

## De Kalb County

**Bradford, John Jasper** (2 Apr 1841-27 Feb 1936) was the son of Daniel Bradford and Winaford Bullock. He had a twin brother, William Harrison as well as another brother, Jesse Nelson.

He enlisted in the Union Army on August 30, 1864 as a Private in Company C, 43rd MO Infantry under George M. Brown with the Federal Troops.

He married Caroline Jones on November 14, 1867 at Adams Twp., DeKalb County, Missouri. To this family was born Franklin, Mary Winifred, Joseph Bennett, Julia D., Daisey J., Daniel, Rosa A., and Laura A. Bradford.

Member of Kilpatrick Post 66.

Buried: Christian Chapel Cemetery

5267

MAR 23 1936 STANDARD CERTIFICATE OF DEATH

DEPARTMENT OF COMMERCE  
BUREAU OF THE CENSUS

1. PLACE OF DEATH:  
 County Ad. DeKalb State MISSOURI Registered No. 5  
 Township Agams or Village 5365  
 City Weatherby No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_  
(If death occurred in a hospital or institution, give its NAME instead of street and number)  
 Length of residence in city or town where death occurred \_\_\_\_\_ yrs. \_\_\_\_\_ mos. \_\_\_\_\_ days. How long in U. S., if of foreign birth? \_\_\_\_\_ yrs. \_\_\_\_\_ mos. \_\_\_\_\_ days.

2. FULL NAME John Jasper Bradford  
 Residence: No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_  
(Usual place of abode) (If nonresident, give city or town and State)

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>		21. DATE OF DEATH (month, day, and year) <u>Feb. 27</u> 193 <u>6</u>	
5a. If married, widowed, or divorced HUSBAND of _____ (or) WIFE of <u>Caroline Bradford</u>				22. I HEREBY CERTIFY, That I attended deceased from <u>Feb. 21</u> 193 <u>6</u> , to <u>Feb. 24</u> , 193 <u>6</u> I last saw him alive on <u>Feb. 24</u> , 193 <u>6</u> ; death is said to have occurred on the date stated above, at <u>12:20</u> p. m. The principal cause of death and related causes of importance were as follows: <u>Chronic Pyelocystitis</u>	
6. DATE OF BIRTH (month, day, and year) <u>April 2 1841</u>				Date of onset _____	
7. AGE Years <u>94</u> Months <u>10</u> Days <u>25</u> IF LESS than 1 day, _____ hrs. or _____ mins.				Other contributory causes of importance: <u>AS</u>	
8. Trade, profession, or particular kind of work done as spinner, Sawyer, bookkeeper, etc. <u>At Home</u>				Name of operation _____ Date of _____	
9. Industry or business in which work was done, as silk mill, sawmill, bank, etc. _____				What test confirmed diagnosis? _____ Was there an autopsy? _____	
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: Accident, suicide, or homicide? _____ Date of injury _____, 193 <u>6</u> Where did injury occur? _____ (Specify city or town, county, and State) Specify whether injury occurred in industry, in home, or in public place: _____ Manner of injury _____ Nature of injury _____	
11. Total time (years) spent in this occupation _____				24. Was disease or injury in any way related to occupation of deceased? _____	
12. BIRTHPLACE (city or town and State or country): <u>White Cloud Tenn.</u>				If so, specify _____ (Signed) <u>L. H. ...</u> (Address) <u>...</u>	
13. NAME: <u>David Bradford</u>				-209g	
14. BIRTHPLACE (city or town and State or country): <u>Tenn.</u>				U. S. GOVERNMENT PRINTING OFFICE: 1932 O-11-3184	
15. MAIDEN NAME: <u>Winnifred Bullock</u>					
16. BIRTHPLACE (city or town and State or country): <u>Indiana</u>					
7. INFORMANT (name and address): <u>Winnie Bradford Weatherby Mo.</u>					
8. BURIAL, CREMATION, OR REMOVAL: Place <u>Christian Chapel</u> Date <u>2/29-36</u> 193 <u>6</u>					
9. UNDERTAKER (name and address): <u>L. G. Pilcher Mayaville Mo.</u>					
10. FILED <u>3-10</u> , 193 <u>6</u> <u>James Fitz Gerald</u> Registrar					