

FILED APR 15 1949

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

State File No. 8867

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

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BIRTH NO. _____ REG. DIST. NO. 156 PRIMARY REG. DIST. NO. 2001 Registrar's No. 163

1. PLACE OF DEATH a. COUNTY Jasper		2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission) a. STATE Missouri b. COUNTY Barry	
b. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Joplin (C)		c. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Capps Creek Township	
c. LENGTH OF STAY (in this place) 1 hour		d. STREET ADDRESS (If rural, give location) R 2 Monett Mo	
d. FULL NAME OF HOSPITAL OR INSTITUTION St John's Hospital			

3. NAME OF DECEASED (Type or Print) a. (First) b. (Middle) c. (Last) JOE J. WROBLESKI	4. DATE OF DEATH (Month) (Day) (Year) April 4 1949
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5. SEX M	6. COLOR OR RACE W	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married	8. DATE OF BIRTH May 11, 1888	9. AGE (In years last birthday) 60	IF UNDER 1 YEAR Months 10 Days 23	IF UNDER 12 Hrs. Hours Min.
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10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Farmer	10b. KIND OF BUSINESS OR INDUSTRY Farm	11. BIRTHPLACE (State or foreign country) Kansas City Missouri	12. CITIZEN OF WHAT COUNTRY? U.S.A.
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13a. FATHER'S NAME Antony Wroblecki	13b. MOTHER'S MAIDEN NAME Constance Dombroski	14. NAME OF HUSBAND OR WIFE Rose Wroblecki
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15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) no none	16. SOCIAL SECURITY NO. none	17. INFORMANT'S SIGNATURE OR NAME ADDRESS Mrs Rose Wroblecki R 2 Monett Mo
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18. CAUSE OF DEATH Enter only one cause per line for (a), (b), and (c) *This does not mean the mode of dying, such as heart failure, asthenia, etc. It means the disease, injury, or complication which caused death.	MEDICAL CERTIFICATION		INTERVAL BETWEEN ONSET AND DEATH less than 1 day
	I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Acute coronary occlusion		
	ANTECEDENT CAUSES Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last. DUE TO (b) Arteriosclerosis generalized DUE TO (c) 4201		
II. OTHER SIGNIFICANT CONDITIONS Conditions contributing to the death but not related to the disease or condition causing death.			

19a. DATE OF OPERATION	19b. MAJOR FINDINGS OF OPERATION	20. AUTOPSY? YES <input type="checkbox"/> NO <input type="checkbox"/>
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21a. ACCIDENT SUICIDE HOMICIDE (Specify)	21b. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)	21c. (CITY, TOWN, OR TOWNSHIP) (COUNTY) (STATE)
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21d. TIME OF INJURY (Month) (Day) (Year) (Hour) (Minute)	21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>	21f. HOW DID INJURY OCCUR?
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22. I hereby certify that I attended the deceased from Did not attend funeral, 1949, that I last saw the deceased alive on _____, 19____, and that death occurred at 10:45 A.m., from the causes and on the date stated above.

23a. SIGNATURE Wroblecki MD Surgeon General	23b. ADDRESS Joplin Nat'l Bank Bldg.	23c. DATE SIGNED 4-8-49
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24a. BURIAL, CREMATION, REMOVAL (Specify) Burial	24b. DATE Apr 7, 1949	24c. NAME OF CEMETERY OR CREMATORY Catholic Church Cemetery	24d. LOCATION (City, town, or county) (State) Pulaski Field Barry Co, Mo.
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DATE REC'D BY LOCAL REG. 4-8-49	REGISTRAR'S SIGNATURE Eda James 138	25. FUNERAL DIRECTOR'S SIGNATURE ADDRESS Dillon Funeral Home, Monett Mo.
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by details (See instructions 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 _____

Student Embalmer No. _____

working under my personal supervision.

Signed _____

David Dillon

Signed _____

Student Embalmer

Licensed Embalmer No. 3898

P. O. Address Monett, Mo

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.