

No. 2  
1-13-40  
-17-39  
I X23159

DEPARTMENT OF COMMERCE  
BUREAU OF THE CENSUS

SEP 18 1941  
791

MISSOURI STATE BOARD OF HEALTH  
STANDARD CERTIFICATE OF DEATH

29904  
7243

Registration District No. \_\_\_\_\_ Primary Registration District No. 1003 State File No. \_\_\_\_\_ Registrar's No. \_\_\_\_\_

1. PLACE OF DEATH:  
(a) County \_\_\_\_\_  
(b) City or town St. Louis  
(If outside city or town limits, write "RURAL" and name of township)  
(c) Name of hospital or institution: Lutheran Hospital  
(If not in hospital or institution, write street number or location)  
(d) Length of stay: In hospital or institution 5 days  
In this community 12 years  
(Specify whether years, months or days)

3. (a) PRINT FULL NAME Rev. John W. Lehr  
3. (b) If veteran, name war \_\_\_\_\_ 3. (c) Social Security No. \_\_\_\_\_

4. Sex Male 5. Color or race White 6. (a) Single, widowed, married, divorced Married  
6. (b) Name of husband or wife Lena Albers Lehr 6. (c) Age of husband or wife if alive 65 years  
7. Birth date of deceased January 18, 1862  
(Month) (Day) (Year)

8. AGE: Years 79 Months 7 Days 17 If less than one day hr. \_\_\_\_\_ min. \_\_\_\_\_

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

10. Usual occupation Retired Minister

11. Industry or business Lutheran Congregation, Stover

12. Name Wilhelm Lehr Mo. \_\_\_\_\_  
13. Birthplace Germany  
(City, town, or county) (State or foreign country)  
14. Maiden name Mina Unknown  
15. Birthplace Germany  
(City, town, or county) (State or foreign country)

16. (a) Informant Lena Lehr  
(b) Address 3708 Texas Avenue

17. (a) Burial (b) Date thereof Sept. 8, 1941  
(Burial, cremation, or removal) (Month) (Day) (Year)  
(c) Place: burial or cremation Concordia Cemetery

18. (a) Signature of funeral director Beiderwieden F. H. Inc  
(b) Address 1036 St. Louis Avenue

19. (a) SEP 8 1941 (b) J. Buddeck  
(Date received local registrar) (Registrar's signature)

2. USUAL RESIDENCE OF DECEASED:  
(a) State Missouri (b) County 000  
(c) City or town St. Louis 24 17  
(If outside city or town limits, write "RURAL") 9  
(d) Street No. 3708 Texas Avenue  
(If rural, give location)  
(e) If foreign born, how long in U. S. A. 61 years 0 years.

MEDICAL CERTIFICATION  
20. DATE OF DEATH: Month September day 5  
year 1941 hour 4 minute 14 P. M.

21. I hereby certify that I attended the deceased from Aug 1  
1941 to Sept 5 1941  
that I last saw him alive on Sept 5 1941  
and that death occurred on the date and hour stated above.

Immediate cause of death Perforation of Bladder  
(urinary)  
Due to Carcinoma of Prostate  
and Bladder  
Due to see above  
Other conditions (Include pregnancy within 3 months of death) 51 D.

Major findings: Carcinoma of Prostate  
Of operations \_\_\_\_\_  
Of autopsy \_\_\_\_\_

Duration \_\_\_\_\_  
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) (c) Means of injury 0  
23. Signature H. Lund & Co (M. D. or other) \_\_\_\_\_  
Address 3651 Grandel Date signed 9/6/41

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

MOTHER FATHER

Dr. H. Lund  
3651 Grandel St

Je 4430

10-14-30

**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.....

*Paul Spruss*

Registered Apprentice No. *293*

working under my personal supervision.

Signed.....

*Paul Spruss*

Licensed Embalmer No. *3737*

P. O. Address *1936 St. Louis*

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

If this body is not embalmed, fact should be so stated above.