFICATION bral Na Trivocle		hage	ELT:	DITERVAL ORSET AN	
ts. CAUSE OF DEATH Enter only one osize per line for (a), (b), and (c)	ANTECEDENT C	CONDITION DING TO DEATH*(A) CAUSES no, if one, giving DA cruse (a) stating received.	MEDICAL (	CERTIFICATION		hage		INTERVAL	ET
18. CAUSE OF DEATH Rater only one cause per line for (a), (b), and (c)  *This does not mean the mode of dying, such as heart failure, authenia, ste. It means the dis-	ANTECEDENT C Morbid condition rise to the above the underlying co	CONDITION DING TO DEATH* (A) CAUSES  no, if ony, giring DA couse (a) stating ruse leaf.  DA IFICANT CONDITIO	MEDICAL (c) Cere  JE TO (b) MU  JE TO (d)  JESTO (d)	CERTIFICATION		hage		INTERVAL	ET
18. CAUSE OF DEATH Rater only one cause per line for (a), (b), and (c)  *This does not mean the mode of dying, such as heart failure, asthenia, etc. It means the dis- case, injury, or complica- tion which caused death.  The DATE OF OPERA.	ANTECEDENT C Morbid condition rise to the above the underlying co II. OTHER SIGN Conditions contr related to the dise	CONDITION DING TO DEATH* (A) CAUSES  no, if any, giring DA cause (a) stating rune last.  D.	MEDICAL (c)  Cerc  (E TO (b) M  (b)  (E TO (a)  (C)  (E TO (a)	CERTIFICATION		hage		INTERVAL	D SEZ
IB. CAUSE OF DEATH Enter only one come per line for (a), (b), and (c)  *This does not mean the mode of sping, such as heart failure, authenia, etc. It means the dis- cose, injury, or complica- tion which coused death.  ISA. DATE OF OPERA- TION	ANTECEDENT C Morbid condition rise to the above the underlying co II. OTHER SIGN Conditions contr related to the dise	CONDITION DING TO DEATH* (A) CAUSES  no, if any, giving Di- cruse (a) stating mass land.  Di IFICANT CONDITIO ibuting to the death b mass or condition cause	MEDICAL (c)  Cerc  (E TO (b) M  (b)  (E TO (a)  (C)  (E TO (a)	CERTIFICATION		hage		ORSET AN	D DE
18. CAUSE OF DEATH Rater only one cause per line for (a), (b), and (c)  *This does not mean the mode of dying, such as heart failure, asthenia, etc. It means the dis- case, injury, or complica- tion which caused death.  The DATE OF OPERA.	ANTECEDENT C Morbid condition rise to the above the underlying co II. OTHER SIGN Conditions contr related to the dise	CONDITION DING TO DEATH* (a) CAUSES  ns, if any, giving Di- cause (a) stating rases leaf.  DI IFICANT CONDITIC finding to the death is use or condition cause (DINGS OF OPERA)	MEDICAL (c)  Cerc  (E TO (b) M  (b)  (E TO (a)  (C)  (E TO (a)	CERTIFICATION	emon unio,	hage		ORSET AN	PSY?
IB. CAUSE OF DEATH Enter only one come per line for (a), (b), and (c)  *This does not mean the mode of sping, such as heart failure, authenia, etc. It means the dis- cose, injury, or complica- tion which coused death.  ISA. DATE OF OPERA- TION	ANTECEDENT C Morbid condition rise to the above the underlying or II. OTHER SIGN Conditions contr- related to the dise 19b. MAJOR FIN	CONDITION DING TO DEATH* (A) CAUSES  no, (f eng. giring Di counte (a) stating mass land.  DI IFICANT CONDITIO ibuting to the death b size or condition caus IDINGS OF OPERA  21b. PLACE OF INJ bonne, furthe, factory, a	MEDICAL ( Cere  DE TO (b)  JE TO (a)  JES TO (a)  JES TO (a)  JES TO (a)  JES TO (b)  JES TO (c)  JES	CERTIFICATION bral Na	OR TOWNSHIP	hage	/×	ORSET AND	PSY?
IB. CAUSE OF DEATH Enter only one omno per line for (a), (b), and (c)  "This does not meen the mode of dying, such as heart failure, authenia, etc. It means the dis- case, injury, or complica- tion which enused death,  IBa. DATE OF OPERA- TION  ITA. ACCIDENT SUICIDE HOMICIDE  INJURY  22. I hereby centify	ANTECEDENT C Morbid condition rise to the above the underlying co  II. OTHER SIGN Conditions contr related to the dise  19b. MAJOR FIN  (Reselly) (Dur) (Year)	CONDITION DING TO DEATH* (A) CAUSES  no, if any, giving Di cross (a) stating rune last.  DI IFICANT CONDITIC ibuting to the death b sase or condition casa IDINGS OF OPERA  21b. PLACE OF INJ bown, furin, factory, o  GEOur  The deceased fro	MEDICAL (C. C. C	21a. (CITY, TOWN, CITY, HOW DID INJU	or Townshii	3 3	/ X DUNTY)	20. AUTO	PSY1
18. CAUSE OF DEATH Enter only one omno per line for (a), (b), and (c)  "This does not meen the mode of dying, such as heart failure, authenia, etc. It means the dis- case, injury, or complica- tion which enused death,  19a. DATE OF OPERA- TION  21a. ACCIDENT SUICIDE HOMICIDE 21d. TIME (Month) OF INJURY  22. I hereby certify alies on	ANTECEDENT C Morbid condition rise to the above the underlying co  II. OTHER SIGN Conditions contr related to the dise  19b. MAJOR FIN  (Reselly) (Dur) (Year)	CONDITION DING TO DEATH® (A) CAUSES  no, if any, giving Di cross (a) stating rune last.  DI IFICANT CONDITIC ibuting to the death b gas or condition cass IDINGS OF OPERA  21b. PLACE OF INJ bown, furin, factory, o  GEOMY  21c. INJ WHILE AT WORK	MEDICAL (Cerc)  Cerc  Cerc  Cerc  DE TO (b)  MEDICAL (Cerc)  DE TO (cerc)  MEDICAL (Cerc)  MED	Zio. (CITY, TOWN. CZM. HOW DED ERLE	or Townshii	3 3	/ X DUNTY)	20. AUTO	PSYT
18. CAUSE OF DEATH Enter only one omno per line for (a), (b), and (c)  "This does not meen the mode of dying, such as heart failure, authenia, etc. It means the dis- case, injury, or complica- tion which enused death,  19a. DATE OF OPERA- TION  21a. ACCIDENT SUICIDE HOMICIDE 21d. TIME (Month) OF INJURY  22. I hereby certify alies on	ANTECEDENT C Morbid condition rise to the above the underlying co  II. OTHER SIGN Conditions contr related to the dise  19b. MAJOR FIN  Charles  Charles  (Hear)  (Hear)	CONDITION DING TO DEATH* (A) CAUSES  no, if any, giving Di cross (a) stating rune last.  DI IFICANT CONDITIC ibuting to the death b sase or condition casa IDINGS OF OPERA  21b. PLACE OF INJ bown, furin, factory, o  GEOur  The deceased fro	MEDICAL (C. C. C	21a. (CITY, TOWN, CITY, HOW DID INJU	or Townshii	3 3	/ X DUNTY)	20. AUTO	PSY? NO
18. CAUSE OF DEATH Rater only one omno per line for (a), (b), and (c)  *This does not mean the mode of dying, such as heart failure, authenia, ate. It means the dis- case, injury, or compilea- tion which caused death.  19a. DATE OF OPERA- TION  21a. ACCIDENT SUICIDE HOMICIDE 21d. TIPE INJURY  22. I hereby certify aliae on INTE 23a. SIGNATURE	ANTECEDENT C Morbid condition rise to the above the underlying co ii. OTHER SIGN Conditions contr related to the dise 195. MAJOR FIN (Duestly)  (Dus) (Year)  that I attended 11, 194	CONDITION DING TO DEATH* (a) CAUSES  ne, if any, giving Dicesses (a) stating mass last.  DI IFICANT CONDITIO Ibuting to the death became or condition cause IDINGS OF OPERA  21b. PLACE OF INJ bown, furm, factory, a  CHOST  The deceased fro  3, and that de	MEDICAL ( Cere  DE TO (b) MU  JE TO (c)  JES TO (c)  J	Zio. (CITY, TOWN. CZM. HOW DED ERLE	OR TOWNSHIP  OR TOWNSHIP  IN The dauses  Jon  M. LOCA  M. LOCA  Did. LOCA	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	/ × DUNTY)  that I ladate state	20. AUTOUTES CATALOGUEST AND CONSET AND CONS	PSYT NO (TR)
18. CAUSE OF DEATH Enter only one omno per line for (a), (b), and (c)  "This does not meen the mode of dying, such as heart failure, authenia, etc. It means the dis- case, injury, or complica- tion which enused death,  19a. DATE OF OPERA- TION  21a. ACCIDENT SUICIDE HOMICIDE 21d. TIME (Month) OF INJURY  22. I hereby certify alies on	ANTECEDENT C Morbid condition rise to the above the underlying co ii. OTHER SIGN Conditions contr related to the dise 195. MAJOR FIN (Duestly)  (Dus) (Year)  that I attended 11, 194	CONDITION DING TO DEATH* (A) CAUSES  ns. if any. giving Dicesse (a) stating reason leaf.  DIFICANT CONDITION is death because or condition cause (DINGS OF OPERA)  21b. PLACE OF INJ. house, haven, factory, and that deceased from the deceased from	MEDICAL ( Cere  DE TO (b) MU  JE TO (c)  JES TO (c)  J	210. (CITY, TOWN, CITY, HOW DID INJU- 219. HOW DID INJU- 219. ADDRESS.  TY OR CREMATORY	CR TOWNSHIP  OR TOWNSHIP  IN the druses  Jon  Std. LOCA  Cali	hage 33 cond on the Moi. Tion (Cay. in	/ × DUNTY)  that I ladate state	20. AUTOUTES CATALOGUEST AND CONSET AND CONS	PSYT NO TID
IB. CAUSE OF DEATH Enter only one comp per line for (a), (b), and (c)  "This does not mean the mode of sping, such as heart failure, authenia, etc. It means the dis- cose, injury, or complica- tion which coused death.  ISA. DATE OF OPERA- TION  ISA. ACCIDENT SUICIDE  III. ACCIDENT SUICIDE  III. TIME (Month) OF INJURY  22. I hereby contifu aline on Le-  23a. SIGNATURE  As. BURIAL CREMITON, REMOVAL change	ANTECEDENT C Morbid condition rise to the above the underlying of II. OTHER SIGN Conditions contri- related to the disc 19b. MAJOR FIN  (Duestry)  (Duestry)	CONDITION DING TO DEATH* (A) CAUSES  ns. if any. giving Dicesse (a) stating rease leaf.  DIFICANT CONDITIC librating to the death become or condition cause (DINGS OF OPERA)  21b. PLACE OF INJ. house, have, have, have, have, have, have, have, have, have, and that deceased from the d	MEDICAL (C. C. C	210. (CITY, TOWN. C. 211. HOW DID INJU.  215. ADDRESS.	OR TOWNSHIII	hage 33 33 30 40 40 40 40 40 40 40 40 40 40 40 40 40	/ × DUNTY)  that I ladate state	20. AUTOUTES CATALOGUEST AND CONSET AND CONS	PSYT NO (TR)
18. CAUSE OF DEATH Enter only one omno per line for (a), (b), and (c)  *This does not mean the mode of dying, such as heart failure, authenia, de. It means the dis- case, injury, or compilea- tion which caused death.  19a. DATE OF OPERA- TION 21a. ACCIDENT SUICIDE HOMICIDE 21d. TIME Chlosch OF INJURY 22. I hereby certify alies on proper 22a. SIGNATURE  22a. SIGNATURE	ANTECEDENT C Morbid condition rise to the above the underlying of II. OTHER SIGN Conditions contri- related to the disc 19b. MAJOR FIN  (Duestry)  (Duestry)	CONDITION DING TO DEATH* (A) CAUSES  no, if any, giving Dicesses (a) stating ranse lead.  DIFICANT CONDITIC librating to the death in the same or condition case (DINGS OF OPERATION, factory, and that deceased from the deceased f	MEDICAL (C.)  JE TO (b)  JE TO (c)  JE TO (d)  JES  JE TO (d)  JES  JES  JES  JES  JES  JES  JES  JE	210. (CITY, TOWN, CITY, HOW DID INJU- 219. HOW DID INJU- 219. ADDRESS.  TY OR CREMATORY	OR TOWNSHIP  OR TOWNSHIP  IRY OCCURY  The druses  Lon  Californ  Like Californ  Californ  Like Californ  Californ  Like Califo	hage 33 cond on the Moi. Tion (Cay. in	/ × DUNTY)  that I ladate state	20. AUTOUTES CATALOGUEST AND CONSET AND CONS	PSY? NO TE)



WILLES COUNTY HEALTH O'SPARTMENT

## STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorde	ed on the reverse side of this certificat	e was embalmed by me, or by
Louis D. Ph	nillips Stude	int Embalmer No
working under my personal supervision		

working under my personal supervision.

Student Embalmer

Licensed Embalmer No. 3663

P. O. Address <u>Eldon</u>

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.