

MISSOURI STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS 5091
CERTIFICATE OF DEATH

1 PLACE OF DEATH
County Jasper
Township
or
Village
or
City Joplin
FULL NAME Mark Hall

Registration District No. 411 File No. 5091
Primary Registration District No. 2002 Registered No. 89
(NO. 2516 St. Ward) (If death occurred in a hospital or institution, give its NAME instead of street and number.)

PERSONAL AND STATISTICAL PARTICULARS

3 SEX Male 4 COLOR OR RACE White 5 SINGLE MARRIED WIDOWED OR DIVORCED Married
(Write the word)
6 DATE OF BIRTH Aug 12 1886
(Month) (Day) (Year)
7 AGE 29 yrs. mos. ds. If LESS than 1 day, hrs. or min.?
8 OCCUPATION (a) Trade, profession, or particular kind of work Base Ball pitcher
(b) General nature of industry business or establishment in which employed (or employer) " "
9 BIRTHPLACE (City or town, State or foreign country) Missouri
10 NAME OF FATHER Alfred Hall
11 BIRTHPLACE OF FATHER (City or town, State or foreign country) Iowa
12 MAIDEN NAME OF MOTHER Ada Cherry
13 BIRTHPLACE OF MOTHER (City or town, State or foreign country) Iowa

2 MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH Feb 24 1915
(Month) (Day) (Year)
17 I HEREBY CERTIFY, that I attended deceased from Feb 22 1915 to Feb 24 1915
that I last saw him alive on Feb 24 1915
and that death occurred, on the date stated above, at 4 p. m.
The CAUSE OF DEATH* was as follows:
Nephritis - Chronic
(Paraneurymatous)
59
131 (Duration) yrs. mos. ds.
CONTRIBUTORY Diabetes
(Secondary) (Duration) yrs. mos. ds.
(Signed) J. W. Barker M. D.
225 1915 (Address) Joplin Mo

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE
(Informant) Harvey Boyd
(Address) 2526 Va

*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.....

15 Filed Feb 25 1915 A. M. Gregg
Registrar

19 PLACE OF BURIAL OR REMOVAL Diamond Mo DATE OF BURIAL 2/25 1915
20 UNDERTAKER Hullett ADDRESS 4th Ave