

N. B.—Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important.

FILED MAY 23 1942

MISSOURI STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

CERTIFICATE OF DEATH

Do not use this space.

15898

1. PLACE OF DEATH

County Worth
 Township Green
 City Green (No. 1)

Registration District No. 1057
 Primary Registration District No. 103

File No. 113
 Registered No. 15898
 St. Mo Ward 3

2. FULL NAME

(a) Residence, No. RURAL St. Mo Ward 3
 (Usual place of abode)

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. (If nonresident, give city or town and State)

PERSONAL AND STATISTICAL PARTICULARS

3. SEX F 4. COLOR OR RACE W 5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word) Widowed
 5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF Elmer Bressler
 6. DATE OF BIRTH (MONTH, DAY, AND YEAR) 72 9 10
 7. AGE YEARS MONTHS DAYS If LESS than 1 day, ... hrs. or min.

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

13. NAME Phillip Kuzin
 14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Ireland

15. MAIDEN NAME Johana Long
 16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Ireland

17. INFORMANT James Kuzin (ADDRESS)

18. BURIAL, CREMATION, OR REMOVAL
 PLACE Deloris DATE April 13, 1942

19. UNDERTAKER Johar Anderson Jr (ADDRESS)20. FILED April 14, 1942 Arlene Scadden Registrar.

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH (MONTH, DAY, AND YEAR) April 10, 194222. I HEREBY CERTIFY, That I attended deceased from March 22, 1942 to April 10, 1942

I last saw him alive on April 9, 1942 Death is said to have occurred on the date stated above, at 6 P. m.

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

Lobar Pneumonia Date of onset Mar 24, 1942

Other contributory causes of importance:

ColdName of operation ✓ Date of ✓What test confirmed diagnosis? ✓ 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 ✓, 1942
 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? no

If so, specify

(Signed) Egbert Crowson, M. D.(Address) Parnell Mo

