

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

MISSOURI STATE BOARD OF HEALTH
STANDARD CERTIFICATE OF DEATH

3166

State File No.

FILED FEB 11 1942

Registration District No. 668

Primary Registration District No. 3032

Registrar's No. 37

1. PLACE OF DEATH:

(a) County. Pettis
(b) City or town. Sedalia
(If outside city or town limits, write "RURAL" and name of township)
(c) Name of hospital or institution: 413 East 7th St.
(If not in hospital or institution, write street number or location)
(d) Length of stay: In hospital or institution. 53 Yrs. (Specify whether
in this community. years, months or days)

3. (a) PRINT FULL NAME Joseph Saner

3. (b) If veteran, name war. 3. (c) Social Security No.

4. Sex. Male 5. Color or race. White 6. (a) Single, widowed, married, divorced. Married
6. (b) Name of husband or wife. Elizabeth Saner 6. (c) Age of husband or wife if alive. Nov. 29 1864 1874 years (Month) (Day) (Year)
7. Birth date of deceased.

8. AGE: Years 67 Months I Days 22 If less than one day hr. min.

9. Birthplace. Chmois Missouri (City, town, or county) (State or foreign country)

10. Usual occupation. Retired Railway Brakeman

11. Industry or business.

MOTHER FATHER { 12. Name. Henry Saner
13. Birthplace. Missouri (City, town, or county) (State or foreign country)
14. Maiden name. Pauline Seidner
15. Birthplace. Missouri (City, town, or county) (State or foreign country)

16. (a) Informant. Mrs. Joseph Saner
(b) Address. 413 East 7th St. Sedalia

17. (a) Burial (b) Date thereof. Jan. 23/42
(Burial, cremation, or removal) (Month) (Day) (Year)
(c) Place: burial or cremation. Calvary Cem.

18. (a) Signature of funeral director. McLaughlin Bros.
(b) Address. Sedalia Missouri

19. (a) Jan 23/42 Mrs. Anna Berger (b) Mrs. Anna Berger
(Date received local registrar) (Registrar's signature)

2. USUAL RESIDENCE OF DECEASED:

(a) State. Missouri (b) County. Pettis
(c) City or town. Sedalia
(If outside city or town limits, write "RURAL")
(d) Street No. 413 East 7th St. (If rural, give location)
(e) Citizen of foreign country? (Yes or No)
If yes, name country.

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month Jan day 21st year 1942 hour 12 minute 0 M.

21. I hereby certify that I attended the deceased from Jan 21 1942 to Jan 21 1942; that I last saw him alive on Jan 21 1942; and that death occurred on the date and hour stated above.

Immediate cause of death. Found Dead
Probably Coronary
occlusion of
arterio sclerosis
Due to. arterio sclerosis
Due to.

Other conditions. (Include pregnancy within 3 months of death)

Major findings: Of operations. 94a
Of autopsy. none done
PHYSICIAN Underline the cause to which death should be charged statistically.

22. If death was due to external causes, fill in the following:

(a) Accident, suicide, or homicide (specify).
(b) Date of occurrence.
(c) Where did injury occur? (City or town) (County) (State)
(d) Did injury occur in or about home, on farm, in industrial place, in public place?

While at work? (Specify type of place) (e) Means of injury.
23. Signature. W. T. Beshof (M. D. or other)
Address. Sedalia Mo Date signed. 1-23-42

APR 16 1942

FEB 24 1942

RECEIVED

Charlot Health Officer No. 8,

License No. _____

Case No. 2-10-42

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 _____

_____, Registered Apprentice No. _____,
working under my personal supervision.

Signed P. E. Baker

Licensed Embalmer No. 2419

P. O. Address Sedalia

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

MISSOURI STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

State of mo. }
 County of Pettis } ss.

State File No.

AFFIDAVIT FOR CORRECTION OF A RECORD

Local Registrar's No.

On this day of, 194....., before me appears.....

for Joseph Daner, who, upon oath, states that the original record of ^{birth} death
^{died}
^{born} Jan 21, 1942, in the State of
 Missouri, and which was filed at on, 19....., should be corrected as follows:

Item No. 8 should read 67 yrs

Instead of 77 yrs

Item No. should read

Instead of

Item No. 7 should read Nov 29, 1874

Instead of Nov 29, 1864

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

The above is true to the best of my knowledge, information and belief.

(SEAL)

Affiant

John A. Daner Son
11517 Linnet Ave.
 Present Address.

Relationship.

Subscribed and sworn to before me this 14 day of April, 1942

ANDREW DOBEY, Notary Public

My Commission Expires Aug. 12, 1944

Andrew Doby Notary Public.

Affidavits containing erasures will not be accepted; draw one line through error and write above it.

S-3166