Dept. Health, Duc., & Welfare
U. S. Public Health Service

FILED VS JUN 22 1960

THE DIVISION OF HEALTH OF MISSOURI

STANDARD CERTIFICATE OF DEATH

-60-023706
STATE FILE NUMBER

Registration District No. 178 Primary Registration District No. _____ Registrar's No. 59

V. S. 300
Rev. 1-57

1. PLACE OF DEATH
a. COUNTY Lewis
b. CITY OR TOWN (If outside corporate limits, give TOWNSHIP only) Lewis — Inside Limits Yes [X] No [ ]
c. FULL NAME OF HOSPITAL OR INSTITUTION (If NOT in hospital, give location) 90 — Length of stay in lb Life

2. USUAL RESIDENCE (Where deceased lived. If institution: Residence before admission)
a. STATE Missouri b. COUNTY Lewis
c. CITY OR TOWN La Belle 0560 — Inside Limits Yes [ ] No [ ]
d. STREET ADDRESS (If outside, give location) — Reside on Farm Yes [ ] No [ ]

3. NAME OF DECEASED (Type or print) First Blanche Middle Last Bondurant

4. DATE OF DEATH Month Day Year June 15, 1960

5. SEX Female
6. COLOR OR RACE White
7. MARRIED [ ] NEVER MARRIED [ ] WIDOWED [X] DIVORCED [ ]
8. DATE OF BIRTH July 11, 1867
9. AGE (In years last birthday) 92 — IF UNDER 1 YEAR Months 11 Days 4 — IF UNDER 24 HRS. Hours Min.

10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Housewife
10b. KIND OF BUSINESS OR INDUSTRY
11. BIRTHPLACE (City and state or country) Virginia
12. CITIZEN OF WHAT COUNTRY? U.S.A.

13a. FATHER'S NAME Thomas Sanderson
13b. MOTHER'S MAIDEN NAME Mary Jane Drummond
14. NAME OF HUSBAND OR WIFE F. Marion Bondurant

15. WAS DECEASED EVER IN U. S. ARMED FORCES? (Yes, no, or unknown) no (If yes, give war or dates of service) no
16. SOCIAL SECURITY NO.
17. INFORMANT Ruby Bondurant Address La Belle, Missouri

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) Cardio-vascular-renal disease — INTERVAL BETWEEN ONSET AND DEATH 1 yr.
Conditions, if any, which gave rise to above cause (a), stating the underlying cause last. DUE TO (b) _____
DUE TO (c) 442X
PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal disease condition given in PART I (a) Senility

19. WAS AUTOPSY PERFORMED? 2 YES [ ] NO [X]

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 June 9, 1960, to June 15, '60 and last saw her alive on June 14, 1960
Death occurred at 8:30 A. m on the date stated above; and to the best of my knowledge, from the causes stated.

22a. SIGNATURE (Degree or title) Harry L. McCracken D.O.
22b. ADDRESS La Belle, Missouri
22c. DATE SIGNED 6/17/60

23a. BURIAL, CREMATION, REMOVAL (Specify) Burial
23b. DATE 6/16/1960
23c. NAME OF CEMETERY OR CREMATORY La Belle Cemetery
23d. LOCATION (City, town, or county) (State) La Belle, Missouri

24. FUNERAL DIRECTOR Jacobus J. ADDRESS La Belle Mo
25. DATE RECD. BY LOCAL REG. 6-18-60
26. REGISTRAR'S SIGNATURE Mrs. Henry Lloyd

(Licensed Embalmer's Statement on Reverse Side)

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

0

JUN 22 1960

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 Myself, Student Embalmer No. ..... working under my personal supervision.

Student ..... Signature of Student Embalmer

Signed J. Kader Jr

Licensed Embalmer No. 4328

P. O. Address Labelle, 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.