CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important.

DEC 3 1936

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

Do not use this space.

38115

1. PLACE OF DEATH
County Jefferson
Township Rock
City (No. , St. Ward)

Registration District No. 423
Primary Registration District No. 5578

File No.
Registered No. 39

2. FULL NAME Joseph Erhardt

(a) Residence, No. St., 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 (write the word) Single

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

6. DATE OF BIRTH (MONTH, DAY, AND YEAR) Feb. 9-1902

7. AGE

YEARS	MONTHS	DAYS	If LESS than 1 day, hrs. or min.
34	8	21	

OCCUPATION
8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.
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) Hungaria

FATHER
13. NAME Joseph Ehardt
14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Hungaria

MOTHER
15. MAIDEN NAME Theresa Kastner
16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Hungaria

17. INFORMANT (ADDRESS) Johanna Erhardt 818 Geyer Ave St Louis Mo

18. BURIAL, CREMATION, OR REMOVAL Peter & St Paul Cem
PLACE St Louis Mo DATE Nov 1st 1936

19. UNDERTAKER (ADDRESS) Fred H Heiligtag Kimmswick Mo

20. FILED Oct 31st 1936 Phil J. Kirk Registrar.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) Oct 31st 1936

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 m.

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

Jury Verdict - 10/31/36
Came to his death as the result of justifiable homicide

Date of onset

Other contributory causes of importance:

173

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? Homicide Date of injury Oct 31st, 1936
Where did injury occur? At a Tavern
(Specify city or town, county, and State)
Specify whether injury occurred in industry, in home, or in public place.
Public Place.
Manner of injury Gun Shot Wound.
Nature of injury Shot in Head attempt Burgery

24. Was disease or injury in any way related to occupation of deceased?
If so, specify
(Signed) Ch Clement J.P. Adj Cor, Mo.
(Address) Kimmswick Mo