

Standard Form For Members of the Legislature

Name of Representative Monk, Jesse W. Senator \_\_\_\_\_

Represented Lyon and Osceola Counties, Iowa

1. Birthday and place 19 Jan 1837 South Norwich, Ontario, Canada

2. Marriage (s) date place

Anna Mary Argo 1867

3. Significant events for example:

A. Business \_\_\_\_\_

B. Civic responsibilities \_\_\_\_\_

C. Profession Farmer

4. Church membership \_\_\_\_\_

5. Sessions served 23<sup>rd</sup> General Assembly 1890

6. Public Offices

A. Local County Board of supervisors 1875 and 1887

B. State \_\_\_\_\_

C. National \_\_\_\_\_

7. Death 20 January 1930 McFall, Gentry County, Missouri Buried: Fairview Cem.

8. Children Jesse E.

9. Names of parents Nicholas and Catherine (Moyer) Monk

Monks, Jesse H.

10. Education \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Degrees \_\_\_\_\_  
\_\_\_\_\_

12. Other applicable information *Independent*  
*May 1871 he settled on Section 36 in Lyon County in Iowa*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## Jesse W Monk

Birth **Jan 1837** in [Canada, Eng](#)  
 Death

[Save this person to your tree](#)  
[Comment on this](#)

[View his family tree](#) [View family members](#) [More options](#)

[Overview](#) [Facts and Sources](#) [Media Gallery](#) [Comments](#) [Member Connect](#)

### Media Gallery

No photos, stories, audio or video have been added yet.

### Timeline [\(View details\)](#)

- 1837 [Birth](#) [1 source citation](#)  
Jan [Canada, Eng](#)
- 1864 [Arrival](#) [1 source citation](#)  
Age: 27
- 1867 [Marriage to Anna Mary Argo](#) [1 source citation](#)  
Age: 30
- 1900 [Residence](#) [1 source citation](#)  
Age: 63 [Miller, Gentry, Missouri](#)

### Comments

No comments have been added yet.

[Add a comment](#)

### Family Members

#### Parents

- No Father
- No Mother

[Show siblings](#)

#### Spouse & Children

- [Anna Mary Argo](#)  
1848 - 1919
- [Jessie E Monk](#)  
1880 - 1949

[Family group sheet](#)

### Source Information [view details](#)

#### 1900 United States Federal Census

1 citation provides evidence for **Name, Birth, Marriage, Residence, Arrival**

### Web Links

There are no weblinks available for this person.

[Search the web for Jesse W Monk](#)



## 1920 United States Federal Census

Name: **Jessie W Monk**  
 Home in 1920: **Miller, Gentry, Missouri**  
 Age: **83**  
 Estimated Birth Year: **abt 1837**  
 Birthplace: **Ontario**  
 Relation to Head of House: **Self (Head) [Head]**  
 Father's Birth Place: **New York**  
 Mother's Birth Place: **New York**  
 Marital Status: **Widowed [Widow]**  
 Race: **White**  
 Sex: **Male**  
 Home owned: **Own**  
 Able to read: **Yes**  
 Able to Write: **Yes**  
 Neighbors: [View others on page](#)

Household Members:	Name	Age
	<a href="#">Jessie W Monk</a>	<b>83</b>
	<a href="#">Lillian Monk</a>	<b>44</b>
	<a href="#">Vesper Monk</a>	<b>19</b>

**Source Citation:** Year: 1920; Census Place: Miller, Gentry, Missouri; Roll: T625\_919; Page: 4A; Enumeration District: 93; Image: 882.

**Source Information:**

Ancestry.com. 1920 United States Federal Census [database online]. Provo, UT, USA: Ancestry.com Operations Inc, 2010. Images reproduced by FamilySearch.

Original data: Fourteenth Census of the United States, 1920. (NARA microfilm publication T625, 2076 rolls). Records of the Bureau of the Census, Record Group 29. National Archives, Washington, D.C. For details on the contents of the film numbers, visit the following NARA web page: [NARA](#). Note: Enumeration Districts 819-839 are on roll 323 (Chicago City).

**Description:**

This database is an index to individuals enumerated in the 1920 United States Federal Census, the Fourteenth Census of the United States. It includes all states and territories, as well as Military and Naval Forces, the Virgin Islands, Puerto Rico, American Samoa, Guam, and the Panama Canal Zone. The census provides many details about individuals and families including: name, gender, age, birthplace, year of immigration, mother tongue, and parents' birthplaces. In addition, the names of those listed on the population schedule are linked to actual images of the 1920 Federal Census. [Learn more...](#)

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FEB 18 1930

MISSOURI STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS  
CERTIFICATE OF DEATH

747

WRITE PLAINLY, WITH UNFADING INK--THIS IS A PERMANENT RECORD

N. B.—Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important.

3

2

1

1. PLACE OF DEATH  
 County Gentry Registration District No. 3/13 File No. \_\_\_\_\_  
 Township Milledge Primary Registration District No. 5432 Registered No. 24  
 City \_\_\_\_\_ (No. \_\_\_\_\_) St. \_\_\_\_\_ Ward \_\_\_\_\_

2. FULL NAME Jesse W Monk  
 (a) Residence, No. R.F.D. McFall Mo. St. \_\_\_\_\_ Ward \_\_\_\_\_  
 (Usual place of abode) (If nonresident give city or town and State)  
 Length of residence in city or town where death occurred yrs. mos. ds. How long in U.S., if of foreign birth? yrs. mos. ds.

PERSONAL AND STATISTICAL PARTICULARS

3. SEX M 4. COLOR OR RACE W 5. SINGLE, MARRIED, WIDOWED OR DIVORCED (write the word) Widowed

5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF Anna Monk (decd)

6. DATE OF BIRTH (MONTH, DAY AND YEAR) Jan 19-1837

7. AGE YEARS MONTHS DAYS If LESS than 1 day, hrs. or min.  
93 | | 1

8. OCCUPATION OF DECEASED  
 (a) Trade, profession, or particular kind of work Farmer  
 (b) General nature of industry, business, or establishment in which employed (or employer) \_\_\_\_\_  
 (c) Name of employer \_\_\_\_\_

9. BIRTHPLACE (CITY OR TOWN) Antaris  
 (STATE OR COUNTRY)

PARENTS

10. NAME OF FATHER Nicholas Monk

11. BIRTHPLACE OF FATHER (CITY OR TOWN) unknown  
 (STATE OR COUNTRY)

12. MAIDEN NAME OF MOTHER Katherine Moyer

13. BIRTHPLACE OF MOTHER (CITY OR TOWN) unknown  
 (STATE OR COUNTRY)

14. INFORMANT Lillian Monk  
 (Address) McFall, Mo.

15. FILED 1/22 1930 D. F. T. Wedfall  
 REGISTRAR

2 MEDICAL CERTIFICATE OF DEATH

16. DATE OF DEATH (MONTH, DAY AND YEAR) Jan 20 1930

17. I HEREBY CERTIFY, That I attended deceased from \_\_\_\_\_, 19\_\_\_\_, to \_\_\_\_\_, 19\_\_\_\_, that I last saw h. \_\_\_\_\_ alive on \_\_\_\_\_, 19\_\_\_\_, and that death occurred, on the date stated above, at 12:15 P. m.

THE CAUSE OF DEATH\* WAS AS FOLLOWS:  
Cerebral apoplexy  
27 A  
27 (duration) 3 yrs. mos. ds.  
 CONTRIBUTORY arterio-sclerosis  
 (SECONDARY) (duration) 3 yrs. mos. ds.

18. WHERE WAS DISEASE CONTRACTED 7400  
 IF NOT AT PLACE OF DEATH \_\_\_\_\_

0 DID AN OPERATION PRECEDE DEATH? no DATE OF \_\_\_\_\_

WAS THERE AN AUTOPSY? no

WHAT TEST CONFIRMED DIAGNOSIS?  
 (Signed) F. T. Wedfall M. D.  
1/22 1930 (Address) McFall Mo.

\*State the DISEASE CAUSING DEATH, or in deaths from VIOLENT CAUSES, state (1) MEANS AND NATURE OF INJURY, and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL. (See reverse side for additional space.)

19. PLACE OF BURIAL, CREMATION, OR REMOVAL Fairview DATE OF BURIAL Jan 21 1930

20. UNDERTAKER G. S. Gromer ADDRESS Pattonburg Mo