

Jan 23 1936

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

Do not use this space.

41329

1. PLACE OF DEATH

County .....

Registration District No. 791

Township .....

Primary Registration District No. 1003

City St. Louis

(No. 1853<sup>2</sup> Madison St.)

File No. ....

10547

Registered No. ....

St. .... Ward)

2. FULL NAME

May Hill

(a) Residence, No. 1853<sup>2</sup> Madison St. 26 Ward.

(Usual place of abode)

(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 M. 4. COLOR OR RACE W. 5. SINGLE, MARRIED, WIDOWED, OR DIVORCED Married (write the word)

5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF

James Hill

6. DATE OF BIRTH (MONTH, DAY, AND YEAR) May 13 - 1884

7. AGE YEARS MONTHS DAYS If LESS than 1 day, ..... hrs. or ..... min.

51 6 28

8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. at Home

9. Industry or business in which work was done, as silk mill, saw mill, bank, etc. prof

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) Mo.

13. NAME Charles Mc. Carthy

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

15. MAIDEN NAME Elizabeth Wotlia

16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) St. Louis Mo.

17. INFORMANT Michael Mc. Carthy (ADDRESS) 4780 Bancroft Av.

18. BURIAL, CREMATION, OR REMOVAL PLACE Calvary DATE Dec 14 1935

19. UNDERTAKER Cullinane Bros (ADDRESS) 1710 N. Grand Blvd.

20. FILED DEC 23 1935 J. F. Bredeck Registrar.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) Dec 11 - 1935

22. I HEREBY CERTIFY, That I attended deceased from Dec 7 1935 to Dec 11 1935

I last saw him alive on Dec 11 1935. Death is said to have occurred on the date stated above, at 9:00 a.m.

The principal cause of death and related causes of importance were as follows:

Cerebral hemorrhage with thrombosis of arteries

Other contributory causes of importance: 930

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

23. If death was due to external causes (violence), fill in also the following: Accident, suicide, or homicide? ..... Date of injury ..... 19.....

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 ..... Nature of injury .....

24. Was disease or injury in any way related to occupation of deceased? If so, specify

(Signed) J. F. Fitzgerald, M. D. (Address) 115 1/2 E. 1st Av.

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

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.

The following table shows the results of the survey conducted in the year 1970-1971. The data is presented in a tabular format, with columns representing different categories and rows representing specific data points. The table is organized into several sections, each corresponding to a different aspect of the survey.

Category	Sub-category	Value
Section 1	Item 1	12.5
	Item 2	15.2
	Item 3	18.7
	Item 4	21.3
	Item 5	24.8
	Item 6	27.4
	Item 7	30.9
	Item 8	33.5
	Item 9	36.1
	Item 10	38.7
Section 2	Item 1	41.2
	Item 2	43.8
	Item 3	46.4
	Item 4	49.0
	Item 5	51.6
	Item 6	54.2
	Item 7	56.8
	Item 8	59.4
	Item 9	62.0
	Item 10	64.6
Section 3	Item 1	67.2
	Item 2	69.8
	Item 3	72.4
	Item 4	75.0
	Item 5	77.6
	Item 6	80.2
	Item 7	82.8
	Item 8	85.4
	Item 9	88.0
	Item 10	90.6
Section 4	Item 1	93.2
	Item 2	95.8
	Item 3	98.4
	Item 4	101.0
	Item 5	103.6
	Item 6	106.2
	Item 7	108.8
	Item 8	111.4
	Item 9	114.0
	Item 10	116.6

The data indicates a steady increase in values across all sections, with the highest values recorded in the final section of the survey. The overall trend suggests a positive correlation between the categories and the measured values.