

DIVISION OF HEALTH - STANDARD CERTIFICATE OF DEATH

'59 0 4 2 5 6

FILED VS DEC 23 1959

Primary Registration District No

Reg str's No **211586**

STATE FILE NUMBER

PLACE OF DEATH St. Louis		USUAL RESIDENCE (Where deceased lived if institution Residence before admission) Missouri COUNTY Crawford	
TOWN St. Louis		CITY OR TOWN Sullivan	
FULL NAME OF HOSPITAL ROUTE City Hospital		STREET ADDRESS	

NAME OF DECEASED James Leroy Bottomley		DATE OF DEATH December 11, 1959	
SEX Male	RACE White	MARRIAGE Married <input checked="" type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/>	AGE (at birth) 59
OCCUPATION Retired Ballplayer		BIRTHPLACE Oglesby, Ill.	
FATHER'S NAME John Bottomley		MOTHER'S MAIDEN NAME Elisabeth Carter	
WAS DECEASED EVER IN U.S. ARMED FORCES? No		INFORMANT Betty Bottomley, Sullivan, Mo.	

CAUSE OF DEATH (Enter only one cause for a, b, and c) PART I. DEATH WAS CAUSED BY IMMEDIATE CAUSE <i>Myocardial infarction</i>	INTERVAL BETWEEN ONSET AND DEATH <i>immediate</i>
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CONDITIONS (if any) WHICH GAVE RISE TO DEATH OR TO THE UNDERLYING CAUSE DUE TO b	OTHER (if any) CAUSES CONTRIBUTING TO DEATH DUE TO c
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WAS ANY POST-MORTEM EXAMINATION PERFORMED? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TIME OF DEATH December 11, 1959 1:30 PM	PLACE OF DEATH December 9, 1959
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SIGNATURE <i>Chimbaum</i>	DATE 12-14-59	CITY Sullivan, Mo.
REMOVAL Hoener Funeral Home, Cuba, Mo.	CEMETERY I.O.O.F. Cemetery	DATE DEC 14 1959