Kentucky Post – February 1, 1946

HOHNHORST—Ferd J., beloved husband of Mayme Hohnhorst (nee Toebbe), Thursday, January 31, 1946, at his home, 760 Highland pike, Covington, Ky., age 65 years. Funeral Monday, February 4, from the John N. Middendorf Sons Funeral Home, 917 Main st., at 8:30 a. m. Requiem High Mass at St. Augustine Church, 9 a. m. Interment Mother of God Cemetery.

Bell.
4185 (Ludlow)

Form V. S. 1-A
DEPARTMENT OF COMMERCE
Bureau of the Census

DELAY

COMMONWEALTH OF KENTUCKY
Department of Health
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

State File No. 121
Registrar's No. 2290

Registration District No. 790 Primary Registration District No.

1. PLACE OF DEATH:
(a) County Kenton
(b) City or town Covington (If outside city or town limits, write RURAL)
(c) Name of hospital or institution: St. Elizabeth (If not in hospital or institution write street number or location)
(d) Length of stay: In hospital or community 1 wk (years, months or days)

2. USUAL RESIDENCE OF DECEASED:
(a) State Ky (b) County Kenton
(c) City or town Covington (If outside city or town limits, write RURAL)
(d) Street No. 760 Highland Pike (If rural give precinct)
(e) If foreign born, how long in U. S. A.? yrs

3(a) FULL NAME FERD J. Hohnhorst.
3(b) If veteran, Name war ✓
3(c) Social Security No. ✓
4. Sex M
5. Color or race W
6(a) Single, widowed, married, divorced Married
6(b) Name of husband or wife Mayme Toebbe Hohnhorst
6(c) Age of husband or wife if alive Years
7. Birth date of deceased Aug (Month) 15 (Day) 1880 (Year)
8. AGE: Years 65 Months 5 Days 13 If less than one day hr. min.
9. Birthplace Cincinnati, Ohio
10. Usual occupation President of Machine Shop.
11. Industry or business Precision Tool Co.
FATHER 12. Name Joseph Hohnhorst
13. Birthplace Cincinnati, Ohio
MOTHER 14. Maiden name Rosina Koch
15. Birthplace Covington, Ky
16(a) Informant's own signature Mrs Mayme Hohnhorst
(b) Address 760 Highland Pike
17. BURIAL, CREMATION, OR REMOVAL
Place Mother of God's Date Feb. 4 1946
18(a) Signature of funeral director J. N. Middendorf
(b) Address Covington, Ky.
19(a) FEB 4 1946 (Date received by local registrar) (b) Mrs. H. C. Ahrt (Registrar's Signature)

MEDICAL CERTIFICATION
20. DATE OF DEATH Jan 31 1946
21. I hereby certify that I attended the deceased from Jan 1946 to Jan 31 1946 that I last saw him alive on Jan 31 1946 and that death occurred on the date stated above at M.
Immediate cause of death: Cirrhosis, Liver — DURATION
Due to Compound fract. L pt femur
Due to
Other conditions (Include pregnancy within 3 months of death)
Autopsy findings:
Operations
Autopsy
If death was due to external causes, fill in the following:
(a) Accident, suicide, or homicide (specify)
(b) Date of occurrence
(c) Where did injury occur? In or about home, on farm, in industrial place, in public place? (Specify type of place)
While at work? (d) Means of injury
23. Signature Frances Bell (M. D. or Other)
Address 224 Elm St Date signed 2-4-46
Ludlow

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