

8-23-1936

Memoranda Book 106: Carey Hand Funeral Home records, August 23, 1936 to October 19, 1936

Carey Hand Funeral Home

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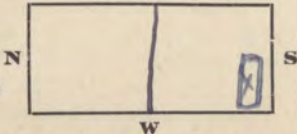
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Carey Hand Funeral Home

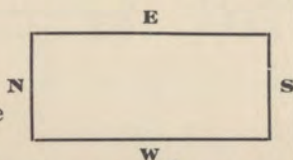
Name of deceased Lafayette M. Coggens
 Date of death Aug 25
 Cause of death Chro myocarditis
 Place of death Res
 Residence 323 W- Amelia
 Age 59 Y'rs 1 Mo's 8 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel F. Home
 Date Thurs Aug 27 1936 2:30 P. M
 Account charged Mrs L. M. Coggens
 Address 323 W. Amelia
 Account guaranteed Insurance
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____ Collar 25
 Casket 6/3 Grey B. Cloth 225.00
 Casket with Copper Lin. _____
 Style of Casket R. Cor. State
 No. of Casket 6008 New Orleans
 Outside Box ✓
 Shipping Case or Vault Bur Seal 125.00
 Handles Ext.
 Pillow Set yes
 Name Plate _____
 Cemetery Greenwood
 Section _____ Lot _____
 E
 I Other Graves 
 X Grave on this date _____
 W
 Cremation Burial Lot 5 1/2-72-V 150.00
 Single Grave _____
 Opening and Closing Grave etc 15.00
 Body Shipped to Car minister 5.00
 R. R. Ticket Family Car 5.00
 Cash advanced _____
 Telegram _____
 Minister Rev Carrington
 Casket Wagon ✓ 5.00
 Physician Dr. J. S. McEwan
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. SVS 15.00
\$580.25

Carey Hand Funeral Home

Name of deceased Florence A. Smith
 Date of death Aug 21
 Cause of death Thyroid toxicosis
 Place of death Res
 Residence Miami Fla
 Age 41 Y'rs Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Miami Fla
 Date Aug 1936 M
 Account charged W. L. Philbrick and Co
 Address Miami Fla
 Account guaranteed _____
 Address _____
 Embalming Cremation # 3750
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body Arrived
 No. of Casket by express Tues
 Outside Box 2:25 a.m.
 Shipping Case or Vault Aug 26-36
 Handles _____
 Pillow Set Body Cremated
 Name Plate Tues 2 P.m.
 Cemetery Aug 26-36
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation Express Ashes to
 Single Grave W. L. Philbrick
 Opening and Closing Grave and Co
 Body Shipped to Miami Fla
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

3750

Carey Hand Funeral Home

Name of deceased Simon N-Cordoba
 Date of death Aug. 24-1936
 Cause of death Pyelitis, Acute
 Place of death St. Petersburg, Fla
 Residence 625 Ridgewood Terr. St. Pete.
 Age 64 Y's Mo's Days
 Weight 160 Height ft. in. Eyes
 Funeral at St. Petersburg
 Date Aug. ? 1936 M
 Account charged The Baynard Co.
 Address St. Petersburg, Fla.
 Account guaranteed
 Address
 Embalming ✓ Cremation 37.50
 Robe, Suit, Dress ✓ Body
 Underwear and Hose ✓ arrived
 Casket ✓ by auto
 Casket with Copper Lin. ✓ Aug 28
 Style of Casket ✓ 12:30 PM
 No. of Casket ✓
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles ✓
 Pillow Set ✓
 Name Plate ✓
 Cemetery ✓
 Section ✓ Lot ✓
Body Cremated Friday
Aug. 28 1936
 I Other Graves
 X Grave on this date
 Cremation Yes
 Single Grave ✓ Ashes Expressed
 Opening and Closing Grave to
 Body Shipped to The Baynard Co.
 R. R. Ticket Air Express
 Cash advanced 8-28-1936
 Telegram
 Minister
 Casket Wagon
 Physician Dr. White- St. Petersburg
 County or City Burial
 Automobiles
 Baggage or Express Train No. 37 50

Carey Hand Funeral Home

Name of deceased Charles R. Warren
 Date of death Aug. 25, 1936
 Cause of death Cirrhosis of liver
 Place of death St. Petersburg, Fla
 Residence " "
 Age 81 Y's " Mo's " Days "
 Weight 175 Height 6/0 ft. in. Eyes Blue
 Funeral at St. Petersburg
 Date Aug 7 1936 M
 Account charged The Baynard Co
 Address St. Petersburg, Fla
 Account guaranteed "
 Address "
 Embalming Cremation 37 50
 Robe, Suit, Dress "
 Underwear and Hose "
 Casket Body arrived
 Casket with Copper Lin. by Auto
 Style of Casket Aug. 28
 No. of Casket 12:30 PM.
 Outside Box "
 Shipping Case or Vault "
 Handles Body Cremated
 Pillow Set Aug. 29, 1936
 Name Plate PM.
 Cemetery "
 Section " Lot "
 I Other Graves "
 X Grave on this date "
 Cremation Ashes Expressed
 Single Grave To The Baynard Co.
 Opening and Closing Grave "
 Body Shipped to 8-31-36
 R. R. Ticket St. Petersburg, Fla
 Cash advanced "
 Telegram "
 Minister "
 Casket Wagon "
 Physician Dr. White - St. Pete.
 County or City Burial "
 Automobiles "
 Baggage or Express Train No. 37 50

Carey Hand Funeral Home

Name of deceased Willard N. Van Brunt
 Date of death Aug. 29 - 1936
 Cause of death Arterio Sclerosis
 Place of death 217 N. Main - Orlando
 Residence 217 N. Main St
 Age 78 Y'rs 9 Mo's 5 Days
 Weight 145 Height 5 ft. 9 in. Eyes
 Funeral at Carey Hand Chapel
 Date Aug. 30 1936 5 P M
 Account charged Mrs T. P. Robinson
 Address Orlando Fla
 Account guaranteed Son
 Address
 Embalming + Dressing 35 00
 Robe, Suit, Dress
 Underwear and Hose
 Casket Sw Chg 25 00
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box Cremation 50 00
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot
 E
 I Other Graves
 X Grave on this date
 W
 Cremation Body cremated
 Single Grave 9-6 M - Sept - 1 - 36
 Opening and Closing Grave
 Body Shipped to will call / a Ashes
 R. R. Ticket
 Cash advanced Music 2.50
 Telegram
 Minister Dean Melrose 5 00
 Casket Wagon
 Physician Dr. J. S. McEwan
 County or City Burial 117 50
 Automobiles
 Baggage or Express Train No.

Carey Hand Funeral Home

Name of deceased Infant - Mrs. Robert Lawson
 Date of death Aug. 30 - 1936
 Cause of death Premature Smox
 Place of death Res. #2 Orlando, Fla.
 Residence _____

Age _____ Yrs _____ Mo's _____ Days 3 hrs.

Weight _____ Height _____ ft. _____ in. Eyes _____

Funeral at none

Date _____ 193_____ M

Account charged County

Address _____

Account guaranteed _____

Address _____

Embalming _____

Robe, Suit, Dress _____

Underwear and Hose _____

Casket 7-0- 14.50

Casket with Copper Lin. _____

Style of Casket _____

No. of Casket _____

Outside Box _____

Shipping Case or Vault _____

Handles _____

Pillow Set _____

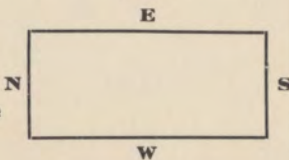
Name Plate _____

Cemetery _____

Section _____ Lot _____

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 _____

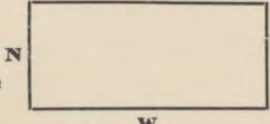
Physician Dr. Redding

County or City Burial County

Automobiles _____

Baggage or Express Train No. 14.50

Carey Hand Funeral Home

Name of deceased *Mrs. Diadarnig C. Wheeler*
 Date of death *Aug. 30 - 1936*
 Cause of death *Pneumonia*
 Place of death *O. G. H.*
 Residence *1424 Pinecrest - Orlando.*
 Age *83* Y'rs *3* Mo's *7* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Sept. 1* 193*6* *2 P* M
 Account charged _____
 Address _____
 Account guaranteed _____
 Address _____
 Embalming *Mrs. Wheeler*
 Robe, Suit, Dress *Had no money*
 Underwear and Hose *at all*
 Casket *gave complete service*
 Casket with Copper Lin. *and at*
 Style of Casket *no charge at all*
 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 _____
 W
 Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician *Dr. Chiles*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

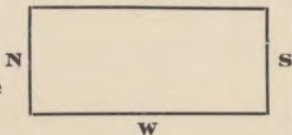
50

Carey Hand Funeral Home

Name of deceased Mrs Laura S. Beach
 Date of death Aug - 29 - 38
 Cause of death Myocarditis
 Place of death Res
 Residence Eustis Grand Island
 Age 78 Y'rs 1 Mo's 2 Days
 Weight 120 Height 5 ft. 5 in. Eyes
 Funeral at Eustis
 Date _____ 1938 M
 Account charged Spencer T. Home
 Address Eustis Fla -
 Account guaranteed Ck -
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket by Auto 430 P.M.
 Casket with Copper Lin. Mon Aug-31-38
 Style of Casket _____
 No. of Casket Body Cremated
 Outside Box 9-A.W. Sept-1-38
 Shipping Case or Vault _____
 Handles Casket Exp'd to
 Pillow Set Spencer T. Home
 Name Plate Eustis Fla
 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

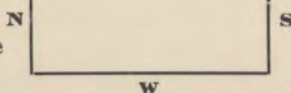
Name of deceased Margaret M. Simpson
 Date of death Aug 31 - 36 - 16-PM
 Cause of death Apoplexy
 Place of death Res
 Residence 614 East Rob Ave
 Age 61 Y'rs Mo's Days
 Weight 135 Height 5 ft. 5 in. Eyes
 Funeral at Dest
 Date 193 M
 Account charged Robt Simpson
 Address 614 E. Rob Ave
 Account guaranteed

Address
 Embalming Yes
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3-Gr Dur
 Casket with Copper Lin.
 Style of Casket Sgt H. C
 No. of Casket 1
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Dest
 Section Lot

35.00
 2.25
 75.00

I Other Graves

X Grave on this date



Cremation

Single Grave

Opening and Closing Grave

Body Shipped to Xenia Ohio

R. R. Ticket

Cash advanced Express 60.70

Telegram

Minister

Casket Wagon 2 10.00

Physician Dr Andrews

County or City Burial

Automobiles

Baggage or Express Train No. 76

Tues Night Sept 1-36

182.95

Cr Cash 95.00

Bal 60 DAY Note

Carey Hand Funeral Home

Name of deceased *Miss Katharine Coffey*
 Date of death *Sept-1-36- I.A.M.*
 Cause of death *O.G.A.*
 Place of death *O.G.A.*
 Residence *539 S. E. Lantry*
 Age _____ Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in _____ Eyes _____
 Funeral at *M. V. R. Jacksonville*
 Date _____ 193 _____ M
 Account charged *Le Roy Giles*
 Address *Orlando*
 Account guaranteed _____
 Address _____
 Embalming *Dressing* 35. 00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-3 In Dore* 100. 00
 Casket with Copper Lin. ☒
 Style of Casket *Oct H. Coff.*
 No. of Casket *1973 Tampa*
 Outside Box *Reg-*
 Shipping Case or Vault _____
 Handles *Ext*
 Pillow Set *yes*
 Name Plate *Kest*
 Cemetery *West*
 Section _____ Lot _____

E
 N S
 W

 I Other Graves _____
 X Grave on this date _____
 Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Jacksonville Fla*
 R. R. Ticket *(1)* 4. 40
 Cash advanced *Escort A.C.L. Pass*
 Telegram _____
 Minister _____
 Casket Wagon *(2)* 10. 00
 Physician *Dr. J. L. McEwen*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. *76*
Tues Night 9-1-36

149 40

Carey Hand Funeral Home

Name of deceased *Mrs Mathilda Holm*
 Date of death *Aug-30-36*
 Cause of death *Cancer of Bladder*
 Place of death *Res-*
 Residence *Sulphur Springs*
 Age *83* Yrs *0* Mo's *8* Days
 Weight *100* Height *5 ft. 8* in. Eyes
 Funeral at *Tampa*
 Date *193* M
 Account charged *Guernsey T. Home*
 Address *Tampa Fla*
 Account guaranteed *Ch-*
 Address
 Embalming *Cremation*
 Robe, Suit, Dress
 Underwear and Hose *Body unwashed*
 Casket *by Express # 74*
 Casket with Copper Lin. *No a M*
 Style of Casket *9-1-34 -*
 No. of Casket
 Outside Box *Body cremated*
 Shipping Case or Vault *9-a M*
 Handles *9-1-34 -*
 Pillow Set
 Name Plate *Ashes Expressed-*
 Cemetery
 Section Lot

37.50

I Other Graves

X Grave on this date

N

S

W

Cremation *Express Ashes to*
 Single Grave *John J. Holm*
 Opening and Closing Grave *8512*
 Body Shipped to *Huntley St*
 R. R. Ticket *Sulphur Springs*
 Cash advanced *Fla -*

Telegram

Minister

Casket Wagon

Physician

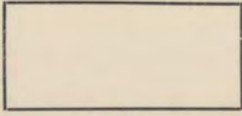
County or City Burial

Automobiles

Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Baby Williams
 Date of death Sept 1 - 36 a M
 Cause of death Syphilis
 Place of death Ree
 Residence 54 - Boston Place
 Age ✓ Y's ✓ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave side
 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 _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N  S
 W
 Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician Dr. Anderson
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

7 00

7 00

Carey Hand Funeral Home

Name of deceased Baby Lavene Radcliff
 Date of death Sept - 2 - 36 - 1130 PM
 Cause of death Memphria Blender
 Place of death O. G. H.
 Residence Gainesville Fla
 Age 1 Y's 19 Mo's 19 Days
 Weight Height ft. in. Eyes
 Funeral at Deat
 Date 193 M
 Account charged L. E. Radcliff
 Address Gainesville
 Account guaranteed Cash -
 Address
 Embalming 20 00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 2 - 0 - W L 8 50
 Casket with Copper Lin. ✓
 Style of Casket Spr
 No. of Casket N. W.
 Outside Box Reg
 Shipping Case or Vault
 Handles Small
 Pillow Set ✓
 Name Plate OD
 Cemetery Hampton Fla.
 Section Lot
 E
 I Other Graves
 X Grave on this date
 N S
 W
 Cremation
 Single Grave
 Opening and Closing Grave
 Body Shipped to Hampton
 R. R. Ticket by auto
 Cash advanced Bought Casket Dime
 Telegram these our work
 Minister have permit for same
 Casket Wagon
 Physician Dr. Linn Chari
 County or City Burial
 Automobiles
 Baggage or Express Train No. 28 50

Carey Hand Funeral Home

Name of deceased Harold F. Anderson
 Date of death Sept - 3 - 36 - 8 - A.M.
 Cause of death Gangrene of leg from ascending
 Place of death City of Saint Colon
 Residence Baynton Fla
 Age 30 - Y's 11 Mo's 5 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Simons T. Home Lake Worth
 Date _____ 193 _____ M
 Account charged Mrs Helen L Anderson Wife
 Address Baynton Fla
 Account guaranteed Insurance
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Gr. Doe 150.00
 Casket with Copper Lin. ☒
 Style of Casket Oct 1/2 - C -
 No. of Casket 123 1/2 - Jet.
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate ☒
 Cemetery West
 Section _____ Lot _____
 _____ E _____
 I Other Graves _____
 X Grave on this date _____
 _____ W _____
 Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced Express to Lake Worth 27.20
 Telegram L. S. Phone 1.00
 Minister _____
 Casket Wagon (2) 10.00
 Physician Dr. Healy
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 22320

after service in Lake Worth Body shipped
 to neessuame much for burial

Carey Hand Funeral Home

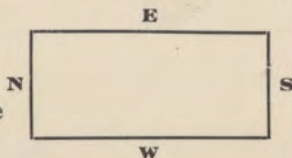
Name of deceased Mark Leslie Sheeter
 Date of death Sept 4 - 5:30 a.m.
 Cause of death Pulmonary Edema
 Place of death County Home
 Residence Orlando - Route #2
 Age 61 Y'rs 10 Mo's 28 Days
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at Chapel - Funeral Home
 Date Friday Sept 4 - 1936 4 P. M
 Account charged County Home
 Address _____

Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 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 Rev Morgan
 Casket Wagon _____
 Physician Lt. Beardsall
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$14.50

Carey Hand Funeral Home

Name of deceased *Elysebeth J French*
 Date of death *Sept 4 1934* *1015*
 Cause of death *Suicide shot Right Temple*
 Place of death *Pointsett Inn*
 Residence *Pointsett Inn*
 Age *47* Y'rs *11* Mo's *28* Days
 Weight *120* Height *5* ft. *5* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Tues - Sept 8 1934* *11-A M*
 Account charged *Phill Jarvis*
 Address *Cocoa Fla*
 Account guaranteed *Insurance*
 Address

Embalming *& Dressing*

35.00

Robe, Suit, Dress

3.00

Underwear and Hose

150 -

Casket *6-3-Y - Sev*

35.00

Casket with Copper Lin.

Style of Casket

No. of Casket

Outside Box

Shipping Case or Vault

Handles

Pillow Set *Body eviscerated 9 AM*

Name Plate *Wed - Sept - 9 - 34*

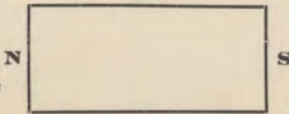
Cemetery *Casket exposed to*

Section *Phill Jarvis* Lot

Cocoa Fla -

I Other Graves

X Grave on this date



Cremation *Cremation*

50.00

Single Grave

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister

Casket Wagon *(1)*

5.00

Physician *Judge Shiver*

\$125.00

County or City Burial

450 -

Automobiles

Baggage or Express Train No.

\$1295.00

Pd cash for 3.00 spa towels

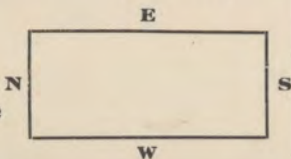
Carey Hand Funeral Home

Name of deceased Hattie Yarbrough
 Date of death Sept 5-36 350 PM
 Cause of death Obesity Crisis - Laryngitis
 Place of death St. H.
 Residence Tallahassee
 Age 35 Y'rs 9 Mo's 22 Days
 Weight 300 Height 5 ft. 6 in. Eyes W. P.
 Funeral at Haddell Res Interlocken Ave W. P.
 Date Thurs Sept 10- 1936 11-A M
 Account charged T. T. Yarbrough
 Address Tallahassee Fla -
 Account guaranteed _____
 Address _____

Embalming & Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-6 Metal Dark St 400.00
 Casket with Copper Lin. Inner
 Style of Casket State H. C
 No. of Casket _____
 Outside Box ✓
 Shipping Case or Vault Air Seal 125.00
 Handles Ext-
 Pillow Set yes
 Name Plate _____
 Cemetery Winter Park
 Section A B C + D Lot 48

I Other Graves

X Grave on this date



Cremation P. B Car 5.00
 Single Grave Car 9 min 5.00
 Opening and Closing Grave 7 1/2 etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician Dr J S McEuan
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. 600 00

Yarbrough with Pd 300.00
Wm Haddell Pd 300.00

Carey Hand Funeral Home

Name of deceased Joseph P. Perry
 Date of death Sun Sept 6-34 11 AM
 Cause of death Run over by ACZ #25 2:40 AM
 Place of death OSH. Cut leg by Belovs 11 news
 Residence 26 Main St Winter Garden
 Age 43 Y's 10 Mo's 14 Days
 Weight 145 Height 5 ft. 7 in. Eyes blue
 Funeral at Tranquillity
 Date Monday - Sept 7 193 6 4 P M
 Account charged Mrs J. P. Perry
 Address Winter Garden
 Account guaranteed Im Britt
 Address _____
 Embalming + Dressing Tru 35.00
 Robe, Suit, Dress _____ 1.00
 Underwear and Hose ✓
 Casket 5-9-14 L.S. 125.00
 Casket with Copper Lin. ✓
 Style of Casket Oct. H. C.
 No. of Casket 1922- 7
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set yes
 Name Plate at Rest
 Cemetery Coll
 Section _____ Lot _____
 I Other Graves _____
 X Grave on this date _____
 Cremation _____
 Single Grave _____
 Opening and Closing Grave 7+ etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Albert Cornett
 Casket Wagon (1) 5.00
 Physician D. J. L. M. Evans
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. 196 00

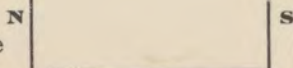
Carey Hand Funeral Home

Name of deceased Mollie Folds
 Date of death Sept 7 - 12:15 P
 Cause of death Crushed chest auto accident
 Place of death Ocala Fla
 Residence Orlando Fla
 Age 61 Y's 8 Mo's 13 Days
 Weight 165 Height 5 ft. 5 in. Eyes
 Funeral at Chapel
 Date Wed- Sept 9 - 1934 10 A M
 Account charged Richard Folds
 Address Orlando Fla
 Account guaranteed Insurance
 Address
 Embalming ☒ Dressing
 Robe, Suit, Dress Cape D. Patch
 Underwear and Hose
 Casket 6-8 In Casket
 Casket with Copper Lin. ☒
 Style of Casket Ext - H. C
 No. of Casket 1972 - 7
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext -
 Pillow Set yes
 Name Plate at Rest
 Cemetery Fitzgerald Ga
 Section _____ Lot _____

35.00
 25.00
 2.00
 100.00

I Other Graves

X Grave on this date



Cremation Burial at
 Single Grave Fitzgerald Ga

Opening and Closing Grave
 Body Shipped to Wilton Ga

R. R. Ticket

Cash advanced Express

16.40
 .65

Telegram Bockhart

Minister F. accident

25.00

Casket Wagon Sh. Martin - Ocala Fla

Physician C. H. & Sta

5.00

County or City Burial

Automobiles

Baggage or Express Train No.

209.05

Amb Serv

25.00

\$234.05

Living Pd / 2 Ex

16.40

\$217.45

Carey Hand Funeral Home

Name of deceased *Frank Reilly*
 Date of death *Sun Sept-6-36* *4 30 PM*
 Cause of death *Shot thru right temple Suicide*
 Place of death *O. J. H.*
 Residence *Famella*
 Age *55* Y'rs *8* Mo's *11* Days
 Weight *145* Height *5* ft. *10* in. Eyes
 Funeral at *Chapel*
 Date *Thurs Sept-10* 193*6* *4 P* M
 Account charged *County*

Address

Account guaranteed

Address

Embalming *& Dressing*

Robe, Suit, Dress

Underwear and Hose

Casket *6-3-Case* *14.50*

Casket with Copper Lin.

Style of Casket

No. of Casket

Outside Box

Shipping Case or Vault

Handles

Pillow Set

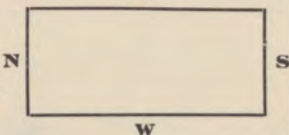
Name Plate

Cemetery

Section Lot

I Other Graves

X Grave on this date



Cremation

Single Grave *White* *7.00*

Opening and Closing Grave *15.00*

Body Shipped to *Surviv chg* *13.00*

R. R. Ticket *35.00*

Cash advanced

Telegram

Minister *Father Bishop*

Casket Wagon

Physician *Dr Chappell* *49.50*

County or City Burial

Automobiles

Baggage or Express Train No.

Jas. L. Reilly (Brother)
27-22-94 St New York City

Carey Hand Funeral Home

Name of deceased Mrs. Ada Taggart Thomas
 Date of death Sept. 2 - 36 -
 Cause of death Cerebra Hemorrhage
 Place of death St. Petersburg
 Residence St. Petersburg
 Age 25 Y'rs 7 Mo's 2 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at St. Petersburg
 Date _____ 1936 M
 Account charged Endicott & Son
 Address St. Petersburg
 Account guaranteed Ch.
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body arrived
 Casket with Copper Lin. by auto 9:30
 Style of Casket A.M. - 9-8-36-
 No. of Casket Body cremated
 Outside Box 10-A M. - 9-8-36
 Shipping Case or Vault _____
 Handles Ashes Del to Family
 Pillow Set 3:30 P.M. 9-8-36
 Name Plate _____
 Cemetery Un 20.00
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 Cremation Wife of R.H. Thomas
 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. _____

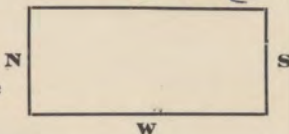
57.50

Carey Hand Funeral Home

Name of deceased Miss Flora J. Moore
 Date of death Sept - 5 - 32
 Cause of death Acute Progressive Paralysis
 Place of death Res
 Residence Daytona Beach
 Age 22 Yrs 5 Mo's 18 Days
 Weight 140 Height 5 ft. 10 in. Eyes Blue
 Funeral at Daytona Beach
 Date Sept - 8 - 32 1932 M
 Account charged Baggett & Weather
 Address Daytona Beach
 Account guaranteed _____
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body covered
 Casket with Copper Lin. by auto
 Style of Casket 11 - a m 9 - 8 - 32
 No. of Casket _____
 Outside Box Body Cremated
 Shipping Case or Vault 2 - P.M.
 Handles Sept - 8 - 32
 Pillow Set _____
 Name Plate Asher Express
 Cemetery Baggett & Weatherly
 Section Daytona Beach
 E 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 Jas. J. Montague
 Date of death Sept 6th 1936
 Cause of death Sciatica - malnutrition
 Place of death Tampa Fla
 Residence Tampa Fla
 Age 52 Y'rs 6 Mo's 11 Days
 Weight 125 Height 5 ft. 9 in. Eyes Blue
 Funeral at Tampa Fla
 Date Sept 1936 M
 Account charged B. Marion Reed Und Co
 Address Tampa Fla
 Account guaranteed _____
 Address _____
 Embalming Cremation 3750
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket by express
 Outside Box Wed 2:15 a.m.
 Shipping Case or Vault Sept 9-36
 Handles _____
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery 20th. Thurs
 Section Sept 10-36 Lot _____

E

I Other Graves

N

S

X Grave on this date

W

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

\$ 3750

Carey Hand Funeral Home

Name of deceased Mrs Ella Hitchcock
 Date of death Sept 9 5:30 a.m.
 Cause of death Broncho Pneumonia - Cancer of Stomach
 Place of death Res
 Residence 400 S. Rosalind
 Age 84 Y'rs 9 Mo's 18 Days
 Weight 100 Height 5 ft. 5 in. Eyes
 Funeral at Chapel
 Date Friday Sept 11 1936 2 P. M
 Account charged Jessie Hitchcock
 Address 400 S. Rosalind Ave
 Account guaranteed
 Address

Embalming & Dressing 25 00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Gr Oupe 100 00
 Casket with Copper Lin. ☒
 Style of Casket Oct-N. C
 No. of Casket 1972-7-

Outside Box ☒
 Shipping Case or Vault an Seal 125 00
 Handles Ext
 Pillow Set yes
 Name Plate at Res
 Cemetery Greenwood
 Section B Lot 214
Finley Lot

I Other Graves
 X Grave on this date

E
S
N
W

X

Cremation P. B Car 5 00
 Single Grave Car run 5 00
 Opening and Closing Grave etc 15 00
 Body Shipped to Clared Car No chg
 R. R. Ticket music 5 00

Cash advanced
 Telegram
 Minister Rev Turner
 Casket Wagon 41 5 00
 Physician Dr Hal Beardsall
 County or City Burial
 Automobiles SVS 15 00
 Baggage or Express Train No. 300 00

Carey Hand Funeral Home

Name of deceased Maria E. Treu
 Date of death Sept 6th
 Cause of death Fractured neck of Femur
 Place of death W. Palm Beach Fla
 Residence W. Palm Beach, Fla
 Age 78 Y'rs 1 Mo's 24 Days
 Weight 90 Height 5 ft. 3 in. Eyes Blue
 Funeral at W. Palm Beach, Fla
 Date Sept 1936 M
 Account charged Misell - Simon mortuary
 Address W. Palm Beach, Fla
 Account guaranteed Cleech
 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 10:15 a.m.
 Shipping Case or Vault Sept 9-36
 Handles _____
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery 11 a.m. Wed
 Section Sept 9-36 Lot _____

E

I Other Graves

E
N
S

X Grave on this date

E
N
S

W

 Cremation Expressed Ashes
 Single Grave to Misell - Simons
 Opening and Closing Grave W. Palm Beach
 Body Shipped to 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 George Alfred Bothwell
 Date of death Sept 5th
 Cause of death Angina Pectoris
 Place of death W. Palm Beach Fla.
 Residence W. Palm Beach Fla
 Age 73 Y'rs 9 Mo's 17 Days
 Weight 175 Height 5 ft. 8 in. Eyes Blue
 Funeral at W. Palm Beach Fla
 Date Sept 1936 M
 Account charged Wigell - Simons and Co.
 Address W. Palm Beach 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
 Outside Box Wed 10:15 a.m.
 Shipping Case or Vault Sept 9-36
 Handles _____
 Pillow Set Body Cremated
 Name Plate 11 a.m. Wed
 Cemetery Sept 9 - 1936
 Section _____ Lot _____

E

I Other Graves

N

S

X Grave on this date

W

Cremation Ashes expressed to

Single Grave Wigell - Simons

Opening and Closing Grave and Co.

Body Shipped to W. Palm Beach Fla

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician _____

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

\$ 37.50

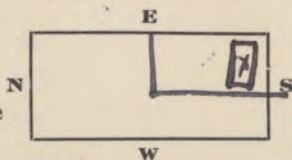
Carey Hand Funeral Home

Name of deceased Marcus C. Beuch
 Date of death Sept 9 - 11:15 a.m.
 Cause of death Myocarditis Chronic
 Place of death Res.
 Residence Albando Rt #3
 Age 80 Y'rs 3 Mo's 27 Days
 Weight 145 Height 5 ft. 7 in. Eyes
 Funeral at Chapel
 Date Friday Sept 11 1936 2 P. M
 Account charged Frank P. Beuch
 Address Albando Rt #3
 Account guaranteed Insurance
 Address

Embalming & Dressing	35.00
Robe, Suit, Dress <u>Blue Serge</u>	12.50
Underwear and Hose	1.50
Casket <u>6-3- Gr. Cr.</u>	100.00
Casket with Copper Lin.	
Style of Casket <u>Ext - O.T.</u>	
No. of Casket <u>1972 - T</u>	
Outside Box <u>R-9</u>	
Shipping Case or Vault <input checked="" type="checkbox"/>	
Handles <u>Ext</u>	
Pillow Set <u>yes</u>	
Name Plate <u>at Rest</u>	
Cemetery <u>Greenwood</u>	
Section <u>G- SE 1/4</u> Lot <u>27-</u>	

I Other Graves

X Grave on this date



Cremation <u>Burial Lot</u>	25.00
Single Grave <u>Organ</u>	
Opening and Closing Grave <u>etc</u>	15.00
Body Shipped to <u>Car - P. B. -</u>	5.00
R. R. Ticket <u>Car - Moir</u>	5.00
Cash advanced <u>3 Certified Copies</u>	1.50
Telegram	
Minister <u>Rev. Traff.</u>	
Casket Wagon	5.00
Physician <u>Dr. Harms.</u>	
County or City Burial	
Automobiles <u>SVS</u>	15.00
Baggage or Express Train No.	220.50

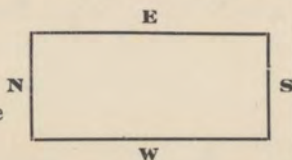
Carey Hand Funeral Home

Name of deceased Nancy Garrett
 Date of death Sept-9-36 4-A M
 Cause of death Cancer Throat
 Place of death Res
 Residence Apoka
 Age 58 Yrs — Mo's 24 Days
 Weight — Height — ft. — in. Eyes —
 Funeral at Grave Side
 Date Wed-9-9-36 193 4-P. M
 Account charged County
 Address —
 Account guaranteed —
 Address Mrs. Humble

Embalming —
 Robe, Suit, Dress —
 Underwear and Hose —
 Casket 6-3-Care 14 50
 Casket with Copper Lin. —
 Style of Casket —
 No. of Casket —
 Outside Box —
 Shipping Case or Vault —
 Handles —
 Pillow Set —
 Name Plate —
 Cemetery Apoka
 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. M. Bude
 County or City Burial —
 Automobiles —
 Baggage or Express Train No. 14 50

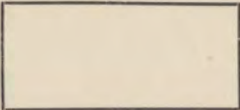
Carey Hand Funeral Home

Name of deceased *Mrs Mary Belle Brubaker*
 Date of death *Sept - 8 - 36*
 Cause of death *air plane accident*
 Place of death *Miami*
 Residence *New York -*
 Age *30* Y'rs *4* Mo's *4* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Miami*
 Date _____ 1936 M
 Account charged *Shalluck T. Home*
 Address *Miami Fla*
 Account guaranteed _____
 Address _____
 Embalming *Cremation* *37.50*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket *Body arrived*
 Outside Box *by auto 9 P.M.*
 Shipping Case or Vault *wood*
 Handles *Sept 9 - 1936*
 Pillow Set _____
 Name Plate _____
 Cemetery *Body Cremated*
 Section *82nd St.* Lot *Thurs*
Sept 10 - 1936
 I Other Graves
 X Grave on this date
 Cremation *Ashes expressed*
 Single Grave *to - N. Y. Minutree*
 Opening and Closing Grave *Greensboro*
 Body Shipped to *N. C.*
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

Copper Lin

\$37.50
5.00
42.50

Carey Hand Funeral Home

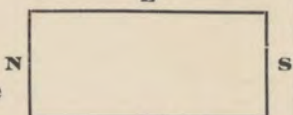
Name of deceased	<i>Benjamin D. Wofford</i>		
Date of death	<i>Sept 9 - 1936</i>		
Cause of death	<i>Apoplexy</i>		
Place of death	<i>Res</i>		
Residence	<i>Lockhart Fla</i>		
Age	<i>76</i> Y'rs	<i>7</i> Mo's	<i>—</i> Days
Weight	<i>145</i>	Height	<i>5</i> ft. <i>7</i> in. Eyes
Funeral at	<i>Chapel</i>		
Date	<i>Sunday</i>	193 <i>6</i>	<i>M</i>
Account charged	<i>Mrs B D Wofford</i>		
Address	<i>Lockhart</i>		
Account guaranteed	<i>Estate</i>		
Address			
Embalming	<i>4 Dressing</i>		<i>35 00</i>
Robe, Suit, Dress	<input checked="" type="checkbox"/>		
Underwear and Hose	<input checked="" type="checkbox"/>		
Casket	<i>6-3-br crape</i>		<i>125.00</i>
Casket with Copper Lin.	<input checked="" type="checkbox"/>		
Style of Casket	<i>5x00T</i>		
No. of Casket	<i>22-5</i>	<i>14 1/2</i>	
Outside Box	<i>Reg</i>	<i>SHIRER</i>	
Shipping Case or Vault	<input checked="" type="checkbox"/>		
Handles	<i>Shat</i>		
Pillow Set	<i>yes</i>		
Name Plate			
Cemetery	<i>Lake Hill Cemetery</i>		
Section		Lot	
		<i>E</i>	
I Other Graves	<i>N</i>		<i>S</i>
X Grave on this date		<i>W</i>	
Cremation	<i>Auto Imm</i>		<i>5 00</i>
Single Grave			
Opening and Closing Grave	<i>4 etc</i>		<i>15.00</i>
Body Shipped to			
R. R. Ticket			
Cash advanced			
Telegram			
Minister	<i>Rev Cossey</i>		<i>5 00</i>
Casket Wagon	<i>(1)</i>		
Physician	<i>Dr. Andrews</i>		
County or City Burial			<i>15 00</i>
Automobiles	<i>5 v 3</i>		
Baggage or Express Train No.			<i>200 00</i>

Carey Hand Funeral Home

Name of deceased Grace H. Morrison Moyer
 Date of death Sept 5th 1936
 Cause of death Fracture of skull & broken neck
 Place of death Res.
 Residence West Palm Beach Fla
 Age 42 Y's Mo's Days
 Weight Height ft. in. Eyes Funeral at West Palm Beach Fla
 Date Sept 193 M
 Account charged Ferguson and Co
 Address W. Palm Beach Fla
 Account guaranteed Check
 Address Embalming
 Robe, Suit, Dress Cremation \$ 37.50
 Underwear and Hose Casket
 Casket with Copper Lin. Style of Casket Body arrived
 No. of Casket by express
 Outside Box 9 C.P. Thurs 1:30 P.M.
 Shipping Case or Vault Sept 10-36
 Handles Pillow Set Body Cremated
 Name Plate Friday 9 A.M.
 Cemetery Sept 11-36
 Section Lot

I Other Graves

X Grave on this date



Cremation Express Ashes to
 Single Grave Ferguson and Co
 Opening and Closing Grave West
 Body Shipped to Palm Beach 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 Mrs May A. Hope
 Date of death Sept 10 P. M.
 Cause of death Highly nephroses & Hacking
 Place of death P. G. N. Rt Kidney
 Residence 1506 Grand ave

Age 59 Y'rs — Mo's 7 Days —

Weight 125 Height 5 ft. 5 in. Eyes —

Funeral at Chapel

Date Sat Sept- 12 1936 11-A M

Account charged M. J. Hope

Address 1506 Grand ave Rt 3-Box 7

Account guaranteed Part Cash & Note

Address —

Embalming & Dressing 25.00

Robe, Suit, Dress 3.00

Underwear and Hose —

Casket 6-3 Emb Doe 75.00

Casket with Copper Lin. ✓

Style of Casket Sgt - H. C.

No. of Casket 24

Outside Box Reg

Shipping Case or Vault ✓

Handles Ext

Pillow Set yes

Name Plate at Rest

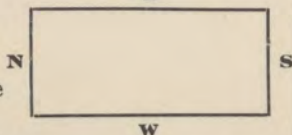
Cemetery Greenwood

Section — Lot —

E

I Other Graves

X Grave on this date



Cremation —

Single Grave White 7.00

Opening and Closing Grave T & etc 15.00

Body Shipped to P. B. Car & Min 5.00

R. R. Ticket ✓

Cash advanced ✓

Telegram ✓

Minister Rw Wiggs

Casket Wagon —

Physician Dr Chappel

County or City Burial —

Automobiles S & S 15.00

Baggage or Express Train No. —

Cash - 30.00

Note 15.00 P. M.

—

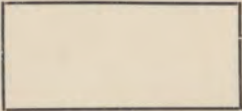
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—

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—

Carey Hand Funeral Home

Name of deceased Dr A Rudolph Burquist
 Date of death Sept 10 - 39
 Cause of death Pneumonia
 Place of death Res
 Residence St Petersburg
 Age 57 Y'rs 6 Mo's 2 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at St Petersburg
 Date _____ 1939 M
 Account charged Endicott Funeral Home
 Address _____
 Account guaranteed OK
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body covered
 Casket with Copper Lin. by auto
 Style of Casket in Sept 11 - 39
 No. of Casket 1230 PM
 Outside Box _____
 Shipping Case or Vault Body Cremated
 Handles S-a M - Sat - 9-12-39
 Pillow Set _____
 Name Plate Ashes to be
 Cemetery Scattered in the
 Section Greenwood Cemetery
 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 Beatrice M. Ellen Hammond
 Date of death Sept 9
 Cause of death Cerebral Hemorrhage
 Place of death Miami, Fla
 Residence Hollywood, Fla
 Age 55 Yrs 10 Mo's 28 Days
 Weight 90 Height 5 ft. 7 in. Eyes Brown
 Funeral at Hollywood Fla
 Date Sept 1936 M
 Account charged Hollywood Mortuary
 Address Hollywood, 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 Friday
 Outside Box 11:30 P.M.
 Shipping Case or Vault Sept 11 - 36
 Handles _____
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery 79. m. Sat - Sept 12 - 36
 Section _____ Lot _____

E

I Other Graves

N

S

X Grave on this date

W

Cremation Ashes expressed
 Single Grave to Flaminge End
 Opening and Closing Grave Buchanan
 Body Shipped to Full Creek Blvd.
 R. R. Ticket Indianapolis, Ind.
 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 Joseph Friederick
 Date of death Oct 10
 Cause of death Carcinoma of Pelvic and
 Place of death Res of stomach
 Residence Sebring, Fla.
 Age 76 Y's 6 Mo's 14 Days
 Weight 150 Height 6 ft. in. Eyes Blue
 Funeral at Sebring Fla
 Date Sept 11 1936 P.M
 Account charged Stephenson & Blythe
 Address Sebring Fla
 Account guaranteed Check
 Address _____
 Embalming _____
 Robe, Suit, Dress Cremation 3750
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Body arrived
 Outside Box by auto Friday
 Shipping Case or Vault 5:15 P.M.
 Handles Sept 11-36
 Pillow Set _____
 Name Plate _____
 Cemetery Body Cremated
 Section 5:30 P.M. Friday Lot _____
Sept 11-36 E
 I Other Graves N S
 X Grave on this date W
 Cremation Expressed Ashes
 Single Grave No. Stephenson
 Opening and Closing Grave & Blythe
 Body Shipped to Sebring, Fla.
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$ 37.50

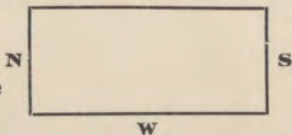
Carey Hand Funeral Home,

Name of deceased John L. Desaismes
 Date of death Fri Sept 11 - 3h 10 PM.
 Cause of death Suicide Calm Monday 3:00
 Place of death Res
 Residence 613 - E. 6th Ave
 Age 72 Y's 6 Mo's 18 Days
 Weight 145 Height 5 ft. 9 in. Eyes Blue
 Funeral at Chapel
 Date Mon Sept 14 1936 2 - P. M
 Account charged Mrs John L. Desaismes
 Address 613 E. 6th Ave
 Account guaranteed
 Address

Embalming + Dressing 35.00
 Robe, Suit, Dress
 Underwear and Hose 55.00
 Casket 6-3- In Exp.
 Casket with Copper Lin. ✓
 Style of Casket Oct - Bronze Lin 50.00
 No. of Casket X A 80-40
 Outside Box ✓ Name + Date
 Shipping Case or Vault ✓ Engraved
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Cremation
 Section Lot

I Other Graves

X Grave on this date



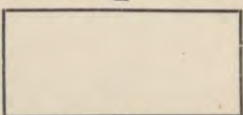
Cremation Cremation 50.00
 Single Grave Music 5.00
 Opening and Closing Grave
 Body Shipped to Body Cremated
 R. R. Ticket 4 P. M. Monday
 Cash advanced Sept 14 - 1936
 Telegram
 Minister Dean Johnson
 Casket Wagon (1) 5.00
 Physician Dr. Tolson
 County or City Burial ✓
 Automobiles Will call for
 Baggage or Express Train No. ashes 150.00
 50.00

200.00

Carey Hand Funeral Home

Name of deceased Mrs. Mary W Saunders
 Date of death Sat-Sept 12-36 6:30 AM
 Cause of death Cancer Coronary Thrombosis
 Place of death Res
 Residence McElroy apartments 464 S. Orange
 Age 69 Y'rs 6 Mo's 19 Days
 Weight 125 Height 5 ft. 4 in. Eyes
 Funeral at Chapel
 Date Mon Sept 14 1936 4 P M
 Account charged E. E. Saunders
 Address 464 S. Orange ave
 Account guaranteed Estate
 Address
 Embalming + Dressing 35 00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6 3 Gr P.P. + Linen 60 00
 Casket with Copper Lin.
 Style of Casket Oct 57
 No. of Casket X
 Outside Box Organ Only
 Shipping Case or Vault
 Handles Ext
 Pillow Set yes
 Name Plate
 Cemetery Cremation
 Section Copper 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 Tues Sept-15-36
 R. R. Ticket will call for ashes
 Cash advanced
 Telegram
 Minister Dean Johnson
 Casket Wagon (1) 5 00
 Physician Dr. Evans
 County or City Burial 150 00
 Automobiles
 Baggage or Express Train No.

Carey Hand Funeral Home

Name of deceased Miss Anna M. Claybough
 Date of death Sun Sept-13-36 220 A M
 Cause of death Cerebral Hemorrhage
 Place of death Res
 Residence 214 - N Summerville
 Age 72 Y's 4 Mo's 24 Days _____
 Weight 125 Height 5 ft. 5 in. Eyes Blue
 Funeral at Chapel
 Date Tues Sept-15 1936 11-A M
 Account charged Nat Claybough Brother
 Address 214 N. Summerville
 Account guaranteed small Insurance
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 4-3 Emb Dec & Saw 35.00
 Casket with Copper Lin. ☒
 Style of Casket Sp A C
 No. of Casket 2016-5-
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate ☒
 Cemetery Cremation
 Section _____ Lot _____
Copper can. E
 I Other Graves ☐ 
 X Grave on this date _____
 Cremation Cremation 50.00
 Single Grave Organ
 Opening and Closing Grave Body
 Body Shipped to Cremated 2 P M
 R. R. Ticket Tues-Sept-15-36-
 Cash advanced will call for ashes
 Telegram _____
 Minister Dr M. Nair
 Casket Wagon (1) 5.00
 Physician Dr J. M. Egan
 County or City Burial 125.00
 Automobiles _____
 Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased Archibald White
 Date of death Sept 28 - 1924
 Cause of death Fatty degeneration & Enlarged Heart
 Place of death Santa Rosa Calif
 Residence _____
 Age 57 Y'rs 6 Mo's 3 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 193 _____ M
 Account charged Robt David Gaulry
 Address Winter Park Phone 198
 Account guaranteed _____
 Address Body removed from receiving Vault
 Embalming Cypress Lawn Cemetery
 Robe, Suit, Dress San Francisco Calif.
 Underwear and Hose Expressed to Oakland.
 Casket Arrived a.c. # 85
 Casket with Copper Lin. 255 A.M.
 Style of Casket Sun Sept-13-1934
 No. of Casket Gray Bld-C State Casket
 Outside Box XX- size Metal Lining
 Shipping Case or Vault and O.S. Box
 Handles Full Lined
 Pillow Set Casket was placed in
 Name Plate Vault Room and later
 Cemetery to be shipped to N.Y. / 2
 Section final Burial Lot _____

E

I Other Graves

N

S

X Grave on this date

Cremation Vault Rent 5⁰⁰ Per Mo

Single Grave J. Caldwell from OSB

Opening and Closing Grave

Body Shipped to C Wagon From Sta

R. R. Ticket

Cash advanced

Telegram

Minister No other acct of this

Casket Wagon

Physician

County or City Burial

Automobiles

Baggage or Express Train No.

10. ⁰⁰

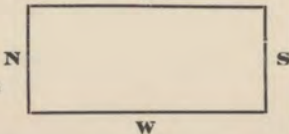
5. ⁰⁰

Carey Hand Funeral Home

Name of deceased *Mrs. Bertie L. Talton*
 Date of death *Sept 13-36* *10-AM*
 Cause of death *T.B. Pulmonary*
 Place of death *County Home*
 Residence *347 Carolina Ave W. Park*
 Age *20* Y's *10* Mo's *6* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Rev. Grapeside*
 Date *347 Carolina Ave W.P. 1936* M
 Account charged *Douglas Talton*
 Address *347 Carolina Ave W. Park*
 Account guaranteed *Note - \$5.00 per week*
 Address _____
 Embalming *+ Dressing* 25 00
 Robe, Suit, Dress 5 00
 Underwear and Hose
 Casket *6-3 Grey Crepe* 75 00
 Casket with Copper Lin.
 Style of Casket *Sgt F. T. H.*
 No. of Casket *22 Sherin*
 Outside Box *Reg*
 Shipping Case or Vault
 Handles *Short*
 Pillow Set
 Name Plate
 Cemetery *Winter Park*
 Section *Blk 19* Lot *261*

I Other Graves

X Grave on this date



Cremation

Single Grave

Opening and Closing Grave *etc*

15 00

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister *Rev. Sellers*

Casket Wagon

5 00

Physician *Dr. Shines*

County or City Burial

Automobiles

545

15 00

Baggage or Express Train No.

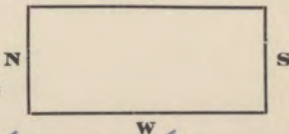
\$140.00

Carey Hand Funeral Home

Name of deceased Helen Bamford
 Date of death Sept 12
 Cause of death Cancer of sigmoid
 Place of death Tampa, Fla.
 Residence Tampa, Fla.
 Age 73 Y'rs ✓ Mo's 11 Days
 Weight 90 Height 5 ft. 8 in. Eyes Grey
 Funeral at Tampa, Fla.
 Date Sept 1936 M
 Account charged Greenman and Co
 Address Tampa, 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 express
 Outside Box Monday 3:20 P.M.
 Shipping Case or Vault Sept 14-1936
 Handles _____
 Pillow Set Body Cremated
 Name Plate Tues 8 A.M.
 Cemetery Sept 15-1936
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation Ashes expressed
 Single Grave To Greenman
 Opening and Closing Grave and Co.
 Body Shipped to Tampa, 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

Colored

Name of deceased Whitstone Girl

Date of death Sept 13

Cause of death _____

Place of death Wewahatchee

Residence Wewahatchee Fla

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

Weight _____ Height _____ ft. _____ in. Eyes _____

Funeral at Narcoossee, Fla

Date _____ 193 _____ M

Account charged Moody Turfentine &

Address Wewahatchee Fla

Account guaranteed _____

Address _____

Embalming _____

Robe, Suit, Dress _____

Underwear and Hose _____

Casket 6/3 Coffin 1450

Casket with Copper Lin. _____

Style of Casket _____

No. of Casket _____

Outside Box _____

Shipping Case or Vault _____

Handles _____

Pillow Set _____

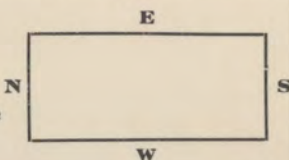
Name Plate _____

Cemetery Narcoossee

Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to Bought Coffin

R. R. Ticket and done

Cash advanced their own way

Telegram They will file

Minister Certificate

Casket Wagon get their permit

Physician _____

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

\$1450

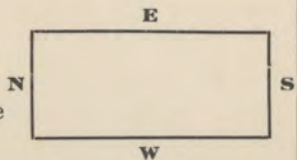
Carey Hand Funeral Home

Name of deceased Sara Jane Botsford
 Date of death Sept 15 11 a.m.
 Cause of death Cerebral Hemorrhage auto accident
 Place of death C. G. H.
 Residence 441 N. Hughey St
 Age 76 Y's 8 Mo's 17 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Least
 Date Sept 1936 M
 Account charged Ella Logan Kellogg
 Address 441 N. Hughey St
 Account guaranteed Balance
 Address _____

Embalming & Shrining 35 00
 Robe, Suit, Dress Grey dress 10 00
 Underwear and Hose _____
 Casket 6/3 Grey Cope 100 00
 Casket with Copper Lin. _____
 Style of Casket Oct. C. Top.
 No. of Casket 1972 - Tampa
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate ✓
 Cemetery Least
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation _____
 Single Grave Amb 5 00
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Least
 Casket Wagon (2) 10 00
 Physician J. R. Chappell
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$ 160.00

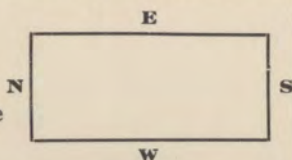
Carey Hand Funeral Home

Name of deceased Miss Clara C. Thomas
 Date of death Sept-15-34 P. M.
 Cause of death Pulmonary edema
 Place of death County Home
 Residence Winter Park
 Age 90 Y'rs 10 Mo's 29 Days
 Weight 100 Height 5 ft. 6 in. Eyes
 Funeral at Graveside
 Date Thurs Sept 17 1936 4 P. M.
 Account charged Walter Schultzy
 Address Winter Park
 Account guaranteed
 Address

Embalming + etc 25.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-br enf. 50.00
 Casket with Copper Lin. ☒
 Style of Casket Oct 0 T
 No. of Casket 972 - T
 Outside Box Reg -
 Shipping Case or Vault ☒
 Handles Ext -
 Pillow Set yes
 Name Plate ☒
 Cemetery Winter Park
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation _____
 Single Grave _____
 Opening and Closing Grave + etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced ☒
 Telegram ☒
 Minister Dr. Schenck
 Casket Wagon ☒
 Physician Dr. Brandahl
 County or City Burial _____
 Automobiles SV3 10.00
 Baggage or Express Train No. 100.00

Walter Schultzy will
handle acct.

Carey Hand Funeral Home

Name of deceased James P. Myrick
 Date of death Wed - Sept 16 36 4:30 AM
 Cause of death Cancer of Throat
 Place of death G.H.
 Residence 1545 W. Central ave
 Age 46 Y'rs 10 Mo's 3 Days
 Weight 150 Height 5 ft. 8 in. Eyes Blue
 Funeral at Chapel
 Date Friday Sept 18 1936 4:30 M
 Account charged Mrs J. P. Myrick
 Address 1545 W. Central ave
 Account guaranteed Estate
 Address
 Embalming & Dressing 35 00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-9 1/2 cup & Sew 55 00
 Casket with Copper Lin. ☒
 Style of Casket Oct
 No. of Casket 1
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate ☒
 Cemetery Cremation 35 00
 Section ☒ Lot
 wooden Box
 I Other Graves
 X Grave on this date
 Cremation Cremation 50 00
 Single Grave ☒ Body cremated
 Opening and Closing Grave 9-AM
 Body Shipped to ☒ Fri Sept 18-36
 R. R. Ticket ☒ will call for Ashes
 Cash advanced ☒
 Telegram ☒
 Minister Mr Lawrence (C.S.) 5 00
 Casket Wagon (1)
 Physician Duncan M. Egan
 County or City Burial
 Automobiles amb - 5 5 00
 Baggage or Express Train No. 150 00

Carey Hand Funeral Home

Name of deceased Rosa Bell Ray
 Date of death Sept 6
 Cause of death Diabetes mellitus
 Place of death C. G. N.
 Residence Winter Garden Fla
 Age _____ Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Sept 17 1936 M
 Account charged Winter Garden P.O. Box 486
 Address County
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress Gr. Cuffs 50 00
 Underwear and Hose 43 Cuffs 14 50
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Coffin Sq. Tilt T
 No. of Casket Walker
 Outside Box R-9 Emb + Sev 25 00
 Shipping Case or Vault C-19
 Handles Shut
 Pillow Set _____
 Name Plate at Rest
 Cemetery Chla Vista
 Section Lake Hill Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N _____ S _____
 W
 Cremation Family Paid for
 Single Grave in Patricks County 5.00
 Opening and Closing Grave _____
 Body Shipped to Charged from
 R. R. Ticket County crisis
 Cash advanced _____
 Telegram _____
 Minister From W. Garden
 Casket Wagon _____
 Physician Dr. Neal
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____
 74 50
 75 00

Carey Hand Funeral Home

Colored

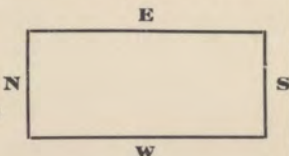
Name of deceased Richard Crastey
 Date of death Sept - 16 - 34 PM
 Cause of death Cerebral spinal meningitis
 Place of death County Home
 Residence Oakland
 Age 54 Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Sept - 17 - 1934 P M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 Care
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box Family come
 Shipping Case or Vault for Body
 Handles Done Wagon
 Pillow Set Care Wagon
 Name Plate Oakland
 Cemetery Oakland
 Section _____ Lot _____

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 Brandahl
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

14 50

Carey Hand Funeral Home

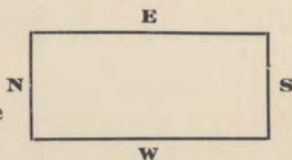
Coland

Name of deceased Wm Shepman
 Date of death Sept 17 - 36
 Cause of death Chro Myocarditis
 Place of death Rt Wood St
 Residence 908 Wood St
 Age 52 Y's 8 Mo's 20 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date _____ 193 _____ M
 Account charged City
 Address _____
 Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 179
 Outside Box 1199
 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 Anderson
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

14 00

14 00

Carey Hand Funeral Home

Name of deceased *Ferdinand Hawkins*
 Date of death *Thurs - Sept 17 - 36* PM
 Cause of death *Coronary Thrombosis*
 Place of death *South St Drug Store*
 Residence *415 S. De Laney*
 Age *56* Y'rs *4* Mo's *5* Days
 Weight *155* Height *5* ft. *10* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Monday 21* 193*6* *2-P* M
 Account charged *Mrs F. Hawkins*
 Address *415 S. De Laney*
 Account guaranteed _____
 Address _____

Embalming *& Dressing* 35.00
 Robe, Suit, Dress _____
 Underwear and Hose *✓* 60.00
 Casket *6-3-Gr. Cope* 50.00
 Casket with Copper Lin. *✓*
 Style of Casket *Oct 09*
 No. of Casket *1972-7*
 Outside Box *✓*
 Shipping Case or Vault *✓*
 Handles *Ext*
 Pillow Set *yes*
 Name Plate *✓*
 Cemetery *Cumtarian*
 Section _____ Lot _____

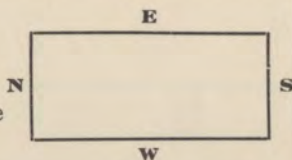
I Other Graves _____
 X Grave on this date _____

Cremation *Cumtarian* 50.00
 Single Grave *Musie* 5.00
 Opening and Closing Grave *Body Cremated*
 Body Shipped to *9 A.M. Tues 9-22-36*
 R. R. Ticket *will call for ashes*
 Cash advanced _____
 Telegram _____
 Minister *Rev Trapp* 5.00
 Casket Wagon _____ 5.00
 Physician *Dr. Duncan Th. Egan* 5.00
 County or City Burial *Chapel* 5.00
 Automobiles *\$165.00*
 Baggage or Express Train No. _____

Office
 511 N. 1st South St Drug Store

Carey Hand Funeral Home

Name of deceased *Infant of Mrs Edgar Rogers*
 Date of death *Sept 18 36* *9-PM*
 Cause of death *Pregnancy - 5 1/2 mos*
 Place of death *O G X*
 Residence *103 E. Jefferson*
 Age *✓* Y's *✓* Mo's *✓* Days *✓*
 Weight *✓* Height *✓* ft. *✓* in. *✓* Eyes *✓*
 Funeral at *Deat*
 Date *193* *M*
 Account charged *Edgar Rogers*
 Address *103 E. Jefferson*
 Account guaranteed *✓*
 Address *✓*
 Embalming *Care of Body* *15.00*
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *#2 - 2-0* *17.50*
 Casket with Copper Lin. *✓*
 Style of Casket *Sgt N. T*
 No. of Casket *27 - T*
 Outside Box *Reg*
 Shipping Case or Vault *✓*
 Handles *small*
 Pillow Set *yes*
 Name Plate *O.D.*
 Cemetery *Deat*
 Section *✓* Lot *✓*
 I Other Graves *✓*
 X Grave on this date *✓*
 Cremation *✓*
 Single Grave *✓*
 Opening and Closing Grave *✓*
 Body Shipped to *Macon Ga*
 R. R. Ticket *✓*
 Cash advanced *Express* *11.35*
 Telegram *✓*
 Minister *✓*
 Casket Wagon *✓*
 Physician *Dr Collins*
 County or City Burial *✓*
 Automobiles *✓*
 Baggage or Express Train No. *81*
Sum Sept-20-36-



\$ 43.85

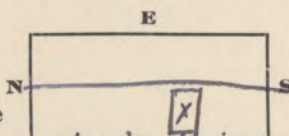
Carey Hand Funeral Home

Name of deceased Mrs Amanda Bunker
 Date of death Sat Sept-19-36- 930 A.M
 Cause of death Arthritis deformans
 Place of death Res
 Residence 211-Park Lake ave
 Age 89 Y'rs 2 Mo's 10 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sun Sept 20 1936 3 P.M
 Account charged H.G. Mc Gaughy
 Address 211-Park Lake ave
 Account guaranteed Estate

Address _____
 Embalming + Dressing 25.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 G. Emb Doe 75.00
 Casket with Copper Lin. ☒
 Style of Casket Spr. H. C.
 No. of Casket _____
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate ☒
 Cemetery Greenwood
 Section G. W 1/2 Lot 12

I Other Graves

X Grave on this date



Cremation Burial Lot Bought Direct

Single Grave 15.00

Opening and Closing Grave 5.00

Body Shipped to P. B. & Son

R. R. Ticket

Cash advanced

Telegram Mr. Hanch

Minister 5.00

Casket Wagon (1)

Physician John Heitz

County or City Burial

Automobiles S & S 15.00

Baggage or Express Train No. 140.00

Carey Hand Funeral Home

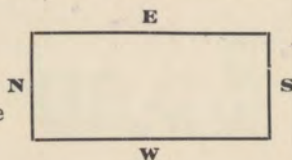
Col.

Name of deceased Baby Perry
 Date of death Sept 19 - 9 P.M.
 Cause of death Still Born.
 Place of death Res
 Residence 506 W. Jefferson.
 Age 6 Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at ✓
 Date Sept 20 1936 a.m.
 Account charged City
 Address
 Account guaranteed
 Address

Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 70 W. L. S. 7.00
 Casket with Copper Lin.
 Style of Casket N. W. S.
 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. S. H. Daniels
 County or City Burial
 Automobiles
 Baggage or Express Train No.

77.00

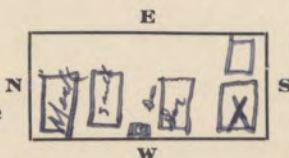
Carey Hand Funeral Home

Name of deceased Edna Mullinger
 Date of death Sept 22nd
 Cause of death Apoplexy
 Place of death Res
 Residence Miami, Fla
 Age 59 Y'rs Mo's Days
 Weight ft. in. Eyes
 Funeral at Chapel
 Date Thurs Sept 24 1936 4 P.M
 Account charged Horace Mers Jr.
 Address Miami, Fla.
 Account guaranteed Estab.
 Address

Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6/3 Grey metal
 Casket with Copper Lin.
 Style of Casket State H. Cap
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set yes
 Name Plate
 Cemetery Greenwood
 Section Lot

I Other Graves

X Grave on this date



Cremation

Single Grave

Opening and Closing Grave etc 15 00

Body Shipped to P. B. Car 5 00

R. R. Ticket Mini - Car 5 00

Cash advanced Family Car no chg

Telegram

Minister Rev M. H. Hair

Casket Wagon (1) 5 00

Physician

County or City Burial

Automobiles SVS 15 00

Baggage or Express Train No.

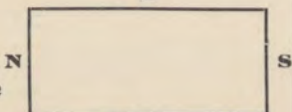
Body arrived by S. A. P. R. R. Wed \$45.00
4:30 a.m.

Carey Hand Funeral Home

Name of deceased Harry H. Hall
 Date of death Sept 21st 1936
 Cause of death Cryptosporidiosis Rt-Leg
 Place of death Res.
 Residence Le Land. Fla
 Age 44 Y'rs 11 Mo's 16 Days
 Weight 170 Height 5 ft. 8 in. Eyes Brown
 Funeral at Le Land. Fla
 Date Wed. Sept 23rd 1936 P. M
 Account charged Allen Funeral Home
 Address Le Land. Fla
 Account guaranteed _____
 Address _____
 Embalming Cremation \$37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body Arranged
 No. of Casket by Ad 20 4:15 P.M.
 Outside Box Wed - Sept 23 - 36
 Shipping Case or Vault _____
 Handles Body Cremated
 Pillow Set Wed 4:30 P. M.
 Name Plate Sept 23 - 1936
 Cemetery _____
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation Will call for ashes

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 Marcus F. Cooper
 Date of death Wed Sept 23-36 PM
 Cause of death Coronary Thrombosis
 Place of death Res
 Residence Pine Castle
 Age 55 Y'rs 5 Mo's 26 Days
 Weight 225 Height 5 ft. 8 in. Eyes Blue
 Funeral at Chapel
 Date Sat Sept 26 1936 4 P. M
 Account charged Barbara Cooper (wife)
 Address Pine Castle, Fla
 Account guaranteed Estate
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Br Doe 100.00
 Casket with Copper Lin. ☒
 Style of Casket Oct-Qt.
 No. of Casket 1973-Tampa
 Outside Box ☒
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate ☒
 Cemetery Cremation 50.00
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N
 W
 S
 Cremation _____
 Single Grave _____
 Opening and Closing Grave Music 5.00
 Body Shipped to Body cremated
 R. R. Ticket 9 A M Sun Sept 27
 Cash advanced will call for ashes
 Telegram _____
 Minister Rev Jordan
 Casket Wagon (12) 5.00
 Physician Dr Beardsahl
 County or City Burial 195.00
 Automobiles _____
 Baggage or Express Train No. _____

Set of 9: Was in Chg & Surv

Carey Hand Funeral Home

Name of deceased		Eva Mae Howard.	
Date of death		Sept 24 - 3 a.m. 1936.	
Cause of death		Pneumonia	
Place of death		D. G. H.	
Residence		Ft Christmas, Fla.	
Age	28 Y's	Mo's	Days
Weight	Height	ft.	in. Eyes
Funeral at		Graveside.	
Date		Sat Sept 26 1936 10 a.m.	
Account charged		Ralph Howard	
Address		Ft Christmas, Fla	
Account guaranteed			
Address			
Embalming	Pressing	35.	00
Robe, Suit, Dress	White	12.	50
Underwear and Hose		2.	25
Casket	6-3-Sil Plush	175.	00
Casket with Copper Lin.	✓		
Style of Casket	Oct 1/2 - e -		
No. of Casket	1927 - S		
Outside Box	Reg		
Shipping Case or Vault	✓		
Handles	Ext -		
Pillow Set	yes W		
Name Plate	✓		
Cemetery	Fort Christmas.		
Section		Lot	
		E	
I Other Graves		N	S
X Grave on this date		W	
Cremation			
Single Grave			
Opening and Closing Grave	T & de	15.	00
Body Shipped to			
R. R. Ticket	Car Tra Min	5.	00
Cash advanced			
Telegram			
Minister	C. Lee Smith		
Casket Wagon	(1)	5.	00
Physician	L. Andrews		
County or City Burial			
Automobiles	S & S	20	00
Baggage or Express Train No.		269	75

Carey Hand Funeral Home

Name of deceased Sara Paster
 Date of death Sept 24 - 7:00 a.m.
 Cause of death acute indigestion
 Place of death Res -
 Residence 24 - Wilson Court
 Age 68 Y'rs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Sept -
 Date Sept 193 M
 Account charged Joseph Ottenburg
 Address 24 - Wilson Court
 Account guaranteed
 Address
 Embalming & Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 Case 15.00
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery Destination
 Section Lot
 E
 I Other Graves
 X Grave on this date
 W
 Cremation
 Single Grave
 Opening and Closing Grave
 Body Shipped to Brooklyn N.Y.
 R. R. Ticket Quiet 73.22
 Cash advanced
 Telegram
 Minister Destination
 Casket Wagon (2) 10.00
 Physician Dr. C. H. Christ
 County or City Burial
 Automobiles
 Baggage or Express Train No. 92 60.00
Thurs 9-24-36

Carey Hand Funeral Home

Name of deceased Wilhelmina Perrine
 Date of death Sept 20 - 1936
 Cause of death Cancer of the Uterus
 Place of death St. Petersburg, Fla.
 Residence St. Petersburg, Fla.
 Age 50 Y'rs 11 Mo's 24 Days
 Weight 85 Height 5 ft. 7 in. Eyes
 Funeral at St. Petersburg, Fla.
 Date Sept 1936 M
 Account charged Indicott Funeral Co.
 Address St. Petersburg, 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 4 units Thurs
 Outside Box 11 A.M. Sept 24-36
 Shipping Case or Vault
 Handles
 Pillow Set Body cremated
 Name Plate 8 A.M. Friday
 Cemetery Sept 25 - 1936
 Section Lot

wooden Box

E

I Other Graves

N

S

X Grave on this date

W

Cremation ashes expressed to
 Single Grave Indicott Funeral Co.
 Opening and Closing Grave St. Petersburg
 Body Shipped to 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 *Mr Tom H Ewing*
 Date of death *Sept - 23 - 36*
 Cause of death *Cholera Nephritis*
 Place of death *Tampa*
 Residence *Tampa*
 Age *63* Y'rs *7* Mo's *2* Days *8*
 Weight *110* Height *5* ft. *7* in. Eyes *Brown*
 Funeral at *Tampa*

Date *1936* M

Account charged *Greenman Co*

Address *F. H. Tampa*

Account guaranteed *OK*

Address

Embalming *Cremation* 37.50

Robe, Suit, Dress

Underwear and Hose *Body arrived*

Casket *by Express 902 # 76*

Casket with Copper Lin. *220 AM*

Style of Casket *Tri 9-25-36*

No. of Casket

Outside Box *Body Cremated*

Shipping Case or Vault *9-a m*

Handles *Tri 9-25-36*

Pillow Set

Name Plate *ashes Expressed to*

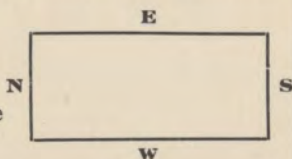
Cemetery *Greenman F. H.*

Section *Tampa* Lot

Aluminum Can

I Other Graves

X Grave on this date



Cremation

Single Grave

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister

Casket Wagon

Physician

County or City Burial

Automobiles

Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Joseph B. Lawton
 Date of death Sept 25-36 445 A.M.
 Cause of death _____
 Place of death Res
 Residence 323 E. Rob Ave
 Age 76 Y's — Mo's 28 Days _____
 Weight 170 Height 5 ft. 9 in. Eyes _____
 Funeral at Catholic Church
 Date Sat Sept 26 1936 10 A M
 Account charged Chester Lawton

Address _____
 Account guaranteed Estate

Address _____
 Embalming + Dressing 35.00

Robe, Suit, Dress ☒

Underwear and Hose ☒

Casket 6-3-Gr Bld. C. 225.00

Casket with Copper Lin. ☒

Style of Casket R. E. State

No. of Casket 6008 Orleans

Outside Box Reg

Shipping Case or Vault ☒

Handles Ext

Pillow Set yes

Name Plate Crucifix

Cemetery Woodlawn

Section _____ Lot _____

_____ E _____

I Other Graves _____

X Grave on this date _____

_____ N _____ S

_____ W _____

Cremation _____

Single Grave _____

Opening and Closing Grave 7+ etc 15.00

Body Shipped to 2- auto 10.00

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister Father Bishop

Casket Wagon _____

Physician Dr S. Tolson

County or City Burial _____

Automobiles 573 15.00

Baggage or Express Train No. 30000

Rosary- 130 PM

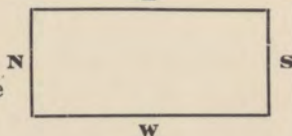
Carey Hand Funeral Home

Name of deceased *Mrs Margaret L Edie*
 Date of death *Sept 25-30*
 Cause of death *Cholera Myocarditis*
 Place of death *County Home*
 Residence *Oklahoma*
 Age *60* Y'rs *4* Mo's *12* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Grave Side*
 Date _____ 193____ M
 Account charged *County*
 Address _____
 Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3 Case* *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 _____

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 H M Beaudahl*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

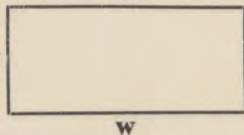
14 50

Carey Hand Funeral Home

Name of deceased Jessamine P. Torrence
 Date of death Sept - 25 - 36
 Cause of death Hodgkins Disease
 Place of death Reh
 Residence Caw Gallee
 Age 75 Y'rs 5 Mo's 3 Days 3
 Weight 110 Height 5 ft. 8 in. Eyes br
 Funeral at Melbourne
 Date 193 M
 Account charged Braunlee F.H.
 Address Melbourne Fla
 Account guaranteed OK
 Address
 Embalming Cremation
 Robe, Suit, Dress
 Underwear and Hose Body arrived
 Casket ly into 1230 - P.M.
 Casket with Copper Lin. Sat 9-26-36
 Style of Casket
 No. of Casket Body cremated
 Outside Box 2 P.M. - 9-26-36
 Shipping Case or Vault
 Handles Casket Express to
 Pillow Set Braunlee F. Home
 Name Plate Melbourne Fla
 Cemetery

37.50

Section wooden Box 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 Marion H Daulty
 Date of death Sun - Sept 27 - 36 - 12:30 PM
 Cause of death Cerebral Hemorrhage
 Place of death Her
 Residence Tamilla
 Age 57 Yrs — Mo's 1 Days —
 Weight 110 Height 5 ft. 8 in. Eyes Brown
 Funeral at Chapel
 Date Mon Sept 28 1936 2-P M
 Account charged Mrs M H. Daulty
 Address Tamilla
 Account guaranteed payments
 Address —
 Embalming Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-x 50.00
 Casket with Copper Lin. ☒
 Style of Casket Sgt Enl D
 No. of Casket 1826 5
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate ☒
 Cemetery Cumation
 Section — Lot —
 I Other Graves ☒
 X Grave on this date ☒
 Cremation Cremation 50.00
 Single Grave ☒
 Opening and Closing Grave ☒
 Body Shipped to Body Cremated
 R. R. Ticket 9.00 for train
 Cash advanced Sept 29 - 36 -
 Telegram will call for ashes
 Minister —
 Casket Wagon (1) 5.00
 Physician Dr. T. A. Neal
 County or City Burial Musie 5.00
 Automobiles —
 Baggage or Express Train No. —
145.00

Carey Hand Funeral Home

Name of deceased Oscar W. Hall
 Date of death Sept 24-36
 Cause of death Gun Shot wound Hansieide
 Place of death H. H.
 Residence Winter Haven
 Age 39 Y'rs 1 Mo's 20 Days
 Weight 135 Height 6 ft. 1 in. Eyes Blue
 Funeral at Winter Haven
 Date _____ 193____ M
 Account charged Ware + Smith
 Address Winter Haven
 Account guaranteed _____
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose Body covered
 Casket by auto 5 P.M.
 Casket with Copper Lin Sun 9-27-36
 Style of Casket _____
 No. of Casket Body Cremated
 Outside Box 9-a in Mon 9-28-36
 Shipping Case or Vault _____
 Handles Express order to
 Pillow Set Ware + Smith
 Name Plate Winter Haven
 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. _____

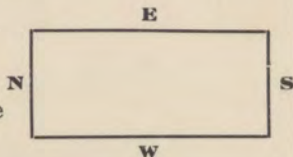
Carey Hand Funeral Home

Name of deceased Anna Mary Johnston
 Date of death Sept-24-36
 Cause of death Apoplexy
 Place of death Res
 Residence Vero Beach
 Age 70 Y's Mo's Days
 Weight 144 Height ft. in. Eyes
 Funeral at Vero Beach
 Date 1936 M
 Account charged C. E. Cox
 Address Vero Beach
 Account guaranteed OK
 Address
 Embalming Cremation
 Robe, Suit, Dress
 Underwear and Hose Body unwed
 Casket ly auto 6-P.M.
 Casket with Copper Lin lin Sept 27
 Style of Casket
 No. of Casket Body cremated
 Outside Box 9-w m m m
 Shipping Case or Vault Sept 28-36
 Handles
 Pillow Set Express to
 Name Plate C. E. Cox F. Home
 Cemetery Vero Beach Fla
 Section 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

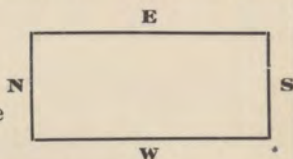
Carey Hand Funeral Home

Name of deceased David M. Jones
 Date of death Sept 28 - 12:45 a.m.
 Cause of death Sub Arterial Hemorrhage
 Place of death Mabel Clark Nursing Home
 Residence 528 Conroy Ave
 Age 66 Yrs 4 Mo's 10 Days
 Weight 135 Height 5 ft. 7 in. Eyes
 Funeral at Chapel F. Home
 Date Tues Sept 29 1936 3 P. M
 Account charged Mrs David M. Jones
 Address 528 Conroy Drive.
 Account guaranteed Estate

Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3- Gr. Oak 100.00
 Casket with Copper Lin. ✓
 Style of Casket Oct. N. E
 No. of Casket 55- W
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext -
 Pillow Set yes
 Name Plate at Rest
 Cemetery Plainfield N. J.
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation _____
 Single Grave music 5.00
 Opening and Closing Grave _____
 Body Shipped to Newark N. J.
 R. R. Ticket + P. 119.10
 Cash advanced _____
 Telegram (1) .76
 Minister Rev Book.
 Casket Wagon (2) 10.00
 Physician Lt. C. Anderson.
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 76 \$ 269.86
Tues Night 9-29-
Pd. in R R + tel
\$ 119.86

Carey Hand Funeral Home

Name of deceased Mary Jane Roberts
 Date of death Sept 28th
 Cause of death _____
 Place of death Residence
 Residence 626 Virginia Drive
 Age 86 Y'rs 4 Mo's 12 Days _____
 Weight 125 Height 5 ft. 5 in. Eyes _____
 Funeral at Chapel
 Date Thu Oct-2 1936 4 P. M
 Account charged Dr Redding
 Address 626 Va Drive
 Account guaranteed _____
 Address _____
 Embalming & Dressing 35⁰⁰ 25⁰⁰
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Gr Engr Mole 95⁰⁰
 Casket with Copper Lin. ☒
 Style of Casket Oct O.T.
 No. of Casket 55
 Outside Box ☒ Dring Run #70-22 30⁰⁰
 Shipping Case or Vault ☒
 Handles Ext Name & Date Engr
 Pillow Set yes
 Name Plate ☒
 Cemetery Cremation
 Section _____ Lot _____
 I Other Graves _____
 X Grave on this date _____
 Cremation Cremation 50⁰⁰
 Single Grave Body Cremated
 Opening and Closing Grave 9-9 A.M.
 Body Shipped to Sat Oct-3-36
 R. R. Ticket will call for ashes
 Cash advanced ☒ N. Chg
 Telegram ☒
 Minister Dean Johnson
 Casket Wagon _____
 Physician Dr Redding
 County or City Burial \$200⁰⁰
 Automobiles _____
 Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased Emma Wofford
 Date of death Sept 29 - 5:30 p.m.
 Cause of death _____
 Place of death Lockhart, Fla
 Residence Lockhart, Fla
 Age 76 Y'rs 3 Mo's 5 Days _____
 Weight 135 Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date _____ 193 _____ M
 Account charged Estate
 Address _____
 Account guaranteed Intg on same
 Address by Mrs Lansing
 Embalming + Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 Gr Bid-C 125.00
 Casket with Copper Lin. ☒
 Style of Casket Oct O.T.
 No. of Casket S 1411
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Lake Hill
 Section _____ Lot _____
 E
 N
 S
 W
 I Other Graves
 X Grave on this date
 Cremation _____
 Single Grave _____
 Opening and Closing Grave 7 v 1 e 15.00
 Body Shipped to Ant. 5.00
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon (1) 5.00
 Physician Dr. F. Gray
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. \$ 200.00

Carey Hand Funeral Home

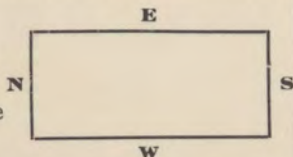
Name of deceased		<u>Robert F. Paul</u>	
Date of death		<u>Sept 29</u> 10:30 A.M.	
Cause of death		<u>Angina Pectoris</u>	
Place of death		<u>Res</u>	
Residence		<u>Ocoll. Fla</u>	
Age	<u>61</u> Y'rs	Mo's	<u>22</u> Days
Weight	Height	ft.	in. Eyes
Funeral at		<u>M. E. Church - Ocoll Fla</u>	
Date		193 <u>6</u> M	
Account charged		<u>Mrs Robert F. Paul</u>	
Address		<u>Ocoll Fla</u>	
Account guaranteed		<u>W. O. W. Insurance</u>	
Address			
Embalming	<u>+ Dressing</u>	25.00	
Robe, Suit, Dress	<u>Blue Serg</u>	11.00	
Underwear and Hose		1.50	
Casket	<u>6-3- Loc</u>	75.00	
Casket with Copper Lin.			
Style of Casket	<u>Sgr H.C.</u>		
No. of Casket	<u>127 - Jct</u>		
Outside Box	<u>R-9</u>		
Shipping Case or Vault <input checked="" type="checkbox"/>			
Handles	<u>Ext</u>		
Pillow Set	<u>gr</u>		
Name Plate	<u>at Rest</u>		
Cemetery	<u>Ocoll</u>		
Section		Lot	
		E	
I Other Graves	<div style="border: 1px solid black; width: 150px; height: 50px; margin: 0 auto; position: relative;"> E W N S </div>		
X Grave on this date			
Cremation			
Single Grave	<u>Del Bx Tntvale</u>	10.00	
Opening and Closing Grave			
Body Shipped to			
R. R. Ticket			
Cash advanced			
Telegram			
Minister	<u>Rev Bridges</u>	5.00	
Casket Wagon	<u>(1)</u>		
Physician	<u>Dr. Scott</u>		
County or City Burial			
Automobiles	<u>S & S</u>	15.00	
Baggage or Express Train No.	<u>142</u>	50	

Carey Hand Funeral Home

Name of deceased Hugh S Simpson
 Date of death Oct-1-36 7-PM
 Cause of death _____
 Place of death County Home
 Residence Winter Park
 Age 68 Y'rs 7 Mo's 27 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Tue Oct-2- 1936 5-P. M
 Account charged Eula Mae Simpson
 Address Winter Park
 Account guaranteed Note - 10-Pi Inc
 Address _____
 Embalming & Dressing
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Gr Case
 Casket with Copper Liner _____
 Style of Casket 1/2 Flat T
 No. of Casket 0
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Bale
 Pillow Set ☒
 Name Plate at Res
 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 Rev Cheering
 Casket Wagon (1)
 Physician _____
 County or City Burial _____
 Automobiles S + S
 Baggage or Express Train No. _____

Cash 5.00 } 10.00
 Bal 10.00 Pi Inc -

15.00

35.13

7.00

10.00

5.00

10.00

82.00

Carey Hand Funeral Home

Name of deceased *Dr Charles Howard Lodor*
 Date of death *Fri Oct 2 1936* P.M.
 Cause of death _____
 Place of death *Clear Lake Lodge*
 Residence *Eustis Fla*
 Age *77* Y'rs *11* Mo's *6* Days _____
 Weight *150* Height *5* ft. *8* in. Eyes _____
 Funeral at *Chapel*
 Date *Sun Oct 4 - 1936* 4 - P.M.
 Account charged *Mrs Katharine V Lodor*
 Address *332 Center st Eustis*
 Account guaranteed *Estate*
 Address _____
 Embalming *& Dress* 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-6-Metal* 395.00
 Casket with Copper Lin. *Inner*
 Style of Casket *State D C*
 No. of Casket *5-95-58 - Must Shiner*
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *Ext*
 Pillow Set *yes Sil Gr 1858*
 Name Plate *Name & Date 1934*
 Cemetery *at Eustis*
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N _____ S _____
 W _____
 Cremation *Cremation* 50.00
 Single Grave *Brnze Urn* 30.00
 Opening and Closing Grave _____
 Body Shipped to *Body cremated*
 R. R. Ticket *P.M. Sunday 10-4-36*
 Cash advanced *Urn Placed in Casket*
 Telegram *and Del to Res in Eustis Sew*
 Minister *Mon Monday P.M. & Burial Eustis*
 Casket Wagon *(1)* 5.00
 Physician *Dr C D Christ*
 County or City Burial _____
 Automobiles *3 & 5 & Rea* 15.00
 Baggage or Express Train No. _____
amb serv 5.00
 535.00

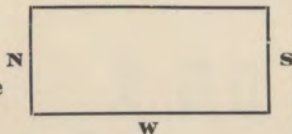
Carey Hand Funeral Home

Name of deceased Doris E. Turner
 Date of death Sat - Oct - 3rd 6 30 AM
 Cause of death _____
 Place of death Res -
 Residence Taft -
 Age 12 Y's 6 Mo's 4 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Sunday 193 6 3 P. M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____

Embalming Care of Body 15.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Care of Body 4-6 H. L. 15.00
 Casket with Copper Lin. _____
 Style of Casket Spr
 No. of Casket N. M.
 Outside Box R-9
 Shipping Case or Vault _____
 Handles Bale
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician Dr. Christ
 County or City Burial _____
 Automobiles S + S 10.00

Baggage or Express Train No. 74 40.00
County - 1450
Funeral 25.00
39.50

Carey Hand Funeral Home

Name of deceased Harold Lee
 Date of death Oct-5-36- 1130 P.M.
 Cause of death Coronary thrombosis
 Place of death Orlando - Rt 3-
 Residence Orlando - Rt 3 - Box 580
 Age 40 Y's 11 Mo's 9 Days
 Weight 135 Height 5 ft. 7 in. Eyes
 Funeral at Chapel
 Date Wed Oct 7 - 193 M
 Account charged Mrs. Harold Lee
 Address Orlando Rt 3 - Box 580
 Account guaranteed Insurance

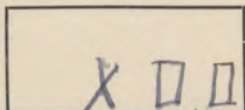
Address
 Embalming ✓ Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3-Emb In 95.00
 Casket with Copper Lin. ✓
 Style of Casket Oct OT-H. C
 No. of Casket 55-W
 Outside Box Reg-
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set yes
 Name Plate
 Cemetery Greenwood
 Section B- Lot 79

E

I Other Graves

X Grave on this date

N



S

W

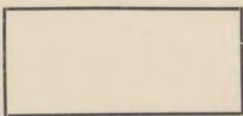
Cremation car for Family 5.00
 Single Grave car for minister 5.00
 Opening and Closing Grave etc 15.00
 Body Shipped to Car for P. B. 5.00
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Rev Mearns 5.00
 Casket Wagon 1
 Physician J. Shiver & Shuff
 County or City Burial ✓
 Automobiles 8 & 3 15.00
 Baggage or Express Train No.

\$180.00

(4) Certified Copies 2.00

182.00

Carey Hand Funeral Home

Name of deceased Jacob F. Cole
 Date of death Oct 4
 Cause of death Cardiac
 Place of death Miami, Fla.
 Residence Miami, Fla.
 Age 86 Y'rs 1 Mo's 10 Days
 Weight 116 Height 5 ft. 6 1/2 in. Eyes Blue
 Funeral at Miami, Fla.
 Date Oct 1936 M
 Account charged King Funeral Home
 Address Miami, Fla.
 Account guaranteed _____
 Address _____
 Embalming Cremation 3750
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket by auto Wed
 Outside Box 6:30 a. m Oct 7-36
 Shipping Case or Vault _____
 Handles Body cremated
 Pillow Set 7 a m. Wed
 Name Plate Oct 7 - 1936
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves 
 X Grave on this date _____
 W
 Cremation Ashes expressed
 Single Grave to - King Funeral
 Opening and Closing Grave Home
 Body Shipped to Miami, 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 *Mr Robert Henry Thomas*
 Date of death *Oct-3-36*
 Cause of death *Coronary Occlusion*
 Place of death *Res*
 Residence *St Petersburg*
 Age *73* Y'rs *7* Mo's *11* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *St Petersburg*
 Date _____ 193 *6* M
 Account charged *Endicott Funeral Co*
 Address *St Petersburg*
 Account guaranteed *OK*
 Address _____
 Embalming *Cremation* 37.50
 Robe, Suit, Dress _____
 Underwear and Hose *Body arrived*
 Casket *by auto 9-a m*
 Casket with Copper Lin. *Thurs-10-8-36*
 Style of Casket _____
 No. of Casket *Body cremated*
 Outside Box *930 a m*
 Shipping Case or Vault *Thurs-10-8-36*
 Handles _____
 Pillow Set *Ashes Delivered*
 Name Plate *H m Wilson*
 Cemetery *Scn in Law*
 Section *PM-10-8-36* Lot _____
 E
 N S
 W
 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

37.50

Carey Hand Funeral Home

Name of deceased Aleck T. Jones
 Date of death Thurs Oct 8 - 1936 10:30 AM
 Cause of death _____
 Place of death N. Orange & Lake Lanholm
 Residence 328 Long st
 Age 54 Y'rs 3 Mo's 23 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sun Oct - 11 1936 3, P. M
 Account charged Mrs A. T. Jones
 Address 328 - Long st
 Account guaranteed Insurance by City
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress 1.00
 Underwear and Hose 3.75
 Casket 6-3 Emb Doe 85.00
 Casket with Copper Lin. ☒
 Style of Casket Ser O.T.
 No. of Casket 128 Jet
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext - 3-0
 Pillow Set yes
 Name Plate at Rest
 Cemetery Greenwood
 Section G- Lot _____
 E
 I Other Graves ☐ N ☐ S
 X Grave on this date ☐
 Cremation Lot Bought Direct
 Single Grave _____
 Opening and Closing Grave 1st 15.00
 Body Shipped to Car Minister 5.00
 R. R. Ticket Family Car 5.00
 Cash advanced P. B. Car
 Telegram _____
 Minister _____
 Casket Wagon One 5.00
 Physician Dr
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. 169.75

Carey Hand Funeral Home

Name of deceased Marcus C. Watson
 Date of death Thurs Oct-8-36 4 M
 Cause of death Apoplexy.
 Place of death Res
 Residence Cooper
 Age 67 Yrs 0 Mo's 25 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sun Oct-10 1936 10-A M
 Account charged Mrs M. C. Watson
 Address Cooper
 Account guaranteed Estate & Sons
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress Shirt collar tie 2.00
 Underwear and Hose _____
 Casket 6-6 Metal 395.00
 Casket with Copper Lin. Inner
 Style of Casket State N. C.
 No. of Casket S-95-58- Mund
 Outside Box Reg
 Shipping Case or Vault Court Vault by Family
 Handles Ext -
 Pillow Set yes Lt Gx 1869
 Name Plate Name & Date 1936
 Cemetery Cooper
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 W
 Cremation _____
 Single Grave _____
 Opening and Closing Grave Ty etc 15.00
 Body Shipped to Spru Flowers 15.00
 R. R. Ticket Spru Flowers 4.50
 Cash advanced Spru T 3.00
 Telegram _____
 Minister Hardin & Bridges
 Casket Wagon to Res 5.00
 Physician Dr Scott
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. _____

489.50

Carey Hand Funeral Home

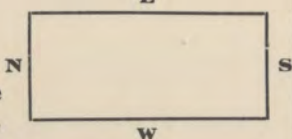
Name of deceased *Thos M Arnold*
 Date of death *Fri Oct 9-36* *740 AM*
 Cause of death *Arterio Sclerosis*
 Place of death *Res*
 Residence *Conway*
 Age *53* Y'rs *6* Mo's *28* Days
 Weight *170* Height *5* ft. *5* in. Eyes
 Funeral at *Chapel*
 Date *Sun Oct-11* 1936 *430 P. M*
 Account charged *Marvin Arnold* *Sam*
 Address *Mrs & M Marvin F Reed* *Dan*
 Account guaranteed *6-mo Note*
 Address

3-11-1883

Embalming *+ Dressing* *35.00*
 Robe, Suit, Dress *Blue Serge* *12.50*
 Underwear and Hose ✓
 Casket *6-3- Oak Ind* *100.00*
 Casket with Copper Lin. ✓
 Style of Casket *Oct 55. N C*
 No. of Casket *55- 8-*
 Outside Box *Reg*
 Shipping Case or Vault ✓
 Handles *Ext*
 Pillow Set *yes*
 Name Plate
 Cemetery *Conway-*
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation *Missie* *5.00*
 Single Grave *P.B. Car* *5.00*
 Opening and Closing Grave *Trute* *15.00*

Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____

Telegram _____
 Minister *Rev Sutton*

Casket Wagon _____
 Physician *Dr Beandahl*

County or City Burial _____
 Automobiles *S & S*

Baggage or Express Train No. *\$187.50*

Reed work a C L office

Carey Hand Funeral Home

Name of deceased Walter T Cook
 Date of death Oct 4-36
 Cause of death Cerebral Hemorrhage
 Place of death Res
 Residence Miami
 Age 73 Y'rs 1 Mo's 11 Days
 Weight 175 Height 5 ft. 10 in. Eyes
 Funeral at Miami
 Date 193 M
 Account charged W H Combs Co
 Address Miami Fla
 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 1130 Jar M
 No. of Casket Fri Oct 9-36
 Outside Box
 Shipping Case or Vault Body
 Handles Cremated 3-P. M
 Pillow Set Fri Oct-9-36
 Name Plate
 Cemetery ashes Expressed to
 Section W H Combs Fla Miami E
 I Other Graves
 X Grave on this date
 Cremation
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

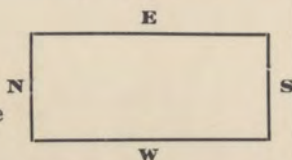
Carey Bond Funeral Home

Name of deceased Virgil Bankston
 Date of death Sat Oct-10-36 AM
 Cause of death suicide Gass
 Place of death Tampa
 Residence Orlando
 Age 23 Yrs 2 Mo's 3 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Monday Oct 12 1936 3 P M
 Account charged Mr P. Flournoy
 Address _____
 Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 x Save City 65.00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Crematorium 5000
 Section _____ Lot _____

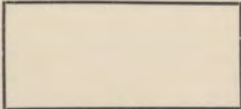
I Other Graves

X Grave on this date

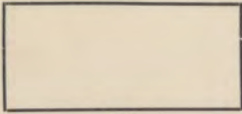


Cremation Yes
 Single Grave Body Cremated
 Opening and Closing Grave 9 AM
 Body Shipped to Tues-Oct-13-36
 R. R. Ticket will call for Ashes
 Cash advanced To J. L. Reed 50.00
 Telegram _____
 Minister Rev Turner 35.00
 Casket Wagon To Tampa
 Physician Rev Turner
 County or City Burial 200.00
 Automobiles _____
 Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased Walter J. Cox
 Date of death Sat. Oct-10-1936 PM
 Cause of death Chc. Nephritis
 Place of death Res
 Residence Ocoee
 Age about 63 Y's _____ Mo's _____ Days _____
 Weight 135 Height 5 ft. 7 in. Eyes _____
 Funeral at Destinatio
 Date Oct - _____ 1936 M
 Account charged Jessie L. Cox.
 Address Ocoee, Fla.
 Account guaranteed See Hand-on a.c. at Ocoee
 Address _____
 Embalming Dressing 35.00
 Robe, Suit, Dress } 5.00
 Underwear and Hose }
 Casket 6-3- Emb D- 85.10
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Ashburn, Ga.
 Section _____ Lot _____
 E
 I Other Graves 
 X Grave on this date _____
 W
 Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Destinatio
 Casket Wagon (2) 10.00
 Physician Dr. Harter
 County or City Burial 135.00
 Automobiles _____
 Baggage or Express Train No. 76
Mon Night 10-12-36

Carey Hand Funeral Home

Name of deceased Charles T. Barton
 Date of death Oct 11 7:50 a.m.
 Cause of death Fell from Hotel Window - Head & Shoulders crushed
 Place of death Angelt Hotel
 Residence Anderson, S.C.
 Age 37 Y'rs 4 Mo's 11 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destination
 Date Oct 1936 M
 Account charged _____
 Address _____
 Account guaranteed Western Union Draft
 Address _____
 Embalming Disposing 35.00
 Robe, Suit, Dress } 15.00
 Underwear and Hose }
 Casket 6-3-Gr Cope 100.00
 Casket with Copper Lin. ☒
 Style of Casket Oct O.T.N.C
 No. of Casket 55 W
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate ☒
 Cemetery Anderson S.C.
 Section _____ Lot _____
 E
 I Other Graves ☐ 
 X Grave on this date ☐
 W
 Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Anderson S.C.
 R. R. Ticket E. C. 25.60
 Cash advanced to Mrs Sue Barton 9.96
 Telegram _____ 4.44
 Minister Destination 10.00
 Casket Wagon (2)
 Physician Shivers
 County or City Burial 200.00
 Automobiles _____
 Baggage or Express Train No. 92
Mon - Oct - 12 - 36

Pd W. U. Draft
 W. H. Barton

Was Has Set

Carey Hand Funeral Home

Name of deceased Wesley Hall
 Date of death Oct 11 1936 8:20 a.m.
 Cause of death Apoplexy
 Place of death Winter Garden Fla
 Residence Gainesville, Fla
 Age 81 Yrs 0 Mo's 1 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destination
 Date Oct 12 1936 6 M
 Account charged Wesley S. Thigpen
 Address Winter Garden Fla
 Account guaranteed _____
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-6r Cup 50.00
 Casket with Copper Lin. ☒
 Style of Casket Spr Filt Top
 No. of Casket 0-4-
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Bale
 Pillow Set ☒
 Name Plate ☒
 Cemetery Lochloosa, Fla
 Section _____ Lot _____

E

I Other Graves

W

N

S

X Grave on this date

Cremation

W

N

S

Single Grave Casket Drive by

Opening and Closing Grave linch to

Body Shipped to Lochloosa-

R. R. Ticket Done there own stake

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon (1) To Res 5.00

Physician Dr. Harter

County or City Burial _____

Automobiles cash 90.00

Baggage or Express Train No. 6-Mo-Note 15.00

5.00

Carey Hand Funeral Home

Name of deceased *Louis J. Alsina*
Date of death *Mon Oct 12-36* PM
Cause of death *Cerebral Thrombosis*
Place of death *Mable Clark*
Residence _____
Age *69* Y'rs *—* Mo's *—* Days _____
Weight *160* Height *5* ft. *7* in. Eyes _____
Funeral at *Chapel*
Date *Wed Oct 14* 193*6* *4-P* M
Account charged *Mrs Mary H. Alsina*
Address *111 - N. James*
Account guaranteed *Estate*
Address _____
Embalming *+ Dressing* 35 00
Robe, Suit, Dress ☒
Underwear and Hose ☒
Casket *6-6-Maple* 340 00
Casket with Copper Lin. ☒
Style of Casket *Style H. C* —
No. of Casket *1725-Nat*
Outside Box *Reg*
Shipping Case or Vault ☒
Handles *Ext* —
Pillow Set *yes* *Tangher*
Name Plate ☒
Cemetery *Greenwood*
Section *I - S.E. 1/4* Lot *21*

E

I Other Graves

N
E

S

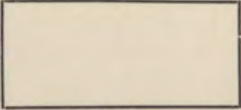
X Grave on this date

W

Cremation *Burial Lot* 37 50
Single Grave _____ 15 00
Opening and Closing Grave *Tr etc* 5 00
Body Shipped to *Car P. B* 5 00
R. R. Ticket *Car min* 5 00
Cash advanced *Closed Car* 5 00
Telegram _____
Minister *Rev J. G. Shadley* 5 00
Casket Wagon *(1)*
Physician *Dr F. H. Harris*
County or City Burial _____
Automobiles *S & S* 15 00
Baggage or Express Train No. _____

442 50
5 00
457 50

Carey Hand Funeral Home

Name of deceased Darwin C Burvinger
 Date of death Sept Oct 29-36
 Cause of death Senility
 Place of death Per.
 Residence Miami
 Age 84 Y's 1 Mo's 3 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Miami Fla
 Date Oct 1936 M
 Account charged W. H. Combs and Co.
 Address Miami
 Account guaranteed _____
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body buried
 Casket with Copper Lin. 130 P.M.
 Style of Casket Tus Oct 13-36
 No. of Casket _____
 Outside Box Body cremated
 Shipping Case or Vault 3 P.M.
 Handles 10-13-36
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves 
 X Grave on this date _____
 Cremation Ashes Expressed
 Single Grave Harry M Putnam
 Opening and Closing Grave _____
 Body Shipped to Citizens Bank of
 R. R. Ticket Penn Yan
 Cash advanced _____
 Telegram Penn Yan N.Y.
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

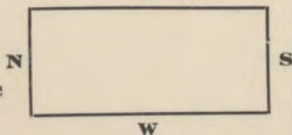
Name of deceased Bay Y Girl
 Date of death 10-13-36 6-PM
 Cause of death Premature birth
 Place of death O.G.H.
 Residence Twinn Bay of N.H. Stansell
 Age ✓ Y'rs ✓ Mo's ✓ Days 3-1/2 h-M
 Weight ✓ Height ✓ ft. ✓ in. Eyes 4, H, - F
 Funeral at Grave side
 Date Wed- 10-14 1936 11-A M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress Both Baby in
 Underwear and Hose Same Casket
 Casket 2-6-N.L.
 Casket with Copper Lin. _____
 Style of Casket Sgt M
 No. of Casket _____
 Outside Box Reg
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Bulcan
 Section _____ Lot _____

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. Hunter
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

14.50

was rushed to O.G.H. shortly after birth from Res at N.H. G.

Carey Hand Funeral Home

Name of deceased Richard G. Upmeyer
 Date of death Oct-13-36
 Cause of death myocardia
 Place of death Tampa
 Residence Tampa
 Age 72 Yrs 9 Mo's 17 Days
 Weight 156 Height 5 ft. 11 in. Eyes
 Funeral at Tampa
 Date _____ 193____ M
 Account charged Greenman T.H.
 Address Tampa
 Account guaranteed OK
 Address _____
 Embalming Cremation
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Body
 Style of Casket covered 11-AM
 No. of Casket by auto
 Outside Box _____
 Shipping Case or Vault Body
 Handles Cremated 11:30 AM
 Pillow Set Wed-10-14-36
 Name Plate _____
 Cemetery will call for ash
 Section _____ Lot _____

37.50

I Other Graves

X Grave on this date

N

E

S

W

Cremation Mr. Upmeyer gave

Single Grave OK - 50

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

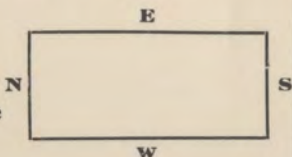
Carey Hand Funeral Home

Name of deceased Mrs Sarah J Canada
 Date of death Wed Oct-14-36 9:30 A.M.
 Cause of death Cerebral Hemorrhage
 Place of death Res
 Residence Forest City
 Age 70 Yrs 0 Mo's 2 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave side
 Date Thurs Oct 15 1936 2 P M
 Account charged Albert Crum
 Address Murkland Rt-2
 Account guaranteed _____

Address _____
 Embalming Care of Body 25.00
 Robe, Suit, Dress _____ 5.00
 Underwear and Hose _____
 Casket 6-3 Emb Doe 75.00
 Casket with Copper Lin. ✓
 Style of Casket Sgr H. e
 No. of Casket _____
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Set
 Pillow Set yes
 Name Plate at Rest
 Cemetery Dravdy
 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 (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. \$ 125.00

Carey Hand Funeral Home Colored

Name of deceased Infant of John & Cassie Rollins
 Date of death Oct 14 - 4 a.m.
 Cause of death Still Born
 Place of death C. G. H.
 Residence Gellwood, Fla.
 Age Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at
 Date 1936 M
 Account charged County
 Address
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 2/8 W. R. S. N. M. 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
 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. Hoffman
 County or City Burial
 Automobiles
 Baggage or Express Train No.

\$14.50

Carey Hand Funeral Home

Name of deceased Antonio Prieto
 Date of death Oct 13
 Cause of death Tuberculosis - Peritonitis
 Place of death Miami, Fla
 Residence Miami, Fla
 Age 34 Y'rs ✓ Mo's ✓ Days 27
 Weight 135 Height 5 ft. 7 in. Eyes Black
 Funeral at Miami, Fla
 Date Oct 1936 M
 Account charged W. H. Combs Und Co
 Address Miami, 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 Thurs
 Outside Box 112:55 P. M.
 Shipping Case or Vault Oct 15 - 36
 Handles _____
 Pillow Set Body cremated
 Name Plate 3 P. M. Thurs
 Cemetery Oct 15 - 1936
 Section _____ Lot _____

E

I Other Graves

E
N
S

X Grave on this date

W

 Cremation Ashes expressed
 Single Grave to - W. H. Combs
 Opening and Closing Grave Und Co.
 Body Shipped to Miami, 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

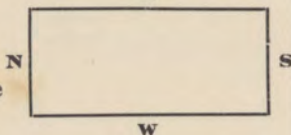
Col

Name of deceased Chas Overtan
 Date of death Oct-15-32
 Cause of death Syphilis Pulmonary Infection
 Place of death City Stockade
 Residence _____
 Age _____ Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date _____ 193 _____ M
 Account charged City
 Address _____
 Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3-Case 14.00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 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 _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____ 14.00
 Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased <u>Perry M Horton</u>		
Date of death <u>Oct - 16 - 36</u>	<u>2:45 - A M</u>	
Cause of death <u>Uremia</u>		
Place of death <u>Res</u>		
Residence <u>Rt 4 - 1-M-E of city Cherry</u>		
Age <u>79</u>	Y'rs <u>9</u>	Mo's <u>11</u> Days
Weight <u>150</u>	Height <u>5 ft. 7</u>	in. Eyes
Funeral at <u>Chapel</u>		
Date <u>Sun Oct - 18</u>	<u>1936 -</u>	<u>3 - P M</u>
Account charged <u>Son Horton</u>		
Address <u>Orlando Rt-4-</u>		
Account guaranteed		
Address		
Embalming <u>+ Dressing</u>		<u>25.00</u>
Robe, Suit, Dress		
Underwear and Hose		
Casket <u>6-3-Gr. Cpr</u>		<u>100.00</u>
Casket with Copper Lin.		
Style of Casket <u>Oct 09</u>		
No. of Casket <u>55-2</u>		
Outside Box <u>Reg-</u>		
Shipping Case or Vault		
Handles <u>Ext</u>		
Pillow Set <u>yes</u>		
Name Plate		
Cemetery <u>Grandy</u>		
Section	Lot <u>89</u>	
	E	
I Other Graves	<div style="border: 1px solid black; width: 150px; height: 60px; position: relative; margin: 0 auto;"> <div style="position: absolute; top: 5px; left: 5px; border: 1px solid black; width: 40px; height: 15px; text-align: center; line-height: 15px;">X</div> <div style="position: absolute; top: 0; left: 0;">N</div> <div style="position: absolute; top: 0; right: 0;">S</div> <div style="position: absolute; bottom: 0; left: 0;">W</div> </div>	
X Grave on this date		
Cremation		
Single Grave		
Opening and Closing Grave <u>T & C</u>		<u>15.00</u>
Body Shipped to		
R. R. Ticket <u>Missie</u>		<u>10.00</u>
Cash advanced		
Telegram		
Minister <u>Rev Chittley (Plant City)</u>		<u>5.00</u>
Casket Wagon <u>(1)</u>		
Physician <u>Dr Sutter</u>		
County or City Burial		
Automobiles <u>S. & S.</u>		<u>15.00</u>
Baggage or Express Train No.	<u>\$</u>	<u>170.00</u>

Carey Hand Funeral Home

Name of deceased Ernest Kemp
 Date of death Thurs Oct-18-36 5-PM
 Cause of death Struck by auto crushed chest
 Place of death Winter Garden Rd Near Iron Bridge
 Residence Winter Garden
 Age 28 Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grove Side
 Date Tues Oct 20 1936 11 A M
 Account charged County

Address _____
 Account guaranteed _____
 Address _____

Embalming + Dressing 35 00

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 _____

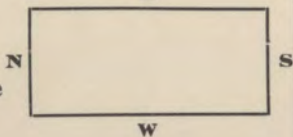
Name Plate _____

Cemetery Devol 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 Pol by Uncle 10 00

Baggage or Express Train No. 24 50

County 1450

Uncle 1000

Mark of Paul Williams SA

Carey Hand Funeral Home

Name of deceased Mrs Charlie Ball
 Date of death Oct-17-36-
 Cause of death Unic Coma
 Place of death Oct-17-36
 Residence Tampa
 Age 63 Yrs 11 Mo's 21 Days
 Weight 210 Height 5 ft. 11 in. Eyes Blue
 Funeral at Tampa
 Date _____ 193__ M
 Account charged Greenman F. Home
 Address Tampa Fla
 Account guaranteed P. O. M. Order
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose Body arrived
 Casket by Express
 Casket with Copper Lin. Q. E. L. #76
 Style of Casket 2-A M Sund-10-18
 No. of Casket _____
 Outside Box Body Cremated
 Shipping Case or Vault 10-A M-
 Handles Sun - Oct-18-36 -
 Pillow Set _____
 Name Plate Ashes Expressed
 Cemetery To Greenman & Co
 Section Tampa Fla Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N _____ S
 W
Aluminum Case
 Cremation _____
 Single Grave C.S. Box Returned by
 Opening and Closing Grave Text 10-19-36
 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

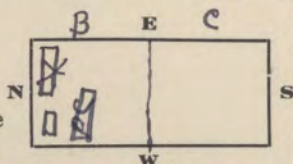
Name of deceased Charles L Church
 Date of death Oct-15-36
 Cause of death Pul T. Dis
 Place of death Res.
 Residence Miami
 Age 49 Y's 1 Mo's 15 Days 15
 Weight 125 Height 5 ft. 11 in. Eyes
 Funeral at Miami Fla.
 Date 1936 M
 Account charged W. H. Combs Co.
 Address Miami Fla.
 Account guaranteed
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. Body arrived
 Style of Casket by Express 130
 No. of Casket See Oct-18-36
 Outside Box
 Shipping Case or Vault Body
 Handles Cremated 9-AM
 Pillow Set Monday 10-19-36
 Name Plate
 Cemetery Order Expressed to
 Section W. H. Combs F. Home
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 *Margaret A. Overstreet*
 Date of death *Sun Oct 18-36-* *PM*
 Cause of death *Carbon Monoxide Gas*
 Place of death *Res - Suicide* *Put her*
 Residence *Winter Park* *gas in*
 Age *31 -* Y'rs *1* Mo's *18* Days
 Weight *145* Height *5* ft. *2* in. Eyes
 Funeral at *Chapel*
 Date *Tues Oct 20* 1936 *4 P. M*
 Account charged *Mrs. O. Overstreet*
 Address *Winter Park*
 Account guaranteed *Ins -*
 Address
 Embalming *& Dressing* *35.00*
 Robe, Suit, Dress *Cape Gown* *17.50*
 Underwear and Hose
 Casket *6-3- Peach Flush* *325.00*
 Casket with Copper Lin.
 Style of Casket *Oct 1/2 - C -*
 No. of Casket *X 3717 1/2 - S*
 Outside Box *Reg -*
 Shipping Case or Vault
 Handles *Ext*
 Pillow Set *yes Flush*
 Name Plate *Name + Date 1936*
 Cemetery *Winter Park*
 Section *B + C* Lot *67*

I Other Graves

X Grave on this date



Cremation *Closed Car to Res*
 Single Grave *P. B. Car* *5.00*
 Opening and Closing Grave *T + etc* *15.00*
 Body Shipped to *Car in*
 R. R. Ticket *Music* *10.00*
 Cash advanced
 Telegram
 Minister *Rev Sellers*
 Casket Wagon *(1)* *5.00*
 Physician *James Shiver*
 County or City Burial
 Automobiles *S + S* *15.00*
 Baggage or Express Train No. *422* *50*
Mrs Overstreet Pd
for the Gown - *17.50*
400.00

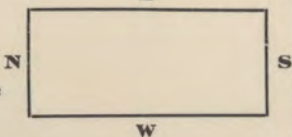
Carey Hand Funeral Home

Name of deceased James C. Tutch
 Date of death Sun Oct-18-36 7 PM
 Cause of death Chrs Myocarditis
 Place of death Res
 Residence 1022 West Jackson
 Age 64 Y's 8 Mo's 11 Days
 Weight 170 Height 6 ft. 0 in. Eyes
 Funeral at Chapel
 Date Tues Oct 20 1936 1030 A M
 Account charged Mrs J. C. Tutch
 Address 1022 West Jackson
 Account guaranteed

Address
 Embalming Dressing 25.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3-Gr. Cup. 40.00
 Casket with Copper Lin. ✓
 Style of Casket Gr. Flt 9
 No. of Casket 0 W
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Short
 Pillow Set ✓
 Name Plate at Res
 Cemetery Greenwood
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation _____
 Single Grave White 7.00
 Opening and Closing Grave + etc 15.00
 Body Shipped to auto 3.00
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Dean Adcock
 Casket Wagon _____
 Physician Dr Andrews
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. 107.00
Cash - 50.00

Bal Payment.

2 wks -

Family Very Poor

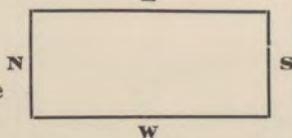
Carey Hand Funeral Home

Name of deceased Geo H. Maus
 Date of death Oct 17-36
 Cause of death Cholera Myocarditis
 Place of death St Petersburg
 Residence Morris Ills
 Age 82 Y'rs 1 Mo's 38 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at St Petersburg
 Date _____ 1936 M
 Account charged Wilhelms and Co
 Address St Petersburg Ek
 Account guaranteed _____
 Address _____
 Embalming Cremation
 Robe, Suit, Dress _____
 Underwear and Hose Body arrived
 Casket by auto 12:30 PM
 Casket with Copper Lin. Mon 10-19-36
 Style of Casket _____
 No. of Casket Body cremated
 Outside Box 3-P. M-10-19-36
 Shipping Case or Vault _____
 Handles Ashes expressed to
 Pillow Set W & Davis
 Name Plate Undertaking Co
 Cemetery Morris Ills
 Section _____ 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