

FILED JAN 16 1945
318

Registration District No. _____

Primary Registration District No. _____

Registrar's No. _____

66

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:
5922 Horton Place
(If not in hospital or institution, write street number or location)

(d) Length of stay: In hospital or institution _____ (Specify whether _____)

In this community Life
years, months or days

3. (a) PRINT FULL NAME John Arthur Hunt

3. (b) If veteran, name war none

3. (c) Social Security No. none

4. Sex Male

5. Color or race White

6. (a) Single, widowed, married, divorced Married

6. (b) Name of husband or wife Marie Schmidt

6. (c) Age of husband or wife if alive 54 1/2 years

7. Birth date of deceased Sept 23 1886
(Month) (Day) (Year)

8. AGE: 58 Years 3 Months 10 Days If less than one day _____ hr. _____ min.

9. Birthplace St. Louis Missouri
(City, town, or county) (State or foreign country)

10. Usual occupation Assistant Register

11. Industry or business City St. Louis

Name Patrick Hunt

11. Birthplace Ireland
(City, town, or county) (State or foreign country)

12. Maiden name Don't know Mary Bady

13. Birthplace Ireland
(City, town, or county) (State or foreign country)

16. Informant Marie Schmidt Hunt

(a) Address 5922 Horton Place

17. (a) Burial (b) Date thereof 1-8-45
(Burial, cremation, or removal) (Month) (Day) (Year)

(c) Place: burial or cremation Calvary Cemetery

18. (a) Signature of funeral director Thos. J. Finan

(b) Address 1519 S. Grand Blvd.

19. (a) JAN 4 1945 (Date received local registrar) J. F. Brudeck (Registrar's signature)

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. 5922 Horton Place
(If rural, give location)

(e) Citizen of foreign country? _____ (Yes or No)
If yes, name country _____

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month Jan day 3
year 1944 hour 7 minute 40 M.

21. I hereby certify that I attended the deceased from Aug 1 1944 to Jan 3 1945
that I last saw him alive on Jan 2 1945
and that death occurred on the date and hour stated above.

Immediate cause of death Carcinoma Esophagus Duration 1 yr

Due to _____

Due to _____

Other conditions (Include pregnancy within 1 month of death) Ho

Major findings: Of operations u

Of autopsy u

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 Wm. Langon Jr. (M. D. or other)

Address 15800 Plymouthe Date signed Jan 3/45

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

MOTHER, FATHER

Carly of 10-31-1944
Patrick

PHYSICIAN
Underline the cause to which death should be charged statistically.

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.....

John Ketter

Licensed Embalmer No.....

3880

P. O. Address.....

St Louis Mo

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.

THE STATE BOARD OF HEALTH OF MISSOURI
BUREAU OF VITAL STATISTICS

State of }
County of } ss.

State File No.

AFFIDAVIT FOR CORRECTION OF A RECORD Local Registrar's No. 66

On this 15 day of JANUARY, 1945, before me appears
MARIE SCHMIDT HUNT, who, upon pet. oath, states that the original record of ^{birth}~~death~~
for JOHN ARTHUR HUNT died JANUARY 4, 1941, in the State of
Missouri, and which was filed at ST. LOUIS on JAN 4, 1941, should be corrected as follows:

Item No. 6^e should read 46

Instead of 53

Item No. 7 should read SEPT - 23 - 1886

Instead of UNKNOWN

Item No. 8 should read 58 YRS. 3 MO. 10 DAYS

Instead of ABOUT 58

Item No. 14 should read MARY B. ADY

Instead of UNKNOWN

Item No. 20 should read JAN - 3 - 1945

Instead of JAN - 4 - 1945

Item No. 23 should read Mr. J. Longman 5803 Plyminton

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: Mrs. John A. Hunt Widow
Relationship.

5922 HORTON PLACE
Present Address.

Subscribed and sworn to before me this 15 day of January, 1945

My Commission expires March 4, 1945 Edna Paddock Notary Public.

391