

Registration District No. **399**

Primary Registration District No. **1002**

1. PLACE OF DEATH:

(a) County Jackson
(b) City or town Kansas City
(If outside city or town limits, write "RURAL" and name of township)
(c) Name of hospital or institution:
7 East 68th Terrace
(If not in hospital or institution, write street number or location)
(d) Length of stay: In hospital or institution 2
In this community 15 years
(Specify whether years, months or days)

3. (a) PRINT FULL NAME Charles F. Schmidt 530

3. (b) If veteran, name war none 3. (c) Social Security No. 487-03-4779

4. Sex Male 5. Color or race White 6. (a) Single, widowed, married, divorced Married

6. (b) Name of husband or wife Mrs. Frances Schmidt 6. (c) Age of husband or wife if alive 43 years

7. Birth date of deceased December 12, 1892
(Month) (Day) (Year)

8. AGE: Years 47 Months 5 Days 28 If less than one day hr. min.

9. Birthplace Higginsville, Mo.
(City, town, or county) (State or foreign country)

10. Usual occupation Proprietor Mid-Continent

11. Industry or business Supply Company 9

12. Name Don't Know

13. Birthplace Germany
(City, town, or county) (State or foreign country)

14. Maiden name Don't Know

15. Birthplace Don't Know
(City, town, or county) (State or foreign country)

16. (a) Informant Mrs. Frances Schmidt

(b) Address 7 East 68th Terrace

17. (a) Burial (b) Date thereof June 13, 1940
(Burial, cremation, or removal) (Month) (Day) (Year)

(c) Place: burial or cremation Slater, Missouri

18. (a) Signature of funeral director Freeman Mortuary

(b) Address 104 W. 42nd St., K.C., Mo.

19. (a) June 11, 1940 (b) M. M. Crowe
(Date received local registrar) (Registrar's signature)

2. USUAL RESIDENCE OF DECEASED:

(a) State Missouri (b) County Jackson
(c) City or town Kansas City
(If outside city or town limits, write "RURAL")
(d) Street No. 7 East 68th Terrace
WEST (If rural, give location)
(e) If foreign born, how long in U. S. A. _____ years.

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month June day 10
year 1940 hour 9 minute 30 P. M.

21. I hereby certify that I attended the deceased from June 4
1940, to June 10, 1940
that I last saw him alive on June 10, 1940
and that death occurred on the date and hour stated above.

Immediate cause of death Coronary Occlusion 6/10/40
Duration

Due to arterio sclerosis ?

Due to Hypertension ?

Other conditions none

(Include pregnancy within 3 months of death)

Major findings: none

Of operations none

Of autopsy none

PHYSICIAN

Underline the cause to which death should be charged statistically.

22. If death was due to external causes, fill in the following:

(a) Accident, suicide, or homicide (specify) ---

(b) Date of occurrence ---

(c) Where did injury occur? ---
(City or town) (County) (State)

(d) Did injury occur in or about home, on farm, in industrial place, in public place?

While at work? --- (Specify type of place) (e) Means of injury ---

23. Signature H. E. Crowe M.D. (M. D. or other)

Address 632 Prof Bldg K.C.Mo. Date signed 6/10/40

WRITE PLAINLY—USE UNFADING BLACK INK—MAKE A PERMANENT RECORD

checked by affidavit see other records

STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me, or by _____

_____, Registered Apprentice No. _____
working under my personal supervision.

Signed

Clarence W. Childs

Licensed Embalmer No. *3473*

P. O. Address *255 Mo*

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license.)

If this body is not embalmed, above space should be left blank.

MISSOURI STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS

State of Missouri
County of Jackson } ss.

State File No.

AFFIDAVIT FOR CORRECTION OF A RECORD

Local Registrar's No. 2395

On this 22 day of July, 1940, before me appears.....

Frances Schmidt, who, upon her oath, states that the original record of ~~birth~~ death for Charles F. Schmidt, ~~born~~ ^{died} died June 10, 1940, in the State of Missouri, and which was filed at Kansas City on June 11, 1940, should be corrected as follows:

Item No. 1 (c) should read 7 West 68th Terrace

Instead of 7 East 68th Terrace

Item No. 2 (d) should read 7 West 68th Terrace

Instead of 7 East 68th Terrae

Item No. 16 (b) should read 7 West 68th Terrace

Instead of 7 East 68th Terrace

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

The above is true to the best of my knowledge, information and belief

(SEAL)

Affiant: Frances Schmidt Wife
Relationship.

7 West 68th Terrace
Present Address.

Subscribed and sworn to before me this 22 day of July, 1940.

My Commission expires May 19, 1944 Ernest Green Notary Public

Affidavits containing erasures will not be accepted; draw one line through error and write above it.

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