į.	بمربعوب	NO	-	CTANDAG	U CERTIFICAT	TE OF DEATH		¥±	
,	/	JN 18 1	157	0	L)		i , 5	TATE FILE NU	MBER 4/9
	ינ עשוז	TH TO B	Salatration D	istrict No	Primary	Registration Dist	ict No (0.) 9	Regist	ror's No. H
1.	PLACE OF D	EATH					CE (Where deceased li	ved. If institutio	on: Residence before odmission)
	a. COUNTY	St	rannon			a. STATE	ussouri b	COUNTY	hannon
		•		TOWNSHIP only) Ir	!!	c. CITY OR	77.0 ATV	PY.	Inside Limits
			. u	irch Ireer	,, H	TOWN 0	III Birch		Yes No D
	HOSPITAL INSTITUTI	OR _		ive location) Length Most		d. STREET ADDRESS	mi. S.E.	e, give location	n) Beside on Fa Yes □ No□
	AME OF		First	Midd	lle.	Last	4. DATE OF	Month	Day Year
	Type or print)		Louis	Minor		ler 💮	DEATH		3, 1957
5. s		6. COLOR		7. MARRIED I NEVER	MARKIEU LI	TE OF BIRTH	9. AGE (In last birth		YEAR IF UNDER 24 HRS
10-	male	whi		WIDOWED	DIVORCED	ay 26, 1	878 ' 79	4 12 CITIZE	N OF WHAT COUNTRY?
ıva.	USUAL OCCUPATION (Give kind of work done if during most of working life, even if retired)		٠,		RTHPLACE (City on	d state or country)	/	u.S.G.	
13.	FATHER'S NAME			farmung		CLUMOUS OTHER'S MAIDEN A	IAME		<u>u.o.u.</u>
1	Clintor	n illande	ο <i>Ι</i> 1.			Suda	em.		
	WAS DECEASED	EVER IN U. S. A			ECURITY NO. 17. IN	FORMANT "		Address	
	no	(1) gra, give a	u, o, com , o, se,	,	1	Daniel Da	บเลือก Rin	ch Tree	e. Misour
	PART I, E	PEATH WAS CAU IMMEDIATE	SED BY: CAUSE (a):	e per line for (a), (b). COROMA			ACUTE		INTERVAL BETWEEN ONSET AND DEATH
2	Condition Condition which ga above con stating the	ma, if any, ve rise (a), be under	SED BY:						INTERVAL BETWEEN
ICATION	Condition Condition which ga above co stating to lying co	ms, if any, or rise to unuse (a). he under-	SED BY: CAUSE (a) DUE TO (b) DUE TO (c)		ey Occi	USION	ACUTE		INTERVAL BETWEEN
ICATION	Condition Condition which ga above co stating to lying co	ms, if any, or rise to unuse (a). he under-	SED BY: CAUSE (a): DUE TO (b) DUE TO (c) IT CONDITIONS C	CORONA	JT NOT RELATED TO TH	E TERMINAL DISEASE (ACUTE CONDITION GIVEN IN PART 4	i(a) 2C	INTERVAL BETWEEN ONSET AND DEATH TO THE PROPERTY OF THE PROPER
CERTIFICATION	Condition which ga above ci stating ti fying ca PART II. 0	DEATH WAS CAU IMMEDIATE As, if any, oe rise to susse (a), he under- use last. DTHER SIGNIFICAN SUICIDE	SED BY: CAUSE (a) DUE TO (b) DUE TO (c) HOMICIDE	CORO AJA	JT NOT RELATED TO TH	E TERMINAL DISEASE (ACUTE CONDITION GIVEN IN PART 4	i(a) 2C	INTERVAL BETWEEN ONSET AND DEATH TO THE PROPERTY OF THE PROPER
MEDICAL CERTIFICATION	Condition which ga above constating the lying con PART II. (20a. ACCIDENT	DEATH WAS CAU IMMEDIATE As, if any, ve rise to suse (a), he under- use last. DITHER SIGNIFICAN SUICIDE Hour Month a. m. p. m.	SED BY: CAUSE (a) DUE TO (b) DUE TO (c) IT CONDITIONS C HOMICIDE A, Day, Year ZDe. PLACI	CORO AJA	JT NOT RELATED TO THE	E TERMINAL DISEASE (ACUTE CONDITION GIVEN IN PART L L L L L L L L L L L L L	i(a) 2C	INTERVAL BETWEEN OBSET AND DEATH TO CALL TO SEE THE OBSET AND DEATH TO SEE THE OBJET AND DEATH TO SEE
MEDICAL CERTIFICATION	Condition which ga above constains the stating the sta	DEATH WAS CAU IMMEDIATE As, if any, be rise to suse (a), he under- use last. DITHER SIGNIFICAN SUICIDE Hour Month a.m. p.m. CURRED NOT WHILE AT WORK	SED BY: CAUSE (a) DUE TO (b) DUE TO (c) IT CONDITIONS C HOMICIDE A, Day, Year Jarm,	COROAJA	JT NOT RELATED TO THE	E TERMINAL DISEASE OF	ACUTE CONDITION GIVEN IN PART THE PART I OF PART I	1(a) 2C 11 of item 18.)	INTERVAL BETWEEN OBSET AND DEATH TO CAN THE PROPERTY OF THE PR
MEDICAL CERTIFICATION	Condition which ga above constains it in in it is to be a constains of the	DEATH WAS CAU IMMEDIATE As, if any, oe rise to susse (a), he under- susse (ast.) OTHER SIGNIFICAN SUICIDE Hour Month a. m. CURRED NOT WHILE AT WORK	SED BY: CAUSE (a) DUE TO (b) DUE TO (c) IT CONDITIONS C HOMICIDE A, Day, Year Jarm,	CORO AJA CONTRIBUTING TO DEATH BE 200. DESCRIBE HOW IN. E OF INJURY (e. g., in o. factory, street, office black	JI NOT RELATED TO THE JURY OCCURRED. (Tabout home, 20,1, dg., etc.)	E TERMINAL DISEASE OF	ACUTE CONDITION GIVEN IN PART L L L L L L L L L L L L L	COUNTY	INTERVAL BETWEEN OISET AND DEATH III III III III III III III III III I
MEDICAL CERTIFICATION	Condition which ga above containing it lying ca PART II. Co 20a. ACCIDENT COMMITTEE 20c. TIME OF INJURY 20d. INJURY OCC WHILE AT WORK 21. I attended	DEATH WAS CAU IMMEDIATE As, if any, oe rise to susse (a), he under- susse (ast.) OTHER SIGNIFICAN SUICIDE Hour Month a. m. CURRED NOT WHILE AT WORK	SED BY: CAUSE (a) DUE TO (b) DUE TO (c) IT CONDITIONS C HOMICIDE A, Day, Year Jarm,	CORO AJA CONTRIBUTING TO DEATH BE 200. DESCRIBE HOW IN. E OF INJURY (e. g., in o. factory, street, office black	JI NOT RELATED TO THE JURY OCCURRED. (Tabout home, 20,1, dg., etc.)	E TERMINAL DISEASE OF	ACUTE CONDITION GIVEN IN PART Lary in Part I or Part I COCATION And lest saw her	COUNTY	INTERVAL BETWEEN OISET AND DEATH III III III III III III III III III I
MEDICAL CERTIFICATION	Condition which ga above constains it lying ca PART II. Co 20a. ACCIDENT 20c. TIME OF INJURY 20d. INJURY OCC WHILE AT WORK 21. I attended Death occ 22a. SIGNATUI BURIAL, CREMATS REMOVAL (Specia	DEATH WAS CAU IMMEDIATE As, if any, or rise to use (a), he under- use last. DITHER SIGNIFICAN SUICIDE Hour Month a. m. D. m. CURRED NOT WHILE AT WORK d the decease usered at RE OH, 230 DAT (g)	SED BY: CAUSE (a) DUE TO (b) DUE TO (c) NT CONDITIONS C HOMICIDE A. Day, Year 20e. PLACE farm, and from	COROAJA CONTRIBUTING TO DEATH BE 200. DESCRIBE HOW IN FOR THIS IN THE STREET OF THE	JI NOT RELATED TO THE JURY OCCURRED. (Tabout home, 20/ Jo., etc.) To on the date state METERY OR CREMAT	E TERMINAL DISEASE OF Enter nature of inj CITY, TOWN, OR L	CONDITION GIVEN IN PART TOTAL TOTAL TOTAL CONDITION CONDITION GIVEN IN PART CONDITION GIVEN	COUNTY alive on wowledge, from the confounty	INTERVAL BETWEEN ONSET AND DEATH III III III III III III III III III I
MEDICAL CERTIFICATION	Condition which ga above containing the stating the st	SUICIDE Hour Month a. m. CURRED NOT WHILE AT WORK d the decease Suiced at RE RE (9) 100 100 100 100 100 100 100 1	SED BY: CAUSE (a) DUE TO (b) DUE TO (c) ST CONDITIONS C HOMICIDE D. Day, Year 20e. PLACE far m.	COROAJA CONTRIBUTING TO DEATH BE 200. DESCRIBE HOW IN E OF INJURY (e.g., in o. factory, street, office bi- Logsan or titley 23c. NAME OF CE OOK FOR	JI NOT RELATED TO THI JURY OCCURRED. (To about home, 201. dg., etc.) Long the date state METERY OR CREMAT EST. Ceme	E TERMINAL DISEASE OF Enter nature of inf CITY, TOWN, OR L ADDRESS FORY Z TENER Z L L L L L L L L L L L L	CONDITION GIVEN IN PART TONDITION GIVEN IN PART TO PART I OF PART I T	COUNTY COUNTY alive on cowledge, from the confounts confounts confounts confounts	INTERVAL BETWEEN OISET AND DEATH III
MEDICAL CERTIFICATION	Condition which ga above constaining it lying ca PART II. (20a. ACCIDENT 20c. TIME OF INJURY 20d. INJURY OCC WHILE AT WORK 21. I attended Death occ 22a. SIGNATUI BURIAL, CREMATE REMOYAL (Specie	DEATH WAS CAU IMMEDIATE As, if any, or rise to a susse (a), he under- use last. DITHER SIGNIFICAN SUICIDE Hour Month a.m. CURRED NOT WHILE AT WORK d the decease surred at RE ON, 236 DAT (y) OR	SED BY: CAUSE (a) DUE TO (b) DUE TO (c) NT CONDITIONS C HOMICIDE DAY, Year Add from	COROAJA CONTRIBUTING TO DEATH BE 200. DESCRIBE HOW IN E OF INJURY (e. g., in or lactory, street, office black Logsec or titley 23c. NAME OF CE OCK JOY DRESS	JI NOT RELATED TO THI JURY OCCURRED. (To about home, 201. dg., etc.) Long the date state METERY OR CREMAT EST. Ceme	E TERMINAL DISEASE OF Enter nature of inj CITY, TOWN, OR L	CONDITION GIVEN IN PART TONDITION GIVEN IN PART TO PART I OF PART I T	COUNTY COUNTY alive on cowledge, from the confounts confounts confounts confounts	INTERVAL BETWEEN ONSET AND DEATH 19. WAS AUTOPSY PERFORMED? YES NO STATE STATE 22c. DATE SIGNER (State)

STATEMENT BY LICENSED EMBALMER

I hereby certify the	•				= -	
by me, or by		- 		, Studen	t Embalmer N	o
working under my person	nal superv	ision	٠			

Licensed Embalmer No. · P. O. Address

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING.

to comply with the above constitutes grounds for revocation of license). If embalmed by a STUDENT, he also shall sign in his OWN handwriting.

Student.

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