DECEASED Color or race Theory Francis VanderMierden Dec 28 56, Male Sex Male Secondary Miscource Married Mar		THE DIVISION OF HE	ALTH OF MISSOURI		4บอออ
PRIMARY REG. DIST. NO. 32 PRIMARY REG. DIST. NO. 51/2 Register' No. 41/2	FILED LAN 9 40E7			State File No	····
Bolliger b. CIVITY of courted corporate limits, write RUBAL and give processing to the control of the control		REG. DIST. NO. 32			
TOWN Lutesville Republic of tandwitted, give street address or location of the Control of tandwitted, give street address or location of tandwitted or tandwitted, give street address or location of the Control of the Contro			11 00-140	Where decoased lived. If ins b. COUNTYBO	titution: residence befor Llinger
HOSPITAL OR INSTITUTION 3. NAME OF DECEASED Henry Francis VanderMierden ORTH Dec 28 56. (Type of Print) Francis VanderMierden ORTH Dec 28 56. Male (To. Collor or Race White Mitter Mitter) Francis VanderMierden ORTH Dec 28 56. Male (To. Collor or Race White Mitter) Francis VanderMierden ORTH Dec 28 56. Male (To. Collor or Race White Mitter) Francis VanderMierden ORTH Dec 28 56. Male (To. Collor or Race White Mitter) Francis VanderMierden ORTH Dec 28 56. Male (To. Collor or Race White Mitter) Francis VanderMierden ORTH Dec 28 56. Male (To. Collor or Race White Mitter) Francis VanderMierden ORTH Dec 28 56. Male (To. Collor or Race White Mitter) Francis VanderMierden ORTH Dec 28 56. Male (To. Collor or Race White Mitter) Francis VanderMierden ORTH Dec 28 56. Male (To. Collor or Race White Mitter) Francis VanderMierden ORTH Dec 28 56. Male (To. Collor or Race White Mitter) Francis VanderMierden ORTH Dec 28 56. Male (To. Collor or Race White Mitter) Francis VanderMierden ORTH Dec 28 56. Male (To. Collor or Race White Marriage Control or Marriage Control or Marriage Control or Marriage Collor or Marriage Collo	TOWN Lutesville	R township STAY (in this place)	OR 60~	d Is Res	idence within limits of or incorporated town?
DECEASED Henry Francis VanderMierden OF DEAT Dec 28 56,	d. FULL NAME OF (II not in bospital of HOSPITAL OR INSTITUTION	institution, give street address or location)			e Mo.
Male White Married (State of Special Married (Cat) and State or Foreign Country (Country (Country)) (Country) (Count			, ,	DEATH Dec	
done during most of working life, went it retired) 3a. FATHER'S NAME GOOTGE VANDE OF MISSAND OR WIFE GOOTGE VANDE OF MAKE SCHULTY, 15. WAS DECEASED EVER IN U.S. ARMED FORCES? 16. SOCIAL SECURITY NO. 17. INFORMANT'S SIGNATURE OR NAME ADDRES 18. CAUSE OF DEATH Enter only one cause per in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause per in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause per in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause per in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause per in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause per in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause per in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause per in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause per in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (b), and (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (c) 18. CAUSE OF DEATH Enter only one cause for in line for (a), (c) 18. CAU		7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married	July 11th 188	leathlethday) Months	17 FORDER 11 HE
George VandererMierden, Schulty, Sophie Markermierden, Internal Experiment Addition of the Marker of detwo of service; Internal Experiment Interna	10a. USUAL OCCUPATION (Give kind of wo done during most of working life, even if retire	" I - " UICTOV		MO,	12. CITIZEN OF WHA COUNTRY? J S A,
NO.	3a. FATHER'S NAME George Vanderer		Schulty, So	phie Nander n	nierden,
INCOME 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, asthemia, etc. It means the discovery conditions, if any, giving DUE TO (b) *This does not mean the discovery conditions, if any, giving DUE TO (b) *This does not mean the discovery conditions, if any, giving DUE TO (b) *This does not mean the discovery conditions of the above cause (a) stating rise to the above cause (a) stating death. **DUE TO (c) **II. OTHER SIGNIFICANT CONDITIONS** **Conditions contributing to the death but not related to the disease or condition causing death. **TON HEADY COUNTY* **JUCIDE (Repedity) **JUCIDE (Repedity) **JUCIDE (Repedity) **JUCIDE (Month) **JUC	(Yee, no, or unknown) (If yee, gird war or day		Tens Vander		<u> </u>
Morbid conditions, if any, giving DUE TO (b) Morbid conditions, if any, giving DUE TO (b) Morbid conditions, if any, giving as hearl failure, asthenia, etc. It means the discast, injury, or complication which caused death. DUE TO (c) II. OTHER SIGNIFICANT CONDITIONS Conditions contributing to the death but not reduced to the disease or condition causing death. 19a. DATE OF OPERATION 19b. MAJOR FINDINGS OF OPERATION 21c. (CITY, TOWN, OR TOWNSHIP) SUICIDE HOMICIDE HOMICIDE MORK	18. CAUSE OF DEATH Enter only one cause per 1. DISEASE OR		CERTIFICATION	salun	ONSET AND DEATH
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tion which caused death. 11. OTHER SIGNIFICANT CONDITIONS Conditions contributing to the death but not related to the disease or condition causing death. 19a. DATE OF OPERATION 21a. ACCIDENT TION 21b. MAJOR FINDINGS OF OPERATION 21c. (CITY, TOWN, OR TOWNSHIP) 21d. ACCIDENT SUICIDE HOMICIDE 21d. TIME (Month) (Day) (Year) (Hour) Coccurred of Millert Work At	etc. It means the dis-	cause last.	who remails	mula de	feare
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SUICIDE HOMICIDE 21d. TIME (Month) (Day) (Year) (Hour) 21e. INJURY OCCURRED WHILE MORE NOT WHILE WORK AT WORK		INDINGS OF OPERATION		442x	
22. I hereby certify that I attended the deceased from forward of the deceased from forward forwa	21a. ACCIDENT (Specify) SUICIDE HOMICIDE	21b. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)		iP) (COUNTY)	(STATE)
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TOT SELECTIVAL (Boods) Dec 3/1st 56 Glennon, Cemetery Near Lutesville, Mo.		(Degree or title)	23b. ADDRESS	le Mo	12/29/5
DAYE REC'D BY LOCAL REGISTRAR'S SIGNATURE 25BENEFAL FUNE AL HOME, Lutesville,	24a BURIAL CREMA 24b. DATE SION PEMOVAL (Boods Dec 3/1		l l		. •
12.21.56 1/100. 10 som Naar	DAYE REC'D BY LOCAL REGISTRAR' 12-31-56 Mrs.	Signature Baford Crader	25Baker Fusional	signature, Luter	Sville,



STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose	name is recorded on the reverse side of this certificate was emba
by me, or by	, Student Embalmer No
working under my personal supervision	

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Fai

Signed # Boku Signature of Student Embalmer

Licensed Embalmer No. 357

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.