

FILED JUN 24 1954

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

State File No. **21079**
REGISTRAR'S No. **4672**

BIRTH NO. _____		REG. DIST. NO. 318		PRIMARY REG. DIST. NO. 1003		REGISTRAR'S No. 4672	
1. PLACE OF DEATH a. COUNTY St. Louis				2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission) a. STATE Missouri b. COUNTY St. Louis			
b. CITY OR TOWN St. Louis		c. LENGTH OF STAY (In this place) 11 Weeks		c. CITY OR TOWN St. Louis		2269	
d. FULL NAME OF HOSPITAL OR INSTITUTION St. Johns Hospital				d. STREET ADDRESS (If rural, give location) 26 1621 N 8th St.			
3. NAME OF DECEASED (Type or Print) Hilda		a. (First) C.		b. (Middle) Parr		c. (Last)	
4. DATE OF DEATH May 21 1954		4. DATE OF DEATH (Month) May		4. DATE OF DEATH (Day) 21		4. DATE OF DEATH (Year) 1954	
5. SEX Female		6. COLOR OR RACE White		7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Never Married		8. DATE OF BIRTH January 19, 1901	
9. AGE (In years last birthday) 53		IF UNDER 1 YEAR Months 4		IF UNDER 1 YEAR Days 2		IF UNDER 1 YEAR 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 Home Duties		11. BIRTHPLACE (City and State or Foreign Country) Wentzville, Mo. R.R.		12. CITIZEN OF WHAT COUNTRY U.S.A.	
13a. FATHER'S NAME Peter Parr		13b. MOTHER'S MAIDEN NAME Rosina Mette		14. NAME OF HUSBAND OR WIFE None			
15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) No		16. SOCIAL SECURITY NO. 494-36-5286		17. INFORMANT'S SIGNATURE OR NAME Lena Singer		ADDRESS St. Louis, 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, asthma, etc. It means the disease, injury, or complication which caused death.		MEDICAL CERTIFICATION I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Carcinoma of ovary with metastases. 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.				INTERVAL BETWEEN ONSET AND DEATH 3 mos	
19a. DATE OF OPERATION		19b. MAJOR FINDINGS OF OPERATION				20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" 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? 175X			
22. I hereby certify that I attended the deceased from 3-7-54 , 19 54 , to 5-24 , 19 54 , that I last saw the deceased alive on 5-20 , 19 54 , and that death occurred at 5:20 P.M. , from the causes and on the date stated above.							
23a. SIGNATURE (Degree or title) R. Chapman, M.D.				23b. ADDRESS 923 Chapman		23c. DATE SIGNED 5-25-54	
24a. BURIAL, CREMATION, REMOVAL (Specify) Burial		24b. DATE May 21, 1954		24c. NAME OF CEMETERY OR CREMATORY St. Theodor's Cemetery		24d. LOCATION (City, town, or county) (State) Flint Hill Mo.	
DATE REC'D BY LOCAL REG. MAY 25 1954		REGISTRAR'S SIGNATURE Carl Smith		25. FUNERAL DIRECTOR'S SIGNATURE ADDRESS T. E. Pitman Funeral Home Wentzville, Mo			

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

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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 _____

Tarleton James Pitman Student Embalmer No. 497

working under my personal supervision.

Student Tarleton James Pitman
Student Embalmer

Signed Junetta M. Pitman

Licensed Embalmer No. 3055

P. O. Address Wentzville, 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.