

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

59-019035
STATE FILE NUMBER
2 5058
Registrar's

FILED JUN 4 1959 Registration District No. Primary Registration District No.

1. PLACE OF DEATH a. COUNTY		2. USUAL RESIDENCE (Where deceased lived. If institution: Residence before admission) a. STATE Missouri b. COUNTY	
b. CITY (If outside corporate limits, give TOWNSHIP only) OR TOWN St. Louis,		Inside Limits Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	c. CITY OR TOWN St. Louis,
c. FULL NAME OF (If NOT in hospital, give location) HOSPITAL OR ST. St. Louis-Little Rock INSTITUTION Hospital, Inc.,		Length of stay in lb 3 days	d. STREET ADDRESS 4059 Cook Ave., (If outside, give location) Reside on Farm Yes <input type="checkbox"/> No <input type="checkbox"/>
3. NAME OF DECEASED (Type or print) First Robert Middle - Last Chisum			4. DATE OF DEATH Month May Day 21, Year 1959
5. SEX Male	6. COLOR OR RACE Colored	7. MARRIED <input checked="" type="checkbox"/> NEVER MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED <input type="checkbox"/>	8. DATE OF BIRTH Dec. 10, 1904
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Mechanical Laborer		10b. KIND OF BUSINESS OR INDUSTRY Railroad	9. AGE (In years at birthday) 54 yrs.
13. FATHER'S NAME King Chisum		13b. MOTHER'S MAIDEN NAME Fannie	14. NAME OF HUSBAND OR WIFE Margaret
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. 491-12-5855	17. INFORMANT Margaret Chisum Address 4059 Cook
18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c).) PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (a) Cachexia			INTERVAL BETWEEN ONSET AND DEATH
Conditions, if any, which gave rise to above cause (a), stating the underlying cause last. DUE TO (b) Carcinoma of Esophagus			
DUE TO (c) Terminal			150 X
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 <input type="checkbox"/> NO <input checked="" type="checkbox"/>
20a. ACCIDENT <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/>		20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in PART I or PART II of item 18.)	
20c. TIME OF INJURY Hour Month, Day, Year a.m. p.m.			
20d. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>		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 May 19, 1959 to May 21, 1959 and last saw her alive on May 21, 1959 Death occurred at 9:45 P.M., m on the date stated above; and to the best of my knowledge, from the causes stated.			
22a. SIGNATURE Barbara Passanante (Degree or title)		22b. ADDRESS 1755 South Grand Blvd.,	22c. DATE SIGNED 5-23-59
23a. BURIAL, CREMATION, REMOVAL (Specify)	23b. DATE 3-27-59	23c. NAME OF CEMETERY OR CREMATORY Washington Park St. Louis Co. Missouri	23d. LOCATION (City, town, or county) (State)
24. FUNERAL DIRECTOR Watson & Son Funeral Home-Chouteau		25. DATE RECD. BY LOCAL REG. MAY 25 '59	26. REGISTRAR'S SIGNATURE Carl Smith, M.D.

USE ONLY BLACK INK OR RIBBON TYPEWRITE IF POSSIBLE

MEDICAL CERTIFICATION

All diseases in Part I must be causally related.

m 0 B

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 *Fulton E. Calkins*

DATE, TIME, PLACE OF EMBALMING

DATE, TIME, PLACE OF EMBALMING Licensed Embalmer No. *7198*

P. O. Address *St. Louis*

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.