

tion should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important. See instructions on back of certificate.

PERSONAL AND STATISTICAL PARTICULARS					MEDICAL CERTIFICATE OF DEATH	
1. PLACE OF DEATH					21. DATE OF DEATH (month, day, and year) <u>Oct. 15, 1932</u>	
County <u>Henry</u> State: <u>IOWA</u> Registered No. <u>611-211</u>					22. I HEREBY CERTIFY , That I attended deceased from <u>Jan 27, 1930</u> to <u>Oct. 15, 1932</u>	
Township <u>Center</u> or Village _____					I last saw him alive on <u>Oct. 15, 1932</u> , death is said	
City <u>Mt. Pleasant</u> No. _____ St. _____ Ward _____ (If death occurred in a hospital or institution give its name instead of street and number)					to have occurred on the date stated above, at _____ m.	
Length of residence in city or town where death occurred _____ yrs. _____ mos. _____ ds. How long in U. S. if of foreign birth? _____ yrs. _____ mos. _____ ds.					The principal cause of death and related causes of importance in order of onset were as follows: _____ Date of onset _____	
2. FULL NAME <u>John B. Whitham</u>					<u>Cardiac Failure; or</u>	
(a) Residence. No. <u>Mt. Pleasant</u> St. _____ Ward _____ (Usual place of abode) (If non-resident give city or town and State)					<u>Apoplexy He died suddenly and was not present.</u>	
PERSONAL AND STATISTICAL PARTICULARS					MEDICAL CERTIFICATE OF DEATH	
3. SEX	4. COLOR OR RACE	5. Single, Married, Widowed, or Divorced (write the word)			21. DATE OF DEATH (month, day, and year) <u>Oct. 15, 1932</u>	
<u>male</u>	<u>white</u>	<u>married</u>			22. I HEREBY CERTIFY , That I attended deceased from <u>Jan 27, 1930</u> to <u>Oct. 15, 1932</u>	
5a. If married, widowed, or divorced					I last saw him alive on <u>Oct. 15, 1932</u> , death is said	
HUSBAND of <u>Octava Whitham</u>					to have occurred on the date stated above, at _____ m.	
(or) WIFE of _____					The principal cause of death and related causes of importance in order of onset were as follows: _____ Date of onset _____	
6. DATE OF BIRTH (month, day, and year) <u>Oct 28-1880</u>					<u>Cardiac Failure; or</u>	
7. AGE	Years	Months	Days	If less than 1 day, _____ hrs. or _____ min.	<u>Apoplexy He died suddenly and was not present.</u>	
<u>77</u>	<u>0</u>	<u>13</u>			<u>Contributory causes of importance not related to principal cause: He had a light apoplexy about 2 years before his death.</u>	
8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. <u>Railway clerk</u>					Name of operation <u>none</u> Date of <u>none</u>	
9. Industry or business in which work was done, as silk mill, saw mill, bank, etc. <u>C. B. #2</u>					What test confirmed diagnosis? <input checked="" type="checkbox"/> Was there an autopsy? <u>no</u>	
10. Date deceased last worked at this occupation (month and year) _____					23. If death was due to external causes (violence) fill in also the following:	
11. Total time (years) spent in this occupation <u>35</u>					Accident, suicide, or homicide? <u>no</u> Date of injury <u>none</u> 19. <u>1</u>	
12. BIRTHPLACE (city or town) (State or country) <u>Pittsburg</u>					Where did injury occur? <u>none</u> (Specify city or town, county, and State)	
13. NAME <u>George W. Whitham</u>					Specify whether injury occurred in industry, in home, or in public place. <input checked="" type="checkbox"/>	
14. BIRTHPLACE (city or town) (State or country) <u>unknown</u>					Manner of injury <u>none</u>	
15. MAIDEN NAME <u>Elizabeth Badger</u>					Nature of injury <u>none</u>	
16. BIRTHPLACE (city or town) <u>unknown</u>					24. Was disease or injury in any way related to occupation of deceased? <u>no</u>	
17. INFORMANT <u>Mrs. John Whitham</u>					If so, specify <u>M. G. Sternberg</u>	
(Address) <u>Mt. Pleasant, Ia</u>					(Signed) _____ M. D.	
18. BURIAL, CREMATION, OR REMOVAL					(Address) <u>Mt. Pleasant, Iowa</u>	
Place <u>Mt. Pleasant</u> Date <u>Oct. 18</u> , 19 <u>32</u>						
19. LICENSED EMBALMER <u>M. G. Sternberg</u> No. <u>1659</u>						
(Address) <u>Mt. Pleasant, Iowa</u>						
20. FILED _____, 19 _____						
Registrar _____						

(OVER)

"Iowa, U.S., Death Records, 1880-1904, 1921-1952," database with images, Ancestry.com (<http://www.ancestry.com> : accessed 13 Oct 2022), entry for John B. Whitham d. 1932; citing Iowa, Deaths, 1920-1951, State Historical Society of Iowa, State Archives, Des Moines, Iowa.

Iowa, U.S., Death Records, 1880-1904, 1921-1952

Record Index

Name: John B Whitham
Maiden Name:
Gender: Male
Race:
Marital Status:
Age: 77
Birth Date: 1855
Birth Place:
Death Date: 15 Oct 1932
Death Place: Mount Pleasant Mm,
Henry, Iowa, USA
Burial Date:
Burial Place:
Father: George W Whitham
Mother: Elizibeth Badger
Spouse: Octava Whitham
Certificate Number: 44244

Source Information

Record Url: https://www.ancestry.com/imageviewer/collections/61442/images/101797048_04970

Source Citation: State Historical Society of Iowa; Des Moines, Iowa; Iowa Death Records, 1888-1904

Source Information Ancestry.com. *Iowa, U.S., Death Records, 1880-1904, 1921-1952* [database on-line]. Lehi, UT, USA: Ancestry.com Operations, Inc., 2017.
Original data: Iowa Deaths, 1880-1904. State Historical Society of Iowa, State Archives, Des Moines, Iowa.; Iowa, Deaths, 1920-1951. State Historical Society of Iowa, State Archives, Des Moines, Iowa.