

**THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH**

22824

State File No.

300
48

FILED JUN 27 1952

5498

BIRTH NO. _____		REG. DIST. NO. 318	PRIMARY REG. DIST. 1002	Registrar's No. 5498
1. PLACE OF DEATH a. COUNTY _____		2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission) a. STATE Mo. b. COUNTY _____		
b. CITY (If outside corporate limits, write RURAL and give township) OR TOWN St. Louis		c. LENGTH OF STAY (In this place) _____		
d. FULL NAME OF HOSPITAL OR INSTITUTION Mo. Pacific Hosp.		d. STREET ADDRESS (If rural, give location) 22 1524 Chouteau Av.		
3. NAME OF DECEASED (Type or Print) a. (First) JOHN b. (Middle) _____ c. (Last) WILSON		4. DATE OF DEATH (Month) (Day) (Year) 6/13/52		
5. SEX Male	6. COLOR OR RACE White	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married	8. DATE OF BIRTH 8/10/1880	9. AGE (In years last birthday) 71 yr. If UNDER 1 YEAR: Months _____ Days _____ If UNDER 4 HRS.: Hours _____ Mins. _____
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Conductor (Retired)		10b. KIND OF BUSINESS OR INDUSTRY R.R.		11. BIRTHPLACE (City and State or Foreign Country) Ohio /
12. CITIZEN OF WHAT COUNTRY? USA				
13a. FATHER'S NAME Unk. Wilson		13b. MOTHER'S MAIDEN NAME Unknown		14. NAME OF HUSBAND OR WIFE Anna B. Wilson
15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) _____		16. SOCIAL SECURITY NO. _____		17. INFORMANT'S SIGNATURE OR NAME Anna B. Wilson ADDRESS 1524 Chouteau
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, asthma, etc. It means the disease, injury, or complication which caused death.		I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Diabetic Acidosis ANTECEDENT CAUSES Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last. DUE TO (b) Diabetes Mellitus Many years DUE TO (c) _____ II. OTHER SIGNIFICANT CONDITIONS: Conditions contributing to the death but not related to the disease or condition causing death. Cirrhosis of liver 2 yrs. Arteriosclerosis		INTERVAL BETWEEN ONSET AND DEATH 2 hrs.
19a. DATE OF OPERATION _____		19b. MAJOR FINDINGS OF OPERATION _____		20. AUTOPSY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
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) _____		21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>		21f. HOW DID INJURY OCCUR? 260X
22. I hereby certify that I attended the deceased from May 17 , 19 51 , to June 13 , 19 52 , that I last saw the deceased alive on Dec 22 , 19 51 , and that death occurred at 3:30 p.m., from the causes and on the date stated above.				
23a. SIGNATURE Edward O. Probst M.D. (Degree or title)		23b. ADDRESS Mo. Pac. Hosp.		23c. DATE SIGNED 6/14/52
24a. BURIAL, CREMATION, REMOVAL (Specify) Removal		24b. DATE 6/16/52		24c. NAME OF CEMETERY OR CREMATORY Sun Set Burial Prk.
24d. LOCATION (City, town, or county) (State) St. Louis Co. Mo.				
DATE REC'D BY LOCAL REG. JUN 16 1952		REGISTRAR'S SIGNATURE J. Earl Smith M.D.		25. FUNERAL DIRECTOR'S SIGNATURE E. J. Schurz ADDRESS 3125 Lafayette

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

E. P. (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 _____

Student Embalmer No. _____

working under my personal supervision.

Student
Student Embalmer

Signed Joseph B. Vollmer

Licensed Embalmer No. 49014

P. O. Address St. Louis, 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.