

S. No. 2  
 OM-2-43  
 5-17-39  
 X35697

STATE BOARD OF HEALTH OF MISSOURI  
 STANDARD CERTIFICATE OF DEATH

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

FILED FEB 6 1945  
 149

333

Registration District No. \_\_\_\_\_

Primary Registration District No. 1602

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

1. PLACE OF DEATH:  
 (a) County Jackson  
 (b) City or town Kansas City  
(If outside city or town limits, write "RURAL" and name of township)  
 (c) Name of hospital or institution:  
1014 West 21st  
(If not in hospital or institution, write street number or location)  
 (d) Length of stay: In hospital or institution \_\_\_\_\_  
 In this community 20 Years / (Specify whether years, months or days)

2. USUAL RESIDENCE OF DECEASED:  
 (a) State Missouri (b) County Jackson 48  
 (c) City or town Kansas City 3  
(If outside city or town limits, write "RURAL")  
 (d) Street No. 1014 West 21 St. 8  
(If rural, give location)  
 (e) Citizen of foreign country? \_\_\_\_\_ (Yes or No)  
 If yes, name country \_\_\_\_\_

3. (a) PRINT FULL NAME JOHN R CLEM  
 (b) If veteran, name war no.  
 (c) Social Security No. 96-09-3686

MEDICAL CERTIFICATION  
 20. DATE OF DEATH: Month 21st day January  
 year 1945 hour 11:00 minute A M.

4. Sex Male D 5. Color or race White  
 6. (a) Single, widowed, married, divorced Married  
 (b) Name of husband or wife Louise  
 (c) Age of husband or wife if alive 36 years  
 7. Birth date of deceased June 21 1899  
(Month) (Day) (Year)

21. I hereby certify that I attended the deceased from \_\_\_\_\_ 19\_\_\_\_ to \_\_\_\_\_ 19\_\_\_\_;  
 that I last saw him \_\_\_\_\_ alive on \_\_\_\_\_ 19\_\_\_\_;  
 and that death occurred on the date and hour stated above.  
 Immediate cause of death: gunshot wound left upper chest & neck

8. AGE:	Years	Months	Days	If less than one day
	<u>45</u>	<u>7</u>	<u>0</u>	_____ hr. _____ min.

Due to \_\_\_\_\_  
 Due to \_\_\_\_\_

9. Birthplace Unknown Oklahoma /  
(City, town, or county) (State or foreign country)  
 10. Usual occupation Mechanic

Other conditions: \_\_\_\_\_  
(Include pregnancy within 3 months of death)  
 Major findings: \_\_\_\_\_  
 Of operations: History & Inquestim  
 Of autopsy nat.

11. Industry or business \_\_\_\_\_  
 12. Name John Clem  
 13. Birthplace Unknown Alabama /  
(City, town, or county) (State or foreign country)  
 14. Maiden name Sarah Jane Box  
 15. Birthplace Unknown Alabama /  
(City, town, or county) (State or foreign country)

PHYSICIAN \_\_\_\_\_  
 Underline the cause to which death should be charged statistically.

16. (a) Informant Mrs. Lamer Clem  
 (b) Address 1014 W. 21st, Kansas City, Mo.  
 17. (a) Burial (b) Date thereof Jan. 24, 45  
(Burial, cremation, or removal) (Month) (Day) (Year)  
 (c) Place: burial or cremation Maple Hill Cemetery  
 18. (a) Signature of funeral director Smith & Tobin  
 (b) Address 20 W. Linwood Kansas City Mo  
 19. (a) 1-22-45 (b) D. E. Brown  
(Date received local registrar) (Registrar's signature)

22. If death was due to external causes, fill in the following:  
 (a) Accident, suicide, or homicide (specify) accident  
 (b) Date of occurrence 1-21-45  
 (c) Where did injury occur? 1014 W. 21st K.C., Jackson, Mo.  
(City or town) (County) (State)  
 (d) Did injury occur in or about home, on farm, in industrial place, in public place?  
about home  
 While at work? no (Specify type of place) (e) Means of injury 22 Ga. Rifle  
 23. Signature James Walker (M. D. or other) Coroner  
 Address 1424 Poplar Blvd. Date signed 1-22-45

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

MOTHER FATHER

---

---

**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..... *Chas. M. Quirk* .....

Licensed Embalmer No. *3774* .....

P. O. Address.....

**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.**