

RECORD OF DEATHS, No. 5, LUCAS COUNTY, IOWA

Form 2014

1. Place of Death a. County Lucas Township b. City or Town Chariton, c. Length of Stay 25 yrs d. Full name of Hosp. or Inst. 718 Osage 2. Usual Residence a. State Iowa b. County Lucas c. City or Town Chariton, Iowa d. Street Address 718 Osage 3. Name of Deceased GUY CHALMERS WHITE 4. Date of Death April 12, 1955 5. Sex male 6. Color or Race white 7. Marital Status married 8. Date of Birth Sept. 15, 1884 9. Age last Birthday 70 10a. Usual Occupation Interior decorator, Painting b. Kind of Business	11. Birthplace Chariton, Iowa 12. Citizen of what country? U.S.A. 13. Father's Name John A. White 14. Mother's Maiden Name Katherine Brown 15. Ever in U. S. Armed Service? Give War or Dates of Service no 16. Social Security No. none 17. Informant's Name Guy Jr. White 18. Cause of Death Hemorrhage Cerebral Arteriosclerosis 23a. Attendant's Name Dean Curtis 23b. Attendant's Address Chariton, Iowa 23c. Date Signed 15 April 1955 Title	24a. Burial, Cremation, Removal Burial 24b. Date 4-15-1955 24c. Name of Cemetery or Crematory Chariton Cemetery 24d. Location (City, Town or Co.) Chariton, Iowa 25. Funeral Director's Name Keith Fielding 26. Date Rec'd by Local Reg. April 22-1955 27. Date Reg. by Co. Reg. May 6, 1955 28. Name of County Reg. Bertha E. Blanchard State License No. 30 File No. 59-41
1. Place of Death a. County Lucas Township b. City or Town Chariton, c. Length of Stay 18 yrs d. Full name of Hosp. or Inst. 916 N. Main 2. Usual Residence a. State Iowa b. County Lucas c. City or Town Chariton, d. Street Address 916 N. Main 3. Name of Deceased LEWIS EMMERSON CALLISON 4. Date of Death April 14, 1955 5. Sex male 6. Color or Race white 7. Marital Status married 8. Date of Birth Sept. 30, 1874 9. Age last Birthday 80 10a. Usual Occupation Farmer b. Kind of Business Farming	11. Birthplace Varsailles, Missouri 12. Citizen of what country? U.S.A. 13. Father's Name John W. Callison 14. Mother's Maiden Name Lucy Smith 15. Ever in U. S. Armed Service? Give War or Dates of Service no 16. Social Security No. 482-42-1954 17. Informant's Name L. B. Callison 18. Cause of Death Cerebral Hemorrhage Myocarditis, Chronic Coronary Sclerosis 23a. Attendant's Name Dean Curtis 23b. Attendant's Address Chariton, Iowa 23c. Date Signed April 15, 1955 Title	24a. Burial, Cremation, Removal Burial 24b. Date 4-17-1955 24c. Name of Cemetery or Crematory Chariton Cemetery 24d. Location (City, Town or Co.) Chariton, Iowa 25. Funeral Director's Name Keith Fielding 26. Date Rec'd by Local Reg. April 27-1955 27. Date Reg. by Co. Reg. May 6, 1955 28. Name of County Reg. Bertha E. Blanchard State License No. 30 File No. 59-42
1. Place of Death a. County Lucas Township b. City or Town Derby, c. Length of Stay 73 years d. Full name of Hosp. or Inst. ----- 2. Usual Residence a. State Iowa b. County Lucas c. City or Town Derby d. Street Address ----- 3. Name of Deceased DAVID COLUMBUS JOHNSON 4. Date of Death April 16, 1955 5. Sex male 6. Color or Race white 7. Marital Status married 8. Date of Birth 8-3-1881 9. Age last Birthday 73 10a. Usual Occupation Auctioneer b. Kind of Business livestock	11. Birthplace Derby, Iowa 12. Citizen of what country? U.S.A. 13. Father's Name Andrew G. Johnson 14. Mother's Maiden Name Charlotte G. Brown 15. Ever in U. S. Armed Service? Give War or Dates of Service no 16. Social Security No. 484-28-0109 17. Informant's Name D. A. Johnson 18. Cause of Death Chronic Myocarditis Nephritis Cerebral hemorrhage Arteriosclerosis /Jan. 16 '55 23a. Attendant's Name C. R. Harken 23b. Attendant's Address Osceola, Iowa 23c. Date Signed 4/22/55 Title	24a. Burial, Cremation, Removal Burial 24b. Date 4-19-1955 24c. Name of Cemetery or Crematory Derby Cemetery 24d. Location (City, Town or Co.) Derby, Iowa 25. Funeral Director's Name Keith Fielding 26. Date Rec'd by Local Reg. May 1-1955 27. Date Reg. by Co. Reg. May 6, 1955 28. Name of County Reg. Bertha E. Blanchard State License No. 30 File No. 59-43
1. Place of Death a. County Lucas Township b. City or Town Chariton, c. Length of Stay 10 yrs d. Full name of Hosp. or Inst. 1413 Roland 2. Usual Residence a. State Iowa b. County Lucas c. City or Town Chariton, d. Street Address 1413 Roland 3. Name of Deceased EMMA SOFFIA LARSON 4. Date of Death April 18, 1955 5. Sex 6. Color or Race 7. Marital Status	11. Birthplace Sweden 12. Citizen of what country? U.S.A. 13. Father's Name August Peterson 14. Mother's Maiden Name Karin Helena Englund 15. Ever in U. S. Armed Service? Give War or Dates of Service no 16. Social Security No. none 17. Informant's Name Mrs. Loran J. Wiren 18. Cause of Death Coronary Thrombosis 23a. Attendant's Name Title	24a. Burial, Cremation, Removal Burial 24b. Date 4-20-1955 24c. Name of Cemetery or Crematory Chariton Cemetery 24d. Location (City, Town or Co.) Chariton, Iowa 25. Funeral Director's Name Keith Fielding 26. Date Rec'd by Local Reg. April 23-1955 27. Date Reg. by Co. Reg. Estella R. Marshall 28. Name of County Reg. State License No. 30 File No. 59-44