DEC 27 1950

THE DIVISION OF HEALTH OF MISSOURI

STANDARD CERTIFICATE OF DEATH

State File No. 42646

BIRTH NO. _____ REG. DIST. NO. 318 PRIMARY REG. DIST. NO. 1003 Registrar's No. 10597

1. PLACE OF DEATH
a. COUNTY ~~St. Louis, Missouri~~ O
b. CITY OR TOWN (If outside corporate limits, write RURAL and give township) St. Louis, Missouri
c. LENGTH OF STAY (in this place) 34 DAYS
d. FULL NAME OF HOSPITAL OR INSTITUTION (If not in hospital or institution, give street address or location) BARNES HOSPITAL

2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission).
a. STATE Mo
b. COUNTY Jefferson
c. CITY OR TOWN (If outside corporate limits, write RURAL and give township) Rural Meramec Twelve
d. STREET ADDRESS (If rural, give location) House Springs RR#1

3. NAME OF DECEASED (Type or Print)
a. (First) MAUDE
b. (Middle) A.
c. (Last) NANSEL

4. DATE OF DEATH (Month) 12 (Day) 10 (Year) 1950

5. SEX F 1
6. COLOR OR RACE W
7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) M 1
8. DATE OF BIRTH March 8 - 1893
9. AGE (In years last birthday) 57 — IF UNDER 1 YEAR Months Days — IF UNDER 24 HRS. Hours Min.

10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) House work
10b. KIND OF BUSINESS OR INDUSTRY Own Home
11. BIRTHPLACE (State or foreign country) Old Mines Mo
12. CITIZEN OF WHAT COUNTRY U.S.A.

13a. FATHER'S NAME James Paul
13b. MOTHER'S MAIDEN NAME Unknown
14. NAME OF HUSBAND OR WIFE Theodore Hansel

15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) No (If yes, give war or dates of service) No
16. SOCIAL SECURITY NO. None
17. INFORMANT'S SIGNATURE OR NAME, ADDRESS Edward Hull R#12 Kirkwood Mo

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

I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Questionable - Chronic Starvation

ANTECEDENT CAUSES
Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last.
DUE TO (b) Carcinoma of Rectum
DUE TO (c) Abdominal Perineal Resection

II. OTHER SIGNIFICANT CONDITIONS
Conditions contributing to the death but not related to the disease or condition causing death.

INTERVAL BETWEEN ONSET AND DEATH

19a. DATE OF OPERATION
19b. MAJOR FINDINGS OF OPERATION
20. AUTOPSY? YES [X] NO [ ]

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)

21d. TIME OF INJURY (Month) (Day) (Year) (Hour) m.
21e. INJURY OCCURRED WHILE AT WORK [ ] NOT WHILE AT WORK [ ]
21f. HOW DID INJURY OCCUR? 154X

22. *I hereby certify that I attended the deceased from* Nov. 6, 1950, *to* Dec. 10, 1950, *that I last saw the deceased alive on* Dec. 10, 1950, *and that death occurred at* 12:50A *m., from the causes and on the date stated above.*

23a. SIGNATURE (Degree or title) FR Bradley MD
23b. ADDRESS Barnes Hosp
23c. DATE SIGNED 12/10/50

24a. BURIAL, CREMATION, REMOVAL (Specify) Burial
24b. DATE 12/13/50
24c. NAME OF CEMETERY OR CREMATORY St Pauls Cemetery
24d. LOCATION (City, town, or county) House Springs Antonia Rd (State) Mo

DATE REC'D BY LOCAL REG. DEC 12 1950
REGISTRAR'S SIGNATURE J. B. Lasater
25. FUNERAL DIRECTOR'S SIGNATURE [illegible] **ADDRESS** House Springs Mo

(Licensed Embalmer's Statement on Reverse Side)

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

10597

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.....

.....,

working under my personal supervision.

Student Embalmer No.....

Signed J. Allen Davis Jr

Signed.....
Student Embalmer

Licensed Embalmer No. 4053

P. O. Address St. Louis 10 Mo

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

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