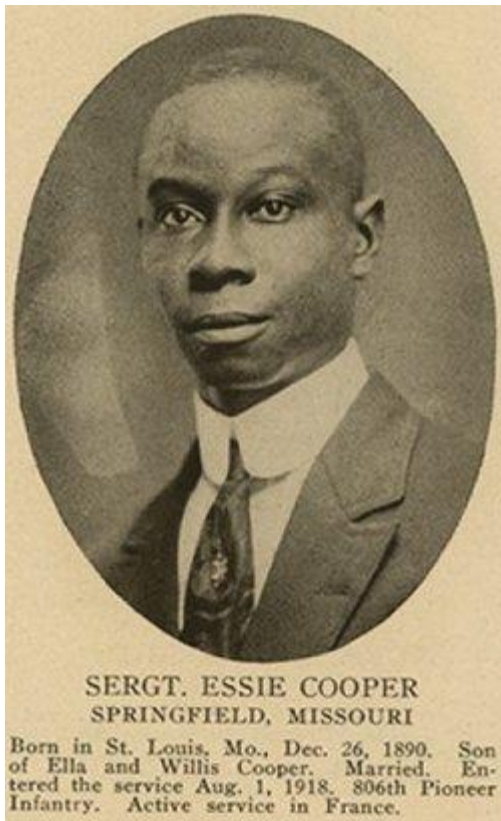


## Essie Cooper – Post 125 Member

Essie Cooper was born 26 Dec 1890 and passed away at 39 on 2 April 1930. He served in the Army, 806th Pioneer Infantry. He served from 8 January 1819 - 7 August 1919 and obtained the rank of Sergeant. Military History from Document below: Essie enlisted in August 1918 to Company C, 806<sup>th</sup> Infantry in Springfield, MO. He was discharged as a Private on July 8, 1919 at Camp Zach Taylor and admitted to the Veterans Hospital and died from Hemiplegia (Insanity caused by traumatic brain injury) on April 2, 1930.



REGISTRATION CARD No. 165

1 Name Essie Cooper Age 26

2 Name 704 Booneville Address SPRINGFIELD, MO

3 Date of birth Dec. 26 1890

4 Are you (1) a natural-born citizen, (2) a naturalized citizen, (3) an alien, (4) or have you declared your intention (specify which)? Natural Born

5 Where were you born? St. Louis, Mo. U.S.A.

6 If not a citizen, of what country are you a citizen or subject?

7 What is your present trade, occupation, or profession? Janitor

8 By whom employed? Post office

9 Where employed? Springfield, Mo.

10 Have you a father, mother, wife, child under 18, or a brother or sister under 18, solely dependent on you for support (specify which)? no

11 Married or single (which)? Single Race (specify which)? Negro

12 What military service have you had? Rank none Branch none

13 Do you claim exemption from draft (specify grounds)?

I affirm that I have verified above answers and that they are true.

Essie Cooper

24-5-34 A

REGISTRAR'S REPORT

1 Tall, medium, or short (specify which)? Medium Slender, medium, or stout (which)? Medium

2 Color of eyes? Black Color of hair? Black Bald? no

3 Has person lost arm, leg, hand, foot, or both eyes, or is he otherwise disabled (specify)? no

I certify that my answers are true, that the person registered has read his own answers, that I have witnessed his signature, and that all of his answers of which I have knowledge are true, except as follows:

M. Beaton  
(Signature of registrar)

Precinct 1-54 Ward

City or County Springfield

State Mo.

JUN 5 1917  
(Date of registration)

COOPER ESSIE 202 (10) C 1 439 704  
 Sgt Cas Det Demob Grp K  
 1103 Sherman Ave Springfield Mo A 1 180 102  
 Sn 4 259 018 Died T 3 537 296  
 Born 12/26/90 St. L R  
 Enl 8/1/18 Dis 7/8/19 - CL 300 649  
 I

U. S. VETERANS BUREAU  
 MAIL AND RECORDS  
 Form 7202-Rev. Sept., 1926

INDEX CARD

GPO 2-13609

Form V. S. 2

# INDIANA STATE BOARD OF HEALTH

DIVISION OF VITAL STATISTICS

## 'PLACE OF DEATH

County of Grant

Local No. 68

Township of Center

## CERTIFICATE OF DEATH

Town of National Military Home, Ind. (State Registered No. 11240)

City of Marion National Sanatorium St. Marion Ward 1

(If death occurs away from USUAL RESIDENCE give facts called for under "Special Information")

'FULL NAME Essie Cooper

### PERSONAL AND STATISTICAL PARTICULARS

SEX Male Color or Race Negro Single Married  
 Widowed or Divorced (Write the word)

NAME OF HUSBAND OR WIFE (of deceased) Edith Y. Cooper

DATE OF BIRTH (of deceased) Unk  
 Month Day Year

AGE 39 years 1 months 1 days or min.?  
 If LESS than 1 day, hrs.

OCCUPATION (a) Trade, profession, or particular kind of work Janitor  
 (b) General nature of industry, business, or establishment in which employed (or employer)

BIRTHPLACE OF DECEASED (State or country) Missouri

NAME OF FATHER Unk.

BIRTHPLACE OF FATHER (State or country) Unk

MAIDEN NAME OF MOTHER Unk

BIRTHPLACE OF MOTHER (State or country) Unk

THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) Records Nat. Sanatorium  
 (Address) Nat. Mil. Home, Ind.

Filed 4-2-30 19 30  
 Name and Address of Health Officer or Deputy

### MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH April 2, 19 30  
 (Month) (Day) (Year)

I HEREBY CERTIFY, That I attended deceased from Feb. 12 19 30 to April 2 19 30  
 that I last saw h. im alive on April 1, 19 30  
 and that death occurred, on the date stated above, at 1:27 A.M.

THE CAUSE OF DEATH\* was as follows:  
General Paralysis of the Ins ne

(Duration) ? yrs. ? mos. ? ds.

Contributory (Secondary) (Duration) yrs. mos. ds.

(Signed) Chmbock M. D.  
April 2, 19 30 (Address) Nat. Mil. Home, Ind.

\*State the Disease Causing Death, or in deaths from Violent Causes state (1) Means of Injury, and (2) whether Accidental, Suicidal or Homicidal

LENGTH OF RESIDENCE (For Hospitals, Institutions, Transients or Recent Residents)

At place of death yrs. 1 mos. 20 ds. in the State yrs. mos. ds.  
 Where was disease contracted, if not at place of death? Unk

Former or Usual Residence Springfield, Mo.

PLACE OF BURIAL OR REMOVAL DATE OF BURIAL  
Springfield, Mo. May 4, 19 30

UNDERTAKER B. F. Needham WAS THE BODY EMBALMED? Yes

ADDRESS Marion, Ind. EMBALMER'S LICENSE No. 7215

Essie Cooper.

Time and Place of Each Enlistment.	Rank.	Company and Regiment.	Time and Place of Discharge.	Cause of Discharge.	Disabilities when admitted to the Home.
Aug. 1918 Springfield, Mo.	Priv.	E 806 Lion Inf.	July 8, 1919 - Priv. Camp Zach, Taylor.	E. S. D.	682 - Hemiplegia, cause undetermined.

Where Born.	Age.	Height.	Complexion.	Color of Eyes.	Color of Hair.	Read and Write.	Religion.	Occupation.	Residence Subsequent to Discharge.	Married or Single.	Name and Address of Nearest Relative.
St. Louis, Mo.	38 3/4	5-5	Bro.	Bro.	Blk.	Rv.	Prot.	Janitor	Springfield, Mo.	Married	Wife - Edith J. Cooper, 1103 Sherman Ave., Springfield, Mo.

[illegible]

PAPERS.	EFFECTS.
Admission Paper <i>One</i>	Cash \$ 0
Army Discharge <i>One</i>	Member's Deposit Acc't, \$
Certificate of Service ✓	Liberty Loan Bonds, \$
Pension Certificate ✓	War Savings Stamps, \$
LOCATION OF GRAVE AND REMARKS	Pension Money \$
<i>Remains shipped to Springfield, Mo. for burial.</i>	Personal, Appraised at ✓ sold \$
	Total \$
	How Disposed of Approved June 2 1932 by letter off for settlement with widow, Edythe Cooper, 423 Sherman Ave. Springfield, Mo. Expensed June 12 1932. (P)