

FILED MAY 25 1956

## STANDARD CERTIFICATE OF DEATH

State File No. 18044

BIRTH NO. _____		REG. DIST. NO. 318		PRIMARY REG. DIST. NO. 1003		Registrar's No. 4488	
1. PLACE OF DEATH a. COUNTY _____				2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission): a. STATE Missouri b. COUNTY Washington			
b. CITY (If outside corporate limits, write RURAL and give town) St. Louis		c. LENGTH OF STAY (in this place) 4 Days		c. CITY OR TOWN Potosi		d. Is Residence within limits of a city or incorporated town? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
d. FULL NAME OF HOSPITAL OR INSTITUTION St. Luke's Hospital				e. STREET ADDRESS (If rural, give location) 404 Pine St. 11001			
3. NAME OF DECEASED (Type or Print) Elza		a. (First)		b. (Middle)		c. (Last) Hornsey	
4. DATE OF DEATH		5. SEX Male		6. COLOR OR RACE White		7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married	
8. DATE OF BIRTH Jan. 10, 1889		9. AGE (In years last birthday) 67		10. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Bank President		11. BIRTHPLACE (City and State or Foreign Country) Potosi, Missouri	
12. CITIZEN OF WHAT COUNTRY? U.S.A.		13a. FATHER'S NAME William Hornsey		13b. MOTHER'S MAIDEN NAME Sarah Hornsey		14. NAME OF HUSBAND OR WIFE Margaret Mary Hornsey	
15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) Yes		16. SOCIAL SECURITY NO. W. W. # 1 494-09-1370		17. INFORMANT'S SIGNATURE OR NAME Mrs. Margaret Mary Hornsey, ADDRESS			
18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c))		MEDICAL CERTIFICATION POTOSI, MO. I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Thrombosis of basilar artery Cerebral arteriosclerosis Morbid conditions, if any, giving rise to the above cause (a) stating the underlying cause last. DUE TO (b) Cerebral arteriosclerosis DUE TO (c) _____ II. OTHER SIGNIFICANT CONDITIONS Conditions contributing to the death but not related to the disease or condition causing death.				INTERVAL BETWEEN ONSET AND DEATH 5 days ?	
19a. DATE OF OPERATION _____		19b. MAJOR FINDINGS OF OPERATION _____				20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" 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) 332x			
21d. TIME OF INJURY (Month) (Day) (Year) (Hour) 5-5-56		21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input checked="" type="checkbox"/>		21f. HOW DID INJURY OCCUR? _____			
22. I hereby certify that I attended the deceased from May 1, 1956, to May 5, 1956, that I last saw the deceased alive on May 5, 1956, and that death occurred at 9:25 P. M., from the causes and on the date stated above. 5-7-56							
23a. SIGNATURE (Degree or title) W. Itner George W. Itner M.D.				23b. ADDRESS 3720 Washington 3720 Washington		23c. DATE SIGNED 5-7-56	
24a. BURIAL, CREMATION, REMOVAL (Specify) Removal		24b. DATE 5-6-56		24c. NAME OF CEMETERY OR CREMATORY New Masonic Cem.		24d. LOCATION (City, town, or county) (State) Potosi, Missouri.	
DATE REC'D BY LOCAL REG. MAY 8 1956		REGISTRAR'S SIGNATURE [Signature]		25. FUNERAL DIRECTOR'S SIGNATURE ADDRESS Arthur W. Smith, Potosi, Missouri.			

(Licensed Embalmer's Statement on Reverse Side)

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

MAY 25 1957

JUN 10 1957

JUL 2 1956

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.....  
Signature of Student Embalmer

Signed *Stanley H. Dixon*

Licensed Embalmer No. *4419*

P. O. Address *H. L.*

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 embalmed by a STUDENT, he also shall sign in his OWN handwriting.  
If this body is not embalmed, fact should be so stated above.