No. 2
-1-4-41
5-17-39
I X26390

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

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
FILED NOV 14 1941

MISSOURI STATE BOARD OF HEALTH

STANDARD CERTIFICATE OF DEATH

State File No. 34334

Registration District No. 85 | Primary Registration District No. 1001 | Registrar's No. 104

1. PLACE OF DEATH:
(a) County: Buchanan
(b) City or town: St. Joseph (If outside city or town limits, write "RURAL" and name of township)
(c) Name of hospital or institution: 2925 Mitchell Ave. (If not in hospital or institution, write street number or location)
(d) Length of stay: In hospital or institution: No. (Specify whether years, months or days)
In this community: 25 years

2. USUAL RESIDENCE OF DECEASED:
(a) State: Missouri (b) County: Buchanan
(c) City or town: St. Joseph (If outside city or town limits, write "RURAL")
(d) Street No.: 2925 Mitchell Ave. (If rural, give location)
(e) Citizen of foreign country? No. (Yes or No)
If yes, name country

3. (a) PRINT FULL NAME: John Lawrence Stingley
3. (b) If veteran, name war: ✓
3. (c) Social Security No. None ✓
4. Sex: Male
5. Color or race: White
6. (a) Single, widowed, married, divorced: Widowed
6. (b) Name of husband or wife: Maude Young Stingley
6. (c) Age of husband or wife if alive: ✓ years
7. Birth date of deceased: January (Month) 28 (Day) 1873 (Year)

8. AGE: Years 68 | Months 9 | Days 3 | If less than one day: hr. min.

9. Birthplace: Petersburg (City, town, or county) Weat Virginia (State or foreign country)
10. Usual occupation: Embalmer & Funeral Director
11. Industry or business: Own Funeral Home
MOTHER FATHER
12. Name: W. H. Stingley
13. Birthplace: Unknown (City, town, or county) Unknown (State or foreign country)
14. Maiden name: Margaret Welton
15. Birthplace: Unknown (City, town, or county) Unknown (State or foreign country)
16. (a) Informant: Miss Margaret Stingley
(b) Address: 2925 Mitchell Ave. St. Joseph, Mo.
17. (a) Burial (Burial, cremation, or removal) (b) Date thereof: 11/3/41. (Month) (Day) (Year)
(c) Place: burial or cremation: Memorial Park Cemetery St. Joseph, Mo.
18. (a) Signature of funeral director: Walter Meierhofer
(b) Address: 1302 Faraon St. St. Joseph, Mo.
19. (a) 11/3/41 (Date received local registrar) (b) H. J. Westbrook (Registrar's signature)

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month October day 31 year 1941 hour 6 minute 45 P. M.
21. I hereby certify that I ~~attended~~ viewed the deceased ~~from~~ on Oct 31 1941 to ____ 19__; that I last ~~saw him~~ saw him alive on ____ 19__; and that death occurred on the date and hour stated above.

Immediate cause of death: Suicide by Strangulation — Duration: 1 day
Due to: ____
Due to: ____ 1640
Other conditions (Include pregnancy within 3 months of death): Man strangulated himself to death by looking a strap around his neck, suspended from a joist in his garage
Major findings: Of operation: ____ Of autopsy: ____

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): Suicide
(b) Date of occurrence: Oct 31 - 1941
(c) Where did injury occur? St Joseph (City or town) Buch. (County) Mo (State)
(d) Did injury occur in or about home, on farm, in industrial place, in public place? In garage at his home (Specify type of place)
While at work? no (e) Means of injury: Hanging by neck
23. Signature: H. J. Mundy (M. D. or Coroner)
Address: 1644 So 3d St. Joseph Date signed: 11/3/41

85 (Licensed Embalmer's Statement on Reverse Side)

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 Walter Meierhopper Jr, Registered Apprentice No. 302 working under my personal supervision.

Signed Oby Jester

Licensed Embalmer No. Missouri #4154

P. O. Address St. Joseph, Missouri

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

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