

THE DIVISION OF HEALTH OF MISSOURI  
STANDARD CERTIFICATE OF DEATH

3628

State File No. 311

Registrar's No. 0539

FILED JAN 28 1953

318

1003

BIRTH NO. _____		REG. DIST. NO. _____		PRIMARY REG. DIST. NO. _____		State File No. _____		Registrar's No. _____							
1. PLACE OF DEATH a. COUNTY				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 town) St. Louis			c. LENGTH OF STAY (in this place) Township)			c. CITY (If outside corporate limits, write RURAL and give township) St. Louis			2239						
d. FULL NAME OF HOSPITAL OR INSTITUTION City Hospital #1						d. STREET ADDRESS (If rural, give location) 23 1319 Lynch									
3. NAME OF DECEASED (Type or Print) a. (First) Albert b. (Middle) Pulley c. (Last)				4. DATE OF DEATH (Month) (Day) (Year) 1-15-53											
5. SEX 0 male		6. COLOR OR RACE white		7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) widowed		8. DATE OF BIRTH 10-22-1888		9. AGE (In years last birthday) 64		IF UNDER 1 YEAR Months Days		IF UNDER 24 HRS. Hours Mins.			
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Janitor				10b. KIND OF BUSINESS OR INDUSTRY				11. BIRTHPLACE (State or foreign country) Cape Girardeau, Mo			12. CITIZEN OF WHAT COUNTRY? USA				
13a. FATHER'S NAME Jesse Pulley				13b. MOTHER'S MAIDEN NAME Martha Short				14. NAME OF HUSBAND OR WIFE Francis Pulley							
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. 370-18-3641				17. INFORMANT'S SIGNATURE OR NAME Arval Pulley				ADDRESS 5419 Bote Brillante			
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) Fr of skull and subdural hematoma suffered when struck by car operated by one Clarence Fraser in the vicinity of Vander enter and Chouteau Ave., about 600 pm Jan 9 1953 INTERVAL BETWEEN ONSET AND DEATH											
19a. DATE OF OPERATION				19b. MAJOR FINDINGS OF OPERATION too Accident											
20. AUTOPSY YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>				21a. ACCIDENT (Specify) Accident				21b. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office, etc.) Street				21c. (CITY, TOWN, OR TOWNSHIP) (COUNTY) (STATE) St Louis Mo			
21d. TIME OF INJURY (Month) (Day) (Year) (Hour) Jan 9 53 6:00 pm				21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>				21f. HOW DID INJURY OCCUR? E8124							
22. I hereby certify that I attended the deceased from _____, 19____, to _____, 19____, that I last saw the deceased alive on _____, 19____, and that death occurred at 5:50 Am., from the causes and on the date stated above. 25															
23a. SIGNATURE (Degree or title) Patrick E Taylor, Esq.						23b. ADDRESS 1300 Clark				23c. DATE SIGNED 1.17.53					
24a. BURIAL, CREMATION, REMOVAL (Specify) removal				24b. DATE 1-16-53		24c. NAME OF CEMETERY OR CREMATORY				24d. LOCATION (City, town, or county) (State) Advance, Mo.					
DATE REC'D BY LOCAL REG. JAN 19 1953				REGISTRAR'S SIGNATURE J. Carl Smith M.D.				25. FUNERAL DIRECTOR'S SIGNATURE Morgan F.H.,				ADDRESS Advance, Mo.			

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

1466

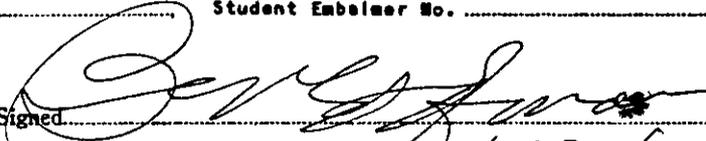
STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me, or by.....

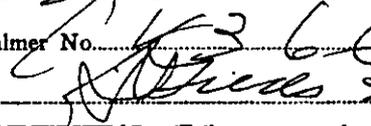
Student Embalmer No. ....

working under my personal supervision.

Student .....  
Student Embalmer

Signed 

Licensed Embalmer No. 4366

P. O. Address 

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.