

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD
 Local Registrars must make on this a complete and accurate copy of the Original Certificate, and forward this copy to County Clerk on 10th day of each month. Omissions or abbreviations must not be made. Local Registrars must not issue this to Undertakers, Physicians or others, but must use it only for preparing Copies. (or Local Registrar's Copies.)
 V.S. 5
 Has decedent ever served in military or naval service of U. S.?

1. PLACE OF DEATH County of <u>Dixon</u>		Registration Dist. No. <u>540</u>		STATE OF ILLINOIS Department of Public Health—Division of Vital Statistics		COUNTY CLERK'S RECORD	
<u>Dixon</u>		*Township *Road Dist. *Village *City Primary Dist. No. <u>3380</u>		STANDARD CERTIFICATE OF DEATH.			
* (Cancel the three terms not applicable—Do not enter "R. R.," "R. F. D.," or other P. O. address). Street and Number, No. <u>1211 Walnut Ave</u>		St.;		Ward,		Hospital	
2. FULL NAME <u>John Riley Munsell</u>		(If death occurred in hospital or institution, give its name instead of street and number.)					
(a) Residence No. <u>1211 Walnut Ave.</u>		St.;		Ward,		(Consecutive No.) <u>95</u>	
(Usual place of abode)		(If non-resident, give city or town and State)					
Length of residence in city or town where death occurred		yrs. <u>12</u> mos.		How long in U. S., if of foreign birth?		yrs. mos. ds.	
PERSONAL AND STATISTICAL PARTICULARS				MEDICAL CERTIFICATE OF DEATH			
3. SEX <u>Male</u>		4. COLOR OR RACE <u>White</u>		5. SINGLE, MARRIED, WIDOWED, or DIVORCED (Write the word) <u>Widowed</u>		16. DATE OF DEATH <u>April 11, 1930</u>	
5a. If Married, widowed or divorced HUSBAND of (or) WIFE of <u>Lu Setta Munsell</u>		6. DATE OF BIRTH <u>Nov. 23, 1854</u>		17. I HEREBY CERTIFY, That I attended deceased from <u>Dec. 1, 1930</u> to <u>April 11, 1930</u> that I last saw him alive on <u>April 11, 1930</u> and that death occurred, on the date stated above, at <u>11 P. m.</u> THE CAUSE OF DEATH* was as follows: <u>Chronic Interstitial Nephritis</u>		19. PLACE OF BURIAL Cremation or Removal Cemetery <u>Oakwood</u> Location <u>Dixon</u> County <u>Lee</u> State <u>Ill.</u>	
7. AGE Years Months Days <u>75</u> <u>4</u> <u>17</u>		If LESS than 1 day OR hrs. min.?		18. { Where was disease contracted, if not at place of death? Was there an autopsy? What test confirmed diagnosis? (Signed) <u>J. B. Werrin</u> , M. D. Address <u>Dixon, Ill.</u> Date <u>Apr. 12, 1930</u> Telephone <u>139</u>		21. DATE <u>Apr. 14, 1930</u>	
8. OCCUPATION OF DECEASED (a) Trade, profession or particular kind of work <u>Farmer</u> (b) General nature of industry, business, or establishment in which employed (or employer). (c) Name of employer.		9. BIRTHPLACE (city or town) <u>Mr. Vernon Jefferson Co. Ill.</u> (State or Country)		10. NAME OF FATHER <u>L. D. Munsell</u>		*N. B.—State the disease causing death. All cases of death from "Violence, casualty, or any undue means" must be referred to the coroner. See Section 10, Coroner's Act.	
11. BIRTHPLACE OF FATHER (City or Town) <u>Ohio</u> (State or Country)		12. MAIDEN NAME OF MOTHER <u>Smith</u>		13. BIRTHPLACE OF MOTHER (City or Town) <u>Ohio</u> (State or Country)		19. PLACE OF BURIAL Cremation or Removal Cemetery <u>Oakwood</u> Location <u>Dixon</u> County <u>Lee</u> State <u>Ill.</u>	
14. INFORMANT <u>W. O. Munsell</u> (Personal signature with pen and ink) (P. O. Address) <u>1211 Walnut Ave.</u>		15. Filed <u>Apr. 12, 1930</u> <u>Blake Grover</u> Registrar. P. O. Address <u>Dixon, Ill.</u>		20. UNDERTAKER <u>Walter L. Preston</u> (personal signature with pen and ink) (firm name, if any)		ADDRESS <u>Dixon</u>	

John Riley Munsell Dies at Son's Home
 John Riley Munsell, aged 75, passed away yesterday afternoon at the home of his son, W. O. Munsell, 1211 Walnut avenue, this city. Funeral services will be conducted from the Preston chapel Monday afternoon at 1 o'clock with interment in Oakwood.

April 12 1930

STATE OF ILLINOIS)
 COUNTY OF LEE) SS. I, NANCY NELSON, COUNTY CLERK OF LEE COUNTY, DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE COPY AS APPEARS OF RECORD IN MY OFFICE, GIVEN UNDER MY HAND AND THE SEAL OF LEE COUNTY AT DIXON, IN SAID COUNTY AND STATE, THIS 15th DAY OF July 1932.
 COUNTY CLERK Nancy Nelson
 BY William M. Huffman