No. 300
10-48

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

35728

State File No. .....

FILED NOV 13 1953

BIRTH NO. _____ REG. DIST. NO. 141 PRIMARY REG. DIST. NO. 3025 Registrar's No. 4

461
0

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

1. PLACE OF DEATH
a. COUNTY: Howell
b. CITY OR TOWN (If outside corporate limits, write RURAL and give township): West Plains
c. LENGTH OF STAY (in this place): 11 yrs
d. FULL NAME OF HOSPITAL OR INSTITUTION (If not in hospital or institution, give street address or location): Stoll Hosp.

2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission)
a. STATE: Missouri
b. COUNTY: Howell
c. CITY OR TOWN (If outside corporate limits, write RURAL and give township): West Plains
d. STREET ADDRESS (If rural, give location): Rt 3

0460
0

3. NAME OF DECEASED (Type or Print)
a. (First): Loseta
b. (Middle): E.
c. (Last): Fox

4. DATE OF DEATH (Month) (Day) (Year): 10-25-53

5. SEX: F 1
6. COLOR OR RACE: W
7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify): W 2
8. DATE OF BIRTH: 12-5-1881
9. AGE (In years last birthday): 71 | IF UNDER 1 YEAR Months: 10 | Days: 20 | IF UNDER 24 HRS. Hours: | Min.:

10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired): Housewife
10b. KIND OF BUSINESS OR INDUSTRY: ✓ ✓
11. BIRTHPLACE (State or foreign country): Howell Co. Mo.
12. CITIZEN OF WHAT COUNTRY?: USA

13a. FATHER'S NAME: Jno Karr
13b. MOTHER'S MAIDEN NAME: Susan Hodges
14. NAME OF HUSBAND OR WIFE: Charlie Fox

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: Mrs E. B. Hopkins, West Plains Mo
ADDRESS:

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): Chronic Myocarditis (acute — INTERVAL BETWEEN ONSET AND DEATH: 3 weeks)

ANTECEDENT CAUSES
Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last.
DUE TO (b): Hyperthyroidism — 3 months
DUE TO (c): Nodular goitre — 6 months

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

19a. DATE OF OPERATION: 0
19b. MAJOR FINDINGS OF OPERATION: 251 X
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* 7/17/53, 19__, *to* 10-10, 1953, *that I last saw the deceased alive on* 10-25, 1953, *and that death occurred at* 4:30 p m., *from the causes and on the date stated above.*

23a. SIGNATURE (Degree or title): J B Stoll M.D.
23b. ADDRESS: West Plains Mo
23c. DATE SIGNED: 11-2-53

24a. BURIAL, CREMATION, REMOVAL (Specify): B
24b. DATE: 10/29-53
24c. NAME OF CEMETERY OR CREMATORY: Union Mary
24d. LOCATION (City, town, or county) (State): Pottersville Mo

DATE REC'D BY LOCAL REG.: 11-10-53
REGISTRAR'S SIGNATURE: Beatrice Cook
379
25. FUNERAL DIRECTOR'S SIGNATURE: Robert Z
ADDRESS: West Plains Mo

(Licensed Embalmer's Statement on Reverse Side)

DEC 11 1953

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 L. D. Roberts

Licensed Embalmer No. 3437

P. O. Address Lewistown

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.