

University of Central Florida STARS

Carey Hand Funeral Home Records

Carey Hand Funeral Home Records

4-15-1941

Memoranda Book 143: Carey Hand Funeral Home records, April 15, 1941 to May 24, 1941

Carey Hand Funeral Home

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Garey Hand Funeral Home

Name of deceased Fudnich Date of death mon Cofe - 14 an 44 0 Cause of death _ Place of death Residence Age_23 Mo's____9 _ Days Y'rs ft. ____ in. Eves Height Weight_ Funeral at Der 0193 Μ Date ____ Account charged Address 121 Dean Hill Account guaranteed ____ Galet Address ___ Embalming & Jusang Robe, Suit, Dress Underwear and Hose * Casket 6-6 - metal Casket with Copper Lin. Style of Casket No. of Casket modern Outside Box _A-La Shipping Case or Vault Handles Pillow Set Name & d Name Plate Cemetery Ser Section_ Lot. I Other Graves X Grave on this date Cremation Urn Single Grave _ Opening and Closing Grave, Body Shipped to and R. R. Ticket _ Bough Cash advanced . Telegram Minister _ Casket Wagon Physician 2- mallow County or City Burial amb Automobiles _____ N. 2 un aggage or Express Train No. 3. m - apr - 21-

Garey Hand Funeral Home

monios Name of deceased Vameia Date of death men 4 Cause of death ouni Place of death Residence 1407 ____ 64 an _ Mo's_ Age____ Y'rs. . Days Weight_____ Height ft in. Eyes Funeral at Con 101 М Date _____ Account charged Balfh mario Address /407 6 hi Account guaranteed Address Embalming Robe, Suit, Dress Bla Underwear and Hose Casket 6-3- En or Casket with Copper Lin.4 Style of Casket No. of Casket 22 Tompa Outside Box ____ Shipping Case or Vault Pillow Set Name Plate : Cemetery Junword Lot_ Section____ I Other Graves X Grave on this date Cremation Urn ____ Single Grave _____ Opening and Closing Grave TV ME 15 Body Shipped to _____ R. R. Ticket Cash advanced ____ / a Telegram Minister _ U Casket Wagon _ Physician 2 County or City Burial _ Automobiles Sv Baggage or Express Train No. .

Garey Hand Funeral Home

Name of deceased Colliso ruit Date of death ___ Cause of death _ Place of death ____ ac oa Residence_____ __ Mo's____ A Days Age____ Y'rs.... Weight____ /SG Height___ ft. L in. Eyes. Funeral at ____ DE Date ____ Account charged ___ Address _____ Account guaranteed Address ___ Embalming Commelin 37.50 Robe, Suit, Dress . Underwear and Hose anno Casket _____ Oody Casket with Copper Lip Style of Casket -41 No. of Casket Outside Box Body C Shipping Case or Vault Handles 4-15-41 Pillow Set Extressed Name Plate aship Cemetery 2 The Lot T Section_ R I Other Graves X Grave on this date Cremation ____ Urn . Single Grave ____ Opening and Closing Grave Body Shipped to _____ R. R. Ticket Cash advanced Telegram _____ Minister ____ Casket Wagon _____ Physician _____ County or City Burial Automobiles ____ Baggage or Express Train No. _ 3750

Garey Hand Funeral Home let Cher. Name of deceased Anest Date of death ____ apro uses Cause of death _____/a mas Place of death . na Residence _ -- Mo's_ Age____ Y'rs__ Days Weight 18 5 Height Eyes Alu in. 35 Funeral at ____ SE 8-6 Date Lases 1934// Account charged 4-S.1 Address ___ Account guaranteed ____ Address _ Embalming Umatin 37 Robe, Suit, Dress ___ Underwear and Hose ____ Casket ___. Casket with Copper Lin. Style of Casket Dony any Handles ___ Pillow Set Name Plate _ Cemetery ____ 16=4/ Lot. Section___ I Other Graves wooden Bay X Grave on this date Cremation Chan Urn _____ Single Grave 12 1.0 Opening and Closing Grave . Body Shipped to _____ R. R. Ticket _____ Pt Mr. Q Cash advanced _____ Telegram ____ Minister _____ Casket Wagon _____ Physician _____ County or City Burial _____ Automobiles ____ Baggage or Express Train No. _

Garey Hand Funeral Home Name of deceased mid amu mal Date of death Wad-Cause of death . Place of death Oin 600 Residence _ Days Age 69 Y'rs Mo's 16 3 in. Height Eyes Weight_/ ft. 4 Funerabat a 199/ Date mo wid Account charged 2 en an Address 60 d --mone Account guaranteed Address . resema Embalming Robe, Suit, Dress Underwear and Hose Casket 6-3 4n Casket with Copper Lin. Style of Casket No. of Casket 1.3.41-0 Outside Box Reg Shipping Case or Vault Handles Er Pillow Set ym Name Plate unuvo Cemetery 2 81 Lot_ Section_ I Other Graves X Grave on this date 37.50 Crematio Urn Single Grave Opening and Closing Grave 60 Body Shipped to P. B 5 00 R. R. Ticket __ CA Cash advanced 7'9 Telegram Minister Sur A. "L'ud Casket Wagon Physician 4 da County or City Burial Automobiles S V Baggage or Express Train No.

Garen Hand Funeral Home

Name of deceased mis In orb Gree Date of death Cause of death Place of death Residence 123 Age____ /3 Mo's __ Days Y'rs in. Eyes Weight_ ft. Height Funeral at 195 Date Frida Account charged 4 Address 1734 11uch Account guaranteed asoment Address ___ Embalming ~ resema Robe, Suit, Dress Underwear and Hose Casket 6- 3- 94 Casket with Copper I Style of Casket No. of Casket 15 75 Outside Box R19 Shipping Case or Vault Handles Eyel. wh Pillow Set 9 fer Name Plate Cemetery 41 Lot_ Section_ 5 space I Other Graves X Grave on this date Cremation P. B Car Car m Urn Single Grave Ymeety Car Opening and Closing Grave 7 Body Shipped to E. R. R. Ticket Cash advanced Telegram Minister Casket Wagon Physician M_GLANdals County or City Burial Automobiles SYS Baggage or Express Train No.

nd. Smith 400 Name of deceased . Date of death ____ Cause of death ____ 2CP Place of death ____ es cit Residence 622 ----Age_____ Y'rs_____ Weight 2.35__ Height____ _/Q_ Days Mo's / Weight 2 25 _ in. Eyes_ Funeral at 198/ м Date ____ Account charged of organ & Address 62.2 Theley Account guaranteed _ Playamenta Address ----Embalming * 35100 ressing Robe, Suit, Dress Underwear and Hose Casket 4-6- metal Sil 225 Casket with Copper Lin. Style of Casket elser No. of Casket Dennie Outside Box 119 Shipping Case or Vault Handles 54 Pillow Set Yn Name Plat Cemetery Sest Lot. Section 17 I Other Graves X Grave on this date Cremation _____ Urn ____ Single Grave ____ Opening and Closing Grave . Body Shipped to Least 19.70 R. R. Ticket 1305 665 Cash advanced ____ Telegram ---10. 00 Minister ____ Casket Wagon al Beardall Physician _____/ County or City Burial _ Automobiles _____ Baggage or Express Train No. 2 Sat apr- 19-41

Garey Hand Funeral Home Name of deceased una Date of death _____ Cause of death ___ Place of death Residence Y'rs Mo's. Davs Weight_2/9_Height G ft. Eyes in. Funeral at Lehman Date Of Mt_ 198/1 Account charged Address _ Lochad 14 Account guaranteed Address _ umation 50.10 Embalming Robe, Suit, Dress _ Underwear and Hose . Casket ____ Casket with Copper Lin. Bedy anne Style of Casket 4 ACX + # 9 No. of Casket 138- Thing Outside Box form Baltimat Shipping Case or Vault Handles _ Pillow Set 30dy Comelio 3-02 Name Plate p. 4 Cemetery O.M. Section_ Lot. R I Other Graves X Grave on this date Cremation 15,00 Urn Small sound I Single Grave Engrance Opening and Closing Grave Body Shipped to R. R. Ticket Mil Cash advanced _____ Telegram ____ Minister _ Casket Wagon _____ Physician _____ County or City Burial _____ Automobiles _____ Baggage or Express Train No. ____

Garey Hand Funeral Home

Name of deceased Q haves Date of death april Cause of death _ Place of death de Residence 323 - 94. A Age____ 31__ Y'rs. Mo's Days Height Weight 170 . ft/ _ in. Eyes Funeral at Lanefred 4 P. M Date Sat - C Account charged _ Address 323-Account guaranteed ____ Address Embalming Robe, Suit, Dress Underwear and Hose Casket 6- 4- In Cloth Casket with Copper Lin. Style of Casket B. Ca. Slot No. of Casket 6000 Oul Outside Box Shipping Case or Vault Handles _____ Pillow Set. Name Plate Cemetery 12__ Lot Section_. I Other Graves spiner. 8 X Grave on this date Cremation Pis Con Urn Car min Single Grave T: Can No Cho Opening and Closing Grave Tt ete Body Shipped to Music R. R. Ticket ____ Cash advanced . Telegram MinisterRe Casket Wagon X Physician we North County or City Burial . Automobiles SY 5 Baggage or Express Train No.

Garey Hand Funeral Home Name of deceased ma mande Va Chalmer Date of death The apr -18-41 445 A Cause of death Carcimenia of Lung Place of death _R_M. Residence 1331 Coledge Paint 9. Pack Age____ 69_ Y'rs__ 9___ Mo's___ 13 _ Days_ Height_____ ft.__ ____ in. Eves Weight Funeralat Res Date det - alv; 19 198/1 Account charged artura C Address 1201 Con Account guaranteed Address Embalming Yourng Robe, Suit, Dress -Underwear and Hose -Casket 6-3- Oct 4 Click Casket with Copper Lin, Style of Casket 0 4 12 No. of Casket 1927-Outside Box Shipping Case, or Vault Handles En Pillow Set Name Plate Cemetery Cumetion Lot Section_ R I Other Graves X Grave on this date Cremation - Cumption 50 Urn Jas Bame M- 32 Single Grave ___ **Opening** and Closing Grave Body Shipped to Maa Thomas R. R. Ticket _ Allow Hayers Cash advanced Bady Crime Telegram 12 - Noon Say 19-41 Minister mill fa Casket Wagon . Physician on Orisly County or City Burial ____ Automobiles ____ Baggage or Express Train No. 00:00

Garey Hand Funeral Home Name of deceased . Date of death and Cause of death _... Place of death _ nica Residence ____ 20 m L_ Mo's____ Days. Age____ ___ Y'rs____ Height_ ____ ft.____ in. Eyes Weight_____ Funeral at ____ nas Date _____ М Account charged 70 Address ____ a ahard Account guaranteed _ 2000 Address _____ Embalming ____ Robe, Suit, Dress ____ Balan Underwear and Hose _____ Casket ____ Casket with Copper Lin. 4C Style of Casket ____ No. of Casket _ & A.M. Say Outside Box ______ Shipping Case or Vault ____ Handles _____ Pillow Set Name Plate _____ Cemetery _____ Section_____ _____ Lot_ I Other Graves X Grave on this date Cremation Urn _ Single Grave _____ Opening and Closing Grave Body Shipped to _____ R. R. Ticket Cash advanced _____ Telegram ----Minister ____ Casket Wagon Physician - C. ollevis County or City Burial _____ Automobiles _____ Baggage or Express Train No. ____

Garey Hand Funeral Home Name of deceased Date of death _ Chris Q1309-41 Cause of death ____ ac Place of death 4 Residence Man Age_____ Y'rs_ _ Mo's. Days _____ ft.____ in. Eyes. Weight____ Height_ ert Funeral at 1994/ Date _ and Account charged Address ____ Manen Account guaranteed Address ___ Embalming Y Suro 33 Robe, Suit, Dress Underwear and Hose meta 3.35. Casket 6- 6- Sel Tim Casket with Copper Lin. 720 Style of Casket Tal No. of Casket Alenia Outside Box _____ Shipping Case or Vault Handles Et Pillow Set 941 Name Plate lat Cemetery _ Section _ Lot E I Other Graves X Grave on this date Cremation Urn ____ Single Grave ____ **Opening** and Closing Grave Body Shipped to Maven R. R. Ticket B. Driver Cash advanced _ Telegram _ Minister Lege Casket Wagon Physician de County or City Burial Automobiles ____ Baggage or Express Train No. 8/ax - 4-19-41 000 et Bank

Garey Hand Funeral Home aber. Name of deceased . 19 Date of death _____hall Cause of death _ Place of death _ new Anyma Beach Residence . Age____ Age____ Mo's_____ Days_ Weight _____ Height _____ ft. ____ in. Eyes_ Funeral at Date _____ М Account charged mas H . e Account guaranteed Address ___ Embalming Budy Brough Robe, Suit, Dress Geleral Underwear and Hosen Wealt Casket alles from find Casket with Copper Lin. 12 Style of Casket _____ No. of Casket _ Outside Box ____ Shipping Case or Vault _____ Handles _____ Pillow Set Name Plate _____ Cemetery ____ Section____ Lot I Other Graves X Grave on this date Cremation A-35.00 Costa Urn arning Single Grave ___/ Opening and Closing Grave _____ Body Shipped to _____ R. R. Ticket Cash advanced _____ Telegram Minister Left Casket Wagon . Physician der-County or City Burial Automobiles _____ Baggage or Express Train No. _ 35.

Garey Hand Funeral Home Name of deceased mr Fued Date of death This apr 18 6.0 18-41 Cause of death . Place of death deep Residence Russimme 204 - Brach S. Age 69 Y'rs 12 Mo's 6 Days Weight 235 Height 5 ft. 8 in. Eyes Funeral at _____ Date -----Account charged man 9: 6. Schomte Address _____ Account guaranteed %. & Ch Address Embalming upang Robe, Suit, Dress Underwear and Hose Casket 6- 3- 2 Coufe Casket with Copper Lin. Style of Casket 9 et a No. of Casket 1972 - Turnfia Outside Box _____ Shipping Case or Vault Pillow Set Name Plate Cemetery Section___ Lot E I Other Graves N X Grave on this date Cremation Urn ___ Single Grave _ Opening and Closing Grave _ Body Shipped to fuson Ohio R. R. Ticket Cash advanced 41.75 2475 Telegram _ Minister ---Ken Casket Wagon . Physician the awer 7 County or City Burial Automobiles _ Baggage or Express Train No. 92____ man- 4-21-40 ellouma mal efferson

Garey Rand Suneral Rome Name of deceased Ims Gentende B Date of death The gov mon Cause of death ... Place of death Ren. Residence Tlevel City Age 75 Y'rs Mo's Days Weight_____ Height_____ ft.____ in. Eyes. Funeral at ___. Μ Date ___ Account charged Canod Address T: Mane meness Account guaranteed Address ___ Embalming Cremation 37.50 Robe, Suit, Dress . Underwear and Hose . Casket Hat Take Plan Casket with Copper Lin. Style of Casket Body anived No. of Casket Queto 12 30-Outside Box Sat 4-19-41 Shipping Case or Vault Handles Body Cumpely Pillow Set S-A. M. So Name Plate 4-19-41 Cemetery ____ Section___ Lot E I Other Graves woodm Box N X Grave on this date Cremation Ashes Anna Urn Bonnad + midnis Single Grave _ Invenees Opening and Closing Grave _____ Body Shipped to _____ R. R. Ticket Cash advanced Telegram ____ Minister _____ Casket Wagon Physician _____ County or City Burial Automobiles Baggage or Express Train No. _____ 37.50

Garey Hand Funeral Home nrs Juli Name of deceased 11.015 Date of death The april 18-41 Cause of death . Place of death Rea - New motor the Rouse Rt Residence Orlunde only Age____7/___ Y'rs____ Mo's____ Days _____ ft.____ in. Eyes_. Height_ Weight____ Funeral at Chaful 21 Date M. M. A 198 м Account charged 9mg Im Raus ane Address Orlande Insumme Account guaranteed _ Address ____ Embalming & Dressing 35 Robe, Suit, Dress Underwear and Hose 150. 0 Casket with Copper Lin. Style of Casket ----No. of Casket 1391_ Show Outside Box 1-19_ Shipping Case or Vault Handles _____ Pillow Set Name Plate Cemetery _ grawdy Lot Section E I Other Graves X Grave on this date Cremation Car min Urn Single Grave _____ 15 1: Opening and Closing Grave Tt etc Body Shipped to _____ R. R. Ticket _____ Cash advanced _____ Telegram _ Minister _ Casket Wagon . Buddong. Physician County or City Burial ----Automobiles SV > Baggage or Express Train No.

ourth 210 6 mi 6 misting Name of deceased RM Fill Date of death Cause of death . Place of death Rez Residence mims YMa Age 68 Y'rs 4- Mo's Days ft.____ in. Eyes_. Weight Height Funeral at Lehan P. M -19/1-Date mm ullas Account charged a Address mins Account guaranteed Address Embalming Countin 33 Robe, Suit, Dress Underwear and Hose Casket _ the to Casket with Copper Lin. _ Style of Casket _____ No. of Casket _ Outside Box ____ Shipping Case or Vault _____ Handles _____ Pillow Set Name Plate _____ Cemetery _____ Section Lot. I Other Graves X Grave on this date Cremation Crematin' 50. Urn Single Grave Body Cumati Opening and Closing Grave &. m Body Shipped to Turesday 2-41 R. R. Ticket ___ Cash advanced half Co Telegram asher Minister ba Jul ninos Casket Wagon _ Physician dr. C. n County or City Burial _____ Automobiles ____ Baggage or Express Train No.

Name of deceased Date of death Cause of death . Place of death . indumere Residence IL Age do ____ Mo's_____ __ Days_ ft.____ in. Eyes___ Weight 1 leight Funeral at Go 1941 4 Date THIS__ Account charged 9ms Address Mindume Account guaranteed Address ___ Embalming T_ Robe, Suit, Dress # Underwear and Hose # 39.1 Casket 6-6- miles Casket with Copper Lin. Style of Casket State A No. of Casket It alufa Outside Box 9-9-Shipping Case or Vault Pillow Set Name Plate Name Y Cemetery m Vaney Section____ Lot_ I Other Graves X Grave on this date Cremation Urn ____ Single Grave _____ Opening and Closing Grave _____ Body Shipped to _____ R. R. Ticket Cash advanced _ Telegram Minister for 15. Casket Wagon La 2 dawres Physician _ County or City Burial _____ Automobiles Baggage or Express Train No.

Garey Hand Funeral Home Name of deceased my Eben Bak Date of death Am apr 20-41 130 AM Cause of death --Place of death, Residence Place Age_____ Y'rs_ Mo's_____ Days_ ft. -- Height_ Weight____ _____ in. Eyes_ Funeral at France Sud 1 Date Trues apr 22 195/ ms Gben Bala Account charged Groce Address _____ Account guaranteed Gala Address ___ Embalming & Tressing 33 Robe, Suit, Dress Blue 10 Underwear and Hose -Casket 6-3- Sr. Carry 90. Casket with Copper Lin. No. of Casket 1972 Jun Outside Box 4-9 Shipping Case or Vault Pillow Set Name Plate Cemetery Pour Section____ Lot. R I Other Graves 79 X Grave on this date Cremation Urn ____ Single Grave ____ Opening and Closing Grave It de Body Shipped to _____ R. R. Ticket ____ Cash advanced _ Telegram . Minister _ 1142 heve Casket Wagon Physician 2 County or City Burial Automobiles S Baggage or Express Train No. .

Garey Hand Funeral Home Name of deceased mrs 9 moore Date of death africe 18 Cause of death Company brombos Place of death _R Residence aytma _ T'rs 6 ____ Mo's Days_ Age 64 Height______ft._d Eyes_. in. Weight 10. yrong Brae Funeral at ____ Μ 193 Date ---Account charged Marig # works Address Daytona Beach Account guaranteed -Cel Address Embalming Cumplim 37.15-Robe, Suit, Dress Underwear and Hose anned 0200 Casket _____ and Casket with Copper Lin. Style of Casket H45 Day apr No. of Casket Jum Outside Box _ Shipping Gase or Vault Body Gumate Handles 8- A. m mon 4-21-41 Pillow Set . Name Plate _ Cemetery ____ Lot_ Section____ R I Other Graves wooden Box X Grave on this date Cremation ashes Urn gr 6. Stat Single Grave FINEFROCK Opening and Closing Grave MORTUARY Body Shipped to 100 - 4 R. R. Ticket MANSFIELD OHIO Cash advanced ____ Telegram . Minister ___ Casket Wagon _____ Physician ____ County or City Burial _____ Automobiles _ Baggage or Express Train No. _ 37 50

and m King Name of deceased Date of death Sal IA Cause of death Sumed. To deal Place of death Gast 1 and a Residence moto Y'rs_ Age_____ Weight__ -- Height_____ ft.____ in. Eyes_ Funeral at angel 198/1 // A M Date Are ala 22 Account charged Har Address ___ Account guaranteed Address ___ Embalming Case of 600 Robe, Suit, Dress and wray my. Underwear and Hose 55 Casket 6-3- Sh Crefe Hzt2 50. Casket with Copper Lin. Casla Style of Casket Bet. M. C. No. of Casket S 1312 2 Outside Box 1.49 Shipping Case or Vault Handles Pillow Set Name Plate « Cemetery Dest Section_____ Lot_ E I Other Graves X Grave on this date Cremation _____ Urn _ Single Grave _ Opening and Closing Grave_-Body Shipped to mourie Mi R. R. Ticket Cash advanced _ Telegram . Challam Minister ann 10 Casket Wagon _2_ Physician ____ County or City Burial _____ Automobiles ___ Baggage or Express Train No. ____

Garey Hand Funeral Home

Garey Hand Funeral Home Ral Name of deceased Date of death gt gt Cause of death Bedy Ca upt ant 1 Place of death Sect 4 Residence Han evil Age____ Y'rs_ -- Mo's. Days Height ____ ft.____ in. Eyes Weight___ Funeral at Tahoga 22 198/1-IA M Date Luce of-Account charged _____ Address ____ Account guaranteed Address ___ Embalming Care of Gody + Wag pres of 30 Robe, Suit, Dress Underwear and Hose : Casket 6-3- 52 Gre Casket with Copper Lin. Style of Casket Set H; No. of Casket 5_1312____ Outside Box Reg. Shipping Case or Vault Handles Ent • -Pillow Set Name Plate Cemetery Sum Section____ Lot_ R I Other Graves X Grave on this date Cremation _____ Urn ____ Single Grave _ Opening and Closing Grave . Body Shipped to Manewelle ala R. R. Ticket Cash advanced _ Telegram _____ Minister ... 10,00 14-----Casket Wagon Physician ____ County or City Burial Automobiles _____ Baggage or Express Train No. ____

Garey Hand Funeral Home

annel Name of deceased Date of death Sat at 19 930 Cause of death Burned & Place of death Sant. and Residence _____ fenn ---- Mo's Davs Age____ Y'rs. Height____ _ ft.____ in. Eyes Weight____ Funeral at Chafe. 1 Date Turs afr-198//______ you Account charged Address _____ Account guaranteed Address ___ Embalming Care of 7 Robe, Suit, Dress Underwear and Hose # Casket 6-3- yr tory. Casket with Copper Lin. The Style of Casket det He No. of Casket 1312____ Outside Box R-19_ Shipping Case or Vault Pillow Set ~ Name Plate Cemetery 200 Section____ Lot_ R I Other Graves X Grave on this date Cremation ___ Urn Burnal a Single Grave West mimph Opening and Closing Grave Body Shipped to Memple R. R. Ticket _ 24 Cash advanced Telegram ____ Minister any 0 Casket Wagon Physician ____ County or City Burial _____ Automobiles Baggage or Express Train No. ____

Name of deceased Bala Date of death Cause of death The Place of death 9. D. Residence Trank asi Mo's_ . Days Age____ Y'rs P ft in. Eyes Weight_ Height. Sin n Funeral at Has Date 4-20 HIL M 192 Then Coer Account charged _ Address Vin Account guaranteed Address _ Embalming Care Robe, Suit, Dress _ Underwear and Hose Casket 4. Q Casket with Copper Lin. Style of Casket No. of Casket 10.3 Term Outside Box 119_ Shipping Case or Vault Handles me Pillow Set Name Plate vens Cemetery 4 Section R I Other Graves X Grave on this date Cremation Urn grandy Bought Coglet Single Grave and done the Opening and Closing Grave Gurn Body Shipped to R. R. Ticket Cash advanced ___ Telegram Minister ___ Casket Wagon _____ Physician _____ County or City Burial _____ Automobiles ____ Baggage or Express Train No. 30

Name of deceased Date of death men Cause of death Place of death Residence . Age____ Y'rs Davs in. Eyes Weight 190 Height, ft Funeral at . Date Account charged Address ____Q Account guaranteed Address Embalming ressing 351 Robe, Suit, Dress 6 Underwear and Hose _ 1. Casket 6-6-XX-0. ... Casket with Copper Lin. Style of Casket Och No. of Casket 1311 Outside Box Semplay 00. Shipping Case or Vault Handles CM_ Pillow Set yes Name Plate Cemetery Section. Lot d I Other Graves X Grave on this date Cremation Can Bu Urn ___ Single Grave _ **Opening and Closing Grave** Body Shipped to R. R. Tieket Cash advanced Telegram Minister J Casket Wagon Physician . County or City Burial Automobiles SrS 0 Baggage or Express Train No.

Name of deceased Date of death Cause of death Place of death Residence 80 Days Age___ Mo's Weight_ in. Eyes_ Funeral at Chal Date Lhunt 19 Account charged Address _____ Account guaranteed anon Address ____ Embalming Robe, Suit, Dress _____ Underwear and Hose _. Casket ____ Casket with Copper Lin. Style of Casket _ Clana No. of Casket Same? ay. Outside Box ____ apr 2.5 Shipping Case or Vault Handles ____ ill call for the Pillow Set Name Plate Cemetery Estmaling Section_____ Lot. 167 I Other Graves X Grave on this date Cremation _____ Urn ____ Single Grave _____ Opening and Closing Grave _____ Body Shipped to _____ R. R. Ticket Cash advanced Telegram Minister ___ Casket Wagon Physician _____ County or City Burial Automobiles ____ Baggage or Express Train No. ____

Name of deceased Date of death Cause of death _ Place of death Residence Odlas Age_ 26 Y'rs Mo's Davs Weight_1.20_Height_ in. Eves Funeral at Date _ Account charged Address 301 400 Account guaranteed _1 Address _ Embalming Y dung 35.1 Robe, Suit, Dress . Underwear and Hose _ 125. Casket 6-3- In d or Casket with Copper Lin. Style of Casket No. of Casket 1341 Outside Box Hig Shipping Case or Vault Pillow Set ye Name Plate Cemetery _ Section Lot. R I Other Graves X Grave on this date Cremation auto P. B-Urn _____ Single Grave Opening and Closing Grave Body Shipped to _____ R. R. Ticket Cash advanced Telegram SE.a Minister Mer Casket Wagon 12000 Physician _ County or City Burial Automobiles ____ Baggage or Express Train No. Amuian dif Ins Po maigne Rect

Name of deceased Date of death _____ Cause of death ___ Place of death _ den And Road Residence _ 200 1 Mo's__23__ Days__ ___ Y'rs__. Age 80__ Height_____ ft.____ in. Eyes___. Weight 12 . Funeral at 193 Date _ Can Account charged milton m Address __ Chillenged Rt 4 Account guaranteed _____ Address ___ Embalming 35100 Duss. Robe, Suit, Dress -Underwear and Hose # 4-Casket 6-6- mital Sim Ton Tim 150. Casket with Copper Lin. 42 - C Style of Casket _ Coster andia No. of Casket State 1/2 Couch Outside Box 141 Shipping Case or Vault -Handles Ext Pillow Set yos Sun tan Name Plate Pat, 2 Cemetery ---___ Lot_ Section I Other Graves X Grave on this date Cremation _____ Urn ----Single Grave _. Opening and Closing Grave, Body Shipped to Pa Cm R. R. Ticket 3640 - 1993 Cash advanced _ Telegram C. H. t. Sta Minister Left . Casket Wagon To Rea-Physician da Klampey, County or City Burial _____ Automobiles _____ Baggage or Express Train No. 92 Thi 4-25-41-

Garey Hand Funeral Home

mati Name of deceased - 30 0 Date of death _ adam Cause of death ___ Place of death Ma Residence Mal Jole Age 9. Y'rs 6 - Mo's Days Weight 150 Height 5 ft. 2 in. Eyes Y'rs____ Mo's____ Days_ Funeral at _____ 193_ м Date -----Account charged ma alma decor Address Spanta Ill s Account guaranteed ______ Address ___ Embalming & Oursing 35.100 Robe, Suit, Dress _ 7 Underwear and Hose -125. Casket 6- 3- 42 Grefi Casket with Copper Lin. Style of Casket Det. 0 No. of Casket 1212. Outside Box 11-9 Shipping Case or Vault Handles Pillow Set gus Name Plate Cemetery 201 ___ Lot_ Section E I Other Graves X Grave on this date Cremation Urn ----Single Grave Bunal allon Alla Opening and Closing Grave Body Shipped to Carint Louis Mo 490 R. R. Ticket 3210-- 1690 Cash advanced _ Telegram _ Minister ____ 10, 2 Casket Wagon Physician Dr. 1; Gray County or City Burial _____ Automobiles ____ Baggage or Express Train No. 92 4ni 4-25-41

Name of deceased Date of death Cause of death 2 un Place of death Residence Alang tank Be Mo's____ Days Age ____ 5-7 Y'rs___ _ft. Eves 6 in. Weight____ Height Funeral at Date ____ 193 Account charged Basalt Address _ deated ach Account guaranteed _ Clark Address ___ Embalming Robe, Suit, Dress _... Underwear and Hose Eulona Casket ____ Casket with Copper Lin. Style of Casket _ Do an an No. of Casket ____ M Dante Outside Box ______ /12,344 Shipping Case or Vault ______ Handles ___ Pillow Set Name Plate Cemetery ___ - 41_ Lot. Section_ I Other Graves X Grave on this date Cremation alle Urn _ Ball Ala 1/1/ Single Grave Opening and Closing Grave Body Shipped to _____ R. R. Ticket _____ Cash advanced Telegram _____ Minister _ Casket Wagon _____ Physician _____ County or City Burial _____ Automobiles ____ Baggage or Express Train No. ____ 37,5

Name of deceased Hudge Grennimon Date of death _ Afre-Cause of death ____ les Place of death Residence Dabalogh 2 6 Age_ 90____ Y'rs_ __ Mo's____ Weight 150_Height_ 5_ft. _ in. Eyes___ Funeral at _____ Date ______ 193 Account charged mm - Edma Ditt M mann Address _____ Account guaranteed _ CK-Address ___ Embalming & Sussang Robe, Suit, Dress _____ Underwear and Hose Casket 6-6- mital Casket with Copper Lin. Style of Casket galete____2_ No. of Casket Hawthorne Outside Box __ fleg Shipping Case or Vault Pillow Set 9402 Name Plate Cemetery Lot_ Section I Other Graves X Grave on this date Cremation _____ Urn _____ Single Grave ----Opening and Closing Grave Body Shipped to R. R. Ticket 3455 1900 Cash advanced _ Telegram and Sur Minister _. Casket Wagon (3) Physician & OVeity County or City Burial Automobiles _____ Baggage or Express Train No. 92 Tri 4-25-41 14.53

Name of deceased Date of death Cause of death Luicu Place of death _ Residence _____ Age___ Y'rs Mo's ___ Days. _____ ft. 5 _ in. Eyes_G Weight 130 Height. Funeral at Chafe Date _ unday apr . 198 Account charged ma-Address _____ 23 -16 Account guaranteed Jonommence Address ___ Embalming & Dregand Robe, Suit, Dress K Underwear and Hose ** Casket 4-3- 52 4 Casket with Copper Lin. Style of Casket Del. & No. of Casket 13411-Outside Box Shipping Case or Vault Handles Ext Pillow Set yes Name Plate Cemetery Cheenwoo Section 4 Lot. I Other Graves X Grave this date Cremation Urn _-Single Grave _ Opening and Closing Grave Body Shipped to Um R. R. Ticket Cash advanced Lette Telegram Minister 1 Casket Wagon Physician ____ County or City Burial _ Automobiles ____ Baggage or Express Train No. year Sen es as Body cremated mon apr-2

Name of deceased m Eugene B Stocum Date of death gran 32 41 Cause of death Not give on furnit Place of death Jackien River City Residence Indiana River City Age 89 Y'rs Mo's Days Weight 170 Height 5 ft. 2 in. Eyes_. Funeral at Ao Secure M _ 193____ Date ____ Account charged . Norn Address ____ Thursdalle___ Account guaranteed ______ Address ____ Embalming Orimetion ____ 32150 Robe, Suit, Dress ____ Underwear and Hose Casket _____ Body anne Casket with Copper Lin. 4 Style of Casket Linger 4-2 No. of Casket. Outside Box Gody Counated Shipping Case or Vault 8- Am. Handles 14- 25-41 Pillow Set ___ Name Plate wild Call for Cemetery _____ _____ Lot_.. Section **I** Other Graves Wooden B 8 X Grave on this date Cremation _____ Urn ____ Single Grave _____ Opening and Closing Grave _____ Body Shipped to _____ R. R. Ticket Cash advanced Telegram Minister _ Casket Wagon Physician _____ County or City Burial Automobiles ____ 33 Baggage or Express Train No. _____

Garey Hand Funeral Ham Name of deceased Date of death Threes. Place of death ungu Residence Indam 2 Days_ Y'rs____ 3 Mo's Age 50 Funeral at ____ ft.____ in. Eyes_ M Date ----Account charged 94. 2 Address Mama Account guaranteed Address . 50 Embalming Robe, Suit, Dress ____ Underwear and Hose Casket ____ Dued midden Casket with Copper Lin. Style of Casket ungebild No. of Casket there 4-24 Outside Box Shipping Case or Nault Handles Malmel Pillow Set Body - 4 auto Name Plate ___ Cemetery ___ Lot_ Section____ E I Other Graves X Grave on this date Cremation was have in Urn K. M. P. Convention Single Grave . Opening and Closing Grave _____ Body Shipped to _____ R. R. Ticket ____ Cash advanced Telegram Minister . Casket Wagon Physician _____ County or City Burial ____ Automobiles ____ Baggage or Express Train No. 00

Garry ziano 2

Name of deceased 9m 1 Angus Date of death Thus alex. 3301 41 Cause of death Place of death Ret Residence 735word Age 62 Y'rs 3 Mo's Weight 120 Height 5 ft. _ Days ft. & Eyes. __ in. Funeral at Na Surve Date _____ 193 Account charged mes Address _____ Account guaranteed Address -Embalming Robe, Suit, Dress Underwear and Hose A Casket 6 - 3 - 92 . Casket with Copper Lin. Style of Casket Sea No. of Casket ____ 72 Turnsfig Outside Box Shipping Case or Vault Handles Ext Pillow Set Name Plate Cemetery matin Section____ _ Lot_ E I Other Graves X Grave on this date Cremation Complan 50 Urn wooden Single Grave _ Opening and Closing Grave Bert Body Shipped to Grande R. R. Ticket 8-A. m Sq Cash advanced 4-26-4 Telegram Well Call / Minister _ Casket Wagon _ Physician Du Buty County or City Burial _ Automobiles _. Baggage or Express Train No. .

Garey mann Gank d. Name of deceased Date of death Lin afre 25-41 Cause of death Place of death Nysing Home Residence pla l 14 K'rs___ Age 82 Mo's_ _ Days Height ____ in. Eyes Weight_ ft. Funeral at 1 0 Date Account charged Address Life Account guaranteed _ Cetal Address _ Embalming 4 Dresserry Robe, Suit, Dress Underwear and Hose Casket 6-6 - melay Or Casket with Copper Lin. _ Style of Casket State H.C. Outside Box 19.9 Shipping Case or Vault Handles Pillow Set Name Plate Manne Cemetery ____ Section Lot. B I Other Graves X Grave on this date Cremation Munie Urn Single Grave _____ Opening and Closing Grave IX 4/2 Body Shipped to _____ R. R. Ticket ___ Cash advanced _ Telegram Minister Jev 2 Casket Wagon Ake_ 1thg Physician da County or City Burial Automobiles 5 YS Baggage or Express Train No.

Name of deceased mis Namey B. Whit Date of death dat - afr 26-41- 650 M Cause of death Ree Residence 641 Renativels Ave 9 Age 55 Y'rs 3 Mo's 7 Days Weight 125 Height 5 ft. 4 in. Eye Funeral at all claints Change Date diter of 27 1984 - 3 Account charged Julia Genedict He Address / 16 Rigeh The Encle Litter M Account guaranteed Galacte Address ___ Embalming & Dressing 35 Robe, Suit, Dress Underwear and Hose Casket 6- 3- 21 2 Casket with Copper Lin. Style of Casket - Orlans Outside Box Shipping Case or Vault =____ Handles Ent Pillow Set 941 Name Plate Cemetery Cumahin Lot. Section____ I Other Graves X Grave on this date 50.00 Cremation Deremation Urn M- 20 - Engrance Name Sate Single Grave Bedy Crement Opening and Closing Grave 8-A-4 Body Shipped to ____ R. R. Ticket ____ Cash advanced _ Telegram Chidister Minister In Casket Wagon Physician County or City Burial Automobiles Sty - (Baggage or Express Train No. Brany un H M 20

Name of deceased Million Date of death Ofr - 23-41 Cause of death Guyfree Place of death St Red Minnhag Petersburg Residence St Petersbur Age_____Y'rs______ Mo's_____ Weight_____5 O Height_____ ft. 1 d Days in. Eyes Funeral at _____ 193 Date ____ 611 Account charged Address It Outerslung 01 Account guaranteed Address ____ Embalming Complem 37,50 Robe, Suit, Dress ____ Underwear and Hose _ Casket ____ Casket with Copper Lin. Style of Casket, 1.0.30 No. of Casket 4_ Adda Outside Box 4-26 Shipping Case or Vault umated Pillow Set 930 Am Name Plate Sel apr 36: Cemetery ___ Section ... Lot_ R I Other Graves wooden X Grave on this date Cremation Kons Urn ____ Single Grave Balfter Opening and Closing Grave 12 Body Shipped to St Piteras R. R. Ticket ___ Cash advanced Telegram _____ Minister _____ Casket Wagon _____ Physician _____ County or City Burial _____ Automobiles ____ Baggage or Express Train No. ____ 37,50

Name of deceased mrs Rosa Date of death dung- afr-2)-41 Adital to Cause of death _ 142 Place of death Residence Im Coast . Days 11 .--- Mo's. Age 2.2 Y'rs. Height _____ ft, 4 ____ in. Eyes Weight 123 Funeral at _ Chan 230 P. M 193/1 Date Mar Account charged Amall, mamga Address m-___ Richard __ Schmin Account guaranteed Address _ Embalming Lung 35 25.10-Robe, Suit, Dress Underwear and Hose * Casket 6-3- 34 4 Casket with Copper Lin. Style of Casket 22 N. Cof. No. of Casket 22 Torred. Temped Outside Box 329 Shipping Case or Vault Pillow Set 2 Name Plate Cemetery gumuon Lot. Section I Other Graves X Grave on this date Cremation Urn ___ Single Grave Opening and Closing Grave 9+ 42 Body Shipped to -Tormoly Ca No th R. R. Ticket _-Cash advanced Can Min P. B. He Telegram ~ Havio Minister L Casket Wagon Me. Physician County or City Burial 1500 Automobiles Baggage or Express Train No. _---00 m Semist is plind and Bad Condition

Garey Hand Funeral Home Name of deceased man 411-Date of death dum_ of. Cause of death _ ful Alastas Place of death State. Residence unatella Age_ 30_ Y'rs_ 10_ Mo's___8 _ Davs_ Height Sie ft.____ in. Eyes_. Weight_____ Funeral at 198_ M Date ____ mucal Account charged Address _____ Account guaranteed Address ____ 25 Embalming Robe, Suit, Dress . Underwear and Hose Casket ______ Casket with Copper Lin. the Style of Casket Outside Box ----Shipping Case or Vault Handles _____ Pillow Set Name Plate _____ Cemetery _____ Section_____ Lot_ I Other Graves X Grave on this date Cremation _____ Urn ____ Single Grave _____ Opening and Closing Grave _____ Body Shipped to _____ R. R. Ticket _____ Cash advanced Telegram _____ Minister _____ Casket Wagon _____ Physician _____ County or City Burial Automobiles ____ 2 Baggage or Express Train No. _____

Name of deceased me Cossius Date of death Harry Cause of death _ Anles Place of death _ 11-12_-Residence/563 - Cherna Car Age_ 81__ Y'rs__ 0___ Mo's_ 13 Weight 140 Height 5_ ft. 7 in. Eyes Funeral at _____ 193. Account charged mag. agoness Address Finter Carls Ha Date ____ Account guaranteed _ 6 glat Address _ Embalming & Dussing Robe, Suit, Dress Underwear and Hose Casket 6 - 3 - Only 259 Style of Casket State__ No. of Casket _____4; Outside Box ______ Shipping Case or Vault Handles Pillow Set His Tayford Name Plate Cemetery Dest Section___ Lot. R I Other Graves X Grave on this date Cremation ___ Urn _ Single Grave ---Opening and Closing Grave Body Shipped to Conneaut 126 70 R. R. Ticket 4 P. Cash advanced 1.93 Telegram 65-65 63 Minister K 10.00 Casket Wagon . Physician 2 Nolars County or City Burial _ Automobiles _____ Baggage or Express Train No. 9 Wad-4-30-41 now in Price of Ticlets 150 refunded to Wilds 296 93

Garey Hand Funeral Home Name of deceased mas many Leod Date of death mon apr - 28-41 Cause of death Place of death Juchts a Residence Y'rs_____ Mo's_24-Age_ 14_. Days. Weight 100 Height. ft. ---- in. Eyes Funeral at Doptier 198// Date Tues afe Account charged -Lod Address Indalda Account guaranteed _ Address _. Embalming & Dresson Robe, Suit, Dress Casket with Copper Lin. Style of Casket Qete No. of Casket 1341 Oclamon Outside Box 9-19 Shipping Case or Vault Handles Pillow Set yes Name Plate Cemetery Mohla Lot. Section____ E I Other Graves X Grave on this date Cremation Urn ____ Single Grave _____ Opening and Closing Grave It et 2 5 Body Shipped to _____ R. R. Ticket _____ Cash advanced ____ Telegram Minister her martin Casket Wagon __() Physician 2 County or City Burial . Automobiles KS Baggage or Express Train No. _ Pat 4 Dele

Garry Hand Funeral Home Name of deceased Trank B. Goodrich Date of death General according Rut Place of death the Beflici J Residence In besiden Horse Age___ HO__ Y'rs_____ Mo's_ Days_ Weight_____ Height_____ f _ in. Eyes_ Land Funeral at CT_ Date mm an Account charged ma Address 2-----Account guaranteed Estato Address _____ _____ Embalming ---Robe, Suit, Dress _____ Underwear and Hose _____ Casket _____ Casket with Copper Lin. _____ Style of Casket _____ No. of Casket _____ -----Outside Box _____ Shipping Case or Vault _____ Handles _____ Pillow Set ------Name Plate . Cemetery /-2 - B - Lot. Section_ I Other Graves X Grave on this date Cremation -----Urn ____ Single Grave _____ Opening and Closing Grave To the 15. Body Shipped to _____ R. R. Ticket _____ Cash advanced _____ Telegram _____ _____ Minister ---Casket Wagon (1) Physician -----County or City Burial 15. Automobiles Oldo Baggage or Express Train No. ___ Pd 1-28-41

Garry Hand Name of deceased my 6rabella rassmo Date of death mon - afra 2 8- 41-Cause of death and allichens. Place of death delived. Nunamy Home Residence Jeluport _____ Mo's____ Days_ Age_701 ____ Y'rs__. ---- ft .__. in. Eyes_ _ Height_ Weight___ Funeral at your side Date Mrsd- apr 30 193/1 Account charged _ Rop ment Address man 3.9. amstrom Account guaranteed mes 8, 2. Hews on Address -----Embalming 19 Mang 35.1 Robe, Suit, Dress Underwear and Hose Casket 6 3 4 Do Casket with Copper Lin. E Style of Casket 2 24 72 Tampa No. of Casket Outside Box Brg_ Shipping Case or Vault Pillow Set ger Name Plate Cemetery Tanguane _ Lot_ Section_ R I Other Graves X Grave on this date Cremation _____ Urn ----Single Grave _____ Opening and Closing Grave Y cte 15. Body Shipped to _____ R. R. Ticket Cash advanced _ Telegram Bush Minister And Casket Wagon . Physician 21 County or City Burial 15. Automobiles Mas Baggage or Express Train No.

Hand Duner Garey

Name of deceased Mr. Charles Z. Ramson Date of death Tues apr 29 Cause of death The Residence 1000 Sunsel Y'rs_____ Mo's Days Age --- in. Eyes ft Height. Weight_. rafee Funeral at Con 195/ М Date gran 20 Account charged MMA Address 1000 dumant de Account guaranteed _____A Address _ Con Embalming Robe, Suit, Dress Underwear and Hose ----20 Casket _____ Casket ____ Caske Casket with Copper Lin. Style of Casket _ No. of Casket Outside Box Body Corneted Shipping Case of Vault _ Handles ___ Pillow Set Name Plate Cemetery P Lot Section 60 I Other Graves X Grave on this date 50. Cremation Urn Single Grave Opening and Closing Grave far. Body Shipped to auto Hawre R. R. Ticket at Carmetery Cash advanced moment Telegram 230 P. m Thuss Minister _ 5, 00 Casket Wagon _(. Physician 2 North County or City Burial _. Automobiles ____ Baggage or Express Train No. 120

Garey Hand Funeral Home

Name of deceased amanda Date of death Tune apr 29 Cause of death did dud day Place of death Residence Mo's_ ----5 Days Age_ Y'rs_ Height_ ______ ft. _____ in. Weight_165_ Eyes Funeral at K 193 M Date __ ma Account charged 6-1---asse Address . Account guaranteed ____ Westlyn Address _ Embalming Quesaing 35 --25. # 850 13. Robe, Suit, Dress Htate Underwear and Hose 100. Casket 4 - 8 - In Crefe 125 Casket with Copper Lin. -Style of Casket e No. of Casket \$ 13/2-Outside Box Reg_ Shipping Case or Vault Pillow Set Yun Name Plate Cemetery Itamiltan Section_ Lot I Other Graves X Grave on this date Cremation _____ Urn ____ Single Grave _ Opening and Closing Grave _ Body Shipped to Janett R. R. Ticket ___ Cash advanced Telegram . Minister Casket Wagon Elicta Physician County or City Burial Automobiles _ Baggage or Express Train No. 91 442- mary-1-41-

Name of deceased Charles. mi inon. 3:30a.m Date of death _ april 30. - Cola Cause of death Analle Cheum aria Place of death ____@___ Sprice. Residence ______ .4 Mo's / Days. Age____ LY'rs_ _ ft._ in. Eyes_ Height. Weight Funeral at _. Date ___May M Account charged Address _____ ice JE Account guaranteed CR Address _ 25.1 == Embalming Quernend 3.10 Robe, Suit, Dress ____ Underwear and Hose Casket 3-0 - What Clust 45. Casket with Copper Lin. Style of Casket Oct Has No. of Casket Bassmelt 103 Outside Box 9-19-Shipping Gase or Vault Handles mall Pillow Set yes Name Plate sincle Cemetery _COUP Section____ Lot R I Other Graves X Grave on this date Cremation Family Drove throw Urn A Dest by auto too Single Grave Body with the Opening and Closing Graye . Body Shipped to Corkson R. R. Ticket Cash advanced Telegram Minister _ Casket Wagon Physician Land dgar County or City Burial Automobiles ___ Baggage or Express Train No.

au 1- 4 Barey Hand Funeral Home Name of deceased Baly Tiduell 10-AM Date of death may 01-41-Cause of death In Nouft office Residence 104 B. G. A. J Age_____ Y'rs_____ Mo's_____ Days_ Weight_____ Height_____ ft.____ in. Eyes_ Funeral at M Date ____ Account charged Realin Tichurell 1 Address Calende Rt Dns- Or 262 H. Account guaranteed _____ Address ___ Embalming Commation 5.10-Robe, Suit, Dress _____ Underwear and Hose _____ Casket ____ Casket with Copper Lin. Ne Annel Style of Casket 30 dy our stid No. of Casket 9- 9. m. 5-2-41 Outside Box will cale for Shipping Case or Vault Handles _____ Pillow Set _____ Name Plate _____ Cemetery _____ Section_____ Lot__ B I Other Graves woodn By 797 X Grave on this date Cremation _____ Urn ____ Single Grave _____ Opening and Closing Grave _____ Body Shipped to _____ R. R. Ticket Cash advanced _____ Telegram Minister _____ Casket Wagon _____ Physician _____ County or City Burial _____ Automobiles _____ Baggage or Express Train No. _____

Garey Hand Funeral Home Name of deceased million Kirklime Date of death <u>may 1-41-</u> Cause of death <u>Destas med</u> Place of death <u>Destas med</u> Residence Mustland Age_5.6 Y'rs____ Mo's____ Days_ Weight_____ Height_____ ft.____ in. Eyes_ Funeral at Stans Soda Account charged County 193 _____M Address _____ Account guaranteed _____ Address _____ Embalming _____ Robe, Suit, Dress Underwear and Hose ______ Casket 6 - 3 - Cant B 4 14,50 Casket with Copper Lin. _____ Style of Casket _____ No. of Casket _____ Outside Box _____ Shipping Case or Vault _____ Handles _____ Pillow Set Name Plate _____ Cemetery _____ Section_____ Lot____ E I Other Graves X Grave on this date Cremation _____ Urn _____ Single Grave _____ Opening and Closing Grave _____ Body Shipped to _____ R. R. Ticket Cash advanced Telegram Minister ____ Casket Wagon _. had Physician 2 County or City Burial _____ Automobiles _____ 14,50 Baggage or Express Train No. _____

Garey Hand Funeral Home Name of deceased Ams Comily Earl Hilson Date of death _ Gef-z-39-41 Cause of death Summer 2 (Place of death Residence - Wonlin Haven Mo's____ Days____ 9 Age___ 4 4 ___ Y'rs_.. Weight 1 60 Height ft. ft. in. Eyes Funeral at _ Hmln Har M Date _____ Account charged Wone Y Somet Account guaranteed ____ Address . Embalming Councilian 137,150 Robe, Suit, Dress . Underwear and Hose Casket 66- meta Casket with Copper Lin. Ammu Style of Casket Alac No. of Casket _ Outside Box ___ Shipping Case or Vault Body Q Handles by Greate It 10 Pillow Set This may 2 2-41 Name Plate Body annald Section 8, A.m 5-3-64 -B I Other Graves woodon 34 X Grave on this date Cremation Urn Exfrence X Single Grave Hour & Some Opening and Closing Grave Wonley Body Shipped to Ula R. R. Ticket _. Cash advanced _____ Telegram _____ Minister _ Casket Wagon _____ Physician _____ County or City Burial _____ Automobiles ____ Baggage or Express Train No. 37'5

Garey Hand Funeral Home Name of deceased m andis Ly Scribner Date of death The may 3 - 41. 8-0M Cause of death The The B. Place of death The may - 2-41 M Residence Delland -Age 34 Y'rs 2 Mo's 25 Days Weight_____ Height_____ ft.____ in. Eyes_____ Funeral at Mare Lide Date Sum may - 4 - 1984 _ 3 P. M Account charged ____ Address ____ Account guaranteed . Address ---Embalming Toussing Robe, Sutt, Dress _ DK____ Underwear and Hose . Casket 4-3- In Doc Casket with Copper Lin. H. C. Style of Casket 91 H. C. No. of Casket 22 Tomper Outside Box Reg Shipping Case or Vault Handles Pillow Set Yes Name Plate Cemetery Proce Section____ ___ Lot E I Other Graves X Grave on this date Cremation _____ Urn ____ Single Grave _____ Opening and Closing Grave 9 27 2 D. Body Shipped to _____ R. R. Ticket _____ Cash advanced ____ Telegram _____ and Minister ____ Casket Wagon No Co Physician 22 Cohildo County or City Barial ____ Automobiles _ 4a2 Baggage or Express Train No. ____

Garey Hand Funeral Home Name of deceased m. M. A. marshall Date of death _ 2 - 2 - 41 -Cause of death _ Reulingers Place of death 11-00 Residence Sayton Brach The Age_____Y'rs_____3_Mo's_____ Days____ Weight 190 Height 5 ft. 2 in. Eyes_ Funeral at Date _____ 193 Account charged Caggett + Wield Μ Address Deylord Joneh. Account guaranteed K____ Address ___ 37,80 Embalming Cumation Robe, Suit, Dress . Underwear and Hose Barry anived Casket by and 9-Casket with Copper Lind an mary 3 Style of Casket No. of Casket Ody Commenter Outside Box 10 - A. 90. 5-3 Shipping Case or Vault Handles Exfrance N Pillow Set Bagget \$ 9 Name Plate Douting 3 Cemetery Lot_ Section ... woodos B I Other Graves X Grave on this date Cremation _____ Urn ____ Single Grave _____ Opening and Closing Grave _____ Body Shipped to _____ R. R. Ticket Cash advanced _____ Telegram _____ Minister ____ Casket Wagon _____ Physician _____ County or City Burial _____ Automobiles _____ Baggage or Express Train No. ____ 37.50

Garey Hand Funeral Home Name of deceased maint 1 S. Y. Trueson Date of death Sat may 3 4- 11-30 MM Cause of death . Place of death Rez -Residence 214 - W. Colymburg Age_____ Y'rs_____ Mo's_____ Days_____ Weight_____ Height_____ ft.____ in. Eyes_____ Funeral at _ Tingen . _____M Date ____ Account charged A. Hinnegen : Address 314 - A. Columbia Account guaranteed . Address ___ 5.10. Embalming Commencerie Robe, Suit, Dress _____ Underwear and Hose _____ Casket ____ Casket with Copper Lin. _____ Style of Casket No. of Casket Goody Bremalis Outside Box & A. M. Som May 4 Shipping Case or Vault Handles will Callfor-1 Pillow Set -----Name Plate _ Cemetery _____ Section Lot_ R I Other Graves X Grave on this date Cremation _____ Urn ____ Single Grave _____ Opening and Closing Grave _____ Body Shipped to _____ R. R. Ticket Cash advanced Telegram Minister ____ Casket Wagon --Physician Dr. Redding County or City Burial ____ Automobiles _____ Baggage or Express Train No. _____

Garey Hand Funeral Home Name of deceased man mie Brady Date of death Cause of death An melia Residence 313 9 Age_____ Y'rs_____ ____ Mo's_____ Days ___ in. Eyes_ ft. Height_---Weight____ Funeral at _ 20/4 Date man-Account charged la.7 Address Jacksemme la Account guaranteed Instanting Address ___ Embalming Y usam Robe, Suit, Dress_ Blue Sater Underwear and Hose Casket 6-3-5 Ser Planch Casket with Copper Lin. No. of Casket 1927 - There a Outside Box 1-19 Shipping Case or Vault Handles EM Pillow Set Name Plate Cemetery Lot_ Section___ B I Other Graves X Grave on this date Cremation ___ Urn ____ Single Grave ----Opening and Closing Grave Body Shipped to Conce R. R. Ticket Cash advanced ___ Telegram all + M. O Minister B. Casket Wagon _2) sis Physician 2-County or City Burial _... Automobiles _____ Baggage or Express Train No. -21 monday ma

Garey Hand Funeral Home avid for Commen Name of deceased Date of deather May - 4-41- 2.30 Cause of death Place of death ges ______ Residence Age Y'rs & Mo's Days 1- Hh Height_____ ft.____ in. Eyes Weight____ Funeral at ger _ 19841_ 2 30 P. M Date mm Account charged Bill & monley Address _ Manda____ Account guaranteed Address _ Embalming Robe, Suit, Dress _ Underwear and Hose Casket 2-0 2 -25. 12 Casket with Copper Lin. Style of Casket , Cali No. of Casket 10 3 - Tormfia -Outside Box ____ 189 Shipping Case or Vault Handles small Pillow Set Name Plate Cemetery Wordlawn ---- Lot 336 Section_____ E I Other Graves X Grave on this date Cremation _. Urn _____ Single Grave _____ Opening and Closing Grave Body Shipped to _____ R. R. Ticket _____ Cash advanced _ Telegram ... Per Iraven Minister ____ Casket Wagon -----Physician 2 County or City Burial Automobiles ______ Baggage or Express Train No.

laide S. Name of deceased mis Date of death chim - may Cause of death myscardia 2-1-Place of death Residence _ 60_A. _ Mo's____ _ Days Age_____ Y'rs_. in. Eyes_ Weight____ Height_ ft. Funeral at 11 a M 195 Date Thurs. year Account charged Address ---Account guaranteed astate Address ___ Embalming & Dussing Robe, Suit, Dress 📶 Underwear and Hose Casket 6- 3- 54 Plan Casket with Copper Lin, Style of Casket Get. /2-No. of Casket 2637 /2-Outside Box 19 Shipping Case or Vault Handles Ent Pillow Set Light Name Plate Cemetery ____/ Section____ Lot I Other Graves X Grave on this date Cremation Terroraly Urn P. B. Can Single Grave Con 200 Opening and Closing Grave Body Shipped to _____ R. R. Ticket Cash advanced ____ Telegram Minister Allan Casket Wagon _ Physician __@ County or City Burial Automobiles ____ Baggage or Express Train No.

Garey Hand Funeral Home Name of deceased mus . Date of death Ison may Cause of death ---0 Place of death _ Residence Perstring Are Orlande of - Mo's 12 Days ... Age____ Y'rs_____ in. Eyes. Height ____ ft.2 Weight 135 Funeral at M. L. Church - Conway. 6- 1934---11 M Date Jarladuy. Stones Account charged Richang Address ____ Gaunay_ Carn Account guaranteed . Address ----Embalming Y 35-Dussing Robe, Suit, Dress White Underwear and Hose Casket 6-3- 5 Casket with Copper Lin. Style of Casket In H. Caf. No. of Casket 72- Termf.a Outside Box R-g____ Shipping Case or Vault Pillow Set The Name Plate Cemetery _____ Section____ Lot. R I Other Graves X Grave on this date Cremation ____ Urn ____ Single Grave _____ 1500 Opening and Closing Grave Body Shipped to _____ R. R. Ticket _____ Cash advanced ___ Telegram Minister Red - My & and Casket Wagon n. andre Physician _____ County or City Burial _____ Automobiles _____ Baggage or Express Train No. ____ Enh

Name of deceased ammenet a.m. Date of death _____ day 5 ____ g Cause of death Cunck Place of death _____ Residence 4 Age___ GG_ Y'rs. Mo's_ _ Days_ Height. _ ft.2 _ in. Eyes_ Weight_____. Funeral at Ekape 10.9. M Date Ing 1934/ 1. Hoursed W Account charged nelia Address -----Account guaranteed Address ---Embalming & Alun Robe, Suit, Dress Underwear and Hose -150 Casket 6-3- 52 2 Casket with Copper Lin. No. of Casket 1391- Shun Outside Box _9.19 Shipping Case or Vault Pillow Set yer Name Plate gelland Cemetery _ ____ N. W. 14_ Lot Section_ I Other Graves Head Tom X Grave on this date P. B @ Cremation an Urn _ Single Grave Opening and Closing Grave Body Shipped to _____ R. R. Ticket ____ Cash advanced _ Telegram _ Minister _/ Casket Wagon _... Physician ____ County or City Burial . Automobiles _ Baggage or Express Train No.

Name of deceased Hidia ann Oll Date of death ____ Cause of death _ Palana al --- 6 1/2 Place of death Residence _____ ____ Mo's____ Days Age_____ Y'rs__ ft.____ in. Eyes Weight_____ Height_____ are song and Funeral at Maya 198 Date - Mendely may 2 iduly of Account charged than Address __7.1.9____ Account guaranteed ____ Address ____ Embalming Robe, Suit, Dress _____ Underwear and Hose _____ Casket ____ Casket with Copper Lin. . Colm Style of Casket _____ No. of Casket ______Galance Outside Box ______Galance Shipping Case or Vault ______G Handles _____ Pillow Set Name Plate ____ alent Cemetery _____ Lot Section_____ I Other Graves X Grave on this date Cremation Will Cal Urn ____ alalus Single Grave _ Opening and Closing Grave _--Body Shipped to _____ R. R. Ticket _____ An Cash advanced ____ Telegram Minister Lean. Casket Wagon Physician ____ County or City Burial ____ Automobiles ____ Baggage or Express Train No. _ 0.00

Garey Hand Funeral Home Name of deceased to have & durad Date of death may -4-41-- Cum Cause of death Ant goven Rock Place of death Residence It & steralung Age____ Y'rs___ J___ Mo's___ 2_ Days__ Height_____ ft.____ in. Eyes_ Weight Height Date ____ Account charged Ralfs Address St Compaling Account guaranteed ____; Address ___ remetin Embalming Robe, Suit, Dress Underwear and Hose ... Casket _____ the Casket with Conner Lin. 8 - P. 0 Style of Casket trees may -6 No. of Casket Body_ Ground Outside Box gree 8-Am 3 Shipping Case or Vault ____ Handles _____ Pillow Set Name Plate _____ Cemetery _____ Section .---Lot_ 1200am Box R I Other Graves X Grave on this date Cremation Urn A & Bootism Single Grave Teles Opening and Closing Grave ___ Body Shipped to _____ R. R. Ticket _____ Cash advanced Telegram _____ Minister _____ Casket Wagon _____ Physician County or City Burial _____ Automobiles Baggage or Express Train No. ____ 32.50

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Garey Hand Funeral Home Name of deceased my Canoll mi Date of death mon -15-41-Cause of death Leveland Hemorhay Place of death _ Winter Hoven Residence Winter Haven Age 47 __ Y'rs 5 __ Mo's 16 __ Days____ Weight 160 Height _____ ft. ____ in. Eyes____ Funeral at _ Date ---Account chayged Address Winder Man -10 Account guaranteed _ Address ___ 37.50 ennalson Embalming Robe, Suit, Dress _ Underwear and Hose _ Casket ____ Casket with Copper Lind Style of Casket 7, and No. of Casket / Hidman Shipping Case or Vault & Handles _ Pillow Set Name Plate Cemetery Handy Aleren Lot Section ... wooden By E I Other Graves X Grave on this date Cremation _____ Urn _____ _____ Single Grave ____ Opening and Closing Grave _____ Body Shipped to _____ R. R. Ticket Cash advanced Telegram _____ Minister _____ Casket Wagon _____ Physician _____ County or City Burial _____ Automobiles ____ Baggage or Express Train No. 37.50

Name of deceased francis nd Date of death Ilansa - ma Cause of death fun plan Place of death 4 Residence 1504- 6-W ash Age____ Y'rs___ ___ Mo's_ -- Days d. Weight / 60___Height_ ft. 2 in. Eyes. Funeral at____ ma ______194/____ M Date Dat-Mensur Alens Account charged __ m Address 150 4- 8-9+ anh 41 Account guaranteed Address __ 30,100 resamo Embalming Robe, Suit, Dress Underwear and Hose # Casket 6-3- 54 Casket with Copper Lin. 9 50 Style of Casket No. of Casket 4/1 Outside Box Shipping Case or Vault Handles Con Pillow Set 94 Name Plate # annor Cemetery no Section_ Lot grave 7 **I** Other Graves You East X Grave on this date Cremation Urn Single Grave -Opening and Closing Grave Trute Body Shipped to . R. R. Ticket _ Minus Cash advanced PL Telegram Minister _ Casket Wagon Physician 9 County or City Burial . Automobiles SVS Baggage or Express Train No. 500 en

Name of deceased Saga. Date of death mg eres Cause of death ____ Place of death _4 16 - della Residence 544 __ Mo's_10 Age____ & Y'rs____ Days. Weight_125_Height. ft.____ in. Eyes Funeral at ____ nagle 19 Date Ounday me as Cl Account charged _ Address _5-18- 0. 4 Account guaranteed Latale Address _ Embalming & delessen Robe, Suit, Dress Underwear and Hose . Casket _6/2 - While Casket with Copper Lin. Style of Casket Oct No. of Casket ______ / 5-7-5---14 Outside Box ____ Shipping Case or Vault Handles _____ Get Pillow Set _____ Name Plate Cemetery _ 6 Alman m Lot. Section E I Other Graves X Grave on this date Cremation Urn ____ Single Grave Body cumoted Opening and Closing Grave 8-A. m Body Shipped to may - 12 111 R. R. Ticket Cash advanced will Pall Telegram Minister _. Casket Wagon Physician . County or City Burial Automobiles S . S Baggage or Express Train No.

Garey Hand Funeral Home Name of deceased Mr. Pun Powell Date of death man___ Cause of death art. Place of death . Age & Y'rs 0 -- Days ... Mo's_ - Height_ ft.d in. Eyes Weight 190 Funeral at _ nara 4 P. M Date mus - m 1964/ Account charged 10. C Tower Address Mande Account guaranteed Address ___ 2020 Embalming Robe, Suit, Dress 📶 Underwear and Hose ----Casket 6- 3- 92 Doc Casket with Copper Lin." Style of Casket Qet . 0 No. of Casket 13 41 Oulann Outside Box 129 Shipping Case or Vault ! Handles Pillow Set Name Plate Vordlaum Cemetery 2 Lot 2 Section____ I Other Graves X Grave on this date Cremation _____ Urn _____ Single Grave Opening and Closing Grave Body Shipped to _____ R. R. Ticket ____ Cash advanced Telegram Minister Just Morgan Casket Wagon _____ Physician 2~ County or City Burial ___ Automobiles & Y J . Baggage or Express Train No. ____ teleg mos

Name of deceased I grinalde. Cause of death . Place of death Residence-340 Ca Y'rs__/ Age_Ho 3___ Davs Mo's_ in. Eves Weight Height \$ Funeral at . opa Date Thur may 10 ,198/1_ gan Account charged 2min Re Address 48 Poner & KemiPlac Account guaranteed fand onyok Address ----30 2420 Embalming Robe, Suit, Dress * Underwear and Hose : Casket 4-0 24 Casket with Copper Lin. Style of Casket No. of Casket 1972-* mms Outside Box _/ Shipping Case or Vault Handles Art Name Plate Cemetery Com herro Section ... Lot. в I Other Graves TN X Grave on this date 50. Cremation 7 25. Urn Stanna Single Grave Opening and Closing Grave Body Shipped to R. R. Ticket unt Cash advanced . Telegram Minister 5. Casket Wagon Physician County or City Burial Automobiles ____ Baggage or Express Train No.

Garey Hand Funeral Home Name of deceased Date of death man Cause of death . Place of death Jea. 4.P. Residence Handa K Age____3 Y'rs _ Mo's_ _ Days Height in. Eyes Weight ... Funeral at Garhrent Date The star 1944 Account charged Address Account guaranteed Amail man Address _ 35 ressond Embalming Robe, Suit, Dress 🛃 Underwear and Hose 🚣 Casket 6-3- 52 Gloth Casket with Copper Lin. Style of Casket Od- of No. of Casket 1912 Outside Box ___ Shipping Case or Vault Pillow Set Name Plate Cemetery ? Section I Other Graves X Grave on this date mald Cremation Urn Single Grave . Opening and Closing Grave Body Shipped to Le. TC SAC. R. R. Ticket ___ Cash advanced . Telegram Minister _ 12 Casket Wagon Physician _____! County or City Burial Automobiles _ 5 Baggage or Express Train No. 92 aus 00 mg- > 30 P.M

Tayl Name of deceased mis Lucy of. Date of death This may-16-41 Cause of death . Place of death bes frame . Age__76__ Y'rs__3__ Mo's__ - Davs Weight 165 Height 5 ft. 5 ____ in. Eyes. Funeral at 6hay Date Tursa Mary 198// Account charged angeore @ 7 Address 741 Polon Account guaranteed for Address 2 35 6 Maple William Dr Win Embalming Pussing Robe, Suit, Dress -Underwear and Hose -Casket 6-3 1/2 Cufe Sarry Con Casket with Copper Lin. * Style of Casket Get-H No. of Casket 1312- Sh Outside Box Shipping Case or Vault Handles Pillow Set Name Plate_ Cemetery Cumplen Lot Section___ I Other Graves X Grave on this date Cremation Oumphin Urn woods Single Grave . Opening and Closing Grave ____ Body Shipped to _____ R. R. Ticket ___ Cash advanced Telegram Minister 1 Casket Wagon . Gasan Physician . County or City Burial . Automobiles ____ Baggage or Express Train No. ___ Propher Dany Por will make baym nh matherst -

Garey Hand Funeral Home

r. Var Name of deceased Bales Luin Date of death may 17-Cause of death ___ Place of death 0.9.3 Residence menil Vano Mo's_1P . Days Y'rs Age____ Height ft. ---- in. Eves Weight Funeral at 📩 mar Date Jun Account charged 6 the arris Address _ Account guaranteed Address ___ Embalming Care 17.50 Robe, Suit, Dress Underwear and Hose Casket 2-4- 7 Casket with Copper Lin. Style of Casket Tempe No. of Casket Tempe Outside Box 159 Shipping Case or Vault Handles Somall Pillow Set Name Plate Cemetery > Section_ Lot. I Other Graves X Grave on this date Cremation Timmer Urn Guts And de Single Grave Our **Opening** and Closing Grave Body Shipped to Jum R. R. Ticket ___ Cash advanced Telegram Minister Casket Wagon Physician ML County or City Burial _ Automobiles _. Baggage or Express Train No. _ 00 Broward Co 2000 5. amile \$-2-5.1.8

Garey Hand Funeral Home Name of deceased anly Date of death Man -Cause of death the times Hidn Place of death Miguro Residence Winter garden Age 28 - Y'rs 4 Mo's adas ---- Days Weight 170 Height 6 __ in. Eyes_. _ ft. Funeral at 192 alres 1941-4P Date Lass may Rotier Account charged ___ av Address Winter Account guaranteed Any mont Address Embalming Y Dunning Robe, Suit, Dress K 35 00 Underwear and Hose Casket 6-6- metal Cashet 275. Casket with Copper Lin. Style of Casket No. of Casket Hadle Outside Box Shipping Case or Vault Clark Air Som 150,00 Pillow Set Name Plate Cemetery Woodlaws Section. _ Lot_ E I Other Graves 7N X Grave on this date Cremation _ Urn ----Single Grave _____ Opening and Closing Grave Tr da 15. Body Shipped to _____ R. R. Ticket Cash advanced Telegram mlu Cel Minister Lev Casket Wagon _ () Physician _____ County or City Burial _____ Automobiles 515 Baggage or Express Train No. EL. edy Large Termsol

Name of deceased mus mildud Date of death may - 18 Connary Cause of death . Place of death Residence 32 3 daylan BI Y'rs .___ Mo's_ Days Age____ Weight___ Height. ft. in. Eyes Funeral at _ Conafae 193 Date ___ Account charged mrs magant 16. Address 7002 Ridge Buch My. C. Account guaranteed _ & state Address resand Embalming Robe, Suit, Dress Underwear and Hose # Casket le 3 52 620 Casket with Copper Lin. Style of Casket No. of Casket 1972 Outside Box 🗠 Shipping Case or Vault Pillow Set Name Plate Cemetery Comption Section___ Lot I Other Graves wooden B X Grave on this date Cremation Urn ---Single Grave . Opening and Closing Grave God Body Shipped to Sumated R. R. Ticket Thuns- may 22: Cash advanced Telegran will Call ha Minister Lean Enga Casket Wagon Physician Onvans County or City Burial ____ Automobiles ____ Baggage or Express Train No.

Garey Hand Funeral Home

Name of deceased anda 10400 oma Date of death asciss Cause of death ____ Place of death es un Residence m Trailer 6 Y'rs Mo's. Days Age 62 Weight____ 20 Height_ 0 _ ft. Eyes in. Funeral at _____ Date Wed may M Account charged min Address Winter Gards Account guaranteed Address ___ Embalming 1820 Robe, Suit, Dress Underwear and Hose Casket ____ Casket with Copper Lin 2-1 Style of Caske No. of Casket Outside Box # Shipping Case or Vault' Handles 621 Pillow Set yes Name Plate umation Cemetery C Section_ Lot I Other Graves X Grave on this date 80 00 Iranalia Cremation Urn wood Single Grave Body 02 Opening and Closing Grave Body Shipped to thus R. R. Ticket Cash advanced Telegram Minister _ Casket Wagon Physician and County or City Burial Automobiles _ Baggage or Express Train No.

Name of deceased Mr men Date of death may - 10 Cause of death _ Place of death fer Residence Chorta Ates One Age 6/ Y'rs __ Mo's_ Davs Weight 170, Height 5 ft. in. Eves Funeral at No dense M 193. Date ----Account charged man may yamer Address anothe RJ, B 1-By 140 Account guaranteed _ Address ___ Embalming Poursung Robe, Suit, Dress Underwear and Hose Casket Since Eng Casket with Copper Lin. ___ Style of Casket _____ No. of Casket _____ Outside Box ---Shipping Case or Vault ____ Handles _____ Pillow Set Name Plate _ Cemetery ____ Lot Section R I Other Graves 792 X Grave on this date 50 00 Cremation Cumelion Urn Wooder Single Grave Body Commented Opening and Closing Grave Body Shipped to Tues man R. R. Tickettuil Call for Cash advanced ____ Telegram _ Minister ____ Casket Wagon _ amse Physician 2 County or City Burial _ Automobiles ____ Baggage or Express Train No. Cash Va.

Name of deceased m trank Kin Date of death may -1 7-41 Cause of death Mat youtes Place of death Ale 1410-Residence Vet _ Y'rs Age_ 65 Mo Davs Weight_150_Height in. Eyes Funeral at ___ earl Date _2 193 unual 2 Account charged Address Leoling Account guaranteed ___ Address ____ 37,50 Embalming Coumation Robe, Suit, Dress _ Underwear and Hose Casket 6-3- 9- 61th Casket with Copper Lin. Style of Casket Body anird No. of Casket grate 6-P. m Outside Box man may -19 Shipping Case or Vault Handles Boddy 614 oumpi Pillow Set Think man 20 Name Plate Cemetery Section eest I Other Graves X Grave on this date Cremation Urn wooden Single Grave ____ Opening and Closing Grave _____ Body Shipped to _____ R. R. Ticket Cash advanced _____ Telegram _____ Minister _____ Casket Wagon _____ Physician _____ County or City Burial _____ Automobiles ___ Baggage or Express Train No. ____

Garey Hand Funeral Home

Name of deceased Date of death _201 Cause of death Place of death Residence 94 Age__ Mo's Days Eves in. Weight leight Funeral 199 Date _2 Chas mis Account charged Address Winter Par 910 1 ant Account guaranteed Address 35 usoing Embalming Robe, Suit, Dress -Underwear and Hose Guy Casket 6-3- 32 Casket with Copper Lin Style of Casket Det. No. of Casket 1972 Tarry Outside Box -Shipping Case or Vault Thready 3-22-41 Handles Pillow Set Yes Name Plate Cemetery Section_ Lot E I Other Graves X Grave on this date umalim Cremation " Urn moods Single Grave Body Opening and Closing Graved Body Shipped to R. R. Ticketune Cash advanced Telegram Minister Casket Wagon Physician der County or City Burial Automobiles _ Baggage or Express Train No.

Name of deceased Sall Date of death -----Incu Cause of death ----440 Place of death _ Lota Tana Beach Residence Lamarelle Va 3__ Mo's__ 2.3__ Days. Weight_/55 Height____ft. €_ in. Eyes_ Funeral at _____ Date ____ 198 Account charged Ba asett. Address ____ Adaut de Account guaranteed Address ____ Embalming ___ Estrua Robe, Suit, Dress ____ Underwear and Hose _ Casket ____ Casket with Copper Lin. Style of Casket _ Body an No. of Casket to faile Outside Box ____ Quer_ 9ng Shipping Case or Vault . Handles ____ Pillow Set _____ Name Plate ____ Chac___ Cemetery ____ _ Lot Section____ E I Other Graves X Grave on this date Cremation Califo Urn _____ Single Grave to mas Pil Opening and Closing Grave FQ Body Shipped to _____ a. * R. R. Ticket ____ Cash advanced Telegram _____ Minister ____ Casket Wagon Physician ____ County or City Burial _____ Automobiles ___ Baggage or Express Train No. ___

Name of deceased ma Dam. Svant Date of death Hed man 240-A. Cause of death Place of death 9 -02 Residence 212 anderson Days. Weight 12 Height in. Eyes ft TONDI Funeral at ___ Date Thurs may 192 Account charged muss andero Address 2/2 -6 stat Account guaranteed _ Address _ Embalming 402 Robe, Suit, Dress Underwear and Hose Casket 6-3 J. Casket with Copper Lin Style of Casket YU No. of Casket 1341 Outside Box or Vault Shipping Case Handles Pillow Set Yes Name Plate -Cemetery Section_ Lot Deparis I Other Graves X Grave on this date 50 00 umation Cremation Urn _ Por Single Grave -Opening and Closing Grave _ Body Shipped to ____ R. R. Ticket ___ Cash advanced Telegram Q Minister 21a Casket Wagon Physician 92_2 County or City Burial Automobiles ___ Baggage or Express Train No. 150,00

Name of deceased the Date of death (may - 20-Cause of death Place of death Com (ma Vent 6 Residence 610 Y'rs Mo's Age Davs - Height Weight. in. Eves Funeral at Tint Bepties. Date may-21 Account charged my Address 610 - 91 Account guaranteed Amall_ Address _ Embalming Robe, Suit, Dress Underwear and Hose of Casket 6 4-XY 42 Y Casket with Copper Lin Style of Casket Oct, M. e No. of Casket Outside Box 1-9 Shipping Case or Vault . Handles ___ Pillow Set Name Plate Cemetery Section Lot. I Other Graves X Grave on this date Cremation P. B. Par Urn _ Cm m Single Grave T. C. Opening and Closing Grave 1444 Body Shipped to _____ R. R. Ticket ____ Cash advanced Telegram Minister Bur Powell Tuch Casket Wagon () Physician ____ County or City Burial ____ Automobiles St Baggage or Express Train No.

Name of deceased mis almas & much Date of death may - 3 2 - 41 230 Cause of death _ Carcinance of Place of death der Residence Tanulla Age 44 Y'rs 8. Mo's 4. _ Davs__ _ Height ____ ft.____ in. Eyes___ Weight Funeral at West 193 M Date ____ Account charged W. A nur Address Quanda Rq Account guaranteed . Address ___ 30 Embalming & Bresson Robe, Suit, Dress . Underwear and Hose _ Casket 6-3- 34 20 Casket with Copper Lin. Style of Casket 72 Tempa. No. of Casket Outside Box _____ Shipping Case or Vault Pillow Set Name Plat Cemetery % Section ... Lot_ R I Other Graves X Grave on this date Cremation Urn _ Single Grave ----Opening and Closing Grave Body Shipped to Mhat 25 R. R. Ticket _1)00 83 Cash advanced ___ Telegram (1) Minister ----Casket Wagon Physician ____ County or City Burial _____ Automobiles _____ Baggage or Express Train No. _____

Name of deceased analy Reberca Torla Date of death ______ 21____ Lile C. 200 ulmana Cause of death 4 Place of death Real Residence ____ Red D __ Mo's_ Days__ Age__DL Y'rs Height____ ----- in. Eyes_ Weight saverade Funeral at Date Sunday may 25 1941 Account charged mauric Address __ gellunna Account guaranteed Erale Address . Embalming Y Sull Robe, Suit, Dress M ress Underwear and Hose Casket 6-3- In Plush Sel Casket with Copper Lin, Style of Casket No. of Casket 1927-Outside Box _Rza Shipping Case or Vault Handles Pillow Set Name Plate Cemetery _ 21 4 Larals Section Lot. E I Other Graves X Grave on this date Cremation _____ Urn _ Single Grave _____ 15. Opening and Closing Grave MCC Body Shipped to _____ R. R. Ticket _____ Cash advanced Telegram _ Minister Rev Ger Casket Wagon Physician & County or City Burial Automobiles _____ Baggage or Express Train No.

Name of deceased Berny ACHAM Date of death grand 20. Cause of death Supericle . 31 Place of death _ ando_ Residence _ Ft Landh dale_ Agene 3.3- Y'rs_____ Mo's_____ Davs. Weight_____ Height_____ ft.____ in. Eyes_ Funeral at _____ M Date ____ Account charged --- Com Account guaranteed was found dead in his Address Quantomoliks parted off the Embalming Familes Rd-Address _____ Robe, Suit, Dress had been sead Underwear and Hose Service For Casket Body in Viny Bad Conte Casket with Copper Lin. Style of Casket County Bunnal 14, 50 Outside Box _____ Shipping Case or Vault _____ Handles ____ Pillow Set Name Plate Cemetery Eanly Hame Section___ 167 I Other Graves 5 X Grave on this date Cremation _____ Urn ____ Single Grave _____ Opening and Closing Grave. Body Shipped to _____ R. R. Ticket Cash advanced _____ Telegram _____ Minister ____ Casket Wagon Physician C. J. Lluckun County or City Burial Automobiles _____ Baggage or Express Train No. ____ 14.50

Name of deceased (163 Date of death _ 224 Cause of death _ ag Place of death 12 Residence 15-1-4 Age_ 5-4-Y'rs Days Height Eyes Weight Funeral at / Date Frid Account charged 9 Address _____ Account guaranteed Address ___ Embalming Your Robe, Suit, Dress Underwear and Hose K Casket 6-6- 52 Eln Casket with Copper Lin." Style of Casket 16 C-No. of Casket 6000 Plann Outside Box Geg_ Shipping Case or Vault Handles M Pillow Set Name Plate Cemetery Section___ Lot E I Other Graves X Grave on this date Cremation Urn . Single Grave . Opening and Closing Grave Body Shipped to M. H. R. R. Ticket _____ 320____ Cash advanced Telegram Minister Red Casket Wagon Physician County or City Burial Automobiles S. Baggage or Express Train No. Fin 5-23-41

Name of deceased Billing Leak ·clards Date of death Macun 31; 41 Cause of death Tractories Sole Place of death ____ Residence Age 25 Y'rs //. Weight/60 Height Mo's_/ __ Days Height_____ft. 8 _____ in. Eyes Funeral at Chape 30 P. M may Date Lin 1981 94. Richards Account charged Address 328 A Bid way -Account guaranteed Address _ Embalming Can of Body 25 Robe, Suit, Dress . Underwear and Hose Casket 6-6- milal Bro Casket with Copper Lin. Style of Casket No. of Casket Treed Outside Box -100. Shipping Case or Vault Handles Est. Pillow Set Yes Name Plate fame & Der Cemetery Suenuse Section N. W 12 -N. NW 4 I Other Graves X Grave on this date Cremation Juna 300 ans Urn ____ Single Grave _ Car mo Opening and Closing Grave Body Shipped to _R.B. R. R. Ticket ____ Cash advanced Telegram T: Car Minister Inelan Adles Casket Wagon _ 1. ample Physician County or City Burial Automobiles SV S Baggage or Express Train No.

my marie Name of deceased Low Date of death ____ 10; Cause of death Culmonans Place of death State 1.13. 74 Residence __ Famer__ Age__ 2.7__ Y'rs_ 6_ .__ Mo's Days _ Height____ ____ in. Weight_____ ft. Eves Funeral at M Date Man Account charged Address _____ formento Account guaranteed _C Address ____ resar Embalming Yo Robe, Suit, Dress Stande 121 4 19-Underwear and Hose Casket 6-3-32 Casket with Copper Lin. Style of Casket No. of Casket 1341-- Orlians Outside Box 1.9. Shipping Case or Vault Handles Pillow Set Name Plate Cemetervoles Section. Lot. E I Other Graves X Grave on this date Cremation _____ Urn _____ Single Grave ____ Opening and Closing Grave Body Shipped to High 50. R. R. Ticket ____ Cash advanced Telegram _ Minister ____ Casket Wagon Physician County or City Burial Automobiles _ Baggage or Express Train No. ___ Cash 100 00 60 Da Note 75 -

Name of deceased Im mystly chietiland Date of death This may - 23-41- 523 CM Cause of death Th. T. B. Dant Residence Bonifay Ha-Age 43 Yrs / Mo _/_ Mo's_ _ Days____ Weight 140 Height __ ft. 4 __ in. Eyes_ Funeral at ____ Les Date ______ Account charged anthun Strieldano Μ Address Benifay Account guaranteed Address ___ Embalming **Personng** Robe, Suit, Dress Prise 35. 650 Underwear and Hose Casket 6-3- Sil Plush Casket with Copper Lin. 72 -e. No. of Casket 1927 - Showing Outside Box 129 Shipping Case or Vault Pillow Set Name Plate Cemetery Section____ Lot_ E I Other Graves X Grave on this date Cremation Urn ____ Single Grave _ Opening and Closing Grave . Body Shipped to Bangay_ R. R. Ticket 1225 - 625 Cash advanced _____ Telegram _ Minister ____ Casket Wagon . Physician de___ County or City Burial _____ Automobiles _____ Baggage or Express Train No. 2 at may - 24-41

le cker Name of deceased ungal Date of death ___ Mak Cause of death Place of death 4.0 Residence _____ almer St Weight 100 Y'rs 2 ____ Mo's__ 2 -__ Days_ Height_ J__ ft. 9 in. Eyes_ Funerabat Tehafel 19.41 Date man Account charged . . Palma. Address 724-0 Account guaranteed Address ___ Embalming & Dursing Robe, Suit, Dress Ł Underwear and Hose Casket 6 3 22 Casket with Copper Lin. Style of Casket No. of Casket/341 lemo Outside Box Shipping Case or Vault Handles Pillow Set Name Plate : Cemetery * Lot Section_ E I Other Graves X Grave on this date Cremation Dumalin Urn ---Single Grave . Opening and Closing Grave Body Shipped to Dody to R. R. Ticket 8- am mon Cash advanced man - 26-4 Telegram Minister Casket Wagon . mariles Physician 2 County or City Burial . Automobiles _____ Baggage or Express Train No. . S.C # 2 63- 24-3340