MISSOURI DIVISION OF HEALTH – STANDARD CERTIFICATE OF DEATH

63-019671
STATE FILE NUMBER

DO NOT WRITE ON THIS STUB

AMENDED

VS 300
Rev. 4/59

1 0380
2 0380 2
3
4 1
5 1
6
7 0
8 2
9 4201
10
11
12 90.2
13 1-0

USE BLACK INK OR TYPEWRITER RIBBON

AMENDMENTS ON THIS RECORD ARE AS FOLLOWS

ITEM NO.	SHOULD READ	INSTEAD OF	DATE AMENDED

BY AFFIDAVIT OF DOCUMENT

Registration District No. 120 Primary Registration District No. _____ Registrar's No. 46

FILED MAY 23 1963

1. PLACE OF DEATH
a. COUNTY: Gentry
b. CITY (If outside corporate limits, give TOWNSHIP only) OR TOWN: King City — Length of stay in 1b: 6 yrs
c. FULL NAME OF (If NOT in hospital, give location) HOSPITAL OR INSTITUTION: – — Inside Limits: Yes ☒ No ☐

2. USUAL RESIDENCE (Where deceased lived. If institution: Residence before admission)
a. STATE: Mo. b. COUNTY: Gentry
c. CITY OR TOWN: King City — Inside Limits: Yes ☒ No ☐
d. STREET ADDRESS (If outside, give location): – — Reside on Farm: Yes ☐ No ☒

3. NAME OF DECEASED (Type or print): First: Lulu Middle: – Last: Weatherd
4. DATE OF DEATH: Month: May Day: 13 Year: 1963
5. SEX: Female
6. COLOR OR RACE: White
7. Married ☒ Never Married ☐ Widowed ☐ Divorced ☐
8. DATE OF BIRTH: 15 Apr. 82
9. AGE (last birthday): 81 yrs — IF UNDER 1 YEAR: Months, Days — IF UNDER 24 HR: 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: Home
11. BIRTHPLACE (City and state or country): Gentry Co. Missouri
12. CITIZEN OF WHAT COUNTRY: U.S.A.
13a. FATHER'S NAME: Wesley Myrick
13b. MOTHER'S MAIDEN NAME: Rebecca Ward
14. NAME OF HUSBAND OR WIFE: Eddie Elden Weatherd
15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown): No (If yes, give war or dates of [redacted]
16. SOCIAL SECURITY NO.:
17. INFORMANT: Mrs. Robert Clark Address: King City, Mo.,

MEDICAL CERTIFICATION

18. CAUSE OF DEATH (Enter only one cause per ...)
PART I. DEATH WAS CAUSED BY:
IMMEDIATE CAUSE (a): Coronary occlusion — INTERVAL BETWEEN ONSET AND DEATH: 2 hrs
Conditions, if any, which gave rise to above cause (a), stating the underlying cause last.
DUE TO (b):
DUE TO (c):
PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal disease condition given in PART I (a)
PART III. If deceased was female was there a pregnancy in last 90 days. ☐ Yes ☒ No ☐ Unknown

19. WAS AUTOPSY PERFORMED? YES ☐ NO ☒
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 Jan 1945 to May 13, 1963 and last saw her alive on May 13, 1963
Death occurred at 2 A. m on the date stated above, and to the best of my knowledge, from the causes stated.

22a. SIGNATURE (Degree or title): Dr Joseph Barnes Do
22b. ADDRESS: King City, Mo
22c. DATE SIGNED: 5-13-63

23a. BURIAL, CREMATION, REMOVAL (Specify): Burial
23b. DATE: May 15, 1963
23c. NAME OF CEMETERY OR CREMATORY: Ford City
23d. LOCATION (City, town, or county) (State): East of King City, Mo.

24. FUNERAL DIRECTOR: Roland D Clark ADDRESS: King City Mo
25. DATE RECD. BY LOCAL REG.: 5-20-63
26. REGISTRAR'S SIGNATURE: Mrs. L. W. Bare

(Licensed Embalmer's Statement on Reverse Side)

Recd 6-20-63

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_____ Signed Roland D Clark
Signature of Student Embalmer

Licensed Embalmer No. 4477

P. O. Address Linglitty 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.