

FILED APR 28 1952

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

State File No. 12537

No. 3007
10. 48

362

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

BIRTH NO. _____ REG. DIST. NO. 116 PRIMARY REG. DIST. NO. 3020 Registrar's No. 160

1. PLACE OF DEATH a. COUNTY Franklin		2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission). a. STATE Missouri b. COUNTY Warren	
b. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Washington		c. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Warrenton <u>1090</u>	
c. LENGTH OF STAY (in this place) 18 days		d. STREET ADDRESS (If rural, give location) St. Francis Hospital	
3. NAME OF DECEASED (Type or Print) a. (First) August b. (Middle) Edward c. (Last) Vogt		4. DATE OF DEATH (Month) (Day) (Year) April 20, 1952	
5. SEX male	6. COLOR OR RACE white	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) widowed	8. DATE OF BIRTH Sept. 15, 1878
9. AGE (In years last birthday) 73	IF UNDER 1 YEAR Months 0 Days 0	IF UNDER 4 HRS. Hours 0 Min. 0	11. BIRTHPLACE (State or foreign country) Missouri
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Sheriff		10b. KIND OF BUSINESS OR INDUSTRY Law Enforcement	
12. CITIZEN OF WHAT COUNTRY? U.S.A.		13a. FATHER'S NAME Henry Vogt	
13b. MOTHER'S MAIDEN NAME Sophia Fisher		14. NAME OF HUSBAND OR WIFE Rosie Vieth Vogt, dec'd.	
15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) no		16. SOCIAL SECURITY NO. 488-26-0246	
17. INFORMANT'S SIGNATURE OR NAME Raymond Vogt		ADDRESS Warrenton, Mo.	
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, asphyxia, etc. It means the disease, injury, or complication which caused death.		MEDICAL CERTIFICATION I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Chronic glomerular nephritis ANTECEDENT CAUSES Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last. DUE TO (b) general arterial sclerosis 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 446X	
20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
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 <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>	
21f. HOW DID INJURY OCCUR?			
22. I hereby certify that I attended the deceased from <u>Apr 2</u> , 19 <u>52</u> to <u>4-20</u> , 19 <u>52</u> , that I last saw the deceased alive on <u>4-20</u> , 19 <u>52</u> , and that death occurred at <u>11:20 P.</u> m., from the causes and on the date stated above.			
23a. SIGNATURE (Degree or title) A. Schickel MD		23b. ADDRESS Warrenton	
23c. DATE SIGNED 4-20-52			
24a. BURIAL CREMATION, REMOVAL (Specify) Burial		24b. DATE 4-23-52	
24c. NAME OF CEMETERY OR CREMATORY Warrenton Cemetery		24d. LOCATION (City, town, or county) (State) Warrenton, Mo.	
DATE REC'D BY LOCAL REG. April 21, 1952		REGISTRAR'S SIGNATURE F. W. Nieburg & Co., Warrenton, Mo.	
25. FUNERAL DIRECTOR'S SIGNATURE F. W. Nieburg & Co., Warrenton, Mo.		ADDRESS	

(Licensed Embalmer's Statement on Reverse Side)

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.....

.....
working under my personal supervision.

Student Embalmer No.....

Signed.....
Student Embalmer

Signed *John J. Lieburg*.....
Licensed Embalmer No. *3897*

P. O. Address *Warrenton, 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.