

FILED APR 18 1952

STANDARD CERTIFICATE OF DEATH

13421

State File No.

5600

485

BIRTH NO. _____ REG. DIST. NO. 164 PRIMARY REG. DIST. NO. 2032 Registrar's No. _____

1. PLACE OF DEATH
 a. COUNTY Johnson
 b. CITY OR TOWN Rural Simpson Twp (If outside corporate limits, write RURAL and give town or township)
 c. LENGTH OF STAY (in this place) 23 yrs
 d. FULL NAME OF HOSPITAL OR INSTITUTION R.R. #2 Warrensburg (If not in hospital or institution, give street address or location)

2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission).
 a. STATE Missouri b. COUNTY Johnson
 c. CITY OR TOWN Rural Warrensburg Simpson (If outside corporate limits, write RURAL and give township)
 d. STREET ADDRESS (If rural, give location) R.R. #2 Warrensburg

3. NAME OF DECEASED
 a. (First) Edward b. (Middle) Elmer c. (Last) Kugler
 (Type or Print)

4. DATE OF DEATH March 30, 1952
 (Month) (Day) (Year)

5. SEX Male

6. COLOR OR RACE White

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

8. DATE OF BIRTH July 12, 1900

9. AGE (In years, last birthday) 52 IF UNDER 1 YEAR Months Days IF UNDER 12 HRS. Mins.

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

10b. KIND OF BUSINESS OR INDUSTRY Automobile

11. BIRTHPLACE (State or foreign country) Illinois

12. CITIZEN OF WHAT COUNTRY? U.S.A.

13a. FATHER'S NAME Henry Kugler

13b. MOTHER'S MAIDEN NAME Freda Bayer

14. NAME OF HUSBAND OR WIFE Mrs Lola Kugler

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

16. SOCIAL SECURITY NO. 500-20-6933

17. INFORMANT'S SIGNATURE OR NAME Mrs Lola Kugler ADDRESS Warrensburg, 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, asthma, etc. It means the disease, injury, or complication which caused death.

MEDICAL CERTIFICATION
 I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Carcinoma of sigmoid with metastasis to liver & lungs
 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.

INTERVAL BETWEEN ONSET AND DEATH 6 mo

19a. DATE OF OPERATION 2-21-52

19b. MAJOR FINDINGS OF OPERATION Inoperable carcinoma

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) (Min)

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

21f. HOW DID INJURY OCCUR?

22. I hereby certify that I attended the deceased from March 1952, to March 30, 1952, that I last saw the deceased alive on March 29, 1952, and that death occurred at 4:30 pm., from the causes and on the date stated above.

23a. SIGNATURE [Signature] (Degree or title) MD

23b. ADDRESS Warrensburg Mo.

23c. DATE SIGNED 3-31-52

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

24b. DATE 4-1-52

24c. NAME OF CEMETERY OR CREMATORY SunSet Hill Cemetery

24d. LOCATION (City, town, or county) (State) Warrensburg, Missouri

DATE REC'D BY LOCAL REG. Mar 31, 1952

REGISTRAR'S SIGNATURE [Signature]

25. FUNERAL DIRECTOR'S SIGNATURE [Signature] ADDRESS Warrensburg, Mo.

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

510

RECEIVED
APR 6 1952
JOHNSON COUNTY HEALTH DEPT.

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 Elmer A. Tipton

Signed.....
Student Embalmer

Licensed Embalmer No. 4817

P. O. Address Waverly, Ia

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.