

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

State File No. **12723**

FILED MAY 12 1952

BIRTH NO. _____ REG. DIST. NO. **137** PRIMARY REG. DIST. NO. **5508** Registrar's No. **26**

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| 1. PLACE OF DEATH a. COUNTY Henry | | 2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission). a. STATE Missouri b. COUNTY Henry | |
| b. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Rural Deepwater Twp 5xys | | c. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Rural Deepwater Twp | |
| d. FULL NAME OF HOSPITAL OR INSTITUTION Deepwater Twp | | d. STREET ADDRESS (If rural, give location) Deepwater Twp 04731 | |

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| 3. NAME OF DECEASED (Type or Print) a. (First) Hubert b. (Middle) Lewis c. (Last) Bettels | | | 4. DATE OF DEATH (Month) (Day) (Year) 5-1-1952 | | |
| 5. SEX Male | | 6. COLOR OR RACE White | | 7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Single | |
| 8. DATE OF BIRTH 8-12-1947 | | 9. AGE (In years last birthday) 5 | | 10. CITIZEN OF WHAT COUNTRY? U.S.A. | |
| 10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) | | 10b. KIND OF BUSINESS OR INDUSTRY | | 11. BIRTHPLACE (State or foreign country) Missouri | |

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| 13a. FATHER'S NAME Andrew Bettels | | 13b. MOTHER'S MAIDEN NAME Adelie Cook | | 14. NAME OF HUSBAND OR WIFE | |
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| 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. | | 17. INFORMANT'S SIGNATURE OR NAME ADDRESS Andrew Bettels Montrose Mo | |
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| 18. CAUSE OF DEATH Enter only one cause per line for (a), (b), and (c) *This does not mean the mode of dying, such as heart failure, asthma, etc. It means the disease, injury, or complication which caused death. | I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Inten. abdominal hemorrhage most likely sup capsular splenic | | INTERVAL BETWEEN ONSET AND DEATH 12 hrs. |
| | DUO TO (b) Kicked by Horse | | |
| | DUO TO (c) E9281 | | |
| II. OTHER SIGNIFICANT CONDITIONS Conditions contributing to the death but not related to the disease or condition causing death. | | | 2-2 |

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| 19a. DATE OF OPERATION home | 19b. MAJOR FINDINGS OF OPERATION 142 | 20. AUTOPSY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
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| 21a. ACCIDENT SUICIDE HOMICIDE (Specify) accident | 21b. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.) farm | 21c. (CITY, TOWN, OR TOWNSHIP) (COUNTY) (STATE) Montrose Henry Mo. |
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| 21d. TIME OF INJURY (Month) (Day) (Year) (Hour) April 30 '52 3p | 21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input checked="" type="checkbox"/> | 21f. HOW DID INJURY OCCUR? Kicked by Horse |
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22. I hereby certify that I attended the deceased from **4/30/52**, 19__, to **5/1/52**, 19__, that I last saw the deceased alive on **4/30/52**, 19__, and that death occurred at **2:30a** m., from the causes and on the date stated above.

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| 23a. SIGNATURE (Degree or title) R. A. Sickman M.D. | 23b. ADDRESS Appleton City Mo. | 23c. DATE SIGNED 5/4/52 |
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|--|------------------------------|--|---|
| 24a. BURIAL, CREMATION, REMOVAL (Specify) burial | 24b. DATE 5-3-1952 | 24c. NAME OF CEMETERY OR CREMATORY German town Cem | 24d. LOCATION (City, town, or county) (State) Montrose MO |
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| DATE REC'D BY LOCAL REG. May-3-52 | REGISTRAR'S SIGNATURE Florence Adair | 25. FUNERAL DIRECTOR'S SIGNATURE ADDRESS Sickman-Dunning Clinton Mo |
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WRITE PLAINLY—USING UNFADING BLACK INK—MAKE A PERMANENT RECORD

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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
Student Embalmer

Signed Robert L. Durang

Licensed Embalmer No. 4210

P. O. Address Clinton MS

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.