

19a-Private Residence  
28-B/F issued on 4-1-58  
33223  
John Stompanato  
MEDICAL AND HEALTH DATA  
1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29  
30  
31  
32  
33  
34  
35  
36  
37  
38  
39  
40  
41  
42  
43  
44  
45  
46  
47  
48  
49  
50  
51  
52  
53  
54  
55  
56  
57  
58  
59  
60  
61  
62  
63  
64  
65  
66  
67  
68  
69  
70  
71  
72  
73  
74  
75  
76  
77  
78  
79  
80  
81  
82  
83  
84  
85  
86  
87  
88  
89  
90  
91  
92  
93  
94  
95  
96  
97  
98  
99  
100

STATE  
FILE  
NUMBER

CERTIFICATE OF DEATH  
STATE OF CALIFORNIA—DEPARTMENT OF PUBLIC HEALTH

LOCAL REGISTRATION  
DISTRICT AND  
CERTIFICATE NUMBER 7013 6016

1. NAME OF DECEASED—FIRST NAME: JOHN  
2. MIDDLE NAME: STOMPANATO JR  
3. LAST NAME: STOMPANATO JR  
4. DATE OF DEATH—MONTH, DAY, YEAR: April 4, 1958  
5. HOUR: 9:30 P.  
6. SEX: Male  
7. COLOR OR RACE: Cauc.  
8. BIRTHPLACE: Illinois  
9. DATE OF BIRTH: Oct. 9, 1925  
10. AGE: 32 YEARS  
11. NAME AND BIRTHPLACE OF FATHER: John Stompanato Sr., Italy  
12. NAME AND BIRTHPLACE OF MOTHER: Carmella Truppa, Italy  
13. CITIZEN OF WHAT COUNTRY: United States  
14. SOCIAL SECURITY NUMBER: 197-24-8212  
15. LAST OCCUPATION: Manager  
16. NUMBER OF YEARS IN THIS OCCUPATION: 2yrs  
17. NAME OF LAST EMPLOYING COMPANY OR FIRM: Martlewood Gift Shop  
18. KIND OF INDUSTRY OR BUSINESS: Gift Shop  
19. IF DECEASED WAS EVER IN U. S. ARMED SERVICES: World War II  
20. IF DECEASED EVER MARRIED: Divorced  
21. NAME OF PRESENT SPOUSE: [Blank]  
22. PRESENT OR LAST OCCUPATION OF SPOUSE: [Blank]

23. PLACE OF DEATH—NAME OF HOSPITAL: (None)  
24. STREET ADDRESS: 730 North Bedford Drive  
25. CITY OR TOWN: Beverly Hills  
26. COUNTY: Los Angeles  
27. LENGTH OF STAY IN COUNTY OF DEATH: 12 YEARS  
28. LENGTH OF STAY IN CALIFORNIA: 12 YEARS

29. LAST USUAL RESIDENCE—STREET ADDRESS: 806 South Robertson Blvd.  
30. CITY OR TOWN: Los Angeles  
31. STATE: Calif.  
32. NAME OF INFORMANT: Michael Cohen  
33. ADDRESS OF INFORMANT: 11719 San Vicente Blvd.  
34. CITY OR TOWN: Los Angeles

35. PHYSICIAN: Dr. Charles H. Langhans  
36. ADDRESS: MALL OF JUSTICE, LOS ANGELES  
37. DATE SIGNED: 4-11-58  
38. CORONER: Autopsy & Inquest  
39. ADDRESS: [Blank]

40. FUNERAL DIRECTOR: GODDARD & MARTINONI INC.  
41. ADDRESS: [Blank]  
42. DATE OF OPERATION: APR 11, 1958  
43. SIGNATURE: Roy P. Gilbert

44. CAUSE OF DEATH: STAB WOUND OF ABDOMEN PENETRATING LIVER, PORTAL.  
45. INTERVAL BETWEEN ONSET AND DEATH: 12-13  
46. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH: ~~XXXXXX~~ VBIN AND AORTA WITH MASSIVE HEMORRHAGE.

47. OPERATION:  SPECIFIC ACCIDENT, SLICED OR HOMICIDE  
48. DATE OF OPERATION: [Blank]  
49. AUTOPSY:  SPECIFIC ACCIDENT, SLICED OR HOMICIDE  
50. SPECIFY ACCIDENT, SLICED OR HOMICIDE: Justifiable Homicide  
51. DESCRIBE HOW INJURY OCCURRED: In protection of mother  
52. PLACE OF INJURY: House  
53. CITY, TOWN OR LOCATION: Beverly Hills, Los Angeles, Calif.