DEC 3 1936

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

Do not use this space.

42717

791

1. PLACE OF DEATH

County ..... Registration District No. 1003 File No. 11225

Township ..... Primary Registration District No. ..... Registered No. .....

City St Louis Mo (No. ~~At Home~~ E Route to Hosp. St. ..... Ward)

2. FULL NAME Faustina ~~Peverotti~~ Pivirotto

(a) Residence, No. 5009 Shaw Ave St., 13 Ward. (If nonresident, give city or town and State)
(Usual place of abode)

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

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

5A. IF MARRIED, WIDOWED, OR DIVORCED HUSBAND OF (OR) WIFE OF Ettore Peverotti

6. DATE OF BIRTH (MONTH, DAY, AND YEAR) May, 16, 1886

7. AGE	YEARS	MONTHS	DAYS	If LESS than 1 day, ... hrs. or ..... min.
	50	5	26	

OCCUPATION

8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Housewife

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) Italy

FATHER

13. NAME Antonio Geboni

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

MOTHER

15. MAIDEN NAME Maria Mecilo

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

17. INFORMANT (ADDRESS) Mr Ettore Peverotti 5009 Shaw ave

18. BURIAL, CREMATION, OR REMOVAL PLACE St Calvary DATE Nov 14, 1936

19. UNDERTAKER (ADDRESS) Paul C Calabrese 5142 Gaggett ave

20. FILED NOV 12 1936 J. Bledick Registrar.

MEDICAL CERTIFICATE OF DEATH

No Phy in attendance

21. DATE OF DEATH (MONTH, DAY, AND YEAR) Nov. 11, 1936

22. I HEREBY CERTIFY, That I attended deceased from ....., 19....., to ....., 19.....

I last saw h..... alive on ....., 19..... Death is said to have occurred on the date stated above, at 2:30 A.m.

The principal cause of death and related causes of importance were as follows:

Pulmonary Tuberculosis — Date of onset

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Other contributory causes of importance:

Chr Myocarditis

Name of operation ..... Date of .....

What test confirmed diagnosis? ..... Was there an autopsy? yes

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) Harold [illegible], M. D.

(Address) [illegible]

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The Division of Health of Missouri

BUREAU OF VITAL STATISTICS

State File No. 42717-36

State of ..... } ss.
County of ..... }

AFFIDAVIT FOR CORRECTION OF A RECORD Local Registrar's No. 11225

On this ..... day of ....., 195....., before me appears .....

....., who, upon ..... oath, states that the original record of birth/death for Faustina Pivirotto died 11-11-1936, 19....., in the State of Missouri, and which was filed at Jefferson City, Missouri on ....., 19....., should be corrected as follows:

Item No. 13 should read Antonio Yannone

Instead of Antonio Geboni

Item No. ..... should read .....

Instead of .....

Item No. ..... should read .....

Instead of .....

Item No. ..... should read .....

Instead of .....

Item No. ..... should read .....

Instead of .....

Item No. ..... should read .....

Instead of .....

Item No. ..... should read .....

Instead of .....

Item No. ..... should read .....

Instead of .....

The above is true to the best of my knowledge, information and belief.

(SEAL) Affiant Fun. Dir.

Relationship.

5140 Daggett Ave

Present Address.

Subscribed and sworn to before me this 4 day of March, 1959

My Commission expires 3-8-61 Ella C. Gadbury Notary Public.

1. Affidavits containing erasures will not be accepted; draw one line through error and write above it.
2. An item already amended once by affidavit cannot be amended again by affidavit.
3. A surname is changed by court order or by adoption or legitimation procedures.

m V. S. 460

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