No. 300
10.48

FILED JUN 4 1951

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

State File No. 19144

BIRTH NO. _____ REG. DIST. NO. 333 PRIMARY REG. DIST. NO. 3074 Registrar's No. 86

1003

1. PLACE OF DEATH
a. COUNTY: SCOTT
b. CITY OR TOWN (If outside corporate limits, write RURAL and give township): SIKESTON
c. LENGTH OF STAY (In this place):
d. FULL NAME OF HOSPITAL OR INSTITUTION (If not in hospital or institution, give street address or location): 716 PARK Home

2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission).
a. STATE: Mo
b. COUNTY: SCOTT
c. CITY OR TOWN (If outside corporate limits, write RURAL and give township): SIKESTON 1003
d. STREET ADDRESS (If rural, give location): 716 PARK 0

3. NAME OF DECEASED (Type or Print)
a. (First): EUGENE
b. (Middle): CONRAD
c. (Last): WIRTH

4. DATE OF DEATH (Month) (Day) (Year): 5-29-51

5. SEX: MALE
6. COLOR OR RACE: WHITE
7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify): MARRIED
8. DATE OF BIRTH: 7-22-1893
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): BOOKKEEPING
10b. KIND OF BUSINESS OR INDUSTRY: BANK OF SIKESTON
11. BIRTHPLACE (State or foreign country): PERRY Co MO 0
12. CITIZEN OF WHAT COUNTRY?: USA.
13a. FATHER'S NAME: CONRAD WIRTH
13b. MOTHER'S MAIDEN NAME: ISABELLE URBAN
14. NAME OF HUSBAND OR WIFE: BLANCHE WIRTH
15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown): YES — (If yes, give war or dates of service): W. W. I
16. SOCIAL SECURITY NO.: 494-05-0053
17. INFORMANT'S SIGNATURE OR NAME: Mrs Blanche Wirth — ADDRESS: Sikeston 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): Coronary Thrombosis — INTERVAL BETWEEN ONSET AND DEATH: 5 minutes.

ANTECEDENT CAUSES

Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last.

DUE TO (b): —

DUE TO (c): —

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: — 4201
20. AUTOPSY? YES ☐ 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?:

22. *I hereby certify that I attended the deceased from* 1946, 19__, *to* 5-29, 1951, *that I last saw the deceased alive on* 5/29, 1951, *and that death occurred at* 11:15P m., *from the causes and on the date stated above.*

23a. SIGNATURE: E. D. Urban (Degree or title): M.D
23b. ADDRESS: Sikeston
23c. DATE SIGNED: 6-1-56

24a. BURIAL, CREMATION, REMOVAL (Specify): BURIAL
24b. DATE: 5-31-51
24c. NAME OF CEMETERY OR CREMATORY: City of Sikeston
24d. LOCATION (City, town, or county) (State): SIKESTON Mo

DATE REC'D BY LOCAL REG.: June 1-51
REGISTRAR'S SIGNATURE: Mrs Ella Hunter
25. FUNERAL DIRECTOR'S SIGNATURE: Welsh Funeral Home — ADDRESS: Sikeston, Mo

(Licensed Embalmer's/Statement on Reverse Side)

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

JUL 3 1951

JUN 4 1951

ENCLOSED
JUN 1 - 1951

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.

Student —
Student Embalmer

Signed Raymond Crews

Licensed Embalmer No. 3467

P. O. Address Sikeston 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.