S. No. 300
. 10-48

FILED JAN 31 1951

THE DIVISION OF HEALTH OF MISSOURI

STANDARD CERTIFICATE OF DEATH

State File No. 2488

BIRTH NO. _____ REG. DIST. NO. 318 PRIMARY REG. DIST. NO. 1003 Registrar's No. 567

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

1. PLACE OF DEATH
a. COUNTY

b. CITY OR TOWN (If outside corporate limits, write RURAL and give township): ST LOUIS
c. LENGTH OF STAY (in this place)

d. FULL NAME OF HOSPITAL OR INSTITUTION (If not in hospital or institution, give street address or location): DEPAUL HOSPITAL

2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission).
a. STATE: Mo
b. COUNTY

c. CITY OR TOWN (If outside corporate limits, write RURAL and give township): St Louis 2069

d. STREET ADDRESS (If rural, give location): De Paul Hosp 0
2415 N. Kingshighway Blvd.

3. NAME OF DECEASED (Type or Print)
a. (First) SISTER MARY
b. (Middle) LAWRENCE
c. (Last) DYER

4. DATE OF DEATH (Month) (Day) (Year): JAN 18 - 1951

5. SEX: FEMALE

6. COLOR OR RACE: WHITE

7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify): NEVER MARRIED

8. DATE OF BIRTH: [illegible] 62

9. AGE (In years last birthday): IF UNDER 1 YEAR Months Days; IF UNDER 24 HRS. Hours Min.

10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired): RELIGIOUS

10b. KIND OF BUSINESS OR INDUSTRY: SISTERS OF CHARITY

11. BIRTHPLACE (State or foreign country): Oak Creek, Wis

12. CITIZEN OF WHAT COUNTRY?

13a. FATHER'S NAME: John Dyer

13b. MOTHER'S MAIDEN NAME: Margaret McGovern

14. NAME OF HUSBAND OR WIFE

15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service)

16. SOCIAL SECURITY NO.

17. INFORMANT'S SIGNATURE OR NAME ADDRESS: Sister Caroline Collins, De Paul Hospital

18. CAUSE OF DEATH
Enter only one cause per line for (a), (b), and (c)

*This does not mean the mode of dying, such as heart failure, asthenia, etc. It means the disease, injury, or complication which caused death.

MEDICAL CERTIFICATION

I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a): Cancer of Pancreas — INTERVAL BETWEEN ONSET AND DEATH: 1-2 yrs

ANTECEDENT CAUSES
Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last.
DUE TO (b)
DUE TO (c)

II. OTHER SIGNIFICANT CONDITIONS
Conditions contributing to the death but not related to the disease or condition causing death.

19a. DATE OF OPERATION

19b. MAJOR FINDINGS OF OPERATION: Cancer of Pancreas

20. AUTOPSY? YES ☐ NO ☒

21a. ACCIDENT SUICIDE HOMICIDE (Specify)

21b. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)

21c. (CITY, TOWN, OR TOWNSHIP) (COUNTY) (STATE)

21d. TIME OF INJURY (Month) (Day) (Year) (Hour) m.

21e. INJURY OCCURRED WHILE AT WORK ☐ NOT WHILE AT WORK ☐

21f. HOW DID INJURY OCCUR? 157X

22. *I hereby certify that I attended the deceased from* 10-31, 1950, *to* 1-18, 1951, *that I last saw the deceased alive on* 1-18-, 1951, *and that death occurred at* 9:20 p. m., *from the causes and on the date stated above.*

23a. SIGNATURE (Degree or title): J W Thompson Mo

23b. ADDRESS: 4962 Maryland-8

23c. DATE SIGNED: 1-19-51

24a. BURIAL, CREMATION, REMOVAL (Specify): BURIAL

24b. DATE: JAN 20-51

24c. NAME OF CEMETERY OR CREMATORY: CALVARY

24d. LOCATION (City, town, or county) (State): ST LOUIS MO

DATE REC'D BY LOCAL REG.: JAN 19 1951

REGISTRAR'S SIGNATURE: J. B. Lasatur

25. FUNERAL DIRECTOR'S SIGNATURE ADDRESS: Cullen-Kelly 4386 Shadell

(Licensed Embalmer's Statement on Reverse Side)

3415 N Kingshighway

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 _____, Student Embalmer No. _____, working under my personal supervision.

Student _____
Student Embalmer

Signed James A Lammers

Licensed Embalmer No. 4142

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.