

FILED MAY 14 1943 318

Primary Registration District No. 1003

Registrar's No. 4189

1. PLACE OF DEATH:

(a) County _____
(b) City or town St. Louis, Missouri
(If outside city or town limits, write "RURAL" and name of township)
(c) Name of hospital or institution:
Homer G. Phillips Hospital
(If not in hospital or institution, write street number or location)
(d) Length of stay: In hospital or institution 2 days
In this community 17 years (Specify whether years, months or days)

2. USUAL RESIDENCE OF DECEASED:

(a) State Missouri (b) County _____
(c) City or town St. Louis,
(If outside city or town limits, write "RURAL")
(d) Street No. 2005 Biddle
(If rural, give location)
(e) Citizen of foreign country? _____ (Yes or No)
If yes, name country _____

3. (a) PRINT FULL NAME

L. M. Hodges

3. (b) If veteran, name war _____

3. (c) Social Security No. _____

4. Sex MALE 5. Color or race NEGRO 6. (a) Single, widowed, married, divorced MARRIED
6. (b) Name of husband or wife JIMMIE D. HODGES 6. (c) Age of husband or wife if alive YES years 1907
7. Birth date of deceased (Month) (Day) (Year)

8. AGE: Years Months Days If less than one day
abt - 36 hr. min.

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

10. Usual occupation LABORER

11. (a) Name JULIUS HODGES
(b) Birthplace MISS. (State or foreign country)
(c) Maiden name CORA DAWKINS

15. Birthplace (City, town, or county) MISS. (State or foreign country)

16. (a) Informant Jimmie D. Hodges

(b) Address 2005 BIDDLE ST.

17. (a) burial (b) Date thereof 5-6-43
(Burial, cremation, or removal) (Month) (Day) (Year)

(c) Place: burial or cremation WASHINGTON PARK

18. (a) Signature of funeral director X PARRETT JONES

(b) Address 2631 GAMBLE ST.

19. (a) MAY 5 1943 (Date received local registrar) J. J. Braddock (Registrar's signature)

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month April day 27, year 1943 hour 3 minute 00 P. M.

21. I hereby certify that I attended the deceased from April 25, 1943 to April 27, 1943:

that I last saw him alive on April 27, 1943; and that death occurred on the date and hour stated above.

Immediate cause of death Lobar Pneumonia (Autopsy) Duration 1 week

Due to _____

Due to _____

Other conditions (Include pregnancy within 3 months of death) _____

Major findings: Of operations _____

Of autopsy _____

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 _____

23. Signature Alva Moore (M.D. or other) _____

Address 2601 N. Whittier Date signed 5/29/43

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

MOTHER FATHER

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.....
.....
Licensed Embalmer No.....
P. O. Address.....

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, fact should be so stated above.

498-10-7561 L.M. Hodges
Affidavits containing erasures will not be accepted; draw one line through error and write above it.
3-19-48

State of Missouri
City of St Louis ss.
County of _____

STATE BOARD OF HEALTH OF MISSOURI
BUREAU OF VITAL STATISTICS
AFFIDAVIT FOR CORRECTION OF A RECORD

State File No. _____
Local Registrar's No. 4189

On this 19th day of May, 1943, before me appears _____
Jimmie D. Hodges, who, upon her oath, states that the original record of birth
L. M. Hodges died April - 27 - 1912, in the State of
Missouri, and which was filed at St Louis on 5/5/ 1912, should be corrected as follows:

- Item No. #3.A should read L. M. Hodge
Instead of L. M. Hodges
- Item No. 6-B should read Jimmie D. Hodge
Instead of Jimmie W. Hodges
- Item No. 12 should read Julius Hodge
Instead of Julius Hodges
- Item No. 16-A should read Jimmie D. Hodge
Instead of Jimmie D. Hodges
- 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 Jimmie D. Hodge - wife Relationship _____

2005th Beidle
Present Address.

Subscribed and sworn to before me this 19 day of May, 1943

My Commission expires _____
Bera C. Jaddox Notary Public.

Commission Expires March 4 1944

S-12264

1943