

FEB 16 1937

MISSOURI STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

Do not use this space.

874

1. PLACE OF DEATH

County Franklin.Registration District No. 297

File No.

Township

Primary Registration District No. 3016Registered No. 7City Washington, Mo. (No.) St. Ward)2. FULL NAME Anetta Weggenmann.(a) Residence, No. 512 Freemont, Washington, Mo., 3rd. Ward.
(Usual place of abode)

(If nonresident, give city or town and State)

Length of residence in city or town where death occurred 46 yrs. 9 mos. 16 ds. How long in U. S., if of foreign birth? yrs. mos. ds.

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL CERTIFICATE OF DEATH

3. SEX Female 4. COLOR OR RACE White 5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (*write the word*) Married21. DATE OF DEATH (MONTH, DAY, AND YEAR) Jan. 15th, 1937.5A. IF MARRIED, WIDOWED, OR DIVORCED
~~HUSBAND~~
(OR) WIFE OF Paul Weggenmann.22. I HEREBY CERTIFY, That I attended deceased from
Sept. 30, 1936 to Jan. 15, 1937, 19....I last saw her alive on Jan. 14, 1937, 19.... Death is said6. DATE OF BIRTH (MONTH, DAY, AND YEAR) Mar. 29th, 1890.to have occurred on the date stated above, at 4:30 A.M.7. AGE YEARS MONTHS DAYS IF LESS than 1 day, hrs. or min.
46 9 16

The principal cause of death and related causes of importance were as follows:

Cancer of Stomach 9-30-368. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. House-wife.
9. Industry or business in which work was done, as silk mill, saw mill, bank, etc. X
10. Date deceased last worked at this occupation (month and year) Dec. 1st, 1936. 11. Total time (years) spent in this occupation X

Other contributory causes of importance:

None12. BIRTHPLACE (CITY OR TOWN) Washington,
(STATE OR COUNTRY) Missouri.Name of operation None Date of13. NAME Henry Vick.What test confirmed diagnosis? Clinical Was there an autopsy? No.14. BIRTHPLACE (CITY OR TOWN) Unknown.
(STATE OR COUNTRY) Germany.

23. If death was due to external causes (violence), fill in also the following:

Accident, suicide, or homicide? Date of injury, 19....

Where did injury occur?

(Specify city or town, county, and State)

Specify whether injury occurred in industry, in home, or in public place.

15. MAIDEN NAME Minnie Wilmescherr.16. BIRTHPLACE (CITY OR TOWN) Beaufort,
(STATE OR COUNTRY) Missouri.17. INFORMANT Paul Weggenmann.
(ADDRESS) 512 Freemont St., Washington, Mo.18. BURIAL, CREMATION, OR REMOVAL
PLACE Washington, Mo. DATE Jan. 17th, 1937.19. UNDERTAKER Nieburg & Vitt, Inc.,
(ADDRESS) Washington, Mo.20. FILED Jan 15 1937 A. A. May
Registrar.24. Was disease or injury in any way related to occupation of deceased? No.

If so, specify

(Signed) [Signature], M. D.(Address) Washington, Mo.

CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important.

