

Cedar County

Phelps, Silas Munson (25 Sep 1840 - 31 Aug 1945). 45th IL Inf Co G. Lived on East St in Jerico Springs, Cedar Co Mo for 25 years. Enlisted in Company G, Illinois 45th Infantry Regiment on 20 Nov 1861. Promoted to Full Corporal. Mustered out on 12 Jul 1865 at Louisville, KY. Member of the Illinois G.A.R. Buried Twelve Mile Grove Cemetery, Seward, IL.

S. No. 2
M-8-43
1917-3

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

THE STATE BOARD OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

State File No. **27079**

SEP 6 1945 600
Registration District No. **106** Primary Registration District No. **106** Registrar's No. **11**

1. PLACE OF DEATH:
(a) County **Cedar Springs**
(b) City or town **Jerico Springs**
(c) Name of hospital or institution **1**
(d) Length of stay: In hospital or institution **2.5 years**
(e) In this community **2.5 years**

2. USUAL RESIDENCE OF DECEASED:
(a) State **Mo** (b) County **Cedar**
(c) City or town **Jerico Springs**
(d) Street No. **East St**
(e) Citizen of foreign country? **X X X**

3. (a) PRINT FULL NAME **SILAS MUNSON PHELPS**
(b) If veteran **Civil War** (c) Social Security name war No. **729.1**

4. Sex **Male** 5. Color or race **White** 6. (a) Single, widowed, married, divorced **Married**
6. (b) Name of husband or wife **Henrietta K. Phelps** 6. (c) Age of husband or wife if alive **76** years

7. Birth date of deceased **Sept 25 1840**

8. AGE: Years **104** Months **11** Days **6**

9. Birthplace **Rockford Ill.**

10. Usual occupation **Farming**

11. Industry or business **Farming**

12. Name **Silas T. Phelps**
13. Birthplace **Mo**
14. Maiden name **Miss Emma**
15. Birthplace **Mo**

16. Informant **Paul H. Phelps**
(b) Address **3948 HARVARD AVE Detroit 24 Mich**

17. (a) **Burial** (b) Date thereof **Sept 3, 1945**
(c) Place of burial or cremation **Seward Cemetery, Seward, Ill.**

18. (a) Signature of funeral director **Christ M. Walters**
(b) Address **Station 110**
(c) Date referred local registrar **Aug 31, 1945**

19. (a) **J. B. Schrock** (b) **J. B. Schrock**

20. DATE OF DEATH: Month **Aug** day **31** year **1945** hour **11** minute **12** AM

21. I hereby certify that I attended the deceased from **8-20-45** and that death occurred on the date and hour stated above. **8-31 1945**

Immediate cause of death **Myocarditis + Senility**

Other conditions (Include pregnancy within 3 months of death)

Major findings: **92%**

Of autopsy **92%**

22. If death was due to external causes, fill in the following:
(a) Accident, suicide, or homicide (specify) _____
(b) Date of occurrence _____
(c) Where did injury occur? _____
(d) Did injury occur in or about home, on farm, in industrial place, in public place? _____
(e) While at work? _____
(f) Means of injury _____

23. Signature **J. B. Schrock** Date signed **8-31-45**

156 (Licensed Embalmer's Statement on Reverse Side)

WRITE PLAINLY—USE UNFADING BLACK INK—MAKE A PERMANENT RECORD

Born - Ohio - B.D. or Res. not found - Sub Illinois

WAR DEPARTMENT
Q. M. G. Form No. 623
Approved Aug. 12, 1913
Revised May 12, 1923

PLEASE MAKE OUT AND RETURN IN DUPLICATE

APPROVED BY THE ADJUTANT GENERAL, STATE OF ILLINOIS

X UPRIGHT MARBLE

APPLICATION FOR HEADSTONE

NAME PHELPS, SILAS M. <i>Silas M. Phelps</i>	RANK Cpl.	COMPANY G	U. S. Regiment, State Organization, or Vessel 45TH ILLINOIS INFANTRY VOLUNTEERS	DATE OF DEATH August 31, 1945
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If World War veteran - (Civil War)			NAME OF CEMETERY Twelve Mile Grove	Located in or near -	
Division	State	Emblem Christian Hebrew None	CITY SEWARD	STATE Illinois	

C A 6-28-46 attached

TO BE SHIPPED TO **Delmar E. Phelps**
(Name of consignee)
at **630 Pope Street**
Rockford, (Winnebago Co.) Illinois
(Give town, county, and State)

PERMANENT ADDRESS **630 Pope Street**
Rockford, Ill.
DATE **MARCH 30, 1946**

I hereby agree to accept the headstone at a above destination, freight prepaid, and properly place same at decedent's grave.

Delmar E. Phelps Consignee.

no sub service found

DO NOT WRITE HERE

Verified **MAR 18 1946**

Ordered **GREEN MOUNTAIN, VT. OCT 22 1946**

From **6380111**

Shipped

Address **630 Pope St., Rockford, Ill.** Date **MARCH 30, 1946**

This application is for the UNMARKED* grave of a **soldier**. It is understood the stone will be furnished and delivered at the railroad station or steamboat landing above indicated, at Government expense, freight prepaid, and agreed it will be promptly removed and set up at private expense.

*State whether soldier, sailor, marine, Army nurse, etc.

Delmar E. Phelps Applicant.

*Stones must not be requested for any grave at which a private stone, monument, or other permanent marker is already erected. 3-8654

aw-o. 7 June 46 famr

8-20-1946