

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

FILED OCT 18 1952

BIRTH NO. _____ REG. DIST. NO. **275** PRIMARY REG. DIST. NO. **3053** Registrar's No. **197**

08120

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

1. PLACE OF DEATH a. COUNTY Phelps		2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission) a. STATE Missouri b. COUNTY _____	
b. CITY (If outside corporate limits, write RURAL and give township) Rolla		c. CITY (If outside corporate limits, write RURAL and give township) 2009 OR TOWN St. Louis	
d. FULL NAME OF HOSPITAL OR INSTITUTION Phelps Co Memorial Hosp		d. STREET ADDRESS (If rural, give location)	
3. NAME OF DECEASED (Type or Print) a. (First) John		b. (Middle) Wesley	
c. (Last) Stotler		4. DATE OF DEATH (Month) (Day) (Year) Oct 7 1952	
5. SEX Male	6. COLOR OR RACE White	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Widowed	8. DATE OF BIRTH Feb 21-1881
9. AGE (In years last birthday) 71		IF UNDER 1 YEAR Months 7 Days 16	IF UNDER 24 HRS. Hours _____ Min. _____
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Labor		10b. KIND OF BUSINESS OR INDUSTRY None	11. BIRTHPLACE (State or foreign country) 10 St. James, Missouri
12. CITIZEN OF WHAT COUNTRY? USA		13a. FATHER'S NAME John George Stotler	
13b. MOTHER'S MAIDEN NAME Nora Ziegler		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) No Never		16. SOCIAL SECURITY NO. 448-03-0976	
17. INFORMANT'S SIGNATURE OR NAME Harold Stotler		ADDRESS 6512 Chamberlin Ave University City	
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.		1. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Pulmonary embolism ANTECEDENT CAUSES Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last. DUE TO (b) Strangulated left inguinal Hernia DUE TO (c) Venous thrombosis	
II. OTHER SIGNIFICANT CONDITIONS Conditions contributing to the death but not related to the disease or condition causing death.		INTERVAL BETWEEN ONSET AND DEATH	
19a. DATE OF OPERATION 10/7/52	19b. MAJOR FINDINGS OF OPERATION Strangulated Left Inguinal Hernia		20. AUTOPSY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
21a. ACCIDENT SUICIDE HOMICIDE none	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) none	21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>	21f. HOW DID INJURY OCCUR? 5610	
22. I hereby certify that I attended the deceased from 10/7 , 1952, to 10/7 , 1952, that I last saw the deceased alive on 10/7 , 1952, and that death occurred at 10:40 p.m. , from the causes and on the date stated above.			
23a. SIGNATURE (Degree or title) James L. Butler M.D.		23b. ADDRESS St. James, Mo.	
23c. DATE SIGNED 10/8/52			
24a. BURIAL, CREMATION, OR OTHER DISPOSITION (Specify) burial	24b. DATE Oct 10-52	24c. NAME OF CEMETERY OR CREMATORY Masonic Cemetery	24d. LOCATION (City, town, or county) (State) St. James, Missouri
DATE REC'D BY LOCAL REG. Oct. 10, 1952	REGISTRAR'S SIGNATURE Nadine L. Stoll	350-0	25. FUNERAL DIRECTOR'S SIGNATURE C. Jesse Gahr, M.D.
		ADDRESS St. James, Mo.	

County File Number _____
Date Filed 10-19-52

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

C. Jesse Gahr

Signed.....
Student Embalmer

Licensed Embalmer No. 4486

P. O. Address St. James, Missouri

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.