

NOV 22 1934

MISSOURI STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

Do not use this space.

37246

1. PLACE OF DEATH

County St. Louis Registration District No. 1111
Township Central Primary Registration District No. 6033
City St. Louis (No. 3718 Jennings rd.)

File No. _____
Registered No. 306 St. _____ Ward)

2. FULL NAME

John L. Pardue
(a) Residence, No. 6205 Lenox Ave. St. _____ Ward. _____
(Usual place of abode) Welliston, Mo. (If nonresident, give city or town and State)
Length of residence in city or town where death occurred yrs. mos. ds. How long in U. S., if of foreign birth? yrs. mos. ds.

PERSONAL AND STATISTICAL PARTICULARS

3. SEX Male 4. COLOR OR RACE White 5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word) Married
5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF Daisy Pardue
6. DATE OF BIRTH (MONTH, DAY, AND YEAR) June 21, 1894
7. AGE YEARS MONTHS DAYS If LESS than 1 day, hrs. or min. 50 4 7

8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Optometrist
9. Industry or business in which work was done, as silk mill, saw mill, bank, etc. _____
10. Date deceased last worked at this occupation (month and year) _____ 11. Total time (years) spent in this occupation _____

12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) St. Louis Missouri

13. NAME John P. Pardue

14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Alabama

15. MAIDEN NAME Mattie Adams

16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Alabama

17. INFORMANT (ADDRESS) Mrs. Daisy Pardue 6205 Lenox Ave.

18. BURIAL, CREMATION, OR REMOVAL PLACE Local Bell Co. Co. DATE October 31, 1934

19. UNDERTAKER (ADDRESS) Geo. L. Pleitseh, Inc. 5966 Easton Ave.

20. FILED 10-31 19 34 W. Baehner Registrar. (Address) 3718 Jennings Rd.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) 10/28/34 19
22. I HEREBY CERTIFY, That I attended deceased from _____, 19____, to _____, 19____
I last saw h. _____ alive on _____, 19____. Death is said to have occurred on the date stated above, at 8PM m.
The principal cause of death and related causes of importance were as follows:

From all evidence gathered from the family, this man has been suffering from angina pectoris. Had three most severe attacks the last three months and history of cardiac asthma and shortness of breath. He had a little work shop at the rear of his home, where he would make devices for optometry and _____
Date of onset _____
Other contributory causes of importance: _____

Name of operation _____ Date of _____
What test confirmed diagnosis? _____ Was there an autopsy? yes

23. If death was due to external causes (violence, fire) in also the following: Accident, suicide, or homicide? _____ Date of injury _____
Where did injury occur? _____ (Specify city or town, county, and State)
Specify whether injury occurred in industry, in home, or in public place. _____
Manner of injury _____
Natura of injury _____

24. Was disease or injury in any way related to occupation of deceased? _____
If so, specify _____
(Signature) John B. Timon M.D. 10/30/34
(Address) 3718 Jennings Rd.
W. Baehner Registrar. (Address) 3718 Jennings Rd.

N. B.—Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD

328

different little patents for telephone devices, as a source of hobby. From every indication he was brazing or soldering brass and bronze material with commercial potassium cyanide, used in case hardening and using sulfuric acid to act as a plastic or to compell adherence of the brazing metal. The fumes that was thrown off from this action are deadly poison.

This man was doing this work without wearing a mask.

We made all these tests in the laboratory to prove this factor. We also made laboratory tests of the stomach content, and same showed some slight reaction of the stomach fluids of potassium cyanide.

Whether this man died from the fumes as above stated, or from the angina pectoris, is a question. Statement from family and angina pectoris being the origin, and inhaling the fumes, of the above mentioned, was the cause of his death.
no doubt