

MISSOURI STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

1 PLACE OF DEATH

County Madison
Township Indenmile
or
Village
or
City

Registration District No. 1142

File No. 40 15528

Primary Registration District No. 5725

Registered No. 40

(No. St. Ward)

If death occurred in a hospital or institution, give its NAME instead of street and number.

2 FULL NAME George King

PERSONAL AND STATISTICAL PARTICULARS

3 SEX Male
4 COLOR OR RACE American
5 SINGLE MARRIED married
WIDOWED OR DIVORCED
(Write the word)
6 DATE OF BIRTH July 24
(Month) (Day) (Year)
7 AGE 62 yrs. 8 mos. 19 ds.
If LESS than 1 day, hrs. or min.?

8 OCCUPATION
(a) Trade, profession, or particular kind of work Farmer
(b) General nature of industry business, or establishment in which employed (or employer)

9 BIRTHPLACE
(City or town, State or foreign country) Madison Co. Mo.

PARENTS
10 NAME OF FATHER Joe King
11 BIRTHPLACE OF FATHER Mo
(City or town, State or foreign country)
12 MAIDEN NAME OF MOTHER Annalia Ross
13 BIRTHPLACE OF MOTHER Mo
(City or town, State or foreign country)

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant) o n King

(Address) Brookville Mo

15 Filed 11-13 1917 A. Radford
Registrar

2 MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH 4 12 1917
(Month) (Day) (Year)

17 I HEREBY CERTIFY, that I attended deceased from March 24 1917, to April 10 1917, that I last saw him alive on April 10 1917, and that death occurred, on the date stated above, at 12 m.

The CAUSE OF DEATH* was as follows:

Ecchymosis
1738
1185 (Duration) yrs. mos. ds.

CONTRIBUTORY John Conisford Lytle
(Secondary)

(Duration) yrs. mos. ds.
(Signed) E. J. Davis M. D.
4-12 1917 (Address) Brookville Mo

*State the Disease Causing Death, or, in deaths from Violent Causes, state (1) Means of Injury; and (2) whether Accidental, Suicidal or Homicidal.

18 LENGTH OF RESIDENCE (For Hospitals, Institutions, Transients, or Recent Residents)

At place of death yrs. mos. ds. In the State yrs. mos. ds.

Where was disease contracted if not at place of death?

Former or usual residence

19 PLACE OF BURIAL OR REMOVAL King DATE OF BURIAL 4-14 1917

20 UNDERTAKER Brookville ADDRESS Brookville Mo