

11-12-1935

Memoranda Book 099: Carey Hand Funeral Home records, November 12, 1935 to December 28, 1935

Carey Hand Funeral Home

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Carey Hand Funeral Home

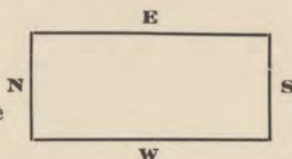
Name of deceased Mrs Florence F. Rickart
 Date of death Nov 10 - 1935
 Cause of death Cerebral Hemorrhage
 Place of death Residence
 Residence St Petersburg, Fla
 Age 86 Y'rs 4 Mo's 23 Days
 Weight 90 Height 5 ft. 8 in. Eyes Gray
 Funeral at St Petersburg Fla
 Date Nov 1935 M
 Account charged Cooksey Funeral Home
 Address St Petersburg, Fla
 Account guaranteed Check
 Address
 Embalming Cremation # 3750
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket Body arrived
 No. of Casket by Adco Wed
 Outside Box 11 a.m. Nov 13-1935
 Shipping Case or Vault
 Handles
 Pillow Set Body Cremated
 Name Plate Wed 1:30 p.m.
 Cemetery Nov 13-1935
 Section Lot
 E
 I Other Graves
 X Grave on this date
 N S
 W
 Cremation Express body
 Single Grave to Cooksey
 Opening and Closing Grave Funeral
 Body Shipped to Home
 R. R. Ticket St Petersburg Fla
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.
 # 37.50

Carey Hand Funeral Home

Name of deceased *Myrtle M. Shaw*
 Date of death *Nov 13 - 9 A.M.*
 Cause of death *Symphathetic Leukemia*
 Place of death *Residence*
 Residence *Ocoee, Fla*
 Age *27* Yrs *11* Mo's *11* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *M. E. Church - Ocoee*
 Date *Thurs 4 P.M. Nov 14 1935* *4 P.M.*
 Account charged *James L. Shaw*
 Address *Ocoee Fla*
 Account guaranteed *Insurance*
 Address *Ocoee*
 Embalming *& Dressing*
 Robe, Suit, Dress *cape & shoes*
 Underwear and Hosiery *✓*
 Casket *6-3-Set Ex. Finish*
 Casket with Copper Lin. *✓*
 Style of Casket *Oct-1/2-C-*
 No. of Casket *1927 5-*
 Outside Box *Reg-*
 Shipping Case or Vault *✓*
 Handles *Ext-*
 Pillow Set *yes*
 Name Plate *✓*
 Cemetery *Ocoee Cemetery*
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation

Single Grave *Del Box & etc*

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister *Rev Bridges*

Casket Wagon *(1)*

Physician *Dr. Frank Gray*

County or City Burial

Automobiles *5 & 5*

Baggage or Express Train No.

35.00

15.00

175.00

5.00

5.00

15.00

250.00

Carey Hand Funeral Home

Name of deceased	Judith Hastings		
Date of death	Nov 13 - 11:30 a.m.		
Cause of death	Perforated appendicitis		
Place of death	O.G.H.		
Residence	1210 Park Lake Ave		
Age	14 Yrs	7 Mo's	26 Days
Weight		Height	ft. in. Eyes
Funeral at	Chapel		
Date	Thurs Nov 14	1935	2 P. M
Account charged	Gipson W. Hastings		
Address	1210 Park Lake		
Account guaranteed	Insurance		
Address			
Embalming	✓ Dressing		35.00
Robe, Suit, Dress	✓		
Underwear and Hose	✓		
Casket	6-3-Black-8-6		165.00
Casket with Copper Lin.	✓		
Style of Casket	Oct 2-e		
No. of Casket	1925-8		
Outside Box	Reg		
Shipping Case or Vault	✓		
Handles	Ext		
Pillow Set	yes white		
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	Noblesville Ind		
R. R. Ticket	✓ P. 3174	735	81.64
	4140	25	
Cash advanced			
Telegram			
Minister	Rev Stradley		
Casket Wagon	(2)		10.00
Physician	Dr. Chappell		
County or City Burial			291.64
Automobiles			
Baggage or Express Train No.	92		
	Thurs - 11-14-35 -		

Carey Hand Funeral Home

Name of deceased Frances E. Stecher
Date of death Nov-13-35
Cause of death Chro Myocarditis
Place of death Res
Residence Cleawater
Age 79 Y'rs _____ Mo's _____ Days _____
Weight _____ Height _____ ft. _____ in. Eyes _____
Funeral at _____
Date _____ 1935 M _____
Account charged Alexander Funeral Home
Address Cleawater Fla
Account guaranteed _____
Address _____
Embalming Cremation 37.50
Robe, Suit, Dress _____
Underwear and Hose _____
Casket Body arrived
Casket with Copper Lin up auto
Style of Casket 8-A.M. Fri 11-15-
No. of Casket _____
Outside Box Body Cremated
Shipping Case or Vault Fri-11-15-35
Handles 9-a m
Pillow Set _____
Name Plate Asher Expressed To
Cemetery Alexander Funeral Home
Section Cleawater 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

County or City Burial

Automobiles

Baggage or Express Train No.

 $37 \overline{) 50}$

37.	50
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Carey Hand Funeral Home

Name of deceased Wilfred B. Woolverton
 Date of death Nov - 15 - 35 10 25 PM
 Cause of death Uremia
 Place of death Mable Clark Nursing Home
 Residence Lake St -
 Age 61 Y'rs 3 Mo's 14 Days
 Weight 160 Height 5 ft. 6 in. Eyes
 Funeral at Chapel
 Date Sun Nov 17 - 1935 3 - P. M
 Account charged Harry R. Campbell
 Address Minnesota ave Winter Park
 Account guaranteed
 Address
 Embalming Yes Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Gr Cape 35.00
 Casket with Copper Lin.
 Style of Casket Oct. N.C.
 No. of Casket 1
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles Short
 Pillow Set yes
 Name Plate
 Cemetery Cremation
 Section _____ Lot _____
 _____ E
 I Other Graves _____
 _____ N _____ S
 X Grave on this date _____
 _____ W
 Cremation Cremation 50.00
 Single Grave _____
 Opening and Closing Grave Body
 Body Shipped to Cremated 9-AM
 R. R. Ticket Nov - Nov 18 - 35
 Cash advanced Cash Expensed to
 Telegram Harold C. Woolverton
 Minister Grimsby Ont Canada
 Casket Wagon (1) 5.00
 Physician Dr. Stotard
 County or City Burial 125.00
 Automobiles
 Baggage or Express Train No.

Carey Hand Funeral Home,

Name of deceased	Henny Hill Dickson		
Date of death	Nov 15-35-	10.25 PM	
Cause of death	Prostate Hypertrophy		
Place of death	Res		
Residence	862 Park Lake Court		
Age	86	Y's 6	Mo's 15 Days
Weight	125	Height 5	ft. 5 in. Eyes
Funeral at	M. C. Church		
Date	Sun Nov-17	1935	3-P. M
Account charged	Nanny Dickson		Sam
Address			
Account guaranteed	Estate & Insurance		
Address			
Embalming	& Dressing	35.00	
Robe, Suit, Dress	✓		
Underwear and Hose			
Casket	6-6 Metal Eb & Sil	350.00	
Casket with Copper Lint			
Style of Casket	State 1/2-C		
No. of Casket	3375 Cur		
Outside Box	Reg		
Shipping Case or Vault	✓		
Handles	Ext - Tray		
Pillow Set	yes 1849		
Name Plate	Nov 1935		
Cemetery	Greenwood		
Section	2-	Lot 28	

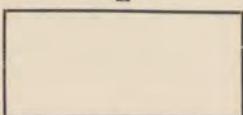
I Other Graves		
X Grave on this date		
P. Bear	5.00	
Cremation H.P. Bear	5.00	
Single Grave 2 Family Cars	5.00	10.00
Opening and Closing Grave	15.00	
Body Shipped to Car Min	5.00	
R. R. Ticket		
Cash advanced		
Telegram		
Minister Rev Fred Turner	5.00	
Casket Wagon		
Physician Dr. Orr		
County or City Burial		
Automobiles S Y S -	15.00	
Baggage or Express Train No.	445.00	

Carey Hand Funeral Home

Name of deceased James T Saunders
 Date of death Sat Nov-16-35 11:50 AM
 Cause of death Old age
 Place of death Res
 Residence Holden Place Fairbanks Ave W.P.
 Age 88 Y'rs 7 Mo's 11 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at No Service here
 Date _____ 1935 _____ M
 Account charged Grant Saunders
 Address Orlando Box 149
 Account guaranteed _____
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress ✓ 15.00
 Underwear and Hose ✓ 1.50
 Casket 6-3-52 50 250.00
 Casket with Copper Lin. Metal
 Style of Casket Oct-OT, H.C.
 No. of Casket S 1411- S-
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Cxt
 Pillow Set yes
 Name Plate ✓
 Cemetery Cent
 Section _____ Lot _____
 I Other Graves N Vault #7 S
 X Grave on this date
 Cremation Vault Rent 5.00 Per Mo
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon (2) 10.00
 Physician Dr Gardner of W.P.
 County or City Burial 311.50
 Automobiles _____
 Baggage or Express Train No. _____

shipped about May-15-

Carey Hand Funeral Home

Name of deceased Fred Eickelinger
 Date of death Sat - Nov - 14 - 35 - 930 AM
 Cause of death Cerebral Hemorrhage
 Place of death Res
 Residence 412 - West Amelia
 Age 83 Y'rs 4 Mo's 2 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at No Service
 Date _____ 193 _____ M
 Account charged Mrs Emma Eickelinger
 Address 412 - West Amelia
 Account guaranteed \$100.00 Burial
 Address _____
 Embalming Case of Body & etc 25.00
 Robe, Suit, Dress _____
 Underwear and Hose Cremation 50.00
 Casket ☒
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket People has no
 Outside Box money - only 100.00
 Shipping Case or Vault from the 1000 F Lodge
 Handles _____
 Pillow Set Body Cremated
 Name Plate 8 - A M - Mon 11-18-35
 Cemetery will call for ashes
 Section _____ Lot _____
 E
 I Other Graves _____
 N  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 Dr T. A. Neal
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 75.00

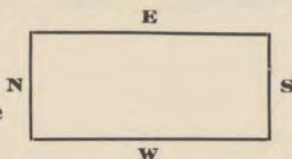
Carey Hand Funeral Home

Name of deceased Baty - Russell
 Date of death Sat - Nov 16 - 35 9 - P.M.
 Cause of death O.G.M. Premature
 Place of death _____
 Residence Cela Vista
 Age ✓ Y'rs ✓ Mo's 1 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date 11-17-35 1935 P^M
 Account charged Leo J. Russell
 Address Cela Vista
 Account guaranteed Wm. F. Lamb
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2 - 0 H X, S
 Casket with Copper Lin. _____
 Style of Casket Bought Case done
 No. of Casket their own work -
 Outside Box Have Permit for same
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Pleasant Hill
 Section S - of Kinsman 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 _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

12 50

12 50

Carey Hand Funeral Home

Name of deceased Geo A. Mathews
 Date of death Nov-14-35
 Cause of death Heart Failure
 Place of death Res
 Residence Sarasota Fla
 Age 60 Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Sarasota
 Date _____
 Account charged Thacker and Van Gilder 193 M
 Address Sarasota Fla
 Account guaranteed _____
 Address _____
 Embalming Cumation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body covered by
 No. of Casket Express 202 # 76
 Outside Box Sunday morning
 Shipping Case or Vault Nov 17-35
 Handles Body Cumated
 Pillow Set 9-9M-11-18-35
 Name Plate _____
 Cemetery Ashes Exposed to
 Section Thacker & Van Gilder Lot E
 I Other Graves _____
 X Grave on this date _____
 Cremation Express Ashes to
 Single Grave Beecher-Bennett
 Opening and Closing Grave Lincoln
 Body Shipped to Und Co
 R. R. Ticket New Haven, Conn.
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

N

S

W

37.50

Carey Hand Funeral Home

Name of deceased Mrs Theresia W Haywood
 Date of death Sun - Nov 17 - 35 5-P.M.
 Cause of death Pulmonary Edema - myocarditis
 Place of death Res
 Residence Conway Fla
 Age _____ Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at Chapel Third Nov 20 35
 Date Nov 20 1935 4.30 P. M
 Account charged Estate
 Address _____
 Account guaranteed Estate
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 - Gr - cr - 110.00
 Casket with Copper Lin. ☒
 Style of Casket Oct O.T.
 No. of Casket ☒
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate at Rest
 Cemetery Cremation
 Section _____ Lot _____

E
 N S
 W

 I Other Graves _____
 X Grave on this date _____
 Cremation Cremation 50.00
 Single Grave C.S. Reader 5.00
 Opening and Closing Grave Music 5.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Frank Petrie C.S.
 Casket Wagon (1) 5.00
 Physician Dr Beandahl 210.00
 County or City Burial ☒
 Automobiles ☒
 Baggage or Express Train No. _____

Body Cremated 8-A.M
11-21-35

Carey Hand Funeral Home

Name of deceased Chas. C. Michael
 Date of death Nov 17 - 3:20 a.m.
 Cause of death Pneumonia
 Place of death Res
 Residence 1414 Harwood
 Age 43 Yrs 7 Mo's 24 Days
 Weight 100 Height 5 ft. 6 in. Eyes
 Funeral at Chapel
 Date Wed Nov 20 1935 10 a.m.
 Account charged Mrs. Chas. C. Michael
 Address 1414 Harwood
 Account guaranteed
 Address

Embalming + Dressing 35.00

Robe, Suit, Dress ✓

Underwear and Hose ✓

Casket 6-3-Gr. Cup 75.00

Casket with Copper Lin. ✓

Style of Casket Ext. O.T.

No. of Casket 1972 T

Outside Box Reg

Shipping Case or Vault ✓

Handles Ext

Pillow Set yes

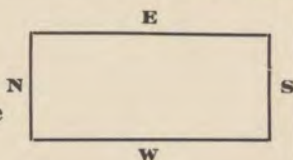
Name Plate at Rest

Cemetery Woodlawn

Section C Lot 56

I Other Graves

X Grave on this date



Cremation

Single Grave

Opening and Closing Grave T & etc 15.00

Body Shipped to Car. Mm 5.00

R. R. Ticket

Cash advanced

Telegram

Minister Dean Adcock 5.00

Casket Wagon (1)

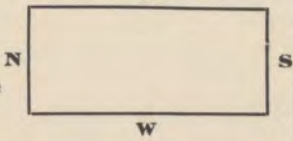
Physician Dr. Collins

County or City Burial

Automobiles S & S 15.00

Baggage or Express Train No. 150.00

Carey Hand Funeral Home

Name of deceased Robt Stuart
 Date of death Mon - Nov - 18 - 35 530 PM
 Cause of death Pulmonary Tuberculosis
 Place of death County Home
 Residence 548 King St
 Age 22 Y'rs Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Lleest
 Date Wed Nov 1936 M
 Account charged Chas Stuart
 Address Miami
 Account guaranteed Paid Cash & Note
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 1/3 Grey Crepe 97.50
 Casket with Copper Lin. _____
 Style of Casket Oct O. Top
 No. of Casket _____
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext.
 Pillow Set yes
 Name Plate _____
 Cemetery Lleest
 Section _____ Lot _____
 I Other Graves 
 X Grave on this date _____
 Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Flora Ga. 17.82
 R. R. Ticket _____
 Cash advanced _____
 Telegram Phone
 Minister Lleest
 Casket Wagon (2) 10.00
 Physician Dr. Spies
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

#160.32

Carey Hand Funeral Home

Name of deceased Albert L. Wilson
 Date of death Mar 11-18-35
 Cause of death Dysentery
 Place of death Res
 Residence 397 Dubsdread Circle
 Age 60 Y'rs 2 Mo's 8 Days
 Weight 126 lbs Height 5 ft. 9 1/2 in. Eyes
 Funeral at ☒

Date 1935 M
 Account charged Mrs A L Wilson
 Address 397 Dubsdread Circle
 Account guaranteed Estate
 Address

Embalming ☒ 35.00
 Robe, Suit, Dress Bringe Ann 25.00
 Underwear and Hose
 Casket 6-3- in cup & etc 35.00
 Casket with Copper Lin.
 Style of Casket Gr 7
 No. of Casket 22
 Outside Box ☒

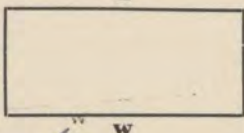
Shipping Case or Vault
 Handles Short

Pillow Set ☒
 Name Plate at Port
 Cemetery Cremation

Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation Cremation 50.00

Single Grave no Service Body

Opening and Closing Grave Cremated

Body Shipped to 11-69m New-19-35

R. R. Ticket ashes Expensed to

Cash advanced Vernon Stubblefield

Telegram Murray Ky

Minister

Casket Wagon (1) 5.00

Physician Dr Spencer Tolson

County or City Burial 150.00

Automobiles

Baggage or Express Train No.

Carey Hand Funeral Home

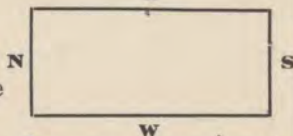
Name of deceased John O Johnston
 Date of death Nov 15 - 35
 Cause of death Lymphatic
 Place of death Cleawater Fla
 Residence Cleawater Fla
 Age 78 Y'rs Mo's Days
 Weight 140 Height 5 ft. 9 in. Eyes
 Funeral at Cleawater
 Date 193 M
 Account charged Alexander T. H.
 Address Cleawater Fla
 Account guaranteed
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket Body moved
 Casket with Copper Lin. by auto
 Style of Casket 10-AM
 No. of Casket Tues Nov-19-35
 Outside Box
 Shipping Case or Vault Body-
 Handles Cremated 1-PM
 Pillow Set 11-19-35
 Name Plate
 Cemetery
 Section Lot
 E
 I Other Graves
 X Grave on this date
 N S
 Cremation ashes & pressed To
 Single Grave Wichmann
 Opening and Closing Grave Funeral Home
 Body Shipped to 227 West Franklin
 R. R. Ticket street
 Cash advanced Appleton
 Telegram Wis
 Minister
 Casket Wagon
 Physician
 County or City Burial
 Automobiles 37.50
 Baggage or Express Train No.

Carey Hand Funeral Home

Name of deceased J. Horatio Williams
 Date of death Nov 16 -
 Cause of death Pneumonia
 Place of death Res.
 Residence Palm Beach Fla
 Age 66 Y's Mo's Days
 Weight 165 Height 5 ft. 10 in. Eyes Blue
 Funeral at Palm Beach Fla
 Date Nov 1935 M
 Account charged Muzell - Semons Ind Co
 Address West Palm Beach Fla
 Account guaranteed
 Address
 Embalming Cremation 37 50
 Robe, Suit, Dress
 Underwear and Hose
 Casket Wm 5 00
 Casket with Copper Lin.
 Style of Casket Body arrived
 No. of Casket by express
 Outside Box 12:45 P.M.
 Shipping Case or Vault Wed-Nov 20
 Handles 1935
 Pillow Set Body Cremated
 Name Plate 12:30 P.M. Wed
 Cemetery Nov 20 - 1935
 Section Lot

I Other Graves

X Grave on this date



Cremation Ashes given to
 Single Grave M. J. W.
 Opening and Closing Grave O' Bannon
 Body Shipped to 10 a.m. Thurs
 R. R. Ticket Nov 21 - 1935
 Cash advanced and took them
 Telegram to Palm Beach
 Minister Fla
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

\$272.50

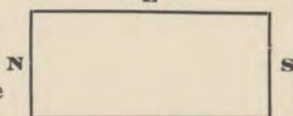
Carey Hand Funeral Home

Name of deceased Mrs G. T. A. Gibson
 Date of death Nov 18
 Cause of death Carcinoma of Uterus
 Place of death Res.
 Residence Avon Park Fla
 Age 74 Y'rs 8 Mo's 2 Days
 Weight 105 Height 5 ft. 3 in. Eyes Blue
 Funeral at Avon Park Fla
 Date Nov 1935 M
 Account charged Stephenson & Blythe
 Address Sebring Fla
 Account guaranteed
 Address
 Embalming Cremation
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket Body arrived
 No. of Casket by auto Wed
 Outside Box 1:15 P.M. Nov
 Shipping Case or Vault 20- 1935-
 Handles
 Pillow Set Body Cremated
 Name Plate 5:30 P.M. Wed
 Cemetery Nov 20- 1935
 Section Lot

37.50

I Other Graves

X Grave on this date



Cremation Will call for

Single Grave Ashes

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister

Casket Wagon

Physician

County or City Burial

Automobiles

Baggage or Express Train No.

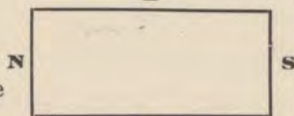
37.50

Carey Hand Funeral Home

Name of deceased Chester T. Melvin
 Date of death Nov 19
 Cause of death Pneumonia
 Place of death Res
 Residence Tampa Fla
 Age 51 Y's 1 Mo's 2 Days
 Weight 160 Height 5 ft. 11 in. Eyes Hazel
 Funeral at HC Crematory Chapel
 Date Nov 20 Wed 193 5 4 P. M
 Account charged B. Marion Reed and Co
 Address Tampa Fla
 Account guaranteed
 Address
 Embalming Cremation 37 50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket Body arrived
 No. of Casket by express
 Outside Box at 3:18 P.M.
 Shipping Case or Vault Wed 11-20-35
 Handles
 Pillow Set Body Cremated
 Name Plate 5:30 P.M. Wed
 Cemetery Nov - 20 - 1935
 Section Lot

I Other Graves


X Grave on this date



Cremation Express Ashes
 Single Grave To B. Marion Reed
 Opening and Closing Grave and Co.
 Body Shipped to Tampa Fla
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Bishop Wing
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Alice W. Libby
 Date of death Thurs Nov-21-35 PM
 Cause of death Carcinoma of Stomach
 Place of death Res
 Residence Mt Plymouth
 Age 76 Y'rs 1 Mo's 21 Days
 Weight 125 Height 5 ft. 6 in. Eyes Brown
 Funeral at Res
 Date Fri Nov-22- 1935 5 P. M
 Account charged Cornelia M. Wyer
 Address Mt Plymouth Fla
 Account guaranteed _____
 Address _____
 Embalming Name + Sat Eng _____
 Robe, Suit, Dress Brown Lin _____
 Underwear and Hose _____
 Casket 6-3-Gr-Doe ✓
 Casket with Copper Lin. _____
 Style of Casket Oct-O.T.
 No. of Casket S - No Emb Casket
 Outside Box Selected just before Service
 Shipping Case or Vault _____
 Handles Ext _____
 Pillow Set yes
 Name Plate _____
 Cemetery Cremation
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N  S
 W
 Cremation Cremation
 Single Grave Body Cremated
 Opening and Closing Grave S-A-M-
 Body Shipped to Sat 11-23-35
 R. R. Ticket will cash for him
 Cash advanced _____
 Telegram _____
 Minister From Plymouth
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles S. F. S. & Son
 Baggage or Express Train No. _____

25.00

75.00

50.00

20.00

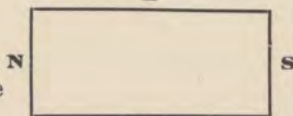
770.00

Carey Hand Funeral Home

Name of deceased Cha. H. Glidden
 Date of death Nov 21
 Cause of death Endocarditis
 Place of death Fla
 Residence Ft Pierce
 Age 82 Y'rs 6 Mo's 2 Days
 Weight 165 Height 5 ft. 2 in. Eyes Blue
 Funeral at Ft Pierce Fla
 Date Nov 193 5 M
 Account charged Free Mortuary
 Address Ft Pierce Fla
 Account guaranteed Check
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Aluminum Urn 5.00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Body removed
 Outside Box 12:30 P.M. Friday
 Shipping Case or Vault Nov 22-35
 Handles _____
 Pillow Set Body Cremated
 Name Plate Friday 2 P.M.
 Cemetery Nov 22 - 1935
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation Ashes expressed
 Single Grave to - Free Mortuary
 Opening and Closing Grave Ft Pierce
 Body Shipped to Fla
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

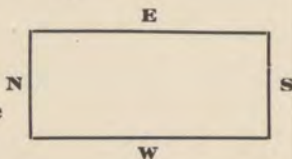
\$42.50

Carey Hand Funeral Home

Name of deceased *Wm Johnson Montgomery*
 Date of death *Nov 19 - 1935*
 Cause of death *Coronary Thrombosis*
 Place of death *Miami Beach Fla*
 Residence *Palm Island - Miami Beach*
 Age *64* Y'rs *7* Mo's _____ Days _____
 Weight *200* Height *6* ft. _____ in. Eyes _____
 Funeral at *Miami*
 Date _____ 193 _____ M
 Account charged *W. H Combs* Service _____
 Address *Miami Fla*
 Account guaranteed _____
 Address _____
 Embalming *Cremation* 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. *Body arrived*
 Style of Casket *by Express in*
 No. of Casket *CeX # 89*
 Outside Box *11-23-35*
 Shipping Case or Vault _____
 Handles *Body Cremated 3-PM*
 Pillow Set *11-23-35*
 Name Plate *Asher Expressed to*
 Cemetery *W. H Combs*
 Section *Miami Fla* 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

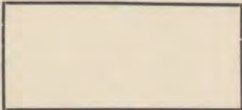
County or City Burial

Automobiles

Baggage or Express Train No.

\$ 37.00

Carey Hand Funeral Home

Name of deceased Thos Spencer Ruff
 Date of death Sun Nov - 24 - 35 - 5 P.M.
 Cause of death Angina Pectoris
 Place of death Roberts Hotel
 Residence Cleawater Fla
 Age 30 Y'rs 3 Mo's 20 Days
 Weight 120 Height 5 ft. 7 in. Eyes
 Funeral at Cleawater
 Date 1935 5 PM
 Account charged Moss Funeral Home
 Address Cleawater Fla
 Account guaranteed OK
 Address
 Embalming 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. Moss
 Style of Casket Alexander T. D.
 No. of Casket of Cleawater came
 Outside Box for Body -
 Shipping Case or Vault 1 P.M. - 11-24-35
 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 (1)
 Physician Dr. T. A. Neal
 County or City Burial
 Automobiles
 Baggage or Express Train No.

5 00
 40 00

Carey Hand Funeral Home

Name of deceased Mrs Francis Powers
 Date of death Sun Nov-24-35 11:50 PM
 Cause of death Cardiac Disease - myocarditis
 Place of death Res -
 Residence 422 - West Gore
 Age 80 Yrs 9 Mo's 29 Days
 Weight 135 Height 5 ft. 5 in. Eyes
 Funeral at Chapel
 Date Tues - Nov - 26 1935 11-A M
 Account charged E. R. Powers
 Address 422 W. Gore Ave
 Account guaranteed Estate
 Address
 Embalming & Dressing
 Robe, Suit, Dress Time
 Underwear and Hose
 Casket 6-3 - Dr Gr Plush
 Casket with Copper Lin. Oct - 1/2 - C -
 Style of Casket
 No. of Casket 1927 -
 Outside Box Reg -
 Shipping Case or Vault ☒
 Handles Ext -
 Pillow Set yes - Lt. Gr
 Name Plate ☒
 Cemetery West
 Section _____ Lot _____
 _____ E _____
 I Other Graves _____
 X Grave on this date _____
 _____ N _____ S
 _____ W _____
 Cremation music -
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Nitawaka Kans
 R. R. Ticket 1-4164 - 5716
 Cash advanced _____
 Telegram _____
 Minister Rev Brookhart
 Casket Wagon (2)
 Physician Dr Paul Butler
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 92
Tues - 11-26-35

35.00
 12.00
 .50
 175.00

98.80

10.00

\$331.30

Carey and Funeral Home

Name of deceased *M. Jeff Dabney*
 Date of death *Mon Nov 25-35* *5- A.M.*
 Cause of death *Coronary Thrombosis*
 Place of death *Savannah Hotel*
 Residence *Atlanta Ga*
 Age *about 52* Y'rs Mo's Days
 Weight *170* Height *5* ft. *7* in. Eyes
 Funeral at *Atlanta*
 Date 193 M
 Account charged *H. H. Pete*
 Address *2 W. S. L. Battery Corp*
 Account guaranteed *Niagra Falls New York*
 Address
 Embalming *Yes* *35.00*
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket *6-3-Gr Bld-C* *225.00*
 Casket with Copper Lin. ✓
 Style of Casket *State 1/2-C*
 No. of Casket *121 1/2-T*
 Outside Box *Reg*
 Shipping Case or Vault ✓
 Handles *Ext*
 Pillow Set *yes*
 Name Plate *at Rest*
 Cemetery *Deat*
 Section Lot
 E
 I Other Graves
 X Grave on this date
 N S
 W
 Cremation *N. M. Patterson & Son*
 Single Grave *Funeral Director*
 Opening and Closing Grave
 Body Shipped to *Atlanta Ga*
 R. R. Ticket *(2) 1400* *28.00*
 Cash advanced
 Telegram
 Minister
 Casket Wagon *(2)* *10.00*
 Physician *D. J. Duncan M. Earn*
 County or City Burial
 Automobiles *298.00*
 Baggage or Express Train No. *92*
Mon - 11-25-35 *28.00*

rd Carh / 2 RR \$ 270.00

Carey Hand Funeral Home

Name of deceased *Mrs. Kate C. Lakey*
 Date of death *Nov- 25- 35-* *230 A.M.*
 Cause of death
 Place of death *Oscoda Hospital - Kalamazoo*
 Residence *St Cloud*
 Age *87-* Y'rs *1* Mo's *2* Days
 Weight *125* Height *5* ft. *2* in. Eyes
 Funeral at *Res*
 Date *Nov. 30* 1935 *3:30 P.M.*
 Account charged *Hattie House*
 Address *St Cloud*
 Account guaranteed *Estate*
 Address
 Embalming *Amputation & Sew* *50 00*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *6-3-51 or Red*
 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 *Body cremated*
 _____ W _____
 Cremation *9AM- Monday- Dec. 2.*
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced *to Escalator* *50 00*
 Telegram
 Minister
 Casket Wagon
 Physician *Dr. Lancaster of Kalamazoo*
 County or City Burial *100 00*
 Automobiles
 Baggage or Express Train No.

Carey Hand Funeral Home

Name of deceased L. Roy Jenkins
 Date of death Nov - 23 - 35
 Cause of death Malaria
 Place of death Tampa
 Residence Union Grove N. Y.
 Age 53 Y'rs 1 Mo's 17 Days
 Weight 170 Height 5 ft. 11 in. Eyes
 Funeral at Tampa

Date _____ 193____ M
 Account charged Greenman F. Home
 Address Tampa Fla
 Account guaranteed Ok
 Address _____

Embalming Cremation 37.50

Robe, Suit, Dress _____

Underwear and Hose Body arrived

Casket by Express 2:10 A M

Casket with Copper Lin. Nov 11-25-35

Style of Casket _____

No. of Casket Body cremated

Outside Box 2 - P. M. - 11-25-35

Shipping Case or Vault _____

Handles Ashes - Express To

Pillow Set Will call for

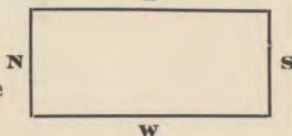
Name Plate _____

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 _____

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of deceased *Doris Anna Williams*
 Date of death *Nov- 21-35*
 Cause of death *Tuberculosis Anerphalitis*
 Place of death *St. Petersburg*
 Residence *St. Petersburg*
 Age *19* Y'rs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at *St. Petersburg*
 Date *1935* M
 Account charged *John S Rhodes*
 Address *F.D. St. Petersburg*
 Account guaranteed *OK*
 Address
 Embalming *Cremation* *37.50*
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. *Body moved*
 Style of Casket *by auto 11:30 AM*
 No. of Casket *Men 11-25-35*
 Outside Box *Body cremated*
 Shipping Case or Vault *11:45 AM*
 Handles *11-25-35*
 Pillow Set
 Name Plate *ashes Expressed*
 Cemetery *John S Rhodes*
 Section *Tr. Home* Lot *St. Petersburg Fla*
 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 *37.50*
 Automobiles
 Baggage or Express Train No.

Carey Hand Funeral Home

Name of deceased John Chauncey Boyer
 Date of death Mon - Nov - 25 - 35 supine AM
 Cause of death acute cholecystitis - intestinal
 Place of death Hospital Gainesville Fla
 Residence Orlando Fla
 Age 17 Y'rs Mo's Days
 Weight 170 Height 5 ft. 8 in. Eyes
 Funeral at Chapel Pur Church
 Date Wed - 11 - 27 - 1935 4 - P M
 Account charged Chauncey Boyer
 Address Orlando -

Account guaranteed
 Address

Embalming & Dressing 35.00
 Robe, Suit, Dress

Underwear and Hose
 Casket 6-3-Gr Bid-P- 225.00

Casket with Copper Lin.
 Style of Casket Oct - N. C

No. of Casket 2638 S
 Outside Box

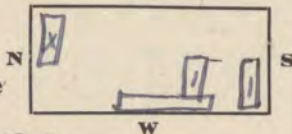
Shipping Case or Vault air Seal 125.00
 Handles Ext

Pillow Set yes White
 Name Plate

Cemetery Greenwood
 Section L Lot 48

Section E

I Other Graves
 X Grave on this date



Cremation Car - P. B - 5.00

Single Grave closed car 5.00

Opening and Closing Grave 7 ft x 4 ft 15.00

Body Shipped to Car Fair 5.00

R. R. Ticket
 Cash advanced

Telegram
 Minister Rev L McNair 35.00

Casket Wagon & Gainesville
 Physician at Nephth Gainesville

County or City Burial
 Automobiles S & S - 15.00

Baggage or Express Train No. 465.00

Carey Hand Funeral Home

Name of deceased William Flemming
 Date of death Mon Nov-25-35 3 PM
 Cause of death Pulmonary Edema
 Place of death County Home
 Residence County Home
 Age 75 Y'rs 0 Mo's 2 Days
 Weight 145 Height 5 ft. 7 in. Eyes
 Funeral at Chapel
 Date Fri Nov 29 1935 230 P. M
 Account charged Edward Fleming

Address
 Account guaranteed small insurance
 Address Prudential

Embalming Y Dressing 25.00
 Robe, Suit, Dress 6.00
 Underwear and Hose 1.00
 Casket 6-3-Gr cup 75.00

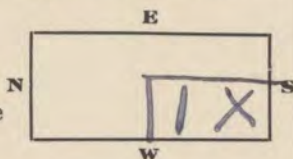
Casket with Copper Lin. ✓
 Style of Casket Spr - F. T
 No. of Casket 22
 Outside Box R-9

Shipping Case or Vault
 Handles Short
 Pillow Set ✓

Name Plate at Rest
 Cemetery Greenwood
 Section G- S.W. 1/4 Lot 43

I Other Graves

X Grave on this date



Cremation
 Single Grave
 Opening and Closing Grave Private 15.00

Body Shipped to
 R. R. Ticket

Cash advanced

Telegram
 Minister Rev Mr. St John 5.00
 Casket Wagon (1)

Physician Dr Beaudahl

County or City Burial
 Automobiles SVS- 15.00

Baggage or Express Train No. 142.00

Carey Hand Funeral Home

Name of deceased *Mrs. Lula Knapp*
 Date of death *Tues Nov-26-35* *12:17-PM*
 Cause of death *Carcinoma, right parotid gland*
 Place of death *Res-*
 Residence *715 W. Yale*
 Age *62* Y's *62* Mo's *62* Days *62*
 Weight *100* Height *5* ft. *6* in. Eyes *62*
 Funeral at *Res*
 Date *Wed Nov 27-* 193*5* *2-PM*
 Account charged *F. B. Knapp*
 Address *715 West Yale*
 Account guaranteed _____
 Address _____
 Embalming *care of Body-* *25.00*
 Robe, Suit, Dress _____
 Underwear and Hose *✓*
 Casket *6-3 Gr Doe* *60.00*
 Casket with Copper Lin. *✓*
 Style of Casket *Oct-*
 No. of Casket *51411-*
 Outside Box *✓*
 Shipping Case or Vault *✓*
 Handles *Ext-*
 Pillow Set *yes*
 Name Plate *✓*
 Cemetery *Cremation*
 Section _____ Lot _____
 I Other Graves _____
 X Grave on this date _____
 Cremation *Cremation* *50.00*
 Single Grave _____
 Opening and Closing Grave *Body*
 Body Shipped to *Cremated*
 R. R. Ticket *8-A, W. 11-29-35*
 Cash advanced _____
 Telegram _____
 Minister *Rev Shadley*
 Casket Wagon *(1)*
 Physician *Dr T A Neal*
 County or City Burial _____
 Automobiles *SY5-* *15.00*
 Baggage or Express Train No. _____
150.00

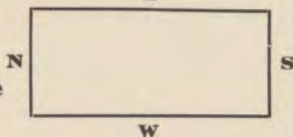
Carey Hand Funeral Home

Name of deceased Wilson & Smith
 Date of death Nov 24-35 5 PM
 Cause of death Cancer of Prostate
 Place of death O.G.H.
 Residence Mt Dora
 Age 63 Y'rs 4 Mo's 12 Days
 Weight 98 Height 5 ft. 7 in. Eyes br
 Funeral at Mt Dora
 Date Tues Nov 26 1935 A M
 Account charged Rohalaum T. H.
 Address Mt Dora Fla
 Account guaranteed OK
 Address
 Embalming Cremation
 Robe, Suit, Dress Body arrive 4 PM
 Underwear and Hose 11-24-35
 Casket Body Cremated 430 PM
 Casket with Copper Lin. 11-24-35
 Style of Casket will call for Ashes
 No. of Casket
 Outside Box Mrs Smith died here in
 Shipping Case or Vault Hospital
 Handles Rohalaum of Mt Dora
 Pillow Set Called for Body & Brought
 Name Plate Back for cremation
 Cemetery Permit Reads Orlando
 Section Only Lot

37.50

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.

37.50

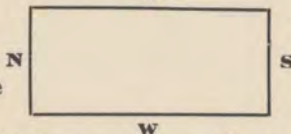
will call for ashes

Carey Hand Funeral Home

Name of deceased Jas Wm Epling
 Date of death Nov 18
 Cause of death Blood poison from leg injury
 Place of death Res
 Residence Lakeland Fla
 Age 53 Y'rs 0 Mo's 17 Days
 Weight 200 Height 5 ft. 10 in. Eyes Grey
 Funeral at Lakeland & Committal Services in
 Date Crematory chapel Nov 27 1935 11:30 AM
 Account charged Smith & Leukes Inc
 Address Lakeland Fla
 Account guaranteed Check
 Address _____
 Embalming Cremation 37 58
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Paid Reader 5.00
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket Wed 11:30 a.m.
 Outside Box Nov 27-35 by auto
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body Cremated
 Name Plate 10:30 Wed
 Cemetery Nov 27-35
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation Will call for
 Single Grave Ashes
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Mr Jas Lawrence
 Casket Wagon had Committal
 Physician Service
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$42.50

Carey Hand Funeral Home

Name of deceased Rebecca M. Neely
 Date of death Nov 23 a.m.
 Cause of death Broncho Pneumonia
 Place of death County Home
 Residence Olando Fla
 Age 91 Y's 6 Mo's 23 Days _____
 Weight 125 Height 5 ft. 6 in. Eyes _____
 Funeral at Grave Side
 Date 11-29-35 1935 11-A M
 Account charged County

Address _____

Account guaranteed _____

Address _____

Embalming Dressing

Robe, Suit, Dress _____

Underwear and Hose _____

Casket 6-3- 14.50

Casket with Copper Lin. _____

Style of Casket Spr

No. of Casket _____

Outside Box Reg

Shipping Case or Vault _____

Handles _____

Pillow Set _____

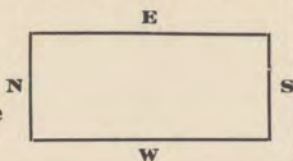
Name Plate _____

Cemetery County Home

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 Dr. Beardsall

County or City Burial _____

Automobiles 14.50

Baggage or Express Train No. _____

Carey Hand Funeral Home

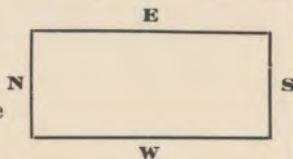
Name of deceased J. R. Russell
 Date of death Nov-27-35 P.M.
 Cause of death Pulmonary Gland Cholera
 Place of death County Home
 Residence 125 E. Market street
 Age _____ Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sat-11-30 1935 4-P. M
 Account charged Estate
 Address _____
 Account guaranteed _____
 Address _____
 Embalming Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Gr Doe
 Casket with Copper Lin. ☒
 Style of Casket Oct-O.T. 60.00
 No. of Casket S-1411
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate ☒
 Cemetery Cremation
 Section _____ Lot _____
 I Other Graves ☐
 X Grave on this date ☐
 Cremation Cremation 50.00
 Single Grave Body Cremated
 Opening and Closing Grave 9 A.M.
 Body Shipped to Mon Dec-2-35
 R. R. Ticket _____
 Cash advanced ashes to be scattered
 Telegram Greenwood Cemetery
 Minister _____
 Casket Wagon (1) 5.00
 Physician Dr. Beardsahl
 County or City Burial _____ 150.00
 Automobiles _____
 Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased *Joseph Carl Handtke*
 Date of death *Nov - 25 - 35*
 Cause of death *acute dilatation of Heart*
 Place of death *Res*
 Residence *Daytona Beach Fla*
 Age *62* Y'rs *8* Mo's *9* Days
 Weight *160* Height *5* ft. *9* in. Eyes *Blue*
 Funeral at *Daytona Beach*
 Date *Nov 27* 193*5* M
 Account charged *Haig & Brooks*
 Address *Daytona Beach Fla*
 Account guaranteed *OK*
 Address _____
 Embalming *Cremation* *37.50*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. *Body arrived*
 Style of Casket *dy auto 8:30 PM*
 No. of Casket *11-27-35*
 Outside Box _____
 Shipping Case or Vault *Body Cremated*
 Handles *11-29-35 9-a M.*
 Pillow Set _____
 Name Plate *Express Ashes to*
 Cemetery *Haig & Brook T. St.*
 Section *Daytona Beach* Lot *Fla*

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.

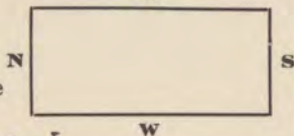
37.50

Carey Hand Funeral Home

Name of deceased Mrs. Andrew Josephine Slavik
 Date of death Sun Nov 28-35 9 A.M.
 Cause of death _____
 Place of death Res
 Residence 207 - Orlando ave
 Age 35 Y'rs 9 Mo's 4 Days _____
 Weight 90 Height 5 ft. 3 in. Eyes _____
 Funeral at East Church -
 Date Sun - Dec 1 - 1935 2 30 P. M
 Account charged Paul Slavik
 Address 270 Orlando ave
 Account guaranteed by payments
 Address _____
 Embalming & Dressing
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 4-3 in Cope
 Casket with Copper Lin. ☒
 Style of Casket Ext. O.T.
 No. of Casket 1972
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate at Rest
 Cemetery Oviedo
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation Car 9 min

Single Grave

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister Dean Johnson

Casket Wagon (1)

Physician Dr. Spier

County or City Burial

Automobiles S. & S.

Baggage or Express Train No.

35.00

97.50

5.00

15.00

5.00

20.00

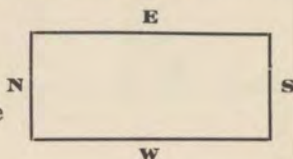
177.50

Carey Hand Funeral Home

Name of deceased Chas W. Chase Sr
 Date of death Nov - 24 - 35
 Cause of death acute Cardiac Failure
 Place of death Res
 Residence Miami Fla
 Age 72 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 1935 M
 Account charged W. L. Philbrick
 Address Miami
 Account guaranteed _____
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body arrived
 Casket with Copper Lin. by Express
 Style of Casket W. L. # 89
 No. of Casket Wed Nov 27 - 35
 Outside Box _____
 Shipping Case or Vault Body Cremated
 Handles Wed - 11 - 27 - 35 4 - P.M.
 Pillow Set _____
 Name Plate Ashes, Expressed to
 Cemetery W. L. Philbrick
 Section F. D. Miami Fla

I Other Graves

X Grave on this date



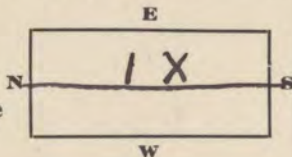
Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____ 37.50

Carey Hand Funeral Home

Name of deceased Oscar Anderson
 Date of death Thurs - Nov - 28 - 35 - 6 - PM
 Cause of death _____
 Place of death Res
 Residence Oakland
 Age 20 Y'rs 1 Mo's 22 Days _____
 Weight 145 Height 5 ft. 5 in. Eyes _____
 Funeral at Chapel
 Date Sun Dec - 1 1935 3:30 P M
 Account charged Mrs Jennie Woodward
 Address 1720 Charles st Oakland
 Account guaranteed Estate
 Address _____
 Embalming Dressing
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 Gr Cup
 Casket with Copper Lin. ☒
 Style of Casket Gr Gr Cup
 No. of Casket 22
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Short
 Pillow Set ☒
 Name Plate at Rest
 Cemetery Greenwood
 Section G. E 1/2 - 39 Lot _____

I Other Graves

X Grave on this date



Cremation _____

Single Grave _____

Opening and Closing Grave ☒ etc

Body Shipped to _____

R. R. Ticket closed car

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon (1)

Physician _____

County or City Burial _____

Automobiles S.Y.S.

Baggage or Express Train No. _____

25. 00

75. 00

15. 00

5. 00

5. 00

15. 00

140. 00

Carey Hand Funeral Home

Name of deceased *William Duane West*
 Date of death *Sun - Dec - 1 - 35 -* 240-AM.
 Cause of death *Myocardial Degeneration*
 Place of death *Res -*
 Residence *520 - N. Garland*
 Age *90* Y'rs *6* Mo's *7* Days
 Weight *125* Height *5* ft. *6* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Tues - Dec - 3* 193*5* *11 - A. M*
 Account charged *Estate*
 Address *Mrs W. D. West*
 Account guaranteed *520 - N. Garland*
 Address
 Embalming *yes* 35.00
 Robe, Suit, Dress
 Underwear and Hose *Shirt Tie Collar* 3.00
 Casket *6-3- Duv -* 65.00
 Casket with Copper Lin.
 Style of Casket *Oct - OT*
 No. of Casket *5 1411*
 Outside Box *Brass Lin* 25.00
 Shipping Case or Vault
 Handles *Ext -*
 Pillow Set *yes*
 Name Plate
 Cemetery *Cremation*
 Section Lot
 E
 I Other Graves
 X Grave on this date
 N S
 W
 Cremation *Cremation* 50.00
 Single Grave *Body cremated 3-PM*
 Opening and Closing Grave *Tue 12-3-35*
 Body Shipped to *will call for ashes*
 R. R. Ticket *Don*
 Cash advanced *Music* 5.00
 Telegram *Cash To J Adeock* 5.00
 Minister
 Casket Wagon *(1)* 5.00
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

193.00

Carey Hand Funeral Home

Name of deceased Oscar S. Haines
 Date of death Nov-27-35
 Cause of death Intestinal obstruction
 Place of death Res
 Residence Ft. Lauderdale -
 Age 61 Y'rs 11 Mo's 10 Days
 Weight 200 Height 5 ft. 4 in. Eyes
 Funeral at Ft Lauderdale

Date 193 M
 Account charged Fanning F. Home
 Address Ft Lauderdale -
 Account guaranteed OK -

Address
 Embalming Cremation 37.50

Robe, Suit, Dress

Underwear and Hose Body arrived

Casket by Express

Casket with Copper Lin. # 89 Surv

Style of Casket Dec-1-35

No. of Casket

Outside Box Body cremated

Shipping Case or Vault 8-A-M-

Handles 12-2-35

Pillow Set

Name Plate will call for Ashes

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

County or City Burial

Automobiles

Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased		<u>John Gustafson</u>	
Date of death		<u>Sun Dec 1-35</u> PM	
Cause of death			
Place of death		<u>Res</u>	
Residence		<u>810- 22nd St Angelbert</u>	
Age	Y'rs	Mo's	Days
Weight	Height	ft.	in. Eyes
Funeral at		<u>Chapel</u>	
Date		<u>Two-Dec 3 - 1935</u> 5-P. M	
Account charged			
Address		<u>810- 22nd St Angelbert</u>	
Account guaranteed		<u>Estate of Polk</u>	
Address		<u>and 90- 3rd Ave Note</u>	
Embalming & Dressing		35.00	
Robe, Suit, Dress		9.90	
Underwear and Hose		1.00	
Casket <u>4-3-Gr Cup</u>		97.50	
Casket with Copper Lin.			
Style of Casket <u>Oct OT</u>			
No. of Casket <u>1972 - T</u>			
Outside Box <u>Reg -</u>			
Shipping Case or Vault			
Handles <u>Ext</u>			
Pillow Set <u>yes</u>			
Name Plate <u>at Rest</u>			
Cemetery <u>at Homeland Fila</u>			
Section <u>Near Bartow</u>		Lot	

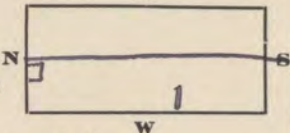
☐ I Other Graves
☒ X Grave on this date

E
S

N
W

Cremation	<u>Amuse</u>	5.00
Single Grave		
Opening and Closing Grave		
Body Shipped to	<u>Homeland by auto</u>	
R. R. Ticket		
Cash advanced	<u>Cash To Min</u>	5.00
Telegram		
Minister	<u>Rev Bookhart</u>	
Casket Wagon	<u>(1)</u>	5.00
Physician	<u>Dr McEwan</u>	
County or City Burial		
Automobiles	<u>S & S-</u>	40.00
Baggage or Express Train No.		198.40

Carey Hand Funeral Home

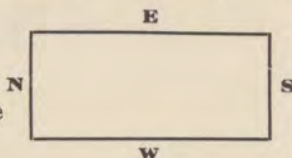
Name of deceased Baby Richards
 Date of death Dec - 3 - 35 - 9-AM
 Cause of death _____
 Place of death The Sant
 Residence 2517 Harrison St
 Age 1 Y'rs 1 Mo's 2 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Gray Side
 Date Tues Dec 3 - 1935 330 P M
 Account charged Joe W. Richards
 Address 2517 Harrison St
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2-0 - H L - 12.50
 Casket with Copper Lin. _____
 Style of Casket Sp A W
 No. of Casket 1
 Outside Box Reg
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section B - W 1/2 - Lot 135
 I Other Graves _____
 X Grave on this date 
 Cremation Senior Bkg 2.50
 Single Grave _____ 2.50
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician Dr. Frank Hanner
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 17.50

Carey Hand Funeral Home

Name of deceased *Mr. Elroy M. Kendue Jones*
 Date of death *Dec - 1 - 35*
 Cause of death *New Port Richey*
 Place of death *Chas Brights Gynaecologist*
 Residence *New Port Richey*
 Age *90* Y'rs *4* Mo's *17* Days
 Weight *150* Height *6* ft. *2* in. Eyes
 Funeral at *New Port Richey*
 Date _____ 193____ M
 Account charged *Vincent Funeral Home*
 Address *Taylor Springs Fla*
 Account guaranteed *OK*
 Address _____
 Embalming *Cremation* 37.50
 Robe, Suit, Dress _____
 Underwear and Hose *Body covered*
 Casket *by Express S.A.L.*
 Casket with Copper Lin. *Ins - 12-3-35*
 Style of Casket *130 P.M.*
 No. of Casket _____
 Outside Box *Body cremated*
 Shipping Case or Vault *4-P.M. 12-3-35*
 Handles _____
 Pillow Set *ashes Express to*
 Name Plate *Carl A. Radde*
 Cemetery *888 The Arcade*
 Section *Cleveland - Ohio* 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

County or City Burial

Automobiles

Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Mrs Evelyn Hyman Cobb
 Date of death Dec - 2 - 35
 Cause of death _____
 Place of death Res
 Residence Bradenton Fla
 Age 53 Y's 6 Mo's 17 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Bradenton
 Date _____ 193 _____ M
 Account charged Turners Funeral Home
 Address Bradenton Fla
 Account guaranteed _____
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose Body arrived
 Casket by Express a c x
 Casket with Copper Lin. # 74
 Style of Casket Windsday Morning
 No. of Casket Dec - 4 - 35
 Outside Box _____
 Shipping Case or Vault _____
 Handles Body Cremated
 Pillow Set 9-a in 12-4-35
 Name Plate _____
 Cemetery Ashes Exposed to
 Section Turners F. Home Lot _____
Bradenton Fla
 I Other Graves
 N S
 E
 W

 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. _____

37.50

Carey Hand Funeral Home

Name of deceased <u>Richard Collins</u>	
Date of death <u>Dec - 5 - 35</u>	<u>2 A M</u>
Cause of death <u>Suicide shot thru head</u>	
Place of death <u>Ogden</u>	
Residence <u>21 - South Bumby Ave</u>	
Age <u>50</u>	Y'rs <u>7</u> Mo's <u>24</u> Days <u></u>
Weight <u>160</u>	Height <u>5 - ft. 8 - in.</u> Eyes <u>Brown</u>
Funeral at <u>Chapel</u>	
Date <u></u>	193 <u>5</u>
Account charged <u>Mrs Mable Collins</u> (Wife)	
Address <u>21 S. Bumby</u>	
Account guaranteed <u>Estate</u>	
Address <u></u>	
Embalming <u>+ Dressing</u>	35. <u>00</u>
Robe, Suit, Dress <u>✓</u>	
Underwear and Hose <u>✓</u>	
Casket <u>6-3 - 22 cup</u>	45. <u>00</u>
Casket with Copper Lin. <u>Body</u>	
Style of Casket <u>Cremated 9-A M</u>	
No. of Casket <u>Nov-Dec-9-35</u>	
Outside Box <u></u>	
Shipping Case or Vault <u>will call</u>	
Handles <u>for ashes -</u>	
Pillow Set <u></u>	
Name Plate <u></u>	
Cemetery <u></u>	
Section <u></u>	Lot <u></u>
	E
I Other Graves <u></u>	<div style="border: 1px solid black; width: 150px; height: 50px; margin: 0 auto; position: relative;"> N S W </div>
X Grave on this date <u></u>	
Cremation <u>Cremation</u>	50. <u>00</u>
Single Grave <u>(2) Cante</u>	10. <u>00</u>
Opening and Closing Grave <u></u>	
Body Shipped to <u></u>	
R. R. Ticket <u></u>	
Cash advanced <u></u>	
Telegram <u></u>	
Minister <u></u>	
Casket Wagon <u>(1)</u>	5. <u>00</u>
Physician <u></u>	
County or City Burial <u></u>	
Automobiles <u>Amber Ser</u>	5. <u>00</u>
Baggage or Express Train No. <u></u>	150. <u>00</u>

Carey Hand Funeral Home

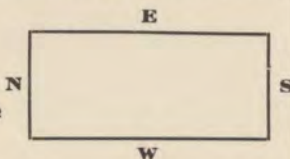
Name of deceased *Miss Ella Jane Souther*
 Date of death *Dec-4-35*
 Cause of death *Cerebral Thrombosis*
 Place of death *Bayshore Hotel Tampa*
 Residence *S. Boston Mass*
 Age *84* Y'rs *2* Mo's *17* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 193 _____ M
 Account charged *J. L. Reed*
 Address *Tampa Fla*
 Account guaranteed *Ch-*
 Address _____
 Embalming *Cremation* 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. *Body arrived*
 Style of Casket *by auto 11-a.m.*
 No. of Casket *Dec-5-35-*
 Outside Box _____
 Shipping Case or Vault *Body Cremated*
 Handles *11 30 a.m. 12-5-35*
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves N
S
 X Grave on this date W
 Cremation *ashes Expressed to*
 Single Grave *Forest Hills Cemetery*
 Opening and Closing Grave _____
 Body Shipped to *Jamaica Plain P.O.*
 R. R. Ticket *Boston Mass*
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 37.50

Carey Hand Funeral Home

Name of deceased Mrs. Elizabeth Simons
 Date of death Sept-18-35
 Cause of death Myocarditis
 Place of death Miami
 Residence Miami Fla
 Age 74 Y's 5 Mo's 24 Days
 Weight 120 Height 5 ft. 1 1/2 in. Eyes
 Funeral at
 Date 193 M
 Account charged W. H. Combs
 Address Miami Fla
 Account guaranteed
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. Body unlined
 Style of Casket by Express a c x
 No. of Casket # 89- 12 11 PM
 Outside Box Dec-5-35
 Shipping Case or Vault
 Handles Body Cremated
 Pillow Set 4-PM-12-5-35
 Name Plate ashes Expressed to
 Cemetery W. H. Combs F. Home
 Section Miami Fla 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

County or City Burial

Automobiles

Baggage or Express Train No.

37.50

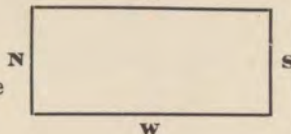
Carey Hand Funeral Home

Name of deceased Mrs Sarah Kottelman
 Date of death Dec - 5 - 35 P. M.
 Cause of death Cardiac dilatation
 Place of death O. G. H.
 Residence Sanford
 Age 61 Y'rs 8 Mo's 4 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Dec - 6 - 1935 11. A. M.
 Account charged Morris Kottelman
 Address Sanford
 Account guaranteed _____
 Address _____

Embalming Case of Body 15. 00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6 - 3 - Case - 15. 00
 Casket with Copper Lin. ✓
 Style of Casket Sgt.
 No. of Casket _____
 Outside Box Reg
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves

X Grave on this date

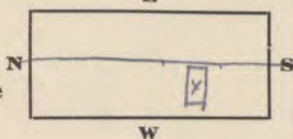


Cremation _____
 Single Grave _____
 Opening and Closing Grave Yele 15 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rabi 5 00
 Casket Wagon (1)
 Physician Dr. Collins
 County or City Burial _____
 Automobiles 3 v 5 - 15 00
 Baggage or Express Train No. 6.500

Carey Hand Funeral Home

Name of deceased *Mrs Willie Mae Smith*
 Date of death *Fri Dec-6-35* *12:55 PM*
 Cause of death *Staphylococci Septicemia*
 Place of death *C.G.H.*
 Residence *Apopka*
 Age *30* Y'rs *1* Mo's *1* Days
 Weight *135* Height *5* ft. *0* in. Eyes
 Funeral at *Res*
 Date *Sun Dec-8-1935* *2-PM*
 Account charged *John W. Smith*
 Address *Apopka Fla*
 Account guaranteed
 Address
 Embalming *& Dressing* *35.00*
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket *6-6-Metal Northern* *385.00*
 Casket with Copper Lin. ✓
 Style of Casket *Stat 7-2-e*
 No. of Casket *559-Northern*
 Outside Box *Reg*
 Shipping Case or Vault ✓
 Handles *Ext*
 Pillow Set *yes Tapered*
 Name Plate ✓
 Cemetery *Apopka*
 Section Lot *17*

I Other Graves
 X Grave on this date



Cremation
 Single Grave
 Opening and Closing Grave *OT & etc* *15.00*
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister *Rev Johnson of Eustis*
 Casket Wagon *(1)* *5.00*
 Physician *Dr C Hoffman*
 County or City Burial
 Automobiles *S & S* *15.00*
 Baggage or Express Train No. *455.00*

Carey Hand Funeral Home

Name of deceased Floyd Gygons
 Date of death Dec- 8- 35- 725 A
 Cause of death Coronary Thrombosis
 Place of death Res
 Residence 618- East Kaley
 Age 60 Y'rs 7 Mo's 25 Days
 Weight 200 Height 6 ft. 3 in. Eyes
 Funeral at Chapel
 Date Thurs Dec 12 1935 M
 Account charged Mrs F. Gygons
 Address 618 E. Kaley ave.
 Account guaranteed small Estate
 Address

Embalming Dressing 35.00
 Robe, Suit, Dress 15.00
 Underwear and Hose ✓
 Casket 6-3-6 100.00

Casket with Copper Lin. ✓
 Style of Casket Oct. O.T.
 No. of Casket 1972- 1

Outside Box Reg

Shipping Case or Vault ✓

Handles Ext

Pillow Set yes

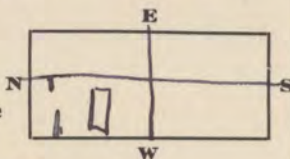
Name Plate

Cemetery Winter Park

Section 57- Lot B

I Other Graves

X Grave on this date



Cremation 1 cante 5.00

Single Grave

Opening and Closing Grave 7 cante 15.00

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister Channing

Casket Wagon (1) 5.00

Physician Dr. J. M. Evans

County or City Burial

Automobiles S & S 15.00

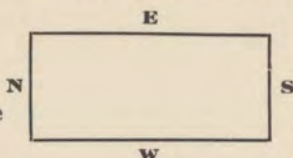
Baggage or Express Train No. 190.00

Cash - 25.00

Carey Hand Funeral Home

Name of deceased Baby Jefferson
 Date of death Dec 6 -
 Cause of death _____
 Place of death Pres -
 Residence 12041 - West Long St
 Age ✓ Y'rs ✓ Mo's ✓ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 193 _____ M
 Account charged City
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2-0-Plain
 Casket with Copper Lin. _____
 Style of Casket Spr H. In
 No. of Casket ✓
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles ✓
 Pillow Set ✓
 Name Plate ✓
 Cemetery Greenwood
 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 Dr
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

7.00



7.00

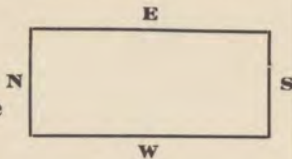
Carey Hand Funeral Home

Name of deceased Mrs. Bertha Thiede
 Date of death Sun Dec 8-35- 2:30 PM
 Cause of death Arterio Sclerosis
 Place of death Res
 Residence 120 N. Maine st
 Age 87 Y's 4 Mo's 10 Days
 Weight 120 Height 5 ft. 0 in. Eyes
 Funeral at Chapel
 Date Tues Dec 10- 1935 3:30 P. M
 Account charged Mrs Mary Steinbach
 Address 120 N. Maine st
 Account guaranteed Cash
 Address

Embalming ✓ Dressing 25. 00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3- Gr Cup 35. 00
 Casket with Copper Lin. ✓
 Style of Casket Spr- Flat Top
 No. of Casket Tampa
 Outside Box Reg-
 Shipping Case or Vault ✓
 Handles Bale
 Pillow Set ✓
 Name Plate at Rest
 Cemetery Greenwood
 Section 8- Lot

I Other Graves

X Grave on this date



Cremation
 Single Grave White 7. 00
 Opening and Closing Grave 10. 00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Rev Geo Trapp 5. 00
 Casket Wagon (1)
 Physician Dr Childs
 County or City Burial
 Automobiles S Y S 15. 00
 Baggage or Express Train No. 9 97. 00
27. 00
70. 00

Pd. Cash 70.00
all Money availb.

Carey Hand Funeral Home

Name of deceased Mrs Emma Frances Cone
 Date of death Dec 6-35-
 Cause of death Carcinoma of left breast
 Place of death Res
 Residence Lake Worth Fla
 Age 74 Y'rs 8 Mo's 28 Days
 Weight 165 Height ft. in. Eyes
 Funeral at
 Date 193 M
 Account charged Smith Funeral Home
 Address Lake Worth Fla
 Account guaranteed OK
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose Body unwid
 Casket by auto 9:30 P M
 Casket with Copper Lin. Sun-12-8-35
 Style of Casket
 No. of Casket Body Cremated
 Outside Box 9-A M- 12-9-35
 Shipping Case or Vault
 Handles ashes returned to
 Pillow Set Smith Funeral Home
 Name Plate Lake Worth Fla
 Cemetery
 Section Lot
 E
 I Other Graves N 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 37.50
 Automobiles
 Baggage or Express Train No.

Carey Hand Funeral Home

Name of deceased Lewis P. Jones
 Date of death Dec 9
 Cause of death Senility Cardiac Renal degeneration
 Place of death Residence
 Residence Lacoochee, Fla
 Age 73 Y's 4 Mo's 17 Days
 Weight 116 Height 5 ft. 8 in. Eyes Grey
 Funeral at Lacoochee, Fla
 Date Dec 1935 M
 Account charged Coleman Ferguson
 Address Lade City Fla
 Account guaranteed Check
 Address
 Embalming Cremation \$ 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket Body Arrived
 No. of Casket by Auto Truck
 Outside Box 3:30 P.M. Dec 10-35
 Shipping Case or Vault
 Handles
 Pillow Set Body Cremated
 Name Plate Truck - H.P. M.
 Cemetery Dec 10 - 35
 Section Lot
 E
 I Other Graves
 X Grave on this date
 N S
 W
 Cremation Ashes expressed
 Single Grave To Mr. Fred
 Opening and Closing Grave M. Clamma
 Body Shipped to Lacoochee Fla
 R. R. Ticket
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

\$ 37.50

Carey Hand Funeral Home

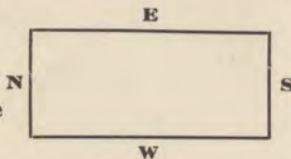
Name of deceased William G. Black
 Date of death Dec-10-35
 Cause of death Cancer of Tongue & Throat
 Place of death Res
 Residence Pine Lock Drive
 Age 54 Y'rs 10 Mo's 19 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Thurs. Dec-12 1935 9:45 M
 Account charged Mrs. W. G. Black
 Address Pine Lock Drive
 Account guaranteed County Charge
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket No money at
 Outside Box all by County
 Shipping Case or Vault _____
 Handles Mrs. Redneck Oked acct
 Pillow Set _____
 Name Plate _____
 Cemetery County Home
 Section Sat Dec 14-35 Lot 2-P.M.

14 50

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 Dr. Redding
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

14 50

Carey Hand Funeral Home

Name of deceased Mrs Lora E Beeler
 Date of death Nov Dec-10-35 PM
 Cause of death _____
 Place of death Dr Healy
 Residence Clummont
 Age 71 Y'rs 10 Mo's 3 Days _____
 Weight 145 Height 5 ft. 5 in. Eyes _____
 Funeral at M E Church at Clummont
 Date Sun Dec 15 1935 4-P M
 Account charged Estate
 Address _____
 Account guaranteed Insurance & Estate
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3- Emb Plush 275.00
 Casket with Copper Lin. yes
 Style of Casket Electric
 No. of Casket X
 Outside Box Req 10.00
 Shipping Case or Vault ✓
 Handles Short
 Pillow Set yes
 Name Plate ✓
 Cemetery Clummont
 Section Family Lot Lot _____
 I Other Graves _____
 X Grave on this date _____
 Cremation closed - ear 5.00
 Single Grave _____
 Opening and Closing Grave Y + etc 15.00
 Body Shipped to ✓
 R. R. Ticket ✓
 Cash advanced ✓
 Telegram ✓
 Minister _____
 Casket Wagon 4) 5.00
 Physician Dr Healy
 County or City Burial _____
 Automobiles Buck 25.00
 Baggage or Express Train No. 370.00

Carey Hand Funeral Home

Name of deceased *Dr. Harry M. Pierce*
 Date of death *Dec - 9 - 35*
 Cause of death *Cardiac Vascular Disease*
 Place of death *St. Petersburg Fla*

Residence _____
 Age *74* Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____

Funeral at _____
 Date _____ 19*35* _____ M

Account charged *John S Rhoder*

Address *Ch*

Account guaranteed _____

Address _____

Embalming *Cremation* *37.50*

Robe, Suit, Dress _____

Underwear and Hose _____

Casket _____

Casket with Copper Lin. *Body arrived*

Style of Casket *by auto 1-PM*

No. of Casket *Thurs 12-12-35*

Outside Box _____

Shipping Case or Vault *Body Cremated*

Handles *130 PM 12-12-35*

Pillow Set _____

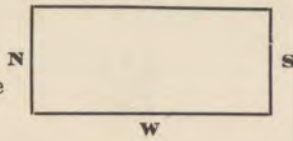
Name Plate *Ashes Del to*

Cemetery *Relative*

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 _____

County or City Burial _____

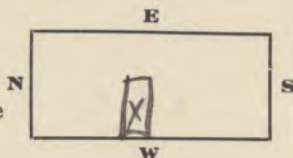
Automobiles _____

Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of deceased Cora Mae Rawson
 Date of death Dec 12 2:50 P.M.
 Cause of death _____
 Place of death A. G. N.
 Residence Apopka Fla
 Age 32 Yrs 3 Mo's _____ Days _____
 Weight 100 Height 5 ft. _____ in. Eyes _____
 Funeral at M. E. Church Apopka -
 Date Sun Dec - 15 - 1935 3-P. M.
 Account charged Raymond Rawson
 Address Apopka Fla
 Account guaranteed Insurance
 Address _____
 Embalming ☒ Dressing 35.00
 Robe, Suit, Dress White 9.00
 Underwear and Hose ☒ _____
 Casket 6-3-Gr Plunk Set 175.00
 Casket with Copper Lin. ☒ _____
 Style of Casket Oct 1/2-C-
 No. of Casket 1927-S-
 Outside Box R+g
 Shipping Case or Vault ☒ _____
 Handles Ext _____
 Pillow Set yes it
 Name Plate ☒ _____
 Cemetery Apopka
 Section New Cemetery Lot _____
 I Other Graves _____
 X Grave on this date _____
 Cremation _____
 Single Grave _____
 Opening and Closing Grave T + etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon (1) 5.00
 Physician Dr. M. E. Swan
 County or City Burial _____
 Automobiles S + S 15.00
 Baggage or Express Train No. _____
amb Sew - 5.00



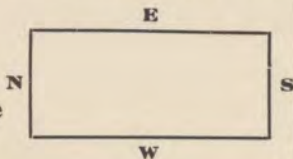
259.00

Carey Hand Funeral Home

Name of deceased Parkinson D. Shepherd
 Date of death Dec-14-35- 11:55 A.M.
 Cause of death _____
 Place of death Res
 Residence Apopka
 Age 87 Y'rs 10 Mo's 8 Days _____
 Weight 135 Height 5 ft. 6 in. Eyes _____
 Funeral at Grave
 Date Sun Dec-15- 1935 2-P M
 Account charged Margaret Shepherd
 Address Apopka Fla
 Account guaranteed R.T. Carlton
 Address Citrus Exchange Plymouth Fla
 Embalming & Dressing & C. Wagon 25.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 4-3-200 90.00
 Casket with Copper Lin. ☒
 Style of Casket Get D.T. St. Cas.
 No. of Casket 55-Walker
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate at Rest
 Cemetery Apopka New Cemetery
 Section B Lot 46

I Other Graves

X Grave on this date



Cremation _____

Single Grave _____

Opening and Closing Grave T & etc 15.00

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister Rev Sellers & Sonneck

Casket Wagon ☒

Physician Dr. McBride

County or City Burial _____

Automobiles S. & S. 15.00

Baggage or Express Train No. \$145.00

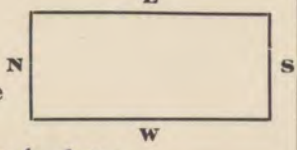
Carey Hand Funeral Home

Name of deceased Miss Gertrude P Morton
 Date of death Sat Dec-14-35 PM
 Cause of death _____
 Place of death 768-N. Orange
 Residence 768-N. Orange
 Age 72 Y'rs 11 Mo's 8 Days _____
 Weight 135 Height 5 ft. 5 in. Eyes _____
 Funeral at Esp Church P
 Date Mon-Dec 16- 1935 330 M
 Account charged P. S. Morton
 Address 715-8. Cw ave
 Account guaranteed Estate
 Address _____

Embalming Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Gr Cup 65.00
 Casket with Copper Lin. ☒
 Style of Casket Sgt Flat
 No. of Casket 22-5-
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Short
 Pillow Set ☒
 Name Plate at Rest
 Cemetery Greenwood
 Section _____ Lot _____

I Other Graves

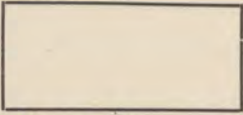
X Grave on this date



Cremation closed car 5.00
 Single Grave _____
 Opening and Closing Grave T & C 15.00
 Body Shipped to Car for minister 5.00
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon (1) 5.00
 Physician Dr T A Neal
 County or City Burial _____
 Automobiles 8 & 5 15.00
 Baggage or Express Train No. _____

\$145.00

Carey Hand Funeral Home

Name of deceased	<i>Henry W Birdseye</i>		
Date of death	<i>Dec - 11 - 35</i>		
Cause of death	<i>Corary Thrombosis</i>		
Place of death	<i>Res. Point</i>		
Residence	<i>Miami Beach Fla</i>		
Age	<i>52</i>	Y'rs	Mo's Days
Weight		Height	ft. in. Eyes
Funeral at	<i>Miami</i>		
Date		193	M
Account charged	<i>W. L. Philbrick</i>		
Address	<i>Miami Fla</i>		
Account guaranteed	<i>Cash</i>		
Address			
Embalming	<i>Cremation</i>		<i>37.50</i>
Robe, Suit, Dress			
Underwear and Hose			
Casket			
Casket with Copper Lin.	<i>Body arrived</i>		
Style of Casket	<i>by Auto</i>		
No. of Casket	<i>9-P.M.</i>		
Outside Box	<i>12-14-35</i>		
Shipping Case or Vault	<i>Body</i>		
Handles	<i>Cremated 9-30-P.M.</i>		
Pillow Set	<i>Sat Dec-14-35</i>		
Name Plate			
Cemetery			
Section	Lot		
	E		
I Other Graves	N  S		
X Grave on this date			
Cremation	<i>Ashes Given to</i>		
Single Grave	<i>W. L. Philbrick</i>		
Opening and Closing Grave	<i>11:30 A.M.</i>		
Body Shipped to	<i>Sun Dec-15-35</i>		
R. R. Ticket			
Cash advanced			
Telegram			
Minister			
Casket Wagon			
Physician			
County or City Burial			
Automobiles			
Baggage or Express Train No.	<i>37.50</i>		

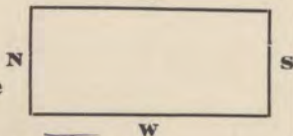
Carey Hand Funeral Home

Name of deceased *Philip Van Rensselaer Van Wyck*
 Date of death *Sun - Dec - 15 - 35* *AM*
 Cause of death *Chro Myocarditis*
 Place of death *400 Ky ave Winter Park*
 Residence *Opshawake Lake Butler N.J.*
 Age *67* Y's *Mo's* Days *11*
 Weight *160* Height *5* ft. *8* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Tues Dec - 17* 1935 *11-A* M
 Account charged *Mrs. P. V. R. Van Wyck*
 Address *400 Ky ave Winter Park*
 Account guaranteed _____

Address _____
 Embalming *Y Dressing* *35.00*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3-92* *65.00*
 Casket with Copper Lin. *✓*
 Style of Casket *Get 09*
 No. of Casket *1411-X*
 Outside Box *✓*
 Shipping Case or Vault *✓*
 Handles *Ext*
 Pillow Set *yes* *Name & Date*
 Name Plate *1868-1935*
 Cemetery *West*
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation *Cremation* *50.00*
 Single Grave *Bray Inn* *45.00*
 Opening and Closing Grave _____
 Body Shipped to *Ridgewood N.J.*
 R. R. Ticket *music* *5.00*
 Cash advanced _____
 Telegram _____
 Minister *Rev Geo Badger* *10.00*
 Casket Wagon *(1)*
 Physician *Dr Mallory*
 County or City Burial *210.00*
 Automobiles _____

Baggage or Express Train No.

Body cremated 11:45 AM

Dec 17-35

ashes Delivered To

Carey Hand Funeral Home

Name of deceased Baby Allengood
 Date of death Sun Dec 15-35 a
 Cause of death Found Dead Probably Pneumonia
 Place of death Res
 Residence Crown Point
 Age _____ Y'rs 2 Mo's 15 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Sun Dec 15 1935 5 P. M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2-0 W L
 Casket with Copper Lin. _____
 Style of Casket Syn
 No. of Casket Hm
 Outside Box Reg
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Peace
 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 Jim Peace
 Casket Wagon _____
 Physician Dr Scott
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

14.50

14 50

Carey Hand Funeral Home

Name of deceased Mrs Elizabeth Eckberger
 Date of death Sun Dec 15 1935 AM
 Cause of death Pneumonia
 Place of death County Home
 Residence Clear Lake Callands
 Age 75 Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Thurs - Dec 19 1935 10 A M
 Account charged Mrs Fred Siegrist
 Address _____
 Account guaranteed _____
 Address _____

Embalming Dussing 25 00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-42 euf. 35 00
 Casket with Copper Lin. _____
 Style of Casket Sgt 7 T
 No. of Casket 22
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Shat
 Pillow Set ☒
 Name Plate _____
 Cemetery Greenwood
 Section 9- Lot _____
 _____ E _____
 _____ N _____ S _____
 _____ W _____

I Other Graves _____
 X Grave on this date _____
 Cremation _____
 Single Grave White 7 00
 Opening and Closing Grave 10 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon (1) 5 00
 Physician Dr Beardsahl
 County or City Burial _____
 Automobiles S Y S 15 00
 Baggage or Express Train No. _____

97.00
 33
 60.00

Carey Hand Funeral Home

Name of deceased *Willcott M. Seligson*
Date of death *Sun Dec 15 - 35* PM
Cause of death *Apparently Cardiac Disease*
Place of death *Sow Dixie Near Farm Restaurant*
Residence *Boston Mass*
Age *58* Y's Mo's Days
Weight Height ft. in. Eyes
Funeral at *Rest*
Date 193 M
Account charged *R & E T. Gleason Co*
Address *335 Washington St Dorchester Mass*
Account guaranteed *W. W. Draft*
Address
Embalmng & Dressing 35 00
Robe, Suit, Dress ✓
Underwear and Hgse ✓
Casket *6-3- Gr Oak* 100. 00
Casket with Copper Lin. ✓
Style of Casket *Oct 07*
No. of Casket *1972 - 55 Walker*
Outside Box *Reg*
Shipping Case or Vault ✓
Handles *Ext*
Pillow Set *yes*
Name Plate *at Rest*
Cemetery *Rest*
Section Lot
E
I Other Graves
X Grave on this date
W
Cremation
Single Grave
Opening and Closing Grave
Body Shipped to *Dorchester Mass*
R. R. Ticket *Telegrams* 1. 45
Cash advanced *Express* 94. 34
Telegram *Pd Dr Gray* 5. 00
Minister
Casket Wagon *(2)* 10. 00
Physician *Dr Gray*
County or City Burial *Amb Service* 5. 00
Automobiles
Baggage or Express Train No. *24* 250. 79
True Night 12-17-35

Carey Hand Funeral Home

Name of deceased Baby Lindor
 Date of death Sun Dec - 15 - 35 P.M.
 Cause of death Prematurity 7 mos
 Place of death O G Hospital
 Residence Rt #2 Delands
 Age ✓ Y's ✓ Mo's ✓ Days ✓
 Weight ✓ Height ✓ ft. ✓ in. Eyes ✓
 Funeral at Grave
 Date Monday Dec 16 1935 P. M
 Account charged County
 Address ✓
 Account guaranteed ✓
 Address ✓
 Embalming ✓
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 2-0- H L
 Casket with Copper Lin. ✓
 Style of Casket Square
 No. of Casket N.W.
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles ✓
 Pillow Set ✓
 Name Plate ✓
 Cemetery County Home
 Section ✓ Lot ✓
 E
 I Other Graves ✓
 X Grave on this date ✓
 N
 W
 S
 Cremation ✓
 Single Grave ✓
 Opening and Closing Grave ✓
 Body Shipped to ✓
 R. R. Ticket ✓
 Cash advanced ✓
 Telegram ✓
 Minister ✓
 Casket Wagon ✓
 Physician Dr. Collins
 County or City Burial ✓
 Automobiles ✓
 Baggage or Express Train No. ✓

14.50

7460

Carey Hand Funeral Home

Name of deceased Dr. Eugene W. Scott
 Date of death Dec. 12 - 35
 Cause of death Chro. Myocarditis
 Place of death Yes
 Residence St. Petersburg
 Age 79 Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at St. Petersburg
 Date _____ 1935 _____ M
 Account charged John S. Rhodes
 Address St. Petersburg
 Account guaranteed OK -
 Address _____
 Embalming Cremation
 Robe, Suit, Dress _____
 Underwear and Hose Body Arranged
 Casket by auto 10 AM 12-15-35
 Casket with Copper Lin. _____
 Style of Casket Body Cremated
 No. of Casket 10-30 a.m. 12-15-35
 Outside Box _____
 Shipping Case or Vault Ashes Delivered
 Handles to Chas. E. Fisher
 Pillow Set member of family
 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 _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

37.50

Carry Hand Funeral Home

Name of deceased Howard M. Clenahan
 Date of death Dec-17-35 3:45 PM
 Cause of death _____
 Place of death Winter Park
 Residence Philadelphia Penn
 Age 63 Y's 1 Mo's 28 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Dest

Date _____ 193 _____
 Account charged Mrs Howard M. Clenahan
 Address _____

Account guaranteed _____

Address _____

Embalming & Dressing 35.00

Robe, Suit, Dress ☒

Underwear and Hose ☒

Casket 4-3 Mahogany 350.00

Casket with Copper Lin. ☒

Style of Casket State N.C.

No. of Casket 942 - Baynton

Outside Box Reg

Shipping Case or Vault ☒

Handles Ext Oxidized Copper

Pillow Set yes

Name Plate ☒

Cemetery Dest

Section _____ Lot _____

E

I Other Graves

N

S

X Grave on this date

W

Cremation Oliver H. Bair

Single Grave 1820 Chestnut St

Opening and Closing Grave

Body Shipped to Philadelphia Pa

R. R. Ticket D. Room 31.50

Cash advanced _____

Telegram (1) 86

Minister _____

Casket Wagon (2) 10.00

Physician Dr R Hotard

County or City Burial \$ 426.50

Automobiles _____

Baggage or Express Train No. 92

Wed-12-18-35

Carey Hand Funeral Home

Name of deceased <u>Rosetta A. Chambers</u>	
Date of death <u>Dec 17th</u>	<u>11 P.M.</u>
Cause of death _____	
Place of death <u>Res</u>	
Residence <u>Winter Garden Road</u>	
Age <u>37</u> Y'rs	<u>3</u> Mo's <u>18</u> Days
Weight <u>125</u>	Height <u>5</u> ft. <u>6</u> in. Eyes _____
Funeral at <u>Chapel - F. Home</u>	
Date <u>Friday Dec 20th</u>	<u>1935</u> <u>2 P.</u> M
Account charged <u>J. R. Chambers</u>	
Address <u>Winter Road Rt 3</u>	
Account guaranteed _____	
Address _____	
Embalming & Dressing	35.00
Robe, Suit, Dress ✓	
Underwear and Hose ✓	
Casket <u>6-6 Metal</u>	250.00
Casket with Copper Lin. ✓	
Style of Casket <u>Stat 1/2 c</u>	
No. of Casket <u>Mathew Orlans</u>	
Outside Box <u>R-9</u>	
Shipping Case or Vault ✓	
Handles <u>Ext</u>	
Pillow Set <u>yes</u> <u>W</u>	
Name Plate ✓	
Cemetery <u>Woodlawn</u>	
Section _____	Lot _____
	E
I Other Graves	<div style="border: 1px solid black; width: 150px; height: 50px; margin: 0 auto; position: relative;"> E N S W </div>
X Grave on this date	
Cremation <u>music</u>	7.50
Single Grave <u>(1) auto M-Y-P.B</u>	5.00
Opening and Closing Grave <u>T & etc</u>	15.00
Body Shipped to _____	
R. R. Ticket _____	
Cash advanced _____	
Telegram _____	
Minister <u>Rev Badger</u>	
Casket Wagon <u>(1)</u>	5.00
Physician <u>Dr. Scott</u>	
County or City Burial _____	
Automobiles <u>S & S</u>	15.00
Baggage or Express Train No. _____	332.50

Carey Hand Funeral Home

Name of deceased Elizabeth Abernathy
 Date of death Dec 48 10:55 a.m.
 Cause of death Natural Reproduction
 Place of death Fla Sant
 Residence Deland Fla (Fla Sant)
 Age 87 Y'rs 8 Mo's 3 Days
 Weight 145 Height 5 ft. 6 in. Eyes
 Funeral at Chapel - F. Home
 Date Thurs Dec 19 - 1935 4 P. M
 Account charged Mrs John Whitaker
 Address Tampa Fla
 Account guaranteed Estate
 Address

Embalming & Dressing 35.00

Robe, Suit, Dress ☒

Underwear and Hose ☒

Casket 6-6-Metal 375.00

Casket with Copper Lin. Inner

Style of Casket Stat H. C

No. of Casket M-1-

Outside Box Reg

Shipping Case or Vault ☒

Handles Ext

Pillow Set yes W-

Name Plate ☒

Cemetery In Vault

Section _____ Lot _____

E

I Other Graves

N

In Vault

S

X Grave on this date

W

Cremation _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to Tampa

R. R. Ticket _____

Cash advanced music 7.50

Telegram _____

Minister Dean Johnson

Casket Wagon (2) 10.00

Physician Dr. Taylor 42.50

County or City Burial _____

Automobiles Express 5.58

Baggage or Express Train No. 433.08

On acct of sickness Body Placed in Vault
 for short time Later to be taken to
Tampa for Burial

Shipped to J. H. Reed Sat Dec 28 1935 by Express

Carey Hand Funeral Home

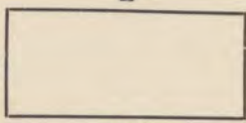
Name of deceased	Mary Louise Turrist		
Date of death	Dec 18 th	12:05 A.M.	
Cause of death	Acute Broncho Pneumonia		
Place of death	Res		
Residence	15 Esther St		
Age	Y'rs	Mo's	Days 20
Weight	Height	ft.	in. Eyes
Funeral at	Graveside		
Date	Wed- Dec 18 th	1935	3 P M
Account charged	Frank Turrist		
Address	15 Esther St		
Account guaranteed			
Address			
Embalming			
Robe, Suit, Dress			
Underwear and Hose			
Casket	2-0-H L.	12.50	
Casket with Copper Lin.			
Style of Casket	Spr		
No. of Casket	H 9m		
Outside Box	Reg		
Shipping Case or Vault			
Handles			
Pillow Set			
Name Plate			
Cemetery	g- Greenwood.		
Section		Lot	
		E	
I Other Graves			
X Grave on this date			
	N		S
	W		
Cremation			
Single Grave	Baby Grave	3.50	
Opening and Closing Grave		2.50	
Body Shipped to			
R. R. Ticket	Auto + Sew	5.00	
Cash advanced			
Telegram			
Minister	(Bray)		
Casket Wagon			
Physician	Dr. Sinclair		
County or City Burial			
Automobiles			
Baggage or Express Train No.	\$ 23.50		

Carey Hand Funeral Home

Name of deceased <u>Malissa Evans</u>	
Date of death <u>Dec 18</u>	<u>12:45 a.m.</u>
Cause of death _____	
Place of death <u>Res</u>	
Residence <u>Apopka Fla</u>	
Age <u>76</u> Yrs	<u>1</u> Mo's <u>7</u> Days
Weight _____	Height _____ ft. _____ in. Eyes _____
Funeral at <u>Graveside</u>	
Date <u>Thurs Dec 19</u>	<u>1935</u> <u>11 a. M</u>
Account charged <u>Mrs W. J. Haupt</u>	
Address <u>117 W. Adeline St Tampa Fla</u>	
Account guaranteed <u>Estate</u>	
Address _____	
Embalming & Dressing	35.00
Robe, Suit, Dress	
Underwear and Hose	50
Casket <u>6-3-Dr Gr Cope</u>	97.50
Casket with Copper Lin. <input checked="" type="checkbox"/>	
Style of Casket <u>Oct. H C</u>	
No. of Casket <u>55 Walker</u>	
Outside Box <u>Reg</u>	
Shipping Case or Vault <input checked="" type="checkbox"/>	
Handles <u>Ext -</u>	
Pillow Set <u>yes</u> <u>W</u>	
Name Plate <input checked="" type="checkbox"/>	
Cemetery <u>Apopka</u>	
Section _____	Lot _____
<div style="display: flex; justify-content: space-around; align-items: center;"> N <div style="border: 1px solid black; width: 150px; height: 60px; position: relative;"> <div style="position: absolute; top: -10px; left: 50%;">E</div> <div style="position: absolute; bottom: -10px; left: 50%;">W</div> <div style="position: absolute; right: -10px; top: 50%;">S</div> </div> S </div>	
I Other Graves	
X Grave on this date	
Cremation _____	
Single Grave _____	
Opening and Closing Grave <u>T & etc</u>	15.00
Body Shipped to _____	
R. R. Ticket _____	
Cash advanced _____	
Telegram _____	
Minister <u>At Apopka</u>	
Casket Wagon <u>Res</u>	10.00
Physician <u>Dr. Mc Bride</u>	
County or City Burial _____	
Automobiles <u>S & S</u>	15.00
Baggage or Express Train No. _____	173.00

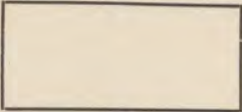
12-18- Cash-25.00

Carey Hand Funeral Home

Name of deceased Clara F. Herscher
 Date of death Dec 16
 Cause of death Cerebral Hemorrhage
 Place of death Key West Fla
 Residence Matawan New Jersey
 Age 60 Y'rs 10 Mo's 4 Days
 Weight 125 Height 5 ft. 5 in. Eyes Brown
 Funeral at Key West Fla
 Date Dec 1935 M
 Account charged Lofey Funeral Home
 Address Key West Fla
 Account guaranteed Chester cash
 Address _____
 Embalming _____
 Robe, Suit, Dress Cremation 37 50
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Body arrived by
 Outside Box baggage 1:10 P.M.
 Shipping Case or Vault Wed Dec 18
 Handles 1935
 Pillow Set Body Cremated
 Name Plate 3:30 Wed- Dec 18-35
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves 
 X Grave on this date _____
 Cremation Will call for
 Single Grave Ashes
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37 50

Carey Hand Funeral Home

Name of deceased Nellie C. Evans
 Date of death Dec 16
 Cause of death Lysol Poisoning - Possibly by mistake
 Place of death Res
 Residence New Smyrna Fla
 Age 49 Y's 3 Mo's 4 Days
 Weight 130 Height 5 ft. 5 in. Eyes Blue
 Funeral at New Smyrna Fla
 Date Dec 1935 M
 Account charged Settle Funeral Home
 Address New Smyrna Fla
 Account guaranteed Check
 Address _____
 Embalming Cremation 37 50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket by Auto Wed
 Outside Box 3 P.M. Dec 18-35
 Shipping Case or Vault _____
 Handles Body cremated
 Pillow Set Wed 3:30 P.M.
 Name Plate Dec 18-1935
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N  S
 W
 Cremation Ashes expressed
 Single Grave to Settle
 Opening and Closing Grave F. Home
 Body Shipped to New Smyrna
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37 50

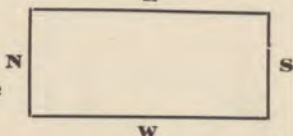
Carey Hand Funeral Home

Name of deceased Henry H. Williams
 Date of death Dec 15
 Cause of death Apoplexy
 Place of death Res
 Residence Tampa Fla
 Age 79 Y'rs 7 Mo's 6 Days
 Weight 140 Height 5 ft. 10 in. Eyes Gray
 Funeral at Tampa Fla
 Date Dec 18 1935 M
 Account charged Blount Funeral Home
 Address Tampa Fla
 Account guaranteed Check
 Address _____
 Embalming Cremation \$ 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Copper Urn \$ 5.00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Body arrived
 Outside Box Auto Wed 3:15 P.m.
 Shipping Case or Vault Dec 18-35
 Handles _____
 Pillow Set Body Cremated
 Name Plate Wed 3:30 P.m.
 Cemetery Dec 18-1935
 Section _____ Lot _____

I Other Graves

X Grave on this date

use 3rd B29



Cremation Ashes expressed
 Single Grave To F.T. Blount Fla
 Opening and Closing Grave Tampa Fla
 Body Shipped to _____
 R. R. Ticket was 33.00 Mason
 Cash advanced N.S.M. and several other
 Telegram Ashes Expressed to Hawaii
 Minister for service then expressed to
 Casket Wagon San Francisco Calif for
 Physician Services & Placed in Crypt
 County or City Burial was many years
 Automobiles Funeral business in Hawaii
 Baggage or Express Train No. _____

\$ 42.50

Carey Hand Funeral Home

Name of deceased Frank N Boardman
Date of death Wed Dec-18-35 PM
Cause of death Myelofibrosis, Ref
Place of death C. G. H.
Residence 800 Edgewater Drive
Age 73 Y's 8 Mo's 21 Days
Weight _____ Height _____ ft. _____ in. Eyes _____
Funeral at College Park Baptist Church
Date Friday Dec 20 1935 3 P. M
Account charged Mrs F. N. Boardman
Address 800 Edgewater Drive
Account guaranteed Estate
Address _____
Embaling + Dressing 35.00
Robe, Suit, Dress _____
Underwear and Hose _____
Casket 6-3- Gr Bld. E. 225.00
Casket with Copper Lin. ✓
Style of Casket R C State
No. of Casket 121-T
Outside Box ✓
Shipping Case or Vault air Seal 125.00
Handles Ext
Pillow Set yes
Name Plate Name 1862
1935
Cemetery Greenwood
Section A 5 1/2 Lot 172

E

I Other Graves

N
S

1

1

X

W

X Grave on this date

Cremation (2) Autos 5.00 10.00
Single Grave 2 - P. B Cars 5.00 10.00
Opening and Closing Grave 7+ etc 15.00
Body Shipped to Car Min 5.00
R. R. Ticket _____
Cash advanced _____
Telegram _____
Minister Rev Smock
Casket Wagon (1) 5.00
Physician Dr
County or City Burial _____
Automobiles S & S 15.00
Baggage or Express Train No. 485 00

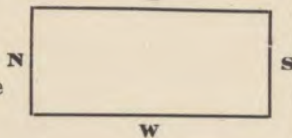
Carey Hand Funeral Home

Name of deceased Nathaniel Scott
 Date of death Wed Dec - 18 - 35 PM
 Cause of death Hemiplegia
 Place of death City
 Residence 45 Polk ave
 Age _____ Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave side
 Date Thurs Dec 19 - 1935 3 P. M
 Account charged City
 Address _____
 Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3- Poffin 14. 00
 Casket with Copper Lin. _____
 Style of Casket sg
 No. of Casket 4 M
 Outside Box Reg
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section _____ Lot _____

I Other Graves

X Grave on this date



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

14. 00

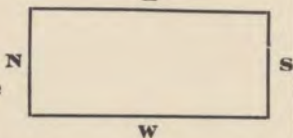
Carey Hand Funeral Home

Name of deceased John T Niles
 Date of death Thurs Dec 19-35
 Cause of death Pulmonary Neclerosis
 Place of death County Home
 Residence _____
 Age 77 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Dec 21-Sat 1935 11 a M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3-
 Casket with Copper Lin. _____
 Style of Casket Sgt H.M.
 No. of Casket _____
 Outside Box Reg-
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section 9- Lot _____

I Other Graves

X Grave on this date



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

14 50

7.00
6.50

15 00

43 00

County 14.50
Ger-Wise 28.50 cash

Carry Hand Funeral Home

Name of deceased Mr Chas. S. Searles
 Date of death Dec 16th
 Cause of death Shock - fracture skull lacerations
 Place of death Ft Lauderdale Fla
 Residence _____
 Age 68 Y'rs 5 Mo's 27 Days
 Weight 200 Height 5 ft. 7 in. Eyes Blue
 Funeral at Ft Lauderdale Fla
 Date Dec 1935 M
 Account charged Fairchild F. Home
 Address Ft Lauderdale Fla
 Account guaranteed check
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose Cremation 37 50
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket by express Thurs
 Outside Box 12:30 P.m 12-19-35
 Shipping Case or Vault _____
 Handles Body Cremated
 Pillow Set Friday 3 P.m.
 Name Plate Dec 19-1935
 Cemetery _____
 Section _____ Lot _____
 _____ E _____
 I Other Graves _____
 X Grave on this date _____
 _____ N _____ S _____
 _____ W _____
 Cremation Express Ashes to
 Single Grave Fairchild F.
 Opening and Closing Grave Home
 Body Shipped to Ft Lauderdale
 R. R. Ticket Fla
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$37 50

Carey Hand Funeral Home

Name of deceased Mrs Mary O Ga Nun
 Date of death Fri Dec 20-35 9 a.m.
 Cause of death Coronary Thrombosis
 Place of death Res
 Residence 1398 S. Orange Winter Park
 Age 81 Y's 1 Mo's 8 Days
 Weight 145 Height 5 ft. 5 in. Eyes
 Funeral at Deat

Date _____ 193__ M

Account charged Mary Ga Nun

Address _____

Account guaranteed Insurance

Address _____

Embalming ✓ Dressing 35.00

Robe, Suit, Dress ✓

Underwear and Hose ✓

Casket 6-3-Gr Cup 97.50

Casket with Copper Lin. ✓

Style of Casket Oct 07.

No. of Casket 55- Walker

Outside Box Reg

Shipping Case or Vault ✓

Handles Ext

Pillow Set yes

Name Plate at Rest

Cemetery Deat

Section _____ Lot _____

E

I Other Graves

X Grave on this date

N S

W

Cremation _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to Brewster N.Y.

R. R. Ticket _____

Cash advanced Express 76.18

Telegram _____

Minister _____

Casket Wagon (2) 10.00

Physician Mrs Dr Hart

County or City Burial _____

Automobiles _____

Baggage or Express Train No. 76 218.68

Fri Night 12-20-35

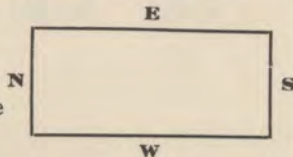
Carey Hand Funeral Home

Name of deceased Mr Harold R Dunning
 Date of death Dec-18-35
 Cause of death _____
 Place of death Res
 Residence St Petersburg
 Age 52 Y'rs 6 Mo's 27 Days _____
 Weight 135 Height 5 ft. 10 in. Eyes _____
 Funeral at _____
 Date _____
 Account charged Endicott Funeral Home
 Address St Petersburg Fla
 Account guaranteed OK
 Address _____
 Embalming Cremation
 Robe, Suit, Dress _____
 Underwear and Hose Body arrived
 Casket by auto
 Casket with Copper Lin. 12 45 PM
 Style of Casket Wm 12-20-35
 No. of Casket _____
 Outside Box Body cremated
 Shipping Case or Vault S-W-M
 Handles Sat 12-21-35
 Pillow Set _____
 Name Plate Ashes Exposed
 Cemetery Endicott F.H.
 Section St Petersburg Lot Fla

37.50

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.

37.50

Carey Hand Funeral Home

Name of deceased Mr Hobart B James
 Date of death Dec -17-35
 Cause of death Accidental Drowning
 Place of death Res
 Residence St Petersburg West Palm Beach
 Age 44 Y'rs 2 Mo's 29 Days
 Weight 165 Height 5 ft. 8 in. Eyes
 Funeral at W. Palm Beach
 Date _____ 193____ M
 Account charged Terguson F. Home
 Address West Palm Beach
 Account guaranteed OK
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body arrived
 Casket with Copper Lin. By Express
 Style of Casket # 91-
 No. of Casket 12-20-35
 Outside Box _____
 Shipping Case or Vault Body
 Handles Cremated 8-a M
 Pillow Set Sat-12-21-35
 Name Plate _____
 Cemetery Ashes Expressed to
 Section Terguson F. Home Lot _____
West Palm Beach Fla
 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. _____

37.50

Carey Hand Funeral Home

Name of deceased Eugene O. Steele
 Date of death Fri. Dec. 20-35 AM
 Cause of death Carcinoma of face
 Place of death Res.
 Residence _____

Age _____ Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____

Funeral at Sat
 Date Sat Dec 21 1935 M

Account charged County
 Address _____

Account guaranteed _____
 Address _____

Embalming _____

Robe, Suit, Dress _____

Underwear and Hose _____

Casket 93 Coffin 14 50

Casket with Copper Lin _____

Style of Casket _____

No. of Casket _____

Outside Box _____

Shipping Case or Vault _____

Handles _____

Pillow Set _____

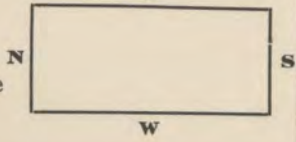
Name Plate _____

Cemetery County Home

Section _____ Lot _____

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 [Signature]

Casket Wagon _____

Physician _____

County or City Burial _____

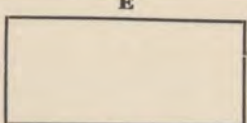
Automobiles _____

Baggage or Express Train No. _____

14 50

Carey Hand Funeral Home

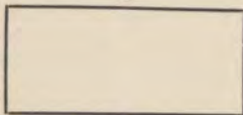
Tenest

Name of deceased Baby Thermost
 Date of death Tue Dec-20-35 5 P.m.
 Cause of death Still Birth
 Place of death O. G. H. Barrocho
 Residence 518 Lakeland S
 Age ✓ Y'rs ✓ Mo's ✓ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 193 _____ M _____
 Account charged City
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2-0-
 Casket with Copper Lin. _____
 Style of Casket sq
 No. of Casket 4 m
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate Greenwood
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N  S
 W
 Cremation _____
 Single Grave Baby City
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician Dr. Collins
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

7. 00

7. 00

Carey Hand Funeral Home

Name of deceased John Graham Martin
 Date of death Sat Dec 21-35 10-PM
 Cause of death Bronchial Pneumonia
 Place of death County Home
 Residence County Home
 Age _____ Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Monday Dec 23 1935 11 A M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 14.50
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box Reg
 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 Dr Beardsall
 County or City Burial 14.50
 Automobiles _____
 Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased William Thomas
 Date of death Sun Dec 22 - 35 AM
 Cause of death Cerebral Hemorrhage
 Place of death C. G. H.
 Residence Xenia Ohio
 Age 78 Y'rs 4 Mo's 0 Days
 Weight 200 Height 5 ft. 7 in. Eyes
 Funeral at Deat

Date 193 M
 Account charged Mrs Wm H. Thomas
 Address Xenia Ohio
 Account guaranteed Ok

Address Dressing 35.00

Embalming Robe, Suit, Dress
 Underwear and Hose
 Casket 6-6 Metal Gun M-Tin 395.00

Casket with Copper Lin. ✓
 Style of Casket R. C. State
 No. of Casket 245 Belmont
 Outside Box Reg

Shipping Case or Vault ✓
 Handles Ext
 Pillow Set yes
 Name Plate ✓

Cemetery Deat
 Section _____ Lot _____

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

Cremation _____
 Single Grave _____
 Opening and Closing Grave _____

Body Shipped to Xenia Ohio
 R. R. Ticket ✓ Pull also auto 105.90
 Cash advanced to Ralph Thomas 100.00

Telegram 354-118-76-76-76 7.00
 Minister Dia on trunk 1.00
 Casket Wagon (2) 10.00

Physician Dr J. M. Egan
 County or City Burial _____
 Automobiles amb car 12-21-35 5.00

Baggage or Express Train No 76 \$658.90
Mon Night 12-23-35

Carey Hand Funeral Home

Name of deceased Baby Corverson
 Date of death Dec 22nd
 Cause of death Sill Born
 Place of death Res
 Residence 818. S. Paramore
 Age ☒ Y's ☒ Mo's ☒ Days
 Weight _____ Height _____ ft. _____ in. Eyes _____

Funeral at _____
 Date _____ 193 _____ M

Account charged City

Address _____

Account guaranteed _____

Address _____

Embalming _____

Robe, Suit, Dress _____

Underwear and Hose _____

Casket 2 - 0 7.00

Casket with Copper Lin. _____

Style of Casket Spr

No. of Casket HM

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 Colonel

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician Dr. H. Daniels

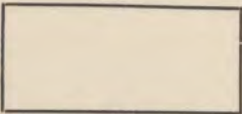
County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

Stark & Strong

Carey Hand Funeral Home

Name of deceased *Mrs Belle Hyde*
 Date of death *Sun Dec 22-35* 130-P
 Cause of death *Senile Broncho Pneumonia*
 Place of death *City San*
 Residence *Winter Garden*
 Age *69* Y'rs *0* Mo's *13* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Dist*
 Date _____ 193 _____ M
 Account charged *Mrs Maude Stevens*
 Address *Winter Garden*
 Account guaranteed _____
 Address _____
 Embalming *& Dressing* 35.00
 Robe, Suit, Dress *White* 10.00
 Underwear and Hose *B- Soss*
 Casket *Shipped from Birmingham*
 Casket with Copper Lin. _____
 Style of Casket *Simple Chg* 15.00
 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
 Cremation *RR-* *\$33.95*
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced *C-W from Ex office* 5.00
 Telegram _____
 Minister _____
 Casket Wagon *(21)* 10.00
 Physician *Dr. J. A. Harty*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. *92*
Wed-12-23-35

\$75.00

Carey Hand Funeral Home

Name of deceased Clara E. Lewis
 Date of death Dec. 22-35
 Cause of death Arteriosclerotic Degeneration
 Place of death Res
 Residence Tampa Fla
 Age 75 Yrs 0 Mo's 10 Days
 Weight 112 Height 5 ft. 4 in. Eyes
 Funeral at Tampa
 Date _____ 1935 M
 Account charged Guernan Funeral Home
 Address Tampa Fla
 Account guaranteed OK
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Body arrived
 Style of Casket by Express in
 No. of Casket P.C.R. # 76
 Outside Box Tuesday morning
 Shipping Case or Vault Dec 24-35
 Handles _____
 Pillow Set Ashes Returned to
 Name Plate Guernan & Co
 Cemetery St. Dunstons
 Section Tampa Lot Fla
 E
 I Other Graves N S
 X Grave on this date W
 Cremation Body Cremated
 Single Grave 8-AM-12-24-35
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles 37.50
 Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased John H Ashley
 Date of death Tues Dec 24-35 4:15 PM
 Cause of death Pneumonia
 Place of death Ap. 119- Res of Son
 Residence Blountsville Ala
 Age 79 Y'rs 8 Mo's 12 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Deat

Date _____
 Account charged E. P. Ashley 193 son M
 Address Birmingham Ala
 Account guaranteed OK

Address _____
 Embalming Yes Dressing 35.00

Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3-5 State shipped here from
 Casket with Copper Lin. Birmingham
 Style of Casket State

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 _____
 N _____ E _____ S _____ W _____

Cremation Bring in casket from
 Single Grave Express office &
 Opening and Closing Grave Funing 5.00

Body Shipped to _____
 R. R. Ticket _____
 Cash advanced Express 33 94

Telegram _____
 Minister _____
 Casket Wagon (2) 10.00

Physician Dr. M. B. Bide
 County or City Burial _____
 Automobiles _____

Baggage or Express Train No. 92
Fri 12-27-35

83 94

Carey Hand Funeral Home

Name of deceased Mr Alexander W. Ware
 Date of death Tues Dec 24-35 8:45 PM
 Cause of death Pneumonia
 Place of death Res
 Residence 517 W. Hazel
 Age 65 Y'rs 6 Mo's 18 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Des

Date _____ 1935
 Account charged Mrs Florence Ware Widow
 Address _____

Account guaranteed Insurance
 Address _____

Embalming Dressing 85.00

Robe, Suit, Dress ✓

Underwear and Hose ✓

Casket 6-3-12 Bed-c 150.00

Casket with Copper Lin. ✓

Style of Casket Oct H.T.

No. of Casket S1411

Outside Box Reg

Shipping Case or Vault ✓

Handles Ext

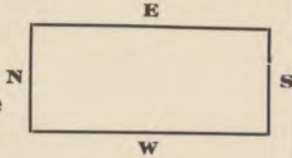
Pillow Set yes

Name Plate ✓

Cemetery Spring Grove Cincinnati

Section 52 Lot 198

I Other Graves _____
 X Grave on this date _____



Cremation _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to Cincinnati Ohio

R. R. Ticket 3-2840 1421 1421 54.80

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon (2) 10.00

Physician Dr. Spies

County or City Burial _____

Automobiles _____

Baggage or Express Train No. 76

Sat Night 12-28-35 251.80

Carey Hand Funeral Home

Name of deceased *Mrs Lucy Jane Nelson*
 Date of death *Wed Dec-25-35* *9-PM*
 Cause of death *Myocarditis - degeneration*
 Place of death *Res*
 Residence *Bumby Place Vineland Rd*
 Age *78* Y'rs *6* Mo's *1* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Tue Dec 27* 1935 *10 A* M
 Account charged *R. C. Funn*
 Address *Orlando Box 1401*
 Account guaranteed _____
 Address _____
 Embalming *Dussing* *35.00*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3-Gr D* *35.00*
 Casket with Copper Lin. ☒
 Style of Casket *Oct. 09*
 No. of Casket *51411*
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles *Ext*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Cremation*
 Section _____ Lot _____
 I Other Graves ☐
 X Grave on this date ☐
 Cremation *Cremation* *50.00*
 Single Grave _____
 Opening and Closing Grave *Body*
 Body Shipped to *Cremated 2-PM*
 R. R. Ticket *Tue Dec-27-35*
 Cash advanced *will call for ashes*
 Telegram _____
 Minister _____
 Casket Wagon *(1)* *5.00*
 Physician _____
 County or City Burial _____
 Automobiles *125.00*
 Baggage or Express Train No. _____

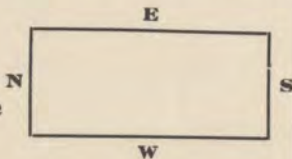
Carey Hand Funeral Home

Name of deceased *Mr John S. Souther*
 Date of death *Dec 23-35*
 Cause of death *Cerebral Thrombosis*
 Place of death *Tampa*
 Residence *Jamaica Plains P. O Boston Mass*
 Age *79* Y'rs *0* Mo's *18* Days
 Weight *140* Height *6* ft. in. Eyes
 Funeral at *Tampa*
 Date _____ 193____ M
 Account charged *J. L. Reed & Son*
 Address *Tampa Fla*
 Account guaranteed *OK*
 Address _____
 Embalming *Cremation*
 Robe, Suit, Dress _____
 Underwear and Hose *Body arrived*
 Casket *by auto 5 PM*
 Casket with Copper Lin. *Thurs 12-24-35*
 Style of Casket _____
 No. of Casket *Body Cremated*
 Outside Box *5 15 PM 12-26-35*
 Shipping Case or Vault _____
 Handles *ashes Expressed to*
 Pillow Set *Supt Forest Hill*
 Name Plate *Cemetery*
 Cemetery *Jamaica Plains*
 Section *Boston Mass* Lot _____

37.50

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. _____

37.50

Carey Hand Funeral Home

Name of deceased	<i>Pearl Davis</i>		
Date of death	<i>Dec 26 - 35 -</i>		
Cause of death	<i>Thyroid Interstitial Nephritis - myo -</i>		
Place of death	<i>Res</i>		
Residence	<i>17 Hicks St</i>		
Age	<i>41</i>	Y'rs	<i>10</i> Mo's <i>29</i> Days
Weight		Height	ft. in. Eyes
Funeral at	<i>Grave Side</i>		
Date	<i>Dec 27</i>	193	<i>5</i> A.M.
Account charged	<i>City</i>		
Address			
Account guaranteed			
Address			
Embalming			
Robe, Suit, Dress			
Underwear and Hose			
Casket	<i>6-3</i>	<i>14.00</i>	
Casket with Copper Lin.			
Style of Casket			
No. of Casket			
Outside Box			
Shipping Case or Vault			
Handles			
Pillow Set			
Name Plate			
Cemetery	<i>Greenwood</i>		
Section		Lot	
		E	
I Other Graves	<div style="border: 1px solid black; width: 200px; height: 60px; position: relative; margin: 0 auto;"> E W N S </div>		
X Grave on this date			
Cremation			
Single Grave	<i>Colored</i>		
Opening and Closing Grave			
Body Shipped to			
R. R. Ticket			
Cash advanced			
Telegram			
Minister			
Casket Wagon			
Physician	<i>Dr. Hamilton</i>		
County or City Burial			
Automobiles	<i>14.00</i>		
Baggage or Express Train No.			

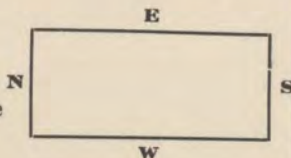
Carey Hand Funeral Home

Name of deceased Emma Nelson
 Date of death Dec 22-35
 Cause of death Apoplexy
 Place of death Res
 Residence Winter Park
 Age 69 Y'rs 3 Mo's 7 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Caland Church W. Park
 Date Sat Dec 28 1935 M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Caland - W. Park
 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 Dr Gardner
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

14.50

14.50

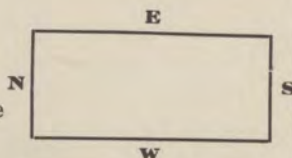
Carey Hand Funeral Home

Name of deceased Lula Scott
 Date of death Dec 27
 Cause of death _____
 Place of death Res
 Residence Apofka
 Age 45 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Sat Dec 28 1935 11 M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 14.50
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Col at Apofka
 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 McBride
 County or City Burial _____
 Automobiles 14.50
 Baggage or Express Train No. _____