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THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

State File No. **36690**

FILED NOV 12 1953

BIRTH NO. _____ REG. DIST. NO. **254** PRIMARY REG. DIST. NO. **4386** Registrar's No. **44**

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

1. PLACE OF DEATH a. COUNTY Oregon		2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission). a. STATE Mo. b. COUNTY Oregon	
b. CITY (If outside corporate limits, write RURAL and give township) Thayer, Mo.		c. CITY (If outside corporate limits, write RURAL and give township) Thayer	
c. LENGTH OF STAY (In this place) 5 yrs.		d. STREET ADDRESS (If rural, give location) 0750	
d. FULL NAME OF HOSPITAL OR INSTITUTION (If not in hospital or institution, give street address or location)			

3. NAME OF DECEASED (Type or Print)	a. (First) EDWARD	b. (Middle) MARK	c. (Last) HANKS	4. DATE OF DEATH (Month) (Day) (Year) Oct. 30, 1953
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5. SEX male	6. COLOR OR RACE white	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) single	8. DATE OF BIRTH June 3, 1875	9. AGE (In years last birthday) 78	10. UNDER 1 YEAR 4	11. UNDER 24 HRS. 27	12. HOURS 4	13. MIN. 27
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10a. USUAL OCCUPATION (Give kind of work done during part of working life, even if retired) farmer	10b. KIND OF BUSINESS OR INDUSTRY	11. BIRTHPLACE (City and State or Foreign Country) / Warren, Vermont	12. CITIZEN OF WHAT COUNTRY? U. S. A.
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13a. FATHER'S NAME George Hanks	13b. MOTHER'S MAIDEN NAME Ellen Washburn	14. NAME OF HUSBAND OR WIFE single
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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. 008-09-1620	17. INFORMANT'S SIGNATURE AND NAME Mrs. Albert Watson	ADDRESS Thayer, Mo.
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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.	I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Myocardial infarction		MEDICAL CERTIFICATION INTERVAL BETWEEN ONSET AND DEATH
	ANTECEDENT CAUSES Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last. DUE TO (b) Senile Dementia		
	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	20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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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) Thayer, Mo.
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21d. TIME OF INJURY (Month) (Day) (Year) (Hour)	21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input checked="" type="checkbox"/>	21f. HOW DID INJURY OCCUR?
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22. I hereby certify that I attended the deceased from **July 1953**, to **Oct 30, 1953**, that I last saw the deceased alive on **Oct 29, 1953**, and that death occurred at **12:45a.m.**, from the causes and on the date stated above.

23a. SIGNATURE W. Cooper M.D.	(Degree or title) M.D.	23b. ADDRESS Thayer, Mo.	23c. DATE SIGNED 11-7-53
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24a. BURIAL, CREMATION, REMOVAL (Specify) burial	24b. DATE 10/31/53	24c. NAME OF CEMETERY OR CREMATORY Thayer Cemetery	24d. LOCATION (City, town, or county) (State) Thayer, Mo.
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DATE REC'D BY LOCAL REG. Nov. 7, 1953	REGISTRAR'S SIGNATURE Arthur W. Wolf	25. EMERALD DIRECTOR'S SIGNATURE Arthur W. Wolf	ADDRESS Thayer, Mo.
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(Licensed Embalmers' Statements on Reverse Side)

VS FEB 29 1960

NOV 13 1959

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 *[Signature]*

Licensed Embalmer No. 4576

P. O. Address Shayner

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.