

No. 2  
-1-4-41  
-17-35  
X26330

DEPARTMENT OF COMMERCE  
BUREAU OF THE CENSUS

MISSOURI STATE BOARD OF HEALTH  
STANDARD CERTIFICATE OF DEATH

39908  
621  
6 15  
6 9  
0

State File No. \_\_\_\_\_

Registrar's No. \_\_\_\_\_

Registration District No. 701

Primary Registration District No. 1003

1. PLACE OF DEATH:

(a) County \_\_\_\_\_  
(b) City or town St. Louis  
(If outside city or town limits, write "RURAL" and name of township)  
(c) Name of hospital or institution:  
Faith Hospital  
(If not in hospital or institution, write street number or location)  
(d) Length of stay: In hospital or institution One Hour  
(Specify whether  
In this community 13 Years  
years, months or days)

2. USUAL RESIDENCE OF DECEASED:

(a) State Missouri (b) County \_\_\_\_\_  
(c) City or town St. Louis  
(If outside city or town limits, write "RURAL")  
(d) Street No. 4747a Hammett Place  
(If rural, give location)  
(e) Citizen of foreign country? \_\_\_\_\_ (Yes or No)  
If yes, name country \_\_\_\_\_

3. (a) PRINT FULL NAME Helena Schmidt

3. (b) If veteran, name war \_\_\_\_\_ 3. (c) Social Security No. \_\_\_\_\_

4. Sex Female 5. Color or race White 6. (a) Single, widowed, married, divorced Married  
6. (b) Name of husband or wife Hugo Schmidt 6. (c) Age of husband or wife if alive \_\_\_\_\_ years  
7. Birth date of deceased November 27 1877  
(Month) (Day) (Year)

8. AGE: Years 64 Months -- Days 5 If less than one day hr. \_\_\_\_\_ min. \_\_\_\_\_

9. Birthplace Staunton Illinois  
(City, town, or county) (State or foreign country)

10. Usual occupation Housewife

11. Industry or business \_\_\_\_\_

12. Name John Lich  
13. Birthplace St Louis County Mo.  
(City, town, or county) (State or foreign country)  
14. Maiden name Elizabeth Faulstich  
15. Birthplace St Louis County Mo.  
(City, town, or county) (State or foreign country)

16. (a) Informant Hugo Schmidt  
(b) Address 4747a Hammett Place  
17. (a) Burial (b) Date thereof Dec 6 1941  
(Burial, cremation, or removal) (Month) (Day) (Year)  
(c) Place: burial or cremation Western Lutheran Cem

18. (a) Signature of funeral director Beiderwieden Funeral Home  
(b) Address 1936 St Louis Ave

19. (a) DEC 4 1941 (b) J. J. Bredek  
(Date received from Registrar) (Registrar's Signature)

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month December day 2  
year 1941 hour 6:15 minute P M.

21. I hereby certify that I attended the deceased from Nov 30, 1941  
1941 to Dec 2 1941;  
that I last saw her alive on Dec 2 1941  
and that death occurred on the date and hour stated above.

Immediate cause of death Ruptured heart  
Due to Coronary Occlusion  
Due to \_\_\_\_\_

Other conditions Diabetes mellitus  
(Include pregnancy within 3 months of death)

Major findings:  
Of operations \_\_\_\_\_  
Of autopsy eye

22. If death was due to external cause, fill in the following:  
(a) Accident, suicide, or homicide (specify) \_\_\_\_\_  
(b) Date of occurrence \_\_\_\_\_  
(c) Where did injury occur? \_\_\_\_\_ (City or town) \_\_\_\_\_ (County) \_\_\_\_\_ (State) \_\_\_\_\_  
(d) Did injury occur in or about home, on farm, in industrial place, in public place? \_\_\_\_\_

Incite at work? \_\_\_\_\_ (Specify type of place)  
(e) Means of injury \_\_\_\_\_

23. Signature Harry A Meyer (M.D. or other) \_\_\_\_\_  
Address 4903 Delmar Date signed 12/2/41

Duration Sudden  
PHYSICIAN Indefinite  
Underline the cause to which death should be charged statistically.

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

00  
17  
9

Er. Harry Ingers  
4903 Delmar.

10. A. M.

**STATEMENT BY LICENSED EMBALMER**

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me, or by.....

....., Registered Apprentice No. ....  
working under my personal supervision.

Signed..... *Harry Ingers*  
Licensed Embalmer No. *3737*  
P. O. Address *1936 St. Louis*

**Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license.)**

**If this body is not embalmed, fact should be so stated above.**