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, & Welfare
S. Public
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Doctor, coroner, etc. must use only standard nomenclature in item 18. No symptoms will be listed.
All diseases in Part I must be causally related.

USE ONLY BLACK INK OR RIBBON TYPEWRITE IF POSSIBLE

THE DIVISION OF HEALTH OF MISSOURI

STANDARD CERTIFICATE OF DEATH

58-035810
STATE FILE NUMBER

FILED NOV 10 1958 Registration District No. 72 Primary Registration District No. 4134 Registrar's No. 141

1. PLACE OF DEATH
a. COUNTY: Clay
b. CITY (If outside corporate limits, give TOWNSHIP only) OR TOWN: Smithville — Inside Limits: Yes [X] No [ ]
c. FULL NAME OF HOSPITAL OR INSTITUTION (If NOT in hospital, give location): Community Hospital — Length of stay in 1b: 1 wk.

2. USUAL RESIDENCE (Where deceased lived. If institution: Residence before admission)
a. STATE: Missouri b. COUNTY: Clay Platte
c. CITY OR TOWN: Edgerton — Inside Limits: Yes [X] No [ ]
d. STREET ADDRESS (If outside, give location): 083 — Reside on Farm: Yes [ ] No [ ]

3. NAME OF DECEASED (Type or print): First / Middle / Last: Arthur Thomas Baber, Sr.
4. DATE OF DEATH: Month / Day / Year: Oct. 29, 1958
5. SEX: Male 0
6. COLOR OR RACE: White
7. MARRIED [X] NEVER MARRIED [ ] WIDOWED [ ] DIVORCED [ ]
8. DATE OF BIRTH: Oct. 7, 1882
9. AGE (In years last birthday): 76 — IF UNDER 1 YEAR: Months / Days — IF UNDER 24 HRS.: Hours / Min.
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired): Cook
10b. KIND OF BUSINESS OR INDUSTRY: Restaurant
11. BIRTHPLACE (City and state or country): Platte County, Mo. 0
12. CITIZEN OF WHAT COUNTRY? U.S.A.
13a. FATHER'S NAME: Tyler Baber
13b. MOTHER'S MAIDEN NAME: Ella Snider
14. NAME OF HUSBAND OR WIFE: Hattie Baber
15. WAS DECEASED EVER IN U. S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service)
16. SOCIAL SECURITY NO.: 496-26-5405
17. INFORMANT: Hattie Baber — Address: Edgerton, Mo.

MEDICAL CERTIFICATION

18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c).)
PART I. DEATH WAS CAUSED BY:
IMMEDIATE CAUSE (a): CVA — INTERVAL BETWEEN ONSET AND DEATH: 1 wk
Conditions, if any, which gave rise to above cause (a), stating the underlying cause last.
DUE TO (b):
DUE TO (c): 331X
PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal disease condition given in PART I (a)
19. WAS AUTOPSY PERFORMED? YES [ ] NO [ ] 0

20a. ACCIDENT [ ] SUICIDE [ ] HOMICIDE [ ]
20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in PART I or PART II of item 18.)
20c. TIME OF INJURY: Hour a.m. p.m. Month, Day, Year
20d. INJURY OCCURRED WHILE AT WORK [ ] NOT WHILE AT WORK [ ]
20e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)
20f. CITY, TOWN, OR LOCATION / COUNTY / STATE

21. I attended the deceased from 10-22-58 to 10-29-58 and last saw ~~him~~ him alive on 10-29-58
Death occurred at 7:15 P.M. on the date stated above; and to the best of my knowledge, from the causes stated.

22a. SIGNATURE: Paul E. Greaves (Degree or title) 0
22b. ADDRESS: Smithville, Mo.
22c. DATE SIGNED: 10-30-58

23a. BURIAL, CREMATION, REMOVAL (Specify): Burial
23b. DATE: 10/31/1958
23c. NAME OF CEMETERY OR CREMATORY: Ridgley Cemetery
23d. LOCATION (City, town, or county) (State): Edgerton, Mo.

24. FUNERAL DIRECTOR: Pollins-Nash — ADDRESS: Edgerton, Mo.
25. DATE RECD. BY LOCAL REG.: 10-30-58
26. REGISTRAR'S SIGNATURE: Marguerite Hudgens

(Licensed Embalmer's Statement on Reverse Side)

RECEIVED
NOV 4 1958
CLAY CO.
HEALTH CENTER

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 H. LeRoy Mooney

Licensed Embalmer No. 4176

P. O. Address Liberty 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 embalmed by a STUDENT, he also shall sign in his OWN handwriting.

If this body is not embalmed, fact should be so stated above.