

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

Do not use this space.

MAY 25 1934

1. PLACE OF DEATH

County Registration District No.
Township Primary Registration District No.
City St. Louis (No. # 3608 Nebraska)

File No. 14271
Registered No. 3441
St. Ward)

2. FULL NAME

(a) Residence, No. Henry Kessler
(Usual place of abode) Maxville, Maxville County, Mo.
Length of residence in city or town where death occurred yrs. mos. ds. How long in U. S., if of foreign birth? yrs. mos. ds.

PERSONAL AND STATISTICAL PARTICULARS

MEDICAL CERTIFICATE OF DEATH

3. SEX Mal 4. COLOR OR RACE White 5. SINGLE, MARRIED, WIDOWED, OR DIVORCED (write the word) Widow

21. DATE OF DEATH (MONTH, DAY, AND YEAR) April 5 1934

5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF Hannora Kessler

22. I HEREBY CERTIFY, that I attended deceased from March 29 1934 to April 5 1934.
I last saw him alive on April 5 1934. Death is said to have occurred on the date stated above, at 3:30 a.m.
The principal cause of death and related causes of importance were as follows:

6. DATE OF BIRTH (MONTH, DAY, AND YEAR) Oct 21 1853

7. AGE YEARS MONTHS DAYS IF LESS than 1 day, hrs. or min.
80 5 14

Acute Interstitial Nephritis - duration 1 week.
Senile condition also had aged
Other contributory causes of importance:
arteriosclerosis - duration 1 yr.

8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Retired Farmer
9. Industry or business in which work was done, as silk mill, saw mill, bank, etc.
10. Date deceased last worked at this occupation (month and year) 11. Total time (years) spent in this occupation.....

12. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) MO

13. NAME Mike Kessler

14. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Germany

15. MAIDEN NAME Unknown

16. BIRTHPLACE (CITY OR TOWN) (STATE OR COUNTRY) Germany

17. INFORMANT Wm Kessler
(ADDRESS) Maxville Mo

18. BURIAL, CREMATION, OR REMOVAL PLACE Maxville Mo DATE Apr 7 34

19. UNDERTAKER Fenchel Med Co
(ADDRESS) 7819 N. 1st St

20. FILED J. J. Brudeck Registrar.

Date of onset
90

Name of operation Date of
What test confirmed diagnosis? Physical Was there an autopsy? no

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.

Manner of injury
Nature of injury

24. Was disease or injury in any way related to occupation of deceased?
If so, specify

(Signed) W. H. Waster M. D.
(Address) 3608 Standard Bldg

RECORDS IN THIS FILE MAY BE PROPERLY CLASSIFIED. EXACTS.

1000
102

14271

3441

#2
St. Louis City

Dear Sir:

It is essential that death certificates be complete in every particular in order that proper classification may be made. You are therefore requested to make every effort to obtain the following information, indicated by check marks, lacking from the death certificate.

Name: Henry Reaser

Who died at _____ on Apr 5 - 1934

Residence: No. _____ St. _____
(If nonresident, city or town)

Length of residence in city or town where death occurred: Years _____ Months _____ Days _____

Sex M Color or race W Single, married, widowed or divorced: _____

Date of birth _____ Age: Years 80 Months 5 Days 14

Occupation: (a) Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. (b) Industry or business in which work was done, as silk mill, saw mill, bank, etc.

Principal cause of death: ac Intest ruptures
Date-deceased-last-worked-at-this-occupation: Month _____ Year _____

Birthplace-(State-or-country): Senile contraction and

Birthplace-of-father-(State-or-country) bad cold

Birthplace-of-mother-(State-or-country) _____

Principal cause of death: Fall severe cold

Other contributory causes of importance arteriosclerosis

Name of operation _____ Date of _____

What test confirmed diagnosis? _____ Was there an autopsy?

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.

Manner of injury _____

Nature of injury _____

Was disease or injury in any way related to occupation of deceased? _____

If so, specify _____

Name of physician Dr. W. Walters

Address of physician 3608 8th St. St. Louis, Mo

Signature of Registrar J. P. Debeck 9-5-34

This information is sought for statistical purposes only and in order that the official report may be complete and correct. Please reply promptly using the enclosed official envelope which requires no postage.

Reg. Dist. No. 791

Very truly yours,
E. T. McLaughlin
S.A.

Primary Reg. Dist. No. 1003

Special Agent.

Henry Philip Kessler

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Birth: Oct. 21, 1853
 Maxville (Jefferson County)
 Jefferson County
 Missouri, USA

Death: Apr. 5, 1934
 Maxville (Jefferson County)
 Jefferson County
 Missouri, USA

Son of Michael Kessler from Germany and Clerissa Zinzer, husband of Hanora Kessler. Additional information is from the death certificate. Father of seven: Mamie, Wolfgang Francis, William Jacob, Julia, Elenora, Henry, and Raymond Kessler.

Family links:

Parents:

Michael Kessler (1815 - 1898)
 Clerissa *Zinzer* Kessler (1820 - 1901)

Spouse:

Hanora *Tangeny* Kessler (1862 - 1924)*

Children:

Mary *Kessler* Ruess (1882 - 1962)*
 Francis Wolfgang Kessler (1883 - 1968)*
 Julia E *Kessler* Spitz (1888 - 1937)*
 Eleanor *Kessler* Marx (1892 - 1978)*
 Henry G Kessler (1897 - 1981)*
 Raymond M Kessler (1902 - 1973)*
 Howard W Ruess (1919 - 2008)*

Siblings:

Elizabeth Katharine *Kessler* Steckel (1846 - 1927)*
 Adam Kessler (1847 - 1903)*



Added by: [Clara & Terry L. Luster, Sr.](#)



Cemetery Photo

Added by: [DesotoJoe/The Record Man](#)

Mary Margaret Kessler (1852 - 1857)*
Henry Philip Kessler (1853 - 1934)
Gertrude *Kessler* Hanson (1856 - 1940)*
Clara *Kessler* Becker (1858 - 1943)*
Michael Kessler (1865 - 1872)*

*[Calculated relationship](#)

Burial:

[Immaculate Conception Cemetery](#)

Arnold

Jefferson County

Missouri, USA

[Edit Virtual Cemetery info](#) [?]

Maintained by: [Momstore](#)

Originally Created by: [Clara & Terry L.
Luster,...](#)

Record added: Jun 04, 2009

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