

MISSOURI DIVISION OF HEALTH - STANDARD CERTIFICATE OF DEATH

DEPARTMENT OF PUBLIC HEALTH AND WELFARE

318

Primary Registration District No. 1003

Registrar's No.

9127-61-034280  
STATE FILE NUMBER

AMENDED

Registration District No. **FILED OCT 13 1961**

DATE AMENDED

INSTEAD OF

SHOULD READ

ITEM NO.

DOCUMENT

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, give TOWNSHIP only) OR TOWN **St. Louis** Length of stay in 1b **19 years**

c. CITY OR TOWN **St. Louis** Inside Limits Yes  No

c. FULL NAME OF (If NOT in hospital, give location) HOSPITAL OR INSTITUTION **5946 Goodfellow Blvd** Inside Limits Yes  No

d. STREET ADDRESS (If outside, give location) **5946 Goodfellow Blvd** Residence on Farm Yes  No

3. NAME OF DECEASED (Type or print) First **MATTHEW** Middle **FAVAZZA** Last

4. DATE OF DEATH **October 1 1961** Month Day Year

5. SEX **male** 6. COLOR OR RACE **white** 7. Married  Never Married  Widowed  Divorced

8. DATE OF BIRTH **8/14/1891** 9. AGE (last birthday) **70 years** IF UNDER 1 YEAR IF UNDER 24 HR  
Months Days Hours Min.

10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) **merchant** 10b. KIND OF BUSINESS OR INDUSTRY **Produce** 11. BIRTHPLACE (City and state or country) **Italy** 12. CITIZEN OF WHAT COUNTRY **U. S. A.**

13a. FATHER'S NAME **Frank Favazza** 13b. MOTHER'S MAIDEN NAME **Elizabeth Tocco** 14. NAME OF HUSBAND OR WIFE **Teresa Favazza**

15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) **No** 16. SOCIAL SECURITY NO. 17. INFORMANT **Teresa Favazza - 5946 Goodfellow Blvd.** Address

18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c).  
PART I. DEATH WAS CAUSED BY:  
IMMEDIATE CAUSE (a) **Coronary occlusion** INTERVAL BETWEEN ONSET AND DEATH **? records**  
DUE TO (b) **Arterio-sclerotic heart disease** **10 years**  
DUE TO (c) **Normal aging over the years.** **70 yrs.**  
PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal disease, condition given in PART I (a) **Diabetes - 5 yrs - mild (mellitus)** PART III. If deceased was female was there a pregnancy in last 90 days.  Yes  No  Unknown

19. WAS AUTOPSY PERFORMED? YES  NO  20a. ACCIDENT  SUICIDE  HOMICIDE  20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in PART I or PART II of item 18.) **420.0**

20c. TIME OF INJURY Hour a.m. p.m. / /

20d. INJURY OCCURRED WHILE AT WORK  NOT WHILE AT WORK  20e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.) / / 20f. CITY, TOWN, OR LOCATION COUNTY STATE / /

21. I attended the deceased from **1955** to **1961** and last saw him alive on **Sept 15, 1961**  
Death occurred at **7 P** m on the date stated above, and to the best of my knowledge, from the causes stated.

22a. SIGNATURE (Degree or title) **Barney W. Finzel M.D.** 22b. ADDRESS **6508 W Florissant Ave** 22c. DATE SIGNED **11/3/61.**

23a. BURIAL, CREMATION, REMOVAL (Specify) **burial** 23b. DATE **Oct. 4, 1961** 23c. NAME OF CEMETERY OR CREMATORY **Calvary Cemetery** 23d. LOCATION (City, town, or county) (State) **St. Louis Missouri**

24. FUNERAL DIRECTOR ADDRESS **BUCHHOLZ MORTUARY - 5967 W. Florissant** 25. DATE RECD. BY LOCAL REG. **OCT 3 1961** 26. REGISTRAR'S SIGNATURE **Loan Smith, M.D.**

**STATEMENT BY LICENSED EMBALMER**

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me,  
or by \_\_\_\_\_, Student Embalmer No. \_\_\_\_\_  
working under my personal supervision.

Student \_\_\_\_\_  
Signature of Student Embalmer

Signed

*Walter P. Berall*

Licensed Embalmer No. 4551

P. O. Address St Louis

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license).

If embalmed by a STUDENT, he also shall sign in his OWN handwriting.

If this body is not embalmed, fact should be so stated above.