

Registration District No. 318

Primary Registration District No. 1002

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:
Bethesda Hospital
 (If not in hospital or institution, write street number or location)
 (d) Length of stay: In hospital or institution 0 (Specify whether
 In this community _____
 years, months or days) 2 1/2

3. (a) PRINT FULL NAME Julia ~~Lo~~ Lande Nordhaus3. (b) If veteran, name war No. 3. (c) Social Security No. None4. Sex Female 5. Color or race White 6. (a) Single, widowed, married, divorced Married6. (b) Name of husband or wife George C. Nordhaus 6. (c) Age of husband or wife if alive 76 years7. Birth date of deceased October 22, 1874
(Month) (Day) (Year)8. AGE: Years Months Days If less than one day
69 11 16 hr. min.9. Birthplace Means, Texas (City, town, or county) (State or foreign country)10. Usual occupation Housewife11. Usual place for business At home12. (a) Name ? Le Lande (b) Birthplace France (City, town, or county) (State or foreign country)13. (a) Maiden name Laura Reed (b) Birthplace Means, Texas (City, town, or county) (State or foreign country)14. (a) Informant George C. Nordhaus, (b) Address 5949 Enright Ave.15. (a) Burial (b) Date thereof 10/11/44
(Burial, cremation, or removal) (Month) (Day) (Year)(c) Place: burial or cremation Mt. Lebanon Cemetery16. (a) Signature of funeral director Robert J. Ambruster
(b) Address Clayton Rd. at Concordia Lane17. (a) OCT 11 1944 (b) (Date received local burial) J. F. Brudick (Registrar's signature)

2. USUAL RESIDENCE OF DECEASED:

(a) State Mo. (b) County _____
 (c) City or town St. Louis
 (If outside city or town limits, write "RURAL")
 (d) Street No. 5949 Enright Ave
 (If rural, give location)
 (e) Citizen of foreign country? _____ (Yes or No)
 If yes, name country _____

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month Oct. day 8
year 1944 hour 7 minute _____ P. M.21. I hereby certify that I attended the deceased from 10/1/44, 19 to 10/8/44, 19;
that I last saw her alive on 10/8/44, 19;
and that death occurred on the date and hour stated above.Immediate cause of death Cerebral Hemorrhage Duration 4 daysDue to Hypertensive Cardiovascular Disease 9 yrsDue to 2 9/30/44Other conditions None (Include pregnancy within 3 months of death)Major findings: Of operations no operation Of autopsy No 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) _____
 (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?

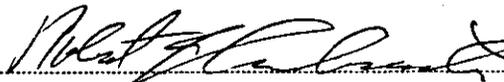
While at work? _____ (Specify type of place) (e) Means of injury _____

23. Signature E. D. Edwards (M. D. or D. O.) Address Chouteau Bldg. Date signed 10/9/44

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..... 1994

P. O. Address.....

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

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

#8693

AFFIDAVIT

STATE OF MISSOURI)
)ss
COUNTY OF ST. LOUIS)

I, the undersigned, being of lawful age, do hereby state upon my oath that my wife, Julia LeLande Nordhaus, the party named in the certificate of death on file with the Division of Vital Statistics of the City of St. Louis, indicating her death on October 8, 1944 should have been recorded as Julia Zula Nordhaus instead of Julia LeLande Nordhaus, LeLande being her maiden name and Zula being her correct middle name, the latter being the name which she used consistently all thru her life to sign certain legal documents and the name by which she was generally known.

George C. Nordhaus,
GEORGE C. NORDHAUS, WIDOWER

Subscribed and sworn to before me this 26th day of July, 1946.

Robert J. [Signature]
Notary Public. Com. exp. 8/1/48

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