

6-15-1937

Memoranda Book 113: Carey Hand Funeral Home records, June 15, 1937 to August 14, 1937

Carey Hand Funeral Home

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Carey Hand Funeral Home

Name of deceased William B. Myers
 Date of death June 12-1937
 Cause of death Cerebral Embolism
 Place of death Rockledge Fla.
 Residence Rockledge, Fla.
 Age 63 Y's Mo's ✓ Days 5
 Weight 175 Height 5 ft. 5 in. Eyes Blue
 Funeral at Rockledge Fla
 Date June 1937 P. M
 Account charged J. E. Kern and Co.
 Address Cocoa Fla.
 Account guaranteed Check for Cremation
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Bronze Urn 22.50
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Body arrived
 Outside Box by auto Tuesday
 Shipping Case or Vault 5 P.m.
 Handles June 15-1937
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery Wed 9 A.M.
 Section June 16-1937 Not

I Other Graves

X Grave on this date
will notify

E

Engraving on
 Name Plate
Wm. B. Myers
1874-1937

W

Cremation Ashes expressed to
 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. _____

will pay for time at
 later date

\$ 60.06

Carey Hand Funeral Home

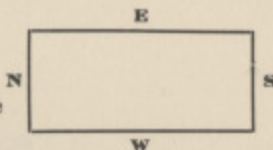
Name of deceased *Clara Bell Davis*
 Date of death *June - 14 - 37*
 Cause of death *Carcinoma of U*
 Place of death *Res*
 Residence *St Petersburg*
 Age *72* Y'rs *10* Mo's *13* Days
 Weight *100* Height *5 ft. 4* in. Eyes *Brown*
 Funeral at *St P*
 Date _____ 193____ M____
 Account charged *Endicott*
 Address _____
 Account guaranteed _____
 Address _____
 Embalming *Cremated* 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. *Body moved*
 Style of Casket *4 Route 1230 PM*
 No. of Casket *16-16-37*
 Outside Box _____
 Shipping Case or Vault *Body Cremated*
 Handles *8-A M-4-12-37*
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
Section 10-X E
 I Other Graves N S
 X Grave on this date W
Express ashes to F. D. D. D. D.
 Cremation *Hill & Irving*
 Single Grave *T. D. D. D. D.*
 Opening and Closing Grave *418-E*
 Body Shipped to *Main St*
 R. R. Ticket *Charlottesville*
 Cash advanced *Pa*
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician 37.50
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased Emma Chattt Norris
 Date of death June - 12 - 37
 Cause of death Cardiac Asthma
 Place of death Res
 Residence St. Petersburg
 Age 66 Y'rs 10 Mo's 10 Days
 Weight 175 Height 5 ft. 2 in. Eyes Blue
 Funeral at Tampa
 Date June 13 1937 M
 Account charged Gunnman T. Home
 Address St. Petersburg Fla
 Account guaranteed OK
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body arrived
 Casket with Copper Lin. by Express
 Style of Casket Red June 16-37
 No. of Casket 3-25 PM
 Outside Box Body Cremated
 Shipping Case or Vault 8-a m
 Handles 6-12-37
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
Section B of E
 I Other Graves N S
 X Grave on this date W
 Cremation ashes Expressed to
 Single Grave Gunnman & Co
 Opening and Closing Grave Tampa
 Body Shipped to Fla
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial 37.50
 Automobiles _____
 Baggage or Express Train No. _____

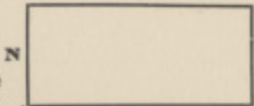
Cary Hand Funeral Home

Name of deceased Rose Elizabeth Smith
 Date of death Thurs June 12-37 550 AM
 Cause of death _____
 Place of death Res
 Residence 115- Glenn St -
 Age 3 Yrs 6 Mo's 8 Days _____
 Weight _____ Height 3 ft. _____ in. Eyes _____
 Funeral at Chapel
 Date _____ 1937
 Account charged P. H. Smart G. Walker
 Address 115 Glenn St
 Account guaranteed Cash -
 Address _____
 Embalming Case of Body - 7 50
 Robe, Suit, Dress _____
 Underwear and Hose ✓
 Casket 3-6-H-L 40.00
 Casket with Copper Lin. ✓
 Style of Casket Oct H. T
 No. of Casket 103 Tampa
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Small
 Pillow Set Yes
 Name Plate Yes
 Cemetery Opoka
 Section _____ Lot _____
 I Other Graves _____
 X Grave on this date _____
 Cremation _____
 Single Grave _____
 Opening and Closing Grave ✓ etc 7 50
 Body Shipped to ✓
 R. R. Ticket ✓
 Cash advanced ✓
 Telegram _____
 Minister Rev Holmes
 Casket Wagon ✓
 Physician Dr
 County or City Burial _____
 Automobiles Seclan 5.00
 Baggage or Express Train No. _____



60.00

Carry Hand Funeral Home

Name of deceased George. H. Holden
 Date of death Thurs June 17 - 37 - 12:30
 Cause of death _____
 Place of death 69 - E. Concord -
 Residence Orlando - 69 - E. Concord.
 Age 88 Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Ellet -
 Date June 1937 M
 Account charged Mrs George. H. Holden
 Address 69 - E. Concord. Wife
 Account guaranteed Estate
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6 - 1 - G. B. C. 225.00
 Casket with Copper Lin. _____
 Style of Casket R. C. Slate
 No. of Casket 6008 - Orleans
 Outside Box R-9
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Burlington Vt.
 Section _____ Lot _____
 I Other Graves 
 X Grave on this date 1392
6921
821
 Cremation 250 124.17
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Burlington Vt.
 R. R. Ticket 43.92 - Ret 69.25 124.17
 Cash advanced Lower 8.50 - May 30
 Telegram _____
 Minister Ellet,
 Casket Wagon 1 5.00
 Physician Dr. J. S. McEwan
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 92 389.17
Fri June 18 - 37 -

Carry Hand Funeral Home

Name of deceased Miss Ellen A. Harris
 Date of death June - 17 - 37
 Cause of death Ch Myocardial Degeneration
 Place of death Res
 Residence St Petersburg Fla
 Age 89 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at St Petersburg
 Date _____ 193 _____ M
 Account charged J. S Rhodes
 Address St Petersburg Fla
 Account guaranteed Ch
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3- Oct
 Casket with Copper Lin Body American
 Style of Casket ly auto 130 PM
 No. of Casket Sat June - 19 - 37
 Outside Box _____
 Shipping Case or Vault Body
 Handles Cremated 3-PM
 Pillow Set Sat June 19-37
 Name Plate _____
 Cemetery Hamlet
 Section _____ Lot _____
Bought Bronze Curn E
with them
 I Other Graves _____
 X Grave on this date _____
 Cremation Imm Expressed Td W
 Single Grave John S Rhodes
 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 Egelliel C. Vick
 Date of death June 20 9:15 A.M.
 Cause of death Uremia
 Place of death Residence
 Residence Oakland Fla.
 Age 82 Y'rs 4 Mo's 10 Days
 Weight 150 Height 5 ft. 7 in. Eyes
 Funeral at Residence
 Date Monday June 21 1937 4:30 P.M.
 Account charged Mrs. E. C. Vick
 Address Oakland Fla.
 Account guaranteed Estate
 Address
 Embalming Pressing 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3 Gr. Bnd. C. 225.00
 Casket with Copper Lin.
 Style of Casket R.C. State Columns
 No. of Casket 6008
 Outside Box
 Shipping Case or Vault Air Seal 125.00
 Handles Ext
 Pillow Set yes
 Name Plate
 Cemetery Oakland
 Section Lot
 E
 I Other Graves
 X Grave on this date
 W
 Cremation
 Single Grave
 Opening and Closing Grave to etc 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Rev
 Casket Wagon (1) 5.00
 Physician Dr. Frank Gray
 County or City Burial
 Automobiles SVS 15.00
 Baggage or Express Train No. 420 00

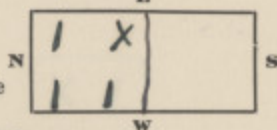
Carey Hand Funeral Home

Name of deceased Willie R. Hudson
 Date of death June 18
 Cause of death Valvular heart disease
 Place of death Hardwick Vermont
 Residence Orlando Fla.
 Age 81 Y's 6 Mo's 5 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Tuesday June 22 1937 4 P. M
 Account charged Mrs L. C. Cox
 Address Orlando Fla
 Account guaranteed Estate
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Grey Doe. 1/2 c
 Casket with Copper Lin. _____
 Style of Casket Oct - D. Top.
 No. of Casket Oct -
 Outside Box Reg -
 Shipping Case or Vault _____
 Handles Oct -
 Pillow Set Yes
 Name Plate _____
 Cemetery Greenwood
 Section A - 11 1/2 Lot 135

I Other Graves

X Grave on this date



Cremation <u>P B. Car</u>	5 ⁰⁰
Single Grave <u>Car min</u>	5 ⁰⁰
Opening and Closing Grave <u>etc</u>	15 ⁰⁰
Body Shipped to _____	
R. R. Ticket <u>music</u>	5 ⁰⁰
Cash advanced _____	
Telegram _____	
Minister <u>Rev. Fred Turner</u>	
Casket Wagon <u>(1) Libbey</u>	5 ⁰⁰
Physician <u>Dr. Chas. E. Libbey</u>	
County or City Burial _____	
Automobiles <u>S & S</u>	15 ⁰⁰
Baggage or Express Train No. _____	50 ⁰⁰

Carey Hand Funeral Home

Name of deceased Mary Elizabeth Hering
 Date of death Wed. June 23-31
 Cause of death Hypostatic Pneumonia
 Place of death 423 Park Lake Circle
 Residence Alhondo Rt 19 - Box 192
 Age 91 Y's 11 Mo's 29 Days
 Weight 90 Height 5 ft. 6 in. Eyes
 Funeral at Chapel. F. H.
 Date Thurs June 24 1937 3:30 P.M.
 Account charged Mrs Emma H. Woodruff
 Address 423 Park Lake Circle
 Account guaranteed
 Address

Embalming Yes 25.00
 Robe, Suit, Dress ☒

Underwear and Hose ☒
 Casket 6-3-Emb Doe 65.00

Casket with Copper Lin. ☒
 Style of Casket Sgt. H. 2
 No. of Casket 79 Temp. 9

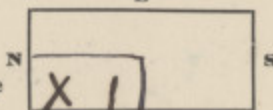
Outside Box Yes
 Shipping Case or Vault
 Handles

Pillow Set
 Name Plate

Cemetery Greenwood
 Section J. N. W. 1/4 Lot 173
E

I Other Graves

X Grave on this date



Cremation Emb No Chg

Single Grave
 Opening and Closing Grave etc 15.00

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister Rev. R. L. Hadley

Casket Wagon No chg

Physician Dr. M. Robinson

County or City Burial

Automobiles SVS 15.00

Baggage or Express Train No. 8110 00
10.00

Cash - 50.00 100.00

Bal by this Mo

Carry Hand Funeral Home

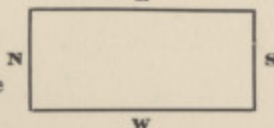
Name of deceased *Camille Branch*
 Date of death *June 23 - 3:30 a.m.*
 Cause of death *Exh. Myocarditis*
 Place of death *O. G. H.*
 Residence *210 E. Robinson ave.*
 Age *75* Y'rs *5* Mo's *—* Days
 Weight *—* Height *—* ft. *—* in. Eyes *—*
 Funeral at *Destination*
 Date *June* 193*7* M
 Account charged *Legn Branch*
 Address *210 - E. Robinson ave.*
 Account guaranteed *—*
 Address *—*
 Embalming *✓ Dressing*
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *6-3- Sil Plush*
 Casket with Copper Lin. *✓*
 Style of Casket *Oct 1/2 - e*
 No. of Casket *1927 -*
 Outside Box *Reg -*
 Shipping Case or Vault *—*
 Handles *8x8*
 Pillow Set *yes*
 Name Plate *Encefix*
 Cemetery *Jersey City, N. J.*
 Section *—* Lot *—*

35.00

175.00

I Other Graves

X Grave on this date



Cremation

Single Grave

Opening and Closing Grave

Body Shipped to *Jersey City, N. J.*

R. R. Ticket *2* *Bought*

Cash advanced *1 - Low Direct.*

Telegram

Minister *Destination*

Casket Wagon *(2)*

10.00

Physician *Sh. R. White*

County or City Burial

Automobiles

Baggage or Express Train No. *76*

Fun Night 6-25-37

Expt-on #92 -

\$220.00

Carey Hand Funeral Home

Name of deceased *Infant of Jas. M. Laughlin*
 Date of death *Wed. June 23-37 8:30 PM*
 Cause of death _____
 Place of death *O. G. H.*
 Residence *613 Ridgewood*
 Age _____ Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 1937 _____ M
 Account charged *Jas. M. Laughlin*
 Address *613 Ridgewood Ave*
 Account guaranteed *Cash*
 Address _____
 Embalming *Cremation* \$ 5.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket *Body Cremated*
 Outside Box *10 P.M. Thurs*
 Shipping Case or Vault *June 24-37*
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves N S
 X Grave on this date W
 Cremation *Will call for ashes*
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

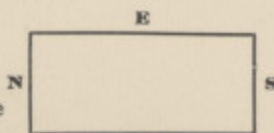
\$ 5.00

Carey Hand Funeral Home

Name of deceased Edurni Gregg Chesbro
 Date of death June 25 - 1937 P.M.
 Cause of death Cerebral Arterio Sclerosis
 Place of death West Palm Beach, Fla.
 Residence West Palm Beach, Fla.
 Age 81 Y'rs 8 Mo's 16 Days
 Weight 140 Height 5 ft. 8 in. Eyes
 Funeral at West Palm Beach Fla.
 Date June 1937 M
 Account charged Ferguson Funeral Home
 Address West 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 express Friday
 Outside Box 11:30 a.m. 6-25-37
 Shipping Case or Vault
 Handles
 Pillow Set Body Cremated
 Name Plate Friday 2 P.M.
 Cemetery June 25 - 37
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation Will notify later

Single Grave about Ashes

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister

Casket Wagon

Physician

County or City Burial

Automobiles

Baggage or Express Train No.

\$ 37.50

Carry Hand Funeral Home

Name of deceased Nancy Isabelle Nolan
 Date of death June 25-37-3 P.M.
 Cause of death Intestinal Flu
 Place of death Coal. Fla.
 Residence 111 James St. Orlando
 Age 78 Yrs 8 Mo's 11 Days
 Weight 135 Height 5 ft. 5 in. Eyes
 Funeral at Destination
 Date June 1937 M
 Account charged Mary Ellen Nolan
 Address 111 James St. Orlando Fla.
 Account guaranteed Estate
 Address
 Embalming Yes Dressing Yes \$35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3-Dr Gr Plank 175.00
 Casket with Copper Lin.
 Style of Casket Cot 1/2 - e
 No. of Casket 1927 S -
 Outside Box Reg
 Shipping Case or Vault
 Handles Cot
 Pillow Set yes
 Name Plate
 Cemetery Washington Pa
 Section Lot
 E
 I Other Graves
 X Grave on this date
 N S
 W
 Cremation
 Single Grave
 Opening and Closing Grave
 Body Shipped to Washington Pa
 R. R. Ticket Y.P. 84.76
 Cash advanced
 Telegram
 Minister Destination
 Casket Wagon (2) 10.00
 Physician Dr. Scott (Coal)
 County or City Burial
 Automobiles
 Baggage or Express Train No. 92 304.76
Set June 26-37.

Cash - 84.76

Chk 125.00

Bal \$93.00 - 30 Da

Carey Hand Funeral Home

Name of deceased Kenmore H. Chubb
 Date of death Sat June 26-1937 1-PM
 Cause of death O. G. H.
 Place of death O. G. H.
 Residence Lake Underhill Orlando Fla.
 Age 46 Y'rs Mo's Days
 Weight 145 Height 5 ft. 8 in. Eyes
 Funeral at Grave side
 Date Sun - June 27 1937 4 P M
 Account charged Mrs K H Chubb
 Address Orlando Fla
 Account guaranteed Lawrence S Chubb
 Address Winter Park Fla
 Embalming Yes X 25.00
 Robe, Suit, Dress 10.00
 Underwear and Hose
 Casket 6-3-Gr S X 65.00
 Casket with Copper Lin. ✓
 Style of Casket Oct H
 No. of Casket S-1411 X
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Winter Park
 Section 40 Lot D
Odd Number
 I Other Graves
 X Grave on this date

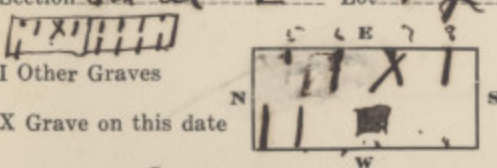
	E	
N	A	J
	1 x B / 1 / 1 / 1	S
	W	

 Cremation
 Single Grave
 Opening and Closing Grave 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Rev Sellers
 Casket Wagon
 Physician Dr Mallory
 County or City Burial
 Automobiles S & S 15.00
 Baggage or Express Train No. 730.00
net 75.00 Cash
Bal monthly 125.00

Carey Hand Funeral Home

Name of deceased *Mrs. Byrnina Porcher*
 Date of death *June - 26 - 1937*
 Cause of death *Cerebral & Sympathetic*
 Place of death *Res*
 Residence *Cocoa*
 Age *76* Y'rs *2* Mo's *19* Days
 Weight *145* Height *5* ft. *6* in. Eyes
 Funeral at *Cocoa*
 Date *Sat June 26* 1937 M
 Account charged *J. C. Koen*
 Address *T. H. Cocoa Fla*
 Account guaranteed *Cash & Cash*
 Address
 Embalming *Cremation* 50 37.50
 Robe, Suit, Dress *Brnyl Lin* 45 40.50
 Underwear and Hose
 Casket *6-3 - State 1/2 C. & B. C.*
 Casket with Copper Lin. *Body enwrd*
 Style of Casket *by auto 430 PM*
 No. of Casket *Sat June 26 - 37*
 Outside Box
 Shipping Case or Vault *Body cremated*
 Handles *5-PM Sat 6-26-37*
 Pillow Set
 Name Plate *well call for Lin*
 Cemetery
 Section Lot
 E
 I Other Graves
 X Grave on this date
 N *urn engraved* S
 Cremation *BYRNINA P. PORCHER*
 Single Grave *apr - 7 June 26*
 Opening and Closing Grave *18th 1937*
 Body Shipped to *BELOVED*
 R. R. Ticket *WIFE OF*
 Cash advanced *EDWARD P. PORCHER*
 Telegram
 Minister
 Casket Wagon
 Physician
 County or City Burial 78.00
 Automobiles
 Baggage or Express Train No.
Cash 49.00
etc 29.00

Carey Hand Funeral Home

Name of deceased Mattie Kinkwood
 Date of death Sun July 27-37-AM
 Cause of death Carcinoma of bladder
 Place of death Res
 Residence 411- Calmer St
 Age 70 Y's 9 Mo's 2 Days
 Weight 145 Height 5 ft. 5 in. Eyes
 Funeral at Chapel
 Date Tues Jan 29 1937 3:30 M P
 Account charged J. L. Moorman
 Address
 Account guaranteed Estate
 Address
 Embalming + Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-9 cloth 150.00
 Casket with Copper Lin. ☒
 Style of Casket Det H. 2
 No. of Casket S 1411-sh
 Outside Box ☒
 Shipping Case or Vault air sea Simply 100.00
 Handles Shat
 Pillow Set yes
 Name Plate ☒
 Cemetery Greenwood
 Section Cen C E Lot 77

 I Other Graves
 X Grave on this date
 Cremation P. B car 5.00
 Single Grave car bur 5.00
 Opening and Closing Grave Trade 15.00
 Body Shipped to ☒
 R. R. Ticket ☒
 Cash advanced ☒
 Telegram ☒
 Minister Rev Tuman 5.00
 Casket Wagon (1)
 Physician Dr J. C
 County or City Burial ☒
 Automobiles S Y S 15.00
 Baggage or Express Train No. 330.00

Carey Hand Funeral Home

Name of deceased Mrs. Francis E. Walker
 Date of death Sun July - 27 - 6 - P.M.
 Cause of death Pulmonary Tuberculosis
 Place of death Res
 Residence Winter Garden Rd. City Limits
 Age 49 Y'rs 1 Mo's 22 Days
 Weight 90 Height 5 ft. 6 in. Eyes
 Funeral at Chapel
 Date Tues June - 29 1937 2 - P.M.
 Account charged Mrs. G. J. Barber Sister
 Address Mildred Nelson Orlando Rd 3 -
 Account guaranteed under a Typical Linen Supply Co.
 Address Orlando Fla
 Embalming & Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 Guy Cup. 75.00
 Casket with Copper Lin.
 Style of Casket Sec H. C -
 No. of Casket 73 - Tampa
 Outside Box R-9
 Shipping Case or Vault ☒
 Handles Short
 Pillow Set yes
 Name Plate ☒
 Cemetery Greenwood
 Section J - E 1/2 Lot 9 -
 I Other Graves ☒
 X Grave on this date
 Cremation Music 5.00
 Single Grave Cav R-B - 5.00
 Opening and Closing Grave & etc 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister T. Hall 5.00
 Casket Wagon (1) 5.00
 Physician Dr. Quillen
 County or City Burial
 Automobiles S & S 15.00
 Baggage or Express Train No. 75500

Carey Hand Funeral Home

Name of deceased Earnest T. Anderson
 Date of death Mon June 28 - 37 - 3-AM
 Cause of death Syphilis (Cerebral)
 Place of death O. G. H.
 Residence Altamont Springs
 Age 27 Y'rs — Mo's 3 Days
 Weight 125 Height 5 ft. 9 in. Eyes
 Funeral at Chapel
 Date Wed June 30 1937 4 P. M
 Account charged Mrs Fred T Anderson
 Address 1425 New York St
 Account guaranteed Cash & Payments
 Address
 Embalming + Dussing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Gr cup 75.00
 Casket with Copper Lin. ☒
 Style of Casket Gr Gr cup
 No. of Casket 22-shuir
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Shat
 Pillow Set ☒
 Name Plate ☒
 Cemetery Greenwood
 Section _____ Lot _____

E

I Other Graves

N
S

W

X Grave on this date

Cremation amb. P. B- 5.00
Single Grave White 7.00
Opening and Closing Grave Y etc 15.00
Body Shipped to Musick 5.00
R. R. Ticket Car Musick 5.00
Cash advanced
Telegram
Minister Rev Adcock
Casket Wagon 1 5.00
Physician Dr Anderson
County or City Burial
Automobiles S & S 15.00
Baggage or Express Train No. amb to Altamont 5.00

172.00

Carey Hand Funeral Home

Name of deceased *Mr. Arthur John Vance*
 Date of death *Mon June 28-37* *11:5 PM*
 Cause of death *Coronary Occlusion*
 Place of death *Res*
 Residence *711 Park Lake Circle*
 Age *61* Y's *11* Mo's *7* Days
 Weight *175* Height *5* ft. *8* in. Eyes
 Funeral at *Dist*

Date *1937*
 Account charged *Mrs. Jennie Vance*
 Address *711 Park Lake Circle*
 Account guaranteed *Estate*

Address
 Embalming *J. Gussing* *35.00*
 Robe, Suit, Dress

Underwear and Hose
 Casket *6-3 Gr. Cupe* *100.00*

Casket with Copper Lin. ☒
 Style of Casket *Oct H. e*

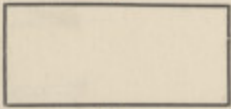
No. of Casket *1922- T*
 Outside Box *R-19* *lined* *5.00*

Shipping Case or Vault ☒
 Handles *Ext*

Pillow Set *yes*
 Name Plate ☒

Cemetery ☒
 Section ☒ Lot

☐ Other Graves
☒ Grave on this date



Cremation
 Single Grave

Opening and Closing Grave

Body Shipped to *Paris Ky*

R. R. Ticket *Bought Direct*

Cash advanced
 Telegram

Minister
 Casket Wagon *(2)* *10.00*

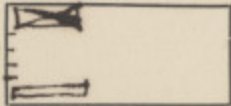
Physician *Dr. Mallon*

County or City Burial *150.00*

Automobiles
 Baggage or Express Train No. *92*

Tues June 29-37

Carey Hand Funeral Home

Name of deceased *Joseph Morton Conway*
 Date of death *June 29 - 37* *9:30 PM*
 Cause of death *Cardio-Vascular disease*
 Place of death *Res*
 Residence *Apt 1 - 1 Blk N. of Oaks Hotel*
 Age *68* Y's *11* Mo's *15* Days
 Weight *165* Height *6* ft. — in. Eyes
 Funeral at *Chapel*
 Date *Wed June 30 1937* *4 - P. M*
 Account charged *Mrs. Fred Anderson*
 Address *1425 New York St*
 Account guaranteed *Estate*
 Address
 Embalming *+ Dressing* *35.00*
 Robe, Suit, Dress ✓
 Underwear and Hose
 Casket *6-3-Dr Br Clth.* *150.00*
 Casket with Copper Lin. ✓
 Style of Casket *Oct N. C*
 No. of Casket *S-1411*
 Outside Box ✓
 Shipping Case or Vault *Take care from Johnson A. S. Co.* *125.00*
 Handles *Short*
 Pillow Set *Yes w*
 Name Plate
 Cemetery *Woodlawn*
 Section *A -* Lot *2*
Head of Grave South *E*

 I Other Graves *6 space 2nd*
 X Grave on this date
 Cremation *F. Car No Chg*
 Single Grave
 Opening and Closing Grave *T. etc* *15.00*
 Body Shipped to ✓
 R. R. Ticket ✓
 Cash advanced ✓
 Telegram ✓
 Minister *Rev. Fredrick* *5.00*
 Casket Wagon *(1)*
 Physician *Dr. M. Bude*
 County or City Burial ✓
 Automobiles *S T S* *15.00*
 Baggage or Express Train No. *3* *45.00*

Carey Hand Funeral Home

Name of deceased Baty Price
 Date of death June 30-37 PM
 Cause of death O. G. H.
 Place of death O. G. H.
 Residence 48- West Amelia
 Age ✓ Y'rs ✓ Mo's 13 Days
 Weight ✓ Height ✓ ft. ✓ in. Eyes ✓
 Funeral at Taylor
 Date ✓ '193 M
 Account charged R. B. Price
 Address 48- West Amelia
 Account guaranteed ✓
 Address ✓
 Embalming Cumulation & etc 10.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket ✓
 Casket with Copper Lin. ✓
 Style of Casket ✓
 No. of Casket ✓
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles ✓
 Pillow Set ✓
 Name Plate ✓
 Cemetery Cumulation
 Section ✓ Lot ✓
 I Other Graves ✓
 X Grave on this date ✓
 Cremation Body cremated
 Single Grave 6- P. M. 7-1-37
 Opening and Closing Grave ✓
 Body Shipped to will call at office
 R. R. Ticket ✓
 Cash advanced ✓
 Telegram ✓
 Minister ✓
 Casket Wagon ✓
 Physician Dr. Esnicus
 County or City Burial ✓
 Automobiles ✓
 Baggage or Express Train No. ✓

10.00

Carey Hand Funeral Home

Name of deceased *John Lindhill Tish*
 Date of death *June 29 37*
 Cause of death *Abscess of Left Lung*
 Place of death *Res*
 Residence *West Palm Beach*
 Age *41* Y'rs *9* Mo's *13* Days
 Weight *120* Height *6* ft. *—* in. Eyes *—*
 Funeral at *West Palm Beach*

Date *—* 193*7* M
 Account charged *Ferguson Funeral Home*
 Address *West Palm Beach*
 Account guaranteed *OK*
 Address *—*

Embalming *Cremation* 37.50
 Robe, Suit, Dress *—*
 Underwear and Hose *—*
 Casket *Body covered*
 Casket with Copper Lin. *by Express*
 Style of Casket *1125 - a m*
 No. of Casket *July - 2 - 1937*
 Outside Box *—*
 Shipping Case or Vault *Body cremated*
 Handles *8 - a m, Sat*
 Pillow Set *July - 3 - 37*
 Name Plate *—*

Cemetery *—*
 Section *—* Lot *—*
wooden Box E

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

Cremation *Ashes Expressed To*
 Single Grave *Ferguson F. Home*
 Opening and Closing Grave *W. R. Beach*

Body Shipped to *—*
 R. R. Ticket *—*
 Cash advanced *—*
 Telegram *—*
 Minister *—*
 Casket Wagon *—*
 Physician *—*
 County or City Burial *—*
 Automobiles *—*
 Baggage or Express Train No. *—*

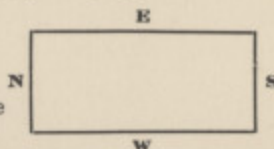
37.50

Carey Hand Funeral Home

Name of deceased Mrs. Alice De Garmo Smith
 Date of death June - 29 - 37
 Cause of death Myocardial infarction
 Place of death Res
 Residence Miami Fla
 Age 79 Y'rs Mo's Days
 Weight 130 Height 5 ft. 7 in. Eyes
 Funeral at Miami
 Date _____ 193____ M
 Account charged H. A. Combs
 Address Miami Fla
 Account guaranteed _____
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose Body Arrived
 Casket by Express 1125 AM
 Casket with Copper Lin. Tri July
 Style of Casket 2 - 1937
 No. of Casket _____
 Outside Box Body Cremated
 Shipping Case or Vault S & M
 Handles Sat - July 3 - 37
 Pillow Set _____
 Name Plate Ashes Expressed to
 Cemetery Combs F. Home
 Section 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 *Mrs Ellen M Evans*
 Date of death *July - 1 - 37 -*
 Cause of death *Myocardial Insufficiency*
 Place of death *Res*
 Residence *St Petersburg*
 Age *90* Y'rs *10* Mo's *5* Days
 Weight *100* Height *5* ft. in. Eyes *br*
 Funeral at *St Petersburg*
 Date *193* M
 Account charged *Condict 1. Herne*
 Address *St Petersburg*
 Account guaranteed *Ch*
 Address
 Embalming *Cremation* 32.50
 Robe, Suit, Dress
 Underwear and Hose *Body arrived*
 Casket *by auto Sat - 7-3-37*
 Casket with Copper Lin. *2 - P. M.*
 Style of Casket
 No. of Casket *Body cremated*
 Outside Box *3 - P. M. 7-3-37*
 Shipping Case or Vault
 Handles *will call in cash*
 Pillow Set
 Name Plate
 Cemetery
 Section Lot
 E
 I Other Graves
 X Grave on this date
 N S
 W
 Cremation
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician
 County or City Burial 37.50
 Automobiles
 Baggage or Express Train No.

Carey Hand Funeral Home

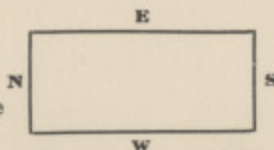
Poland City

Name of deceased _____
 Date of death *July 11 - 37*
 Cause of death _____
 Place of death *Res*
 Residence *Moody Turpin Co*
 Age _____ Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 193 _____ M
 Account charged *Moody Turpin Co*
 Address *Kenneth*
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3 Case*
 Casket with Copper Lin. _____
 Style of Casket *Spr. A. 7m*
 No. of Casket *Chaired by cloth*
 Outside Box _____
 Shipping Case or Vault *Box*
 Handles *Case done thru own*
 Pillow Set *only*
 Name Plate *do not have*
 Cemetery *Permit*
 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 _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

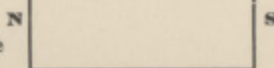
14.50

Carey Hand Funeral Home

Name of deceased *Mr Geo E. Sherman*
 Date of death *July - 2 - 37*
 Cause of death *Myelogenic Leukemia*
 Place of death *Red*
 Residence *Sarasota*
 Age *61* Y'rs *9* Mo's *8* Days
 Weight *150* Height *5* ft. *8* in. Eyes
 Funeral at *Sarasota*
 Date *1937* M
 Account charged *Thacker & Van Gelder*
 Address *Sarasota*
 Account guaranteed
 Address
 Embalming *Cremation* *37.50*
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. *Body Amrit*
 Style of Casket *Express*
 No. of Casket *6024 76*
 Outside Box *Ins - inner*
 Shipping Case or Vault *July - 6 - 37*
 Handles
 Pillow Set *Body Cremated*
 Name Plate *9-9 Mr*
 Cemetery *7-6-37*
 Section Lot

I Other Graves

X Grave on this date



Cremation *Ashes Expressed To*

Single Grave *Thacker & Van Gelder*

Opening and Closing Grave *Sarasota*

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 Matthews.
 Date of death July 2
 Cause of death Astero Sclerosis
 Place of death St Petersburg. Fla.
 Residence New York City.
 Age 81 Yrs Mo's _____ Days _____
 Weight 180 Height 6 ft. 3 in. Eyes Blue
 Funeral at St Petersburg. Fla.
 Date July 1937 M
 Account charged Baynard Co.
 Address St Petersburg. 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 4 and Tuesday
 Outside Box PA 15 P. M.
 Shipping Case or Vault July 6 - 1937
 Handles _____
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery Tuesday 11:30 a.m.
 Section July 6 - 37 Lot _____

I Other Graves

X Grave on this date

N

S

W

Cremation Expressed Ashes to
 Single Grave Miss Dorothy Matthews
 Opening and Closing Grave 128 - East
 Body Shipped to 208 St New York
 R. R. Ticket City, N.Y.
 Cash advanced apx 30
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$ 37.50

Carey Hand Funeral Home

Name of deceased Alton W. Jones.
 Date of death July 3rd
 Cause of death Pulmonary Tuberculosis
 Place of death St Petersburg Fla.
 Residence St Petersburg. Fla.
 Age 44 Y'rs 10 Mo's _____ Days _____
 Weight 100 Height 6 ft. 10 in. Eyes Blue
 Funeral at St Petersburg Fla.
 Date July 1937 M
 Account charged Baynard and Co-
 Address St Petersburg, Fla.
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress Body arrived
 Underwear and Hose Tuesday
 Casket Arrived 11:15 a.m.
 Casket with Copper Lin. July 6-37
 Style of Casket _____
 No. of Casket _____
 Outside Box Body Cremated
 Shipping Case or Vault 2 P. m.
 Handles Tuesday July 6-37
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N S
 W
 Cremation Ashes expressed to
 Single Grave Baynard and 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. _____

3750

Carey Hand Funeral Home

Name of deceased *Mr Geo Berry*
 Date of death *July - 1 - 37*
 Cause of death
 Place of death *Intestinal Obstruction*
 Residence *St Petersburg*
 Age *78* Y'rs *11* Mo's *2* Days
 Weight *140* Height *5 ft. 4* in. Eyes
 Funeral at *St Petersburg*
 Date *1937* M
 Account charged *Ralph & Cooksey*
 Address
 Account guaranteed *OK - 500 & 1000*
 Address
 Embalming *Cremation* *37.50*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *Body Cover*
 Casket with Copper Lin. *by auto*
 Style of Casket *830 R M*
 No. of Casket *Tues July 6 - 37*
 Outside Box
 Shipping Case or Vault *Body*
 Handles *Cremated 9-9 M*
 Pillow Set *Wed July - 7 - 37*
 Name Plate *Express ash*
 Cemetery *Ralph & Cooksey*
 Section *St Petersburg* Lot *74*
 Haddon Box
 I Other Graves
 X Grave on this date
 Cremation
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

N

S

W

37.50

Carey Hand Funeral Home

Name of deceased *Ira Conner*
 Date of death *Tues July - 6 - 37 -*
 Cause of death _____
 Place of death *Res*
 Residence *Tonawanda N.Y.*
 Age *77* Y'rs *—* Mo's *18* Days _____
 Weight *145* Height *5* ft. *7* in. Eyes _____
 Funeral at *Res*
 Date *Tonawanda 7-11* 193*7* *3 P* M
 Account charged *Estate*
 Address *Mrs W. C. Stephen*
 Account guaranteed _____
 Address _____
 Embalming *& Dressing* 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-3-Gr-Cup* 125.00
 Casket with Copper Lin. _____
 Style of Casket *Oct. H. G.*
 No. of Casket *123-Jet*
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *Ext*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Tonawanda*
 Section _____ Lot _____

E
 N S
 W

 I Other Graves _____
 X Grave on this date _____
 Cremation *Music* 10.00
 Single Grave *Auto Min* 5.00
 Opening and Closing Grave *Hete* 15.00
 Body Shipped to *To Immola* 5.00
 R. R. Ticket _____
 Cash advanced *RR Nashville* 11.45
 Telegram *Telephone L & D* 1.00
 Minister *Rev B. Lee Smith*
 Casket Wagon *C. H.* 10.00
 Physician *Dr. Ginn Int. Dora*
 County or City Burial _____
 Automobiles *3 + 3* 15.00
 Baggage or Express Train No. 232.45

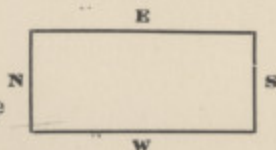
Carey Hand Funeral Home

Name of deceased *Infant of Mr & Mrs Wm Smith*
 Date of death *July 7-1937* *4-4 M*
 Cause of death *Still Born*
 Place of death *Res*
 Residence *Grave Hill Court*
 Age *✓* Y's *—* Mo's *—* Days *—*
 Weight *—* Height *—* ft. *—* in. Eyes *—*
 Funeral at *—*
 Date *—* 1937 *—* M
 Account charged *P. H. Smart*
 Address *115 Glen St. Orlando*
 Account guaranteed *Cash*
 Address *—*
 Embalming *Cumulative*
 Robe, Suit, Dress *—*
 Underwear and Hose *—*
 Casket *—*
 Casket with Copper Lin. *—*
 Style of Casket *—*
 No. of Casket *Body Cremated*
 Outside Box *11 a pm 7-737*
 Shipping Case or Vault *—*
 Handles *—*
 Pillow Set *Will call for*
 Name Plate *Ashes. If not*
 Cemetery *will scatter*
 Section *—* Lot *—*

5.00

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

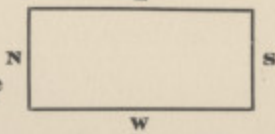
Automobiles

Baggage or Express Train No.

5.00

Carey Hand Funeral Home

Name of deceased Baby Botz's
 Date of death July 7 - 37
 Cause of death Still Born
 Place of death Res
 Residence 215 W. Concord
 Age Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at
 Date 1937 M
 Account charged Nick Botz's
 Address 215 W. Concord
 Account guaranteed
 Address
 Embalming Cremation \$5.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket Body Cremated
 No. of Casket 8 a.m. Thurs
 Outside Box July 8 - 37
 Shipping Case or Vault
 Handles
 Pillow Set Will call
 Name Plate for ashes
 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
 Automobiles
 Baggage or Express Train No.



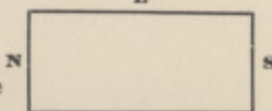
5.00

Carey Hand Funeral Home

Name of deceased Mabel C. Farber
 Date of death July 4 - 37
 Cause of death Cancer of Liver
 Place of death St Petersburg Fla
 Residence St Petersburg Fla
 Age 66 Y's 11 Mo's 4 Days 1
 Weight 120 Height 5 ft. 6 in. Eyes Blue
 Funeral at St Petersburg Fla
 Date July 1937 ^M
 Account charged Paynard and Co
 Address St Petersburg Fla
 Account guaranteed _____
 Address _____
 Embalming Cremation \$37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket by express
 Outside Box Wed 11:30 A.M.
 Shipping Case or Vault July 7-37
 Handles _____
 Pillow Set _____
 Name Plate Body cremated
 Cemetery S.A.M. Thurs
 Section July 8-37 Lot _____

I Other Graves

X Grave on this date



Cremation Express Ashes to -
 Single Grave Supt. San Francisco
 Opening and Closing Grave National
 Body Shipped to Cemetery
 R. R. Ticket Presidio of
 Cash advanced San Francisco
 Telegram California
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

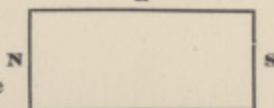
37.50

Cary Hand Funeral Home

Name of deceased Cora L. Westphal
 Date of death July 5 - 1937
 Cause of death Slippery
 Place of death Havenport Fla.
 Residence Havenport Fla.
 Age 59 Y'rs 5 Mo's 7 Days
 Weight 130 Height 5 ft. 3 in. Eyes Blue
 Funeral at Winter Haven Fla.
 Date July 7 193 7 P.M.
 Account charged Ware-Smith and B
 Address Winter Haven Fla.
 Account guaranteed _____
 Address _____
 Embalming Cremation \$ 37.50
 Robe, Suit, Dress _____
 Underwear and Hose Brny Und ^{25.00} \$ 22.50
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body removed
 No. of Casket 1
 Outside Box 5 P.M. Wed
 Shipping Case or Vault July 7-37
 Handles _____
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery 8 A.M. Tuesday
 Section July 8-37 Lot _____

I Other Graves

X Grave on this date



Cremation Ashes expressed to -
 Single Grave Oversgreen Cemetery
 Opening and Closing Grave Brooklyn
 Body Shipped to New York
 R. R. Ticket Bushwick Ave
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

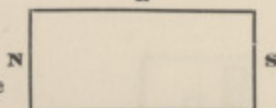
\$ 60.00

Carey Hand Funeral Home

Name of deceased Richard C. Halton
 Date of death July 7 - 1937
 Cause of death Encephalitis
 Place of death West Palm Beach Fla.
 Residence West Palm Beach Fla.
 Age 62 Y's 2 Mo's 28 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at West Palm Beach, Fla.
 Date July 1937 M
 Account charged Myell-Simon Mortuary
 Address West 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, Wed
 Outside Box 5:30 P. M.
 Shipping Case or Vault July 7-37
 Handles _____
 Pillow Set Body Cremated
 Name Plate 8 a.m. Thurs
 Cemetery July 8 - 1937
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation Expressed Ashes to
 Single Grave Myell-Simon
 Opening and Closing Grave Mortuary
 Body Shipped to West Palm Beach,
 R. R. Ticket Fla.

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician _____

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

\$ 37.50

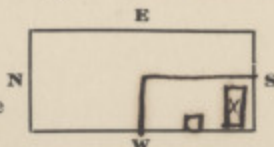
Carey Hand Funeral Home

Name of deceased *Miss Lucie Shaw*
 Date of death *Thurs July 8- 37- 8-A.M.*
 Cause of death *Apoplexy*
 Place of death *Res*
 Residence *413 1/2 - N. Fern Creek*
 Age *55* Yrs *5* Mo's *1* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date _____ 193 _____ M
 Account charged *Mr Chas H. Shaw*
 Address *413 1/2 N. Fern Creek*
 Account guaranteed *small insurance*
 Address _____
 Embalming *& Dressing*
 Robe, Suit, Dress *White*
 Underwear and Hose *✓*
 Casket *6-3- Dr Gr Rush*
 Casket with Copper Lin. *✓*
 Style of Casket *Oct 1/2 - P -*
 No. of Casket *1927 5-*
 Outside Box *Reg -*
 Shipping Case or Vault *✓*
 Handles *Ext -*
 Pillow Set *yes Lt Gr*
 Name Plate *✓*
 Cemetery *Greenwood*
 Section *U* S W 1/4 Lot *15*

35.00
15.00
175.00

I Other Graves

X Grave on this date



Cremation

Single Grave

Opening and Closing Grave *T & etc*

Body Shipped to *Missie*

R. R. Ticket

Cash advanced *For R.R. Ticket*

Telegram

Minister *Rev*

Casket Wagon *C - W*

Physician *Dr Anderson*

County or City Burial

Automobiles *S & S*

Baggage or Express Train No.

15.00
5.00

5.00

15.00

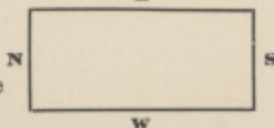
\$ 265.00

Carey Hand Funeral Home

Name of deceased *Chas Belknap*
 Date of death *Thurs July 8 - 37* *6 PM*
 Cause of death _____
 Place of death *Res*
 Residence *Gotha*
 Age *91* Y'rs *8* Mo's *5* Days _____
 Weight *125* Height *5* ft. *6* in. Eyes _____
 Funeral at *Chapel*
 Date *Sat July 10* 193*7* *3 PM*
 Account charged *Agua Belknap*
 Address *Gotha Fla*
 Account guaranteed _____
 Address _____
 Embalming *Dressing*
 Robe, Suit, Dress *OK*
 Underwear and Hose *✓*
 Casket *6-3* *Gr Cup*
 Casket with Copper Lin. *✓*
 Style of Casket *Spr 7:5*
 No. of Casket *22-3-*
 Outside Box *Reg*
 Shipping Case or Vault *✓*
 Handles *Short*
 Pillow Set *✓*
 Name Plate _____
 Cemetery *Bulcan*
 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 *Morgan*

Casket Wagon *(1)* *5.00*

Physician *Dr E J Lawrence*

County or City Burial _____

Automobiles *S & S* *15.00*

Baggage or Express Train No. *81* *40.00*

Cash - 30.00

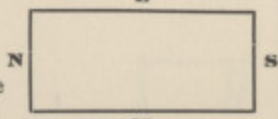
Bal Payments

Carey Hand Funeral Home

Name of deceased *Wm C. Leigh*
 Date of death *Fri July 9-37* 530 P.M.
 Cause of death _____
 Place of death *Mable Clark Home*
 Residence *920-28-57 Angelt*
 Age *86* Y's *4* Mo's *12* Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Sunday July 11 1937* 5 P.M.
 Account charged *Benj Leigh*
 Address *920-28-57 Angelt*
 Account guaranteed _____
 Address _____

Embalming *+ Dressing* 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-3-Gr An X-4* 40.00
 Casket with Copper Lin. ☒
 Style of Casket *Oct 7*
 No. of Casket ☒
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles *Oct*
 Pillow Set *yes*
 Name Plate ☒
 Cemetery *Cumtarian*
 Section _____ Lot _____

I Other Graves ☐
 X Grave on this date ☐



Cremation *Cumtarian* 50.00
 Single Grave *C-yr Masonic* 10.00
 Opening and Closing Grave *Body*
 Body Shipped to *Cumtarian*
 R. R. Ticket *9 A.M. Monday*
 Cash advanced *7-12-37*
 Telegram *ashes Buried F. Plot*
 Minister *Greenwood Cemetery*
 Casket Wagon *C H -* 5.00
 Physician _____
 County or City Burial _____
 Automobiles *Complete Service* \$140.00
 Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased *Dr. Edward Milton Overton*
 Date of death *Sat. July - 10 - 11:5 AM*
 Cause of death _____
 Place of death *Res*
 Residence *732 Lucern Terrace*
 Age *35* Yrs *4* Mo's *24* Days
 Weight *175* Height *5* ft. *8* in. Eyes _____
 Funeral at *Cap Church*
 Date *Mon July - 12 - 1932* *11-A* M
 Account charged *Mrs Etha L Overton*
 Address *732 Lucern Terrace*
 Account guaranteed *Est + Insurance*
 Address _____
 Embalming *+ Dressing* 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket *6-3 Metal* 295.00
 Casket with Copper Lin. ✓
 Style of Casket *State N. e*
 No. of Casket *232 Belmont*
 Outside Box ✓
 Shipping Case or Vault *am Sial* *Perfect* 75.00
 Handles *Ext*
 Pillow Set *yes*
 Name Plate ✓
 Cemetery *Greenwood*
 Section *S- SW 1/4* Lot *74*
 I Other Graves _____
 X Grave on this date _____
 Cremation *P. B. Car* 5.00
 Single Grave *Car Min* 5.00
 Opening and Closing Grave *etc* 15.00
 Body Shipped to ✓
 R. R. Ticket ✓
 Cash advanced *Burial Lot* 56.25
 Telegram _____
 Minister *Bishop. Wing - Thompson*
 Casket Wagon *1st* 5.00
 Physician *Dr. Duncan McEwen*
 County or City Burial _____
 Automobiles *S & S* 15.00
 Baggage or Express Train No. *506* 35

Carey Hand Funeral Home

Name of deceased Lewis J. Horton
 Date of death July - 10 - 32 - 5:35 PM
 Cause of death _____
 Place of death Res
 Residence Olando RFD-4 - Near Flamingo
 Age 16 Y'rs 3 Mo's 19 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sun July - 11 - 1932 3:30 P.M.
 Account charged Gen Horton
 Address Olando RFD-4 -
 Account guaranteed Small insurance
 Address _____
 Embalming Dressing 25.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Gr-Top 95.00
 Casket with Copper Lin. ☒
 Style of Casket Oct H. e
 No. of Casket 1972 - Tampa
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Short
 Pillow Set yes
 Name Plate ☒
 Cemetery Greenwood
 Section H N-W 1/4 Lot 219
 Below Todd E
 I Other Graves S
 X Grave on this date N

Soul to Oden Todd	Soul to Kimb
----------------------	-----------------

Cremation Burial Lot 20.00
 Single Grave _____
 Opening and Closing Grave Teale 15.00
 Body Shipped to Muse 5.00
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev Chitty 5.00
 Casket Wagon (1)
 Physician Dr Redding
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. 18000

Carey Hand Funeral Home

Name of deceased Miss Ethel Grace Nicholson
 Date of death July
 Cause of death Cancer Right Breast
 Place of death Res
 Residence West Palm Beach
 Age 51 Y'rs 11 Mo's 5 Days
 Weight 150 Height 5 ft. 2 in. Eyes
 Funeral at W. H. Beach
 Date _____ 193__ M
 Account charged C. Ferguson T. Home
 Address West Palm Beach
 Account guaranteed Yes
 Address _____
 Embalming Cremation 32.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body Furn.
 Casket with Copper Lin. by Express
 Style of Casket 1125 Oak
 No. of Casket Sun July-10-37
 Outside Box _____
 Shipping Case or Vault Body
 Handles Cremated 4 P. M.
 Pillow Set Sun 7-11-37
 Name Plate _____
 Cemetery Ashes Del Fr
 Section The Mother Lot
7-12-37 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 32.50
 Automobiles _____
 Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased Britten Edward Byrd
 Date of death July - 9 - 37
 Cause of death apoplexy
 Place of death Res
 Residence Wt Landendale
 Age 76 Y'rs 4 Mo's 3 Days
 Weight 150 Height 6 ft. — in. Eyes
 Funeral at Wt Landendale

Date 1937 M
 Account charged Fanning F. Home
 Address Wt Landendale Fla
 Account guaranteed OK

Address
 Embalming Cumation 37.50

Robe, Suit, Dress
 Underwear and Hose

Casket
 Casket with Copper Lining Body Arrived

Style of Casket by Express
 No. of Casket Tues July - 13 - 37

Outside Box 1125 - W. M.
 Shipping Case or Vault

Handles Body Cumated
 Pillow Set Tues July - 13 - 37

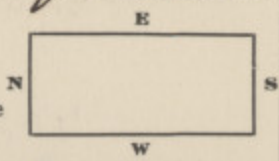
Name Plate 1230 P. M.
 Cemetery

Section Will Call for Lashes

wooden Box

I Other Graves

X Grave on this date



Cremation

Single Grave

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister

Casket Wagon

Physician

County or City Burial

Automobiles

Baggage or Express Train No.

37.50

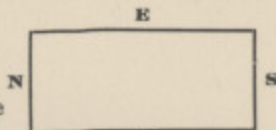
Carey Hand Funeral Home

Name of deceased *Mr H. M. Holmes*
 Date of death *Tues July 13 - 37 7PM*
 Cause of death _____
 Place of death *Res*
 Residence *Muritt Park*
 Age *72* Y's *✓* Mo's *27* Days _____
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at *Chapel F. Home*
 Date *Thurs July 15 - 1937 11 A.M*
 Account charged *Mrs H. Todd*
 Address *Mrs H. Todd*
 Account guaranteed *Estate*
 Address _____

Embalming & *Dressing* *35.00*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3 Gr. Bd. P-* *270.00*
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box *Reg*
 Shipping Case or Vault *✓*
 Handles *Ext -*
 Pillow Set *yes w*
 Name Plate _____
 Cemetery *Woodlawn*
 Section *D -* Lot *294*

I Other Graves

X Grave on this date



Cremation *P. B. Car* *5.00*
 Single Grave *Car min* *5.00*
 Opening and Closing Grave *T + etc* *15.00*
 Body Shipped to *Muritt* *5.00*
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon *(H)* *5.00*
 Physician _____
 County or City Burial _____
 Automobiles *S & S* *15.00*
 Baggage or Express Train No. _____

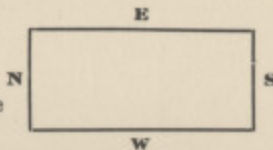
\$355.00

Carey Hand Funeral Home

Name of deceased Mary W. Wood
 Date of death July 10 - 1937
 Cause of death Myocarditis - Arterio Sclerosis
 Place of death Morristown New York
 Residence _____
 Age 84 Y'rs 1 Mo's 12 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 193 _____ M
 Account charged _____
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box Vault
 Shipping Case or Vault _____
 Handles Body arrived by
 Pillow Set Express 11:25 P.M. on
 Name Plate Wed July 14-37
 Cemetery Greenwood
 Section G, A, R. Lot _____

I Other Graves _____

X Grave on this date _____



Cremation _____

Single Grave _____

Opening and Closing Grave Tent & Velv 15.00

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon (1) 5.00

Physician At Morristown N.Y.

County or City Burial _____

Automobiles S & S 15.00

Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased *Ezra Marwin Cooper*
 Date of death *July 9-1937*
 Cause of death *Hypertension*
 Place of death *St Petersburg Fla*
 Residence *St Petersburg, Fla.*
 Age *81* Y'rs *8* Mo's *3* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *St Petersburg Fla*
 Date *July* 1937 *M*
 Account charged *Ralph G. Cooksey and Co*
 Address *St Petersburg, 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 Auto Wed*
 Outside Box *Night 12:30*
 Shipping Case or Vault *July 15-37*
 Handles _____
 Pillow Set _____
 Name Plate *Body Cremated*
 Cemetery *8:30 a.m. Thurs*
 Section *July 15-37* Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N _____ S _____
 W
 Cremation *Ashes expressed*
 Single Grave *to - Ralph G.*
 Opening and Closing Grave *Cooksey*
 Body Shipped to *T. Home*
 R. R. Ticket *St Petersburg*
 Cash advanced *Fla*
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

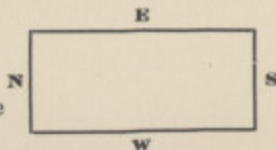
\$37.50

Carey Hand Funeral Home

Name of deceased *Mrs Ella Barr*
 Date of death *July-15-37- 5-AM*
 Cause of death _____
 Place of death *Res*
 Residence *Winter Park*
 Age *72* Yrs *9* Mo's *29* Days _____
 Weight *145* Height *5* ft. *6* in. Eyes _____
 Funeral at *Grave Side*
 Date *Tue July-16- 1937 530 P M*
 Account charged *Amos H. Barr*
 Address *Winter Park*
 Account guaranteed _____
 Address _____
 Embalming *& Dussing* *25.00*
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-3-1/2 Emb Lox* *95.00*
 Casket with Copper Lin. ☒
 Style of Casket *Oct N. C.*
 No. of Casket *123- Jet-*
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *that*
 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 *T & etc* *15.00*

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon *(1)* *5.00*

Physician _____

County or City Burial _____

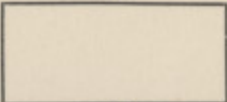
Automobiles *S & S* *15.00*

Baggage or Express Train *music* *155.00*

Cash - 30.00 *5.00*

Per mo 20.00 *\$160.00*

Carey Hand Funeral Home

Name of deceased *Barbara Ann Brooks*
 Date of death *Sat July 17- 12 15 PM*
 Cause of death *O. G. H.*
 Place of death *O. G. H.*
 Residence *1023 - Grand ave*
 Age *3* Y's *4* Mo's *20* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Sun July 18 1937* *4 P. M*
 Account charged *C. E Brooks*
 Address *1023 Grand ave*
 Account guaranteed *Payments*
 Address _____
 Embalming *Care of Body* *15 00*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *Service Chy* *15 00*
 Casket with Copper Lin. _____
 Style of Casket *Body Cremated*
 No. of Casket *9-a. M. Mon 7-19-37*
 Outside Box *will call for ashes*
 Shipping Case or Vault _____
 Handles _____
 Pillow Set *Body Posted*
 Name Plate *In Spine In Memory*
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves 
 X Grave on this date _____
 Cremation *Cremation* *15 00*
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister *Rev Smoeth*
 Casket Wagon _____
 Physician *Dr Sinclair*
 County or City Burial _____
 Automobiles _____ *45 00*
 Baggage or Express Train No. _____
Cash 5 00
Cash 5 00
Family Very Poor

Carey Hand Funeral Home

Name of deceased Henry Sticht
 Date of death Sun Jun 18-37 7:30 PM
 Cause of death Res
 Place of death Res
 Residence Opoka R.F.D. 1
 Age 77 Y'rs 2 Mo's 19 Days
 Weight 140 Height 5 ft. 10 in. Eyes
 Funeral at Chapel
 Date Tues July - 20 1937 3 P.M.
 Account charged Otto Sticht
 Address Opoka R.F.D. 1
 Account guaranteed Insurance
 Address Quinsing
 Embalming Yes 35.00
 Robe, Suit, Dress
 Underwear and Hosiery
 Casket 6-3 Sew Chg 60.00
 Casket with Copper Lin.
 Style of Casket Oct H e
 No. of Casket 1922-1
 Outside Box
 Shipping Case or Vault ☒
 Handles that
 Pillow Set yes
 Name Plate
 Cemetery Cremation
 Section _____ Lot _____
 E
 I Other Graves
 X Grave on this date
 W
 Cremation Cremation 58.00
 Single Grave
 Opening and Closing Grave Body
 Body Shipped to Cremated 9-AM
 R. R. Ticket Wed July - 21-37
 Cash advanced
 Telegram will call for ashes
 Minister E. Lee Smith 5.00
 Casket Wagon (1)
 Physician Dr. Samsel (Opoka)
 County or City Burial
 Automobiles \$ 150.00
 Baggage or Express Train No.

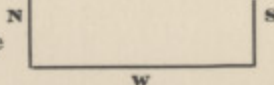
Carey Hand Funeral Home

Name of deceased *Miss Ella Louise Hixons*
 Date of death *July-19-37*
 Cause of death *abscess of Lung*
 Place of death *Res*
 Residence *Tampa Fla*
 Age *74* Y'rs *1* Mo's *21* Days
 Weight *110* Height *5 ft. 5* in. Eyes
 Funeral at *Tampa*
 Date *July 19-37* 193 *M*
 Account charged *J. L. Reed & Son*
 Address *Tampa*
 Account guaranteed *OK*
 Address
 Embalming *Cremation*
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. *Body*
 Style of Casket *Simple*
 No. of Casket *Auto 3-P.M.*
 Outside Box *new July-19-37*
 Shipping Case or Vault
 Handles *Body Cremated*
 Pillow Set *3:30 P.M. 7-19-37*
 Name Plate
 Cemetery *Ashes Expended to*
 Section *J. L. Reed & Son* Lot *Tampa Fla*

I Other Graves

X Grave on this date

wooden box



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

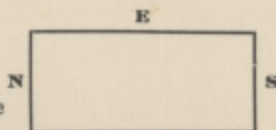
Name of deceased Mrs Sophie E Roe
 Date of death July - 18 - 37
 Cause of death Arterial Sclerosis
 Place of death Res
 Residence Clement Ala
 Age 73 Y'rs 10 Mo's 6 Days
 Weight 75 Height 4 ft. 5 in. Eyes Blue
 Funeral at Clement
 Date Mon July 19 - 1937 M
 Account charged Edge Funeral Home
 Address Graveland
 Account guaranteed OK
 Address
 Embalming Cumation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket Body Guard
 Casket with Copper Lin. by Auto
 Style of Casket 4 P. H. Mon 7-19-37
 No. of Casket
 Outside Box Body Cumated
 Shipping Case or Vault 5 P. H.
 Handles 5-P. H. 7-19-37
 Pillow Set
 Name Plate Will call for Ashes
 Cemetery
 Section _____ Lot _____
 E
 I Other Graves
 X Grave on this date
 N S
 W
 Cremation
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No. 37.50

Carey Hand Funeral Home

Name of deceased *Elizabeth T. Glrod*
 Date of death *July 12 - 37*
 Cause of death *Suicide - jumping out 10 story*
 Place of death *St Petersburg, Fla* *Widow*
 Residence *Atlanta, Ga.*
 Age *28* Y'rs *8* Mo's *4* Days
 Weight *130* Height *5* ft. *6* in. Eyes *Brown*
 Funeral at *St Petersburg, Fla*
 Date *July* 1937 *M*
 Account charged *Baynard Und Co.*
 Address *St Petersburg, Fla.*
 Account guaranteed _____
 Address _____
 Embalming *Examination.* \$37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket *Body arrived*
 No. of Casket *Express 3:20 P.M.*
 Outside Box *Tuesday July 20-37*
 Shipping Case or Vault _____
 Handles _____
 Pillow Set *Body cremated*
 Name Plate *4:30 P.M. Tuesday*
 Cemetery *July 20-1937*
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation *Express Ashes to -*
 Single Grave *J. M. Barry & Co.*
 Opening and Closing Grave *Charlotte*
 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. _____

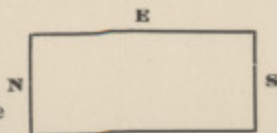
\$37.50

Carry Hand Funeral Home

Name of deceased Olin P. Brown
 Date of death July 20 1937
 Cause of death Cerebral Hemorrhage
 Place of death Lakeland Fla.
 Residence Lakeland Fla.
 Age _____ Y'rs _____ Mo's _____ Days _____
 Weight 140 Height 6 ft. _____ in. Eyes Blue
 Funeral at Lakeland Fla
 Date July 1937 7 M
 Account charged Smith & Luke Mfg Co
 Address Lakeland Fla.
 Account guaranteed Check
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body Arrived
 No. of Casket by Auto Wed
 Outside Box 12:30 P.M.
 Shipping Case or Vault July 21-37
 Handles _____
 Pillow Set Body Cremated
 Name Plate 1:45 P.M. Wed
 Cemetery July 21-1937
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation Express Ashes to
 Single Grave Smith & Luke
 Opening and Closing Grave F. Home
 Body Shipped to Lakeland Fla
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

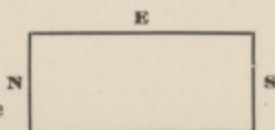
37.50

Carey Hand Funeral Home

Name of deceased William J. Owens
 Date of death July 21-1937
 Cause of death Gunsot wound of Abdomen
 Place of death Lakeland Fla.
 Residence First prof. Fla.
 Age 16 Y'rs 11 Mo's 4 Days 4
 Weight 165 Height 5 ft. in. Eyes Blue
 Funeral at Lakeland. Fla
 Date Wed. July 21 1937 a. M
 Account charged Stephenson F. Home
 Address Sebring. 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 3:15 P. M.
 Outside Box Wed- July 21-1937
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body cremated
 Name Plate Wed 4 P. M.
 Cemetery July 21-1937
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation Expressed Ashes

Single Grave Stephenson

Opening and Closing Grave F. Home

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

Carry Hand Funeral Home

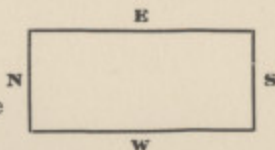
1937

Name of deceased Baby Buchanan
 Date of death July 21 - 2 P.M.
 Cause of death _____
 Place of death Residence
 Residence Crystal Lake Drive
 Age Yrs Mo's Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date Burial July 22 1937 10:30 A.M.
 Account charged Arthur F. Buchanan
 Address Crystal Lake Drive
 Account guaranteed _____

Address _____
 Embalming Care of body. 2.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2/8 W. H. M. & Son 10.00
 Casket with Copper Lin. _____
 Style of Casket Spr.
 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 Baby Grave 3.50
 Opening and Closing Grave etc 2.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram Auto 2.00
 Minister _____
 Casket Wagon _____
 Physician Dr. Andrews
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$19.50

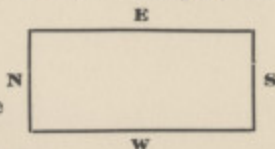
Carey Hand Funeral Home

Name of deceased *William H. Stewart.*
 Date of death *July 21* *2 P.M.*
 Cause of death *Coronary Thrombosis.*
 Place of death *In his store at Plymouth Fla*
 Residence *Plymouth, Fla.*
 Age *44* Yrs *4* Mo's *7* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Graveside - Apoka*
 Date *Friday July 22 1937* *4 P.M.*
 Account charged *Mrs Wm H. Stewart.*
 Address *Plymouth, Fla*
 Account guaranteed *Citico*

Address _____
 Embalming ☒ *Dressing* 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *1/2 Grey Cloth* 185.00
 Casket with Copper Lin. _____
 Style of Casket *State H. Cap.*
 No. of Casket *310* *J. City*
 Outside Box *Reg*
 Shipping Case or Vault _____
 Handles *Ext.*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Edgewood - Apoka*
 Section _____ Lot *18*

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 *J. W. Ashworth* 10.00

Casket Wagon *To Res.*

Physician *Dr. Hanzel*

County or City Burial

Automobiles *S + S* 15.00

Baggage or Express Train No. 260.00

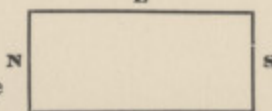
Wm H. W. Set

Carey Hand Funeral Home

Name of deceased *Mrs Celeste Fripp*
 Date of death *July 19*
 Cause of death *Nephritis*
 Place of death *Miami Fla Hospital*
 Residence *Coral Gables Fla*
 Age *75* Y'rs *4* Mo's *20* Days
 Weight *110* Height *5* ft. *6* in. Eyes
 Funeral at *Kissimmee Fla*
 Date *Wed July 21 1937* *4 P. M*
 Account charged *W. H. Combs and 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 auto Wed*
 Outside Box *5:15 P. M.*
 Shipping Case or Vault *July 21-37*
 Handles
 Pillow Set
 Name Plate *Body Cremated*
 Cemetery *Wed 5:30 P. M.*
 Section *July 21 - Lot 37*

I Other Graves

X Grave on this date



Cremation *Ashes expressed to*
 Single Grave *Grisson F. Home*
 Opening and Closing Grave *Kissimmee*
 Body Shipped to *Fla*

R. R. Ticket

Cash advanced *Mrs Fripp died in*
 Telegram *Miami Fla and was*
 Minister *expressed to Kissimmee*
 Casket Wagon *Fla for Funeral*
 Physician *Services - Grisson*
 County or City Burial *F/home brought the*
 Automobiles *body to Calais for*
 Baggage or Express Train No. *Cremation*

July 21-1937

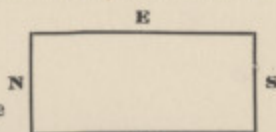
\$37.50

Carey Hand Funeral Home

Name of deceased Leonard J. Shelly
 Date of death July 21 - 37
 Cause of death Carcinoma
 Place of death Miami Fla.
 Residence Coral Gables Fla.
 Age 81 Y'rs 9 Mo's 13 Days
 Weight 100 Height 5 ft. 8 in. Eyes Grey
 Funeral at Miami Fla.
 Date July 1937 M
 Account charged W. H. Combs Ind. 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
 Outside Box Thurs 11:25 a.m.
 Shipping Case or Vault July 22-37
 Handles _____
 Pillow Set _____
 Name Plate Body cremated
 Cemetery 2:30 P.m. Thurs
 Section July 22-37 Lot _____

I Other Graves

X Grave on this date



Cremation Ashes expressed to
 Single Grave W. H. Combs Ind. Co.
 Opening and Closing Grave Miami Fla.
 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 *Infant of Albert M Johnson*
 Date of death *Fri July 23-37* *P.M.*
 Cause of death *O.G.H. Premature Infant*
 Place of death *O.G.H.*
 Residence *807 - West Stetson*
 Age *✓* Y's *✓* Mo's *—* Days *—*
 Weight *—* Height *—* ft. *—* in. Eyes *—*
 Funeral at *home only & chapel*
 Date *Sat July 24 1937* *4 P.M.*
 Account charged *Albert M Johnson*
 Address *807 - West Stetson*
 Account guaranteed *—*
 Address *—*
 Embalming *Care of Body etc* *\$5.00*
 Robe, Suit, Dress *—*
 Underwear and Hose *—*
 Casket *Cremation*
 Casket with Copper Lin. *—*
 Style of Casket *—*
 No. of Casket *—*
 Outside Box *—*
 Shipping Case or Vault *—*
 Handles *—*
 Pillow Set *—*
 Name Plate *—*
 Cemetery *Cremation*
 Section *—* Lot *—*
 I Other Graves *—*
 X Grave on this date *—*
 Cremation *Cremation* *10.00*
 Single Grave *—*
 Opening and Closing Grave *—*
 Body Shipped to *Body cremated*
 R. R. Ticket *Sat 4:30 P.M.*
 Cash advanced *July 24-37*
 Telegram *—*
 Minister *Dr Adcock*
 Casket Wagon *—*
 Physician *Dr Hoffman*
 County or City Burial *—*
 Automobiles *—*
 Baggage or Express Train No. *15.00*

Carey Hand Funeral Home

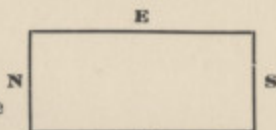
Name of deceased James H. Keene
 Date of death Sat July-24-37 130 P.M.
 Cause of death Primary Thrombosis
 Place of death in store at Pine Castle
 Residence Pine Castle Fla
 Age 77 Y'rs 3 Mo's 7 Days
 Weight 160 Height 5 ft. 8 in. Eyes
 Funeral at Deaf
 Date June 26 1937 P.M.
 Account charged J. H. Keene
 Address 129-130 Lloyd Bld - Miami Fla
 Account guaranteed ok
 Address
 Embalming Dressing 35.00
 Robe, Suit, Dress Blue Sing 15.00
 Underwear and Hose 1.50
 Casket 6-6 Metal 275.00
 Casket with Copper Lin. ✓
 Style of Casket State 1-1
 No. of Casket Nat 245-M
 Outside Box ✓ Amount Vault
 Shipping Case or Vault at Deaf
 Handles Ext
 Pillow Set yes
 Name Plate ✓
 Cemetery Madee Ga
 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 (1) 5.00
 Physician Dr. H. H. Hanner
 County or City Burial _____
 Automobiles Call Car & Truck 75.00
 Baggage or Express Train No. _____
406.50

Carey Hand Funeral Home

Name of deceased Frank Edward Mason
 Date of death July-24-37
 Cause of death Cerebral Hemorrhage
 Place of death Jephryhills Fla
 Residence Stons Conn
 Age 27 Y'rs Mo's _____ Days _____
 Weight 125 Height 5 ft. 1 in. Eyes _____
 Funeral at Jephryhills
 Date _____ 1937 M _____
 Account charged J. H. Lan
 Address T. S. Jephryhills
 Account guaranteed Ch
 Address _____
 Embalming Cremation 37, 50
 Robe, Suit, Dress _____
 Underwear and Hose Spr Brnng Lin 25, 00
 Casket _____
 Casket with Copper Lin. Nonne Eng
 Style of Casket _____
 No. of Casket Body moved by
 Outside Box auto 11-a m
 Shipping Case or Vault San July-25-37
 Handles _____
 Pillow Set Body cremated
 Name Plate San July-25-37
 Cemetery 11:30 a m
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation ashes Expressed to
 Single Grave Mrs Frank E. Mason
 Opening and Closing Grave Stons
 Body Shipped to Conn.
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$ 62.50

Carey Hand Funeral Home

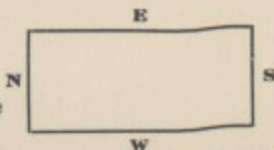
Name of deceased Richard S. Fanchet
 Date of death Sun July - 25 - 37 - 930 PM
 Cause of death Carcinemia of Caecum
 Place of death Res -
 Residence 413 - Son Rosalir
 Age Yrs Mo's Days
 Weight 135 Height 5 ft. 7 in. Eyes
 Funeral at Chapel
 Date Tues July - 27 - 1937 4 PM
 Account charged Mrs R. S. Fanchet
 Address 413 - Son Rosalir
 Account guaranteed
 Address
 Embalming & Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hosiery ✓
 Casket 6-1 - Son Chg 50.00
 Casket with Copper Lin. ✓
 Style of Casket Oct H. C. Gr. Exp
 No. of Casket 1972 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 Cumation 50.00
 Single Grave
 Opening and Closing Grave Minister 10.00
 Body Shipped to
 R. R. Ticket
 Cash advanced Auto No Chg -
 Telegram
 Minister Fred Turner 5.00
 Casket Wagon ✓
 Physician Dr. D. McEwen
 County or City Burial
 Automobiles 150.00
 Baggage or Express Train No.
200F Service after the other
Service Body cremated
9-9 AM Wed - 7-28-37 -
ashes to be scattered over Ocean

Curry Hand Funeral Home

Name of deceased Charles Reed
 Date of death July 26
 Cause of death Gun shot wound self inflicted
 Place of death Rockledge Fla
 Residence Rockledge Fla
 Age 38 Y'rs 3 Mo's 20 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Rockledge Fla
 Date Tues - July 27 1937 9. M
 Account charged Kron Funeral Home
 Address Cocoa Fla
 Account guaranteed Check
 Address _____
 Embalming Columbian \$ 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket by Auto Tuesday
 Outside Box 12:45 P.M.
 Shipping Case or Vault July 27-37
 Handles _____
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery 7:30 A.M. Wed
 Section July 28-37 Lot _____

I Other Graves

X Grave on this date



Cremation Ashes exposed to
 Single Grave N. Sampson
 Opening and Closing Grave F. Home
 Body Shipped to 537 Newell St
 R. R. Ticket Pittsburg, Pa.
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

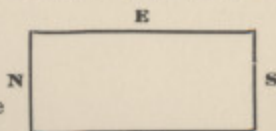
\$37.50

Carey Hand Funeral Home

Name of deceased *Walter T. Gunn*
 Date of death *July 28* 3:00 PM
 Cause of death *Pneumonia* 8 mos
 Place of death *Residence*
 Residence *Apopka Fla.*
 Age *Yrs* *Mo's* *2* Days
 Weight *Height* ft. in. Eyes
 Funeral at *Graveside* P. M.
 Date *Wed July 28* 1937
 Account charged *Warren J. Gunn*
 Address *Apopka Fla.*
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket *2-0* *H L*
 Casket with Copper Lin.
 Style of Casket *Sgt N M*
 No. of Casket
 Outside Box *Reg*
 Shipping Case or Vault
 Handles *small*
 Pillow Set
 Name Plate
 Cemetery *Bay Ridge Cemetery*
 Section Lot

I Other Graves

X Grave on this date



Cremation *Bought Casket Done*

Single Grave *their own work*

Opening and Closing Grave

Body Shipped to *Have Permitt*

R. R. Ticket *for same*

Cash advanced

Telegram

Minister

Casket Wagon

Physician *Lt. M. Bude*

County or City Burial

Automobiles

Baggage or Express Train No.

10.00

10.00

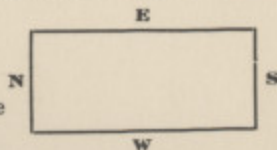
Carry Hand Funeral Home

Name of deceased Talullah A. Williams
 Date of death July 28 6:15 a.m.
 Cause of death Bitatrel Broncho Pneumonia
 Place of death Residence
 Residence 665 Jackson St. Winter Park
 Age 73 Yrs 1 Mo's — Days 6 4
 Weight 135 Height 5 ft. 6 in. Eyes —
 Funeral at Graveside
 Date Thurs July 29 193 7 4 P. M
 Account charged Jasper Williams
 Address Winter Park Fla
 Account guaranteed —

Address —
 Embalming Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 Gr Embl Doe 95.00
 Casket with Copper Lin. ☒
 Style of Casket Get St. C
 No. of Casket 123 Get C
 Outside Box Rkg
 Shipping Case or Vault ☒
 Handles —
 Pillow Set yes
 Name Plate at Rest
 Cemetery Shady Cemetery
 Section — Lot —

I Other Graves

X Grave on this date



Cremation

Single Grave

Opening and Closing Grave 4 etc 15.00

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister Rev Sellers

Casket Wagon

Physician Dr. B.F. Hart

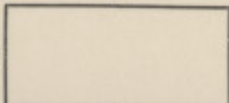
County or City Burial

Automobiles SYS 15.00

Baggage or Express Train No. 160 00

Has money Postal Savings

Carey Hand Funeral Home

Name of deceased Herbert Fitch
 Date of death July 25
 Cause of death Arterial fibrillation
 Place of death Miami Fla
 Residence _____
 Age 75 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Miami Fla
 Date July 193 7 M
 Account charged Gautier F. 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 Body Assured
 No. of Casket Express
 Outside Box Thurs 11:25 a.m.
 Shipping Case or Vault July 29-37
 Handles _____
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N  S
 W
 Cremation Ases expressed to
 Single Grave Charles Mahaffy
 Opening and Closing Grave Bonerville
 Body Shipped to New York
 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 Anna Hirsch
 Date of death July 27
 Cause of death Myocardial Insufficiency
 Place of death Miami Fla
 Residence _____
 Age 72 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Miami Fla
 Date July 29 1937 M
 Account charged W. L. Philbrick F.H.
 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
 Outside Box 11:25 A.M. Thursday
 Shipping Case or Vault July 29-30
 Handles _____
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery _____
 Section _____ Lot _____

E

I Other Graves

E

N

S

W

X Grave on this date

Cremation Ashes expressed to

 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 *Salon Aeryig*
 Date of death *July - 28 -* 193 *1:15 PM*
 Cause of death *Myocardial Infarction*
 Place of death *at Woodmere T.B. Hospital*
 Residence *New York*
 Age *52* Yrs *8* Mo's *1* Days
 Weight *180* Height *5 ft. 6 in.* Eyes
 Funeral at *Dist*

Date _____ 193 *M*
 Account charged *Sigmund J. Aeryig*
 Address *New York 145-W. 30th St*
 Account guaranteed *OK*

Address _____
 Embalming & Dressing *35.00*
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket *6-3-5 in. cup* *100.*
 Casket with Copper Lin. ✓
 Style of Casket *Oct 9 T.*
 No. of Casket *1992 9*
 Outside Box *Reg*
 Shipping Case or Vault ✓
 Handles *Ext*
 Pillow Set *yes*
 Name Plate ✓
 Cemetery *Int Hope Cemetery*
 Section *Hastings N.Y. Westchester Co*

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

Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *New York*
 R. R. Ticket *Dist*
 Cash advanced *Dist*
 Telegram _____
 Minister _____
 Casket Wagon *(2) 100* *15.00*
 Physician *Dr Scott*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. *92*
Sat July 31-37

35.00
100.
15.00
150.00

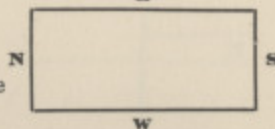
Carey Hand Funeral Home

Name of deceased *Albert Royal*
 Date of death *Thurs July 29, 1937* *6:05 PM*
 Cause of death *O. G. H. Cerebral Thrombosis*
 Place of death *O. G. H.*
 Residence *Sorrento*
 Age *72* Y's *8* Mo's *14* Days
 Weight *150* Height *5* ft. *7* in. Eyes
 Funeral at *Grave Side*
 Date *Sun Aug 1, 1937* *3 P. M*
 Account charged *Ex. Royal*
 Address *Sorrento Fla*
 Account guaranteed *Check*
 Address
 Embalming *+ Dressing*
 Robe, Suit, Dress *Suit*
 Underwear and Hose
 Casket *6-6 State Gr B. Cl-th*
 Casket with Copper Lin.
 Style of Casket *State H. Cap*
 No. of Casket *Tampa # 60*
 Outside Box *Req*
 Shipping Case or Vault *Cement by Family*
 Handles *Ext.*
 Pillow Set *Yes*
 Name Plate
 Cemetery *Seminole* *Near Sorrento*
 Section Lot

35.00
 16.00
 1.50
 165.00

I Other Graves

X Grave on this date



Cremation

Single Grave *Del Bay & Tent*

10.00

Opening and Closing Grave *by Family*

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister *from Eustis*

Casket Wagon *(1)*

5.00

Physician *Dr. Louis Orr*

County or City Burial

Automobiles *S & S -*

25.00

Baggage or Express Train No.

25.00

Pd Ck 2-30-37

1/2

2.50

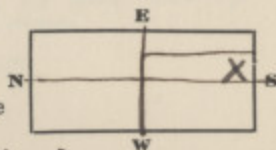
255.00

Carey Hand Funeral Home

Name of deceased Mr David Holdsworth
 Date of death Fri July - 30 - 37 2:30 AM
 Cause of death atherosclerosis
 Place of death Fla Sant
 Residence Maitland Fla
 Age 72 Y's 4 Mo's 25 Days
 Weight 185 Height 5 ft. 8 in. Eyes
 Funeral at Chapel
 Date Monday Aug 2 1937 4 P.M
 Account charged Mrs David Holdsworth
 Address Maitland Fla
 Account guaranteed Small Prudential Bns
 Address
 Embalming Crossing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-52 B. Cloth 200.00
 Casket with Copper Lin. ☒
 Style of Casket R. C. Steel 1/2 - C
 No. of Casket 121 1/2 Tampa
 Outside Box Rfg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate ☒
 Cemetery Winter Park
 Section (1) H 1/2 Lot 2

I Other Graves

X Grave on this date



Cremation Cor Min 5.00
 Single Grave
 Opening and Closing Grave T. etc 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister
 Casket Wagon (1) 5.00
 Physician
 County or City Burial
 Automobiles S V S 15.00
 Baggage or Express Train No. 275.00

Carry Hand Funeral Home

Name of deceased Louis Pihos
 Date of death Sat July 31-37 4:15 AM
 Cause of death Sudden Head Spasm
 Place of death Cor State & West 10th Ave
 Residence 625- East Amelia

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

Funeral at Res
 Date Mon Aug-2- 1937 PM

Account charged _____
 Address _____

Account guaranteed _____
 Address _____

Embalming & Dressing 35.00

Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3-Gr Cup 100.00

Casket with Copper Lin. ✓
 Style of Casket Oct 5 T.

No. of Casket 123-jet e
 Outside Box R 19

Shipping Case or Vault ✓
 Handles Short

Pillow Set yes
 Name Plate Amelia

Cemetery Duckwood
 Section 2

used extra grave at West End of
Sec 2- which was Lot E

I Other Graves not shown on plat
 X Grave on this date

Cremation _____
 Single Grave Whole

Opening and Closing Grave _____
 Body Shipped to Car Min 5.00

R. R. Ticket Car & B. 5.00

Cash advanced _____

Telegram _____
 Minister Private from Tarpm Spm

Casket Wagon No Chg

Physician Duckworth J. P.

County or City Burial _____
 Automobiles S & S 15.00

Baggage or Express Train No. 18200

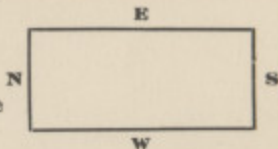
Carey Hand Funeral Home

Name of deceased *Mrs Katherine Bobo*
 Date of death *July - 28 - 37*
 Cause of death *Lecema of Left Lung*
 Place of death *Bes*
 Residence *Ft Myers*
 Age *53* Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Ft Myers*
 Date _____ 193 _____ M
 Account charged *Shoener F. Home*
 Address *Ft Myers Fla*
 Account guaranteed *Let*
 Address _____
 Embalming *Cumulation* 37.50
 Robe, Suit, Dress _____
 Underwear and Hose *Body Unwired*
 Casket *by Express 2:10 PM*
 Casket with Copper Lin *Sat - 7-31-37*
 Style of Casket _____
 No. of Casket *Body Cumulated*
 Outside Box *6-a m 7-31-37*
 Shipping Case or Vault _____
 Handles *Casket Express*
 Pillow Set *to*
 Name Plate *Shoener Funeral*
 Cemetery *Home*
 Section *Ft Myers Fla*

wooden Box

I Other Graves

X Grave on this date



Cremation

Single Grave

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister

Casket Wagon

Physician

County or City Burial

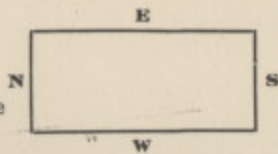
Automobiles

Baggage or Express Train No.

37.50

Carry Hand Funeral Home

Name of deceased *Mrs Angeline C Bailey*
 Date of death *July-30-37*
 Cause of death *Cancer of Stomach*
 Place of death *Res*
 Residence *414 Landendale*
 Age *63* Y'rs *8* Mo's *2* Days
 Weight _____ Height *5* ft. *8* in. Eyes *Brown*
 Funeral at *414 Landendale*
 Date _____ 1937 *M*
 Account charged *Fairchild F. Home*
 Address *414 Landendale Fla*
 Account guaranteed *OK*
 Address _____
 Embalming *Cumation* 37.50
 Robe, Suit, Dress _____
 Underwear and Hose *Body Amroid*
 Casket *by Express 1125 A.M.*
 Casket with Copper Lin *Sat 7-31-37*
 Style of Casket _____
 No. of Casket *Body Cumation*
 Outside Box *2 - P.M. 7-31-37*
 Shipping Case or Vault *0*
 Handles *Cash Express to*
 Pillow Set *Fairchild F. Home*
 Name Plate *414 Landendale Fla*
 Cemetery _____
 Section _____ Lot _____
used Box
 I Other Graves _____
 X Grave on this date _____
 Cremation _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____



37.50

Carey Hand Funeral Home

Name of deceased *Mrs Mae M. Laverick*
 Date of death *July - 28 - 37*
 Cause of death *Polycystic Kidney*
 Place of death *Miami*
 Residence *Miami*
 Age *52* Yrs *2* Mo's *15* Days
 Weight *135* Height *5* ft. *5* in. Eyes
 Funeral at *Miami*
 Date *193* M
 Account charged *W. H. Combs*
 Address *Miami*
 Account guaranteed
 Address
 Embalming *Cremation* 37.50
 Robe, Suit, Dress
 Underwear and Hose *Body Anvored*
 Casket *by Express 1125 AM*
 Casket with Copper Lin *Sat 7-31-37*
 Style of Casket
 No. of Casket *Body Cremated*
 Outside Box *2 - R. In 7-31-37*
 Shipping Case or Vault
 Handles *Ashes Expressed To*
 Pillow Set
 Name Plate *W. H. Combs F. Home*
 Cemetery *Miami Fla*
 Section Lot

I Other Graves

X Grave on this date

*Metal O S Box
 returned by Fick*

Cremation

Single Grave

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister

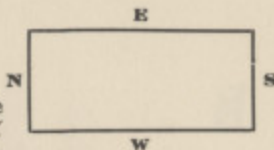
Casket Wagon

Physician

County or City Burial

Automobiles

Baggage or Express Train No.



37.50

Carey Hand Funeral Home

Name of deceased *Mrs. Eleanor J. Jones*
 Date of death *Mrs. Aug-3-38* *AM*
 Cause of death *Apoplexy*
 Place of death *Res -*
 Residence *46 - N. Hughes*
 Age *60* Y'rs *9* Mo's *8* Days
 Weight *145* Height *5* ft. *6* - in. Eyes
 Funeral at *Chapel*
 Date _____ 193 *M*
 Account charged *Mrs. Wilma Jones DuRant*
 Address *46 - N. Hughes St*
 Account guaranteed *Payment*
 Address _____
 Embalming *Dressing* 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket *3 Sd Flush* 125.00
 Casket with Copper Lin. ✓
 Style of Casket *Oct 1/2 - c*
 No. of Casket *1927 - S -*
 Outside Box *Reg*
 Shipping Case or Vault ✓
 Handles *Ext*
 Pillow Set *yes*
 Name Plate ✓
 Cemetery *Greenwood*
 Section *T.* Lot *24*

E
 N S
 W

 I Other Graves
 X Grave on this date
 Cremation *Music* 5.00
 Single Grave
 Opening and Closing Grave *etc* 15.00
 Body Shipped to *P B Car* 5.00
 R. R. Ticket *min Car* 5.00
 Cash advanced
 Telegram
 Minister *Rev Ed Turner* 5.00
 Casket Wagon *(1)*
 Physician *Dr M Andrews*
 County or City Burial
 Automobiles *S & S* 15.00
 Baggage or Express Train No. *2* 60.00

Carey Hand Funeral Home

Name of deceased Harold O'Brien
 Date of death July 30-37
 Cause of death Heart Failure
 Place of death Miami
 Residence Miami
 Age 48 Y'rs 6 Mo's ✓ Days ✓
 Weight 165 Height 5 ft. 10 in. Eyes Brown
 Funeral at Miami Fla
 Date Aug 1 1937 7. D M
 Account charged H. L. Philbrick
 Address Miami Fla
 Account guaranteed _____
 Address _____
 Embalming Cremation 37 50
 Robe, Suit, Dress _____
 Underwear and Hose Body covered
 Casket by Express 1125-
 Casket with Copper Lin. a m
 Style of Casket Wm Aug-3-37
 No. of Casket _____
 Outside Box Body Cremated
 Shipping Case or Vault 2-P m
 Handles 8-3-37
 Pillow Set _____
 Name Plate Ashes Exposed to
 Cemetery _____
 Section _____ 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 37 50
 Automobiles _____
 Baggage or Express Train No. _____

Carry Hand Funeral Home

Name of deceased *Capt. Lawrence A. Sleety*
 Date of death *Tues Aug-3-37* *P.M.*
 Cause of death _____
 Place of death *Res*
 Residence *Cumy Ford Rd S.E. of Orlando*
 Age *41* Y'rs *11* Mo's *28* Days
 Weight *100* Height *5* ft. *7* in. Eyes _____
 Funeral at _____
 Date *Aug* 1937 *M*
 Account charged *Mrs Isabella Sleety*
 Address *P.O. #4 - Box 557 - Calab. Wifed*
 Account guaranteed _____
 Address _____
 Embalming *Dussing* 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *bronze urn* 25.00
 Casket with Copper Lin. _____
 Style of Casket *Love Chg* 35.00
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery *Cremation* 50.00
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 N _____ S _____
 Cremation *Fun Del To Family* W
 Single Grave *Aug-6-37* 2³⁰ AM
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced *Amb to St Pete* 40.00
 Telegram _____
 Minister *Sleety* -
 Casket Wagon *(1)* 5.00
 Physician *Dr. T. A. Neal*
 County or City Burial *150.00*
 Automobiles _____
 Baggage or Express Train No. _____

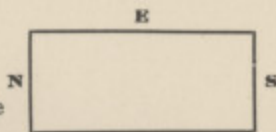
Amb To Bay Pines 40.00
190.00

Carey Hand Funeral Home

Name of deceased Grace Benesche
 Date of death Aug 2 - 37
 Cause of death Cancer of Abdomen
 Place of death Res
 Residence Miami Fla
 Age 65 Yrs 2 Mo's Days
 Weight 120 Height 5 ft. 6 in. Eyes
 Funeral at Miami Fla
 Date Aug 1937 M
 Account charged W. A. Combs F. 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 Body arrived
 No. of Casket by express 11:25 a.m.
 Outside Box Wed - Aug 4 - 37
 Shipping Case or Vault
 Handles
 Pillow Set Body Cremated
 Name Plate Wed 1:30 P.M.
 Cemetery Aug 4 - 37
 Section Lot

I Other Graves

X Grave on this date



Cremation Ashes expressed to

Single Grave W. A. Combs

Opening and Closing Grave F. 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.

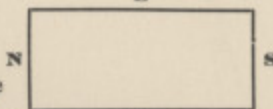
6
P 37.50

Carey Hand Funeral Home

Name of deceased *Eli Lahmer*
 Date of death *July 31 - 1937*
 Cause of death *Heart Disease*
 Place of death *Residence*
 Residence *Stelaland, Fla.*
 Age *73* Y'rs *8* Mo's *17* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Stelaland, Fla.*
 Date *Aug 4 - 1937* *10 a. M.*
 Account charged *Jas. A. Allen and Co.*
 Address *Stelaland, Fla.*
 Account guaranteed *Check*
 Address _____
 Embalming *Cremation* *\$37.50*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket *Body arrived*
 No. of Casket *by Auto Wed*
 Outside Box *2:30 P. M.*
 Shipping Case or Vault *Aug 4 - 37*
 Handles _____
 Pillow Set *Body Cremated*
 Name Plate *Wed 3 P. M.*
 Cemetery *Aug 4 - 1937*
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation *Ashes Expressed to*
 Single Grave *Thomas Keffer*
 Opening and Closing Grave *Concord*
 Body Shipped to *Ontario, Canada*
 R. R. Ticket _____
 Cash advanced *Ashes to be buried*
 Telegram *in the grounds of*
 Minister *Gion Puthern*
 Casket Wagon *Church Cemetery*
 Physician *Maple, Ont - Canada*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$37.50

Carey Hand Funeral Home

Name of deceased Miss Clara Aldham
 Date of death Aug 4 - 1937
 Cause of death Metastatic Carcinoma to brain
 Place of death Res.
 Residence Daytona Beach, Fla.
 Age 51 Yrs 10 Mo's 6 Days
 Weight 130 Height 5 ft. 9 in. Eyes Brown
 Funeral at Providence R.I.
 Date Aug 1937 M
 Account charged Haight & Brook Mnd Co.
 Address Daytona 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 Wed
 Outside Box 7 P.M. Aug 4-37
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body Cremated
 Name Plate Wed 8 P.M.
 Cemetery Aug 4-37
 Section _____ Lot _____

I Other Graves

X Grave on this date

N

S

W

Cremation Ashes sent by
 Single Grave Air mail
 Opening and Closing Grave Thurs
 Body Shipped to 7 P.M. Aug 5-37
 R. R. Ticket To Frank E. Remington
 Cash advanced Inc.
 Telegram 1406 Broad St
 Minister Providence, R.I.
 Casket Wagon _____
 Physician AIR MAIL 379
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

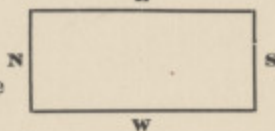
\$ 37.50

Carry Hand Funeral Home

Name of deceased Julius Jackson Price
 Date of death Jan 5 - 2:30 a.m.
 Cause of death _____
 Place of death P. F. H.
 Residence Longwood Fla
 Age 63 Yrs Mo's _____ Days 21
 Weight 170 Height 5 ft. 7 in. Eyes _____
 Funeral at Grave Side
 Date _____ 1937 M
 Account charged Mrs Julius J. Price
 Address Longwood Fla
 Account guaranteed Estate
 Address _____
 Embalming & Dressing
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 Grey Cupr
 Casket with Copper Lin. _____
 Style of Casket Oct. G. Cupr
 No. of Casket 123 Jet
 Outside Box Reg
 Shipping Case or Vault _____
 Handles int
 Pillow Set yes
 Name Plate _____
 Cemetery Longwood
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation _____

Single Grave _____

Opening and Closing Grave etc

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon (1)

Physician Dr. Mallory

County or City Burial _____

Automobiles S & S

Baggage or Express Train No. _____

35.00

125.00

15.00

5.00

25.00

8195.00

Carey Hand Funeral Home

Name of deceased *Wm Jackson minor*
 Date of death *Aug 5 7 a.m. 1937*
 Cause of death *Coronary Thromboses*
 Place of death *Res*
 Residence *Alcoe Fla*
 Age *88* Y's *7* Mo's Days
 Weight Height ft. in. Eyes
 Funeral at *Grave side*
 Date *Tues Aug 10 -* 1937 *3:30 P. M*
 Account charged *Estate*
 Address
 Account guaranteed *Estate*
 Address *Mrs J. B. Fanning W. P.*
 Embalming & Dressing 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket *6-3-Gr. Box* 150.00
 Casket with Copper Lin. *✓*
 Style of Casket *Oct 1/2 - e*
 No. of Casket *123 - Jot -*
 Outside Box *Reg*
 Shipping Case or Vault *✓*
 Handles *✓*
 Pillow Set *yes*
 Name Plate
 Cemetery *Alcoe.*
 Section Lot
 E
 I Other Graves
 X Grave on this date
 W
 Cremation
 Single Grave 15.00
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket *To Res - OW* 10.00
 Cash advanced
 Telegram
 Minister *Rev Sands*
 Casket Wagon *(1)* 5.00
 Physician *Dr. Lawrence.*
 County or City Burial
 Automobiles *S & S* 15.00
 Baggage or Express Train No. 380.00
 \$230.00

Carey Hand Funeral Home

Name of deceased Elyabeth Hamilton
 Date of death Aug 3-37
 Cause of death Cholera Myocarditis
 Place of death Res
 Residence Sebring Fla
 Age 68 Yrs 1 Mo's 2 Days
 Weight 115 Height 5 ft. — in. Eyes —
 Funeral at Sebring
 Date — 1937 M
 Account charged Stephenson F Home
 Address Sebring Fla
 Account guaranteed ok
 Address —
 Embalming Cremation 37.50
 Robe, Suit, Dress —
 Underwear and Hose —
 Casket Body moved
 Casket with Copper Lin. by auto
 Style of Casket 145 P. M.
 No. of Casket 8-5-37-
 Outside Box —
 Shipping Case or Vault Body
 Handles Cremated
 Pillow Set 3-P M 8-5-37
 Name Place —
 Cemetery Ashe Express to
 Section — Lot —

I Other Graves

X Grave on this date

N Aug 1868
Elyabeth Thompson Hamilton
Aug 3 1937
 W

Cremation Imm Eng 22.50

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.

22.50

37.50

\$60.00

Carey Hand Funeral Home

Name of deceased *Nancy R. Dinkson*
 Date of death *Thurs. Aug-5-37* *PM*
 Cause of death *Myocarditis*
 Place of death *Res -*
 Residence *416 Low Hampton*
 Age *55* Y'rs *5* Mo's *8* Days
 Weight *125* Height *5* ft. *11* in. Eyes
 Funeral at *Chapel*
 Date *Sun Aug-8-1937* *4 P. M*
 Account charged *Mrs Martha Dinkson*
 Address *416 S. Hampton -* *Wife*
 Account guaranteed *Nothing*
 Address
 Embalming *Y* *See Chg* *50.00*
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 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 *9-4 In Monday*
 Cash advanced *Aug-9-37*
 Telegram *will call for ashes*
 Minister *Dr. H. G. H. H.*
 Casket Wagon *People Very Poor*
 Physician *have Nothing at all*
 County or City Burial *100.00*
 Automobiles
 Baggage or Express Train No.
Dr. H. G. H. H. H.
Body Sunday Night

Carry Hand Funeral Home

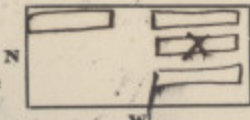
Name of deceased Zella A Hills
 Date of death Aug 4-37
 Cause of death Cornary Embolus
 Place of death Res
 Residence Clearwater
 Age 77 Y'rs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Clearwater
 Date 193 M
 Account charged Mass F. Home
 Address Clearwater Fla
 Account guaranteed OK
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. Body Annul
 Style of Casket by ant.
 No. of Casket 1230 A.M.
 Outside Box Tri morning
 Shipping Case or Vault Aug-6-37
 Handles
 Pillow Set Body cremated
 Name Plate 9-2a m 8-6-37
 Cemetery
 Section Lot
 E
 I Other Graves
 X Grave on this date
 N S
 Cremation ashes to be scattered
 Single Grave Greenwood Cemetery
 Opening and Closing Grave Orlando
 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

Cary Hand Funeral Home

Name of deceased Alonso C. Tolman
 Date of death Fri Aug- 6-37
 Cause of death O. G. M. Meningitis
 Place of death O. G. M.
 Residence 426 Macy St
 Age 59 Y'rs 4 Mo's 9 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sunday Aug 8 1937 2:30 P M
 Account charged Mrs Lillian B Tolman
 Address 426 Macy St
 Account guaranteed _____
 Address _____
 Embalming Dussing 25.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Doe 75.00
 Casket with Copper Lin. ☒
 Style of Casket Sgt H. C
 No. of Casket 73-Tampa
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Shut
 Pillow Set yes
 Name Plate ☒
 Cemetery Greenwood
 Section G Lot _____
 E
 I Other Graves _____
 X Grave on this date _____
 W
 Cremation _____
 Single Grave White 20.00
 Opening and Closing Grave 1 & 1/2 15.00
 Body Shipped to auto 3.00
 R. R. Ticket Out to No Chg
 Cash advanced _____
 Telegram _____
 Minister Mrs Webb
 Casket Wagon _____
 Physician Dr Gray
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. _____
 142.00

Family Very Poor

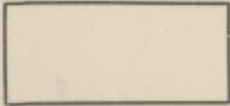
Carey Hand Funeral Home

Name of deceased *Mrs Anna M.E. Annie*
 Date of death *Fri Aug - 6 - 1937*
 Cause of death *Rel Chagris Incephalitis*
 Place of death *Res*
 Residence *20 East Liv Ave*
 Age *78* Yrs *7* Mo's *9* Days
 Weight *125* Height *5* ft. *6* in. Eyes
 Funeral at *Chapel*
 Date *Monday Aug 9 1937* *4 P M*
 Account charged *Mrs Nora C. Bookout*
 Address *20 - E. Liv Ave*
 Account guaranteed *Payments*
 Address
 Embalming *& Dressing* *35.00*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *6-6 Metal* *295.00*
 Casket with Copper Lin.
 Style of Casket *State 1/2 - E*
 No. of Casket *145 - Nat*
 Outside Box
 Shipping Case or Vault *On Sea* *105.00*
 Handles *Ext -*
 Pillow Set *Yes*
 Name Plate
 Cemetery *Greenwood*
 Section *V E 1/2 -* Lot *51*
Head of Grave South
 I Other Graves
Perkout Lot
 X Grave on this date

 Cremation *P.B. Ear* *5.00*
 Single Grave *Car Mini* *5.00*
 Opening and Closing Grave *T & etc* *15.00*
 Body Shipped to *Car Family* *5.00*
 R. R. Ticket *Car No Chg*
 Cash advanced *Musie* *5.00*
 Telegram
 Minister *Rev Brantley* *5.00*
 Casket Wagon *(1)*
 Physician *Dr Asentburgh*
 County or City Burial
 Automobiles *S & S* *15.00*
 Baggage or Express Train No. *490 00*

Carey Hand Funeral Home

Name of deceased *Mr Victor Bang Toulane*
 Date of death *aug - 5 - 37 -*
 Cause of death *Cancer Left Temple*
 Place of death *Res*
 Residence *St Petersburg Fla*
 Age *85* Y'rs *2* Mo's *26* Days
 Weight *125* Height *5* ft. *6* in. Eyes
 Funeral at *St Petersburg*
 Date *193* M
 Account charged *Candicott T. Home*
 Address *St Petersburg Fla*
 Account guaranteed *lek*
 Address
 Embalming *Cremation* 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket *Body Unwired*
 Casket with Copper Lin. *by auto*
 Style of Casket *130 4PM*
 No. of Casket *Sat aug - 7 - 37*
 Outside Box
 Shipping Case or Vault *Body*
 Handles *Cremated 9 AM*
 Pillow Set *Sun aug - 8 - 37*
 Name Plate
 Cemetery
 Section *wood Box* Lot
 I Other Graves
 X Grave on this date
 Cremation *ashes Expressed to*
 Single Grave *Charles Vasterling*
 Opening and Closing Grave *T. Director*
 Body Shipped to *Cawker City*
 R. R. Ticket *Kansas*
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician
 County or City Burial 37.50
 Automobiles
 Baggage or Express Train No.

Carey Hand Funeral Home

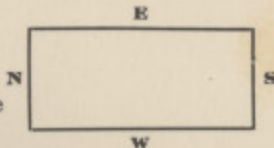
Name of deceased *Mr Willis H. Stucker*
 Date of death *Sat Aug-7-37* *145- P. M.*
 Cause of death *Carcinoma of larynx*
 Place of death *Res*
 Residence *2615 Audruy ave W. P.*
 Age *66* Y'rs *5* Mo's *12* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Sun- Aug-8-1937* *8- P M*
 Account charged *Mrs Effie M Stucker*
 Address *2615 Audruy ave W. P.*
 Account guaranteed _____
 Address _____
 Embalming *Care of Body* *25. 00*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *Simple Chg* *25. 00*
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves 
 X Grave on this date _____
 Cremation *Cremation* *50. 00*
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Body cremated*
 R. R. Ticket *9- a M Monday*
 Cash advanced *Aug 9- 37*
 Telegram _____
 Minister *will call for ashes*
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles *100 00*
 Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased *William Henick*
 Date of death *Aug-6-37*
 Cause of death *myocarditis*
 Place of death *Res*
 Residence *Astatula Fla*
 Age *81* Y'rs Mo's Days
 Weight *160* Height *5* ft. *10* in. Eyes
 Funeral at *Res*
 Date 193 *193* M
 Account charged *Rahbaum F. Home*
 Address *Mt Dora Fla*
 Account guaranteed *lok*
 Address
 Embalming *Cremation* 32.56
 Robe, Suit, Dress
 Underwear and Hose
 Casket *Body arrived*
 Casket with Copper Lin. *by auto*
 Style of Casket *H-PM Sat*
 No. of Casket *Aug-7-37*
 Outside Box
 Shipping Case or Vault *Body*
 Handles *Cremated 9-1a M*
 Pillow Set *Sun Aug 8-37*
 Name Plate
 Cemetery *will call for Ashes*
 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.

32.50

Carey Hand Funeral Home

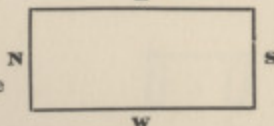
Name of deceased Barbara Ann Lynd
 Date of death Sun Aug-8-37 10 AM
 Cause of death Carcinoma of stomach
 Place of death Res
 Residence Hywassic Rd - 1 Mi S. of H.S. Rd
 Age 62 Yrs 11 Mo's 4 Days
 Weight 125 Height 5 ft. 2 in. Eyes _____
 Funeral at St James Catholic Church
 Date Tue Aug 10 - 1937 9 AM
 Account charged Patricia Lents
 Address Delando Rt 3 Box 83-a
 Account guaranteed Payments
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Gr Crpe 90.00
 Casket with Copper Lin. ☒
 Style of Casket Oct. No. 2
 No. of Casket 1972-7
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate crucifix
 Cemetery Woodlawn
 Section _____ Lot _____
 E
 N S
 W
 I Other Graves _____
 X Grave on this date _____
 Cremation _____
 Single Grave _____
 Opening and Closing Grave To etc 15.00
 Body Shipped to P.B. Car 5.00
 R. R. Ticket Car Minister 5.00
 Cash advanced _____
 Telegram _____
 Minister Father Bishop
 Casket Wagon (1) 5.00
 Physician H. Quillman
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. 170.00

Carey Hand Funeral Home

Name of deceased Albert L Stone
 Date of death Sun Aug 8-37 1 PM
 Cause of death _____
 Place of death County Home
 Residence 11 Lou Hammer
 Age _____ Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Mon Aug 23 1937 PM
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 Car
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box R-9
 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 50

Minister _____

Casket Wagon _____

Physician Jullien

County or City Burial _____

Automobiles _____

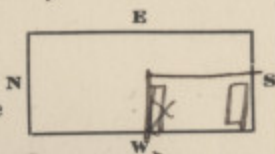
Baggage or Express Train No. _____

14.50

14.50

Carey Hand Funeral Home

Name of deceased Earnest J. Norman
 Date of death Sun Aug 8-37 430 - A.M.
 Cause of death Acute alcoholism
 Place of death Found Dead in his Automobile
 Residence 51- Grove Hill Court
 Age 40 Y'rs — Mo's 9 Days —
 Weight — Height — ft. — in. Eyes —
 Funeral at Chapel
 Date Wed Aug 11 1937 10 A.M.
 Account charged Pearl Bell
 Address 51- Grove Hill Court
 Account guaranteed —
 Address —
 Embalming — *Family used White Suit*
 Robe, Suit, Dress ~~Black~~ *Grey* } 10.00
 Underwear and Hosiery — } 65.00
 Casket 6-3-Emf Doe
 Casket with Copper Lin. —
 Style of Casket —
 No. of Casket Ign. N. Case
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Short
 Pillow Set Yes
 Name Plate —
 Cemetery Greenwood
 Section G- S W 1/4 Lot 25
 I Other Graves —
 X Grave on this date —
 Cremation Anti & Muslim 5.00
 Single Grave —
 Opening and Closing Grave Tile 15.00
 Body Shipped to was found dead in his Auto about 430 Sun
 R. R. Ticket —
 Cash advanced Mrs. E. Miller
 Telegram got the call by Police Later
 Minister He Brought Body to our Place
 Casket Wagon any charges Family Pd.
 Physician Dr. Miller
 County or City Burial —
 Automobiles S & S 15.00
 Baggage or Express Train No. — 100.00



Carey Hand Funeral Home

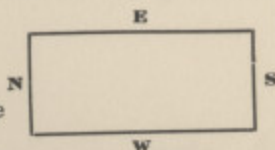
Name of deceased Edward J. Wilkerson
 Date of death Aug 9 12:10 a.m.
 Cause of death Laryngeal seiphtheris
 Place of death AGH
 Residence Coee
 Age 1 Y'rs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Grave side
 Date Mon Aug 9 1937 5:30 P.M.
 Account charged John B. Wilkerson
 Address Coee Fla.
 Account guaranteed small insurance
 Address
 Embalming Case of Bod 10.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 3-6 H L. 15.00
 Casket with Copper Lin. ☒
 Style of Casket Spr H In
 No. of Casket
 Outside Box Reg
 Shipping Case or Vault
 Handles small
 Pillow Set OD
 Name Plate
 Cemetery Coee
 Section Lot
 I Other Graves
 X Grave on this date
 Cremation Auto 5.00
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister by Family
 Casket Wagon
 Physician J. Knowles
 County or City Burial
 Automobiles 30.00
 Baggage or Express Train No.

Carey Hand Funeral Home

Name of deceased Frank James M^o Canoe Jr
 Date of death Aug - 9 - 37
 Cause of death Gun Shot in Head
 Place of death Res
 Residence Cocoa
 Age 15 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Cocoa
 Date _____ 1937 _____ M
 Account charged Koon T. Home
 Address Cocoa Fla
 Account guaranteed OK
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose Body Unwashed
 Casket by auto 5:30 PM
 Casket with Copper Lin. Mon 8-9-37
 Style of Casket _____
 No. of Casket Body Cremated
 Outside Box 6-PM
 Shipping Case or Vault Mon 8-9-37
 Handles Ashes Expressed to
 Pillow Set Koon T. Home
 Name Plate Titusville 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 Allen A. Clarke
 Date of death Aug - 6 - 37
 Cause of death Acute Nephritis
 Place of death Navonah Cuba
 Residence Miami Fla
 Age 69 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 1937 _____ M
 Account charged H. A. Combs
 Address Miami Fla
 Account guaranteed _____
 Address _____
 Embalming Cumation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose Body unwid
 Casket by Express 1125 a m
 Casket with Copper Lin. True Aug-10-
 Style of Casket Body cumated
 No. of Casket 1 - P.M. 8-10-37
 Outside Box _____
 Shipping Case or Vault Body covered in
 Handles State Metal Casket with
 Pillow Set inner Seal Silver Tilt
 Name Plate _____
 Cemetery Palms Placed in
 Section Casket and Express

E

I Other Graves

N

S

X Grave on this date

Cremation To H. A. Combs T. A.

Single Grave Miami Fla

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician _____

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

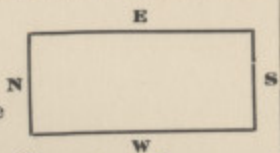
32.50

Carey Hand Funeral Home

Name of deceased Laura Somes Tomhagen
 Date of death Aug 8 - 1937
 Cause of death Castliac decomposition
 Place of death Residence
 Residence Le Leon Springs Fla.
 Age 74 Y'rs 2 Mo's 16 Days 16
 Weight 125 Height 5 ft. 5 in. Eyes Blue
 Funeral at Le Leon Springs Fla.
 Date Tuesday Aug 11 - 1937 P. M.
 Account charged Jas. A. Allen and Co.
 Address Leeland, 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 5:15 P.m. Aug 11-37
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body Cremated
 Name Plate Wed 5:15 P.m.
 Cemetery Aug 11 - 1937
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation ashes expressed
 Single Grave Mrs L. Tomhagen
 Opening and Closing Grave Fisher
 Body Shipped to Le Leon Springs
 R. R. Ticket Fla.
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of deceased Wm. E. Neve
 Date of death Aug 11 - 1937
 Cause of death Coronary Thrombosis
 Place of death Res
 Residence Tampa Fla
 Age 58 Yrs 4 Mo's 16 Days
 Weight 190 Height 6 ft. 4 in. Eyes Blue
 Funeral at Tampa Fla
 Date Aug 1937 M
 Account charged J. L. Reed & Son.
 Address Tampa, Fla
 Account guaranteed Check
 Address _____
 Embalming Cremation #3750
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body Arrived
 No. of Casket by Auto 5 P.M.
 Outside Box Friday Aug 13-37
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body cremated
 Name Plate 5:30 P.M. Friday
 Cemetery Aug 13-37
 Section _____ Lot _____

E

I Other Graves

N

S

X Grave on this date

W

Cremation Ashes expressed

Single Grave J. L. 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. _____

#37.50