



City of Cambridge

39.

IN CITY COUNCIL

May 23, 1994

COUNCILLOR SULLIVAN
COUNCILLOR TOOMEY
COUNCILLOR BORN
COUNCILLOR DUEHAY
COUNCILLOR MYERS
MAYOR REEVES
VICE MAYOR RUSSELL
COUNCILLOR TRIANTAFILLOU
COUNCILLOR WALSH

ORDERED: That the City Clerk be and hereby is requested to prepare a suitable resolution regarding the death of Father William Cummings of St. Johns in North Cambridge.

In City Council May 23, 1994.

Adopted by the affirmative vote of nine members.

Attest:- D. Margaret Drury, City Clerk

A true copy;

ATTEST:-

D. Margaret Drury

D. Margaret Drury
City Clerk

5/23/94 42

8:05

C. Gooney Sullivan

Chicarello

① Lucy ~~Chicarello~~
Chicarello
Chicarello
41.

② Armando Simas

unwin

SK ③ Letter Wm. Cummings 39.
from St John's W/

Sullivan/Russell / Gooney

Arthur Hunt Sr. 40

W/9

Dwelling

Drury

Carly - see JEF

[INSTRUCTIONS ON REVERSE SIDE]
FOR USE BY
PHYSICIANS AND
MEDICAL EXAMINERS



The Commonwealth of Massachusetts

STANDARD CERTIFICATE OF DEATH
REGISTRY OF VITAL RECORDS AND STATISTICS

001050

REGISTERED NUMBER

STATE USE ONLY

STATE USE ONLY
PLACE
HOSP.
TYPE
VET.
HISP RACE
EDUC.
AGE
NATIVITY
MARITAL

DECEDENT

DECEDENT - NAME FIRST JAMES		MIDDLE ANDRE	LAST GATTUSO	SEX MALE	DATE OF DEATH (Mo., Day, Yr.) OCTOBER 14, 1992
PLACE OF DEATH (City/Town) CAMBRIDGE		COUNTY OF DEATH MIDDLESEX	HOSPITAL OR OTHER INSTITUTION - Name (If not in either, give street and number) THE YOVILLE HOSPITAL		
PLACE OF DEATH (Check only one): HOSPITAL: ☒ Inpatient ☐ ER/Outpatient ☐ DOA OTHER: ☐ Nursing Home ☐ Residence ☐ Other (Specify)			SOCIAL SECURITY NUMBER 017-05-0405		IF US WAR VETERAN SPECIFY WAR ---
WAS DECEDENT OF HISPANIC ORIGIN? (If yes, Specify Puerto Rican, Dominican, Cuban, etc.) ☒ NO ☐ YES 8a Specify:			RACE (e.g. White, Black, American Indian, etc.) (Specify): WHITE		DECEDENT'S EDUCATION (Highest Grade Completed) Elem/Sec (0-12) College (1-4, 5+) 12
AGE - Last Birthday (Yrs.) 74		UNDER 1 YEAR MOS DAYS b	UNDER 1 DAY HOURS MINS c	DATE OF BIRTH (Mo., Day, Yr.) DECEMBER 23, 1917	BIRTHPLACE (City and State or Foreign Country) NORTH ADAMS, MASSACHUSETT
MARRIED, NEVER MARRIED WIDOWED OR DIVORCED 12 WIDOWED		LAST SPOUSE (If wife, give maiden name) 13 HELEN BUNOWSKI		USUAL OCCUPATION (Prior - If retired) 14a PROPRIETOR	KIND OF BUSINESS OR INDUSTRY 14b BEAUTY SALONS
RESIDENCE - NO. & ST., CITY/TOWN, COUNTY, STATE/COUNTRY 15a 37 CHANDLERSTREET, WATERTOWN, MIDDLESEX MASSACHUSETTS					ZIP CODE 15b 02172
FATHER - FULL NAME 16 NICOLA GATTUSO		STATE OF BIRTH (If not in US, name country) 17 ITALY	MOTHER - NAME (GIVEN) (MAIDEN) 18 FRANCESCA DI PERI	STATE OF BIRTH (If not in US, name country) 19 ITALY	

INFORMANT

INFORMANT'S NAME 20 PATRICIA ROSWELL	MAILING ADDRESS - NO. & ST., CITY/TOWN, STATE, ZIP CODE 21 105 ASHTON AVENUE NORTH ADAMS, MA 01247	RELATIONSHIP 22 DAUGHTER
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DISPOSITION

METHOD OF DISPOSITION ☐ BURIAL ☐ CREMATION ☐ ENTOMBMENT ☐ REMOVAL FROM STATE 23 ☐ DONATION ☐ OTH. SPEC:	FUNERAL SERVICE LICENSEE 24 DONATO F. DAGNOLI	LICENSE # 25 5753
PLACE OF DISPOSITION (Name of Cemetery, Crematory or other) 26a EASTLAWN CEMETERY		LOCATION (City/Town, State) 26b WILLIAMSTOWN, MASSACHUSETTS
DATE OF DISPOSITION (Mo., Day, Yr.) OCTOBER 17, 1992		NAME AND ADDRESS OF FACILITY 26a/27 FLYNN & DAGNOLI-MONTAGNA 74 MARSHALL STREET N. ADAMS, MA 01247



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Non Consent Order #39

R-362

Councillors Sullivan, Toomey re: Prepare
a death resolution on Father William
Cummings of St. Johns in N. Cambridge.

In City Council May 23, 1994