

FILED AUG 4 - 1955

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

State File No. 21314
Registrar's No. 419

BIRTH NO. _____ REG. DIST. NO. 43 PRIMARY REG. DIST. NO. 3007

1. PLACE OF DEATH a. COUNTY BUTLER		2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission) a. STATE Mo b. COUNTY Butler	
b. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Ponlar Bluff, Mo		c. CITY (If outside corporate limits, write RURAL and give township) OR TOWN FAGUS	
c. LENGTH OF STAY (in this place) 4 1/2 days		d. STREET ADDRESS (If rural, give location)	
d. FULL NAME OF HOSPITAL OR INSTITUTION Ponlar Bluff Hospital			

3. NAME OF DECEASED (Type or Print)	a. (First) Ollie	b. (Middle) MAE	c. (Last) Sedrick	4. DATE OF DEATH (Month) (Day) (Year) July 15, 1955
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5. SEX Female	6. COLOR OR RACE White	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married	8. DATE OF BIRTH July 2, 1875	9. AGE (In years last birthday) 80	IF UNDER 1 YEAR Months	IF UNDER 24 HRS. Days	IF UNDER 1 HRS. Hours	IF UNDER 15 MIN. Min.
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10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Housewife	10b. KIND OF BUSINESS OR INDUSTRY None	11. BIRTHPLACE (State or foreign country) Anna, Illinois	12. CITIZEN OF WHAT COUNTRY? U.S.A.
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13a. FATHER'S NAME Unknown	13b. MOTHER'S MAIDEN NAME Unknown	14. NAME OF HUSBAND OR WIFE Charlie Sedrick
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15. WAS DECEASED EVER IN U. S. ARMED FORCES? (Yes, no, or unknown) No	16. SOCIAL SECURITY NO. No	17. INFORMANT'S SIGNATURE OR NAME Lloyd Morris	ADDRESS 1418 Dillon St. Louis, 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, ashenia, etc. It means the disease, injury, or complication which caused death.	I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Peritonitis		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) Pneumonia Gall Bladder		
	DUE TO (c)		
II. OTHER SIGNIFICANT CONDITIONS Conditions contributing to the death but not related to the disease or condition causing death. -584X			

19a. DATE OF OPERATION 7-10-55	19b. MAJOR FINDINGS OF OPERATION Pneumonia Gall Bladder + stones	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)
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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 type="checkbox"/>	21f. HOW DID INJURY OCCUR?
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22. I hereby certify that I attended the deceased from **7-9**, 19**55**, to **7-15**, 19**55**, that I last saw the deceased alive on **7-15**, 19**55**, and that death occurred at **9:00** m., from the causes and on the date stated above.

23a. SIGNATURE (Ink or title) [Signature]	23b. ADDRESS Ponlar Bluff, Mo.	23c. DATE SIGNED 7-20-55
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24a. BURIAL, CREMATION, REMOVAL (Specify) Burial	24b. DATE 7-17-55	24c. NAME OF CEMETERY OR CREMATORY Rock Hill Cemetery	24d. LOCATION (City, town, or county) (State) CAMPBELL, Mo.
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DATE REC'D BY LOCAL REG 7/28/55	REGISTRAR'S SIGNATURE [Signature]	25. FUNERAL DIRECTOR'S SIGNATURE Lloyd Russell	ADDRESS Piggott, Ark.
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WRITE PLAINLY—USING UNFADING BLACK INK—MAKE A PERMANENT RECORD

RECEIVED

AUG 2 1955

BUTLER CO. HEALTH CENTER

FILE No. _____

Handwritten scribbles and illegible text.

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

Handwritten scribbles
Student, Embalmer No. 28 01-7

working under my personal supervision.

Student
Student Embalmer

Signed Leroy G. Tyler

Licensed Embalmer No. 4941 mo.

P. O. Address Piggott Ark

(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.