

MISSOURI DIVISION OF HEALTH - STANDARD CERTIFICATE OF DEATH

-62-024477

DO NOT WRITE ON THIS STUB

AMENDED

Registration District No. 318 Primary Registration District No. 1003 Registrar's No. 6547 STATE FILE NUMBER

**FILED JUL 12 1962**

1. PLACE OF DEATH  
 a. COUNTY \_\_\_\_\_  
 b. CITY (If outside corporate limits, give TOWNSHIP only) OR TOWN St. Louis Length of stay in 1b 3 Wks.  
 c. FULL NAME OF (If NOT in hospital, give location) HOSPITAL OR INSTITUTION St. Lukes Hospital Inside Limits Yes  No   
 d. STREET ADDRESS (If outside, give location) 4220 E Sacramento Reside on Farm Yes  No

3. NAME OF DECEASED First Middle Last 4. DATE OF DEATH Month Day Year  
Cornelius M. Callahan July 1 1962

5. SEX Male 6. COLOR OR RACE White 7. Married  Never Married  Widowed  Divorced  8. DATE OF BIRTH 8-13-84 9. AGE (last birthday) 77 IF UNDER 1 YEAR Months Days IF UNDER 24 HR Hours Min.

10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Elevator Constructor (ret.) 10b. KIND OF BUSINESS OR INDUSTRY Otis Elev. 11. BIRTHPLACE (City and state or country) St. Louis, Mo. 12. CITIZEN OF WHAT COUNTRY U.S.A.

13a. FATHER'S NAME Cornelius Callahan 13b. MOTHER'S MAIDEN NAME Catherine Buckley 14. NAME OF HUSBAND OR WIFE Laura A. Callahan

15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of serv) No 16. SOCIAL SECURITY NO. \_\_\_\_\_ 17. INFORMANT 8 Mrs. Laura A. Callahan Address 4220 E Sacramento

18. CAUSE OF DEATH (Enter only one cause per line PART I. DEATH WAS CAUSED BY:  
 IMMEDIATE CAUSE (a) Lower Nephron Nephrosis INTERVAL BETWEEN ONSET AND DEATH 7 day  
 Conditions, if any, which gave rise to above cause (a), stating the underlying cause last. DUE TO (b) Bilateral Pneumonia lobar 7 day  
 DUE TO (c) Cardiac ischemia - (Coronary occlusion) 7 1/2 h.

PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal disease condition given in PART I (a) Cholangitis - Common duct Obstruction PART III. If deceased was female was there a pregnancy in last 90 days.  Yes  No  Unknown

19. WAS AUTOPSY PERFORMED? YES  NO  20a. ACCIDENT  SUICIDE  HOMICIDE  20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in PART I or PART II of item 18.) 4201

20c. TIME OF INJURY Hour Month, Day, Year  
 20d. INJURY OCCURRED WHILE AT WORK  NOT WHILE AT WORK  20e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.) \_\_\_\_\_ 20f. CITY, TOWN, OR LOCATION COUNTY STATE

21. I attended the deceased from Sept 57 to July 1-62 and last saw him live on 7-1-62 Death occurred at 9:50 P.m. on the date stated above, and to the best of my knowledge, from the causes stated.

22a. SIGNATURE (Degree or title) Raymond E. Duedeman M.D. 22b. ADDRESS 4948 Natural Bridge Rd 22c. DATE SIGNED 7/2/62

23a. BURIAL, CREMATION, REMOVAL (Specify) removal 23b. DATE 7-5-62 23c. NAME OF CEMETERY OR CREMATORY Memorial Park Cemetery 23d. LOCATION (City, town, or county) (State) St. Louis County Mo.

24. FUNERAL DIRECTOR ADDRESS Drehmann-Harral, 1905 Union Blvd. 25. DATE RECD. BY LOCAL REG. JUL 3 1962 26. REGISTRAR'S SIGNATURE Neal Smith M.D.

VS 300 Rev. 4/59  
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DATE AMENDED  
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 AMENDMENTS ON THIS RECORD ARE AS FOLLOWS  
 INSTEAD OF  
 SHOULD READ  
 ITEM NO.

AMENDED  
 DOCUMENT  
 MEDICAL CERTIFICATION  
 BY AFFIDAVIT OF

USE BLACK INK OR TYPEWRITER RIBBON

81

Dr. Ray Sundermann  
4943 Nat'l. Bridge  
Ev 5-3083  
Hrs. 1-5

**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 \_\_\_\_\_  
Signature of Student Embalmer

Signed

*Warren A. Carver*

Licensed Embalmer No.

*3534*

P. O. Address \_\_\_\_\_

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 embalmed by a STUDENT, he also shall sign in his OWN handwriting.

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