S. No. 2
M—1/47
7. 5-17-39

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

FEDERAL SECURITY AGENCY
National Office of Vital Statistics

FILED DEC 23 1948

MISSOURI DIVISION OF HEALTH
STANDARD CERTIFICATE OF DEATH

State File No. 41320
Registrar's No. 10746

Registration District No. 318
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: Jewish Hosp.
(If not in hospital or institution, write street number or location)
(d) Length of stay: In hospital or institution 1 yr/2 months
In this community 10 yrs. (Specify whether years, months or days)

2. USUAL RESIDENCE OF DECEASED:
(a) State Mo. (b) County
(c) City or town St. Louis
(If outside city or town limits, write "RURAL")
(d) Street No. 5077 Kensington
(If rural, give location)
(e) Citizen of foreign country? No. (Yes or No)
(Name of country)

aka Paul or Philipp Braunschweiger

3. (a) PRINT FULL NAME Paul Browning
3. (b) If veteran, name war No
3. (c) Social Security No.
4. Sex Male
5. Color or race White
6. (a) Single, widowed, married, divorced Widowed
6. (b) Name of husband or wife Emlie Unk.
6. (c) Age of husband or wife if alive years
7. Birth date of deceased (Month) (Day) (Year)
8. AGE: Years ab. 72 Months Days If less than one day hr. min.
9. Birthplace Hamburg (City, town, or county) Germany (State or foreign country)
10. Usual occupation Retired
11. Industry or business
FATHER
12. Name Louis Browning
13. Birthplace Germany (City, town, or county) (State or foreign country)
MOTHER
14. Maiden name unk.
15. Birthplace Germany (City, town, or county) (State or foreign country)
16. (a) Informant Mr. E. Browning
(b) Address 5895a Nina
17. (a) Burial (Burial, cremation, or removal) (b) Date thereof 12/13/48 (Month) (Day) (Year)
(c) Place: burial or cremation Beth. Ham. Hag.
18. (a) Signature of funeral director Berger Memorial
(b) Address 4715 McPherson
19. (a) DEC 13 1948 (Date received local registrar) (b) J. B. Lassiter (Registrar's signature)

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month Dec. day 12 year 1948 hour 5 minute 45 A. M.

21. I hereby certify that I attended the deceased from Dec 12 1948, 19.., 19.. that I last saw h.. alive on Dec 12 1948, 19.. and that death occurred on the date and hour stated above.

Duration

Immediate cause of death Terminal Pneumonia

Due to Cerebral Hemorrhage

Due to Generalized Arteriosclerosis

Other conditions Senility
(Include pregnancy within 3 months of death)

Major findings:
Of operations
Of autopsy

PHYSICIAN
Underline the cause of which death should be charged statistically.

22. If death was due to external causes, 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? (Specify type of place)
While at work? (e) Means of injury

23. Signature Norman Barnhart (M. D. or other)
Address 3814 Grand Date signed 12/13/48

Can legally 12-13-48

Jefferson City Printing Co.
(Licensed Embalmer's Statement on Reverse Side)

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.....

Licensed Embalmer No.....

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.

BC

THE STATE BOARD OF HEALTH OF MISSOURI
BUREAU OF VITAL STATISTICS

State of Missouri } ss.
City of St. Louis

State File No.
Local Registrar's No. 10746

AFFIDAVIT FOR CORRECTION OF A RECORD

On this 21st day of June, 1949, before me appears Ernest Browning, who, upon his oath, states that the original record of birth/death for Paul Browning died December 12, 1948, in the State of Missouri, and which was filed at St. Louis on 12/13/48, should be corrected as follows:

Item No. 3 should read Paul Browning (aka Paul Braunschweiger, aka (Philipp Braunschweiger)

Instead of Paul Browning

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

The above is true to the best of my knowledge, information and belief.

(SEAL)

X Affiant Ernest Browning son
Relationship.

5895 Nina Pl
Present Address.

Subscribed and sworn to before me this 21st day of June, 1949

My Commission expires June 8, 1951 Lawrence J. Diener Notary Public.

Affidavits containing erasures will not be accepted; draw one line through error and write above it.

Form V. S. 135
10M-5-43
X36929

S-41320