

AUG 18 1936

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

Do not use this space.

## 1. PLACE OF DEATH

County.....

Registration District No. 791

Township.....

Primary Registration District No. 1003

City. St. Louis, Mo. (No. ....)

4228 Flora Blvd. St. .... Ward)

File No. 28703

Registered No. 7469

## 2. FULL NAME

Oscar Niemann

(a) Residence, No. 4228 Flora Blvd. St. 17 Ward.  
(Usual place of abode)

Length of residence in city or town where death occurred yrs. mos. ds.

(If nonresident, give city or town and State)  
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

Cecelia Niemann

6. DATE OF BIRTH (MONTH, DAY, AND YEAR)

Jan. 19, 1877

7. AGE

YEARS

59

MONTHS

5

DAYS

26

IF LESS than 1  
day, .....hrs.  
or .....mins.

OCCUPATION

8. Trade, profession, or particular  
kind of work done, as spinner,  
sawyer, bookkeeper, etc.Retired  
Electrical Dep't9. Industry or business in which  
work was done, as silk mill,  
saw mill, bank, etc.Manager  
Laclede Gas Light Co.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

FATHER

13. NAME

Herman Niemann

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

MOTHER

15. MAIDEN NAME

Unknown

16. BIRTHPLACE (CITY OR TOWN)  
(STATE OR COUNTRY)Unknown  
Unknown17. INFORMANT  
(ADDRESS)Cecelia Niemann  
4228 Flora Blvd.

18. BURIAL, CREMATION, OR REMOVAL

PLACE Calvary Cemetery DATE July 18, 1936

19. UNDERTAKER  
(ADDRESS)Wm. J. Robert  
1905 S. Grand Blvd.

20. FILED

JUL 17 1936

J. H. Bredeck  
Registrar.

## MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) July 15, 1936

22. I HEREBY CERTIFY, That I attended deceased from

Sept 18 1933 to July 15, 1936

I last saw him live on July 15, 1936. Death is said  
to have occurred on the date stated above, at 2:15 P.M.

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

Thermic Fever

Date of onset

3 days

Other contributory causes of importance:

multiple sclerosis 14 yrs

Name of operation..... Date of.....

What test confirmed diagnosis? T. P. Ex. 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?.....

If so, specify.....

(Signed) J. H. Bredeck, M. D.

(Address) 1905 S. Grand Blvd.

