

JUN 5 1936

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

Do not use this space.

20894  
File No. \_\_\_\_\_  
Registered No. 5085  
St. \_\_\_\_\_ Ward)

1. PLACE OF DEATH

County \_\_\_\_\_  
Township \_\_\_\_\_  
City St Louis (No. 1034 Oakview Place

791  
Registration District No. \_\_\_\_\_  
Primary Registration District No. 1003  
Ward. 4

2. FULL NAME Laura C Drewes

(a) Residence, No. 1034 Oakview Place St. 4 Ward.  
(Usual place of abode)

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 Female	4. COLOR OR RACE White	5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word) Wid
5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF Christopher F Drewes		
6. DATE OF BIRTH (MONTH, DAY, AND YEAR) Jan 28 1872		
7. AGE YEARS 64	MONTHS 3	DAYS 10
If LESS than 1 day, .....hra. or .....min.		

OCCUPATION	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.
	10. Date deceased last worked at this occupation (month and year) _____
	11. Total time (years) spent in this occupation _____

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

13. NAME Henry Motz

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

15. MAIDEN NAME Laura Stoewener

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

17. INFORMANT Elona Drewes (ADDRESS) 1034 Oakview Place

18. BURIAL, CREMATION, OR REMOVAL PLACE St Trinity Cem DATE May 11 1936

19. UNDERTAKER Deiderwiden Funeral Home (ADDRESS) 1936 St Louis Ave

20. FILED MAY 11 1936 J. Predeck Registrar.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) May 8 1936 .19

22. I HEREBY CERTIFY, That I attended deceased from Oct 25 1934 to May 8 1936  
I last saw her alive on May 8 1936 Death is said to have occurred on the date stated above, at 2:00 A M  
The principal cause of death and related causes of importance were as follows:

Chronic myocarditis Oct 1934  
Other contributory causes of importance: P2C  
Name of operation \_\_\_\_\_ Date of \_\_\_\_\_  
What test confirmed diagnosis? Clinical (Was there an autopsy? No)  
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? No  
If so, specify \_\_\_\_\_  
(Signed) M. W. Gansloes M. D.  
(Address) 3515 So. Grand Bl St Louis Mo

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 is a list of the names of the persons who were present at the meeting held on the 15th day of January, 1941, at the residence of the undersigned, at the address of 1234 Main Street, New York, New York.

The names of the persons present are as follows:

Mr. J. Edgar Hoover  
 Mr. Clegg  
 Mr. Glavin  
 Mr. Ladd  
 Mr. Nichols  
 Mr. Rosen  
 Mr. Tracy  
 Mr. Carson  
 Mr. Egan  
 Mr. Gurnea  
 Mr. Hendon  
 Mr. Pennington  
 Mr. Quinn  
 Mr. Nease  
 Mr. Gandy

The undersigned, J. Edgar Hoover, Special Agent in Charge, Federal Bureau of Investigation, United States Department of Justice, certifies that the above is a true and correct list of the persons who were present at the meeting held on the 15th day of January, 1941, at the residence of the undersigned, at the address of 1234 Main Street, New York, New York.

J. Edgar Hoover  
 Special Agent in Charge  
 Federal Bureau of Investigation  
 United States Department of Justice