

7-17-1931

Memoranda Book 070: Carey Hand Funeral Home records, September 17, 1931 to November 22, 1931

Carey Hand Funeral Home

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Book # 60

Sept 17 - 1931

To

Nov 22 - 1931

6184

Carey Hand Funeral Home

Name of deceased *Mr David Atkin*
 Date of Death *Thurs Sept 17 1931* *AM*
 Cause of death _____
 Place of Death *Res* *M*
 Residence *112 East Emmell ave*
 Age *82* Y'rs *11* Mo's *3* Days _____
 Weight *100* Height, *5 ft. 7* in. Eyes _____
 Funeral at *Chapel*
 Date *Sun - Sept - 20 1931* *3-P, M*
 Account charged *Mrs David Atkin*
 Address *112 East Emmell ave*
 Account guaranteed *Estate*
 Address _____
 Embalming *Y Dressing* *35 00*
 Robe, Suit, Dress _____ *1 00*
 Underwear ~~and Hose~~ _____ *100 00*
 Casket *6-3-Set One*
 Casket with Copper Lin. _____
 Style of Casket *Oct - 3 - P. T* *12 00*
 No. of Casket *Spr of Flowers*
 Outside Box _____
 Shipping Case or Vault _____
 Handles *Ext Sft Fin*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Cremation*
 Section _____ Lot _____
Coffin *E*
will call for
 I Other Graves _____
 X Grave on this date _____
 Cremation *Cremation* *50 00*
 Single Grave _____
 Opening and Closing Grave *Body*
 Body Shipped to *Cremated 10-AM*
 R. R. Ticket *Mon - Sept 21 - 31*
 Cash advanced _____
 Telegram _____
 Minister *Stultz, H.B.S.* *5 00*
 Casket Wagon _____
 Physician *Dr Gray*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

203 00

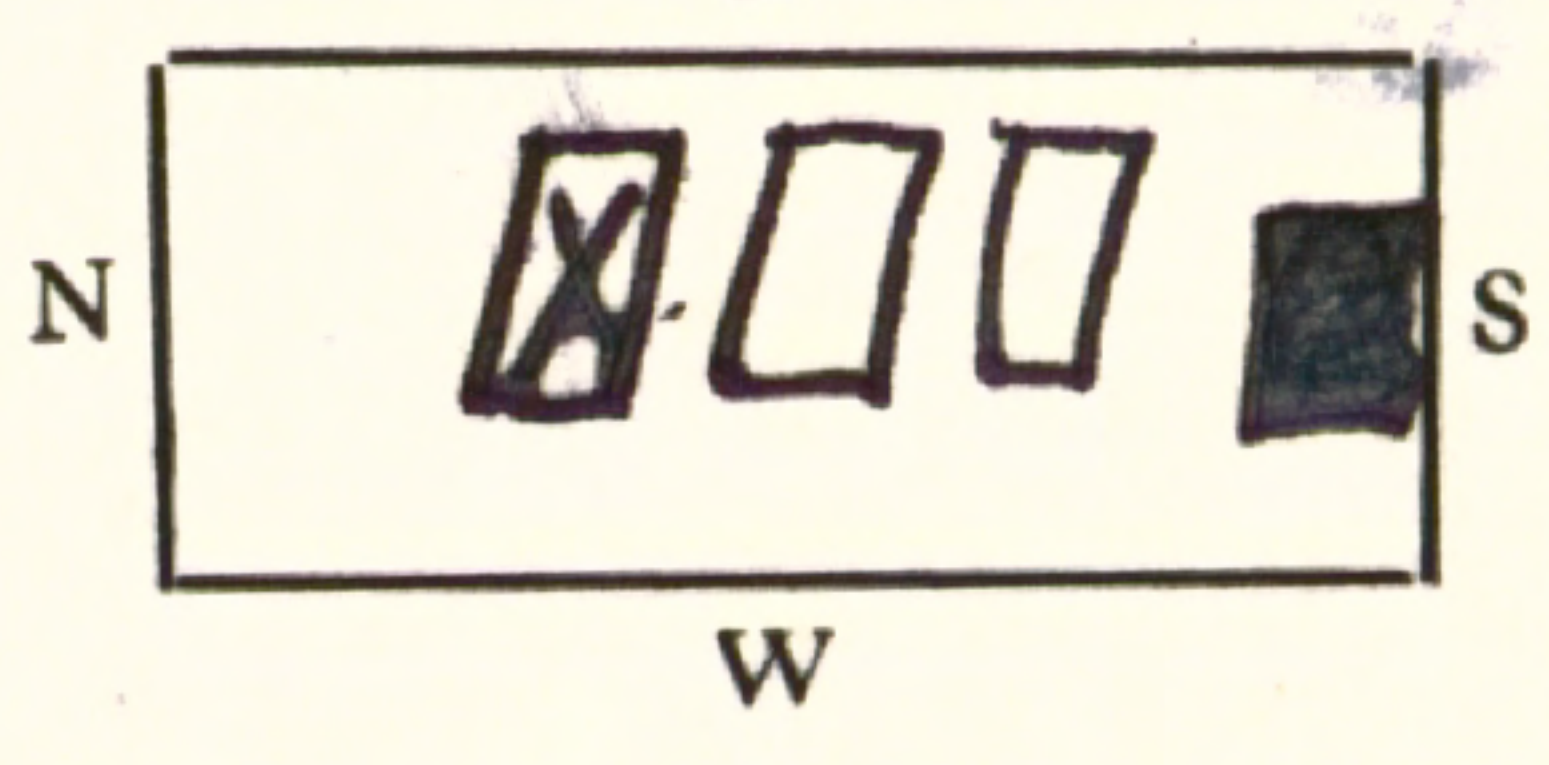
6185

Carey Hand Funeral Home

Name of deceased Mrs Catherine Gavin
Date of Death Thurs Sept 17 1931 a M
Cause of death _____
Place of Death Res M
Residence 64- E Concord
Age 76 Y's 5 Mo's 2 Days
Weight 90 Height 5 ft. 6 in. Eyes _____
Funeral at Chapel
Date Sun Sept- 20 1931 4-P. M
Account charged Alma Wamser
Address 64 E. Concord
Account guaranteed Estate
Address _____

Embalming + Dressing 35⁰⁰
Robe, Suit, Dress ✓ 5⁴⁰
Underwear and Hose 200-1.90-1.50
Casket 6-3- Orchid Plunk 325⁰⁰
Casket with Copper Lin. _____
Style of Casket Egypt 1/2
No. of Casket 3717 1/2
Outside Box ✓
Shipping Case or Vault air Seal 150⁰⁰
Handles Ext. Old Seal
Pillow Set yes Orchid
Name Plate ✓
Cemetery Greenwood
Section 2 Lot 13
E

I Other Graves _____
X Grave on this date _____



Cremation _____
Single Grave _____
Opening and Closing Grave T. & D. 10⁰⁰
Body Shipped to Car Minn
R. R. Ticket Cloud Car
Cash advanced P. B. Car 5⁰⁰
Telegram Musie 5⁰⁰
Minister Engle 5⁰⁰
Casket Wagon (1)
Physician Dr. Ford
County or City Burial _____
Automobiles 3 & 5 15⁰⁰
Baggage or Express Train No. 550 40

6186

Carey Hand Funeral Home

Name of deceased Geo Howard Owens
 Date of Death Sept 18 1931- 1130 M A
 Cause of death Senility Heart attack
 Place of Death Res M
 Residence 21 - N. Shine St
 Age 79 Y'rs Mo's Days
 Weight Height, ft. in. Eyes
 Funeral at no service
 Date - 1931 M
 Account charged Eva Owens
 Address 21 - N. Shine St
 Account guaranteed Insurance
 Address
 Embalming at dressing 35.00
 Robe, Suit, Dress 25.00
 Underwear and Hose 2.00
 Casket none Service Ch 15.00
 Casket with Copper Lin. Chg Lining
 Style of Casket new mat 3.00
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Copper Can Lot
will call E
 I Other Graves N S
 X Grave on this date
 Cremation Cremation W 50.00
 Single Grave Copper Can 10.00
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket Body cremated
 Cash advanced Mon Sept - 21-31
 Telegram 10 - a.m.
 Minister
 Casket Wagon (1) 5.00
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

145.00

6187

Carey Hand Funeral Home

Name of deceased Mr. Carroll D. Judson
 Date of Death Sept. 15 1931 M
 Cause of death acute dilatation of heart
 Place of Death Br. Ohio M
 Residence Lakeland Fla
 Age 64 Y'rs 5 Mo's 4 Days
 Weight 190 Height 5 ft. 4 in. Eyes blue
 Funeral at Lakeland
 Date 1931 M
 Account charged Smith & Duke
 Address 412 Lakeland Fla
 Account guaranteed C.B. -
 Address _____
 Embalming Cremation 50.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket State in care
 Casket with Copper Lin. _____
 Style of Casket Body covered
 No. of Casket 4 auto 11-AM
 Outside Box Fri Sept 18-31
 Shipping Case or Vault _____
 Handles Body cremated
 Pillow Set 11:30 A.M.
 Name Plate Fri Sept 18-31
 Cemetery _____
 Section Coffin Can Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 Cremation Mr. Returned to W
 Single Grave Smith & Duke
 Opening and Closing Grave F.D.
 Body Shipped to Lakeland Fla
 R. R. Ticket Sun Sept 22-31
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

50.00

6188

Carey Hand Funeral Home

Name of deceased James KincaidDate of Death Fri Sept 18 1931 P M

Cause of death _____

Place of Death Res MResidence 1118 West Can aveAge 61 Y'rs 2 Mo's 11 DaysWeight 125 Height 5 ft. 6 in. Eyes _____Funeral at ChapelDate Sun Sept 20 1931 5 P. MAccount charged Mrs Nellie Kincaid 2/2Address 1118 W. Can aveAccount guaranteed Estate

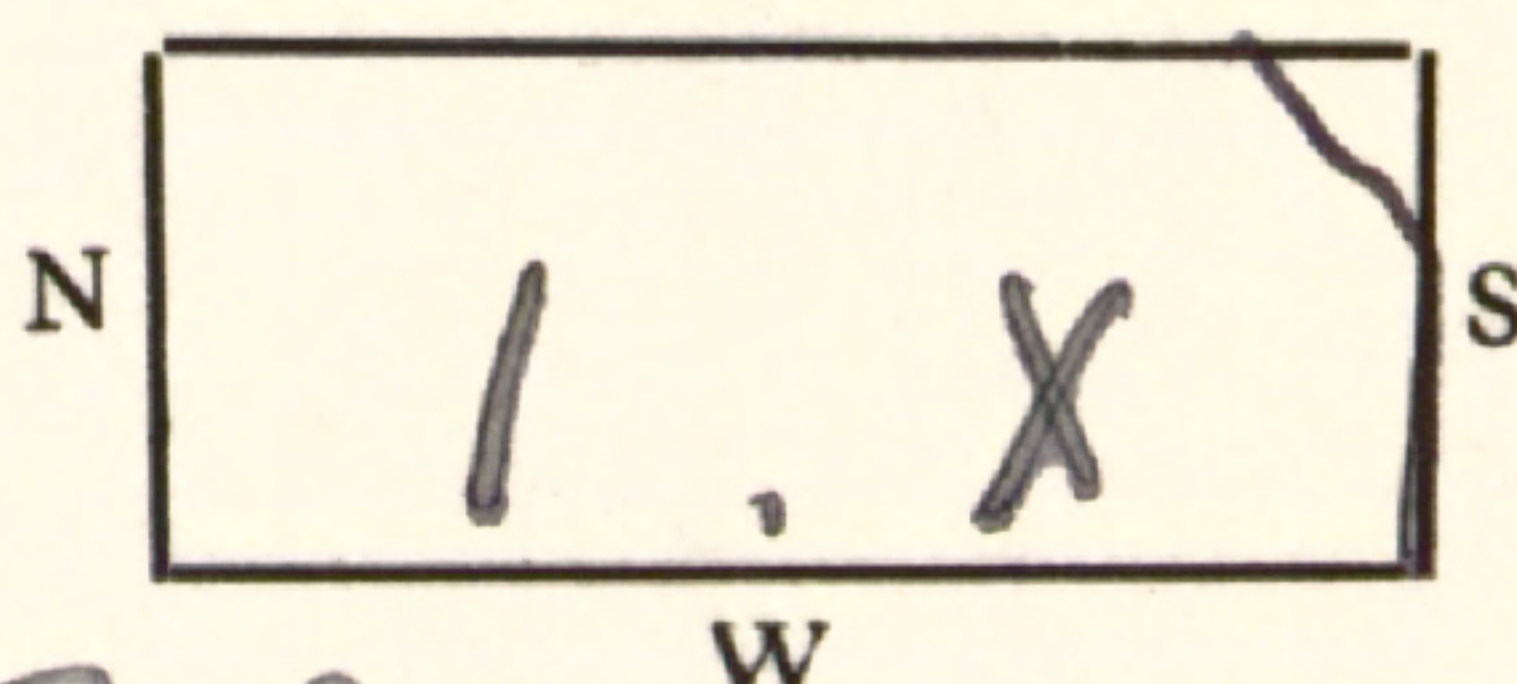
Address _____

Embalming & Dressing 35.00Robe, Suit, Dress ✓Underwear and Hose ✓Casket 6-3-B. Bnd C 300.00Casket with Copper Lin. ✓Style of Casket Stat. H. C.No. of Casket S. 5018Outside Box ✓Shipping Case or Vault End Seal 150.00Handles Ext. C. SilPillow Set yesName Plate Elks EnbCemetery GreenwoodSection 2- Lot 13

E

I Other Graves

X Grave on this date

Cremation 2-P. B Cars 10.00Single Grave 1 Aut. 5 5.00Opening and Closing Grave 7+5 10.00

Body Shipped to _____

R. R. Ticket _____

Cash advanced Music also 5.00

Telegram _____

Minister M. C. Nair 5.00Casket Wagon (1) 5.00Physician Dr. Christ

County or City Burial _____

Automobiles 3 x 5 15.00Baggage or Express Train No. 53500Very Large FuneralElks at Grave

6189

Carey Hand Funeral Home

Name of deceased *Infant of Mrs. Gordon Gore*Date of Death *Sept 21* 19*31* *6-P* MCause of death *still Born*Place of Death *O. G. H.* MResidence *Oviedo*Age *✓* Y'rs *✓* Mo's *✓* Days

Weight Height, ft. in. Eyes

Funeral at *Home*Date *1st Sept 22-* 19*31-* *10 A* MAccount charged *Gordon Gore*Address *Oviedo*

Account guaranteed

Address

Embalming

Robe, Suit, Dress

Underwear and Hose

Casket *2-A W X S-* *10 00*

Casket with Copper Lin.

Style of Casket

No. of Casket *Del to Oviedo* *5 00*Outside Box *Reg*

Shipping Case or Vault

Handles

Pillow Set

Name Plate

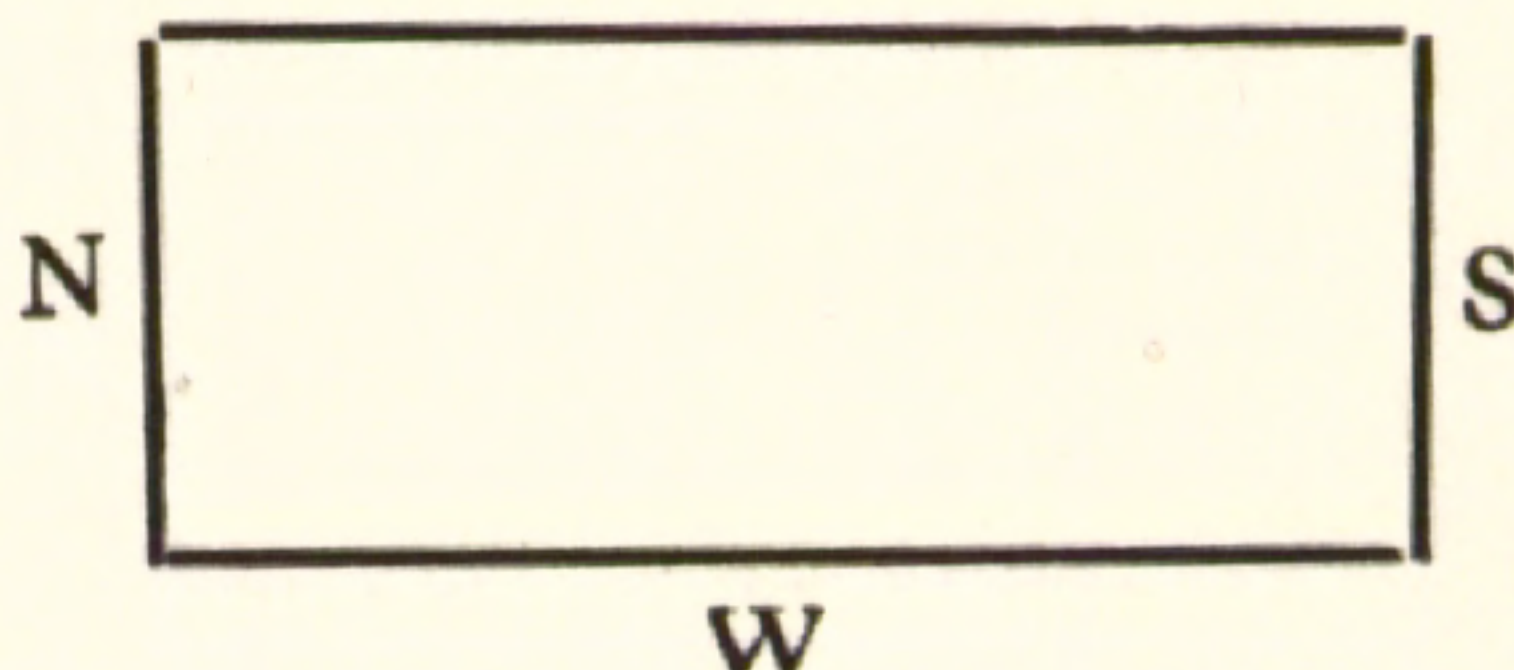
Cemetery *Oviedo*

Section Lot

E

I Other Graves

X Grave on this date



Cremation

Single Grave

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister

Casket Wagon *M. M.*Physician *Dr. Christ Andrews* *10 00*

County or City Burial

Automobiles

Baggage or Express Train No.

6190

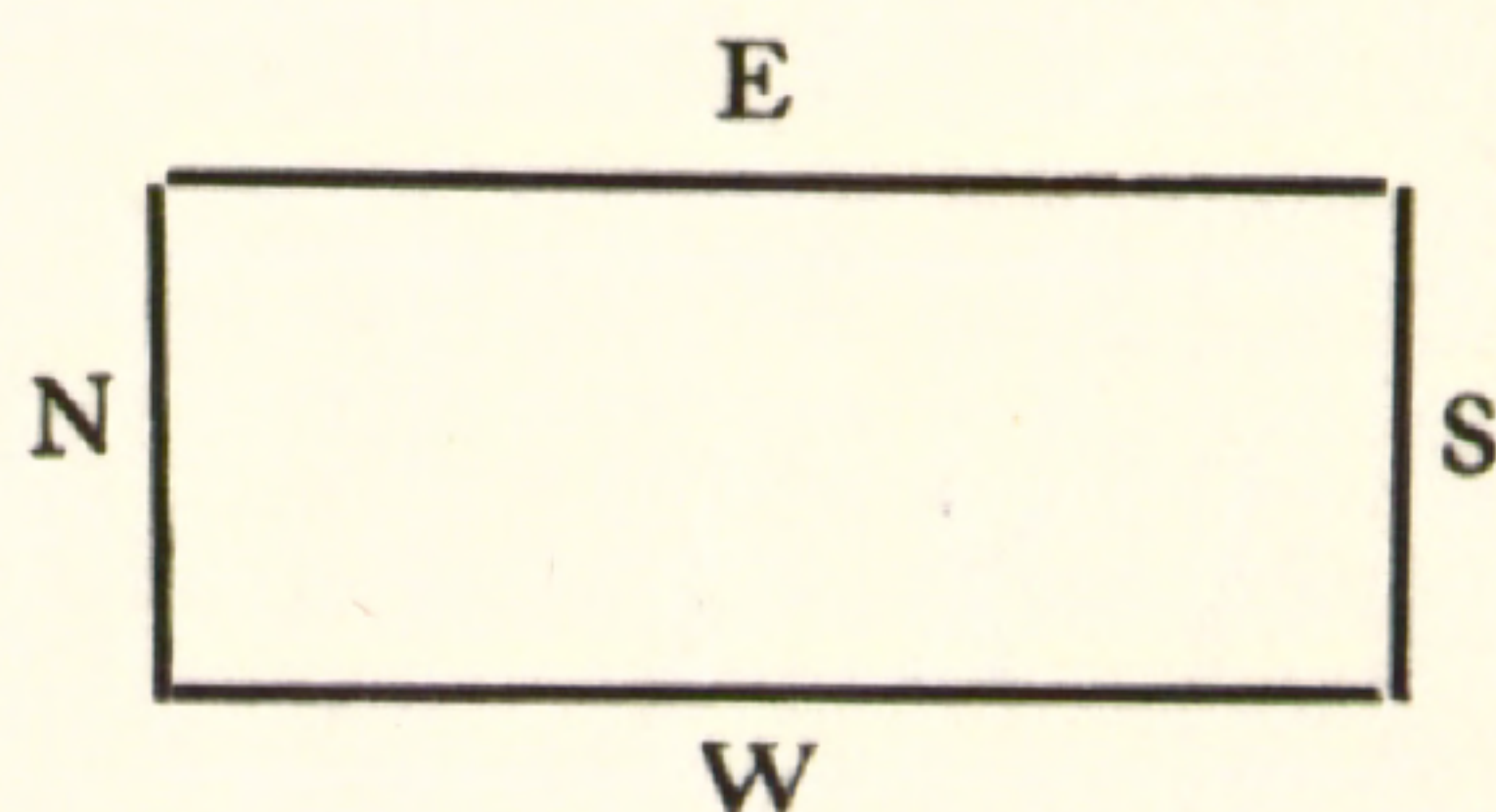
Carey Hand Funeral Home

Name of deceased Mr Joseph S Gladhill
 Date of Death Sept 20 1921 - M
 Cause of death Cerebral Hemorrhage
 Place of Death Tampa M
 Residence Tampa Fla
 Age 83 Y'rs 1 Mo's 14 Days
 Weight 160 Height, 5 ft. 10 in. Eyes blue
 Funeral at Tampa
 Date _____ 192 M
 Account charged B. Maurer Reed
 Address T.D. Tampa Fla
 Account guaranteed _____
 Address _____
 Embalming Cremation
 Robe, Suit, Dress _____
 Underwear and Hose Body arrived
 Casket by Express train 76
 Casket with Copper Lin. Wed morning
 Style of Casket Sept 23 - 31
 No. of Casket _____
 Outside Box Body cremated
 Shipping Case or Vault Sept 23 - 31
 Handles 9 - A.M.
 Pillow Set _____
 Name Plate Ashes expressed to
 Cemetery B.M. Reed
 Section Fri Sept 25 Lot 31 -

Coffin Case

I Other Graves

X Grave on this date



Cremation _____

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. _____

50 00

50 00

6192

Carey Hand Funeral Home

Name of deceased Mrs Annie Rinaldi
 Date of Death Sept - 22 1931 M
 Cause of death arterial sclerosis
 Place of Death Tampa Fla M
 Residence _____
 Age 90 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at grave
 Date Sept - 23 - 1931 1-P. M
 Account charged B. H. P. Joe L Reed
 Address F. S. Tampa Fla
 Account guaranteed _____
 Address _____

Embalming _____

Robe, Suit, Dress _____

Underwear and Hose _____

Casket Burma Chck

Casket with Copper Lin. _____

Style of Casket Oct Oval Top H. Cox

No. of Casket _____

Outside Box Reg

Shipping Case or Vault _____

Handles Ext

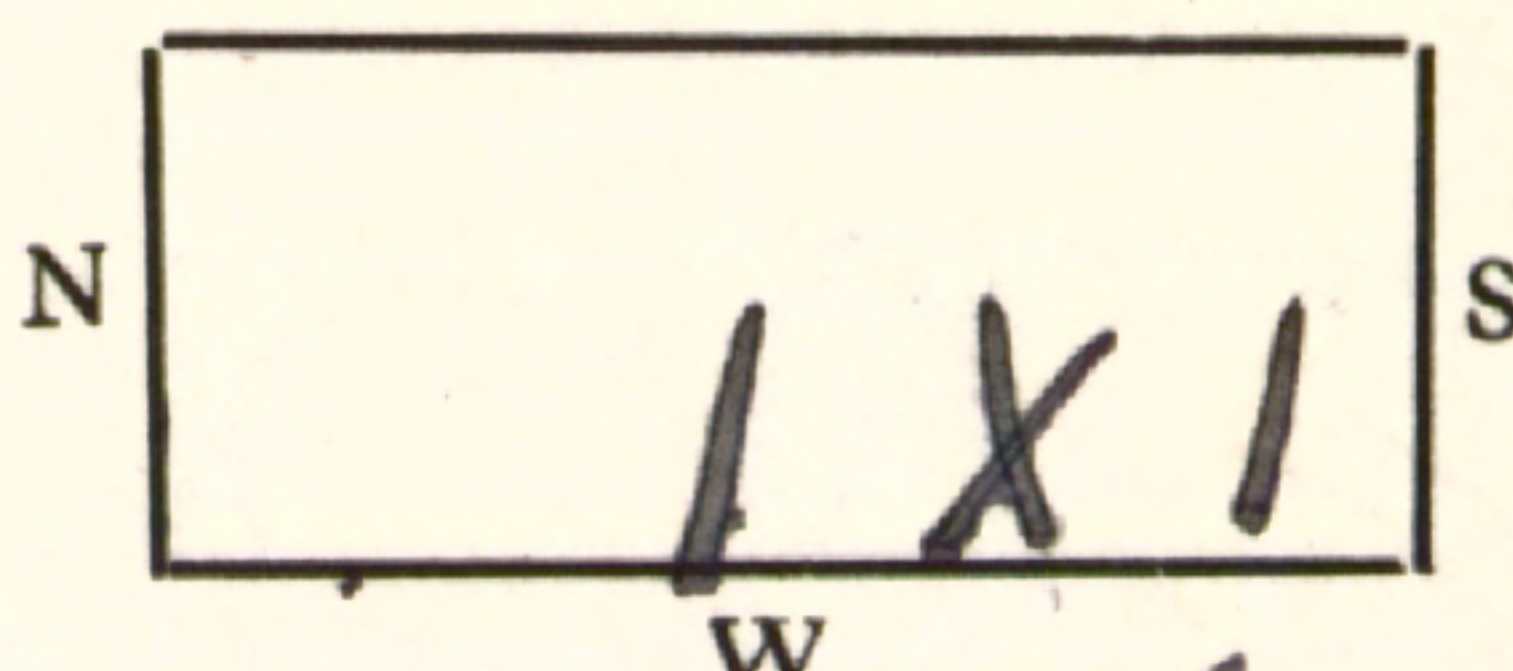
Pillow Set _____

Name Plate at RestCemetery GreenwoodSection A Lot 184

E

I Other Graves _____

X Grave on this date _____



Cremation _____

Single Grave _____

Opening and Closing Grave Td 5Body Shipped to Buch VaultR. R. Ticket Material 21.90Cash advanced Labu 5.50

Telegram _____

Minister Rev Norton

Casket Wagon _____

Physician _____

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

12.60

10.00

21.90

5.50

\$ 50.00

Mr Reed Drive through
from Tampa

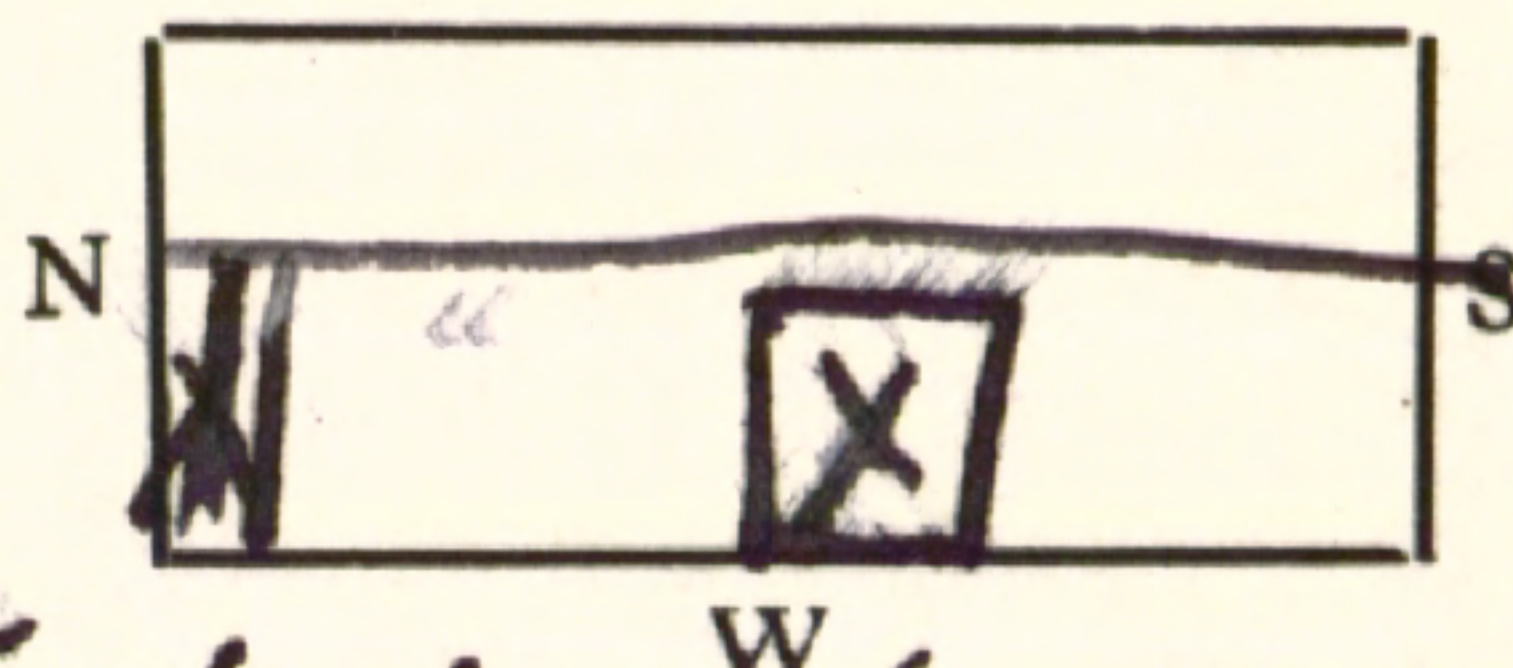
6193

Carey Hand Funeral Home

Name of deceased Antonino Cannavale
 Date of Death Sept 24 1931 6 P. M
 Cause of death Pneumonia
 Place of Death Res M
 Residence 419 S. Lake
 Age 70 Y's 3 Mo's 28 Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Catholic Church
 Date Sept 26 1931 9 A. M
 Account charged Mrs A. Cannavale
 Address 419 S. Lake St
 Account guaranteed Estate
 Address _____
 Embalming + Dressing
 Robe, Suit, Dress Li
 Underwear and Hose ✓
 Casket 6-3 Gr. Oak
 Casket with Copper Lin. ✓
 Style of Casket Oct 1/2 Couch
 No. of Casket 2794 Indpls
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext Spt Fin
 Pillow Set yes
 Name Plate Name + 1861
 Cemetery Greenwood
 Section J. W 1/2 Lot 61
 E

I Other Graves

X Grave on this date



Less one
grave N.W. cor
 Cremation Mrs Lillivick

Single Grave Burial Lot

Opening and Closing Grave

Body Shipped to Cloud CarR. R. Ticket P. B. CarCash advanced Car MinTelegram Spa FlowersMinister Father FoxCasket Wagon (1)Physician Dr. ChappellCounty or City Burial Eng N. PlatiAutomobiles S + S

Baggage or Express Train No.

35.00
 175.00
 375.00

375.00
 10.00
 5.00
 5.00
 5.00
 20.00
 5.00
 5.00
 15.00

3182.50

Cremation.

Carey Hand Funeral Home

6194
Name of deceased David T. Porriau
Date of Death Sept 21 19231 M
Cause of death accident - Carbon monoxide
Place of Death Coconut Grove Fla M 94
Residence Coconut Grove Fla
Age 59 Y'rs 8 Mo's 8 Days
Weight _____ Height, _____ ft. _____ in. Eyes _____
Funeral at Coconut Grove
Date Sept 19231 M
Account charged W. N. Combs Und & Co
Address Miami Fla
Account guaranteed _____
Address _____
Embalming Cremation 5000
Robe, Suit, Dress _____
Underwear and Hose _____
Casket Body arrived
Casket with Copper Lin. by express
Style of Casket Friday
No. of Casket 2:50 P.M. Sept
Outside Box 25-1931
Shipping Case or Vault _____
Handles Body Cremated
Pillow Set Sept 25-3 P.M.
Name Plate _____
Cemetery Cremation
Section _____ Lot _____
Copper Can E
I Other Graves N S
X Grave on this date
W
Cremation Ashes to be
Single Grave sent to -
Opening and Closing Grave W. N. Combs & Co.
Body Shipped to Sept 28-31-
R. R. Ticket _____
Cash advanced _____
Telegram _____
Minister at Tampa
Casket Wagon _____
Physician Dr. Franklin
County or City Burial _____
Automobiles _____
Baggage or Express Train No. _____

50 00

6195

Carey Hand Funeral Home

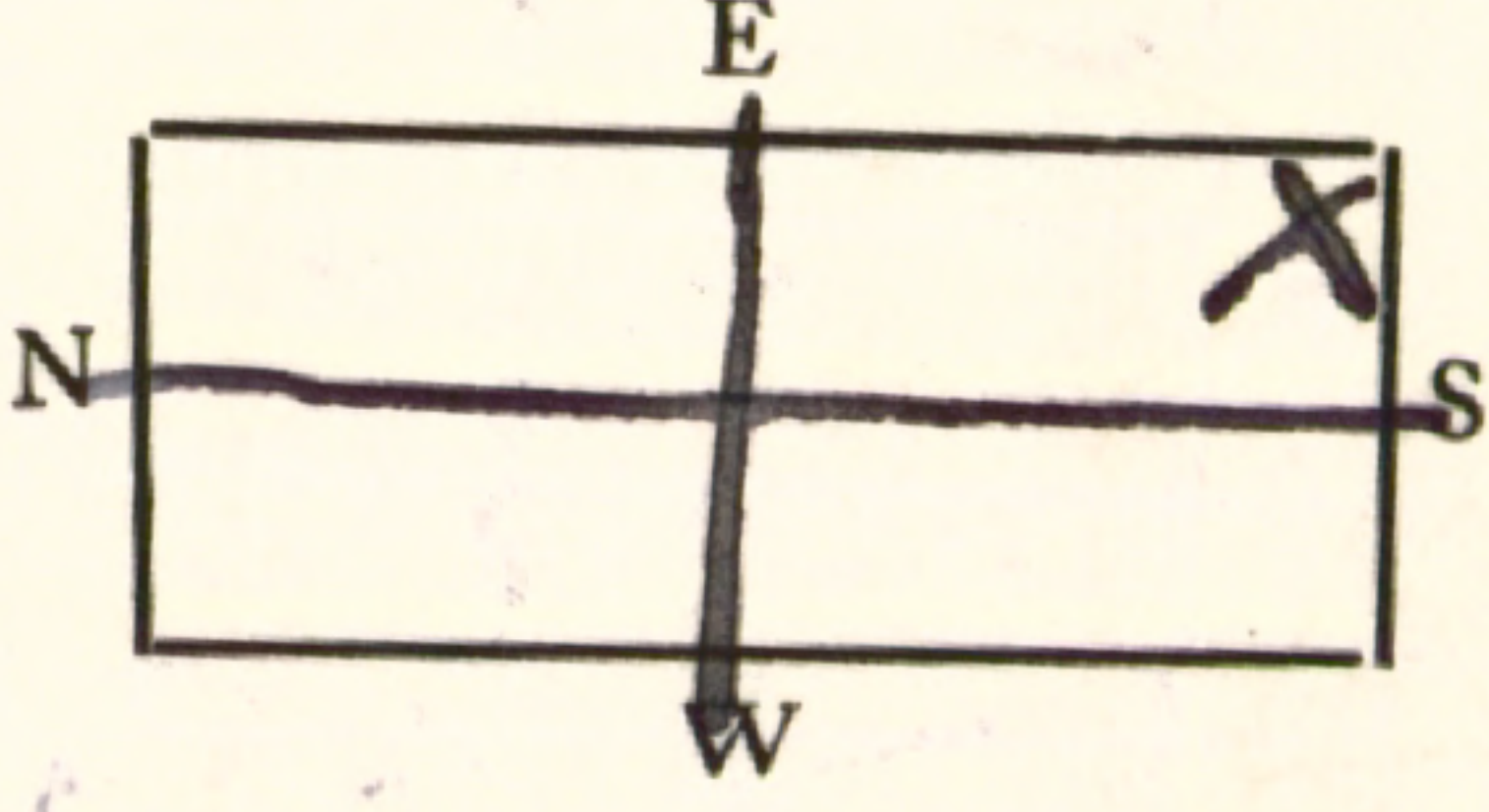
Name of deceased Chas L. Soi
 Date of Death Sept 25 1923 10:45 A M
 Cause of death Pulmonary tuberculosis
 Place of Death Res M
 Residence Fleming Heights - Orlando
 Age 22 Y'rs 3 Mo's 26 Days 26
 Weight 90 Height, 6 ft. 1 in. Eyes Blue
 Funeral at Chapel
 Date Sept 27 1923 3 P. M
 Account charged Mrs. Anna Marcus
 Address Fleming Heights Orlando
 Account guaranteed Insurance
 Address _____
 Embalming Cremation 50 00
 Robe, Suit, Dress Emb & Dressing 35 00
 Underwear and Hose _____
 Casket 6-3 br cup & Sun 50 00
 Casket with Copper Lin. ✓
 Style of Casket Oct _____
 No. of Casket ✓ Body was
 Outside Box ✓ Cremated x
 Shipping Case or Vault ✓ Sept 28
 Handles Ext 1931 - 11 a.m.
 Pillow Set yes
 Name Plate ✓
 Cemetery Cremation
 Section _____ Lot _____
Copper Can E
 I Other Graves _____
 X Grave on this date _____
 Cremation Express run to W
 Single Grave Kenneth Carr
 Opening and Closing Grave F. D.
 Body Shipped to Budgeton N. J.
 R. R. Ticket 9-29-31
 Cash advanced _____
 Telegram _____
 Minister Rev Norton of Lockart
 Casket Wagon (1) 5 00
 Physician Dr. M. E. Egan Jr.
 County or City Burial ✓
 Automobiles ✓
 Baggage or Express Train No. 140 00
People Very Poor

6196

Carey Hand Funeral Home

Name of deceased Jack Maynard Burdett
 Date of Death Sept 24 1981 12 30 M P
 Cause of death meningitis
 Place of Death O. G. St. M
 Residence 1992 154 ave Winter Park
 Age 1 Y'rs 2 Mo's 3 Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Grave
 Date Sun Sept- 27 1981 4 30 P.M.
 Account charged Warren Burdett
 Address 1992 154 ave Winter Park
 Account guaranteed _____
 Address _____
 Embalming + Dressing 25.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 3-0 H. Plush 65.00
 Casket with Copper Lin. ☒
 Style of Casket Oct Couch -
 No. of Casket 107 Tampa
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Short
 Pillow Set yes
 Name Plate ☒
 Cemetery Winter Park
 Section Blk- 24 Lot D

 I Other Graves _____
 X Grave on this date _____



 Cremation _____
 Single Grave _____
 Opening and Closing Grave Tinfo etc 10.00
 Body Shipped to _____
 R. R. Ticket closed car 5.00
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon (2) 5.00
 Physician _____
 County or City Burial 110.00
 Automobiles _____
 Baggage or Express Train No. _____

6197

Carey Hand Funeral Home

Name of deceased Evelyn Fillyaw
 Date of Death Sept 27 1931 6:30 M A
 Cause of death _____
 Place of Death Res M
 Residence 642 West Can an
 Age ✓ Y'rs 2 Mo's 23 Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Grave
 Date Sun Sept-27- 1931 3.30 M P
 Account charged Joel Fillyaw
 Address 642 West Can an
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2-0 H-2. 10 00
 Casket with Copper Lin. ✓
 Style of Casket Sgt
 No. of Casket _____
 Outside Box 11-19
 Shipping Case or Vault _____
 Handles Small
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N S
 W
 Cremation _____
 Single Grave Baby Grave 2 50
 Opening and Closing Grave 2 00
 Body Shipped to _____
 R. R. Ticket auto 3 00
 Cash advanced _____
 Telegram _____
 Minister Norton
 Casket Wagon _____
 Physician J. Redding - Sinclair
 County or City Burial 17 50
 Automobiles _____
 Baggage or Express, Train No. _____
People Very Poor
Probably Chg & City
14 00

6198

Carey Hand Funeral Home

Name of deceased Chas R. Lush
 Date of Death 192 M
 Cause of death Suicide Shot his Head off
 Place of Death Nez M
 Residence Cocoa
 Age _____ Y's _____ Mo's _____ Days _____
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 192 _____ M
 Account charged _____
 Address _____
 Account guaranteed _____
 Address _____
 Embalming Cremation 50 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket State
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Body arrived by
 Outside Box Auto 10 30 A M
 Shipping Case or Vault Sun - 9-27-31
 Handles _____
 Pillow Set Body cremated
 Name Plate 11-A.M. Mon - 9-28-31
 Cemetery _____
 Section _____ Lot _____
Copper can E
 I Other Graves N S
 X Grave on this date W
will call Fri
 Cremation 10-4-31-
 Single Grave Exposed to
 Opening and Closing Grave Billie + Son
 Body Shipped to 7.15
 R. R. Ticket 1807 - 24 State St
 Cash advanced Milwaukee Wis
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

50 00

6199

Carey Hand Funeral Home

Name of deceased Mildred Brown
Date of Death Sept 26 1923 M
Cause of death Asthma
Place of Death Per. M
Residence Miami Fla
Age _____ Y's _____ Mo's _____ Days _____
Weight _____ Height, _____ ft. _____ in. Eyes _____
Funeral at _____
Date _____ 1923 M
Account charged W. L. Philbrick
Address 712 Miami Fla
Account guaranteed _____
Address _____
Embalming Cremation 50 00
Robe, Suit, Dress _____
Underwear and Hose _____
Casket Flat Top
Casket with Copper Lin. _____
Style of Casket Body covered
No. of Casket train 91-4
Outside Box Express Sun
Shipping Case or Vault Sept 27-31
Handles _____
Pillow Set Body cremated
Name Plate 11-A.M. Mon
Cemetery Sept-28-31
Section _____ Lot _____
E
I Other Graves _____
X Grave on this date _____
N S
W
Cremation Vault Returned to
Single Grave Philbrick Flat
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. _____

50 00

6200

Carey Hand Funeral Home

Name of deceased

Date of Death

Cause of death

Place of Death

Residence

Age

29 Y'rs

Mo's

29 Days

Weight

170

Height,

5

ft.

9

in.

Eyes

Funeral at

Date

Thurs - Oct - 7 -

1931

8 P M

Account charged

Address

634

N. Orange

Account guaranteed

Address

Embalming

Dressing

Robe, Suit, Dress

Underwear and Hose

Casket

6-3

Sole for Doe

Casket with Copper Lin.

Style of Casket

Oct-3-P.T

No. of Casket

1401-

S-

Outside Box

Reg

Shipping Case or Vault

Handles

Ext 3 ft Fin

Pillow Set

yes

Name Plate

at Rest

Cemetery

Section

Lot

E

I Other Graves

X Grave on this date

N

S

W

Cremation

Single Grave

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Express

Telegram

Minister

Rev Sutton

Casket Wagon

(2)

Physician

Dr. Hanner

County or City Burial

Automobiles

Baggage or Express Train No.

76

Thurs Night 10-7-31

Shot by Cooper at his

Res in Winter Garden

Sunday-Night

35	00
23	00
2	00
150	00

29	00	4
7	04	
290	06	

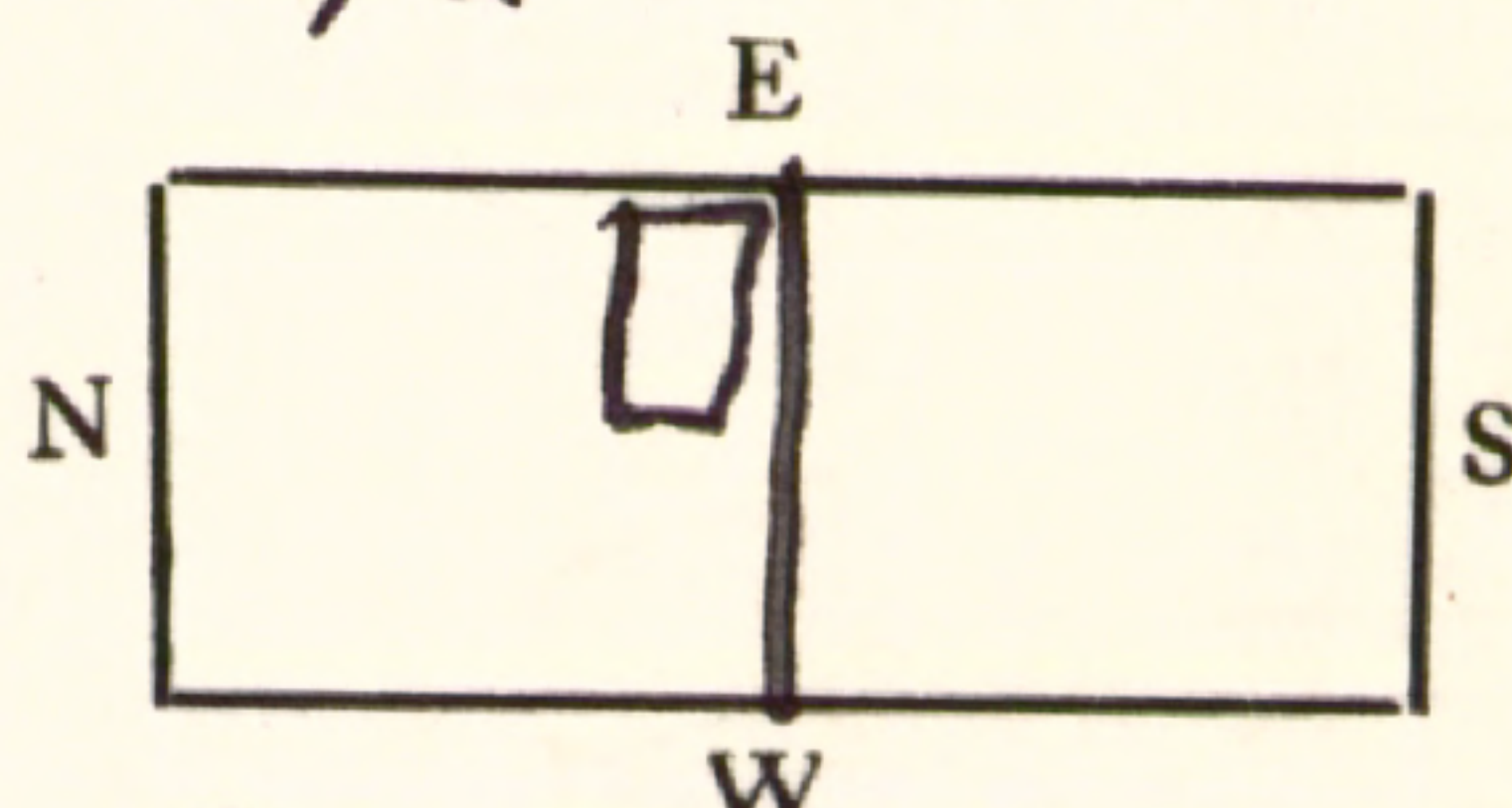
6201

Carey Hand Funeral Home

Name of deceased *Laura Beall*
 Date of Death *Mon. 9-28* 192*1* - *a* M
 Cause of death *Res -*
 Place of Death *Res -* M
 Residence *1836 Woodward ave*
 Age *51* Y'rs *3* Mo's *20* Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Sept 29* 192*1* *4 P. M.*
 Account charged *F. A. Beal*
 Address *1836 Woodward ave*
 Account guaranteed _____
 Address _____
 Embalming & Dressing *35.00*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6/3 Grey Cope* *125.00*
 Casket with Copper Lin. _____
 Style of Casket *Oct 3 P. Top*
 No. of Casket *1402*
 Outside Box *Reg*
 Shipping Case or Vault _____
 Handles *Ext -*
 Pillow Set *yes*
 Name Plate *at Rest*
 Cemetery *Greenwood*
 Section *2A 4 1/2* Lot *10*

I Other Graves

X Grave on this date

Cremation *B. Lot* *25.00*

Single Grave

Opening and Closing Grave *etc* *10.00*Body Shipped to *Family Car* *5.00*R. R. Ticket *P. B. Car* *5.00*Cash advanced *minister*Telegram *C. Wagner* *5.00*Minister *Rev Gambrail*

Casket Wagon

Physician *L. H. Day*

County or City Burial

Automobiles *875* *15.00*

Baggage or Express Train No.

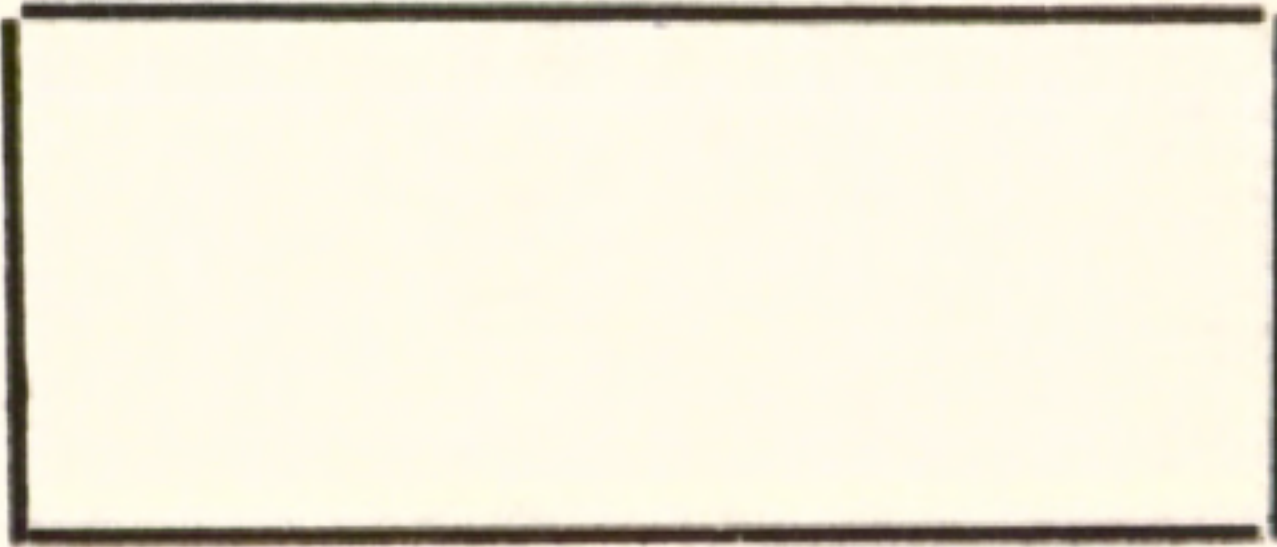
\$225.00

Wages for A. B. Johnson
Electric Co

Colored

6202

Carey Hand Funeral Home

Name of deceased Hattie Griffin
Date of Death Sept 23 1923 11 P M
Cause of death Carbuckle on neck
Place of Death Res M
Residence 1035 America St
Age 33 Y'rs 5 Mo's 25 Days
Weight _____ Height, _____ ft. _____ in. Eyes _____
Funeral at Yuma
Date Sept 24 1923 M
Account charged City
Address _____
Account guaranteed _____
Address _____
Embalming _____
Robe, Suit, Dress _____
Underwear and Hose _____
Casket Coffin & Box 14 00
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 _____
N  S
W
Cremation _____
Single Grave _____
Opening and Closing Grave _____
Body Shipped to _____
R. R. Ticket _____
Cash advanced _____
Telegram _____
Minister _____
Casket Wagon _____
Physician Dr. Hankins
County or City Burial _____
Automobiles _____
Baggage or Express Train No. _____

14 00

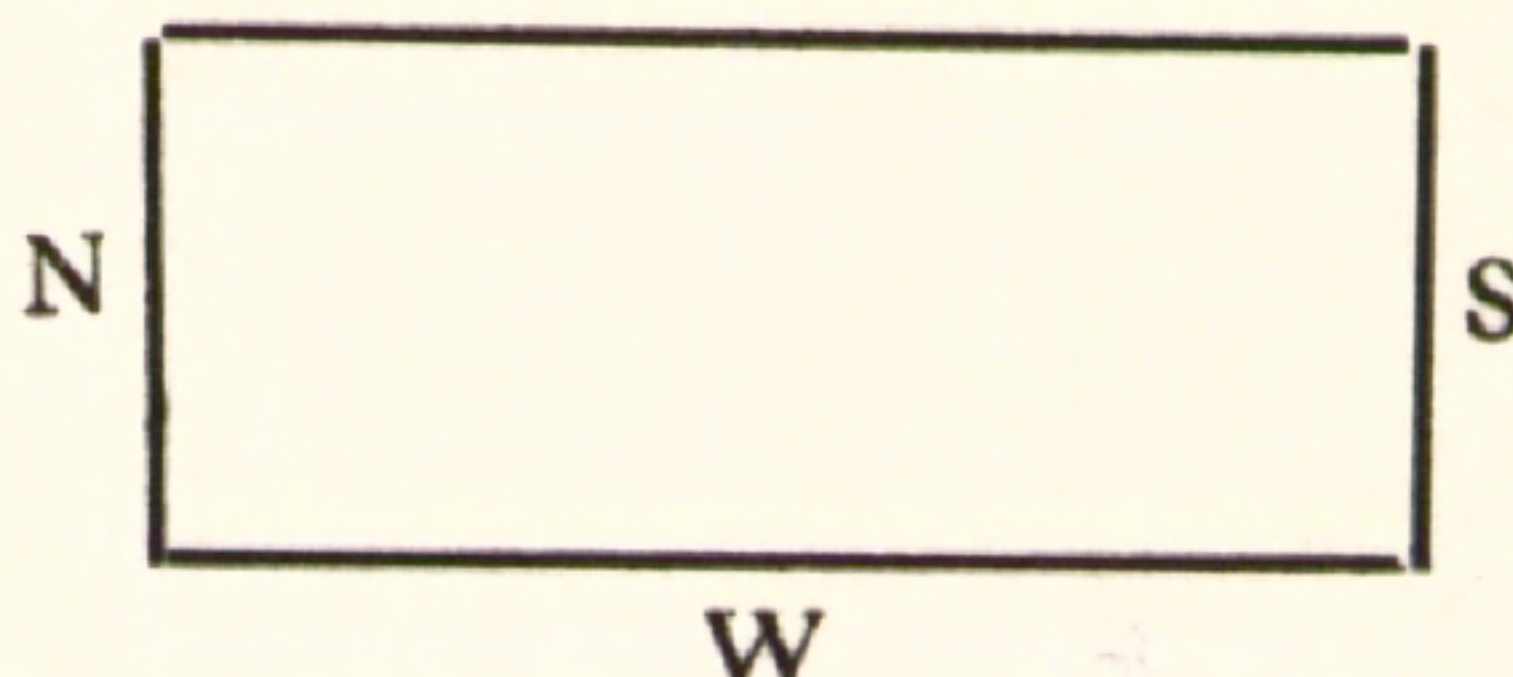
6203

Carey Hand Funeral Home

Name of deceased Richard E. Anderson
 Date of Death Sept 30th 1931 2:25 A M
 Cause of death Scarlet Fever
 Place of Death Res M
 Residence 546 Piedmont St
 Age 17 Y'rs — Mo's 29 Days 29
 Weight 170 Height, 6 ft. 0 in. Eyes
 Funeral at Chapel
 Date Oct 1st 1931 4 P. M
 Account charged David E. Anderson
 Address 546 Piedmont St
 Account guaranteed Insman
 Address
 Embalming + Dressing 35.00
 Robe, Suit, Dress tie 1.50
 Underwear and Hose ✓
 Casket 6-3- Metal 375.00
 Casket with Copper Lin. Inner
 Style of Casket State N. C.
 No. of Casket 1401- Batesville
 Outside Box 17-29
 Shipping Case or Vault ✓
 Handles Ext-
 Pillow Set yes
 Name Plate Name & Date 1914
 Cemetery Restland
 Section Lot
 E

I Other Graves

X Grave on this date



Cremation

Single Grave

Opening and Closing Grave

Body Shipped to Lebanon, Ind.R. R. Ticket (3)Cash advanced SeeTelegram (1)Minister Meacham & BookhartCasket Wagon (2)Physician F. H. Harms

County or City Burial

Automobiles

Baggage or Express Train No. 76Thurs. Night Oct-1-31-114.87
18.90

10.00

555.27

6204 Carry Hand Funeral Home

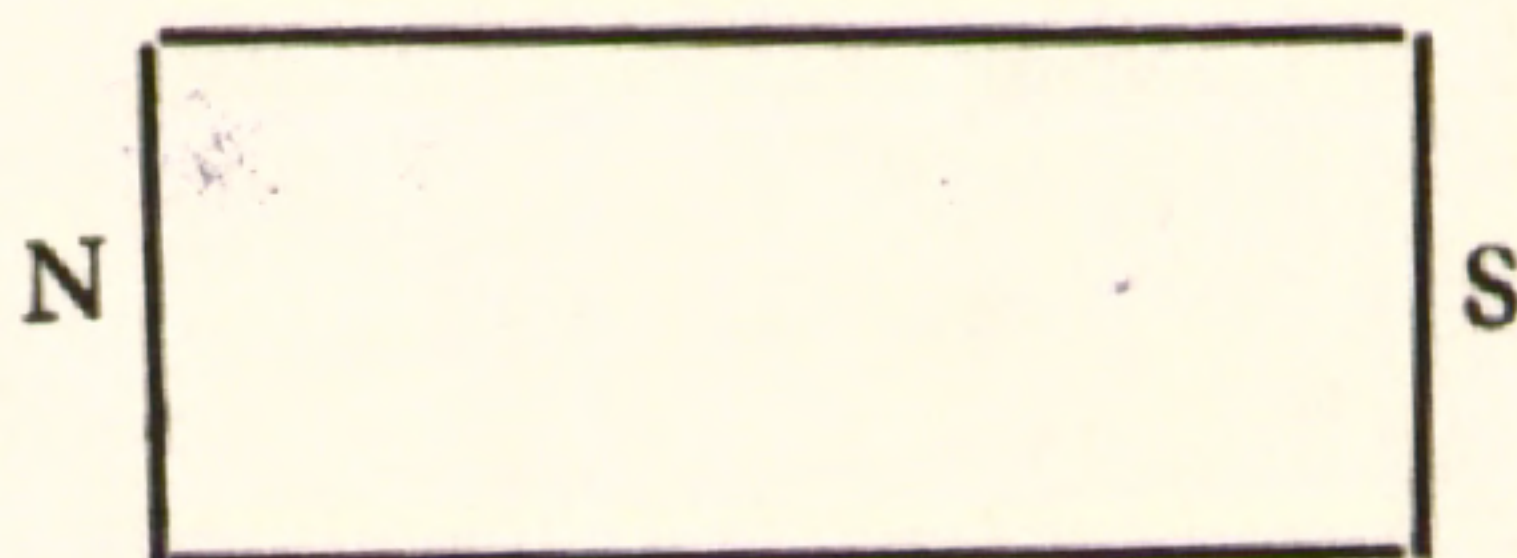
Name of deceased Robt Morris Zugler
 Date of Death Sept 30 1921 5:30 P. M.
 Cause of death Insufficiency of Kidneys
 Place of Death Res - M
 Residence 1321 N. Fern Creek
 Age 53 Y'rs 9 Mo's 24 Days
 Weight 160 Height, 5 ft. 8 in. Eyes
 Funeral at best

Date _____ 1921 M
 Account charged Mrs Grace J. Rickett
 Address 1321 N Fern Creek ave
 Account guaranteed Estate

Address _____
 Embalming + Dressing 35 00
 Robe, Suit, Dress P. Socks 15 00
 Underwear and Hose ✓
 Casket 6-3-Gr Bnd-C- 300 00
 Casket with Copper Lin. ✓
 Style of Casket R. Ca State
 No. of Casket 1548
 Outside Box R-9
 Shipping Case or Vault ✓
 Handles Ext - D. O. Seal
 Pillow Set yes
 Name Plate Name + Date
 Cemetery best
 Section _____ Lot _____
 E

I Other Graves

X Grave on this date



Cremation Wm O Patton 7.25

Single Grave 621 N-15 St

Opening and Closing Grave

Body Shipped to Philadelphia Pa

R. R. Ticket Express collect

Cash advanced ✓

Telegram 1

Minister

Casket Wagon (2)

Physician Dr Butler

County or City Burial

Automobiles

Baggage or Express Train No. 76

Thursday Night Oct 1-31

22
 10 00
 346 47

6205 Carey Hand Funeral Home

Name of deceased James Hentley
 Date of Death Oct-1- 1931- A M
 Cause of death Rabies
 Place of Death Fla Sant- M
 Residence Eustis Fla
 Age 64 Y'rs Mo's _____ Days _____
 Weight 170 Height, 5 ft. 8 in. Eyes _____
 Funeral at _____
 Date _____ 1932 M
 Account charged J. C. Spooner
 Address Eustis Fla
 Account guaranteed _____
 Address _____
 Embalming Y ~~N~~ 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Mr Spooner
 Style of Casket Eustis came
 No. of Casket for Body
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N S
 W
 Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon 11 5.00
 Physician _____
 County or City Burial 35.00
 Automobiles _____
 Baggage or Express Train No. _____

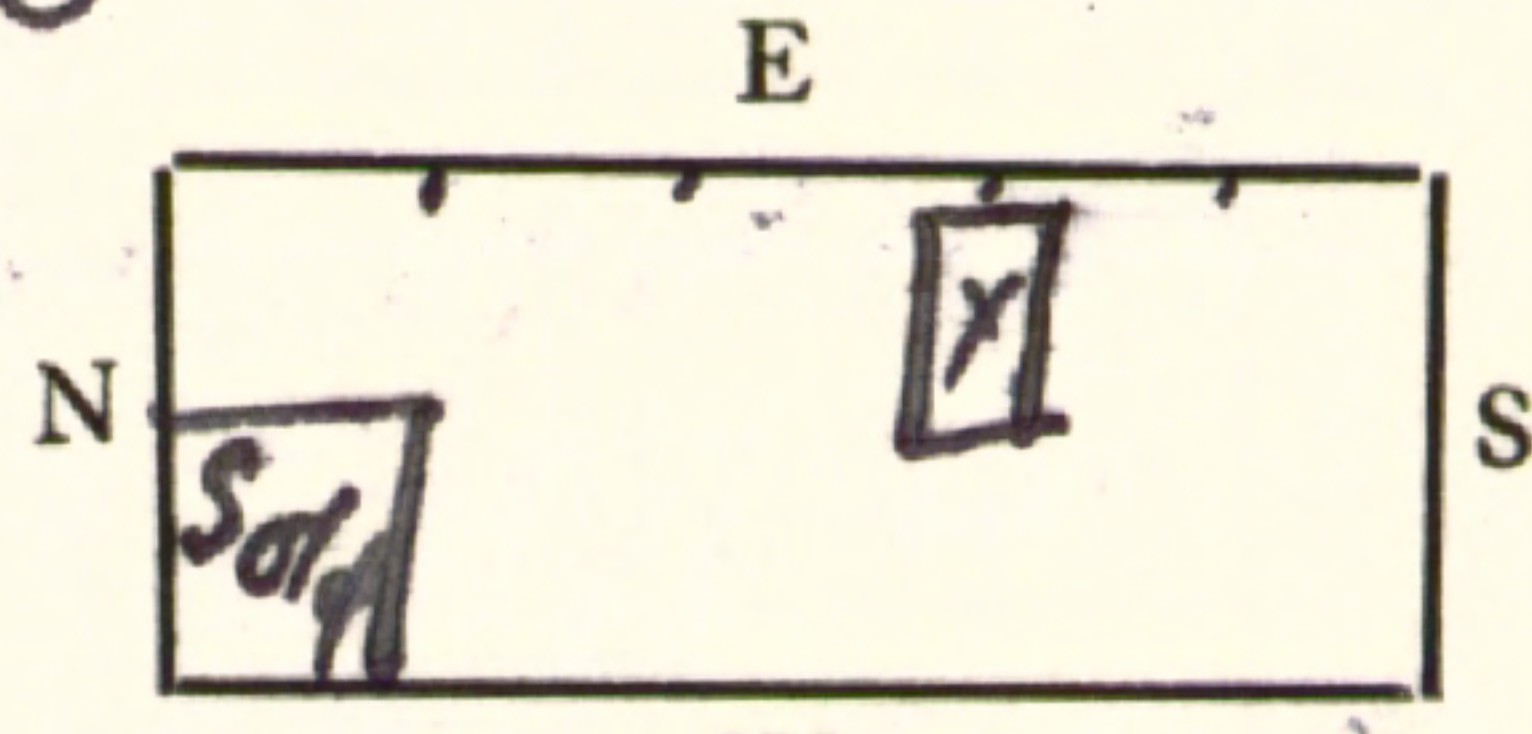
6206 Carey Hand Funeral Home

Name of deceased Dr. Cecil Butt
 Date of Death Oct-1- 1931- 3:45 M A
 Cause of death Intestinal Nephritis
 Place of Death Res M
 Residence Hold ave Lake Holden
 Age 41 Y's 6 Mo's Days
 Weight 90 Height, 5 ft. 4 in. Eyes
 Funeral at Esop Church -
 Date Oct-2- 1931- 3-P. M
 Account charged Mrs Dr Cecil Butt
 Address Belando- Holden ave
 Account guaranteed Estate

Address
 Embalming & Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 5-9- br cup. 125.00
 Casket with Copper Lin. ✓
 Style of Casket Oct- 3-P. 7
 No. of Casket 1402- S -
 Outside Box R+9
 Shipping Case or Vault ✓
 Handles Short Ext Ends
 Pillow Set yes
 Name Plate at Rest
 Cemetery Greenwood
 Section B Lot 93

Less one grave
N.W. Cor

I Other Graves McKenzie
 X Grave on this date



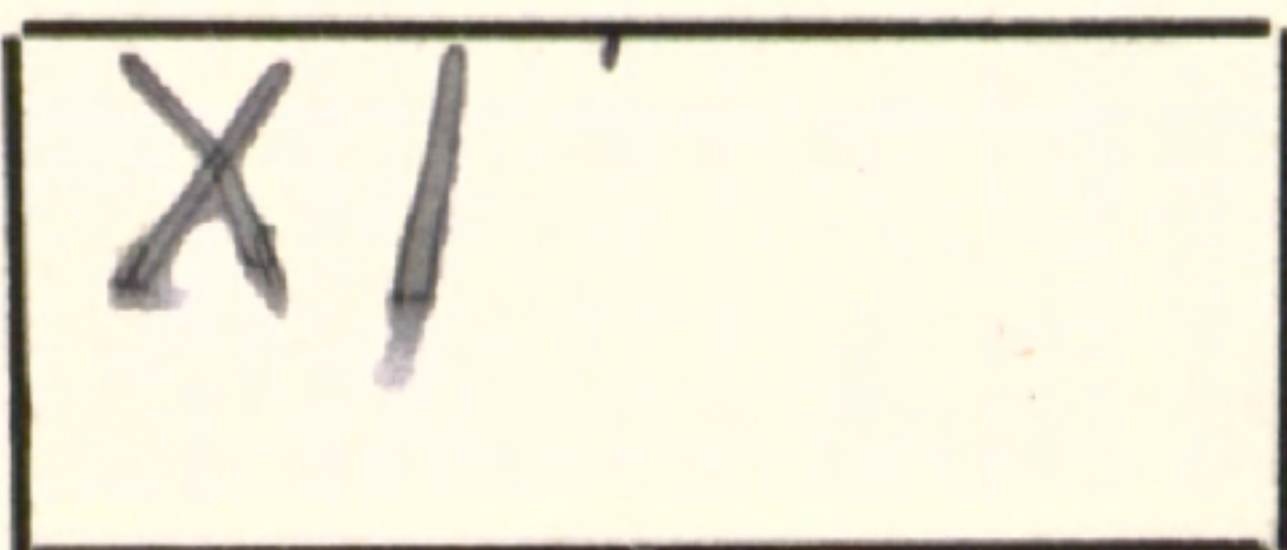
Cremation Burial Lot 40.00
 Single Grave
 Opening and Closing Grave T. & S. 10.00
 Body Shipped to Car Minn 5.00
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Dean Johnson 5.00
 Casket Wagon (1)
 Physician Dr Childs
 County or City Burial
 Automobiles S & S 15.00
 Baggage or Express Train No. 2 35.00
Sept-7- amb 35.50
272.50

6207 Carey Hand Funeral Home

Name of deceased Mrs Clara Burns
Date of Death Oct-3- 1931 530 M P
Cause of death Epithelioma - inside
Place of Death Home again
Residence 526 N. Magnolia
Age Y'rs Mo's Days
Weight 90 Height, 5 ft. 6 in. Eyes
Funeral at Chapel
Date Mon Oct-5- 1931 230 M P
Account charged Hilbert Burns
Address 526 N Magnolia ave
Account guaranteed Estate & Ins
Address
Embalming & Dressing 35.00
Robe, Suit, Dress
Underwear and Hose
Casket 6-3 Dr. Gr Plunk 235.00
Casket with Copper Lin.
Style of Casket Oct 1/2 Couch
No. of Casket 1922-
Outside Box
Shipping Case or Vault eni Seal 150.00
Handles Eni -
Pillow Set yes Lt Pl
Name Plate
Cemetery Oak Hill
Section D - Lot 15
E
I Other Graves
X Grave on this date
Cremation Tent & Dr.
Single Grave Del - Box & Tu 5.00
Opening and Closing Grave 5.00
Body Shipped to Nurse
R. R. Ticket
Cash advanced
Telegram
Minister Deem Johnson 5.00
Casket Wagon (1)
Physician Dr. Ridding
County or City Burial
Automobiles S & S- 15.00
Baggage or Express Train No. 450.00
Cash advance 40.00
\$490.00

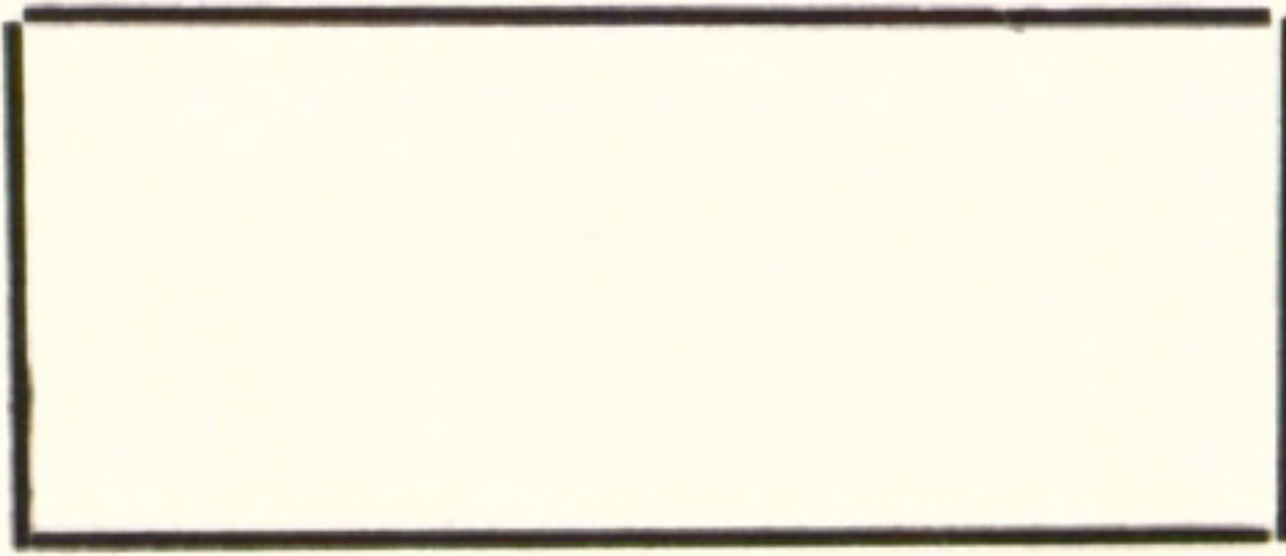
6208

Carey Hand Funeral Home

Name of deceased Mrs Lucy Clara Johnson
 Date of Death Oct - 6 1931 - 2 A M
 Cause of death Pulmonary Tuberculosis
 Place of Death Res M
 Residence 1907 E. Weber ave
 Age about 42 Y'rs Mo's Days
 Weight 20 Height, 5 ft. 5 in. Eyes
 Funeral at Chapel
 Date Wed - Oct - 7 - 1931 - 4-P. M
 Account charged Jarrott H. Eulank Belk
 Address 1907 E. Weber ave
 Account guaranteed Insurance
 Address First Nat Bank -
 Embalming + Dressing 35.00
 Robe, Suit, Dress White 12.50
 Underwear and Hose White
 Casket 5-9- Bug-Cope 65.00
 Casket with Copper Lin. -
 Style of Casket Spr
 No. of Casket 72 - 7
 Outside Box Reg
 Shipping Case or Vault -
 Handles Ext Ends
 Pillow Set -
 Name Plate at Rest
 Cemetery Greenwood
 Section P Lot 21
 E
 I Other Graves
 X Grave on this date
 N  S
 W
 Cremation
 Single Grave White 10.00
 Opening and Closing Grave S. Box
 Body Shipped to -
 R. R. Ticket -
 Cash advanced -
 Telegram -
 Minister Lutton 5.00
 Casket Wagon (1)
 Physician Dr. Hanner
 County or City Burial -
 Automobiles S & S 15.00
 Baggage or Express Train No. 147.50
People Very Poor 142.50

6209

Carey Hand Funeral Home

Name of deceased *Mrs Gulade & Christy*
Date of Death *Oct - 2* 193*1* M
Cause of death *Chc Intentional Nephritis*
Place of Death *Res* M
Residence *Bradenton Fla*
Age *72* Y'rs *9* Mo's *2* Days
Weight _____ Height, _____ ft. _____ in. Eyes _____
Funeral at _____
Date _____ 192 _____ M
Account charged *A. P. Turner*
Address *F. D. Bradenton Fla*
Account guaranteed _____
Address _____
Embalming *Cremation* 50 00
Robe, Suit, Dress _____
Underwear and Hose _____
Casket *Body arrived*
Casket with Copper Lin. *145 a m*
Style of Casket *trans 26 -*
No. of Casket *by express*
Outside Box *10-6-31*
Shipping Case or Vault _____
Handles *Body cremated*
Pillow Set *True Oct - 6 - 31*
Name Plate *9-A A*
Cemetery _____
Section _____ Lot _____
coffin case E
I Other Graves _____ N  S
X Grave on this date *will call for* W
Cremation _____
Single Grave _____
Opening and Closing Grave _____
Body Shipped to _____
R. R. Ticket _____
Cash advanced _____
Telegram _____
Minister _____
Casket Wagon _____
Physician _____
County or City Burial 50 00
Automobiles _____
Baggage or Express Train No. _____

6210

Carey Hand Funeral Home

Name of deceased *Mrs. Francis A. Doyle*
 Date of Death *Oct - 4* 19*31* M
 Cause of death *Thrombosis Coronary Artery*
 Place of Death *Kissimmee* M
 Residence _____
 Age *86* Y'rs Mo's *17* Days _____
 Weight *135* Height; *5* ft. *6* in. Eyes *blue*
 Funeral at *Kissimmee*
 Date _____ 192*1* M
 Account charged *Guissom Funeral Home*
 Address *Kissimmee Fla*
 Account guaranteed *OK*
 Address _____
 Embalming *Cremation* *50 00*
 Robe, Suit, Dress _____
 Underwear and Hose *Body covered*
 Casket *by order 9-A.M.*
 Casket with Copper Lin. *Oct - 6 - 1931*
 Style of Casket _____
 No. of Casket *Body cremated*
 Outside Box *Oct - 6 - 9:30 A.M.*
 Shipping Case or Vault _____
 Handles _____
 Pillow Set *Ashes Expressed*
 Name Plate *to Guissom*
 Cemetery *Funeral Home*
 Section *Kissimmee* Lot *Fla*
Thurs Oct - 8 - 31 - E
 I Other Graves _____
 X Grave on this date _____
Coffin Case
 Cremation _____
 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. _____

50 00

6211

Carey Hand Funeral Home

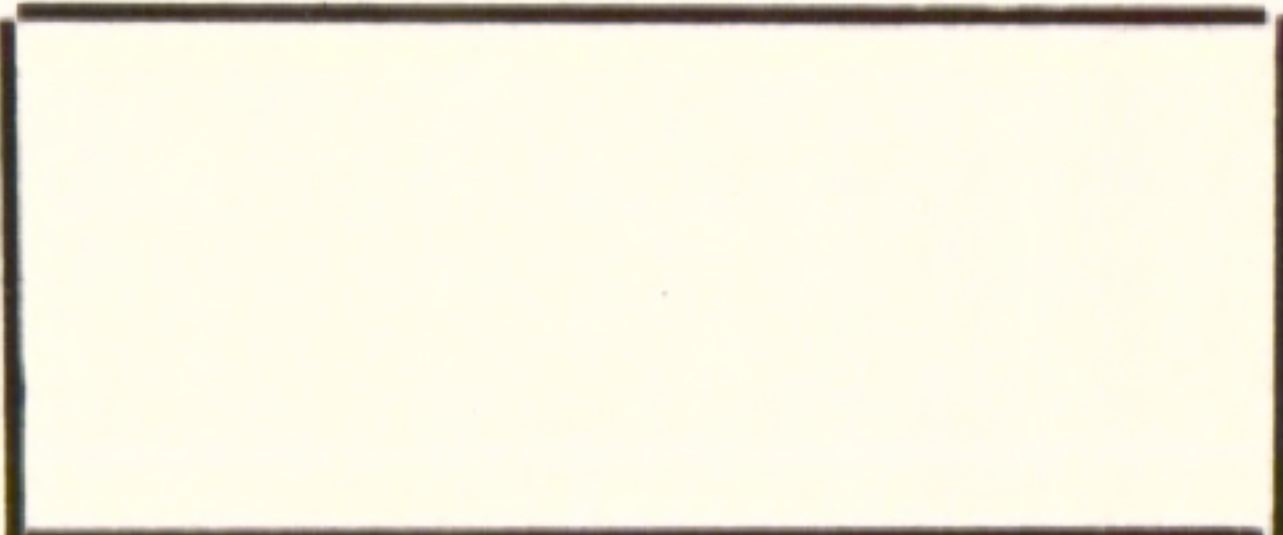
Name of deceased *Miss Math Josephine Wallace*
 Date of Death *Oct - 6* 19*31* *a* M
 Cause of death *Hydro percardium*
 Place of Death *Res* M
 Residence *Lake Wales*
 Age *68* Y'rs Mo's Days
 Weight *140* Height, *5* ft. *6* in. Eyes *Brown*
 Funeral at *Lake Wales*
 Date *Oct-6-31* 19*2* *P* M
 Account charged *Mrs W L Springer*
 Address *Lake Wales Fla*
 Account guaranteed *Cash*
 Address
 Embalming *Cremation*
 Robe, Suit, Dress
 Underwear and Hose *Eng Lin*
 Casket *brass - 120*
 Casket with Copper Lin.
 Style of Casket *Body covered*
 No. of Casket *4* *acute*
 Outside Box *630 P M*
 Shipping Case or Vault *Tues 10-6-31*
 Handles *Body cremated*
 Pillow Set *7 P M*
 Name Plate *Oct 6-31*
 Cemetery
 Section *Coffin Can* Lot *E*
 I Other Graves
 X Grave on this date
 Cremation *will call for ashes*
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Del to Mrs Springer*
 R. R. Ticket *the sister*
 Cash advanced *Sun 10-11-31*
 Telegram
 Minister
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

50 00

5 00

55 00

6212 Carey Hand Funeral Home

Name of deceased Mary. M. Masters
Date of Death Oct-7- 1931 10 P. M
Cause of death Cerebral Hemorrhage
Place of Death Res M
Residence 713 Park Lake ave
Age 76 Y'rs 6 Mo's 7 Days
Weight 125 Height, 5 ft. 6 in. Eyes
Funeral at Chapel
Date Sat-Oct-10- 1931 9 A M
Account charged J. F. Sutter
Address 713 Park Lake ave
Account guaranteed Estate
Address
Embalming + Dressing 3500
Robe, Suit, Dress ✓
Underwear and Hose ✓
Casket 6-3 br brd-e. 30000
Casket with Copper Lin. ✓
Style of Casket R. Cu Slat
No. of Casket 6008 3-
Outside Box Reg
Shipping Case or Vault ✓
Handles Ext 054 Tin
Pillow Set yes
Name Plate Name + Date 1855
Cemetery Leest
Section _____ Lot _____
E
I Other Graves
X Grave on this date
N  S
W
Cremation del Bur Tent + set 2500
Single Grave
Opening and Closing Grave Old Hickory
Body Shipped to Green Cove Springs
R. R. Ticket
Cash advanced to Sexton at Green Cove 600
Telegram
Minister Rev Boyd 500
Casket Wagon (1)
Physician Dr. Hanner
County or City Burial 5000
Automobiles S & S -
Baggage or Express Train No. 4 2100

6213

Carey Hand Funeral Home

Edmond

Name of deceased Leg HawkinsDate of Death Oct - 1 1921 - 11 P MCause of death Blow on Head with axPlace of Death 512 W. FairResidence 512 W. Fair

Age _____ Y's _____ Mo's _____ Days _____

Weight _____ Height, _____ ft. _____ in. Eyes _____

Funeral at _____

Date _____ 192 _____ M

Account charged City

Address _____

Account guaranteed _____

Address _____

Embalming _____

Robe, Suit, Dress _____

Underwear and Hose _____

Casket 6-3 Coffin & B4 14 00

Casket with Copper Lin _____

Style of Casket _____

No. of Casket _____

Outside Box _____

Shipping Case or Vault _____

Handles _____

Pillow Set _____

Name Plate _____

Cemetery County Home

Section _____ Lot _____

E

I Other Graves

X Grave on this date

N

S

W

Cremation _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician Judge Cox

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

14 00

6214

Carey Hand Funeral Home

Name of deceased Mr. Wm. T. Rencher
 Date of Death Sat - Oct 10 1931 - 4 30 P M
 Cause of death _____
 Place of Death Fla Sant M
 Residence Apofka
 Age 71 Y'rs 4 Mo's 10 Days
 Weight 170 Height, 5 ft. 7 in. Eyes _____
 Funeral at Chapel
 Date Sun Oct 11 1931 - 3 P M
 Account charged Mr. Wm. T. Rencher
 Address Apofka
 Account guaranteed Estate
 Address _____
 Embalming + Dressing 35 00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Gr Bnd C- 285 00
 Casket with Copper Lin. ☒
 Style of Casket Oct - 1/2 Couch
 No. of Casket 2638 1/2
 Outside Box ☒
 Shipping Case or Vault air seal 150 00
 Handles Ext O Sil Fin
 Pillow Set yes bund
 Name Plate ☒
 Cemetery Apofka
 Section _____ Lot _____

E

I Other Graves

X Grave on this date

N

S

W

Cremation

(2) Cars10 00

Single Grave

Opening and Closing Grave T & D10 00

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister Hilbur Summers ParkerCasket Wagon (1)5 00Physician Dr. Burk-

County or City Burial _____

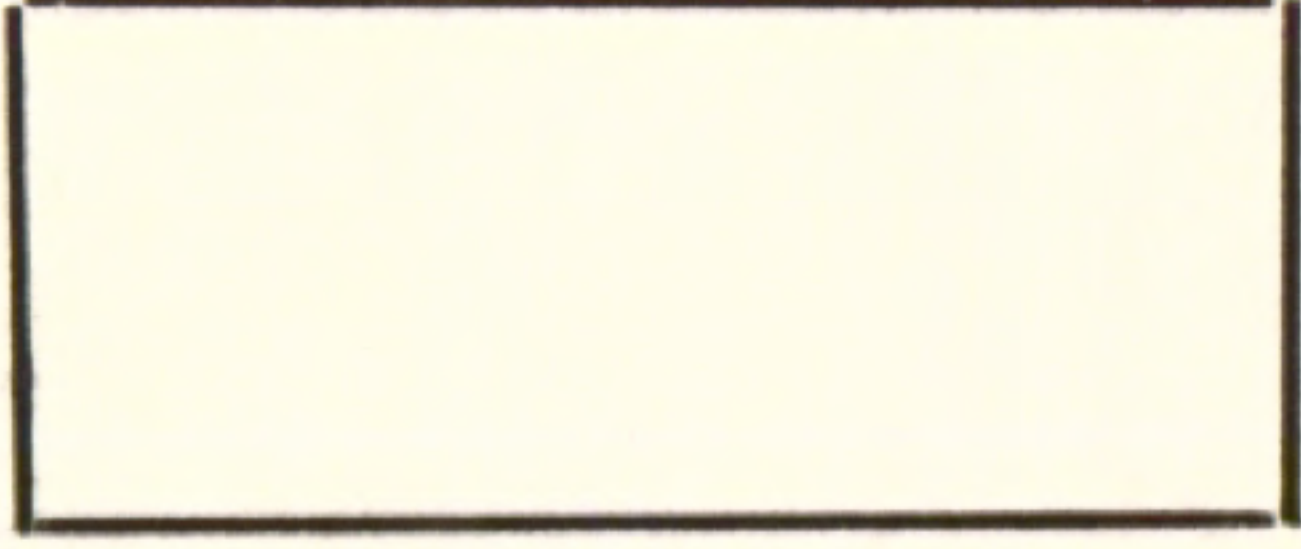
Automobiles S & S-20 00

Baggage or Express Train No. _____

515 00

was struck by a car # 92 - at
Winter Park Sta Sat-10-10-31
taken to Fla Sant by ambulance

6215 Carey Hand Funeral Home

Name of deceased Anna E. Smith
Date of Death Sat Oct 10 1931 5:15 P^M
Cause of death Cancer in pelvis from Cancer
Place of Death 414 Sant
Residence East Hunter Park Rd M of Breast
Age 64 Y's 3 Mo's _____ Days _____
Weight 125 Height, 5 ft. 6 in. Eyes _____
Funeral at Chapel
Date Wed Oct 14 1931 4 P.^M
Account charged Mr Otto Smith
Address Winter Park Box 822
Account guaranteed Estate
Address _____
Embalming & Dressing 35.00
Robe, Suit, Dress White 16.00
Underwear and Hose Pa Silk hose 1.00
Casket 6-3 Gr Bid. C- 125.00
Casket with Copper Lin. ✓
Style of Casket Oct O.T. N P.
No. of Casket S-1418-
Outside Box ✓
Shipping Case or Vault ✓
Handles Ext -
Pillow Set yes
Name Plate ✓
Cemetery Cremation 50.00
Section _____ Lot _____
E
I Other Graves _____
X Grave on this date Coffee can 
Cremation Name & Date Engraved 50.00
Single Grave Music
Opening and Closing Grave _____
Body Shipped to Body cremated
R. R. Ticket Thurs. Oct-18-31
Cash advanced 9 A.M. 21
Telegram will call for ashes
Minister Rev Byrd 50.00
Casket Wagon (1)
Physician L L Andrews
County or City Burial \$232.00
Automobiles _____
Baggage or Express Train No. _____
Eastern Star Service
in Chapel

6216

Carey Hand Funeral Home

Name of deceased *Infant of Jas. A. Crane*
 Date of Death *Sun Oct 11 1921* *3:15 P* M
 Cause of death _____
 Place of Death *Res -* M
 Residence *1111 Park Lake Ave*
 Age *1* Y'rs *1* Mo's _____ Days _____
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at *Chapel -*
 Date *Oct 12th* 1921 *P.* M
 Account charged *Jas. A. Crane*
 Address *1111 Park Lake Ave*
 Account guaranteed *Cash*
 Address _____

Embalming _____

Robe, Suit, Dress _____

Underwear and Hose _____

Casket *2/0 W. L. S.*

13.00

Casket with Copper Lin. _____

Style of Casket _____

No. of Casket _____

Outside Box _____

Shipping Case or Vault _____

Handles _____

Pillow Set _____

Name Plate _____

Cemetery *Greenwood*

Section _____ Lot _____

E

I Other Graves

X Grave on this date

N

S

W

Cremation *Baby Grave*

2.50

Single Grave _____

Opening and Closing Grave *etc*

2.00

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician *Lt. Bear Hall*

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

\$17.50

6217

Carey Hand Funeral Home

Name of deceased Wilson L. Spear
 Date of Death Mon Oct 12 1923 1130 MA
 Cause of death Organic heart disease
 Place of Death Federal Bldg M
 Residence 630 West Church st
 Age 61 Y'rs 1 Mo's 12 Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Oct 15 1923 3P M
 Account charged Mrs. Wilson L. Spear
 Address 630 W Church St
 Account guaranteed Insurance
 Address _____
 Embalming + Dressing
 Robe, Suit, Dress Bls.
 Underwear and Hose _____
 Casket 5-9-34 br Doe
 Casket with Copper Lin. _____
 Style of Casket Oct - 3 - P. T
 No. of Casket S-1401 -
 Outside Box Bug
 Shipping Case or Vault Built
 Handles Ext
 Pillow Set _____
 Name Plate _____
 Cemetery Conway
 Section _____ Lot _____

E

I Other Graves

X Grave on this date

N

S

W

Cremation

Single Grave

Opening and Closing Grave Del Box & ECT

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister

Casket Wagon

Physician Dr. Neal

County or City Burial

Automobiles S & S

Baggage or Express Train No.

Lab & MaterialCement Slab & Copingby Powers

35.00

25.00

2.00

150.00

12.50

10.00

2.50

5.00

15.00

55.00

35.00

29.85

29.25

6258

Carey Hand Funeral Home

Name of deceased John Coleman
 Date of Death Oct 12 19231 11 P. M
 Cause of death Ulcerative Colitis
 Place of Death C. Y. N M
 Residence Apopka Fla
 Age 1 Y'rs 10 Mo's 12 Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Home
 Date Oct 13 19231 3 P. M
 Account charged Reuben Coleman
 Address Apopka Fla
 Account guaranteed note
 Address _____
 Embalming care of body 15.00
 Robe, Suit, Dress _____ 2.50
 Underwear and Hose _____
 Casket 3-6-4 x 5- 17.50
 Casket with Copper Lin. ✓
 Style of Casket Spr - N m.
 No. of Casket ✓
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Small.
 Pillow Set ✓
 Name Plate OD
 Cemetery Apopka
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N S
 W
 Cremation Del to Cemetery
 Single Grave No Chg
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister At Apopka
 Casket Wagon _____
 Physician Dr. Asencio
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____
Consumers Lumber Co
of Apopka - will pay 25.00
60-2a Note for 10.00

35.00

6219

Carey Hand Funeral Home

Name of deceased Samuel C. Folkes
 Date of Death Oct 13 1931 12:45 a M
 Cause of death Pulmonary Tuberculosis
 Place of Death Res - M
 Residence Roberts Hotel. W. Central
 Age 56 Y'rs 6 Mo's 16 Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Oct 15th 1931 11 a. M
 Account charged Mrs S. C. Folkes
 Address Roberts Hotel - W. Cen ave
 Account guaranteed Estate Insurance
 Address _____
 Embalming & Dressing 35 00
 Robe, Suit, Dress -
 Underwear and Hose -
 Casket 6-3 Set Gr. Oak 150. 00
 Casket with Copper Lin. 4
 Style of Casket Oct 3-RT
 No. of Casket 1401
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles Ext - Spt Fin
 Pillow Set yes
 Name Plate -
 Cemetery Cremation 50 00
 Section _____ Lot _____
Copper Can E
 I Other Graves _____
 X Grave on this date _____
 Cremation Body - cremated
 Single Grave Thurs. Oct - 15 - 31
 Opening and Closing Grave 9-A.M.
 Body Shipped to Musie 5 00
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Dean Adcock 5 00
 Casket Wagon (1)
 Physician Dr. Neal
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

240 00
 25 00
 245 00

6220 **Carey Hand Funeral Home** *Cremation*

Name of deceased *Florence B. Livezey*
Date of Death *Oct 9th 1931* M
Cause of death *Carcinoma of liver*
Place of Death *W. Palm Beach* M
Residence *W. Palm Beach Fla*
Age *44* Y's *—* Mo's *—* Days *—*
Weight *100* Height, *5* ft. *7* in. Eyes *Brown*
Funeral at *W. Palm Beach*
Date *Oct* 192 *—* M
Account charged *Wells Mortuary*
Address *W. Palm Beach Fla*
Account guaranteed *—*

Address *—*
Embalming *Cremation 50 00*

Robe, Suit, Dress *—*

Underwear and Hose *—*

Casket *—*

Casket with Copper Lin. *—*

Style of Casket *Body arrived*

No. of Casket *at 1:45 P.M.*

Outside Box *Tuesday Oct*

Shipping Case or Vault *13 - 1931*

Handles *by express -*

Pillow Set *—*

Name Plate *Body Cremated*

Cemetery *Tuesday 3:30 P.M.*

Section *Oct 13th* Lot *1931*

E

I Other Graves

N

X Grave on this date

S

W

Cremation *Ashes Expressed*

Single Grave *to -*

Opening and Closing Grave *Memorial*

Body Shipped to *Park Cemetery*

R. R. Ticket *Winston 22*

Cash advanced *Oct 14 1931*

Telegram *trans 76*

Minister *—*

Casket Wagon *—*

Physician *W. W. George*

County or City Burial *—*

Automobiles *—*

Baggage or Express Train No. *—*

50 00

622/ Carey Hand Funeral Home

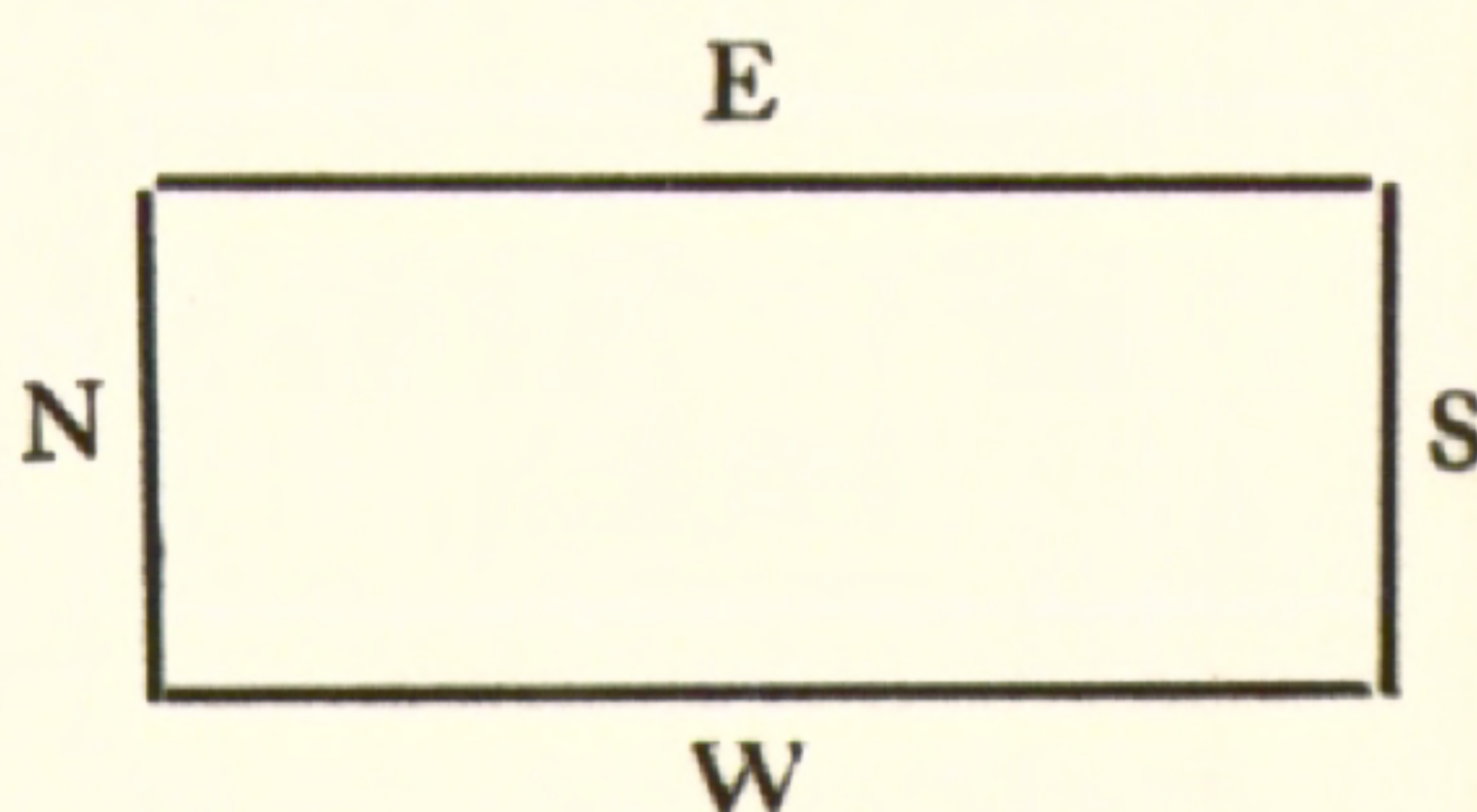
Name of deceased *Mrs Edith A. Bull*
 Date of Death *Oct 14* 192*1* P. M
 Cause of death *Cerebral Hemorrhage*
 Place of Death *Res.* M
 Residence *Winter Park*
 Age *80* Y'rs *4* Mo's *29* Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at *Res Fri Oct 16 -* *4-PM*
 Date *Fri 10-16-31* 192 *4 PM* M
 Account charged *M. & Bull*
 Address *Winter Park*
 Account guaranteed _____

Address _____
 Embalming & *Dressing* *35 00*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *No casket used*
 Casket with Copper Lin. _____
 Style of Casket *Cremation* *50 00*
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault *Body cremated*
 Handles *Sat. Oct-17-31 -*
 Pillow Set *9-A.M.*
 Name Plate *Cashes Expressed To*
 Cemetery _____
 Section _____ Lot _____

Copper Can

I Other Graves

X Grave on this date



Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon *(3)*
 Physician *Dr. Hotant*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

15 00

100 00

6222 Carey Hand Funeral Home

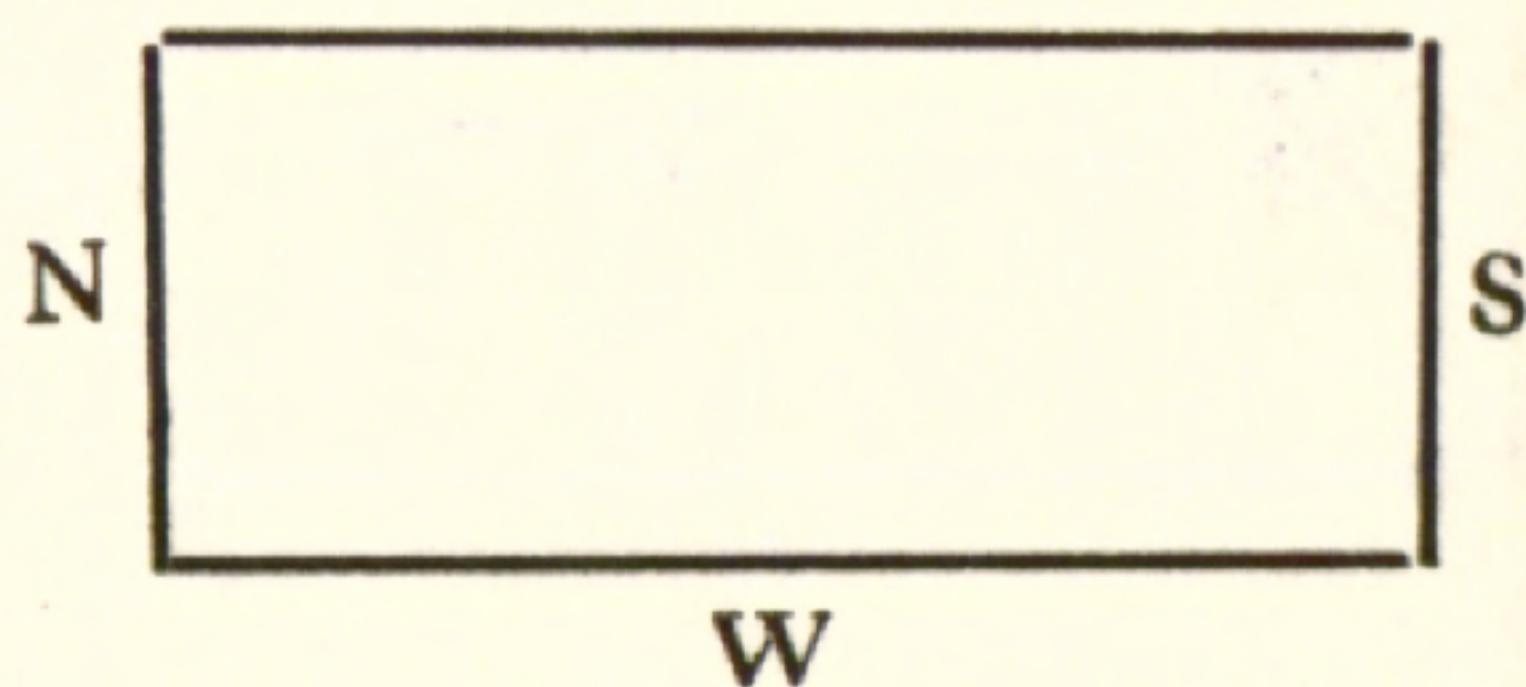
Name of deceased John A. Hudson
 Date of Death Oct. 15 1923 AM
 Cause of death Scite pneumonia
 Place of Death 711- Atlanta ave M
 Residence _____
 Age 81 Y'rs 6 Mo's 29 Days
 Weight 160 Height, 5 ft. 6 in. Eyes _____
 Funeral at Dent
 Date _____ 1923 M

Account charged _____
 Address _____
 Account guaranteed Th. & Draft
 Address _____

Embalming + Dressing
 Robe, Suit, Dress Shirt 250 Li 125
 Underwear and Hose Collar
 Casket 5-9- Grey Doe
 Casket with Copper Lin. _____
 Style of Casket Oct-3-P.T.1
 No. of Casket 1401-S-
 Outside Box R29
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate at Rest
 Cemetery Dent
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Worcester N.Y.
 R. R. Ticket (2)
 Cash advanced Pullman
 Telegram _____
 Minister _____
 Casket Wagon (2)
 Physician Dr. J.C. Howell
 County or City Burial

Automobiles _____
 Baggage or Express Train No. 92

Tri Oct-16-31

35
3
75
25
150.00

10816

10.00

307.14

7.14

\$307.00

6223 Carey Hand Funeral Home

Name of deceased Cow Emma Johnson
 Date of Death Oct-14 1931 3.25 M P
 Cause of death Cancer of uterus
 Place of Death Res P M
 Residence 1202 E. Wash
 Age 50 Y's 5 Mo's 9 Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sat- Oct-17- 1931- 3 P M
 Account charged S. J. Warner
 Address 1202 E Wash St-
 Account guaranteed Jasman
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress Lt. Blue 20.00
~~Underwear and Hose~~ 1.00
 Casket 6-3- br Plush 225.00
 Casket with Copper Lin. ✓
 Style of Casket Oct 1/2 Couch
 No. of Casket 1922- S-
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext - Lt. Blue
 Pillow Set Lt. Blue
 Name Plate _____
 Cemetery Greenwood
 Section V Lot 1
 E
 I Other Graves _____
 X Grave on this date _____
 Cremation Burial Lot 200.00
 Single Grave _____
 Opening and Closing Grave Y etc 10.00
 Body Shipped to P. B. Car 5.00
 R. R. Ticket Car Min 5.00
 Cash advanced _____
 Telegram _____
 Minister Rev Pentick 5.00
 Casket Wagon (1)
 Physician J. Edwards
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. _____
521.00

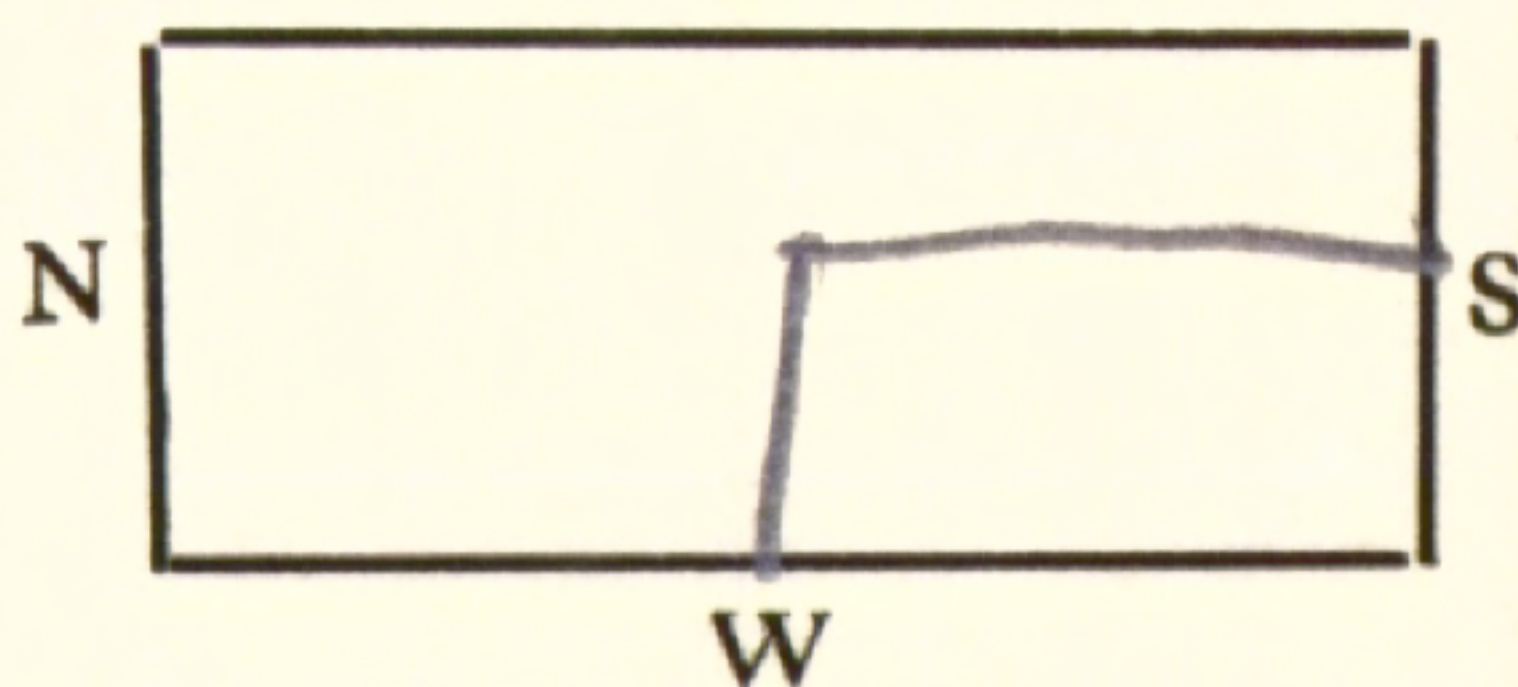
May-7-1881

6224 Carey Hand Funeral Home

Name of deceased *Bailey - Thos. W. Swanner*³⁴
 Date of Death *Oct - 20* 1923 *7 P* M
 Cause of death *Still Born*
 Place of Death *O.S.H.* M
 Residence *Apopka Fla*
 Age *✓* Y's *✓* Mo's *✓* Days *✓*
 Weight *✓* Height, *✓* ft. *✓* in. *✓* Eyes *✓*
 Funeral at *Chapel*
 Date *Oct 21st* 1923 *5:30 P* M
 Account charged *Thos. W. Swanner Jr*
 Address *Apopka Fla*
 Account guaranteed *✓*
 Address *✓*

Embalming *✓*
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *2/6 White H.M.* 12 50
 Casket with Copper Lin. *✓*
 Style of Casket *Sgt*
 No. of Casket *✓*
 Outside Box *Reg*
 Shipping Case or Vault *✓*
 Handles *✓*
 Pillow Set *✓*
 Name Plate *✓*
 Cemetery *Greenwood*
 Section *P S.W. 1/4* Lot *26*
 E

I Other Graves *✓*
 X Grave on this date *✓*



Cremation *✓*
 Single Grave *✓*
 Opening and Closing Grave *etc led by* 2 58
 Body Shipped to *✓*
 R. R. Ticket *✓*
 Cash advanced *Auto* 2 50
 Telegram *✓*
 Minister *✓*
 Casket Wagon *✓*
 Physician *Dr. Hay*
 County or City Burial *✓*
 Automobiles *✓*
 Baggage or Express Train No. *✓*

\$17.38

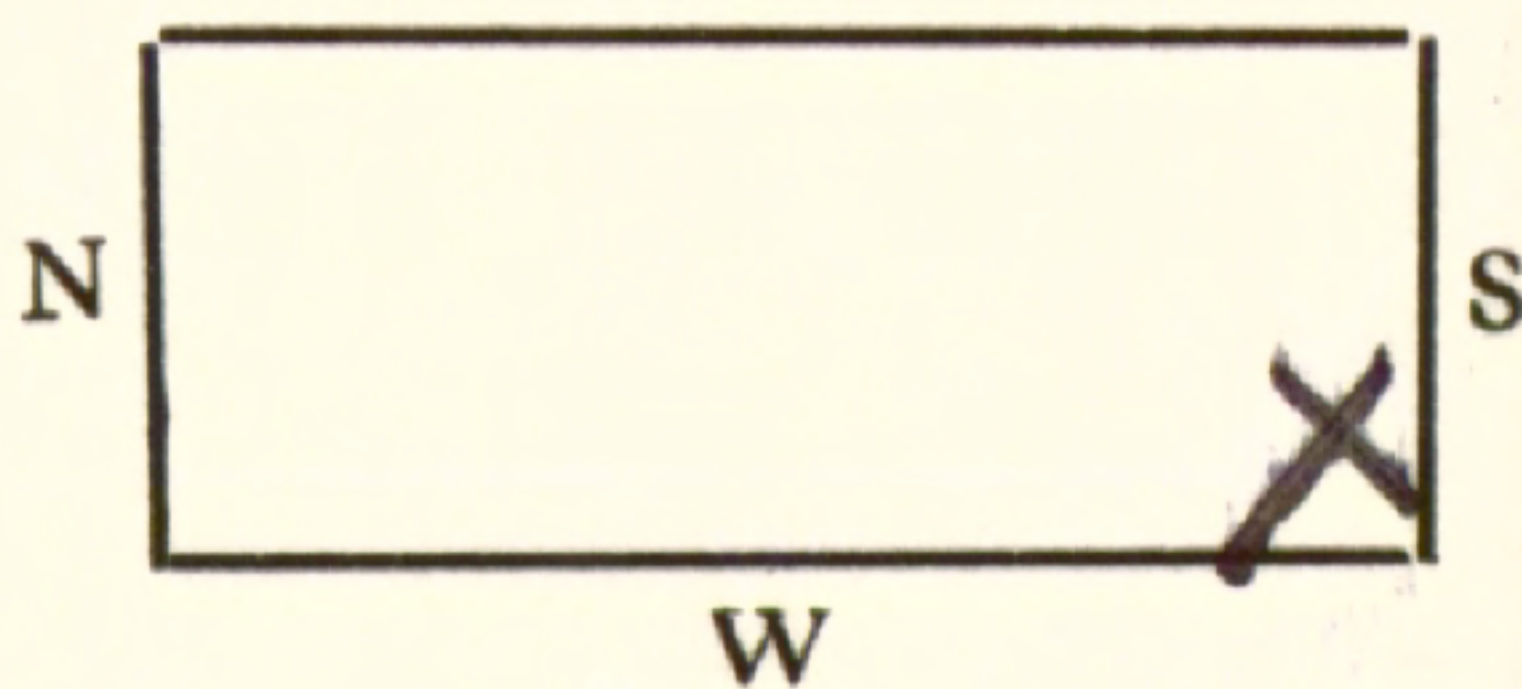
6225 Carey Hand Funeral Home

Name of deceased Mrs. Lovina Van Otter
 Date of Death Oct 20 1923 4 P M
 Cause of death Cancer of Stomach
 Place of Death Res M
 Residence Eustis Fla
 Age 88 Y's 10 Mo's 2 Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Methodist Church - Eustis
 Date Oct 21 1923 4 P M
 Account charged Mrs. Nellie Lewis
 Address Eustis Fla
 Account guaranteed _____

Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3- Metal G. Fin 450.00
 Casket with Copper Lin. Inner
 Style of Casket State N Co.
 No. of Casket Proctor
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext G & Sil Fin
 Pillow Set yes. Champagne
 Name Plate Name & Date
 Cemetery Mt Lora
 Section _____ Lot _____
 E

I Other Graves

X Grave on this date



Cremation _____
 Single Grave _____
 Opening and Closing Grave Del Box 10.00
 Body Shipped to ✓
 R. R. Ticket ✓
 Cash advanced ✓
 Telegram ✓
 Minister From Eustis
 Casket Wagon _____
 Physician Dr. Summitt
 County or City Burial _____
 Automobiles S & S 25.00
 Baggage or Express Train No. _____

Grand Mother of
J. C. Spear F. D.
at Eustis 520.00
 20.00
 500.00

6226

Carey Hand Funeral Home

Name of deceased Alice Rosa Lemons
 Date of Death Oct 21 19231 5:30 M
 Cause of death Dr Said No Cause
 Place of Death Res M
 Residence Fern Park Fla
 Age Y's Mo's 3 Days
 Weight Height, ft. in. Eyes
 Funeral at Res
 Date Oct 21st 19231 P. M
 Account charged Mrs P. Lemons.
 Address Fern Park Fla
 Account guaranteed -
 Address -
 Embalming -
 Robe, Suit, Dress -
 Underwear and Hose -
 Casket 2-0 W. L. S. 27 50
 Casket with Copper Lin. -
 Style of Casket Oct Top
 No. of Casket 103 - Tampa
 Outside Box Reg
 Shipping Case or Vault -
 Handles Short -
 Pillow Set -
 Name Plate OD
 Cemetery Winter Park
 Section Lot
E
 I Other Graves
 X Grave on this date
N S
W
 Cremation Bought Casket
 Single Grave ed done
 Opening and Closing Grave their own
 Body Shipped to work. have
 R. R. Ticket permit for same.
 Cash advanced
 Telegram -
 Minister -
 Casket Wagon -
 Physician Dr. Gardner.
 County or City Burial -
 Automobiles -
 Baggage or Express Train No. 27 50

C. M. Hunter
of Winter Park will ok
acct.

6227

Carey Hand Funeral Home

Name of deceased Infant - Jarvis
 Date of Death Oct 22 19231 a. M
 Cause of death Hemorrhage
 Place of Death O. G. N M
 Residence 1035 Hampton Ave
 Age Y'rs Mo's 3 Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Grave
 Date Oct 22nd 19231 11a M
 Account charged Ottis L. Jarvis
 Address 1035 Hampton Ave
 Account guaranteed Cash
 Address ✓

Embalming ✓
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 2-0 W L. S-
 Casket with Copper Lin. ✓
 Style of Casket Spr H m
 No. of Casket ✓
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Small
 Pillow Set ✓
 Name Plate CD
 Cemetery Patrick
 Section _____ Lot _____

E

I Other Graves

X Grave on this date

N

S

W

Cremation _____
 Single Grave _____
 Opening and Closing Grave Del B ex
 Body Shipped to _____
 R. R. Ticket Auto & Sew
 Cash advanced ✓
 Telegram ✓
 Minister ✓
 Casket Wagon ✓
 Physician Dr. Chiles
 County or City Burial ✓
 Automobiles ✓
 Baggage or Express Train No. _____

10 00

250

250

15 00

6228 Carey Hand Funeral Home *Colored*

Name of deceased *Mattie Williams*
Date of Death *Oct 21* 192*31* *3a* M
Cause of death *Sfarmodic Hiccough*
Place of Death *Res* M
Residence *816 W. Long*
Age *59* Y'rs Mo's Days
Weight Height, ft. in. Eyes
Funeral at *Grave*
Date *Oct* 192 M
Account charged *City*
Address
Account guaranteed
Address
Embalming
Robe, Suit, Dress
Underwear and Hose
Casket *3/9* *Coffin & box* 1450
Casket with Copper Lin.
Style of Casket
No. of Casket
Outside Box
Shipping Case or Vault
Handles
Pillow Set
Name Plate
Cemetery *Greenwood*
Section Lot
E
I Other Graves
X Grave on this date
N S
W
Cremation
Single Grave
Opening and Closing Grave
Body Shipped to
R. R. Ticket
Cash advanced
Telegram
Minister
Casket Wagon
Physician *Dr. Wells*
County or City Burial
Automobiles
Baggage or Express Train No.

1480

6229 Carey Hand Funeral Home Colored

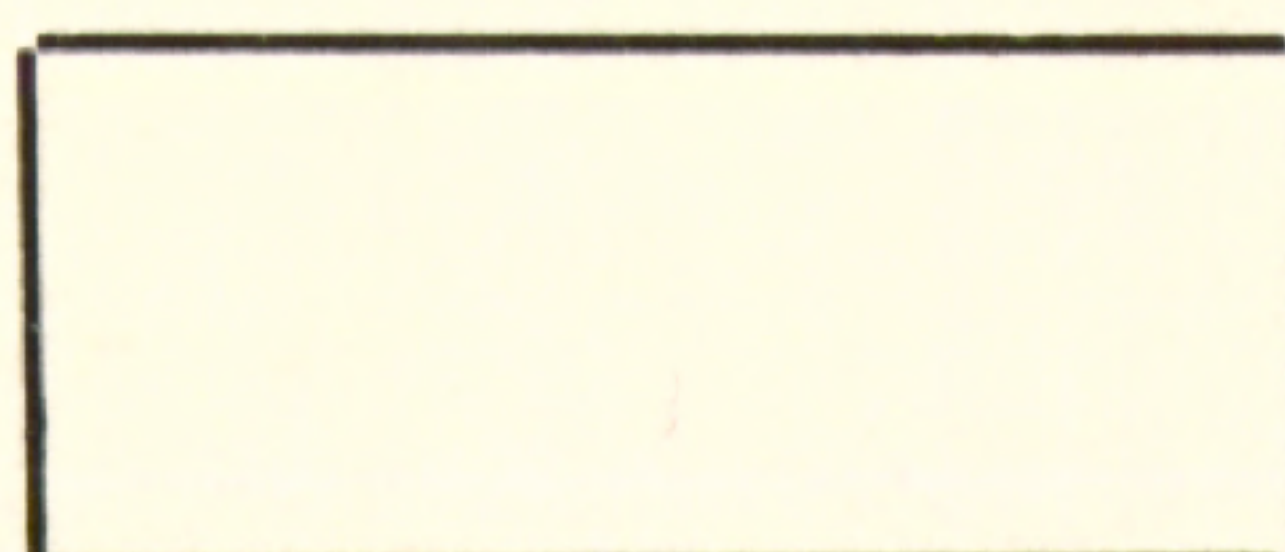
Name of deceased John Barrett
 Date of Death Oct 1923 9 A M
 Cause of death gun shot wound - in stomach
 Place of Death O. G. A. M
 Residence 222-5th St. - Greenville Fla.
 Age 31 1/4 Y's about 25 Mo's 25 Days 25
 Weight 150 Height, 5 ft. 10 in. Eyes blue
 Funeral at Greenville
 Date Oct 1923 M
 Account charged City
 Address _____
 Account guaranteed _____
 Address _____

Embalming yes
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3- Coffin 14 00
 Casket with Copper Lin. _____
 Style of Casket Coffin
 No. of Casket 1
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles ✓
 Pillow Set ✓
 Name Plate ✓
 Cemetery County Home
 Section Greenwood Lot _____

I Other Graves

X Grave on this date

N



S

W

Cremation ✓
 Single Grave ✓
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician Dr. Brandahl Judge Cox
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

14 00

6230

Carey Hand Funeral Home

Name of deceased Alex. E. Graves
 Date of Death Oct-22 1931 4-P M
 Cause of death Bronchial Pneumonia
 Place of Death Res- M
 Residence 218- West Amelia ave
 Age 86 Y's 10 Mo's 5 Days
 Weight 145 Height, 5 ft. 7 in. Eyes
 Funeral at West

Date _____ 192 M

Account charged John E. Graves

Address 218 W Amelia

Account guaranteed Estate

Address _____

Embalming & Dressing 35.00

Robe, Suit, Dress ✓

Underwear and Hose ✓

Casket 6-3 br cup. 125.00

Casket with Copper Lin. ✓

Style of Casket Oct 3-P 9

No. of Casket 1402-5-

Outside Box Reg

Shipping Case or Vault ✓

Handles Shat

Pillow Set yes

Name Plate _____

Cemetery West

Section _____ Lot _____

E

I Other Graves

X Grave on this date

N

S

W

Cremation _____

Single Grave _____

Opening and Closing Grave Unadilla

Body Shipped to Unadilla

R. R. Ticket (2) 1204 24.12

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon (2) 10.00

Physician Dr Beardahl

County or City Burial 194.12

Automobiles _____


Baggage or Express Train No. 76

This Night 10-23-31

623/ Carey Hand Funeral Home

Name of deceased Cordis W. Guier
 Date of Death Oct-22 1931 P M
 Cause of death acute Nephritis
 Place of Death O. G. H. M
 Residence Winter Garden
 Age 9 Y'rs 3 Mo's 9 Days 9
 Weight _____ Height, _____ ft. _____ in. Eyes Green
 Funeral at Baptist Church W. Park
 Date Sat Oct. 24 1931 - M
 Account charged Wilbur Guier
 Address Winter Park P.O.B 403
 Account guaranteed _____

Address _____
 Embalming + Dressing 25.00
 Robe, Suit, Dress _____ } 3.50
 Underwear and Hose _____ }
 Casket 4-4 White Plunk 50.00
 Casket with Copper Lin. ✓
 Style of Casket R. Cor. Stat
 No. of Casket cur
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Small
 Pillow Set O D
 Name Plate _____
 Cemetery Winter Garden
 Section _____ Lot _____
 E

I Other Graves _____
 X Grave on this date _____
 N  S
 W

Cremation _____
 Single Grave _____
 Opening and Closing Grave Del Bur
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles S + S
 Baggage or Express Train No. _____

People Poor name
of Low Price

15.00
93.50

6232 Carey Hand Funeral Home

Name of deceased Mrs Agnes B Johnston
 Date of Death Oct 21, 1931 M
 Cause of death Pneumonia
 Place of Death St Petersburg Fla M
 Residence St Petersburg Fla
 Age 70 Y'rs 8 Mo's 29 Days
 Weight 134 Height 5 ft. 4 in. Eyes
 Funeral at St Petersburg
 Date 1931 M
 Account charged Alexander Funeral Home
 Address Cleawater Fla
 Account guaranteed Ch
 Address
 Embalming Cremation 50.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. Body covered
 Style of Casket ly auto 10-AM
 No. of Casket Sat Oct-24-31
 Outside Box
 Shipping Case or Vault Body cremated
 Handles 1030 AM Sat
 Pillow Set Oct-24-31-
 Name Plate
 Cemetery
 Section Lot
Coffin can E
 I Other Graves N S
 X Grave on this date W
 Cremation will call for ashes
 Single Grave
 Opening and Closing Grave
 Body Shipped to Oct-27-31-
 R. R. Ticket Express
 Cash advanced Mrs Clayton C Trissell
 Telegram 360 14-ST N-
 Minister St Petersburg Fla
 Casket Wagon
 Physician
 County or City Burial 50.00
 Automobiles
 Baggage or Express Train No.

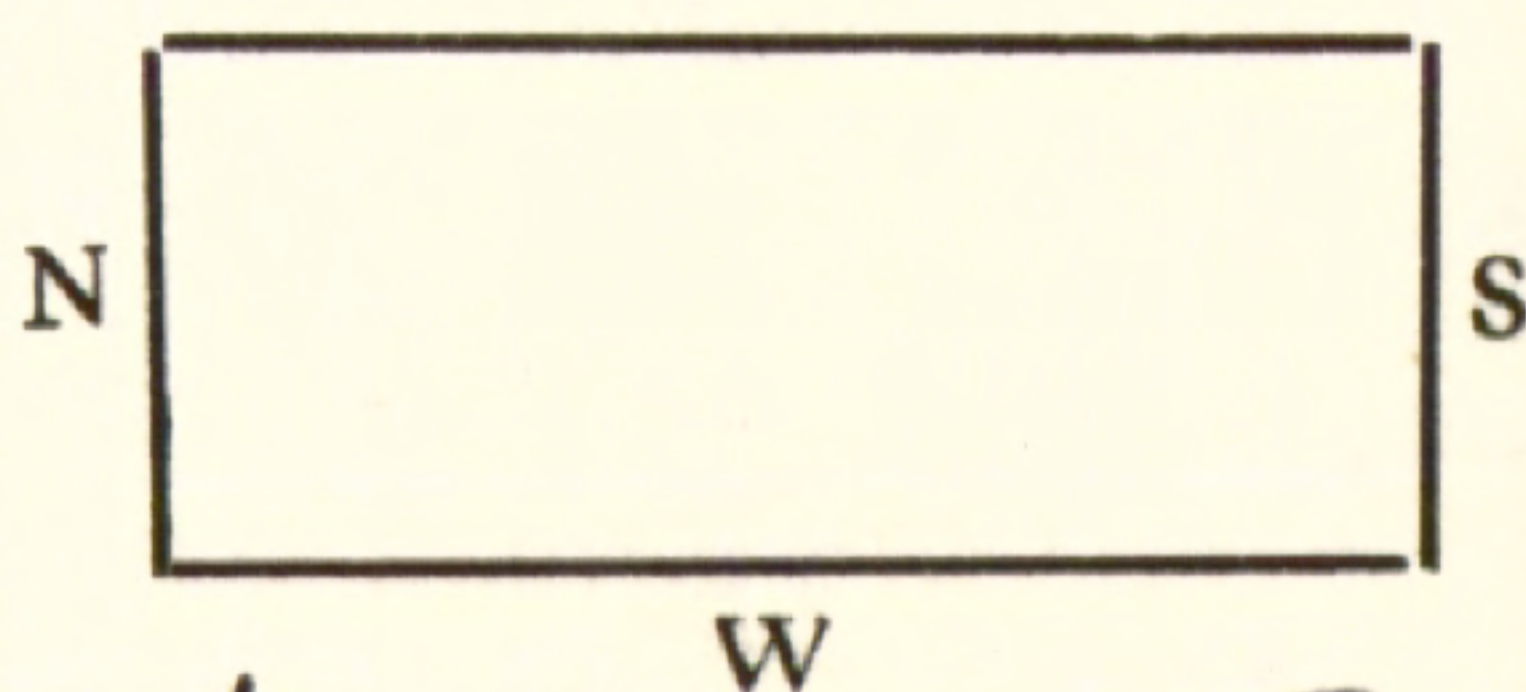
6233 Carey Hand Funeral Home

Name of deceased Robert Galley
 Date of Death Oct-24 1931 1155 M P.
 Cause of death acute dilatation of heart
 Place of Death Res M
 Residence 26 - East South st
 Age 86 Y's 6 Mo's 26 Days
 Weight 156 Height 5 ft. in. Eyes
 Funeral at Chapel
 Date Mon - Oct - 26 - 1931 - 10 A M
 Account charged Geo B Galley
 Address Beaver Penn
 Account guaranteed Estate

Address
 Embalming + Dressing 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3 Metal Gun M Fin 635.00
 Casket with Copper Lin. Inner
 Style of Casket State
 No. of Casket
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext G. M Fin
 Pillow Set yes Grey 1844
 Name Plate Name + Date 1931
 Cemetery Beaver Pa -
 Section Lot

I Other Graves

X Grave on this date



Cremation Shaf. At Beaver Pa

Single Grave

Opening and Closing Grave

Body Shipped to Rochester Penn

R. R. Ticket (2) 44.59

Cash advanced Full 13.50

Telegram (1)

Minister M^c Nair

Casket Wagon (2)

Physician Dr Christ

County or City Burial

Automobiles Excess Baggage

Baggage or Express Train No. 92

Mon - Oct - 26 - 31

89	18
13	50
10	8
10	00
78	37
7	44
79	120

6234 Carey Hand Funeral Home

Name of deceased *Maryella Dunaway*

Date of Death *Oct 25* 19*31* *9 15* AM

Cause of death _____

Place of Death *Res* M

Residence *Jellwood*

Age *80* Y'rs Mo's Days

Weight _____ Height, _____ ft. _____ in. Eyes _____

Funeral at *Grave*

Date *Mon - Oct - 26* 19*31* - *10 7* AM

Account charged *Andrew J. Marsh*

Address *Jellwood*

Account guaranteed _____

Address _____

Embalming *Care of Body* 10.00

Robe, Suit, Dress, ✓

Underwear and Hose ✓

Casket *6-3- in cup* 50.00

Casket with Copper Lin. ✓

Style of Casket *Sq Flat top*

No. of Casket *72*

Outside Box *Reg*

Shipping Case or Vault ✓

Handles *Short*

Pillow Set ✓

Name Plate *at Rest*

Cemetery *Plymouth*

Section _____ Lot _____

E

I Other Graves

X Grave on this date

N S

W

Cremation _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician *Dr Flynn* *Mt Ida*

County or City Burial _____

Automobiles *5 + 5* 15.00

Baggage or Express Train No. 75.00

People Living Pan

6235 Carey Hand Funeral Home

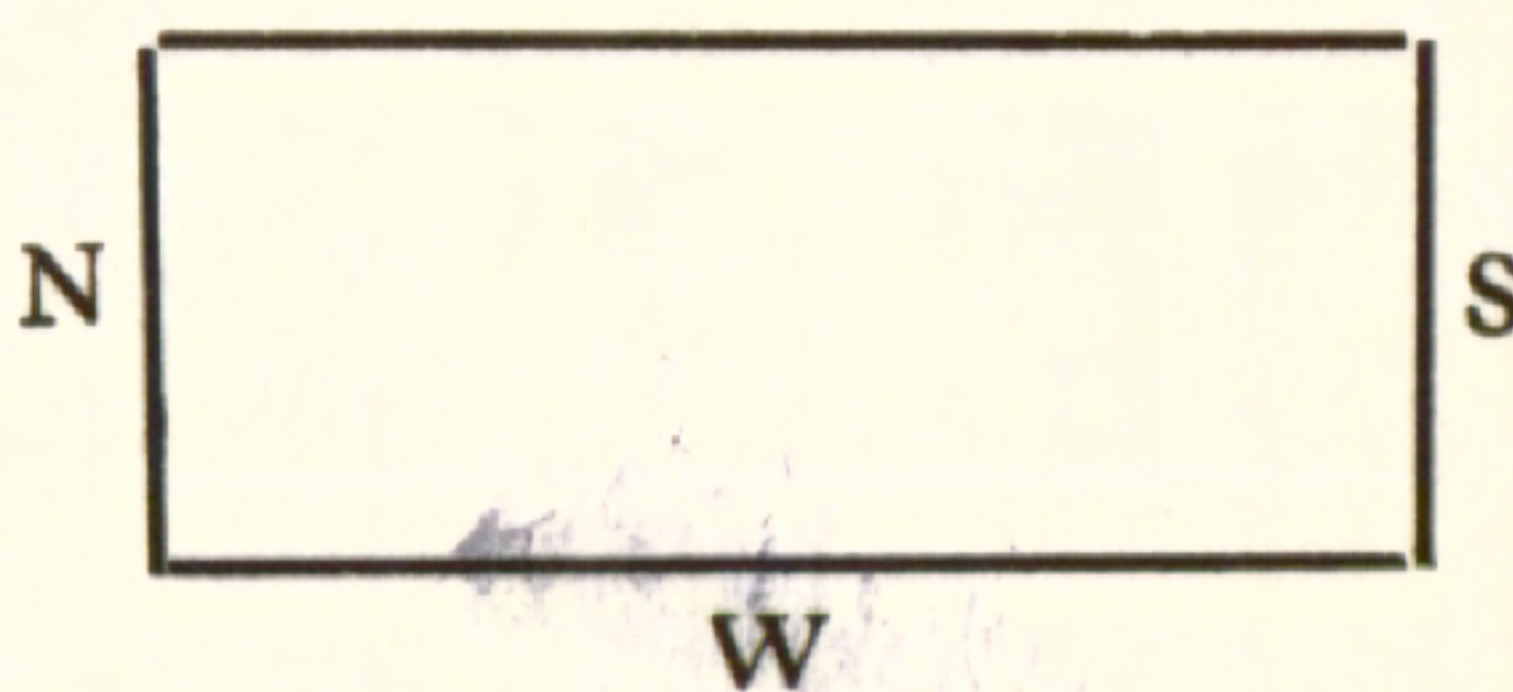
Name of deceased Joseph Garretson
 Date of Death Oct 26 1931 - 420 A M
 Cause of death Cerebral Hemorrhage
 Place of Death Res - M
 Residence 421 E. Concord
 Age 56 Y'rs 10 Mo's 10 Days
 Weight 170 Height, 5 ft. 9 in. Eyes
 Funeral at Dest

Date 192 M
 Account charged Mrs Joseph Garretson
 Address 421 - E. Concord
 Account guaranteed Estate

Address
 Embalming & Dressing 35.00
 Robe, Suit, Dress -
 Underwear and Hose -
 Casket 6-3-Metal G.M. Tin 750.00
 Casket with Copper Lin. Copper in Hall
 Style of Casket State N. Cap
 No. of Casket Lamar D. Th
 Outside Box Reg
 Shipping Case or Vault -
 Handles Ext G. M
 Pillow Set yes bur
 Name Plate Name + Date 1874
 Cemetery Spring Hill Cn Ohio
 Section Lot

I Other Graves

X Grave on this date



Cremation

Single Grave

Opening and Closing Grave

Body Shipped to Cincinnati Ohio

R. R. Ticket

Cash advanced

Telegram

Minister

Casket Wagon (2)

Physician Dr Edwards

County or City Burial

Automobiles Ex car

Baggage or Express Train No. 76

Monday Night 10-26-31

105.64
 10.00

900.66
 7.95

908.61

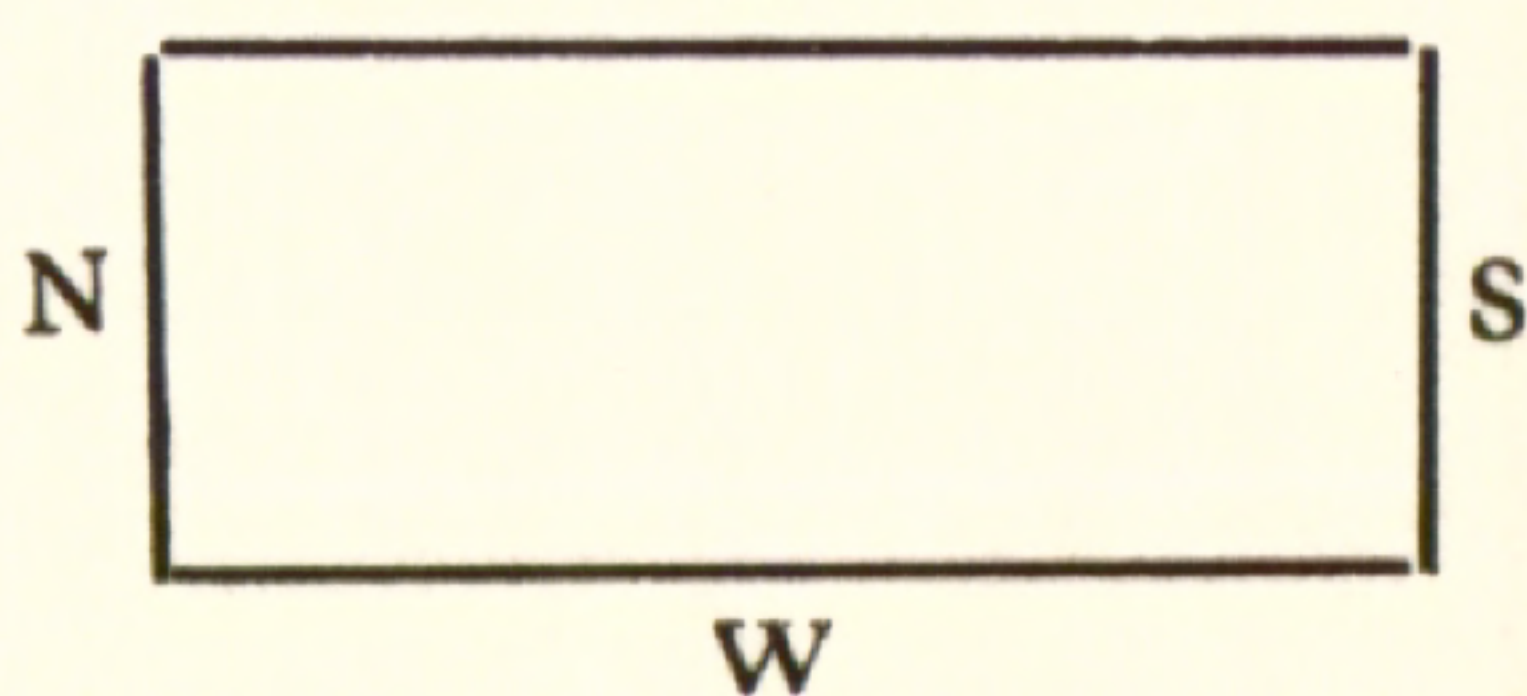
6236 Carey Hand Funeral Home

Name of deceased Hannah Evans
 Date of Death Oct-26 1931 M
 Cause of death Cancer of Breast
 Place of Death Fla Sealring M
 Residence Sealring Fla
 Age 70 Y'rs 6 Mo's 8 Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Sealring
 Date _____ 1932 M
 Account charged Stephen & Blyth
 Address Sealring Fla
 Account guaranteed OK
 Address _____

Embalming _____ 25.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Stephen & Blyth
 Casket with Copper Lin. _____
 Style of Casket Called for Body
 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 _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician L. L. Andrews
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

25.00

6237 Carey Hand Funeral Home

Name of deceased John T Rowe
 Date of Death 10-24 1931 M
 Cause of death Arterial Poisoning
 Place of Death Oral M
 Residence Miami Fla
 Age 47 Y's Mo's Days
 Weight 200 Height, 5 ft. 8 in. Eyes Blue
 Funeral at
 Date 192 M
 Account charged John T. Skellman
 Address F.D. Miami Fla
 Account guaranteed
 Address
 Embalming Cremation 50 00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 72-
 Casket with Copper Lin. Flag - on
 Style of Casket Casket
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Copper can Lot E
 I Other Graves
 X Grave on this date
 Cremation Body arrived by
 Single Grave Auto 1230 P.M.
 Opening and Closing Grave Oct-24-31
 Body Shipped to Body cremated
 R. R. Ticket 1-P.M. 10-24-31
 Cash advanced
 Telegram Am Expressed to
 Minister J. T. Skellman
 Casket Wagon F.D. Miami Fla
 Physician Wed-10-28-31
 County or City Burial 50 00
 Automobiles
 Baggage or Express Train No.

6238 Carey Hand Funeral Home

Name of deceased Mrs Edna A Gleason
Date of Death Oct-26-1931 4.40 a M
Cause of death Gen Peritonitis
Place of Death C G, H. M
Residence East Cen Auto Camp
Age 36 Y'rs 2 Mo's 3 Days
Weight 145 Height 5 ft. 6 in. Eyes
Funeral at Chapel
Date Tue - Oct-27-1931 10 30 M A
Account charged City
Address
Account guaranteed
Address
Embalming & Dressing
Robe, Suit, Dress -
Underwear and Hose -
Casket 6-3- Coffin 14 00
Casket with Copper Lin. -
Style of Casket Coffin
No. of Casket
Outside Box Beg
Shipping Case or Vault
Handles Bale
Pillow Set
Name Plate
Cemetery Greenwood
Section Lot
E
I Other Graves
X Grave on this date
N S
W
Cremation ✓
Single Grave ✓ Single
Opening and Closing Grave No chg
Body Shipped to ✓
R. R. Ticket
Cash advanced
Telegram
Minister
Casket Wagon ✓
Physician Dr Christ
County or City Burial ✓
Automobiles No chg 14 00
Baggage or Express Train No.

6239 **Carry Hand Funeral Home**

Name of deceased Mr Isaac Shoemaker

Date of Death Oct 1931 M

Cause of death _____

Place of Death St Petersburg Fla M

Residence _____

Age _____ Y's _____ Mo's _____ Days _____

Weight _____ Height, _____ ft. _____ in. Eyes _____

Funeral at _____

Date _____ 192 _____ M

Account charged _____

Address _____

Account guaranteed _____

Address _____

Embalming Cremation 50 00

Robe, Suit, Dress _____

Underwear and Hose _____

Casket _____

Casket with Copper Lin. _____

Style of Casket _____

No. of Casket _____

Outside Box _____

Shipping Case or Vault _____

Handles Body arrived by

Pillow Set auto 8-PM 10-25-31

Name Plate _____

Cemetery Body cremated

Section 9-A.M. 10-26-31 Lot _____

Copper can E

I Other Graves N S

X Grave on this date W

Cremation Fun Expensed to

Single Grave J. H. Hilkehn

Opening and Closing Grave To Home

Body Shipped to St Petersburg

R. R. Ticket _____

Cash advanced _____

Telegram Wed-10-28-31

Minister _____

Casket Wagon _____

Physician _____

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

50.00

6240 Carey Hand Funeral Home

Name of deceased Maud. L. Herring
 Date of Death Oct 26 1931 P.M.
 Cause of death acute suppression of urine
 Place of Death Res M
 Residence 1219 Eastern St
 Age 46 Y'rs 1 Mo's 27 Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Oct 27 1931 4:30 P.M.
 Account charged Arthur Herring
 Address 1219 Eastern St
 Account guaranteed _____
 Address 908 N Fla ave Lakeland Fla
 Embalming & Dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____ 2 50
 Casket 6/3 Grey Cope 125 00
 Casket with Copper Lin. _____
 Style of Casket Oct 3 P. Top
 No. of Casket 1402
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Short
 Pillow Set yes
 Name Plate At Rest
 Cemetery Greenwood
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N _____ S _____
 W _____
 Cremation Single Grave 5 00
 Single Grave _____
 Opening and Closing Grave etc 10 00
 Body Shipped to _____
 R. R. Ticket Car for Minister 5 00
 Cash advanced _____
 Telegram _____
 Minister Rev Partridge 5 00
 Casket Wagon (1)
 Physician Dr. M. M. Andrews
 County or City Burial _____
 Automobiles S & S 15 00
 Baggage or Express Train No. _____

202 50

6241 **Carey Hand Funeral Home**

Name of deceased Yomer Jones.
 Date of Death Oct 26 19231 M
 Cause of death Arterio Carcinoma
 Place of Death Daytona Beach M
 Residence Daytona Beach Fla
 Age 73 Y'rs 6 Mo's 7 Days
 Weight 130 Height, 5 ft. 9 in. Eyes Brown
 Funeral at Daytona Beach
 Date Oct 27 19231 a M
 Account charged Baggett-Wetherly
 Address Daytona Beach, Fla
 Account guaranteed _____

Address _____
 Embalming Cremation 50 00

Robe, Suit, Dress _____

Underwear and Hose _____

Casket _____

Casket with Copper Lin. Body

Style of Casket Arrived by

No. of Casket Auto Tuesday

Outside Box Oct 27 - 3:30

Shipping Case or Vault P. m. - 1931

Handles _____

Pillow Set Body Cremated

Name Plate Tuesday Oct 27

Cemetery 1931 - 4 P. m.

Section _____ Lot _____

E

I Other Graves

X Grave on this date

N

S

W

Cremation Ashes to be

Single Grave sent to

Opening and Closing Grave _____

Body Shipped to Baggett +

R. R. Ticket Wetherly. F. L.

Cash advanced Daytona Beach

Telegram Fla

Minister _____

Casket Wagon _____

Physician _____

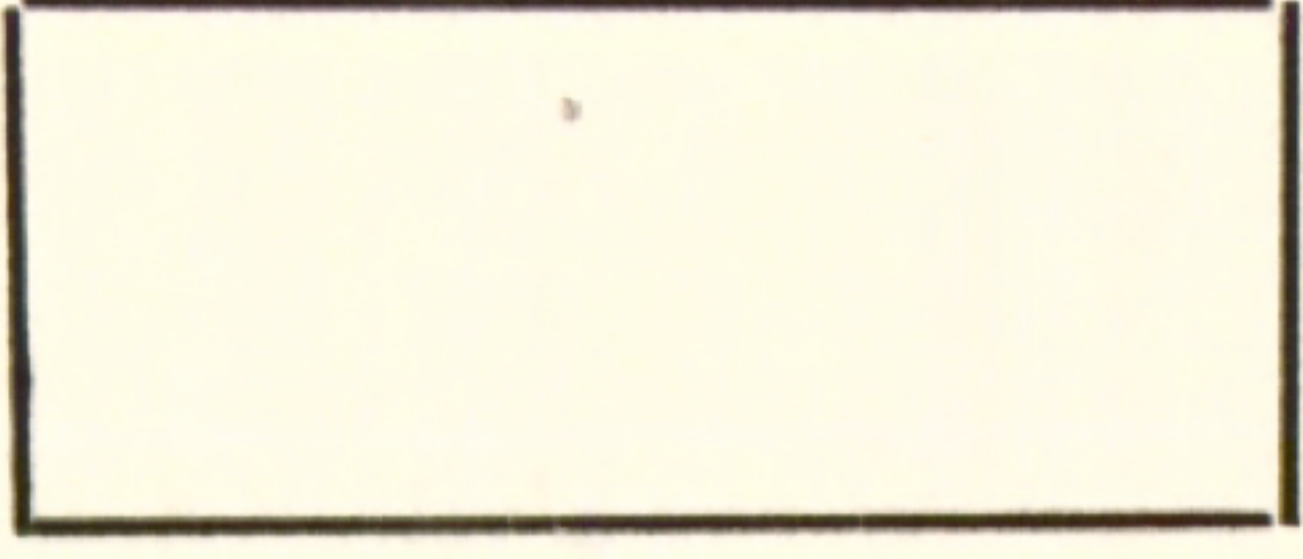
County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

\$50 00

6242 Carey Hand Funeral Home

Name of deceased Clarence P. Paul
Date of Death Oct 27 19231 9:15 P. M
Cause of death _____
Place of Death C. G. H. M
Residence Winter Garden Fla
Age ✓ Y'rs ✓ Mo's ✓ Days ✓
Weight _____ Height, _____ ft. _____ in. Eyes _____
Funeral at Grave
Date Oct 28 19231 M
Account charged C. P. Paul
Address Winter Garden
Account guaranteed Cash
Address _____
Embalming ✓
Robe, Suit, Dress _____
Underwear and Hose _____
Casket 2/0 White 7 50
Casket with Copper Lin. _____
Style of Casket Sq. 2
No. of Casket N. M.
Outside Box Reg.
Shipping Case or Vault _____
Handles _____
Pillow Set _____
Name Plate _____
Cemetery Cole
Section _____ Lot _____
E
I Other Graves _____
X Grave on this date _____
N  S
W
Cremation _____
Single Grave _____
Opening and Closing Grave _____
Body Shipped to Bought
R. R. Ticket Cash
Cash advanced done their
Telegram own work. have
Minister permit for same
Casket Wagon _____
Physician Dr. Edwards
County or City Burial _____
Automobiles _____
Baggage or Express Train No. _____

7.50

6243 Carey Hand Funeral Home

Name of deceased Bmsley R. Cobb Sr
 Date of Death Oct 28 1921 3:45 P. M
 Cause of death _____
 Place of Death Res M
 Residence 430 E. Jackson St
 Age 52 Y's 6 Mo's 6 Days _____
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Oct 29 1921 4 P M
 Account charged Mrs B. R. Cobb Sr
 Address 430 E. Jackson St
 Account guaranteed Estate

Address _____
 Embalming Yes Dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Gray B. Co 250 00
 Casket with Copper Lin. _____
 Style of Casket R. Con S 14 Cab
 No. of Casket 1082
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Lot O.S
 Pillow Set yes
 Name Plate _____
 Cemetery Cash Hill
 Section Blk D. Lot 409

E

I Other Graves

X Grave on this date

N

S

W

Cremation _____

Single Grave _____

Opening and Closing Grave etc 10 00

Body Shipped to 2 Family Car 10 00

R. R. Ticket P. B. Car 5 00

Cash advanced Minister Car 5 00

Telegram _____

Minister Rev Ferran 5 00

Casket Wagon (1)

Physician Dr Christ

County or City Burial _____

Automobiles S & S 15 00

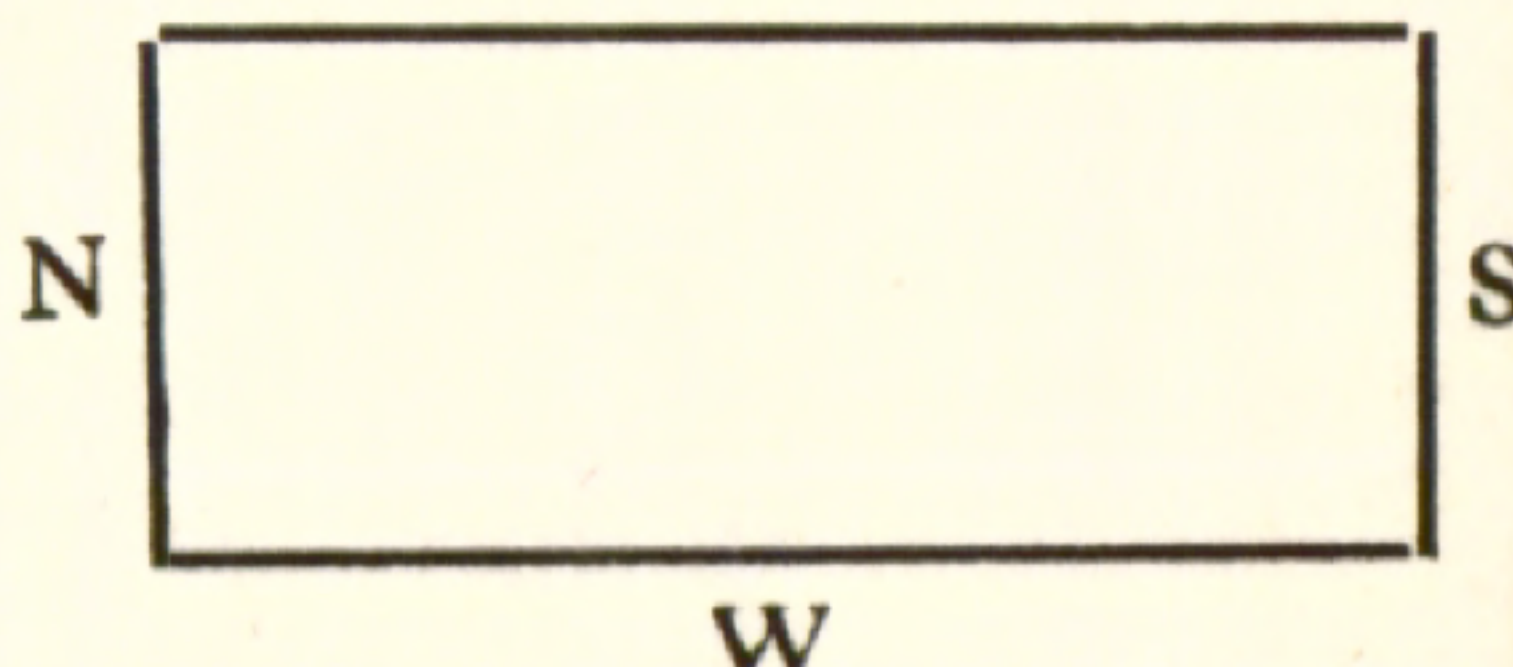
Baggage or Express Train No. _____

\$ 335.00

6244 Carey Hand Funeral Home

Name of deceased Chas. A. Speer
 Date of Death Oct 29 19231 4a M
 Cause of death _____
 Place of Death O. Y. N. M
 Residence Oakland Fla
 Age 60 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Grave
 Date Oct 30 19231 11a M
 Account charged Clara Browder
 Address Oakland Fla
 Account guaranteed Insurance
 Address _____
 Embalming Yes Dressing 35.00
 Robe, Suit, Dress } 22.50
 Underwear and Hose }
 Casket 6-3 gray enj. 65.00
 Casket with Copper Lin. ✓
 Style of Casket Spr
 No. of Casket 72
 Outside Box Reg
 Shipping Case or Vault -
 Handles Shut
 Pillow Set ✓
 Name Plate at Rest
 Cemetery Oakland
 Section _____ Lot _____

I Other Graves _____
 X Grave on this date _____



Cremation _____
 Single Grave _____
 Opening and Closing Grave Del Box 75.00
 Body Shipped to ✓
 R. R. Ticket -
 Cash advanced ✓
 Telegram ✓
 Minister at Oakland
 Casket Wagon no chg
 Physician Dr. Beardsall
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 545 20.00
Grub - No chg
150.00

6245 *Cremation*
Carey Hand Funeral Home

Name of deceased *Wm P. Probeck*
Date of Death *Oct 26* 1923 *1* M
Cause of death *Gen-Toxemia-Cardial Failure*
Place of Death *Ft Lauderdale Fla* M
Residence *Ft Lauderdale Fla*
Age *82* Y's *0* Mo's *27* Days
Weight *165* Height, *5* ft. *8* in. Eyes *Brown*
Funeral at *Ft Lauderdale Fla*
Date *Oct 29* 1923 *1* a M
Account charged *Fannin Fun Home*
Address *Ft Lauderdale Fla*
Account guaranteed *Church*

Address _____
Embalming *Cremation* 5000

Robe, Suit, Dress _____

Underwear and Hose _____

Casket _____

Casket with Copper Lin. _____

Style of Casket *Bargain*

No. of Casket *Body Arrived*

Outside Box *at noon Oct 29*

Shipping Case or Vault *1931 - by*

Handles *Auto*

Pillow Set _____

Name Plate *Body Cremated*

Cemetery *at 12:30 P.M.*

Section *Oct 29 E* Lot *1931*

E

I Other Graves

X Grave on this date

N

S

W

Cremation *Ashes to be*

Single Grave *expressed*

Opening and Closing Grave *to*

Body Shipped to *Mrs. Ada*

R. R. Ticket *B. Sharp*

Cash advanced *1302 - W -*

Telegram *105 E St*

Minister *Cleveland, O*

Casket Wagon *10-31-31*

Physician _____

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

5000

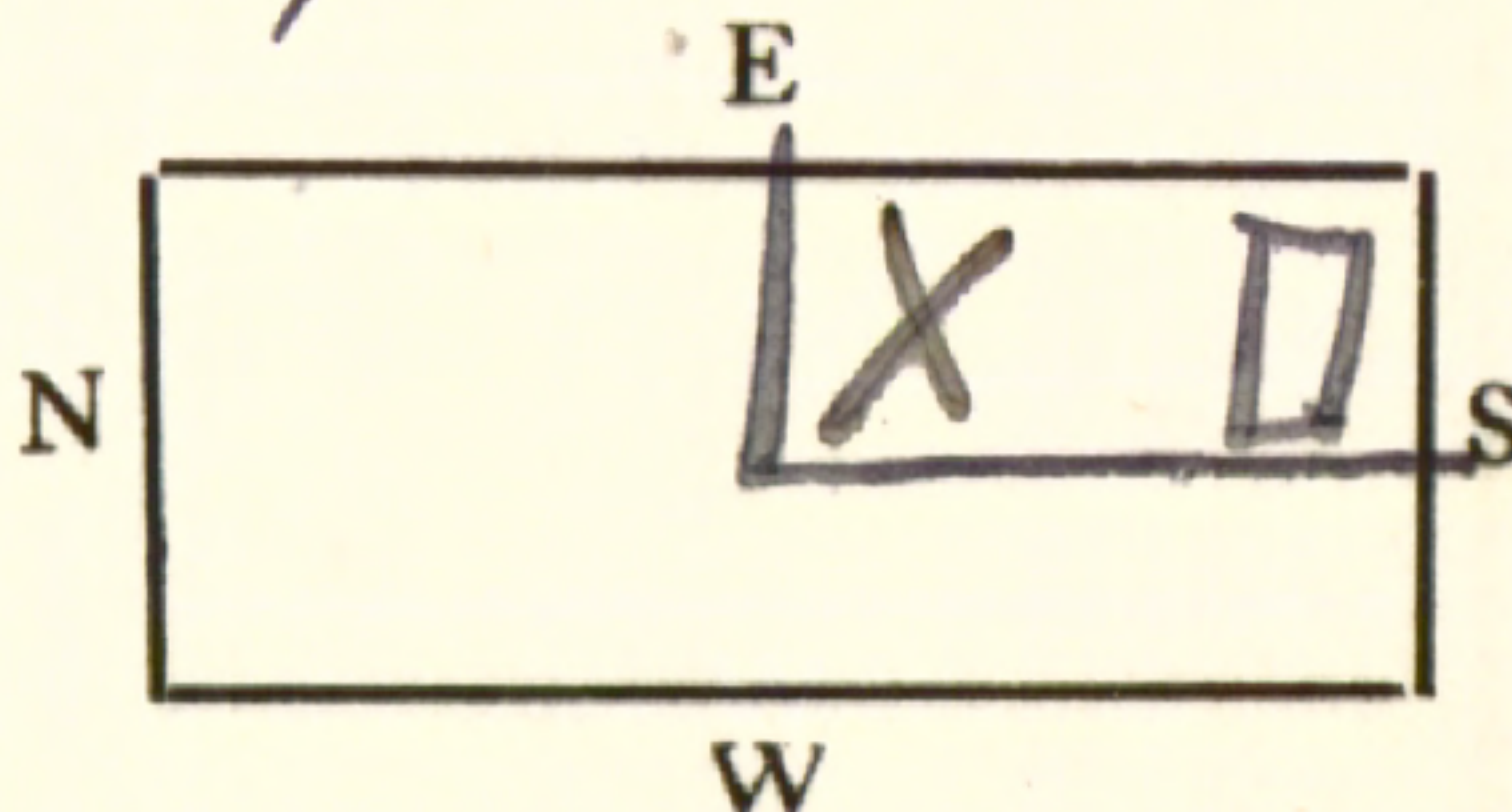
6246 Carey Hand Funeral Home

Name of deceased Louisa Spencer
 Date of Death Oct 19 1931 4 P. M
 Cause of death Coma Toxemia
 Place of Death Stuart Neb M
 Residence Arlanda Fla
 Age 65 Y'rs 7 Mo's 4 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Oct 30 1931 3:30 P. M
 Account charged Samuel Spencer
 Address Arlanda Fla
 Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box Body arrived
 Shipping Case or Vault 1:45 P. m.
 Handles Oct 29 - 1931
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section P SE 1/4 Lot 21

I Other Graves

X Grave on this date



Cremation _____

Single Grave Car Min

Opening and Closing Grave etc

Body Shipped to Extra auto

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister Dean Adcock

Casket Wagon (1)

Physician F. P. Wilson (Stuart Neb)

County or City Burial _____

Automobiles SVS

Baggage or Express Train No. _____

5.00
 10.00
 5.00

5.00

15.00

40.00

6247 Carey Hand Funeral Home

Name of deceased David H Webb
 Date of Death Oct-29 1931 430 P M
 Cause of death _____
 Place of Death Res M
 Residence Boon
 Age ✓ Y'rs ✓ Mo's 13 Days _____
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at Home
 Date Oct-30 1931 A M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2-0 W L S 1450
 Casket with Copper Lin. _____
 Style of Casket 792
 No. of Casket ✓
 Outside Box Reg
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Boon
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N S
 W
 Cremation Bought case
 Single Grave done there
 Opening and Closing Grave own
 Body Shipped to work
 R. R. Ticket _____
 Cash advanced Com Blank
 Telegram Oked act
 Minister _____
 Casket Wagon _____
 Physician Dr Scott 1450
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

4248 Carey Hand Funeral Home

Name of deceased Henry C. Wilkinson
 Date of Death Oct 29 19231 8 P. M
 Cause of death Auto accident-fracture base of
 Place of Death Fla Sant M
 Residence Warren Ohio brain
 Age 18 Y'rs 8 Mo's 8 Days
 Weight 145 Height, 5 ft. 9 in. Eyes
 Funeral at least

Date 19231 M
 Account charged R. H. Wilkinson
 Address 2625 E. Market St
 Account guaranteed Warren Ohio

Address
 Embalming & Dressing 35 00
 Robe, Suit, Dress 10 00
 Underwear and Hose 35 00
 Casket 6-3- in box 150 00
 Casket with Copper Lin. ✓
 Style of Casket Oct-3-P.T
 No. of Casket 1401-5
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext - 8 ft 4 in
 Pillow Set yes
 Name Plate
 Cemetery Restvale
 Section Lot
 E

I Other Graves
 X Grave on this date
 N S W

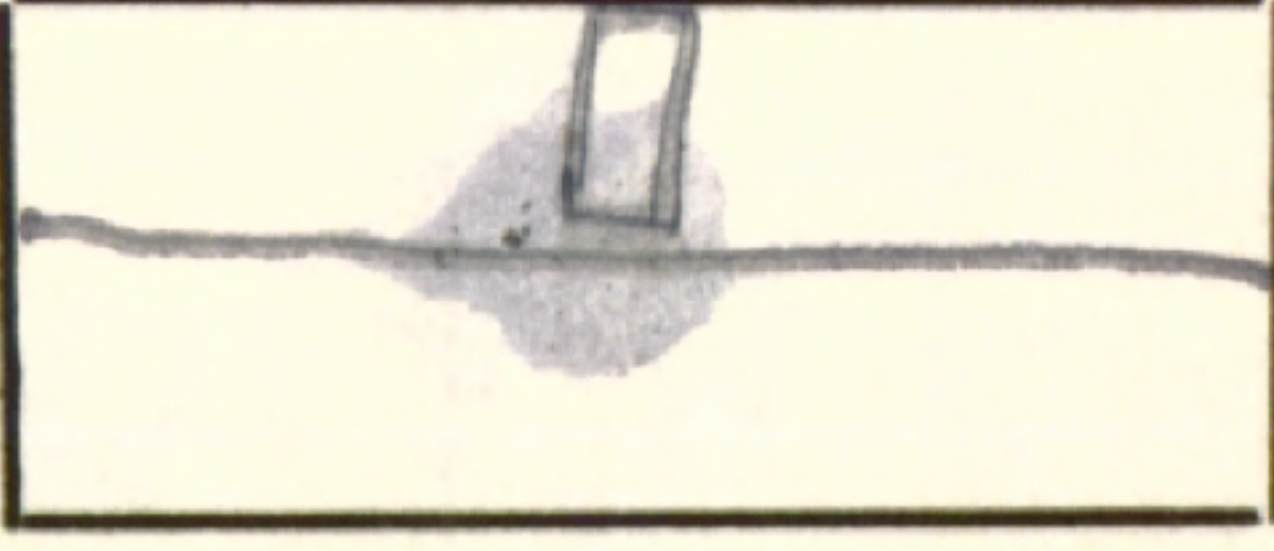
Cremation
 Single Grave
 Opening and Closing Grave
 Body Shipped to Warren Ohio
 R. R. Ticket
 Cash advanced Express Collect
 Telegram
 Minister
 Casket Wagon (2) 10 00
 Physician Dr. Burks
 County or City Burial 240 00
 Automobiles emb 5 00
 Baggage or Express Train No. 92 245 00
Sat-Oct-31-31

6249 Carey Hand Funeral Home

Name of deceased Chas L Neff
 Date of Death Oct-31 1921 11 A M
 Cause of death Carbonic Acid Poisoning accidental
 Place of Death O. G. H. M
 Residence 2201- Kuhl ave
 Age 65 Y's 6 Mo's 17 Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at West
 Date Nov - 1921 M
 Account charged Mrs Chas. L. Neff
 Address 2201 S Kuhl Ave
 Account guaranteed _____
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3- Gr Bid-C- 275.00
 Casket with Copper Lin. ☒
 Style of Casket R. Ca Slate
 No. of Casket 1082 Chat
 Outside Box R29
 Shipping Case or Vault ☒
 Handles Ext O. Sil Fin
 Pillow Set yes
 Name Plate _____
 Cemetery West
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N S
 W
 Cremation _____
 Single Grave ☒
 Opening and Closing Grave _____
 Body Shipped to Lunenburg Fla
 R. R. Ticket _____
 Cash advanced Express 22.90
 Telegram (1)
 Minister _____
 Casket Wagon (2) 10.00
 Physician Medans
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 92
Sat 10-31-31 342.90

6250

Carey Hand Funeral Home

Name of deceased Mrs. Maude E. Tunis
 Date of Death Oct-29 1931- M
 Cause of death acute dilatation of Heart
 Place of Death Lakeland Fla M
 Residence acute dilatation of Heart
 Age 51 Y'rs Mo's Days
 Weight Height, ft. in. Eyes
 Funeral at Home
 Date Sun Nov-1- 1931- 330 M P
 Account charged A. B. Fuller
 Address Apopka Fla
 Account guaranteed
 Address
 Embalming French Funeral
 Robe, Suit, Dress Home at Lakeland
 Underwear and Hose had change of
 Casket 6-3- French Arrangements
 Casket with Copper Lin.
 Style of Casket Oct-
 No. of Casket
 Outside Box Reg
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery Apopka
 Section Lot
 E
 I Other Graves
 X Grave on this date
 N  S
 W
 Cremation
 Single Grave
 Opening and Closing Grave Oct 31 10 00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister
 Casket Wagon (1) 5 00
 Physician
 County or City Burial
 Automobiles S + S 20 00
 Baggage or Express Train No. 35 00

6257 Carey Hand Funeral Home

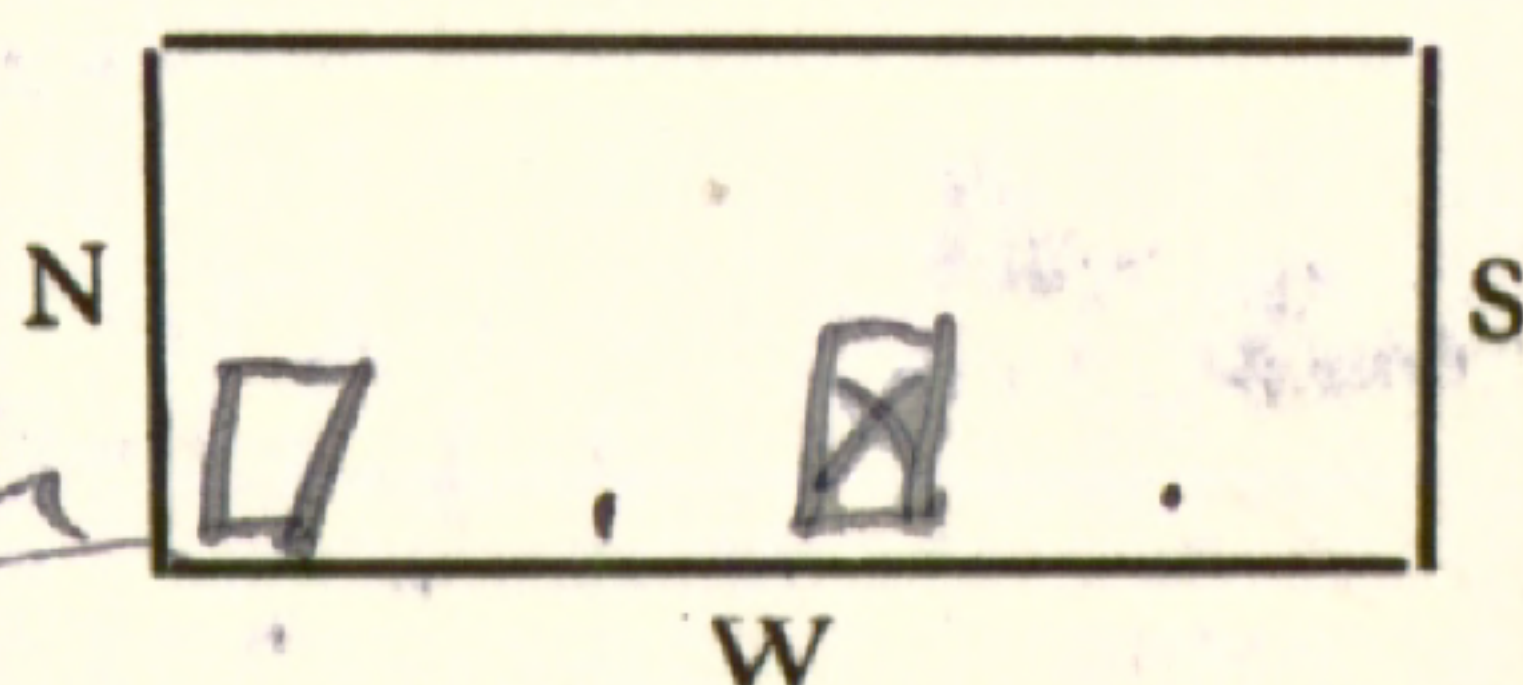
Name of deceased *Miss Norma F. Thompson*
 Date of Death *Oct- 31* 19*21* *A* M
 Cause of death *Myocarditis*
 Place of Death *Res* M
 Residence *Mulberry Fla*
 Age *17* Y'rs Mo's Days
 Weight Height, ft. in. Eyes
 Funeral at *Res*
 Date 19*21* M
 Account charged *Mrs. Wm. Thompson*
 Address *Mulberry Fla*
 Account guaranteed
 Address

Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket *Oct Sil Plush 1/2 Couch*
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box *Reg*
 Shipping Case or Vault
 Handles *Ext Spt Tr*
 Pillow Set *yes*
 Name Plate *at Rest*
 Cemetery *Greenwood*
 Section *J* Lot *13*
 E

I Other Graves

X Grave on this date

Wm. Thompson



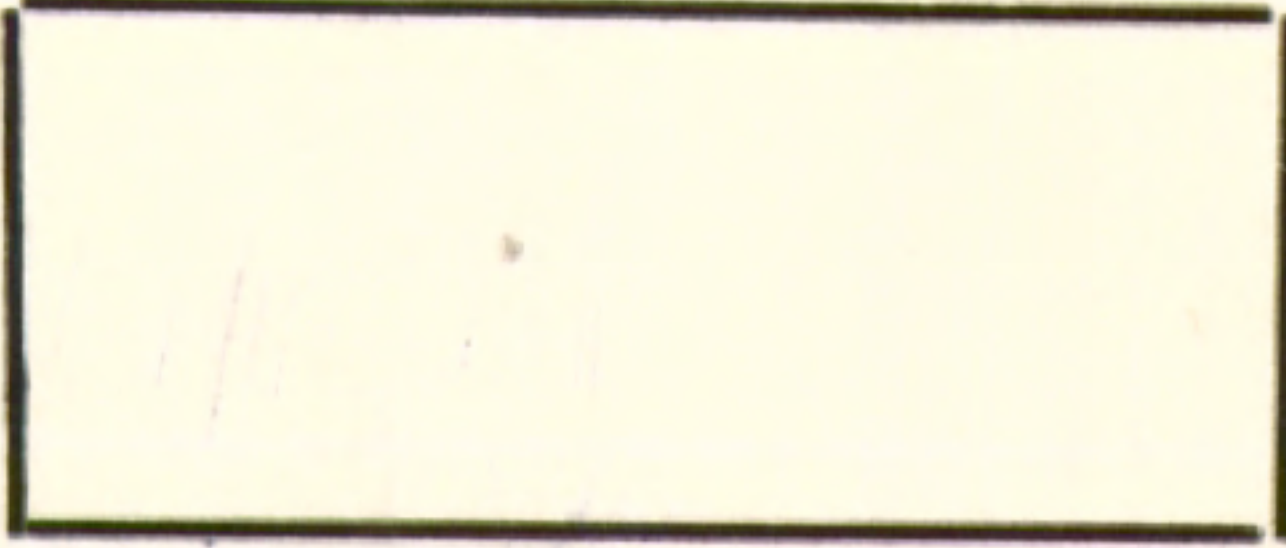
Cremation
 Single Grave
 Opening and Closing Grave *& etc*
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician
 County or City Burial
 Automobiles *3 + 3*
 Baggage or Express Train No.

10 00

15 00

25 00

6252 Carey Hand Funeral Home

Name of deceased Mr Frank Boucher
 Date of Death Nov-2 1921 4:30 A M
 Cause of death O. G. H.
 Place of Death Wint Amelia M
 Residence Wint Amelia
 Age about 65 Y'rs Mo's Days
 Weight Height, ft. in. Eyes
 Funeral at Chapel
 Date Nov 6th 1921 10 A. M
 Account charged Frank H. Boucher
 Address Houston Texas
 Account guaranteed Edney Kurell
 Address
 Embalming ✓ L. Boucher 35 00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3-Gr Doe 150 00
 Casket with Copper Lin. ✓
 Style of Casket Oct-3-P. T.
 No. of Casket 1402-S
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext Spt
 Pillow Set yes
 Name Plate
 Cemetery Boneway
 Section Old English East of Lot other cemeteries
 E
 I Other Graves
 X Grave on this date
 N  S
 W
 Cremation car minister 5 00
 Single Grave
 Opening and Closing Grave etc 10 00
 Body Shipped to ✓
 R. R. Ticket ✓
 Cash advanced ✓
 Telegram ✓
 Minister Dean Johnson
 Casket Wagon (1) 5 00
 Physician Dr Mallons
 County or City Burial
 Automobiles 505 15 00
 Baggage or Express Train No. 220 00
emb Sew 5 00
225.00

6253

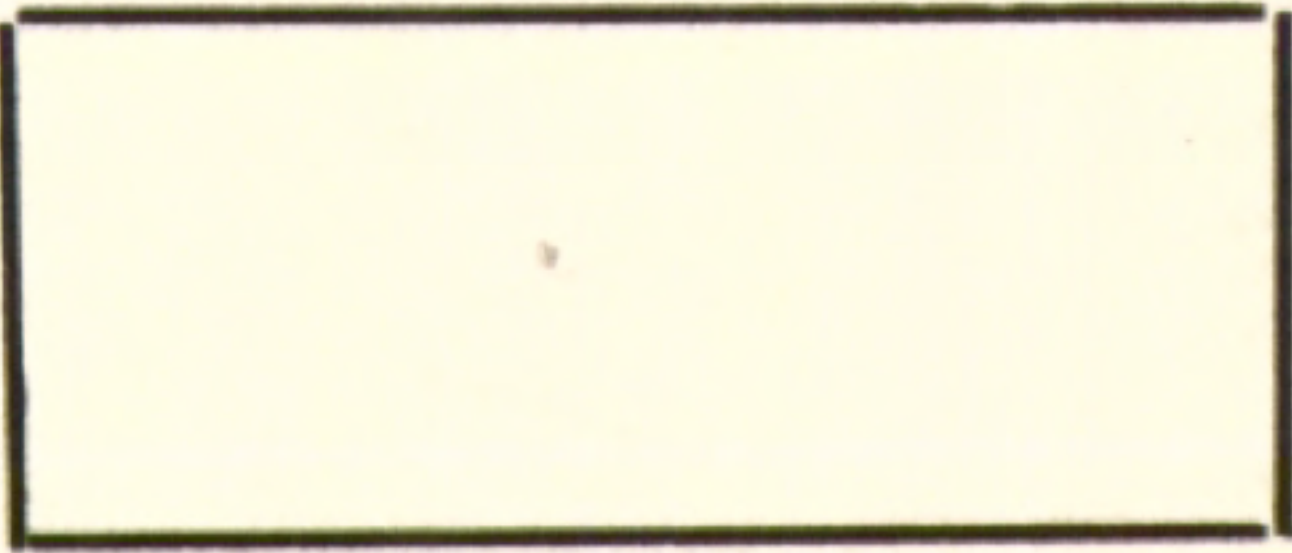
Carey Hand Funeral Home

Name of deceased Jim S. Leifore
 Date of Death Mar 2 1921 A M
 Cause of death Acute Cardiac dilatation
 Place of Death Res M
 Residence Apofka
 Age 49 Y's Mo's Days
 Weight Height, ft. in. Eyes
 Funeral at Grave
 Date Mar 2nd 1921 3 P M
 Account charged County
 Address
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3 Coffin
 Casket with Copper Lin.
 Style of Casket Coffin
 No. of Casket
 Outside Box Reg
 Shipping Case or Vault
 Handles Bale
 Pillow Set
 Name Plate
 Cemetery Apofka
 Section Lot
 E
 I Other Graves
 X Grave on this date
 N S
 W
 Cremation People Viny Bon
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister At Apofka
 Casket Wagon
 Physician Dr. Canoll
 County or City Burial
 Automobiles
 Baggage or Express Train No.

1450

1450

6254 Carey Hand Funeral Home

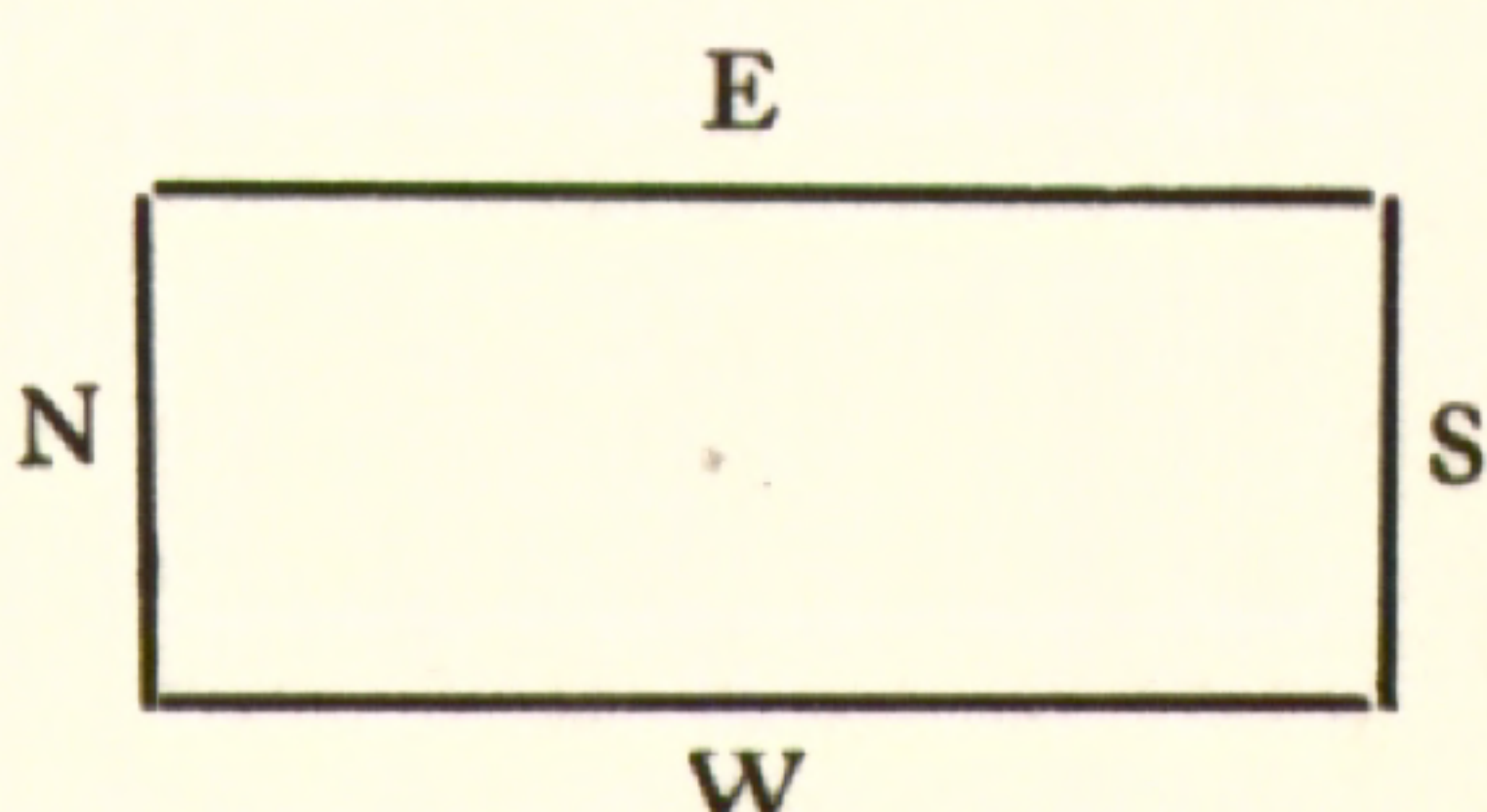
Name of deceased Margie Cohen
 Date of Death Nov 1 1981 M
 Cause of death _____
 Place of Death Philadelphia M
 Residence Orlando
 Age 3 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Tue Nov 3 1981 2-P M
 Account charged B. J. Cohen
 Address 882 E. Colonial
 Account guaranteed _____
 Address _____
 Embalming swallowed Bean and
 Robe, Suit, Dress un needed
 Underwear and Hose Philadelphia for
 Casket operation
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Jewish Cemetery
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N  S
 W
 Cremation _____
 Single Grave _____
 Opening and Closing Grave Dec 134 500
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rabbi
 Casket Wagon (1) 500
 Physician _____
 County or City Burial _____
 Automobiles 3 x 5 1500
 Baggage or Express Train No. _____
 2500

6255 Carey Hand Funeral Home Bowness

Name of deceased Baby Bowness
Date of Death Mar 3 1921 9 M
Cause of death
Place of Death O G. St. M
Residence O'Connell
Age 1 Y'rs 4 Mo's 20 Days
Weight Height, ft. in. Eyes
Funeral at Grave
Date Tue Mar 3 1921 4 P M
Account charged J. H. Bowness
Address O'Connell
Account guaranteed Cash -
Address

Embalming
Robe, Suit, Dress
Underwear and Hose
Casket 2-0 H 2 S
Casket with Copper Lin.
Style of Casket Syn H.M.
No. of Casket
Outside Box Reg.
Shipping Case or Vault
Handles Small
Pillow Set
Name Plate
Cemetery O'Connell
Section Lot

I Other Graves
X Grave on this date



Cremation
Single Grave
Opening and Closing Grave by Friends
Body Shipped to
R. R. Ticket
Cash advanced
Telegram
Minister At O'Connell.
Casket Wagon
Physician Dr. Asin Cup
County or City Burial
Automobiles
Baggage or Express Train No.
People Very Poor

10 00

10 00

6256 Carey Hand Funeral Home

Name of deceased Margaret G. Rogers

Date of Death Nov 2nd 1921 M

Cause of death Secondary Pneumonia

Place of Death Res M

Residence Ft Lauderdale

Age 60 Y's 6 Mo's 10 Days

Weight 180 Height, 5 ft. 9 in. Eyes

Funeral at Ft Lauderdale

Date Nov 192 M

Account charged Fleming F. Home

Address Ft Lauderdale Fla

Account guaranteed Cleech

Address

Embalming Cremation 50.00

Robe, Suit, Dress

Underwear and Hose Body arrived

Casket by auto - 12:30

Casket with Copper Lin. Mon Night

Style of Casket Nov - 2 - 31

No. of Casket

Outside Box Body cremated

Shipping Case or Vault 9-9 AM

Handles thru Nov 3-31

Pillow Set

Name Plate

Cemetery

Section Lot

Copper Can E

I Other Graves

X Grave on this date

Cremation Ashes to be

Single Grave sent to

Opening and Closing Grave Nov 7

Body Shipped to Fleming

R. R. Ticket Fleming Home

Cash advanced

Telegram 326 E. Las. Olas

Minister Blanch

Casket Wagon Ft Lauderdale

Physician Fla

County or City Burial

Automobiles

Baggage or Express Train No.

Expressed Nov 7-31

50.00

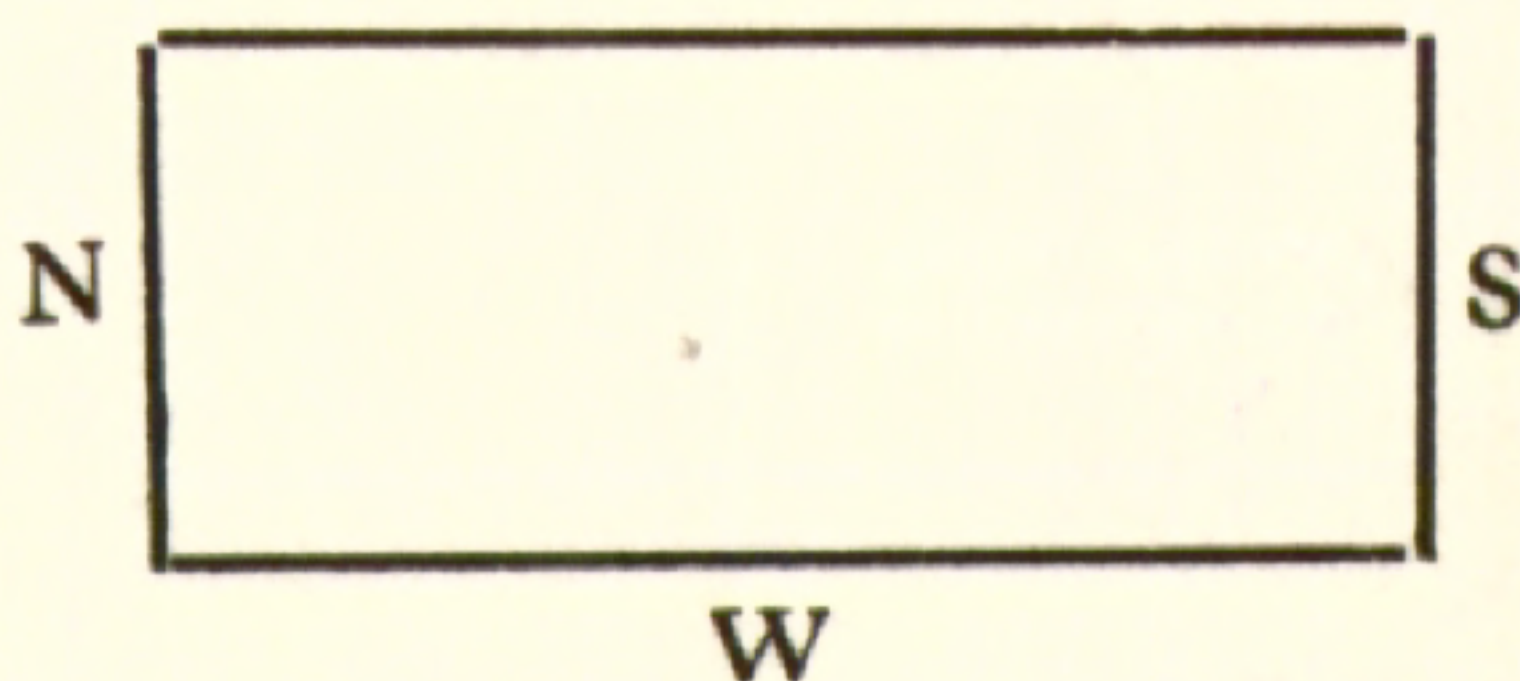
6257 Carey Hand Funeral Home

Name of deceased John Beasley
 Date of Death Nov 3 1921 M
 Cause of death _____
 Place of Death Res - M
 Residence East of Maitland
 Age 79 Y's 3 Mo's _____ Days _____
 Weight 160 Height 5 ft. 8 in. Eyes _____
 Funeral at Lake Howell Church
 Date Nov 4 - 31 1921 4-P M
 Account charged J. W. Mc Lamb
 Address Maitland R. F. D.
 Account guaranteed _____
 Address _____

Embalming & Dressing 35.00
 Robe, Suit, Dress Belts - 15.00
 Underwear and Hose ✓
 Casket 6-3- Grey Cope 135.00
 Casket with Copper Lin. ✓
 Style of Casket Oct 3 - P. Top
 No. of Casket 1402 -
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Short Ext Ends
 Pillow Set yes
 Name Plate ✓
 Cemetery Lake Howell
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation _____

Single Grave _____

Opening and Closing Grave Del 34 10.00

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister From Winter Park 5.00

Casket Wagon (1)

Physician Dr Gardner

County or City Burial _____

Automobiles S & S 15.00

Baggage or Express Train No. 215.00

6258 Carey Hand Funeral Home

Name of deceased John W. Reeder
 Date of Death Nov 4 1921 1:15 M
 Cause of death Organic heart disease
 Place of Death Res M
 Residence 117 Grace
 Age 68 Y's 5 Mo's 6 Days
 Weight 150 Height, 5 ft. 10 in. Eyes
 Funeral at Res 117 Grace st
 Date Fri Nov 6 - 1921 2:30 P M
 Account charged Mrs J. W. Reeder
 Address 117 Grace st
 Account guaranteed Estate
 Address

Embalming + Dressing 35.00

Robe, Suit, Dress ✓

Underwear and Hose ✓

Casket 6-3 Oak Plush - 295.00

Casket with Copper Lin. ✓

Style of Casket R. C. State 1/2 C

No. of Casket Decorative

Outside Box Reg

Shipping Case or Vault ✓

Handles Ext OS 17 in

Pillow Set yes

Name Plate

Cemetery Greenwood

Section S Lot 6

head of grave North E

I Other Graves

X Grave on this date

N 1/2 of lot W

for sale Burial Lot 250.00

Cremation

Single Grave ✓

Opening and Closing Grave Del. Box 10.00

Body Shipped to Car Min 5.00

R. R. Ticket Car - P. B. 5.00

Cash advanced closed car 5.00

Telegram

Minister Rev Sumner 5.00

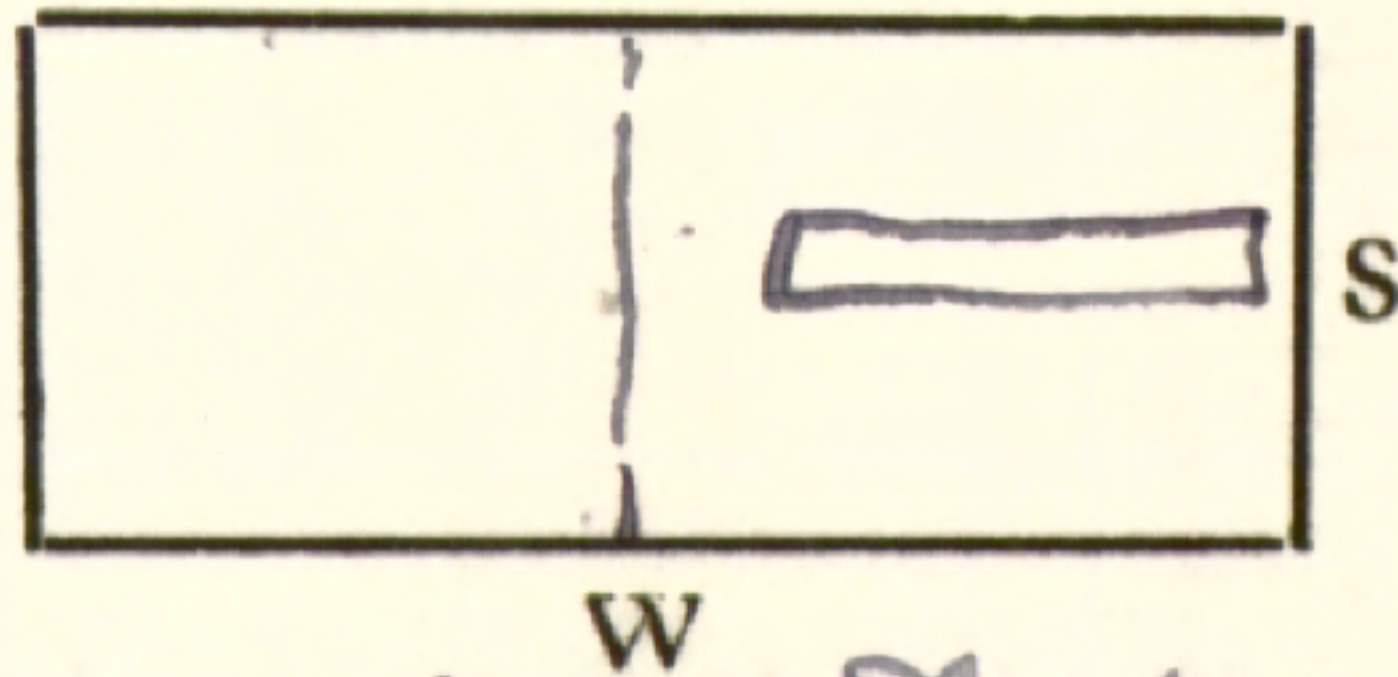
Casket Wagon (2) 5.00

Physician Dr Miles Robinson

County or City Burial ✓

Automobiles S + S 15.00

Baggage or Express Train No. 625 500



6259 Carey Hand Funeral Home

Name of deceased Willie P. Oliver
 Date of Death Nov 1 - 1923 M
 Cause of death Cancer of Face
 Place of Death Miami M
 Residence Fla
 Age 70 Y's Mo's Days
 Weight 110 Height, 5 ft. 3 in. Eyes br
 Funeral at
 Date 1923 M
 Account charged W. L. Philbrick
 Address 712, Miami
 Account guaranteed
 Address
 Embalming Cremation 50.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket Body arrive
 Casket with Copper Lin. by express
 Style of Casket Transit 91-
 No. of Casket 150 P.M.
 Outside Box Wed - Nov - 4 - 31
 Shipping Case or Vault ☒
 Handles Body Cremated
 Pillow Set 9 - 2 m Thurs
 Name Plate Nov 5 - 31
 Cemetery
 Section Copper Can Lot E
 I Other Graves ☐
 X Grave on this date ☐
 Cremation will give instructions where to Express urn
 Single Grave ☐
 Opening and Closing Grave ☐
 Body Shipped to ☐
 R. R. Ticket ☐
 Cash advanced ☐
 Telegram ☐
 Minister ☐
 Casket Wagon ☐
 Physician ☐
 County or City Burial ☐ 50.00
 Automobiles ☐
 Baggage or Express Train No. ☐

6260 Carey Hand Funeral Home

Name of deceased W. F. Cooper
Date of Death Nov 4 1921 8 30 PM
Cause of death Cerebral Hemorrhage
Place of Death 225 E. Rob ave M
Residence _____
Age 74 Y's 1 Mo's 11 Days _____
Weight 150 Height, 5 ft. 8 in. Eyes _____
Funeral at no service
Date _____ 1921 M
Account charged Mrs H. N. Puntzke
Address 570 - W - 189 St N. Y. City
Account guaranteed OK -
Address _____
Embalmg + Dressing 35.00
Robe, Suit, Dress ✓
Underwear and Hose ✓
Casket C + S - 25.00
Casket with Copper Lin. ✓
Style of Casket Coffin
No. of Casket Cremation 50.00
Outside Box ✓
Shipping Case or Vault ✓
Handles ✓
Pillow Set ✓
Name Plate ✓
Cemetery ✓
Section _____ Lot _____
E
I Other Graves _____
X Grave on this date _____
Cremation Express Am W
Left Greenwood Cemetery
N.Y. New York
Single Grave Nov 11 - 1931
Opening and Closing Grave _____
Body Shipped to _____
R. R. Ticket Copper Am 10.00
Cash advanced ✓
Telegram ✓
Minister none
Casket Wagon (1) 5.00
Physician Dr J S M. Evans
County or City Burial _____
Automobiles _____
Baggage or Express Train No. _____

125.00

626/ Carey Hand Funeral Home

Name of deceased Mrs Katherine Goodall
 Date of Death Nov 3 1921 M
 Cause of death Septic Parotinitis
 Place of Death St Petersburg M
 Residence St Petersburg
 Age 91 Y'rs 10 Mo's 3 Days
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at St Petersburg
 Date _____ 1921 M
 Account charged John S Rhodes
 Address F.D. St Petersburg Fla
 Account guaranteed OK
 Address _____
 Embalming Cremation 50.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 Oct O.T.
 Casket with Copper Lin. Body enoid
 Style of Casket hy auto
 No. of Casket 730 P M
 Outside Box Thurs. Nov 5-31
 Shipping Case or Vault _____
 Handles Body cremated
 Pillow Set _____
 Name Plate 8 P.M. Nov 5-31
 Cemetery _____
 Section _____ Lot _____
Coffin can E
 I Other Graves _____
 X Grave on this date _____
 W
 Cremation urn - Expressed
 Single Grave to John S Rhodes
 Opening and Closing Grave _____
 Body Shipped to Sum Nov 7-31
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

50.00

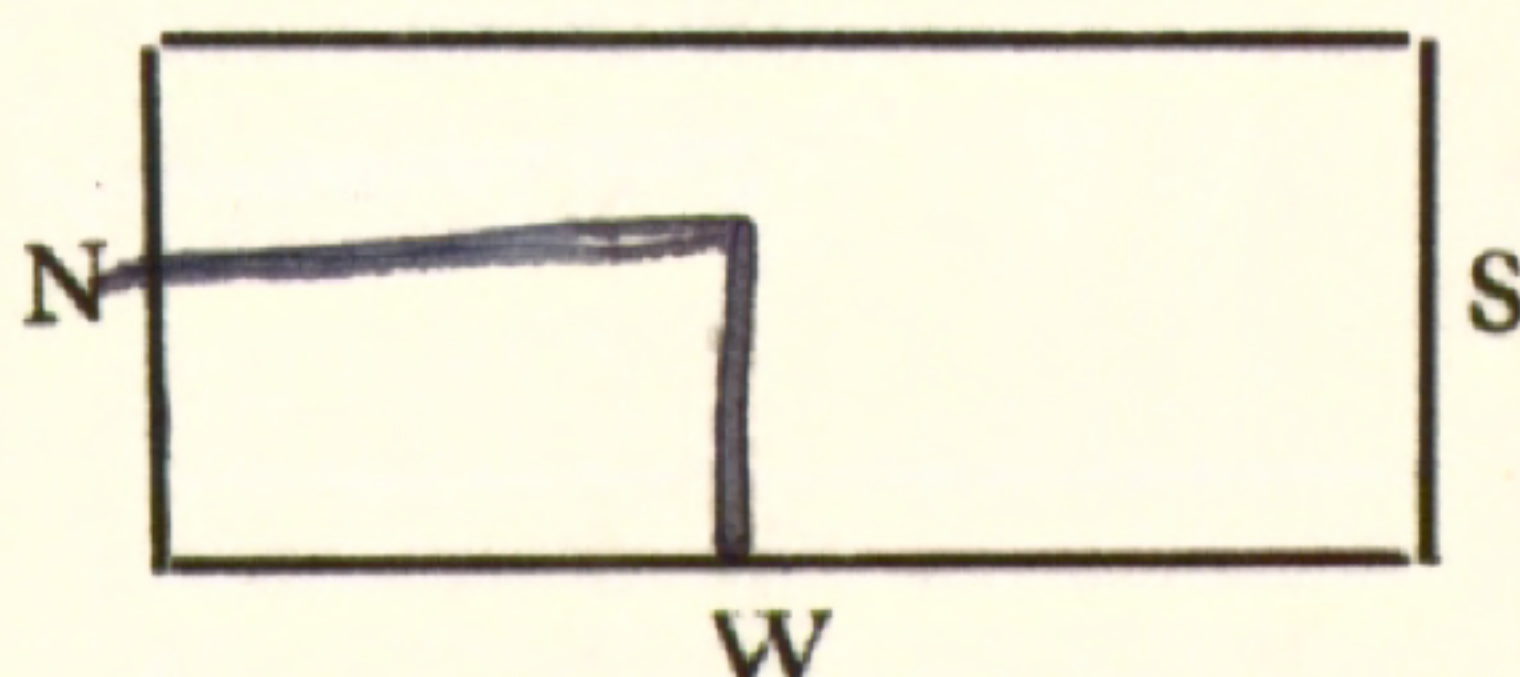
6242 Carey Hand Funeral Home

Name of deceased John J. Worsham
 Date of Death Nov 5 1921 9:45 P M
 Cause of death Pulmonary Edema
 Place of Death Res M
 Residence 718 West Con Ave
 Age 56 Y's = 16 Mo's 16 Days
 Weight 160 Height, 5 ft. 8 in. Eyes
 Funeral at Chapel
 Date Fri Nov 6 1921 4:30 P M
 Account charged Mrs J. J. Worsham
 Address 718 West Con Ave
 Account guaranteed Insurance

Address
 Embalming + Dressing
 Robe, Suit, Dress Suits
 Underwear and Hose
 Casket 6-3 br Doe
 Casket with Copper Lin.
 Style of Casket Oct-3-P.T.
 No. of Casket 1401-S
 Outside Box R+G
 Shipping Case or Vault
 Handles Ext Spt Fin
 Pillow Set yes
 Name Plate
 Cemetery Greenwood
 Section N N.W. 1/4 Lot - 27
 E

I Other Graves

X Grave on this date



Cremation Burial Lot 12 50
 Single Grave ✓
 Opening and Closing Grave T+S 10.00
 Body Shipped to ✓
 R. R. Ticket ✓
 Cash advanced ✓
 Telegram ✓
 Minister Rev Bookart
 Casket Wagon (1) 5.00
 Physician D. Beandahl
 County or City Burial ✓
 Automobiles S+S 15.00
 Baggage or Express Train No. ✓ 254.50

250.00

has small Met insure

6243 Carey Hand Funeral Home

Name of deceased Mrs Grace M Osborn
Date of Death Nov 1 1921 M
Cause of death Cerebral Hemorrhage
Place of Death Miami M
Residence Miami
Age 38 Y'rs Mo's Days
Weight Height, ft. in. Eyes
Funeral at
Date 1921 M
Account charged Gautier Funeral Home
Address Miami Fla
Account guaranteed OK
Address
Embalming Cremation 50 00
Robe, Suit, Dress
Underwear and Hose Body arrived
Casket by Express
Casket with Copper Lin. Thurs
Style of Casket NW-5-31
No. of Casket train # 91
Outside Box
Shipping Case or Vault Body cremated
Handles NW-5-4-P. M
Pillow Set
Name Plate Aster Express
Cemetery Gautier Funeral
Section Home Lot
Miami Fla E
I Other Graves N NW-8-31 S
X Grave on this date W
Cremation
Single Grave
Opening and Closing Grave
Body Shipped to
R. R. Ticket
Cash advanced
Telegram
Minister
Casket Wagon
Physician
County or City Burial 50 00
Automobiles
Baggage or Express Train No.

6264 Carey Hand Funeral Home

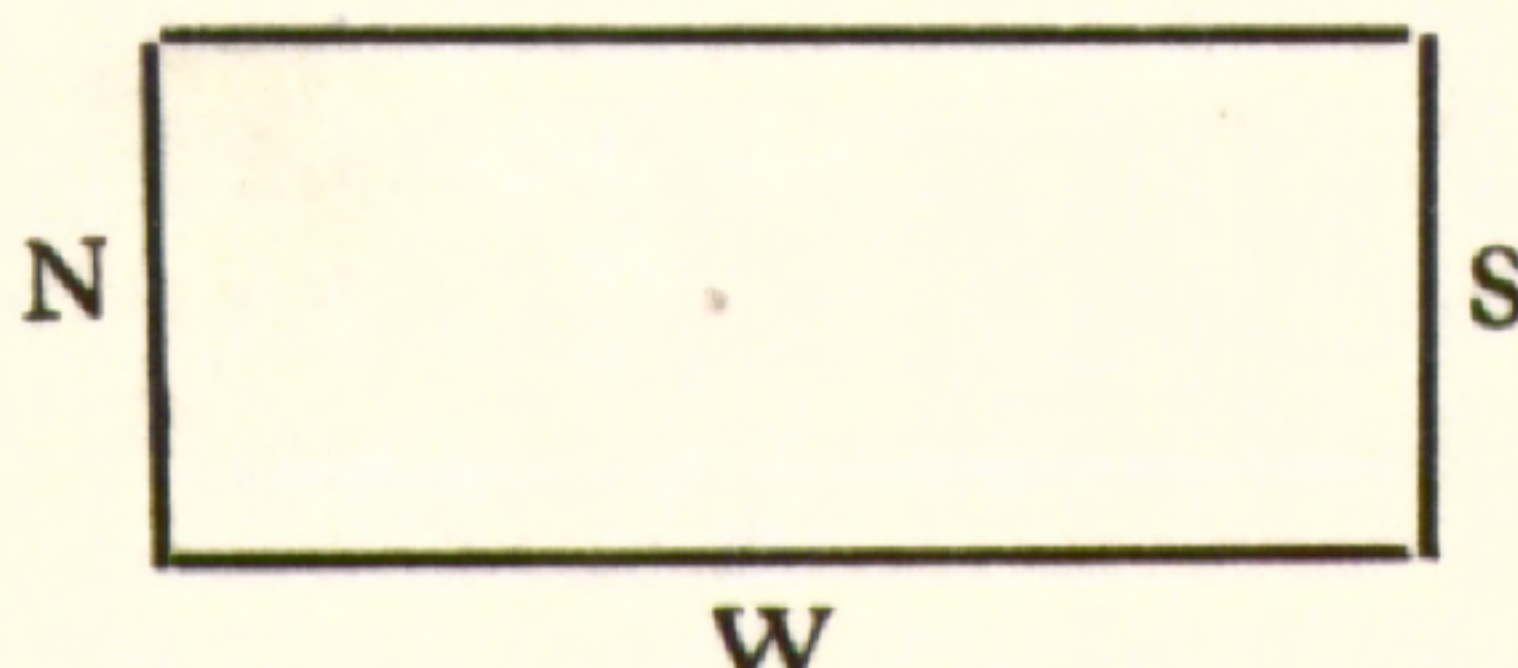
Name of deceased Helen Mary Starbuck
 Date of Death Nov 6 1931 2:10 A. M
 Cause of death Gangrene Left leg & foot
 Place of Death Fila Sant M
 Residence Ashville N. C.
 Age 17 Y'rs 1 Mo's 3 Days
 Weight 135 Height, 5 ft. 6 in. Eyes Brk
 Funeral at Chapel
 Date Sat Nov 7 1931 - 11 A M
 Account charged Victor Starbuck
 Address Ashville N. C.
 Account guaranteed _____

Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 5-9-6 1/2 Doe 150.00
 Casket with Copper Lin. ✓
 Style of Casket Oct 3-P.
 No. of Casket 1401-5
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles Ext Spt Trm
 Pillow Set yes
 Name Plate ✓
 Cemetery Cremation 50.00
 Section _____ Lot _____

Coffin Case

I Other Graves

X Grave on this date



Cremation Body cremated
 Single Grave Sat-11-7-31
 Opening and Closing Grave 3-P. M.

Body Shipped to _____
 R. R. Ticket Copper Run 5.00
 Cash advanced amb S-

Telegram _____
 Minister Rev Fanner 5.00
 Casket Wagon (1)

Physician Dr. Burles
 County or City Burial 245.00

Automobiles _____

Baggage or Express Train No. _____

was in auto wreck in H. Park
with Williamson bil Nov-29-31
left foot crushed gangren set in
took leg off below knee-

6245 Carey Hand Funeral Home

Name of deceased Arthur Heinisch
 Date of Death Fri Nov 6 1921 P M
 Cause of death Reflexes Ans. Uremia
 Place of Death Res M
 Residence 615 Winter
 Age 65 Y'rs 10 Mo's 14 Days
 Weight 160 Height, 5 ft. 8 in. Eyes
 Funeral at Chapel
 Date Nov 8 31 192 330 M P
 Account charged Mrs Arthur Heinisch
 Address 615 Winter Park ave
 Account guaranteed Insurance
 Address
 Embalming + Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 Gr Doe 125.00
 Casket with Copper Lin. ☒
 Style of Casket Oct O.T.
 No. of Casket 14101 N.O.
 Outside Box ☒
 Shipping Case or Vault air Seal 32 150.00
 Handles Ext spt Trin
 Pillow Set yes
 Name Plate at Rest
 Cemetery Greenwood
 Section S. War Vet Lot
 E
 I Other Graves

Grave
 # 7
 Ber 11

 X Grave on this date
 W
 Cremation P. B. car 5.00
 Single Grave
 Opening and Closing Grave T & D 10.00
 Body Shipped to closed car 5.00
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Stully C S 5.00
 Casket Wagon 1
 Physician Dr Redding
 County or City Burial
 Automobiles S & S 15.00
 Baggage or Express Train No. 350.00
S - War Vet at grave

6266

Carey Hand Funeral Home

Name of deceased Mrs. Alice Greenwood
 Date of Death Nov 6th 1923 P. M
 Cause of death acute dilatation of heart
 Place of Death Res. M
 Residence 1412 Vernon St
 Age 51 Y'rs Mo's Days
 Weight Height, ft. in. Eyes
 Funeral at Chapel
 Date 1923 11 4:30 P. M
 Account charged Carl P. Greenwood
 Address 1 Hillside Ave
 Account guaranteed
 Address
 Embalming & Dressing
 Robe, Suit, Dress pink
 Underwear and Hose yes
 Casket 6-3 in cups
 Casket with Copper Lin.
 Style of Casket Syn Fi T
 No. of Casket 72 Tampin
 Outside Box Reg
 Shipping Case or Vault
 Handles Shut
 Pillow Set yes
 Name Plate at rest
 Cemetery Greenwood
 Section Lot

E

I Other Graves

X Grave on this date

N

S

W

Cremation Single Grave WhiteOpening and Closing Grave Body Shipped to MumieR. R. Ticket Cash advanced Telegram Minister Rev BaydsCasket Wagon No ChgPhysician Dr ReddingCounty or City Burial Automobiles S + SBaggage or Express Train No. Cash - 25.0020.00 P. M. -wakes / 2Dr Emrich

25.00
 75.00
 3.00
 50.00

5.00
 10.00
 2.00

15.00

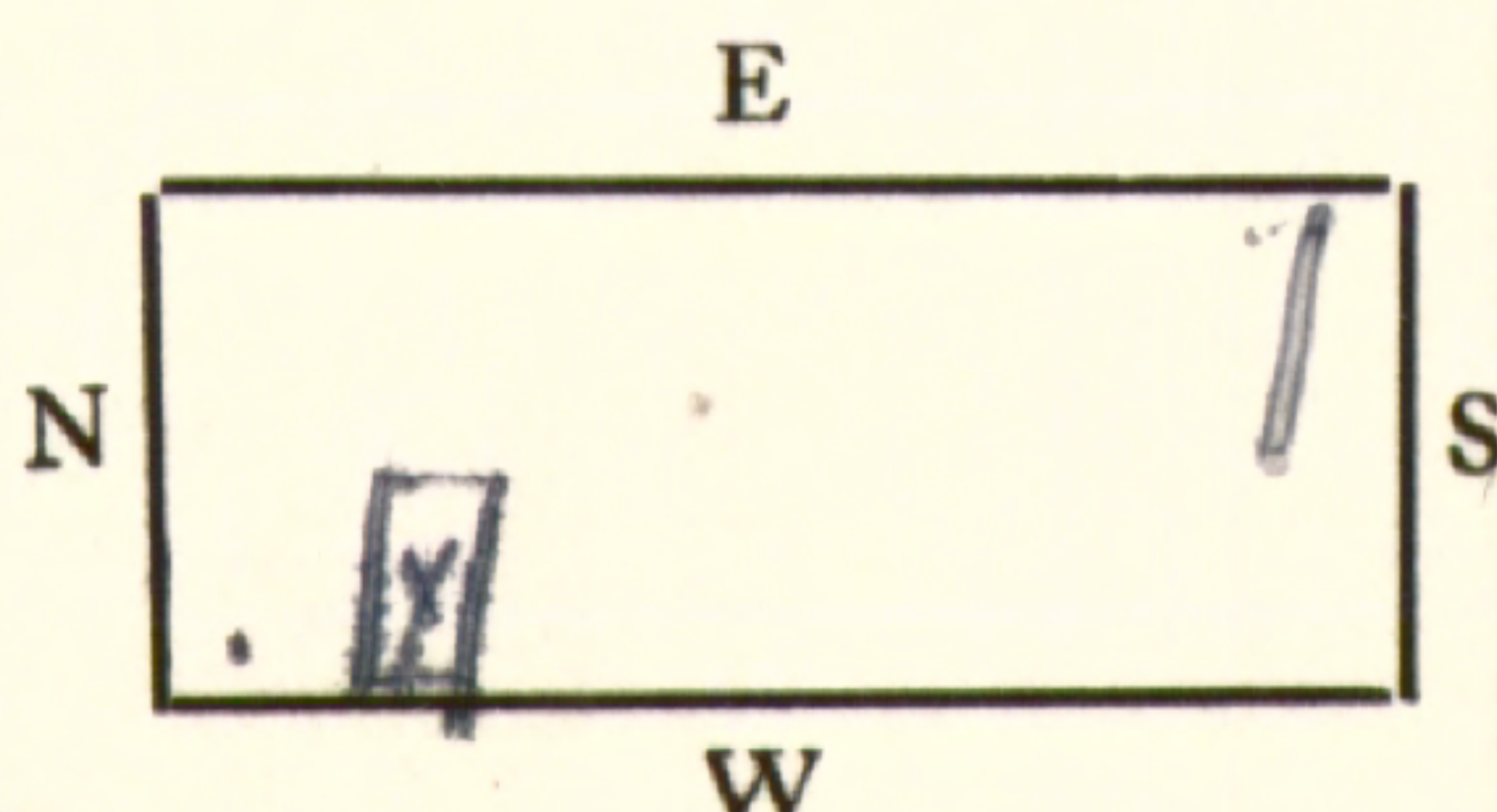
125.00

6267 Carey Hand Funeral Home

Name of deceased Mrs Angie L Brayell
 Date of Death Nov-7 1931 230 M a
 Cause of death Myocarditis
 Place of Death Res - M
 Residence Longwood
 Age 70 Y'rs - Mo's 10 Days
 Weight 135 Height, 5 ft. 6 in. Eyes
 Funeral at Chapel
 Date Sun Nov 8 1931 230 M P
 Account charged D. W. Brayell
 Address Longwood
 Account guaranteed Estate
 Address
 Embalming + Dressing
 Robe, Suit, Dress Light flesh
 Underwear and Hose
 Casket 6-3 Gr Cup
 Casket with Copper Lin. ✓
 Style of Casket Oct OT
 No. of Casket Tampa
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext Spt Trm
 Pillow Set yes
 Name Plate at Rest
 Cemetery Greenwood
 Section U Lot 2

I Other Graves

X Grave on this date



Cremation Music

Single Grave

Opening and Closing Grave T + S

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister Rev Hodnot - H. G.

Casket Wagon (1)

Physician D. W. Hotard

County or City Burial

Automobiles 5 + 5

Baggage or Express Train No.

20 00
3 00
125 00

5 00

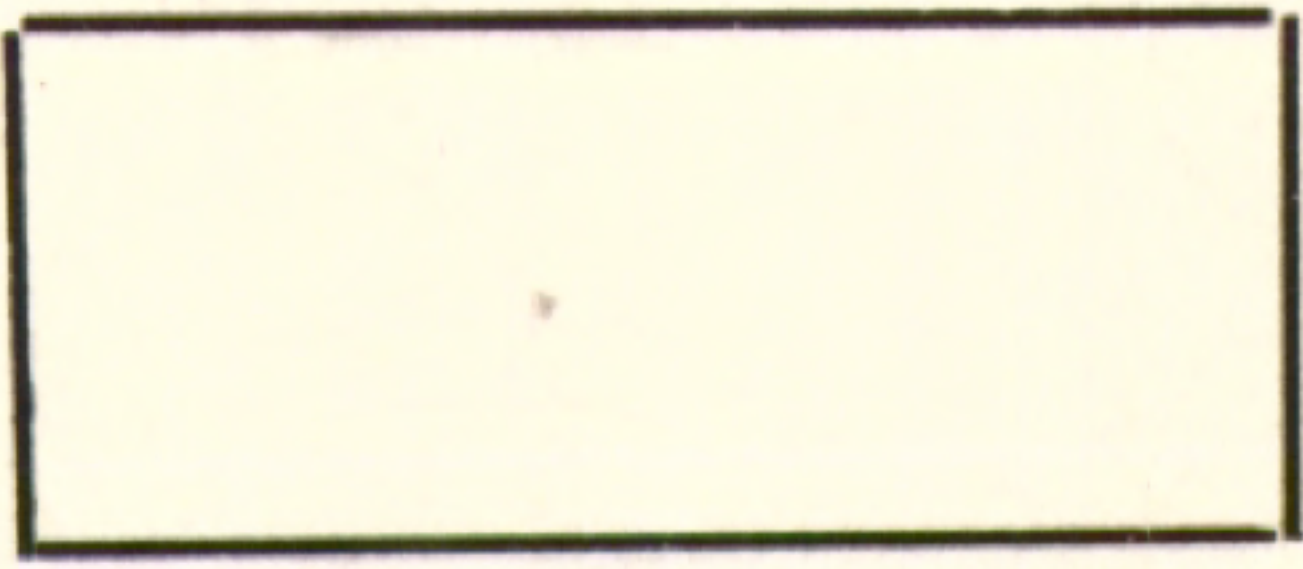
10 00

7 50

15 00

185 50

6268 Carey Hand Funeral Home

Name of deceased Mrs. Eliza C. Bonfield
 Date of Death Nov 7 1921 5:30 M P
 Cause of death Arterio Sclerosis
 Place of Death Res M
 Residence 412 - South Lake
 Age 87 Y's 5 Mo's 18 Days
 Weight 130 Height, 5 ft. 5 in. Eyes
 Funeral at Esperanza Church
 Date Mon - Nov 9 1921 AM
 Account charged Mrs. Edith Jackson
 Address 412 South Lake st
 Account guaranteed
 Address
 Embalming + Dressing 35 00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 5-9 Guy Doe 150 00
 Casket with Copper Lin. ✓
 Style of Casket Oct 3-P.T
 No. of Casket 1401-S
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext 3/4 Fin
 Pillow Set yes
 Name Plate at Rest
 Cemetery Oak Hill
 Section A Lot 331
 E
 I Other Graves
 X Grave on this date
 N  S
 W
 Cremation Car Minister 5 00
 Single Grave
 Opening and Closing Grave Del B4 10 00
 Body Shipped to ✓
 R. R. Ticket ✓ Car for Family 5 00
 Cash advanced ✓
 Telegram ✓
 Minister Dean Johnson
 Casket Wagon
 Physician Dr. Redding
 County or City Burial
 Automobiles 3 + 5 15 00
 Baggage or Express Train No.

\$220 00

6269 Carey Hand Funeral Home

Name of deceased Samuel Lamy Smith
 Date of Death Nov 2 1921 9:30 P M
 Cause of death Enterocolitis
 Place of Death at G.H. M
 Residence Ocala Vista
 Age Y'rs 4 Mo's 20 Days
 Weight Height, ft. in. Eyes
 Funeral at Grave
 Date Sun Nov 8 1921 4-P M
 Account charged Fred Smith
 Address Ocala Vista B4 184
 Account guaranteed
 Address

Embalming

Robe, Suit, Dress

Underwear and Hose

Casket 2-0 W-L

1250

Casket with Copper Lin. ✓

Style of Casket Sgt H. M

No. of Casket

Outside Box Reg

Shipping Case or Vault ✓

Handles Small

Pillow Set

Name Plate O D

Cemetery Oak Ridge

Section Pinecastle Lot

E

I Other Graves

X Grave on this date

N

S

W

Cremation Bought Casket

Single Grave done their own

Opening and Closing Grave work

Body Shipped to

R. R. Ticket People Very Poor

Cash advanced

Telegram

Minister

Casket Wagon

Physician Dr Osineup

County or City Burial

Automobiles

Baggage or Express Train No.

1250

6270 Carey Hand Funeral Home

Name of deceased *Pauline McLeod*
Date of Death *Nov-8* 19*31*- *2-9* M
Cause of death *Carcinemia of Uterus*
Place of Death *Res* M
Residence *245 1/2 West Jackson*
Age *35* Y'rs *8* Mo's *27* Days
Weight _____ Height, _____ ft. _____ in. Eyes _____
Funeral at *Grave*
Date *Mon - Nov 9-* 19*31* *230 P* M
Account charged *City*

Address _____
Account guaranteed _____
Address _____

Embalming _____

Robe, Suit, Dress _____

Underwear and Hose _____

Casket *6-3 Coffin*

Casket with Copper Lin. _____

Style of Casket _____

No. of Casket _____

Outside Box *Reg*

Shipping Case or Vault _____

Handles *Ball*

Pillow Set _____

Name Plate _____

Cemetery *Greenwood*

Section _____ Lot _____

E

I Other Graves

N

X Grave on this date

S

W

Cremation _____

Single Grave *White*

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister *Byrd*

Casket Wagon _____

Physician *Dr. Harner*

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

People Very Poor

14 00

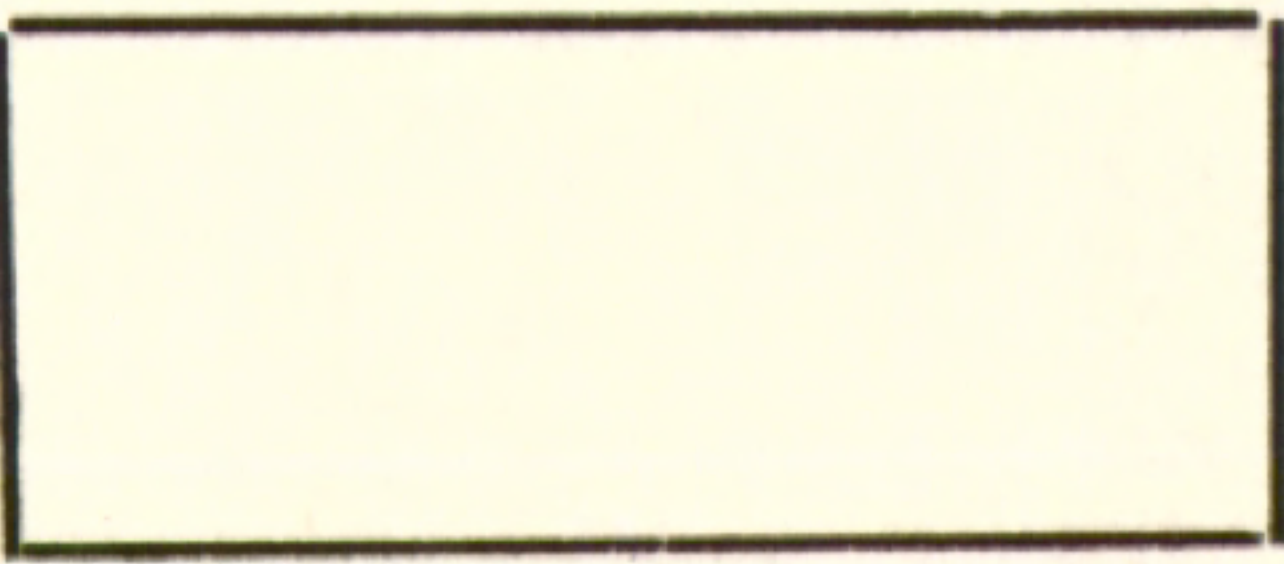
14 00

6271 Carey Hand Funeral Home

Name of deceased *Mr James M Bass*
 Date of Death *Nov 5* 192*1* M
 Cause of death *uremia*
 Place of Death *Res* M
 Residence *Sarasota Fla*
 Age *68* Y'rs *11* Mo's *19* Days
 Weight *160* Height, *5* ft. *8* in. Eyes
 Funeral at *Res*
 Date 192*1* M
 Account charged *Thacker & Van Gilder*
 Address *T. S. Sarasota Fla*
 Account guaranteed
 Address
 Embalming *Cremation* *50 00*
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. *Body covered*
 Style of Casket *by Express*
 No. of Casket *Train 78*
 Outside Box *Sat Night*
 Shipping Case or Vault *Nov 7-31*
 Handles
 Pillow Set *Body cremated*
 Name Plate *9-AM Sun*
 Cemetery *Nov 8-31*
 Section Lot
Copper Can E
 I Other Graves
 X Grave on this date
 Cremation *urn Exposed*
 Single Grave *E Thacker +*
 Opening and Closing Grave *Van Gilder*
 Body Shipped to
 R. R. Ticket *Wed Nov-11-31*
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

50 00

6272 Carey Hand Funeral Home

Name of deceased Mrs Lottie Charlotte Wilkins
 Date of Death Nov 8 1921 11:50 P. M.
 Cause of death Carcinoma of liver
 Place of Death Res - M
 Residence 2407 Low Shore
 Age _____ Y's _____ Mo's _____ Days _____
 Weight 125 Height, 5 ft. 6 in. Eyes _____
 Funeral at Chapel
 Date Tue - Nov 10 - 1921 3-P M
 Account charged _____
 Address _____
 Account guaranteed Estate
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 br Cup 125.00
 Casket with Copper Lin. ☒
 Style of Casket Ext 3-P.T
 No. of Casket _____ Tampa
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext Spt Fin
 Pillow Set yes
 Name Plate at Rest
 Cemetery Rest
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N  S
 W
 Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Colby Wis
 R. R. Ticket _____
 Cash advanced Express 108.72
 Telegram _____
 Minister Rev Sulten
 Casket Wagon (2) 10.00
 Physician Dr Brandahl
 County or City Burial ☒
 Automobiles ☒
 Baggage or Express Train No. 76
Tues - Night Nov - 10 - \$278.72

6273 Carey Hand Funeral Home

Name of deceased Chas. E. Alfred
 Date of Death Nov 2nd 1923 M
 Cause of death Cerebral Hemorrhage
 Place of Death Homestead Fla M
 Residence _____
 Age 57 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 192 _____ M
 Account charged Geo. W. Turner Und Co
 Address Homestead Fla
 Account guaranteed check
 Address _____
 Embalming Cremation 50 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket by express 1:50
 Outside Box P.M. Tuesday
 Shipping Case or Vault Nov 10 to 31
 Handles _____
 Pillow Set Body Cremated
 Name Plate 2:30 P.M. Tuesday
 Cemetery Nov 10 - 1931
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N S
 W
 Cremation Ashes expressed
 Single Grave to Geo. W.
 Opening and Closing Grave Turner
 Body Shipped to Und Co.
 R. R. Ticket Homestead Fla
 Cash advanced Nov -
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

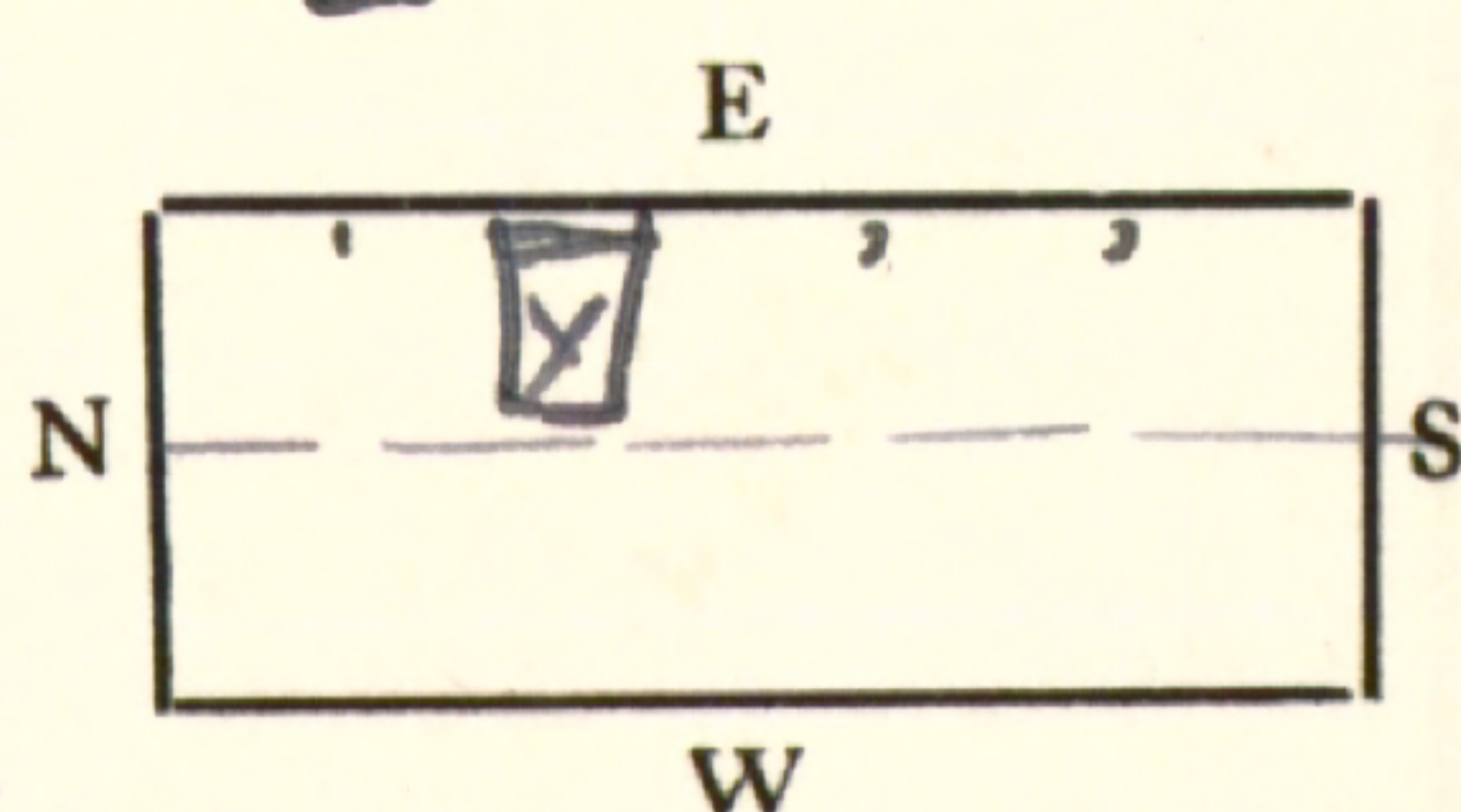
50 00

6274 Carey Hand Funeral Home

Name of deceased James B Moore
 Date of Death Nov 13 1921 12 30 M A
 Cause of death Paralytic Illness
 Place of Death G. H. M
 Residence 609 Sheridan Blvd
 Age 43 Y'rs 9 Mo's 18 Days
 Weight 150 Height, 5 ft. 10 in. Eyes
 Funeral at Chapel
 Date Sat - 4 - PM 1921 48 M
 Account charged Mrs James B Moore
 Address 609 Sheridan Blvd
 Account guaranteed small insurance

Address
 Embalming + Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 Guy Cup 100.00
 Casket with Copper Lin. ✓
 Style of Casket Ext - OT
 No. of Casket 8471 - Tampa
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext - Spt Tr
 Pillow Set yes
 Name Plate at Rest
 Cemetery Greenwood
 Section S E 1/2 Lot 41

Burial Lot
 Bought Direct
 I Other Graves 88750
 X Grave on this date
See
Graves + Geo Cross



Cremation
 Single Grave Whole 5.00
 Opening and Closing Grave 10.00
 Body Shipped to ✓
 R. R. Ticket ✓
 Cash advanced ✓
 Telegram
 Minister Dean Johnson
 Casket Wagon No Chg
 Physician Dr Christ
 County or City Burial
 Automobiles S.S. 15.00
 Baggage or Express Train No. 160.00

People Very Poor

6275 Carey Hand Funeral Home

Name of deceased John Walker Seeland
Date of Death Nov 13 1921 7 A M
Cause of death acute Edema of Lungs
Place of Death Res M
Residence Conway Road Deland
Age 86 Y'rs 11 Mo's 17 Days
Weight 150 Height, 5 ft. 6 in. Eyes
Funeral at Dest
Date _____ 192 _____ M
Account charged Mrs Emma Wolfe
Address Deland R-1-Box-14-K
Account guaranteed Estate
Address _____
Embalming + Dressing 35 00
Robe, Suit, Dress ☒
Underwear and Hose ☒
Casket 6-3-Gr Bid-C- 250 00
Casket with Copper Lin. ☒
Style of Casket R. C. State
No. of Casket 1848 - Tampa
Outside Box Reg
Shipping Case or Vault ☒
Handles Ext. Q. Sil. Fin
Pillow Set yes
Name Plate Name + Date
Cemetery Dest
Section _____ Lot _____
E
I Other Graves ☐ N ☐ S
X Grave on this date ☐
W
Cremation Burial Soc. Charleston
Single Grave Ohio
Opening and Closing Grave
Body Shipped to Springfield Ohio
R. R. Ticket (2) 73 80
Cash advanced Pullman 11 25
Telegram
Minister
Casket Wagon (2) 10 00
Physician Dr J J McEuen
County or City Burial 380 05
Automobiles
Baggage or Express Train No. 76
Sun Night 11-15-31

Daughter

6276 Carey Hand Funeral Home

Name of deceased Christian Julius
 Date of Death Nov-13 1921 A M
 Cause of death Auto + Train Collision Fractured Skull
 Place of Death _____
 Residence Orlando R.F.D #4 - Box 391
 Age 63 Y'rs 10 Mo's 7 Days
 Weight 200 Height, 5 ft. 9 in. Eyes _____
 Funeral at Grave
 Date Sat Nov 14 1921 11 A M
 Account charged Mrs Christian Julius
 Address Orlando R.F.D #4 - Box - 391
 Account guaranteed S.A.L. R.R.
 Address _____
 Embalming _____ 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 - Grey euf. 125.00
 Casket with Copper Lin. _____
 Style of Casket Oct - Oct.
 No. of Casket 8174 - 7
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext Spt Fin
 Pillow Set yes
 Name Plate at Rest
 Cemetery Druid
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 W
 Cremation _____
 Single Grave _____
 Opening and Closing Grave Del 13 & Oct 10.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Bio Student 5.00
 Casket Wagon (1)
 Physician Dr. Gray
 County or City Burial _____
 Automobiles S & S - 20.00
 Baggage or Express Train No. _____ 195.00

was struck by S.A.L. train
 Near Lockhart Fri - 11-13-21 was badly
 crushed Mrs Julius was not injured

6277

Carey Hand Funeral Home

Name of deceased Ms. Lillian Stone Brewer
 Date of Death Sat Nov 14 1921 2 A M
 Cause of death _____
 Place of Death Res M
 Residence 1351 Richmond Road Winter Park
 Age 54 Y'rs 5 Mo's 24 Days
 Weight 135 Height, 5 ft. 6 in. Eyes _____
 Funeral at Cong Church
 Date Mon - Nov - 14 1921 3 P M
 Account charged Harry R Brewer
 Address Richmond Rd Winter Park
 Account guaranteed Estate
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 5-9- in 5 in 135.00
 Casket with Copper Lin. ☒
 Style of Casket Get 3-R 9
 No. of Casket 1401-5-
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate at Rest
 Cemetery Mantland
 Section _____ Lot _____
 _____ E
 I Other Graves _____
 X Grave on this date _____
 _____ N _____ S
 _____ W
 Cremation Can - R B 5.00
 Single Grave _____
 Opening and Closing Grave 9+ D 10.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev Vincent 5.00
 Casket Wagon to Res
 Physician Dr. Howardt Burks
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. 200500

4278

Carey Hand Funeral Home

Baby

Name of deceased Charlotte Ann Hoter

Date of Death Nov 13 1921 M

Cause of death Spina Bifida

Place of Death Per M

Residence St Petersburg

Age ✓ Y'rs ✓ Mo's 9 Days

Weight _____ Height, _____ ft. _____ in. Eyes _____

Funeral at St Petersburg

Date _____ 1921 M

Account charged Endicott Funeral Home

Address St Petersburg Fla

Account guaranteed OK

Address _____

Embalming Cremation 10 00

Robe, Suit, Dress _____

Underwear and Hose Body arrived

Casket by Auto 12 30 - P M

Casket with Copper Lin. Sat 11-14-31

Style of Casket _____

No. of Casket Body cremated

Outside Box 4 - P. M. Sat

Shipping Case or Vault 11-14-31

Handles _____

Pillow Set Asher Expressed to

Name Plate Endicott Funeral

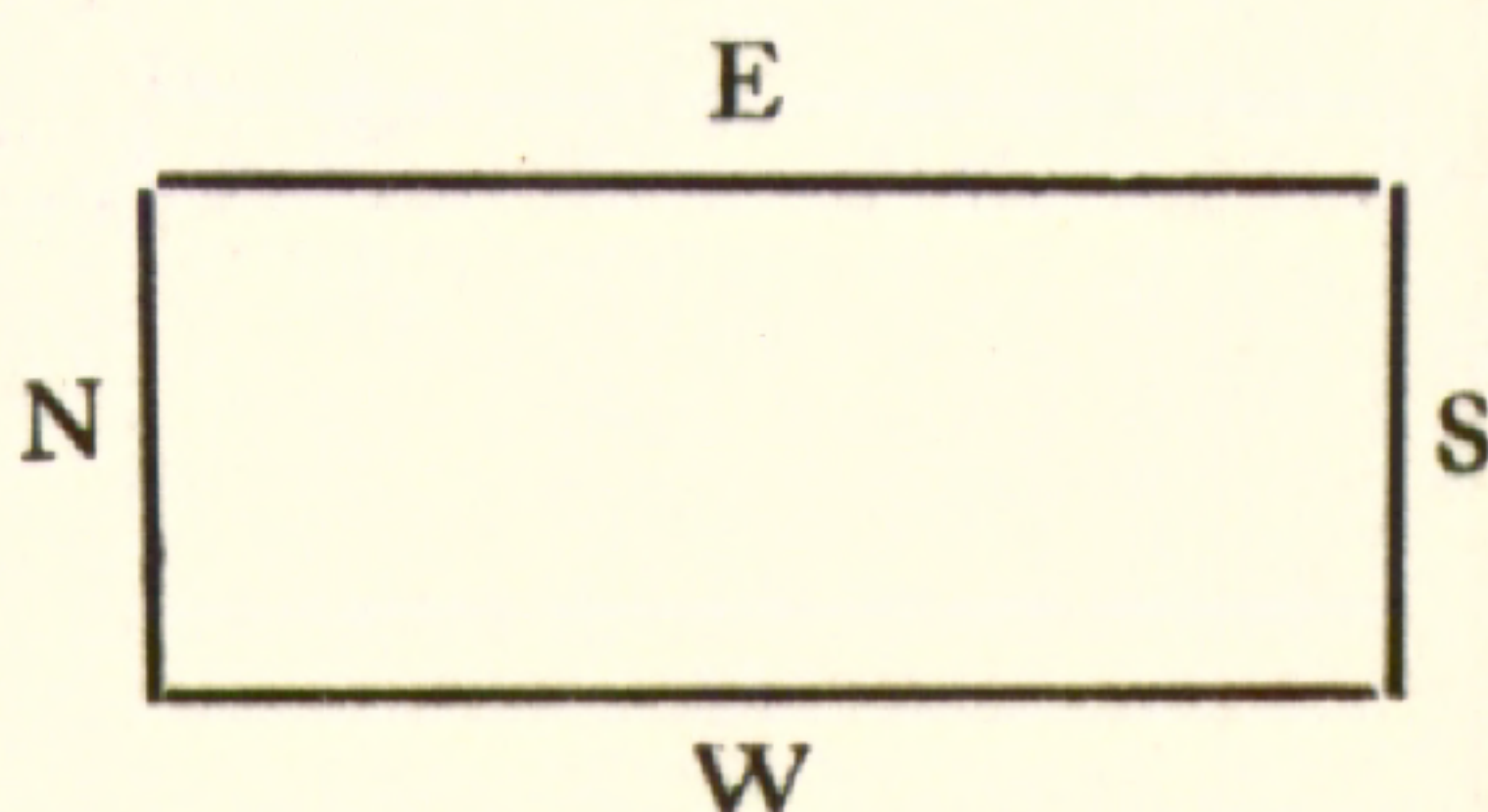
Cemetery Home

Section St Petersburg Lot Fla

wooden Box

I Other Graves

X Grave on this date



Cremation _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician _____

County or City Burial _____

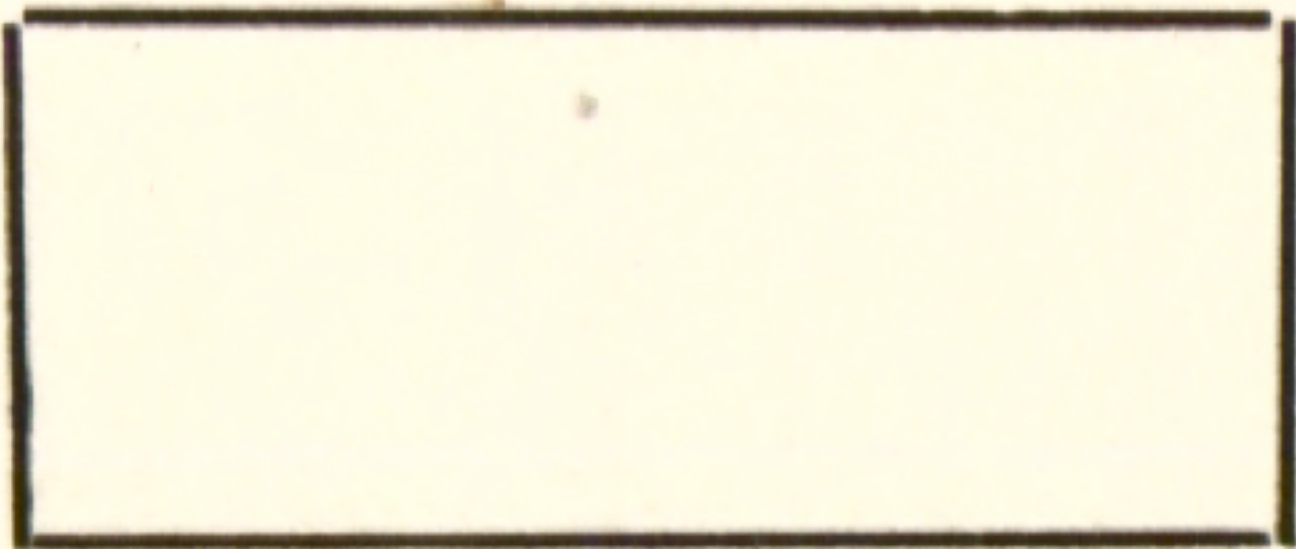
Automobiles _____

Baggage or Express Train No. _____

10 00

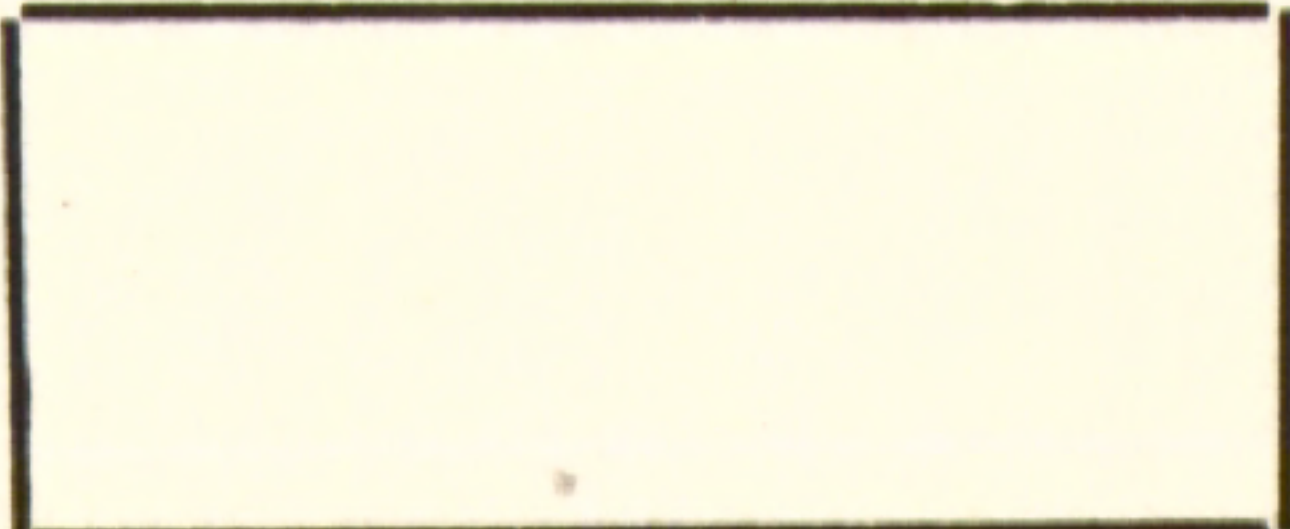
6279

Carey Hand Funeral Home

Name of deceased John. S. McPain
 Date of Death Nov 17 1923 Wed La M
 Cause of death Stomach & Angina
 Place of Death Amherst Mass M
 Residence New Center, Mass
 Age 78 Y'rs 5 Mo's 21 Days
 Weight 178 Height, 5 ft. 7 in. Eyes
 Funeral at Dest
 Date _____ 1923 M
 Account charged Mr. John. S. McPain
 Address Amherst Hotel
 Account guaranteed OK
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 br Brd C 300.00
 Casket with Copper Lin. ✓
 Style of Casket R. Cor State
 No. of Casket 15118 T
 Outside Box R+9
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set 4.00
 Name Plate Name + Date 18.53
 Cemetery Electra
 Section _____ Lot _____
 E
 I Other Graves N  S
 X Grave on this date W
 Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Minneapolis Minn
 R. R. Ticket & Pullman 235.24
 Cash advanced ✓
 Telegram ✓
 Minister ✓
 Casket Wagon (2) 10.00
 Physician Dr. Christ
 County or City Burial 580.24
 Automobiles _____
 Baggage or Express Train No. 76
Wed Night Nov-18-31 580.24

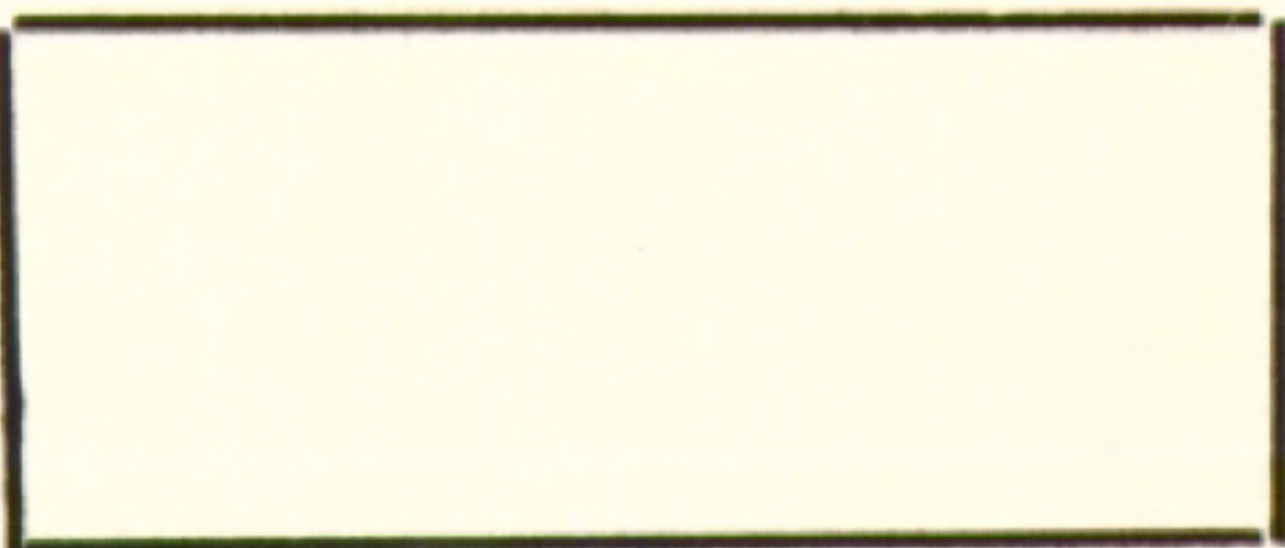
6280

Carey Hand Funeral Home

Name of deceased Ruth A. Sproule
 Date of Death Nov 17th 19231 2:30a M
 Cause of death Cholecystitis
 Place of Death Res M
 Residence Apopka, Fla
 Age 78 Y's ✓ Mo's ✓ Days ✓
 Weight ✓ Height, ✓ ft. ✓ in. ✓ Eyes ✓
 Funeral at Res
 Date Nov 19th 19231 M
 Account charged Hugh H. Sproule
 Address Apopka, Fla
 Account guaranteed Estate
 Address ✓
 Embalming + Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 6x8 Br Plush 195.00
 Casket with Copper Lin. ✓
 Style of Casket Bot 1/2 Couch
 No. of Casket 1922- 8-
 Outside Box R-9
 Shipping Case or Vault ✓
 Handles Ext Spt Trin
 Pillow Set yes
 Name Plate ✓
 Cemetery Apopka
 Section ✓ Lot ✓
 E
 I Other Graves ✓
 X Grave on this date ✓
 N  S
 W
 Cremation ✓
 Single Grave ✓
 Opening and Closing Grave Del 13w 10.00
 Body Shipped to ✓
 R. R. Ticket Del Body to Res 10.00
 Cash advanced ✓
 Telegram ✓
 Minister Rev Carr. 5.00
 Casket Wagon (1)
 Physician Dr. M. A. Brice
 County or City Burial ✓
 Automobiles S. Y. S - 20.00
 Baggage or Express Train No. 2 75.00

6281

Carey Hand Funeral Home

Name of deceased Mrs. Eliza M. Hess
 Date of Death Nov 17th 1929 10:30 a M
 Cause of death Acute dilatation heart
 Place of Death Res M
 Residence 645 E. Marks St
 Age 69 Y's 3 Mo's 17 Days
 Weight 165 Height, 5 ft. 4 in. Eyes
 Funeral at Destination
 Date Nov 1929 M
 Account charged Edward B. Hess
 Address 645 E. Marks St
 Account guaranteed Citibank
 Address
 Embalming & Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3- Behid Top 300.00
 Casket with Copper Lin. ✓
 Style of Casket Bot 1/2 Couch
 No. of Casket 1224 Chat
 Outside Box Finished Chestnut 40.00
 Shipping Case or Vault ✓
 Handles Ext B. Sil Fin
 Pillow Set yes Orchid
 Name Plate ✓
 Cemetery Destination
 Section _____ Lot _____
 E
 I Other Graves
 X Grave on this date
 N  S
 W
 Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Louisville Ky.
 R. R. Ticket & Pullman 136.68
 Cash advanced 136.68
 Telegram _____
 Minister Destination
 Casket Wagon (2) 10.00
 Physician Dr. Christ
 County or City Burial 571.68
 Automobiles _____
 Baggage or Express Train No. 76
Tues Night Nov 17-31

6282

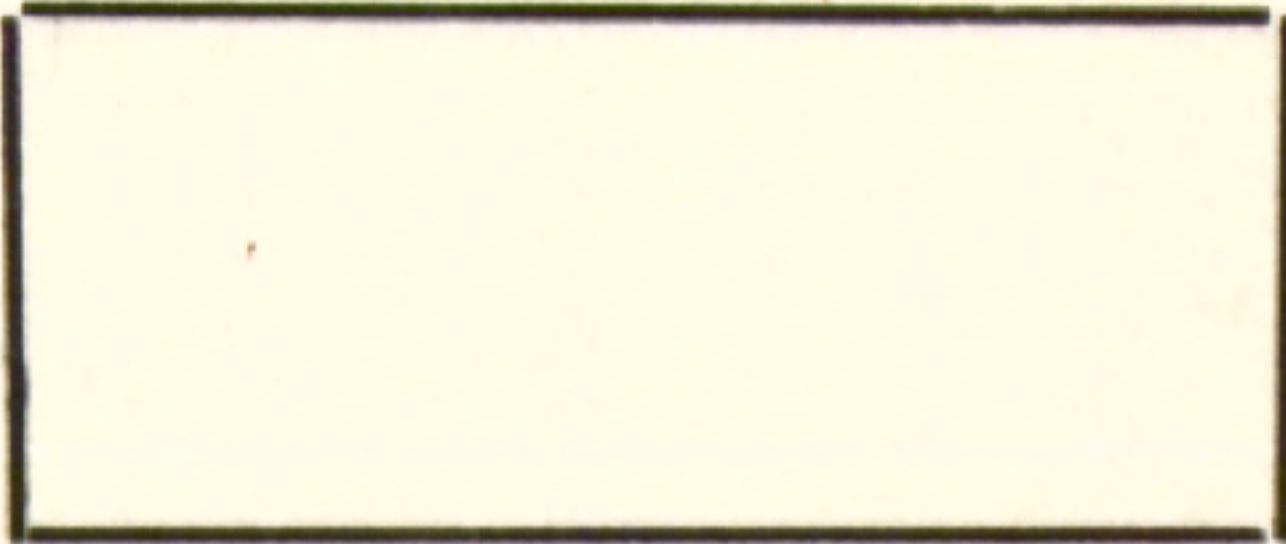
Carey Hand Funeral Home

Name of deceased Clifford W. Landers
Date of Death Nov 17 1921 P. M
Cause of death Tubercular Laungitis
Place of Death Narcoosa M
Residence Narcessell, Fla.
Age 7 Y'rs 5 Mo's 10 Days
Weight 70 Height, 4 ft. 0 in. Eyes _____
Funeral at Chapel
Date _____ 1921 M
Account charged James H. Beck Refused
Address apt 9-151 W-3-st
Account guaranteed Manufact Ohio
Address John Willett Narcoosa
Embalming + Dressing
Robe, Suit, Dress ☒
Underwear and Hose ☒
Casket 4-0 M. L. S.
Casket with Copper Lin. ☒
Style of Casket Oct. H. C. S.
No. of Casket 103 - Temp.
Outside Box Reg
Shipping Case or Vault ☒
Handles Shut
Pillow Set ☒
Name Plate 05
Cemetery Greenwood
Section _____ Lot _____
E
I Other Graves ☐
X Grave on this date ☐
Cremation _____
Single Grave White
Opening and Closing Grave & etc
Body Shipped to _____
R. R. Ticket _____
Cash advanced _____
Telegram _____
Minister _____
Casket Wagon (1)
Physician Dr. J. D. Chum 9 St. Land
County or City Burial _____
Automobiles S x S
Baggage or Express Train No. _____

35 00
37 50
5 00
10 00
10 00
15 00
112 50

6283

Carey Hand Funeral Home

Name of deceased Jasper Francis
 Date of Death Nov 18 1921 11 P M
 Cause of death _____
 Place of Death Res M
 Residence Washington Park
 Age _____ Y'rs _____ Mo's 2 1/2 Days _____
 Weight _____ Height, _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 1921 M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2-0 4-2 14 50
 Casket with Copper Lin. _____
 Style of Casket Spr
 No. of Casket _____
 Outside Box 12-19
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N  S
 W
 Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician D 2
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

14 50

6284

Carey Hand Funeral Home

Name of deceased Wilbur Yates
 Date of Death Nov - 20 1921 A M
 Cause of death Nephritis Hypertension
 Place of Death Mellown M
 Residence Fit Christmas
 Age 35 Y'rs Mo's Days
 Weight Height, ft. in. Eyes
 Funeral at Grave at Fit Christmas
 Date Sun Nov 22 - 1921 2-P M
 Account charged Albert Yates
 Address Fit Christmas
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket Flat top
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box Reg
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery Fit Christmas
 Section Lot
 E

I Other Graves

X Grave on this date

N

S

W

Cremation
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Mellowne
 Casket Wagon to Fit Christmas
 Physician
 County or City Burial
 Automobiles SS -
 Baggage or Express Train No.

35 00

15 00

50 00

People Very Poor

