

No. 300
10-48

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

8244

State File No.

73698
FILED MAR 4 - 1953

BIRTH NO. REG. DIST. NO. 317 PRIMARY REG. DIST. NO. 547 Registrar's No. 645

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

1. PLACE OF DEATH a. COUNTY St. Louis			2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission). a. STATE Missouri b. COUNTY St. Louis			
b. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Richmond Heights		c. LENGTH OF STAY (in this place) 12 hrs	c. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Overland		424 X	
d. FULL NAME OF HOSPITAL OR INSTITUTION St. Marys Hospital			d. STREET ADDRESS (If rural, give location) 2214-Huntington Avenue			
3. NAME OF DECEASED (Type or Print) a. (First) Calvin b. (Middle) Wayne c. (Last) Philbrick			4. DATE OF DEATH (Month) (Day) (Year) Feb. 24, 1953			
5. SEX Male	6. COLOR OR RACE White	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Never Married	8. DATE OF BIRTH Oct. 1, 1952		9. AGE (In years last birthday) 4 MONTHS 23 DAYS 1 HOUR 1 MIN.	
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Nil		10b. KIND OF BUSINESS OR INDUSTRY At home - child	11. BIRTHPLACE (City and State or Foreign Country) Richmond Heights, Mo.		12. CITIZEN OF WHAT COUNTRY? U.S.A.	
13a. FATHER'S NAME John Philbrick		13b. MOTHER'S MAIDEN NAME Geneva E. Scott		14. NAME OF HUSBAND OR WIFE None		
15. WAS DECEASED EVER IN U.S. ARMED FORCES? (If yes, give war or dates of service) No		16. SOCIAL SECURITY NO. None	17. INFORMANT'S SIGNATURE OR NAME ADDRESS John Philbrick 2214-Huntington Av-Overland			
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) Infection Strains ANTECEDENT CAUSES Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last. DUE TO (b) acidosis DUE TO (c) menstrual lymphadenitis II. OTHER SIGNIFICANT CONDITIONS Conditions contributing to the death but not related to the disease or condition causing death. dehydration			INTERVAL BETWEEN ONSET AND DEATH 2-3 days
19a. DATE OF OPERATION		19b. MAJOR FINDINGS OF OPERATION 5710		20. AUTOPSY? YES <input checked="" type="checkbox"/> NO <input 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)		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 1/23, 1953 to 7/23, 1953 , that I last saw the deceased alive on 1/23, 1953 , and that death occurred at 9:20 p.m. , from the causes and on the date stated above.						
23a. SIGNATURE (Degree or title) C. J. Volzmer M.D.			23b. ADDRESS 5200 Big Bend		23c. DATE SIGNED 7/23/53	
24a. BURIAL, CREMATION, REMOVAL (Specify) Burial		24b. DATE 2-26-1953	24c. NAME OF CEMETERY OR CREMATORY Oak Hill Cemetery	24d. LOCATION (City, town, or county) (State) Kirkwood, Mo.		
DATE REC'D BY LOCAL REG. 2-25-53		REGISTRAR'S SIGNATURE Herbert R. Donahue - M.D.		FUNERAL DIRECTOR'S SIGNATURE ADDRESS W. D. Schumann Bro. Inc. 2501 Woodson Rd. Overland-14-Mo.		

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 me

Student Embalmer No. _____

working under my personal supervision.

Student
Student Embalmer

Signed Oscar F. Mueller

Licensed Embalmer No. 3039

P. O. Address Overland 14 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.