



## August Clemens Smith

### 1877-1953

maternal grandfather



When August Clemens Smith was born on March 4, 1877, in Quincy, Illinois, his father, Mr. Smith, was 27. He married Bertha M. Grealey in 1899. They had three children during their marriage. He died on April 6, 1953, in St Louis, Missouri, at the age of 76, and was buried in Jennings, Missouri.



You • • •



Dorothy Bertha  
Smith



August Clemens  
Smith



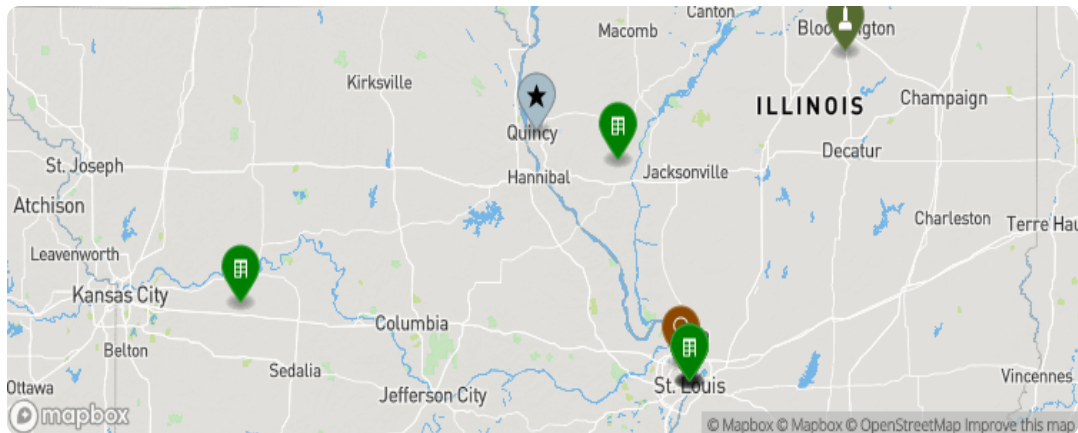
Smith



Bertha M. Grealey



Unknown  
mother



1877

### Birth

August Clemens Smith was born on March 4, 1877, in Quincy, Illinois, to Mr. Smith, age 27.

4 Mar 1877 • Quincy, Adams, Illinois, USA

1870

### Residence

August Clemens Smith lived in Davis, Missouri, in 1870.

Age: 3; Census Post Office: Concordia

1870 • Davis, Lafayette, Missouri, United States

1898 **Military**

August Clemens Smith served in the military in 1898 in Illinois when he was 21 years old.

1898 • Illinois, United States

1899 **Marriage of Smith / Greasley**



1899-04-23

1899 **Marriage**

August Clemens Smith married Bertha M. Grealey in 1899 when he was 22 years old.



**Bertha M. Grealey**

1882-1917

Abt 1899

1899 **Residence**

Abt 1899 • 14243 North Ninth

1900 **Residence**

August Clemens Smith lived in Perry, Illinois, in 1900.

Marital Status: Single; Relation to Head of House: Laborer

1900 • Perry, Pike, Illinois, USA

1910

## Residence

Marital Status: Married; Relation to Head of House: Head

1910 • St Louis Ward 3, Saint Louis City, Missouri, USA

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1911

## Birth of son

His son Elmer A.H. was born on July 24, 1911, in St Louis, Missouri.



**Elmer A.H. Smith**

1911-1998

7 24 1911 • St Louis, Missouri, USA

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1914

## Birth of daughter

His daughter Dorothy Bertha was born on February 28, 1914, in St Louis, Missouri.



**Dorothy Bertha Smith**

1914-1995

28 Feb 1914 • Saint Louis, Missouri

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1917

## Birth of son

His son John Joseph was born on September 5, 1917, in St Louis, Missouri.



**John Joseph Clark**

1917-2002

Sep 5 1917 • Saint Louis, MO

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1917

## Death of wife

His wife Bertha M. passed away on September 6, 1917, in St Louis, Missouri, at the age of 35. They had been married 18 years.



**Bertha M. Grealey**

1882-1917

6 Sep 1917 • St Louis Mo

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1917

## Adoption

Joseph Smith was taken to be raised by his Cousin Hellen Grealey Clark. His name was changed to Joseph Clark.

18 Sep 1917 • Saint Louis, MO

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1917

## Residence

August Clemens Smith lived in St Louis, Missouri, in 1917.

1917-1918 • St Louis, Missouri

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1920 **Residence**

August Clemens Smith lived in St Louis, Missouri, in 1920.

Marital Status: Married; Relation to Head of House: Head

1920 • St Louis Ward 27, St Louis (Independent City), Missouri, USA

1930 **Residence**

August Clemens Smith lived in St Louis, Missouri, in 1930.

1930 • St Louis, St Louis (Independent City), Missouri

1953 **Death**

August Clemens Smith died on April 6, 1953, in St Louis, Missouri, when he was 76 years old.

Age: 76

V. S. No. 300  
REV. 10-48

FILED APR 18 1953

THE DIVISION OF HEALTH OF MISSOURI  
STANDARD CERTIFICATE OF DEATH

State File No. 16228

BIRTH NO. REG. DIST. NO. 318 PRIMARY REG. DIST. NO. 1003 Registrar's No. 3678

1. PLACE OF DEATH a. COUNTY		2. USUAL RESIDENCE (Where deceased lived. If institution; residence before admission). a. STATE Missouri b. COUNTY	
b. CITY (If outside corporate limits, write RURAL and give township) OR TOWN St. Louis, Missouri	c. LENGTH OF STAY (in this place) 1 hour	c. CITY OR TOWN St. Louis	d. In Residence within limits of a city or incorporated town? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
d. FULL NAME OF HOSPITAL OR INSTITUTION St. Louis City Hospital		e. STREET ADDRESS (If rural, give location) 4200 N. Wharf St. 2099	
3. NAME OF DECEASED a. (First) AUGUST b. (Middle) C. c. (Last) SMITH		4. DATE OF DEATH (Month) (Day) (Year) APRIL 6, 1953	
5. SEX male	6. COLOR OR RACE white	7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) married	8. DATE OF BIRTH March 4, 1877
9. AGE (in years) (Month) (Day) (Hour) (Min.) 76		9. AGE (in years) (Month) (Day) (Hour) (Min.) 76	
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Retired		10b. KIND OF BUSINESS OR INDUSTRY	
11. BIRTHPLACE (City and State or Foreign Country) St. Louis, Missouri.		12. CITIZEN OF WHAT COUNTRY? U.S.A.	
13a. FATHER'S NAME unknown		13b. MOTHER'S MAIDEN NAME unknown	
14. NAME OF HUSBAND OR WIFE Bertha Smith		15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or date of service) NO	
16. SOCIAL SECURITY NO.		17. INFORMANT'S SIGNATURE OR NAME Mrs. Bertha Smith 4200 N. Wharf St.	
18. CAUSE OF DEATH (Enter only essential parts for (a), (b), and (c))		MEDICAL CERTIFICATION	
I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) ARTERIO-SCLEROTIC HEART DISEASE		INTERVAL BETWEEN ONSET AND DEATH 2 YRS.	
*This does not mean the mode of dying, such as heart failure, asthma, etc. It means the disease, injury, or complication which caused death.		II. OTHER SIGNIFICANT CONDITIONS	
19a. DATE OF OPERATION		19b. MAJOR FINDINGS OF OPERATION	
20. AUTOPSY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		21a. ACCIDENT SUICIDE HOMICIDE (Specify)	
21b. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)		21c. (CITY, TOWN, OR TOWNSHIP) (COUNTY) (STATE)	
21d. TIME OF INJURY (Month) (Day) (Year) (Hour) (Min.)		21e. INJURY OCCURRED WHILE AT <input type="checkbox"/> WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>	
21f. HOW DID INJURY OCCUR? 4200		22. I hereby certify that I attended the deceased from 4-6-53, 19, to 4-6-53, 19, that I last saw the deceased alive on 4-6-53, 19, and that death occurred at 1:30P. m., from the causes and on the date stated above.	
23a. SIGNATURE Thos. A. Jennings		23b. ADDRESS 1515 Lafayette Avenue	
23c. DATE SIGNED 4-6-53		24. NAME OF CEMETERY OR CREMATORY Memorial Park Cemetery	
24a. LOCATION (City, town, or county) St. Louis Co. Missouri.		24b. DATE 4-10-53.	
24c. FUNERAL DIRECTOR'S SIGNATURE Math Hermann & Son, Inc. 2161 E. Fair Ave.		24d. ADDRESS	
DATE REC'D BY LOCAL REG. APR 8 1953		25. FUNERAL DIRECTOR'S SIGNATURE	

WRITE PLAINLY—USING UNFADING BLACK INK—MAKE A PERMANENT RECORD

(Licensed Embalmers' Statement on Reverse Side)

6 Apr 1953 • St Louis Mo

**Burial**

Jennings, St. Louis County, Missouri, USA