

8-10-1938

Memoranda Book 122: Carey Hand Funeral Home records, August 10, 1938 to October 14, 1938

Carey Hand Funeral Home

Find similar works at: <https://stars.library.ucf.edu/cfm-ch-records>

University of Central Florida Libraries <http://library.ucf.edu>

This Record is brought to you for free and open access by the Carey Hand Funeral Home Records at STARS. It has been accepted for inclusion in Carey Hand Funeral Home Records by an authorized administrator of STARS. For more information, please contact STARS@ucf.edu.

Recommended Citation

Carey Hand Funeral Home, "Memoranda Book 122: Carey Hand Funeral Home records, August 10, 1938 to October 14, 1938" (1938). *Carey Hand Funeral Home Records*. 122.

<https://stars.library.ucf.edu/cfm-ch-records/122>

Carey Hand Funeral Home

Name of deceased Mrs Eleanor Dumas
 Date of death Thurs Aug 11-38 AM
 Cause of death Pulmonary tuberculosis
 Place of death Res
 Residence 434 Fairfax Ave W. Park
 Age 37 Y'rs 2 Mo's 18 Days
 Weight 28 Height 5 ft. 6 in. Eyes Blue
 Funeral at Chapel
 Date Sat 8-13 1938 4 P. M

Account charged _____

Address _____

Account guaranteed _____

Address _____

Embalming Dunning 25.00

Robe, Suit, Dress _____ 1.00

Underwear and Hose Gown 19.00

Casket See ch 4

Casket with Copper Lining _____

Style of Casket Set

No. of Casket X

Outside Box _____

Shipping Case or Vault _____

Handles Set

Pillow Set Set

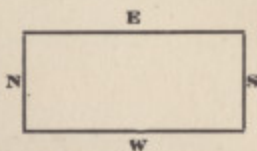
Name Plate _____

Cemetery Cremation

Section _____ Lot _____

I Other Graves

Wooden Box



X Grave on this date

Cremation Cremation 50.00

Urn _____

Single Grave Body Cremated

Opening and Closing Grave See

Body Shipped to Aug-14-38 9 A.M.

R. R. Ticket will call for ashes

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon (1) 5.00

Physician _____

County or City Burial _____

Automobiles _____ 100.00

Baggage or Express Train No. _____ 25.

Wm 70-12

125.

Carey Hand Funeral Home

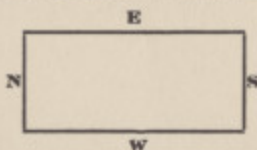
Name of deceased Mr Howard W. Hull
 Date of death Aug - 6 - 38
 Cause of death Cholera Myocarditis
 Place of death St. Petersburg Fla
 Residence _____
 Age 25 Y'rs 5 Mo's 3 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 1938 M _____
 Account charged Ralph G. Cooksey
 Address St. Petersburg Fla
 Account guaranteed OK
 Address _____
 Embalming Cumulative 37.50
 Robe, Suit, Dress _____
 Underwear and Hose Body Unwired
 Casket by aut - 10:45 AM
 Casket with Copper Lin. Thurs 8-11-38
 Style of Casket _____
 No. of Casket Body Cumulative
 Outside Box 1100 - 8-11-38
 Shipping Case or Vault _____
 Handles Express Boxes 75
 Pillow Set Mrs Price & Son
 Name Plate Funeral Home
 Cemetery 214 Jefferson st
 Section _____ Lot _____
 I Other Graves Scranton Penna
 X Grave on this date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____ 32.50
 Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased Mrs Bessie M. Eaton
 Date of death Aug 9-38
 Cause of death Bright Disease
 Place of death New Smyrna
 Residence New Smyrna
 Age 64 Y'rs 8 Mo's 7 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at New Smyrna
 Date _____ 1938 M
 Account charged Robison & Tarver
 Address T. Home New Smyrna
 Account guaranteed check
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Body Unlined
 Style of Casket by aut. 12:15 PM
 No. of Casket Phus 8-11-38
 Outside Box _____
 Shipping Case or Vault Body Cremated
 Handles 1-PM
 Pillow Set 8-11-38 ashes
 Name Plate Expressed to
 Cemetery Robison & Tarver
 Section New Smyrna Lot 71A

I Other Graves

wood box



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician _____

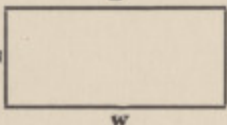
County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

37.50

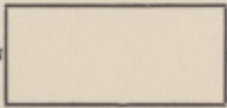
Gary Hand Funeral Home

Name of deceased Rosalie T. Allsopp
 Date of death Aug-14-38 7-A.M.
 Cause of death Acute Myocarditis
 Place of death County Home
 Residence Orlando Rt 19- Box 219
 Age 43 Y'rs 3 Mo's 27 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at grave side
 Date Mon Aug-15 1938 11-A.M.
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3-Case
 Casket with Copper Lin. _____
 Style of Casket See Hm
 No. of Casket 119
 Outside Box _____
 Shipping Case or Vault _____
 Handles Short
 Pillow Set _____
 Name Plate _____
 Cemetery County Home
 Section _____ Lot _____
 I Other Graves 
 X Grave on this date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Gray
 Casket Wagon _____
 Physician Dr. Lullman
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

14.50

14.50

Carey Hand Funeral Home

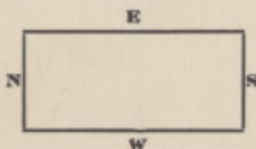
Name of deceased Mrs. Carrie D. McMillan
 Date of death Aug-14-38
 Cause of death Angina Pectoris
 Place of death Res-
 Residence Clumment Fla
 Age 77 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Clumment
 Date _____ 193_____ M
 Account charged Edge Funeral Home
 Address Graveland
 Account guaranteed ok
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body only
 Casket with Copper Lin 1130 A m
 Style of Casket Wm 8-15-38
 No. of Casket _____
 Outside Box Body cremated
 Shipping Case or Vault 1-P.M.
 Handles 8-15-38
 Pillow Set will call for
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
wooden box
 I Other Graves 
 X Grave on this date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

32.50

Carey Hand Funeral Home

Name of deceased Edwin A. Hogarth
 Date of death Aug 16 9:45 P.M.
 Cause of death _____
 Place of death Residence
 Residence Winter Garden Fla
 Age 94 Y'rs 7 Mo's 28 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graveside Winter Garden
 Date Friday Aug 18 1938 11 A M
 Account charged Syntha P. Hogarth
 Address Winter Garden Fla
 Account guaranteed Utah
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress Grey suit 10.00
 Underwear and Hosiery _____
 Casket 4-3 Gr. Doe 125.00
 Casket with Copper Lin. _____
 Style of Casket Oct H. C
 No. of Casket 1540 Olsons
 Outside Box ✓
 Shipping Case or Vault air seal 100.00
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Winter Garden
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave Teste 15.00

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister Rev. Pepper 5.00

Casket Wagon _____

Physician Dr. Scanlin

County or City Burial _____

Automobiles S & S 15.00

Baggage or Express Train No. 3005.00

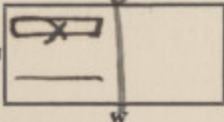
12.50

spa flowers 300.00

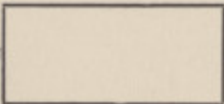
7.00

307.00

Garey Hand Funeral Home

Name of deceased Anna Nora O'Connor
 Date of death Aug 17 9:30 am
 Cause of death Auto myocarditis
 Place of death Residence
 Residence 318 1/2 W. Colonial Ave
 Age 71 Yrs 6 Mo's 5 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Catholic Church
 Date Friday Aug 18 1938 9 a.m
 Account charged Thos J. O'Connor
 Address 318 1/2 W. Colonial Ave
 Account guaranteed State
 Address _____
 Embalming J. Duss 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 Gr. Maple 90.00
 Casket with Copper Lin. ☒
 Style of Casket Oct H. C
 No. of Casket 1972 - Tampa
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate emerging
 Cemetery Greenwood
 Section N 1/2 - 31 Lot F. P.
 I Other Graves
Head of Grave
South
 X Grave on this date 
 Cremation P. B. Can 5.00
 Urn Can 5.00
 Single Grave Cloud Can 5.00
 Opening and Closing Grave etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram 21 1.60
 Minister Father Bishop
 Casket Wagon 92 5.00
 Physician Dr. Hatfield
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. 7660

Carey Hand Funeral Home

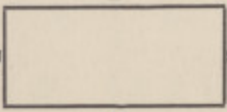
Name of deceased Mrs. Alice Mae Heller
 Date of death Aug 17 A.M.
 Cause of death Angina Pectoris
 Place of death Res
 Residence Rt # 3 - Box 6 - B. Chlanda
 Age 68 Y'rs 4 Mo's 2 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sun Aug - 21 1938 4-P. M
 Account charged Mrs. H. Heller
 Address Rt # 3 - Box 6 - B. Chlanda
 Account guaranteed _____
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 in. Box 150.00
 Casket with Copper Lin. ✓
 Style of Casket Oct 1/2 C
 No. of Casket 1575-9
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Woodlawn
 Section A 340- Lot 5 & 6
 I Other Graves 
 X Grave on this date _____
 Cremation 2 - Auto 5.00 10.00
 Urn 2 No. City
 Single Grave _____
 Opening and Closing Grave etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Major Walsh
 Casket Wagon 42 5.00
 Physician D. Redding
 County or City Burial _____
 Automobiles 5 & 5 15.00
 Baggage or Express Train No. 823000

Garey Hand Funeral Home

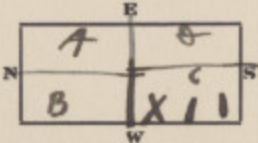
Name of deceased Amanda Grohowski
 Date of death Aug 18-38-1938
 Cause of death _____
 Place of death Residence
 Residence 512 West Amelia
 Age 85 Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Tues - Aug - 23 - 1938 4 P. M
 Account charged Mrs Sadie J. Manuel
 Address _____
 Account guaranteed Estate & Sonell Inc
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress White 5.00
 Underwear and Hose ✓
 Casket 6-3- In case 90.00
 Casket with Copper Lin. _____
 Style of Casket Oct. H P
 No. of Casket 1972 9
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate ✓
 Cemetery Greenwood
 Section G- Lot _____
 I Other Graves
 E
 N S
 W

 X Grave on this date _____
 Cremation Can P. B- 5.00
 Urn Cr 7.00
 Single Grave White 15.00
 Opening and Closing Grave _____
 Body Shipped to Family Can No Chg
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon (1) 5.00
 Physician Dr. C. Anderson
 County or City Burial _____
 Automobiles S V S- 15.00
 Baggage or Express Train No. 177 00

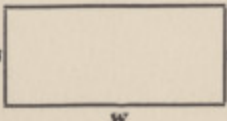
Garey Hand Funeral Home

Name of deceased Vivian Ruth Johns PM
 Date of death Thurs Aug-18-98
 Cause of death artery Polio Myelitis
 Place of death O. G. H.
 Residence Winter Garden
 Age 11 Y'rs 10 Mo's 18 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side Devel
 Date Sat Aug-20- 1938 3 P. M
 Account charged Foster Johns
 Address Winter Garden
 Account guaranteed small Ind -
 Address _____
 Embalming Dressing 35.00
 Robe, Suit, Dress _____ 5.00
 Underwear and Hose _____
 Casket 5-0 W-Plush 75.00
 Casket with Copper Lin. _____
 Style of Casket Ext H. C
 No. of Casket 1417-5-
 Outside Box R-9
 Shipping Case or Vault _____
 Handles Short Sit 4m
 Pillow Set yes
 Name Plate QD
 Cemetery Devel
 Section _____ Lot _____
 I Other Graves 
 X Grave on this date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave & etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon (12) 5.00
 Physician Dr. Harris
 County or City Burial _____
 Automobiles 5 & 5 15.00
 Baggage or Express Train No. \$150.00

Garey Hand Funeral Home

Name of deceased *Mrs Effie Hall*
 Date of death *Sat Aug 20-38* *PM*
 Cause of death *Sensitivity*
 Place of death *Res -*
 Residence *765- Penn Ave W.P.*
 Age *89* Y'rs *5* Mo's *25* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Grave side*
 Date *Mon Aug 22* 193*8* *10 AM*
 Account charged *J. O. Hale*
 Address *Winter Park*
 Account guaranteed _____
 Address _____
 Embalming *V. Dussing* *35.00*
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-3-62 cloth* *150.00*
 Casket with Copper Lin ☒
 Style of Casket *Pat H. C*
 No. of Casket *1311 S-*
 Outside Box *R-19*
 Shipping Case or Vault ☒
 Handles *Ext*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Winter Park*
 Section *61* Lot *C*
 I Other Graves _____
 X Grave on this date 
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave *7 & etc* *15.00*
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon *41* *5.00*
 Physician *Dr. Gardner*
 County or City Burial _____
 Automobiles *S & S* *15.00*
 Baggage or Express Train No. *220.00*

Garey Hand Funeral Home

Name of deceased James H. Grantham
 Date of death Sat. Aug-20-38 6:30 PM.
 Cause of death Pul. T. B.
 Place of death St. T. B. Hospital
 Residence Pompano Fla.
 Age 72 Y'rs 0 Mo's 14 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Dest
 Date _____ 193 _____ M
 Account charged J. B. Tamm
 Address 171 Lauderdale Fla.
 Account guaranteed _____
 Address _____
 Embalming & Dressing 25.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 in. Case 75.00
 Casket with Copper Liner ☒
 Style of Casket Oct H. C.
 No. of Casket 1972 9
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Dest
 Section _____ Lot _____
 I Other Graves 
 X Grave on this date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to 171 Lauderdale Fla
 R. R. Ticket _____
 Cash advanced Expenses 19.70
 Telegram _____
 Minister _____
 Casket Wagon (2) 10.00
 Physician Dr. Thompson St. T. B. Hosp
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 91 129.70

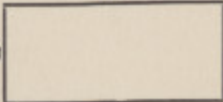
Sun Aug-21-38

Garey Hand Funeral Home

Name of deceased Helen Harris Kerlin
 Date of death Aug 21
 Cause of death Organic heart disease
 Place of death 1028 Wilford Drive
 Residence Minneola Fla
 Age 73 Y's 8 Mo's 13 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graveside
 Date Tuesday Aug 23 1938 4 P. M.
 Account charged Mr E. L. Kerlin
 Address 1028 Wilford Drive
 Account guaranteed _____
 Address _____
 Embalming Care of Body 10 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Grey Cope 90.00
 Casket with Copper Lin. _____
 Style of Casket Sgt. O.T.
 No. of Casket 72 Tampa
 Outside Box R-9
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Minneola Fla
 Section _____ Lot _____
 I Other Graves E
N S
W
 X Grave on this date
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev W. L. Luffie 5 00
 Casket Wagon (1)
 Physician Dr. T. A. Neal
 County or City Burial _____
 Automobiles SVS 15 00
 Baggage or Express Train No. _____ 135 00

Carey Hand Funeral Home

Name of deceased John Gilbert Clark.
 Date of death Aug 19th
 Cause of death Coronary Thrombosis
 Place of death Res
 Residence Daytona Beach, Fla
 Age 49 Y's 8 Mo's 27 Days
 Weight 175 Height 5 ft. 11 in. Eyes Brown
 Funeral at Carey Hand F. Home
 Date Monday Aug 22nd 1938 10 A.M.
 Account charged Baggett-Wetherly
 Address Daytona Beach, Fla.
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress Cremation 37.50
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body covered
 No. of Casket by auto 9:30 A.M.
 Outside Box Monday Aug 22-38
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body Cremated
 Name Plate 119 in. Monday
 Cemetery Aug 22-38
 Section _____ Lot _____
 I Other Graves E



 X Grave on this date _____
 Cremation Ashes expressed
 Urn To Baggett-Wetherly
 Single Grave Will Co.
 Opening and Closing Grave Daytona
 Body Shipped to Beach, Fla
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 37.50

Garry Hand Funeral Home

Name of deceased Leonard Aitken
 Date of death Aug. 18 - 6 P. M.
 Cause of death Killed in auto accident.
 Place of death Ayrton Road - Orlando
 Residence 106 Vanderbilt St Orlando
 Age 61 Y'rs 7 Mo's 26 Days
 Weight 170 Height 5 ft. 11 in. Eyes
 Funeral at Eiselstein-Wigginton
 Date Monday Aug 22 1938 9 A. M.
 Account charged Eiselstein-Wigginton
 Address Orlando Fla.
 Account guaranteed Chech
 Address
 Embalming
 Robe, Suit, Dress Cremation 37.50
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket Body arrived
 No. of Casket by auto Monday
 Outside Box 10:30 a-m.
 Shipping Case or Vault Aug 22-38
 Handles
 Pillow Set
 Name Plate Body Cremated
 Cemetery Monday 11 a.m.
 Section Aug 22-38 Lot
 I Other Graves
 X Grave on this date
 Cremation Cashes delivered
 Urn to Eiselstein-Wigginton
 Single Grave Tuesday 194-m.
 Opening and Closing Grave Aug 23-38
 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

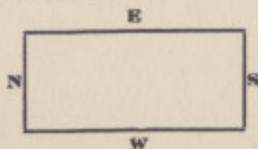
Gary Hand Funeral Home

Name of deceased Benjamin Wilson
 Date of death Aug 19 - 38
 Cause of death Acute Bacterial Endocarditis
 Place of death Bay Pines San Hospital
 Residence Orlando Fla
 Age 49 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Tues - Aug - 23 1938 10 A M
 Account charged _____
 Address _____
 Account guaranteed Mrs. B. Wilson
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body covered
 No. of Casket by Express from
 Outside Box Bay Pines
 Shipping Case or Vault 10-A-M-
 Handles Men 8-22-
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery _____
 Section 1-P-M- 8-23-38-
will call for ashes
 I Other Graves _____
used in B-4 N S
 X Grave on this date _____
 Cremation Cremation 50.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 50.00

Garey Hand Funeral Home

Name of deceased Jacob Hassler
 Date of death Aug 23- 7:45 a.m.
 Cause of death Nephrotic Nephrosis
 Place of death Residence
 Residence 339 E. Anderson St
 Age 77 Yrs 5 Mo's 12 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Thurs. Aug 25 1938 4:00 P.M.
 Account charged Mrs Jacob Hassler
 Address 339 E. Anderson St
 Account guaranteed _____
 Address _____
 Embalming Yes Dressing 25.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 State H. C. 200.00
 Casket with Copper Lin. _____
 Style of Casket 4118 Shmir
 No. of Casket State H. C.
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Woodlawn
 Section _____ Lot _____

I Other Graves



X Grave on this date

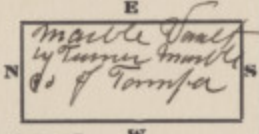
Cremation P. B. C. 5.00
Urn Organ
 Single Grave H. P. B car
 Opening and Closing Grave etc 15.00
 Body Shipped to Car Min
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev Morris Book
 Casket Wagon _____
 Physician Dr. W. Robinson
 County or City Burial _____
 Automobiles SVJ 15.00
 Baggage or Express Train No. _____
Fromely Has but Tony Little \$ 260.00

Garry Hand Funeral Home

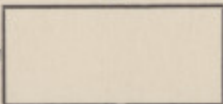
Schmerson

Name of deceased *Mrs. Elsie S. Heintze*
 Date of death *Aug 23rd 1938*
 Cause of death *cellulitis, pelvic*
 Place of death *D. F. N.*
 Residence *Jefferson Court Hotel*
 Age *48* Yrs *5* Mo's *5* Days
 Weight *145* Height *5* ft. *2* in. Eyes
 Funeral at *Chapel*
 Date *Thurs 8-25 1938* *11-A M*
 Account charged *Chas S Heintze*
 Address *Jefferson Court Hotel*
 Account guaranteed
 Address
 Embalming *& Dressing* *35.00*
 Robe, Suit, Dress
 Underwear and Hose *3.45*
 Casket *6-6- Metal Coffin* *300.00*
 Casket with Copper Lin.
 Style of Casket *State 1/2-e*
 No. of Casket *Stuart*
 Outside Box *Rtg*
 Shipping Case or Vault
 Handles *Ext*
 Pillow Set *yes Tailored*
 Name Plate
 Cemetery *West*
 Section Lot
 I Other Graves
 X Grave on this date
 Cremation *Hair dresser* *3.00*
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Red Bank N.J.*
 R. R. Ticket *2*
 Cash advanced *Full* *78.80*
 Telegram
 Minister *Rev Turner*
 Casket Wagon *(2) Dr. Egan* *10.00*
 Physician
 County or City Burial *426.85*
 Automobiles
 Baggage or ~~Express~~ Train No. *92* *1.60*
Fri Aug-26-38
428.45

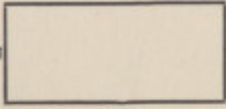
Garey Hand Funeral Home

Name of deceased *Miss Lois Esther Beasley*
 Date of death *Tue Aug-23-38- 8-PM*
 Cause of death *Natural causes*
 Place of death *St. Louis, Mo.*
 Residence *2018 W. Church St*
 Age *27* Y's *7* Mo's *7* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Baptist Church West Church*
 Date *Tue Aug-26- 1938 10 A M*
 Account charged *James E Beasley*
 Address *2018 West Church-*
 Account guaranteed *Insurance*
 Address _____
 Embalming *& Dressing* 25.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *5-6- White Plush* 85.00
 Casket with Copper Lin. _____
 Style of Casket *Oct H. Top*
 No. of Casket _____
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *Short*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Lake Hall*
 Section _____ Lot _____
 I Other Graves 
 X Grave on this date _____
 Cremation *1- out* 10.00
 Urn *2- out*
 Single Grave _____
 Opening and Closing Grave *4 etc* 15.00
 Body Shipped to _____
 R. R. Ticket ☒
 Cash advanced ☒
 Telegram ☒
 Minister *Rev J. E. Davis*
 Casket Wagon ☒
 Physician *Dr. Malbone*
 County or City Burial _____
 Automobiles *S & S* 15.00
 Baggage or Express Train No. *150* 00

Carey Hand Funeral Home

Name of deceased James E. Hisk
 Date of death Aug-20-38
 Cause of death Acute Heart attack
 Place of death Res
 Residence Fort Myers
 Age 79 Y'rs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Fort Myers
 Date 1938 M
 Account charged Spagner & Englehard
 Address T. H. Fort Myers
 Account guaranteed Ch
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose Body unwashed
 Casket Baggs a. ex 74
 Casket with Copper Lin. Thursday
 Style of Casket Night 8-23-38
 No. of Casket
 Outside Box Body Cremated
 Shipping Case or Vault 9-4-M
 Handles Wed 8-24-38
 Pillow Set
 Name Plate
 Cemetery
 Section Lot
wooden Box E
 I Other Graves

 X Grave on this date
 Cremation Ashes expressed To
 Urn
 Single Grave T. D. Hisk
 Opening and Closing Grave
 Body Shipped to Spring Grove
 R. R. Ticket Cincinnati
 Cash advanced
 Telegram Spring Grove Ave.
 Minister Cincinnati Ohio
 Casket Wagon
 Physician
 County or City Burial 37.50
 Automobiles
 Baggage or Express Train No.

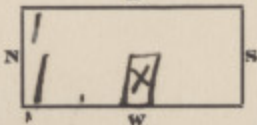
Garey Hand Funeral Home

Name of deceased Mrs Lucy Smith Ford
 Date of death Wed Aug 24-38 7-PM
 Cause of death Chro Myocarditis
 Place of death Res of Daughter
 Residence 618 E. Hamwood
 Age 89 Y'rs 1 Mo's 2 Days
 Weight 125 Height 5 ft. 6 in. Eyes
 Funeral at West
 Date 193 M
 Account charged Miss Carolyn E Ford
 Address 618 E. Hamwood
 Account guaranteed Estate
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress -
 Underwear and Hose -
 Casket 6-6 Metal Sil Tin 450.00
 Casket with Copper Lin. Inner
 Style of Casket State H.P.T.
 No. of Casket MODERN SHIRER
 Outside Box R-9
 Shipping Case or Vault -
 Handles Ext
 Pillow Set Yes Taylor
 Name Plate Name
 Cemetery West
 Section _____ Lot _____
 I Other Graves 
 X Grave on this date
 Cremation _____
 Urn Burial at
 Single Grave Madison Ind
 Opening and Closing Grave _____
 Body Shipped to Scottsburg Ind 64.65
 R. R. Ticket + P-
 Cash advanced _____
 Telegram (1) .50
 Minister _____
 Casket Wagon (2) 10.00
 Physician Dr J. M. Egan
 County or City Burial _____
 Automobiles \$ 560.15
 Baggage or Express Train No. 76

Fun Night 8-25-38

Garey Hand Funeral Home

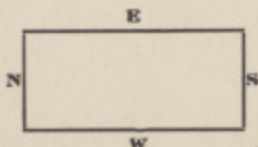
Name of deceased J. Walter Rex
 Date of death Aug 25 3:01 A.M.
 Cause of death Apoplexy. Cerebral Hemorrhage
 Place of death Residence
 Residence 52 E. Livingston ave
 Age 69 Y'rs 3 Mo's 2 Days
 Weight 145 Height 5 ft. 6 in. Eyes
 Funeral at Chapel
 Date Friday Aug 26 1938 4 P.M.
 Account charged Mrs. J. W. Rex
 Address 52 E. Livingston ave
 Account guaranteed Estab
 Address
 Embalming & Dressing 35.00
 Robe, Suit, Dress
 Underwear and Hosiery
 Casket 6-6- Metal Sit Tr 425.00
 Casket with Copper Lin. Inner
 Style of Casket State H. C. I. T.
 No. of Casket Sabine Shier
 Outside Box
 Shipping Case or Vault air Seal 125.00
 Handles ext
 Pillow Set yes 1869
 Name Plate Name 1938
 Cemetery Greenwood
 Section J- Lot 119
 E
 I Other Graves
 X Grave on this date
 Cremation Music 5.00
 Urn - 2 - P. B. Car 10.00
 Single Grave T. Car No Casing
 Opening and Closing Grave etc 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Rev. Dean Adcock
 Casket Wagon No Casing
 Physician Dr. C. Hoffman
 County or City Burial
 Automobiles SVS 15.00
 Baggage or Express Train No. 8 630.00



Carey Hand Funeral Home

Name of deceased Albert J. Schroder
 Date of death Aug 25
 Cause of death Phlebitis - Septic - Malignant
 Place of death Fort Lauderdale Fla
 Residence Fort Lauderdale Fla
 Age 66 Yrs 3 Mo's 4 Days
 Weight 170 Height 5 ft. 11 in. Eyes Blue
 Funeral at Fort Lauderdale Fla
 Date Aug 1938 M
 Account charged Fairchild F. Home
 Address Fort Lauderdale, 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 Thurs 12:55 P.m.
 Outside Box Aug 25 - 1938
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body Cremated
 Name Plate Friday 9 A.M.
 Cemetery Aug 26 - 1938
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation Ashes scattered

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician _____

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

\$ 37.50

Gary Hand Funeral Home

Name of deceased Charlie E. Saunders
 Date of death Fri Aug-26-38 3:45 AM
 Cause of death Arteriosclerosis Chp myo
 Place of death 219 N. Mill st
 Residence Anguilla Hotel
 Age 73 Y'rs 2 Mo's 3 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sun Aug-28-1938 3-PM
 Account charged H. R. Saunders
 Address 1018 Bryn Mawr ave
 Account guaranteed _____
 Address _____
 Embalming Dussing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket Levy Chg 60.00
 Casket with Copper Lin. ✓
 Style of Casket _____
 No. of Casket ✓
 Outside Box _____
 Shipping Case or Vault ✓
 Handles ✓
 Pillow Set ✓
 Name Plate ✓
 Cemetery ✓
 Section _____ Lot _____
 I Other Graves wooden Box
 X Grave on this date _____
 Cremation Cremation 50.00
 Urn _____
 Single Grave Body cremated
 Opening and Closing Grave 9-a m
 Body Shipped to Mon Aug-29-38
 R. R. Ticket _____
 Cash advanced will call for after
 Telegram _____
 Minister Dean Johnson 5.00
 Casket Wagon 1
 Physician Dr. Gray
 County or City Burial _____ 150.00
 Automobiles _____
 Baggage or Express Train No. _____

Carey Hand Funeral Home

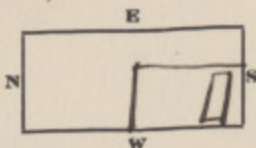
Name of deceased Infant Normandean
 Date of death Sept 28-38 4:30 AM
 Cause of death prematurity 6 1/2 mo
 Place of death Ogden
 Residence Ogden
 Age ✓ Yrs ✓ Mo's ✓ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 193 _____ M
 Account charged R. N. Normandean
 Address Ogden Uta Box 1
 Account guaranteed _____
 Address _____
 Embalming Cremation 5.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Body Cremated
 Style of Casket 9-4 in Men 8-29-
 No. of Casket _____
 Outside Box ashes to be scattered
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 I Other Graves
 E
 N S
 W

 X Grave on this date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician Dr. Collins 5.00
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____
will pay 30 Da

Garey Hand Funeral Home

Name of deceased Wm. W. Campbell
 Date of death Aug 29 - 7:15 A.M.
 Cause of death Arterio Sclerosis Smiley
 Place of death Res.
 Residence 511 W. Paramount St
 Age 81 Y's 11 Mo's 10 Days
 Weight 170 Height 6 ft. — in. Eyes —
 Funeral at Chapel
 Date Tues Aug 30 1938 4 P. M
 Account charged Mrs Fred Wilmett
 Address 521 - East Jackson St
 Account guaranteed Payments
 Address —
 Embalming + Dressing 25.00
 Robe, Suit, Dress —
 Underwear and Hose —
 Casket 6-3-Gr. Enp. 90.00
 Casket with Copper Lin. —
 Style of Casket Oct. H. C
 No. of Casket 1972 - Tampa
 Outside Box Reg -
 Shipping Case or Vault —
 Handles Ext
 Pillow Set yes
 Name Plate at Rest
 Cemetery G. Greenwood
 Section G. SW 1/4 Lot 54

I Other Graves
Bought Lot from
Mrs Burke



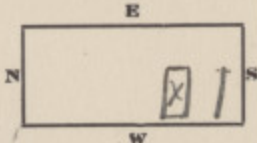
X Grave on this date

Cremation —
 Urn Burial Lot 25.00
 Single Grave —
 Opening and Closing Grave Tute 15.00
 Body Shipped to P. B. Car ~~5.00~~
 R. R. Ticket Car fare 3.00
 Cash advanced Mrs C 3.00
 Telegram —
 Minister —
 Casket Wagon —
 Physician Dr. F. Gray
 County or City Burial —
 Automobiles S & S 15.00
 Baggage or Express Train No. — \$ 180.00

Carey Hand Funeral Home

Name of deceased Mrs Julia H Grover
 Date of death Mon Aug-29 11:45 PM
 Cause of death _____
 Place of death 531- Margaret St
 Residence of Son Mrs L. M Dowd
 Age 76 Yrs 9 Mo's 3 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Wed Aug-31 1938 3 P. M
 Account charged Mrs L. M Dowd
 Address 531- Margaret St
 Account guaranteed Payments
 Address _____
 Embalming Dressing PM 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 Gr Dowd 90.00
 Casket with Copper Lin. ✓
 Style of Casket Oct HC
 No. of Casket 1972 9
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ent
 Pillow Set Yes
 Name Plate _____
 Cemetery Greenwood
 Section P Lot 22

I Other Graves



X Grave on this date

Cremation

Urn Munie 5.00

Single Grave

Opening and Closing Grave T & etc 15.00

Body Shipped to T. Car No Chg

R. R. Ticket

Cash advanced

Telegram

Minister Rev Sanoet

Casket Wagon No Chg

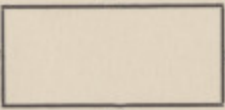
Physician Dr Hatfield

County or City Burial

Automobiles S & S 15.00

Baggage or Express Train No. 760.00

Carey Hand Funeral Home

Name of deceased *Mrs Mary Jane McAllister*
 Date of death *Aug - 30 - 38* *P.M.*
 Cause of death *Epilepsy Senile Dementia*
 Place of death *Res*
 Residence *443 Pershing ave*
 Age *78* Yrs *8* Mo's *—* Days *—*
 Weight *135* Height *5* ft. *6* in. Eyes *—*
 Funeral at *Chapel*
 Date *Thurs Sept 1 - 1938* *2 - P. M.*
 Account charged *—*
 Address *—*
 Account guaranteed *Postal Savings*
 Address *—*
 Embalming *Yes*
 Robe, Suit, Dress *White # 26512R* *35.00*
 Underwear and Hose *20 - 1/2* *3.00*
 Casket *6-6 Metal Sid Fin* *395.00*
 Casket with Copper Lin. *Inner*
 Style of Casket *State H. C.*
 No. of Casket *Lampkin*
 Outside Box *Yes*
 Shipping Case or Vault *On Seal* *100.00*
 Handles *Ext*
 Pillow Set *yes*
 Name Plate *Mother*
 Cemetery *Pershing Near Alton*
 Section *—* Lot *—*
 I Other Graves 
 X Grave on this date *—*
 Cremation *—*
 Urn *—*
 Single Grave *—*
 Opening and Closing Grave *Del Vault* *25.00*
 Body Shipped to *—*
 R. R. Ticket *Missie* *5.00*
 Cash advanced *—*
 Telegram *—*
 Minister *—*
 Casket Wagon *(1)* *5.00*
 Physician *Dr. J. H. Andrews*
 County or City Burial *—*
 Automobiles *S V S* *35.00*
 Baggage or Express Train No. *62550*

Carey Hand Funeral Home

Name of deceased *Mrs Helen Winston Beskow*
 Date of death *Aug - 29 - 38*
 Cause of death _____
 Place of death *Daytona Beach Fla*
 Residence *Pine Ave Daytona Beach*
 Age *68* Y's *3* Mo's *18* Days _____
 Weight *150* Height *5* ft. *8* in. Eyes _____
 Funeral at *Chapel*
 Date *Wed 8-31-1938* *11 A* *M*
 Account charged *Baggett Hardware In Orlando*
 Address *Daytona Beach Fla*
 Account guaranteed _____
 Address _____
 Embalming *Cremation* *37.50*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *Body unwood*
 Casket with Copper Lin. *y auto*
 Style of Casket _____
 No. of Casket *1045-A M-8-31-*
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set *Body Cremated*
 Name Plate *1-P. M. Wed. 8-31-38*
 Cemetery _____
 Section _____ Lot _____
 I Other Graves *wooden*
B-4

E
N
S
W

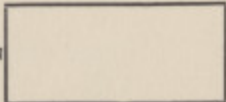
 X Grave on this date _____
 Cremation *Ashes Expressed To*
 Urn *Mrs F. B. Ussher*
 Single Grave *18-Pine Blvd*
 Opening and Closing Grave _____
 Body Shipped to *Coopers town*
 R. R. Ticket *New York*
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. *37.50*

Garry Hand Funeral Home

54*

Name of deceased Richard Eugene Mayer
 Date of death Sept 1
 Cause of death Typhus
 Place of death O. G. N.
 Residence 2615 N. Orange ave
 Age 7 Y'rs 3 Mo's 24 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at St James Church
 Date Friday Sept 2nd 1938 9 A. M
 Account charged Walter Mayer
 Address 2615 N. Orange ave
 Account guaranteed _____
 Address _____
 Embalming & Dressing 25.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 4/6 White oak 45.00
 Casket with Copper Lin. _____
 Style of Casket Oct O. T. N. C.
 No. of Casket 1ampa
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Short -
 Pillow Set Yes
 Name Plate Crucifix
 Cemetery Woodlawn
 Section _____ Lot _____

I Other Graves



X Grave on this date _____

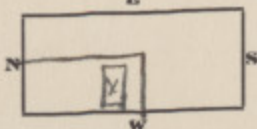
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave Tomb & Oct 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Father O' Farrell
 Casket Wagon _____
 Physician Dr. Leary
 County or City Burial _____
 Automobiles Auto 5.00
 Baggage or Express Train No. 9000

Garey Hand Funeral Home

Name of deceased James T. Shiles
 Date of death Sept 1 - 7:30 a.m.
 Cause of death Coronary Heart Failure
 Place of death County Home
 Residence 1419 Catherine St
 Age 34 Yrs 7 Mo's 1 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel 3rd
 Date Sat. Sept 3 - 1938 11 a.m.
 Account charged Mrs Pearl Shiles
 Address 1419 Catherine St
 Account guaranteed Insurance
 Address _____
 Embalming Yes
 Robe, Suit, Dress Blue Suits
 Underwear and Hose _____
 Casket 6/3 Grey Wood
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 1572 Tampa X
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Greenwood
 Section G. N.W. 1/4 Lot 54

I Other Graves

Burke Lot



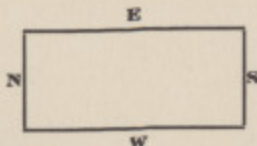
X Grave on this date

Cremation Burial Lot 25.00
 Urn _____
 Single Grave Y 15.00
 Opening and Closing Grave T & S
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____ 5.00
 Casket Wagon (1)
 Physician Dr. Fred Matthes
 County or City Burial _____ 15.00
 Automobiles S Y S
 Baggage or Express Train No. 175.00

Garey Hand Funeral Home Coland

Name of deceased John Jessie
 Date of death Sept 2-38 815 A
 Cause of death Senility
 Place of death Res
 Residence Winter Park
 Age about 70 rs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Grave Side
 Date 193 M
 Account charged County
 Address
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3-4 In Corund 14.50
 Casket with Copper Lin.
 Style of Casket Stark & Strong
 No. of Casket
 Outside Box done the state
 Shipping Case or Vault
 Handles Coland Home
 Pillow Set \$4.50 for this service
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

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

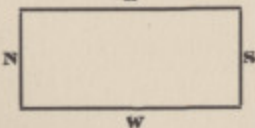
14.50

Carey Hand Funeral Home

Name of deceased Mr Frank H. Seidel
 Date of death Sept-3-38 9- AM
 Cause of death Auto Accident
 Place of death Near Gary near Gainesville
 Residence Gotha Fla
 Age 76 Y's 11 Mo's 7 Days
 Weight 200 Height 5 ft. 9 in. Eyes
 Funeral at Chapel
 Date Wed Sept 5 1938 5 P. M
 Account charged Est Seidel
 Address Gotha Fla
 Account guaranteed Est
 Address
 Embalming Yes Dressing 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-6 Metal Sil Fin 245.00
 Casket with Copper Lin.
 Style of Casket State 1/2-C
 No. of Casket Russell Shrine
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext
 Pillow Set yes W
 Name Plate
 Cemetery Woodlawn
 Section Lot

I Other Graves

Sancti Memorial
Ballou



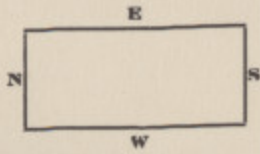
X Grave on this date

Cremation 2 P. B. Car 10.00
 Urn 1-
 Single Grave Music 5.00
 Opening and Closing Grave T & etc 15.00
 Body Shipped to
 R. R. Ticket Pd by the Son
 Cash advanced Jones F. Home 25.00
 Telegram
 Minister Rev George Traff
 Casket Wagon to Gainesville 30.00
 Physician Sheriff of Gainesville
 County or City Burial
 Automobiles S.V.S. 15.00
 Baggage or Express Train No. 3 75.00

Carey Hand Funeral Home

Name of deceased Mrs. Pauline Bellom
 Date of death Sat Sept 3-38 A.M.
 Cause of death Auto Accident
 Place of death New Bony Near Gainesville
 Residence Ocoee Fla
 Age 55 Y's _____ Mo's _____ Days _____
 Weight 200 Height 5 ft. 7 in. Eyes _____
 Funeral at Chapel
 Date Wed. Sept 7 1938 5 P.M.
 Account charged Mrs. Herman Bellom
 Address Ocoee Fla
 Account guaranteed Estate
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-6 Metal Set Fin 265.00
 Casket with Copper Lin. _____
 Style of Casket State 1/2 C
 No. of Casket Quaker Shiner
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes W
 Name Plate _____
 Cemetery Woodlawn
 Section _____ Lot _____

I Other Graves _____
Double funeral
Leider



X Grave on this date _____

Cremation 2-P.B. Car 10.00
 Urn _____ 5.00
 Single Grave Unice 15.00
 Opening and Closing Grave T & etc
 Body Shipped to _____
 R. R. Ticket and Service to 25.00
 Cash advanced Jones H. Home
 Telegram _____
 Minister Rev. George Traff 30.00
 Casket Wagon To Gainesville
 Physician Sheriff at Gainesville
 County or City Burial _____
 Automobiles S V S # 2- 15.00
 Baggage or Express Train No. 4 00.00

Garry Hand Funeral Home

Name of deceased *Mrs. J. Elizabeth Jennings*
 Date of death *Sept. 2-38*
 Cause of death *Acute Heart Failure*
 Place of death *Res*
 Residence *Ocala*
 Age *50* Y'rs Mo's Days
 Weight *115* Height *5* ft. *6* in. Eyes *blue*
 Funeral at *Ocala* *Committal in Chapel* *up in Chapel*
 Date *Sat - Sept. 3 - 1938* *1 P. M.*
 Account charged *Miss T. Home*
 Address *Ocala Fla*
 Account guaranteed *OK*
 Address _____
 Embalming *Cremation* 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *Body Unwired*
 Casket with Copper Lin. *by Auto*
 Style of Casket *1230 P. M.*
 No. of Casket *Sat Sept 3-38*
 Outside Box _____
 Shipping Case or Vault _____
 Handles *Body Cremated*
 Pillow Set *2 P. M.*
 Name Plate *9-3-38*
 Cemetery _____
 Section _____ Lot _____
 I Other Graves E
modern Box N S
W
 X Grave on this date _____
 Cremation *Ashes Expressed to*
 Urn *Heirs Funeral Home*
 Single Grave *Ocala Fla*
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles 37.50
 Baggage or Express Train No. _____

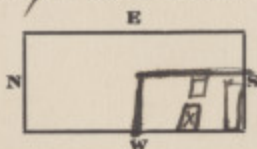
Garry Hand Funeral Home

Name of deceased Carl Hubert Smith
 Date of death Sept 2 - 1938 a m
 Cause of death Convulsions
 Place of death Charlotte N. Car
 Residence Orlando Fla
 Age Y's 9 Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Chapel
 Date Mon Aug - 5 1938 11 A M
 Account charged Homer Smith
 Address Shaw
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 3-0 W Plank
 Casket with Copper Lin.
 Style of Casket Oct St. T
 No. of Casket
 Outside Box B+g
 Shipping Case or Vault Cement by Family
 Handles
 Pillow Set
 Name Plate
 Cemetery Greenwood
 Section N SW 1/4 Lot 15

I Other Graves

on the
Shaw Lot

X Grave on this date



Cremation
 Urn
 Single Grave
 Opening and Closing Grave Teste
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Rev Austin Reeves
 Casket Wagon D
 Physician
 County or City Burial
 Automobiles Closed Car
 Baggage or Express Train No.

10 00

5 00

5 00

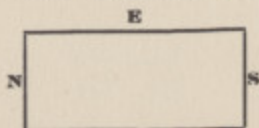
Body arrived on train
 91- Sat 9-3-38

20 00

Garey Hand Funeral Home

Name of deceased Mr. Ferdinand Roety
 Date of death Sept - Aug 31
 Cause of death Angina Pectoris
 Place of death Res.
 Residence Lake Placid
 Age 56 Y'rs 1 Mo's 21 Days
 Weight 140 Height 5 ft. — in. Eyes —
 Funeral at Lake Placid
 Date — 193— M
 Account charged Stephens, T. Home
 Address Sebring Fla
 Account guaranteed Yes
 Address —
 Embalming Cremation 50-
 Robe, Suit, Dress — 25-
 Underwear and Hose See Orange Box
 Casket —
 Casket with Copper Lin. —
 Style of Casket Body covered
 No. of Casket by auto 7-PM
 Outside Box Sat 9-3-38
 Shipping Case or Vault —
 Handles Body Crampled
 Pillow Set 9-4 on Sun
 Name Plate 9-4-38
 Cemetery —
 Section — Lot —

I Other Graves See Orange Box
and #
 X Grave on this date —



Cremation will call for Ashes
 Urn —
 Single Grave —
 Opening and Closing Grave —
 Body Shipped to —
 R. R. Ticket —
 Cash advanced —
 Telegram —
 Minister —
 Casket Wagon —
 Physician —
 County or City Burial —
 Automobiles —
 Baggage or Express Train No. —

37.50

22.50

60.00

Carey Hand Funeral Home

Name of deceased Harry Daniel Fitzell
 Date of death Sun Sept 4-38 7:43 AM
 Cause of death Cerebral Hemorrhage
 Place of death Res
 Residence Cumy Ford Rd
 Age 60 Yrs 6 Mo's 2 Days
 Weight 180 Height 5 ft. 7 in. Eyes
 Funeral at Chapel
 Date Wed Sept 7 1938 3 P. M
 Account charged Mrs Harry Fitzell
 Address Orlando Rd 4
 Account guaranteed Estate
 Address
 Embalming + Dressing 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-6 Metal Smokey 425.00
 Casket with Copper Lin. Inner
 Style of Casket State N. C & F.
 No. of Casket Rushin
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate
 Cemetery
 Section Lot
 I Other Graves

E
N
S
W

Vault
12

 X Grave on this date
 Cremation Vault P. Inc 5.00
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Rev A Fred Turner
 Casket Wagon X Res 10.00
 Physician Dr Redding
 County or City Burial
 Automobiles
 Baggage or Express Train No.

Garey Hand Funeral Home

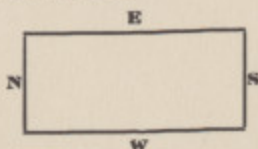
Name of deceased Nathaniel T. Shuggans
 Date of death Sept 2 - 38
 Cause of death Crisis of Liver
 Place of death Res
 Residence Lake Worth
 Age 71 Y's 10 Mo's 4 Days _____
 Weight 110 Height 5 ft 5 in. Eyes _____
 Funeral at Lake Worth
 Date _____ 1938 M _____
 Account charged Lake Worth T. Home
 Address Lake Worth Fla
 Account guaranteed _____
 Address _____
 Embalming Cremation
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body Cremated
 Casket with Copper Lin. by Express
 Style of Casket 1-PM Sept 6-38
 No. of Casket _____
 Outside Box Body Cremated
 Shipping Case or Vault 3-PM-9-6-38
 Handles _____
 Pillow Set Decor Expressed A
 Name Plate Lake Worth T. Home
 Cemetery Lake Worth Fla -
 Section _____ Lot _____

37.50

I Other Graves

woodm Box

X Grave on this date



Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician _____

County or City Burial _____

Automobiles _____

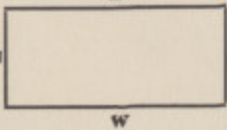
Baggage or Express Train No. _____

37.50

Garry Hand Funeral Home

Name of deceased Mrs Jane M^e Bond
 Date of death Wed Sept 2-38 8:45 PM
 Cause of death Pulmonary T. B.
 Place of death State T. B. Hospital
 Residence Tampa
 Age 41 Yrs - Mo's 14 Days -
 Weight - Height - ft. - in. Eyes -
 Funeral at West
 Date - 193 M
 Account charged Pat Whidden
 Address Baitow Fla
 Account guaranteed check
 Address -
 Embalming Yes 25.00
 Robe, Suit, Dress -
 Underwear and Hose -
 Casket Mrs Whidden
 Casket with Copper Lin. Come to
 Style of Casket Delande ja Body
 No. of Casket -
 Outside Box -
 Shipping Case or Vault -
 Handles -
 Pillow Set -
 Name Plate -
 Cemetery -
 Section - Lot -
 I Other Graves -
 X Grave on this date -
 Cremation -
 Urn -
 Single Grave -
 Opening and Closing Grave -
 Body Shipped to -
 R. R. Ticket -
 Cash advanced -
 Telegram -
 Minister -
 Casket Wagon -
 Physician Dr W. O. Fowler 25.00
 County or City Burial -
 Automobiles -
 Baggage or Express Train No. -

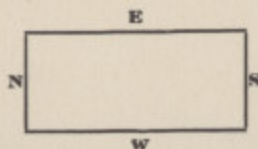
Garry Hand Funeral Home

Name of deceased William E. Eyer
 Date of death Wed. Sept. 1 - 1938 AM
 Cause of death Phil T. B.
 Place of death State T.B. Hospital
 Residence Bartons Fla
 Age 44 Y'rs 9 Mo's 13 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at West
 Date _____ 1938 M
 Account charged Pat Whidden Und. C
 Address Bartons Fla
 Account guaranteed check
 Address _____
 Embalming Yes 25.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Mr. Pat Whidden of
 Casket with Copper Lin. Bartons
 Style of Casket Came for the Body
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 I Other Graves _____
 X Grave on this date 
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister West
 Casket Wagon _____
 Physician Dr. Thompson
 County or City Burial T.B. H.
 Automobiles _____
 Baggage or Express Train No. 25.00

Garey Hand Funeral Home

Name of deceased John Blair Carns.
 Date of death Sept 1st
 Cause of death Pulmonary Tuberculosis
 Place of death Res.
 Residence St Petersburg.
 Age 58 Y's 7 Mo's 4 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at St Petersburg
 Date Sept 1938 M
 Account charged Ralph G. Cooksey and S
 Address St Petersburg Fla
 Account guaranteed Chech
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body Arrived
 Casket with Copper Lin. Wed 11:30
 Style of Casket A.M. Sept 7-38
 No. of Casket by auto
 Outside Box _____
 Shipping Case or Vault Body Cremated
 Handles Wed 2 P.M.
 Pillow Set Sept 7-1938
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

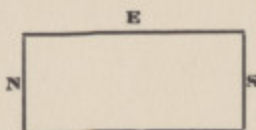
Cremation Ashes expressed.
 Urn to - J. Fred Carns
 Single Grave 227 Legion St
 Opening and Closing Grave Slerry Ca
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Garey Hand Funeral Home

Name of deceased Edward Lee Bassett
 Date of death Sept 9 - 1938
 Cause of death Intestinal obstruction
 Place of death Stuart Fla.
 Residence Stuart Fla
 Age 68 Y'rs 4 Mo's 12 Days
 Weight 115 Height 5 ft. 10 in. Eyes Grey
 Funeral at Stuart Fla
 Date Sept 1938 M
 Account charged Johns Mortuary
 Address Stuart Fla
 Account guaranteed Check
 Address _____
 Embalming _____
 Robe, Suit, Dress Cremation 3750
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket by auto Wed
 Outside Box 1:30 P.M.
 Shipping Case or Vault Sept 7-38
 Handles _____
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery 2 P.M. Wed
 Section Sept 7-38 Lot _____

I Other Graves



X Grave on this date

Cremation Ashes 7 hold

Urn will call for

Single Grave _____

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician _____

County or City Burial _____

Automobiles _____

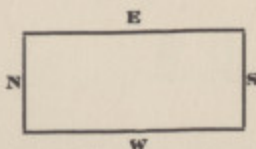
Baggage or Express Train No. _____

\$137.50

Garrey Hand Funeral Home

Name of deceased Thomas Armstrong
 Date of death Sept 6 - 1938
 Cause of death Strangulated Hernia
 Place of death Custis Fla
 Residence Mt Lora Fla
 Age 90 Y'rs 10 Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Mt Lora Fla
 Date Sept 8 1938 M
 Account charged Rehbaum and Co
 Address Mt Lora Fla
 Account guaranteed Check
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body approved
 No. of Casket Wed 4 p. m.
 Outside Box Sept 7 - 1938
 Shipping Case or Vault by auto
 Handles _____
 Pillow Set Body Cremated
 Name Plate Salon 1 hour
 Cemetery Sept 8 - 38
 Section _____ Lot _____

I Other Graves

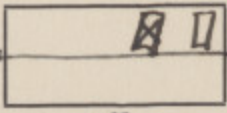


X Grave on this date

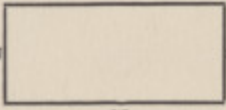
Cremation Ashes expressed to
 Urn Rehbaum and Co
 Single Grave Mt Lora Fla
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Garey Hand Funeral Home

Name of deceased Mrs Helen S Averill
 Date of death Sept 7th 3 P.M.
 Cause of death Pneumonia
 Place of death Residence
 Residence W. Tyler St.
 Age 85 Y'rs — Mo's 7 Days —
 Weight — Height — ft. — in. Eyes —
 Funeral at Chapel
 Date Fri Sept 9 1938 10-A M
 Account charged S. Wayne Gray Undert
 Address —
 Account guaranteed Estate & P. Savings
 Address —
 Embalming & Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 - Guy Omega 134 110.00
 Casket with Copper Lin. —
 Style of Casket Ext. N. E
 No. of Casket —
 Outside Box R-9
 Shipping Case or Vault —
 Handles Ext
 Pillow Set yes
 Name Plate —
 Cemetery Greenwood
 Section B E 1/2 Lot 109
 I Other Graves 
 X Grave on this date —
 Cremation Spr of Flowers 10.00
 Urn — 5.00
 Single Grave 1 - Auto 15.00
 Opening and Closing Grave 1 - etc 5.00
 Body Shipped to —
 R. R. Ticket —
 Cash advanced —
 Telegram —
 Minister Rev Morris Brook 5.00
 Casket Wagon 1
 Physician —
 County or City Burial —
 Automobiles S & S 15.00
 Baggage or Express Train No. — 200.00

Garry Hand Funeral Home

Name of deceased Lyman F. Jordan
 Date of death Sept - 7 - 38
 Cause of death Myocarditis
 Place of death Res.
 Residence Lake Wales
 Age 81 Y'rs 193 Mo's 193 Days M
 Weight 150 Height 5 ft. 10 in. Eyes Blue
 Funeral at Lake Wales
 Date Sept 8 - 1938
 Account charged Drafts Funeral Home
 Address Lake Wales Fla
 Account guaranteed OK
 Address Cum gratia
 Embalming 37.50
 Robe, Suit, Dress Body covered
 Underwear and Hose Body covered
 Casket by auto - 330 PM
 Casket with Copper Lin. thru Sept 8 -
 Style of Casket Body covered
 No. of Casket Body covered
 Outside Box 9 AM 9-9-38
 Shipping Case or Vault Body covered
 Handles body expressed to
 Pillow Set Drafts F. Home
 Name Plate Lake Wales
 Cemetery Fla
 Section Lot
 I Other Graves wooden Box 
 X Grave on this date wooden Box
 Cremation wooden Box
 Urn wooden Box
 Single Grave wooden Box
 Opening and Closing Grave wooden Box
 Body Shipped to wooden Box
 R. R. Ticket wooden Box
 Cash advanced wooden Box
 Telegram wooden Box
 Minister wooden Box
 Casket Wagon wooden Box
 Physician wooden Box
 County or City Burial wooden Box
 Automobiles wooden Box
 Baggage or Express Train No. wooden Box

37.50

Garry Hand Funeral Home

Name of deceased *Infant Mrs O.E. McQuinn*
 Date of death *Sept 9* *8:45 P.M.*
 Cause of death *Still Birth*
 Place of death *O.E.H.*
 Residence *Apopka Fla*
 Age *1* Y's *1* Mo's *1* Days *1*
 Weight *1* Height *1* ft. *1* in. Eyes *1*
 Funeral at *Grave Side*
 Date *Sept 9* *1938* *5 P.M.*
 Account charged *O.E. McQuinn*
 Address *Apopka Fla.*
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *2-0 White P.* *10.00*
 Casket with Copper Lin. _____
 Style of Casket *Spr. H.M.*
 No. of Casket *4m*
 Outside Box *R-9*
 Shipping Case or Vault ☒
 Handles *Small*
 Pillow Set *1*
 Name Plate *O.E.*
 Cemetery *Apopka*
 Section _____ Lot _____
 I Other Graves

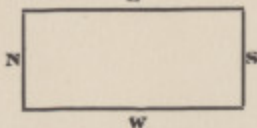
N
E

W
S

 X Grave on this date _____
 Cremation *Temporarily Bought Casket*
 Urn *done there own work*
 Single Grave _____
 Opening and Closing Grave *None*
 Body Shipped to *Permit for same*
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician *Dr. M. Bude*
 County or City Burial _____
 Automobiles *10.00*
 Baggage or Express Train No. _____

Gary Hand Funeral Home

Name of deceased *Infant of Mrs R. D. Quinlan*
 Date of death *Sept 9-1938*
 Cause of death *Still Birth*
 Place of death *Ogden*
 Residence *Pine Castle Fla*
 Age *Yrs* *Mo's* *Days*
 Weight *Height* *ft.* *in.* Eyes
 Funeral at
 Date *1938* *M*
 Account charged *Harrison County*
 Address *Pine Castle Fla*
 Account guaranteed *Cash*
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose *Calumet* *5.00*
 Casket
 Casket with Copper Lin
 Style of Casket *Body Cremated*
 No. of Casket *Fl. 2nd Monday*
 Outside Box *Sept 12-38*
 Shipping Case or Vault
 Handles
 Pillow Set *Ashes to be*
 Name Plate *scattered*
 Cemetery *Greenwood Cemetery*
 Section *if not called Lot* *for*
in 6 mos *E*
 I Other Graves
 X Grave on this date
 Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician *C. Collins*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *5.00*



Garry Hand Funeral Home

Name of deceased Mr. Henry Bernard
 Date of death Sept 9 5:45 P.M.
 Cause of death Shock, Internal Injuries
 Place of death P. O. N.
 Residence N. Hughey
 Age Yrs Mo's Days
 Weight 135 Height 5 ft. 6 in. Eyes
 Funeral at Chapel
 Date Mon - Sept 12 1938 10 A M

Account charged

Address

Account guaranteed

Address

Embalming + Dressing 35.00

Robe, Suit, Dress Blue Serge 15.00

Underwear and Hose

Casket 6-6 Metal B.S. & Tm 340.00

Casket with Copper Lin. Inner

Style of Casket State N. C.

No. of Casket Hammam

Outside Box Reg

Shipping Case or Vault ✓

Handles Ext

Pillow Set yes

Name Plate

Cemetery Greenwood

Section Lot

I Other Graves

Grav. Lot Diets

X Grave on this date

Cremation

Urn P. B. Car 5.00

Single Grave Car Min 5.00

Opening and Closing Grave 15.00

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister E. Lee Smith 5.00

Casket Wagon (1)

Physician Dr. Brandahl

County or City Burial

Automobiles SVS 15.00

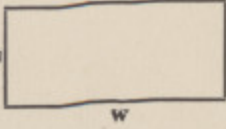
Baggage or Express Train No.

Full from Ho of Tech 435.00

201 - W. Con Ave

4-PM 9-9-38

Garey Hand Funeral Home

Name of deceased Harry Rogers Brewer
 Date of death Sept 12 6 P.M.
 Cause of death Infection of right hand
 Place of death C. G. H.
 Residence Maitland
 Age 60 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave side
 Date Sat Sept 10 1938 4 P. M
 Account charged Grace Brewer
 Address Maitland
 Account guaranteed Estate
 Address _____
 Embalming Dressing 35 00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 In Cope 100 00
 Casket with Copper Lin. _____
 Style of Casket Oct N. T
 No. of Casket _____
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Short
 Pillow Set Yes
 Name Plate _____
 Cemetery Maitland
 Section _____ Lot _____
on the Stone Lot
 I Other Graves 
 X Grave on this date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave T.Y. Sta 15 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon (1) 5 00
 Physician Dr
 County or City Burial _____
 Automobiles J V S 15 00
 Baggage or Express Train No. 2 170 00

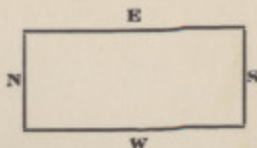
Garey Hand Funeral Home

Name of deceased Mrs. Lizzie Adkins
 Date of death Sept. 11
 Cause of death Cancer of Cervix Uteri
 Place of death Res
 Residence Conway Rd & Bunkley Ave
 Age 47 Y's 10 Mo's 21 Days
 Weight 125 Height 5 ft. 3 in. Eyes
 Funeral at Best
 Date 193 M
 Account charged James N Adkins
 Address Delmar Conway Rd & Bunkley
 Account guaranteed
 Address
 Embalming J. Dussing
 Robe, Suit, Dress White
 Underwear and Hose
 Casket 6-3- W Cup
 Casket with Copper Lin.
 Style of Casket Spr. N. Cap.
 No. of Casket 72 Tampa
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Best
 Section Lot
 I Other Graves
 X Grave on this date
 Cremation
 Urn Burial at Salem Ga
 Single Grave
 Opening and Closing Grave
 Body Shipped to Athens Ga
 R. R. Ticket 1460 - 975
 Cash advanced
 Telegram
 Minister
 Casket Wagon (2)
 Physician Dr. Neal
 County or City Burial
 Automobiles
 Baggage or Express Train No. 92

35.00
 5.00
 1.25
 70.00

24 35

10 00



The Baby who died
 was placed in the Outside Box with
 Mrs Adkins Baby case lined

Garey Hand Funeral Home

Name of deceased Johanna Krantz
 Date of death Sept 12 - 8:30 A.M.
 Cause of death Septic infection
 Place of death Levin's nursing home
 Residence 641 Hilcrest Ave
 Age 73 Y'rs 6 Mo's 27 Days
 Weight 120 Height 5 ft. 3 in. Eyes Blue
 Funeral at Family Room - Chapel
 Date Tuesday Sept 13 1938 9 P.M.
 Account charged Mrs. Grace Richard
 Address 641 Hilcrest Ave
 Account guaranteed _____
 Address _____
 Embalming & Dressing 25.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket & Service chg 25.00
 Casket with Copper Lin. _____
 Style of Casket Body cremated
 No. of Casket Wed 9 A.M.
 Outside Box Sept 14 - 1938
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Cremation 50.00
 Section _____ Lot _____
 I Other Graves E

E
N
S
W

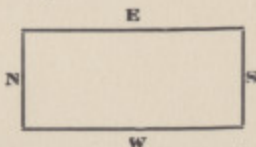
 X Grave on this date _____
 Cremation Hold Ashes
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev George Traff
 Casket Wagon _____
 Physician Li.
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

~~100.00~~
 100.00

Garry Hand Funeral Home

Name of deceased *Helen F. Davis*
 Date of death *Sept 9*
 Cause of death *metastatic Carcinoma*
 Place of death *Lee Land Fla*
 Residence *Orange City Fla*
 Age *64* Y's *Mo's* Days
 Weight *140* Height *5* ft. *6* in. Eyes *Black*
 Funeral at *Lee Land Fla*
 Date *Sept* 193*8* M
 Account charged *Allen - Summerhill*
 Address *Lee Land Fla* Unit *6*
 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 Monday*
 Outside Box *10:15 a.m.*
 Shipping Case or Vault *Sept 12-38*
 Handles
 Pillow Set
 Name Plate *Body Cremated*
 Cemetery *Monday 11:30 a.m.*
 Section *Sept 12 1938* Lot

I Other Graves



X Grave on this date

Cremation *Will call for Ashes*
 Urn

Single Grave

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister

Casket Wagon

Physician

County or City Burial

Automobiles

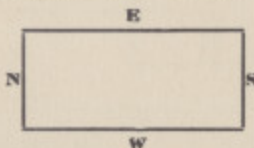
Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Edwin Theo Hanning
 Date of death Sept 12 - 38 6:15 P.M.
 Cause of death Gonorrhea Oculum
 Place of death Res
 Residence Milland Rd - Winter Park
 Age 78 Y's 9 Mo's 11 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Thurs Sept 15 1938 11 A.M.
 Account charged Mrs. Emily Hanning
 Address Winter Park Fla
 Account guaranteed Estate
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose _____
 Casket 6-6 Gr. But 61th 195.00
 Casket with Copper Lin. ☒
 Style of Casket State N.C.
 No. of Casket 37 Tampa
 Outside Box Reg -
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate ☒
 Cemetery Palm Cemetery W. P.
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave To etc 15.00

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister Rev. Victor B. Chicom 5.00

Casket Wagon (1)

Physician Dr. E. Evans

County or City Burial _____

Automobiles S & S 15.00

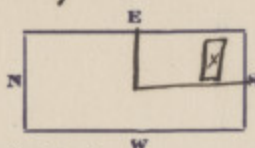
Baggage or Express Train No. 265.00

Garey Hand Funeral Home

Name of deceased *Mrs. Clara T. Mazurek*
 Date of death *Tues. Sept 13-38* *4:45 AM*
 Cause of death *Coronary Thrombosis*
 Place of death *Rel.*
 Residence *523 - Daniels*
 Age *55* Y'rs *11* Mo's *2* Days
 Weight *145* Height *5* ft. *6* in. Eyes
 Funeral at *Catholic Church*
 Date *Sept 16* 193*8* *9 A.M.*
 Account charged *John Mazurek*
 Address *523 Daniel St*
 Account guaranteed *Insurance*
 Address
 Embalming *+ Dressing* *35.00*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *6-6- Metal S&T* *225.00*
 Casket with Copper Lin.
 Style of Casket *State 1/2-E*
 No. of Casket *Raleigh* *shin*
 Outside Box *Rt 19*
 Shipping Case or Vault
 Handles *Ex*
 Pillow Set *yes*
 Name Plate *crucifix*
 Cemetery *Greenwood*
 Section *S* *SE 1/4* Lot *53*

I Other Graves

Head of Grave
East



X Grave on this date

Cremation *Burnial Lot* *43.75*
 Urn *P.B. Car* *5.00*
 Single Grave *Car Minister* *5.00*
 Opening and Closing Grave *T & etc* *15.00*
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister *Father Bishop*
 Casket Wagon *(1)* *5.00*
 Physician *Dr. Anderson*
 County or City Burial
 Automobiles *S & S* *15.00*
 Baggage or Express Train No. *348.75*

Telegrams

5.30
\$ 354.05
8.76
8.00

1 closed ca
1 car No chg

359.81

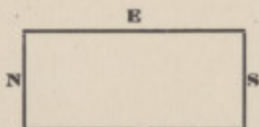
Garry Hand Funeral Home

Name of deceased <u>Mrs. Octavia Brown</u>	
Date of death <u>Fri Sept-16-38</u>	<u>PM</u>
Cause of death <u>Carcinoma of breast</u>	
Place of death <u>County Home</u>	
Residence <u>Winter Garden</u>	
Age <u>68</u> - Y'rs <u>1</u> Mo's <u>19</u> Days	
Weight _____ Height _____ ft. _____ in. Eyes _____	
Funeral at <u>Grave Side</u>	
Date <u>Sun Sept-18</u> 193 <u>8</u>	<u>3-PM</u>
Account charged <u>O R & S Brown</u>	
Address <u>Winter Garden</u>	
Account guaranteed _____	
Address _____	
Embalming <u>Y Dressing</u>	<u>25.00</u>
Robe, Suit, Dress <input checked="" type="checkbox"/>	
Underwear and Hose <input checked="" type="checkbox"/>	
Casket <u>6-3 Gr. Oak</u>	<u>75.00</u>
Casket with Copper Lin. <input checked="" type="checkbox"/>	
Style of Casket <u>Eq. H. C.</u>	
No. of Casket <u>2046</u> <u>Shure</u>	
Shipping Case or Vault <input checked="" type="checkbox"/>	
Outside Box <u>Reg-</u>	
Handles <u>Short</u>	
Pillow Set <u>yes</u>	
Name Plate _____	
Cemetery <u>Bearla</u>	
Section _____ Lot _____	
<div style="display: flex; align-items: center; margin-top: 10px;"> <div style="margin-right: 20px;">X Grave on this date</div> <div style="border: 1px solid black; padding: 10px; text-align: center;"> <div style="display: flex; justify-content: space-between; width: 100%;"> N E </div> <div style="display: flex; justify-content: space-between; width: 100%;"> W S </div> </div> </div>	
I Other Graves _____	
Cremation _____	
Urn _____	
Single Grave _____	
Opening and Closing Grave <u>Y etc</u>	<u>15.00</u>
Body Shipped to <input checked="" type="checkbox"/>	
R. R. Ticket <input checked="" type="checkbox"/>	
Cash advanced <input checked="" type="checkbox"/>	
Telegram _____	
Minister <u>A. Fred Turner</u>	<u>5.00</u>
Casket Wagon <u>(1)</u>	
Physician <u>Dr. Zullman</u>	
County or City Burial _____	
Automobiles <u>S V S</u>	<u>15.00</u>
Baggage or Express Train No. _____	<u>135.00</u>

Garey Hand Funeral Home

Name of deceased Mrs. Lucie M. Norris
 Date of death Sept. 17-38 1:30 AM
 Cause of death Cerebral Thrombosis
 Place of death Res
 Residence 1010 Palmer St
 Age 65 Y'rs 4 Mo's — Days —
 Weight — Height — ft. — in. Eyes —
 Funeral at Chapel
 Date Mon Sept 19 1938 4 P M
 Account charged Pratt Store
 Address 1010 Palmer St
 Account guaranteed Cash & Payments
 Address —
 Embalming Dussing 35.00
 Robe, Suit, Dress white 7.00
 Underwear and Hose —
 Casket 6-3-62 Maple 90.00
 Casket with Copper Lin. —
 Style of Casket Oct H. C
 No. of Casket 1972 Tampa
 Outside Box Big
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set yes
 Name Plate ✓
 Cemetery Greenwood
 Section — Lot —

I Other Graves



X Grave on this date

Cremation Ant. P.B. & W. 5.00
 Urn —
 Single Grave White 7.00
 Opening and Closing Grave T. & etc 15.00
 Body Shipped to —
 R. R. Ticket —
 Cash advanced —
 Telegram —
 Minister Rev P.H. Means
 Casket Wagon (1) 5.00
 Physician Dr Ford
 County or City Burial —
 Automobiles S & S 15.00
 Baggage or Express Train No. —
Cash 79.00
Oct 10.00 P.M.

179.00

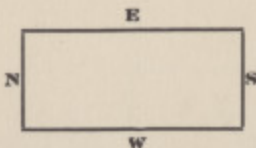
Garey Hand Funeral Home

Name of deceased Majr E Samuel Adams
 Date of death Sept 12-38 5 A M
 Cause of death Cerebro Vascular Syphilis
 Place of death Nursing Home at Rockport
 Residence Orlando Rt 19-Box 169-2
 Age 58 Yrs 4 Mo's 5 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sunday-9-18 1938 3 P. M
 Account charged Estimote Adams
 Address Orlando- Rt 19
 Account guaranteed OK
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket See City 35.00
 Casket with Copper Lin. ✓
 Style of Casket ✓
 No. of Casket ✓
 Outside Box _____
 Shipping Case or Vault ✓
 Handles ✓
 Pillow Set Yes
 Name Plate _____
 Cemetery Cremation
 Section _____ Lot _____
 I Other Graves wooden Box
 X Grave on this date _____
 Cremation Cremation 50.00
 Urn _____
 Single Grave Body Cremated
 Opening and Closing Grave 9 A M
 Body Shipped to Monday 9-19-38
 R. R. Ticket _____
 Cash advanced Miss Callie Baker
 Telegram _____
 Minister Rev Brookhart 5.00
 Casket Wagon (1)
 Physician Dr M M Andrews
 County or City Burial _____ 125.00
 Automobiles _____
 Baggage or Express Train No. _____

Garey Hand Funeral Home

Name of deceased James C. Martin
 Date of death Sun Sept-18-38 420 A
 Cause of death Senility
 Place of death Res
 Residence 1006 - West Church St
 Age 89 Y'rs 4 Mo's 15 Days
 Weight 170 Height 5 ft. 9 in. Eyes
 Funeral at Church at Mt Verde
 Date Mon Sept 19 - 1938 11 A M
 Account charged J. C. Martin
 Address 507 Harwood
 Account guaranteed David Condit
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress Gray 32.00
 Underwear and Hose
 Casket 6-3 Gr Oak. Oth 260.00
 Casket with Copper Lin.
 Style of Casket Oct N. C.
 No. of Casket 2638 Shur
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext
 Pillow Set yes
 Name Plate
 Cemetery Mt Verde
 Section Lot

I Other Graves



X Grave on this date

Cremation

Urn

Single Grave

Opening and Closing Grave Del. Grave 15.00

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister

Casket Wagon (1) 8.00

Physician Dr Ford

County or City Burial

Automobiles SYS 15.00

Baggage or Express Train No. 367.00

Spa of Home 10.00

Cash & 9 min 377.00

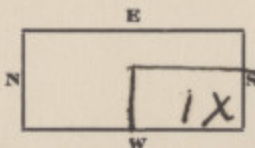
3820.00

Carey Hand Funeral Home

Name of deceased Mrs. C. Wallace
 Date of death Sun Sept 18-38 AM
 Cause of death Diphtheria - Myocarditis
 Place of death Res
 Residence Pine Castle
 Age 71 Yrs 3 Mo's 2 Days
 Weight 125 Height 5 ft. 5 in. Eyes
 Funeral at Chapel
 Date Tues Sept 20 1938 4 P M
 Account charged Mrs. C. Wallace
 Address Pine Castle
 Account guaranteed Insurance
 Address ✓
 Embalming ✓ Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 2 cup 90.00
 Casket with Copper Lin. ✓
 Style of Casket Oct N. C
 No. of Casket 1972
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set yes
 Name Plate ✓
 Cemetery Greenwood
 Section P SW 1/4 Lot 45

I Other Graves

X Grave on this date



Cremation

Urn

Single Grave

Opening and Closing Grave Tate 15.00

Body Shipped to Missie 5.00

R. R. Ticket

Cash advanced

Telegram

Minister Rev - O. G. Hall

Casket Wagon (1) 5.00

Physician Dr. Quinn

County or City Burial

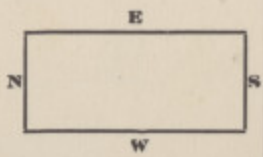
Automobiles S V S 15.00

Baggage or Express Train No. \$ 165.00

Garry Hand Funeral Home

Name of deceased *Amelia J. Mc Murtry*
 Date of death *Mon Sept 19-38-6 PM*
 Cause of death *Cerebral Occlusion*
 Place of death *Res -*
 Residence *Windermere*
 Age *81* Y'rs *4* Mo's *8* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Dest*
 Date _____ 193 *8* M
 Account charged *Mrs B.F. Sutton*
 Address *Windermere Fla*
 Account guaranteed *Estate*
 Address _____
 Embalming *& Dressing* 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-3-12* 90.00
 Casket with Copper Lin. ☒
 Style of Casket *Oct-Flt*
 No. of Casket *1972 Tampa*
 Outside Box *R-19*
 Shipping Case or Vault ☒
 Handles *Ext*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Dest*
 Section _____ Lot _____

I Other Graves



X Grave on this date

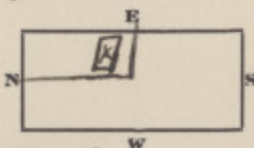
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Atlanta Ga*
 R. R. Ticket _____
 Cash advanced *Express* 28.10
 Telegram _____
 Minister _____
 Casket Wagon *(2)* 10.00
 Physician *Dr J. L. Searles*
 County or City *Burial*
 Automobiles _____
 Baggage or Express Train No. *92*

	163	10	
	28	10	
Total 9-20-38	163	20	135.00

Carey Hand Funeral Home

Name of deceased *Mr Ben T. Jones*
 Date of death *Mon Sept 19* *PM*
 Cause of death *Cerebral Hemorrhage*
 Place of death *Res*
 Residence *1110 Mrs ave*
 Age *72* Y'rs *7* Mo's *13* Days
 Weight *90* Height *5 ft. 5* in. Eyes
 Funeral at *Chapel*
 Date *Wed Sept 24* 193*8* *4 P. M*
 Account charged *Mrs B. T. Jones*
 Address *1110 Mrs ave*
 Account guaranteed *Payments*
 Address
 Embalming *& Dressing* *25.00*
 Robe, Suit, Dress *Blue Large* *10.00*
 Underwear and Hose
 Casket *6-3-4w Maple* *90.00*
 Casket with Copper Lin. *Yes*
 Style of Casket *Ext. H. C*
 No. of Casket *1922 Tampa*
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *Ext*
 Pillow Set *yes*
 Name Plate
 Cemetery *Greenwood*
 Section *I- NE 1/4* Lot *83*

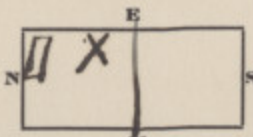
I Other Graves



X Grave on this date

Cremation *Burial Lot* *31.25*
 Urn *P. Or M ear* *5.00*
 Single Grave
 Opening and Closing Grave *TV etc* *15.00*
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister *Rev Bowers* *5.00*
 Casket Wagon *(1)*
 Physician *Dr Lullman*
 County or City Burial
 Automobiles *S V 3* *15.00*
 Baggage or Express Train No. *196.25*

Garey Hand Funeral Home

Name of deceased *Mrs Bessie L. Savage*
 Date of death *Thurs Sept 22-38* *AM*
 Cause of death *Exmo Myocarditis*
 Place of death *C. G. H.*
 Residence *Friedrich Dr Conway*
 Age *55* Y'rs *1* Mo's *4* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Sun Sept 25* 193*8* *3-P.M*
 Account charged *Mrs S. A. Savage*
 Address *Orlando - Friedrich Dr Conway*
 Account guaranteed _____
 Address _____
 Embalming *+ Tanning* 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-3 Dr Flush Set* 175.00
 Casket with Copper Lin. ☒
 Style of Casket *Oct 1/2 - e*
 No. of Casket *1927 Shure*
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *Ext*
 Pillow Set *yes*
 Name Plate ☒
 Cemetery *Greenwood*
 Section *V N 1/2* Lot *34*
 I Other Graves 
 X Grave on this date _____
 Cremation *aut. P. B. & M* 5.00
 Urn *Music by Church*
 Single Grave _____
 Opening and Closing Grave *T & Co* 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister *Rev Francis Book* 5.00
 Casket Wagon *V*
 Physician *Dr Mallory*
 County or City Burial _____
 Automobiles *S & S* 15.00
 Baggage or Express Train No. 250.00

Garey Hand Funeral Home

Name of deceased Joe Snyder
 Date of death Fri Sept 23-38 5:45 AM
 Cause of death Cancer of Bladder
 Place of death 1422 Hamilton ave
 Residence Lillian Ala
 Age 78 Y'rs 10 Mo's 29 Days
 Weight 180 Height 5 ft. 8 in. Eyes
 Funeral at Best

Date _____ 193_____ M

Account charged Mrs

Address Lillian

Account guaranteed Martin Linnstaug

Address 1422 Hamilton ave 30 Day

Embalming Yes 30.00

Robe, Suit, Dress ☒

Underwear and Hose ☒

Casket 6-3-Gr Maple 90.00

Casket with Copper Lin.

Style of Casket Oct H. C

No. of Casket 1972 - Tampa

Outside Box Yes

Shipping Case or Vault ☒

Handles Best

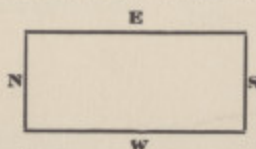
Pillow Set Yes

Name Plate ☒

Cemetery Best

Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn urn at Lillian Ala

Single Grave _____

Opening and Closing Grave _____

Body Shipped to Foley Alta

R. R. Ticket 1910 - 1275 31.85

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon (2) 10.00

Physician Dr Knowles

County or City Burial _____

Automobiles _____

Baggage or Express Train No. 92 166.85

Fri 9-23-38

cash in RR - 31.85

Cash 35.00

Bal 30.85

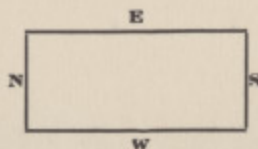
Garey Hand Funeral Home

Name of deceased Mr Geo H. Peters
 Date of death Sept. 21 - 38
 Cause of death Cancer Hsp. Tuberc & Lungs
 Place of death Per
 Residence New Smyrna Fla
 Age 77 Yrs 4 Mo's 23 Days
 Weight 180 Height 5 ft. 8 in. Eyes Blue
 Funeral at New Smyrna
 Date 1938 M
 Account charged Robinson & Tanna F. Home
 Address New Smyrna
 Account guaranteed OK
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket Body arrived
 Casket with Copper Lin by auto
 Style of Casket H P M
 No. of Casket Fri 9-23-38
 Outside Box
 Shipping Case or Vault Body cremated
 Handles 9-23-38 Sat 9-24-38
 Pillow Set
 Name Plate Ashes Expressed to
 Cemetery Robinson & Tanna
 Section Funeral Home
New Smyrna Fla
 I Other Graves
needn't Box
 X Grave on this date
 Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician
 County or City Burial
 Automobiles \$ 37.50
 Baggage or Express Train No.

Carey Hand Funeral Home

Name of deceased *Mrs Jean M Smith*
 Date of death *Sept 9 1933* *5:30 PM*
 Cause of death *Egno Nephritis*
 Place of death *at home*
 Residence *Carless Apts H. Con Ave*
 Age *33* Yrs *5* Mo's *11* Days
 Weight *160* Height *5* ft. *5* in. Eyes
 Funeral at *Chapel*
 Date *Sat Sept 24 1933* *4 PM*
 Account charged *Mr Stacy L. Smith*
 Address *Carless Apts*
 Account guaranteed *Payments*
 Address
 Embalming *Yes Dressing* *35.00*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *6-3 Sil Plush 1/2 C* *135.00*
 Casket with Copper Lin.
 Style of Casket *Oct 1/2 - C*
 No. of Casket *1927 Shm* *X*
 Outside Box *Reg*
 Shipping Case or Vault
 Handles *Yes*
 Pillow Set
 Name Plate
 Cemetery *Woodlawn*
 Section Lot

I Other Graves



X Grave on this date

Cremation

Urn

Single Grave

Opening and Closing Grave *Yes* *15.00*

Body Shipped to *Auto P O, M* *5.00*

R. R. Ticket

Cash advanced

Telegram

Minister *Rev A Fred Turner*

Casket Wagon *(1)* *5.00*

Physician *Dr Tolson*

County or City Burial

Automobiles *S Y S* *15.00*

Baggage or Express Train No.

Amul Sev

210.00

215.00

Garey Hand Funeral Home

Name of deceased *Mrs Melvina Blanchard*
 Date of death *Dec - 13 - 1926*
 Cause of death *Acute Dilation of Heart*
 Place of death *Res - S. Tex*
 Residence _____
 Age *69* Y'rs *—* Mo's *23* Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Casket* _____
 Date _____ 193 _____ M _____
 Account charged _____
 Address _____
 Account guaranteed _____
 Address _____
 Embalming *Cremation* _____
 Robe, Suit, Dress _____
 Underwear and Hose *Body has* _____
 Casket *been Vault # 20* _____
 Casket with Copper Lin *a summer* _____
 Style of Casket *Leaps* _____
 No. of Casket _____
 Outside Box *Men - 9-26-38* _____
 Shipping Case or Vault _____
 Handles *Body removed and* _____
 Pillow Set *cremated* _____
 Name Plate _____
 Cemetery *Hill Park for* _____
 Section _____ Lot _____

50 00

I Other Graves

wood box with Name for

☒ Grave on this date

this Casket placed in same

Cremation *Mother Blanchard*

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to *Belmont Casket*

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician _____

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

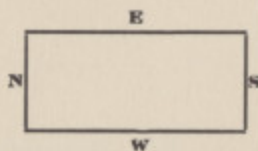
50 00

Garey Hand Funeral Home *Colad*

Name of deceased *Wm J. Grant*
 Date of death *Mon Sept 26 - 38* *8 PM*
 Cause of death _____
 Place of death *Per*
 Residence *Colad Luantus* *apofka*
 Age *72* Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Grave Side*
 Date *Wed 9-28* 193*8* *11:30 AM*
 Account charged *County*

Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3 Case* *14.50*
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box *Reg -*
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery *County Home*
 Section _____ Lot _____

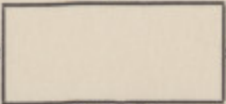
I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician *Dr M C Bude*
 County or City Burial *14.50*
 Automobiles _____
 Baggage or Express Train No. _____

Garey Hand Funeral Home

Name of deceased Mrs. Mary Cooper
 Date of death Wed. Sept. 28-38 4 PM
 Cause of death Cerebral Thrombosis
 Place of death Fla. Coast
 Residence New York 619 Broadway
 Age 72 Y's 11 Mo's 23 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Thurs. Oct 13 1938 11 A.M.
 Account charged Trust Dept
 Address Ft. Nat Bank Orlando
 Account guaranteed Estate
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress } 5.00
 Underwear and Hose } 1.50
 Casket 6-3-12 Clth 45.00
 Casket with Copper Lin. ✓
 Style of Casket Oct
 No. of Casket 1921-7
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set fix w
 Name Plate ✓
 Cemetery Cumtation 50.00
 Section _____ Lot _____
 I Other Graves 
 X Grave on this date Ashes exposed w/o
 Cremation Mr Edward P. Allen 166 E. Rock Rd 30.00
 Urn Gray # 1022 New Haven Conn.
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Body Cremated
 R. R. Ticket Thurs 3 P.M. Oct
 Cash advanced 13-1938
 Telegram _____
 Minister Dean Johnson
 Casket Wagon (1) 5.00
 Physician Frank Harris
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

766.50
171.50

Carey Hand Funeral Home

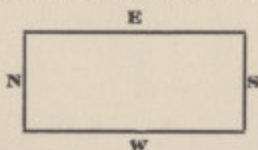
Name of deceased Mr Frank Wright
 Date of death Wed Sept 28-38 3:15 PM
 Cause of death Grave Pneumonia
 Place of death Home Clark Nursing Home
 Residence 310 Anderson St
 Age 74 Y's 7 Mo's 2 Days
 Weight 150 Height 5 ft. 9 in. Eyes
 Funeral at Best

Date 193
 Account charged Mrs Anna P. Wright
 Address 310 Anderson St
 Account guaranteed Insurance & Estote
 Address

Embalming & Dressing 25.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-6- Metal 200.00
 Casket with Copper Lin. ✓
 Style of Casket State Tr Co
 No. of Casket 1
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes
 Name Plate Name & Date
 Cemetery Buchanan H. Va
 Section Lot

I Other Graves

X Grave on this date



Cremation

Urn

Single Grave

Opening and Closing Grave

Body Shipped to Charlottesville H. Va

R. R. Ticket Y.P. 8457 2.35

Cash advanced ✓

Telegram ✓

Minister ✓

Casket Wagon No Chg

Physician D. Sprin

County or City Burial

Automobiles

Baggage or Express Train No. 74

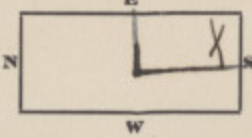
Thursday Night Sept 29-38 8225.00

Pl Cash for RR & P 20.00

4 Envelopes Copies 2.00 8227.00

Garey Hand Funeral Home

Name of deceased James D. Finley
 Date of death Thurs Sept 29 38 335 PM
 Cause of death Carcinoma of stomach
 Place of death O.S.A.
 Residence Orlando Rt 3
 Age 68 Y'rs 6 Mo's 12 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sun Sept 30 1938 4 P. M
 Account charged Mrs Finley
 Address Orlando Rt 3 Box 92
 Account guaranteed _____
 Address _____
 Embalming Disposing 25.00
 Robe, Suit, Dress Blue 10.00
 Underwear and Hose _____ 2.75
 Casket 6-3 Emb Sol 50.00
 Casket with Copper Lin. ☒
 Style of Casket Sgt H.C.
 No. of Casket X
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Short
 Pillow Set yes
 Name Plate _____
 Cemetery Greenwood
 Section J SE 1/4 Lot 60
 I Other Graves _____



 X Grave on this date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave T & L D etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev Finley Edge 5.00
 Casket Wagon _____
 Physician Dr Mallory
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. B 120.75

20.00 P. Mo-

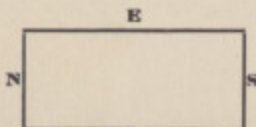
Garry Hand Funeral Home

Name of deceased Wm Thos Rosier
 Date of death Fri Sept 30 1938 5:45 AM
 Cause of death Coronary infection
 Place of death Res
 Residence 617 - N. Myer
 Age 37 Y's 6 Mo's 2 Days
 Weight 170 Height 5 ft. 6 in. Eyes
 Funeral at Chapel
 Date Sun 10-2 1938 2 P M
 Account charged Mrs Wm Thos Rosier
 Address 617 - N. Myer
 Account guaranteed Payments
 Address
 Embalming & Dussing 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3 1/2 2x2 75.00
 Casket with Copper Lin.
 Style of Casket Oct H. C
 No. of Casket 1972
 Outside Box RA
 Shipping Case or Vault
 Handles Ext
 Pillow Set yes
 Name Plate
 Cemetery Woodlaw
 Section Lot
 I Other Graves
 X Grave on this date
 Cremation
 Urn Auto min 5.00
 Single Grave
 Opening and Closing Grave T & S rate 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Mr T. Lawrence C.S.
 Casket Wagon (1) 5.00
 Physician Dr Hatfield
 County or City Burial
 Automobiles S & S 15.00
 Baggage or Express Train No. # 150.00

Garey Hand Funeral Home

Name of deceased Mrs Lucinda Matthews
 Date of death Fri Sept 30- 38 8 P.M.
 Cause of death Cancer at base of tongue
 Place of death Res
 Residence Lee Rd Orlando Rt 4
 Age 44 Y's 10 Mo's 6 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Monday Oct 3 1938 4 P. M
 Account charged County
 Address _____
 Account guaranteed J. D. Evans
 Address 4455 Oakley Ave
 Embalming Chicago 25.00
 Robe, Suit, Dress _____
 Underwear and Hose 5.00
 Casket 6-3 Case 25.00
 Casket with Copper Lin. _____
 Style of Casket Spr H. M.
 No. of Casket _____
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Short
 Pillow Set _____
 Name Plate _____
 Cemetery Dewey
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation Grave Space 5.00
 Urn Dress 5.00
 Single Grave to be paid by 1.00
 Opening and Closing Grave 3m Base
 Body Shipped to Fun at
 R. R. Ticket at Christmas
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon 5.00
 Physician Dr. Johnson
 County or City Burial _____
 Automobiles 15.00
 Baggage or Express Train No. _____

14.50

14 50

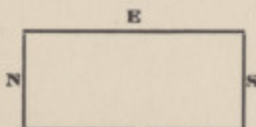
895.00

Mrs Bars & Pay
810.00 for grave
& Dress -

Garey Hand Funeral Home

Name of deceased Thayer Taylor Fuller
 Date of death Sat Oct 11-38 12:45-AM
 Cause of death Malignancy of Pancreas
 Place of death O.S.H.
 Residence 1100 West Nelson
 Age 32 Yrs 2 Mo's 17 Days
 Weight 165 Height 5'7" ft. in. Eyes blue
 Funeral at Chapel
 Date Sun Oct 2-1938 3 P. M
 Account charged Mrs. Irene Fuller
 Address 1100 West Nelson
 Account guaranteed insurance
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress ✓ 20.00
 Underwear and Hose ✓
 Casket 6-3-165 145.00
 Casket with Copper Lin. ✓
 Style of Casket Oct 1/2-2
 No. of Casket 1575 - 9ump-a
 Outside Box 4-2
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Hoodlawn
 Section _____ Lot _____

I Other Graves



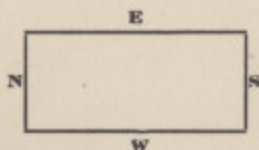
X Grave on this date

Cremation Family Co No Chg
 Urn Car Urn 5.00
 Single Grave P.B. Car 5.00
 Opening and Closing Grave White 15.00
 Body Shipped to Musie 5.00
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev Turner
 Casket Wagon _____
 Physician Dr F. Grant
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. 20000

Carey Hand Funeral Home

Name of deceased *Mrs. Rosa C. Jones*
 Date of death *Oct-1-38* *3-AM*
 Cause of death *Cerebral Hemorrhage*
 Place of death *Res*
 Residence *150 Cortland ave H. Park*
 Age _____ Y's _____ Mo's _____ Days _____
 Weight *160* Height *5* ft. *6* in. Eyes _____
 Funeral at *Deat.*
 Date _____ 193 _____ M
 Account charged *Mrs. Rosa Jones*
 Address *1015 9th Ave.*
 Account guaranteed *Shumack*
 Address *Denver Colo*
 Embalming *& Dress* 35⁰⁰
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-6-Metal* 425⁰⁰
 Casket with Copper Lin. *Inner*
 Style of Casket *State H. C. & 1st*
 No. of Casket *5-95 Shis*
 Outside Box *Reg-*
 Shipping Case or Vault ☒
 Handles *Ext - G.M. & Sil Fin*
 Pillow Set *yes 24 in*
 Name Plate *Name*
 Cemetery *Deat*
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to *Denver Colo*

R. R. Ticket *5775-5775-17*

Cash advanced *Pul 1340 - chm 80* 129⁷⁰

Telegram _____

Minister _____

Casket Wagon *(2)* 10.00

Physician *S. Hume*

County or City Burial

Automobiles *2-3 Dr. Car* 599.70

Baggage or Express Train No. *92* 4.00

Sum Oct 2-38 (\$603.70)

Garry Hand Funeral Home

Name of deceased Leonard J. Hackney
 Date of death Oct 27 6 P.M.
 Cause of death Hyper tension heart disease
 Place of death Res
 Residence Winter Park Fla
 Age 83 Y's 6 Mo's 3 Days
 Weight 165 Height 5 ft. 9 in. Eyes
 Funeral at Residence
 Date Tues Oct 4 1938 4 P.M.
 Account charged Rose J. Hackney
 Address Memphis Tenn
 Account guaranteed Estate
 Address
 Embalming Yes Durumg 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-4- Solid Copper 975.00
 Casket with Copper Lin. Inner
 Style of Casket Rc State Very Plain
 No. of Casket Admiral Station
 Outside Box Reg any Fine
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate Vault
 Cemetery in
 Section _____ Lot _____
 I Other Graves

E
 N Vault S
 H W

 X Grave on this date
 Date on the Grave Shop & Shellyville And.
 Cremation ☒
 Urn
 Single Grave Vault 5th Pr Mo
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Dean Spennis 10.00
 Casket Wagon (2)
 Physician Dr. W. Mallory 15.00
 County or City Burial
 Automobiles SY5
 Baggage or Express Train No. 1035 00

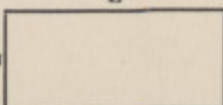
Carey Hand Funeral Home

Name of deceased Paul A. Beckett.
 Date of death Oct 2nd 11 A.M.
 Cause of death Angina Pectoris
 Place of death Res
 Residence 115 E. Colonial
 Age 48 Y'rs 11 Mo's 25 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Oct 4 1938 3 P. M
 Account charged Mr Paul A. Beckett
 Address 115 E. Colonial
 Account guaranteed Estab
 Address _____
 Embalming Dussing 35 00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket Simple 36 00
 Casket with Copper Lin. ☒
 Style of Casket Oct. 4
 No. of Casket ☒
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles Oct ☒
 Pillow Set yes
 Name Plate ☒
 Cemetery Calmation 5000
 Section _____ Lot _____
 I Other Graves

E
 N S
 W

 X Grave on this date _____
 Cremation _____
 Urn Music to be
 Single Grave J. S. M.
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev Frasier
 Casket Wagon _____ 5 00
 Physician Dr. Bulloch
 County or City Burial _____
 Automobiles _____ 125 00
 Baggage or Express Train No. _____

Carey Hand Funeral Home

Name of deceased Emma Lou DuRant
 Date of death Oct 3rd 1938
 Cause of death Acute Meningo, Encephalitis
 Place of death Mable Oak Nursing Home
 Residence 514 - 27th St W.
 Age 44 Y'rs 11 Mo's 22 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Wed Oct 5 1938 3 P.M.
 Account charged J. Walter DuRant
 Address 514 - 27th St W.
 Account guaranteed Payments
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-5 Ext. Oak 175.00
 Casket with Copper Lin. ☒
 Style of Casket Oct 1/2 C
 No. of Casket 1927 - Shiner
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes white
 Name Plate ☒
 Cemetery Greenwood
 Section P Lot 24
 I Other Graves ☐ 
 X Grave on this date ☐
 Cremation Family Exp No Chg
 Urn Car Urn 5.00
 Single Grave Music 5.00
 Opening and Closing Grave T & Ste 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev. Dean Johnson
 Casket Wagon (1) No Chg
 Physician Dr. Spire
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. _____

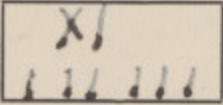
250.00

Garey Hand Funeral Home

Name of deceased Miss Annakle Galt.
 Date of death Oct 3rd 3 P.M.
 Cause of death Cerebral Hemorrhage
 Place of death Res
 Residence 646 W. Concord
 Age 70 Y'rs 4 Mo's 23 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Wed Oct 3rd 1938 4 P.M.
 Account charged Ella Galt
 Address 646 W. Concord
 Account guaranteed Estate - Oct - 10-4-38
 Address _____
 Embalming Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hosiery _____
 Casket Low 30.00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Cremation 50.00
 Section _____ Lot _____
 I Other Graves _____
wooden box
 X Grave on this date _____
 Cremation Mumie 5.00
 Urn Body Cremated 8-AM
 Single Grave Fri Oct 7-38
 Opening and Closing Grave ashes
 Body Shipped to Expressed To
 R. R. Ticket Percy Knudson
 Cash advanced RFD, Pleasant Plains
 Telegram Jell
 Minister Rev W. E. Cannell
 Casket Wagon (1) 5.00
 Physician Dr. J. Hatfield
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____ 125.00

Carey Hand Funeral Home

Name of deceased Benjamin M. Clair Robinson
 Date of death Oct 4 4:10 a.m.
 Cause of death Chag. Myocarditis - Senility
 Place of death D. F. H.
 Residence 402 E. Jackson
 Age 92 Y'rs 9 Mo's 18 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Presbyterian Church
 Date Wed Oct 5 1938 4 P.M.
 Account charged Mrs B. M. Robinson
 Address 402 E. Jackson St
 Account guaranteed Estate
 Address _____
 Embalming Dressing 35 00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-6 in cloth 250 00
 Casket with Copper Lin. ☒
 Style of Casket State H. C
 No. of Casket Turner - Walker 94
 Outside Box ☒
 Shipping Case or Vault air Seal 125 00
 Handles Ext
 Pillow Set yes
 Name Plate Name & Date
 Cemetery Greenwood
 Section J Lot _____
 I Other Graves ☐

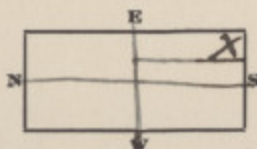


X Grave on this date _____
 Cremation Two out 10 00
 Urn 3-flower ear
 Single Grave 2-out
 Opening and Closing Grave etc 15 00
 Body Shipped to Bugher
 R. R. Ticket Adams
 Cash advanced _____
 Telegram _____
 Minister Rev M. H. V. Turner
 Casket Wagon _____
 Physician Dr. Frank Gray
 County or City Burial _____
 Automobiles SAS 15 00
 Baggage or Express Train No. 415 00
450 00

Carey Hand Funeral Home

Name of deceased Mr. Lester Sargent
 Date of death Oct 5th 1938
 Cause of death Rabies Hydrophobia
 Place of death Q. Y. Fla
 Residence Winter Park Fla
 Age 41 Yrs 8 Mo's 18 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at grave side
 Date Tue Oct 7 1938 2:30 P M
 Account charged Robert Sargent
 Address 90 Green St Nidham Mass
 Account guaranteed _____
 Address _____
 Embalming Bussing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3-Emb Doe 75.00
 Casket with Copper Lin. _____
 Style of Casket See H. C
 No. of Casket 2016 S
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Shat
 Pillow Set yes
 Name Plate _____
 Cemetery Winter Park
 Section 80 E 1/2 A Lot D

I Other Graves

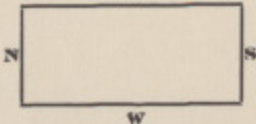


X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15.00
 Body Shipped to _____
 R. R. Ticket amb Ser 5.00
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon LD 8.00
 Physician _____
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. 3 150.00

ok
 Fred Hand
 H. Hand

Garey Hand Funeral Home

Name of deceased Miriam Misenheimer
 Date of death Oct 5 12:45 a.m.
 Cause of death Pulmonary Tuberculosis
 Place of death State Tuberculosis Hospital
 Residence 3801-22nd St Tampa Fla
 Age 40 Y'rs 2 Mo's ✓ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at West
 Date Oct 1938 M
 Account charged Craig F. Home
 Address St Augustine Fla
 Account guaranteed ok
 Address _____
 Embalming _____ 25.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Craig F. Home
 No. of Casket St Augustine
 Outside Box Fla came over
 Shipping Case or Vault Ed got the
 Handles body Wed night
 Pillow Set Oct 5-1938
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 I Other Graves 
 X Grave on this date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician Dr. W. C. Fowler
 County or City Burial _____ 25.00
 Automobiles _____
 Baggage or Express Train No. _____

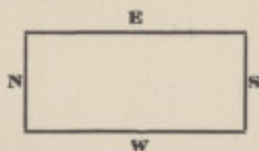
Carey Hand Funeral Home

Name of deceased <u>Regina Hooker</u>	
Date of death <u>Wed Oct 5 - 38</u>	<u>6 P.M.</u>
Cause of death <u>Triple Malignant Cancer</u>	
Place of death <u>Res - City Rd</u>	
Residence <u>Forest City Rd</u>	
Age <u>about 72</u> Y'rs	Mo's _____ Days _____
Weight _____	Height _____ ft. _____ in. Eyes _____
Funeral at <u>St James Church</u>	
Date <u>Friday Oct 7</u>	<u>1938</u> <u>99</u> M
Account charged <u>Mrs Eugene Boucher</u>	
Address <u>Chlands RT. 11 # 2 Fla</u>	
Account guaranteed _____	
Address _____	
Embalming <u>& Dressing</u>	25.00
Robe, Suit, Dress <input checked="" type="checkbox"/>	
Underwear and Hose <input checked="" type="checkbox"/>	
Casket <u>6-3 Gr Oak</u>	90.00
Casket with Copper Lin. <input checked="" type="checkbox"/>	
Style of Casket <u>Oct H. 2</u>	
No. of Casket <u>Walker 54</u>	
Outside Box <u>Rd</u>	
Shipping Case or Vault <input checked="" type="checkbox"/>	
Handles <u>Ext</u>	
Pillow Set <u>yes</u>	
Name Plate <u>emerald</u>	
Cemetery <u>Greenwood</u>	
Section _____	Lot _____
<div style="display: flex; align-items: center; justify-content: center;"> <div style="margin-right: 10px;">I Other Graves</div> <div style="border: 1px solid black; padding: 10px; text-align: center;"> <div style="display: flex; justify-content: space-between; width: 100%;"> N E </div> <div style="display: flex; justify-content: space-between; width: 100%;"> W S </div> </div> </div>	
X Grave on this date	
Cremation <u>1-Auto</u>	5.00
Urn _____	7.00
Single Grave <u>Single Grave</u>	15.00
Opening and Closing Grave <u>etc</u>	5.00
Body Shipped to <u>Auto. P. B</u>	5.00
R. R. Ticket <u>Auto. Home</u>	5.00
Cash advanced _____	
Telegram _____	
Minister <u>Father Bishop</u>	5.00
Casket Wagon <u>4</u>	
Physician <u>Dr. Frank Gray</u>	
County or City Burial _____	
Automobiles <u>SAS</u>	15.00
Baggage or Express Train No. <u>8</u>	172.00

Garey Hand Funeral Home

Name of deceased Mrs Martha Helms
 Date of death Wed Oct 5-38 PM
 Cause of death Cerebral Hemorrhage
 Place of death Res
 Residence Munich Rd N.W. Garden
 Age _____ Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Mon Oct 10 1938 3 P.M
 Account charged Mrs T N Russ
 Address Winter Garden
 Account guaranteed Phil Peters 1 City Exchange
 Address Winter Garden
 Embalming Yes Dressing 35.00
 Robe, Suit, Dress _____ 2.00
 Underwear and Hose _____
 Casket 6-6 Metal 260.00
 Casket with Copper Lin. ☒
 Style of Casket State 1/2 - C
 No. of Casket Russell Orleans Stms
 Outside Box R.G
 Shipping Case or Vault Contract by Family
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Deer
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave Ty etc 15.00

Body Shipped to ☒

R. R. Ticket ☒

Cash advanced ☒

Telegram ☒

Minister _____

Casket Wagon 17 & Res 5.00

Physician Dr Starlin of H.G.

County or City Burial _____

Automobiles S & S 15.00

Baggage or Express Train No. 33200

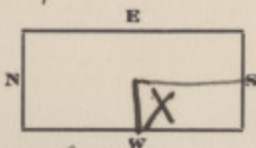
M Phil Peters of
City Exchange Winter Garden
Pay acct

Carey Hand Funeral Home

Name of deceased Sarah Jane Edge
 Date of death Oct 6 8:30 a.m.
 Cause of death Cardiac Renal Disease
 Place of death Res
 Residence 719 Atlanta Ave
 Age 72 Y'rs 8 Mo's 3 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sat Oct 8 1938 119 M
 Account charged Adeline Wilson
 Address 719 Atlanta Ave City
 Account guaranteed Insurance
 Address _____

Embalming ☒ Dressing 35.00
 Robe, Suit, Dress Wants 5.00
 Underwear and Hose ☒
 Casket 6-3 br Cope 90.00
 Casket with Copper Lin. ☒
 Style of Casket Oct No 2
 No. of Casket Walker 54
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate ☒
 Cemetery Greenwood
 Section 4 - SW 1/4 Lot 2

I Other Graves



X Grave on this date

Cremation Burial Lot 25.00
 Urn P. B. C. C. 5.00
 Single Grave Car Min 15.00
 Opening and Closing Grave etc
 Body Shipped to Ferry Car
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev Purdue
 Casket Wagon _____
 Physician Dr. J. Redding
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. 190.00

Pd - Cash 20.00 credit 20.00
on Burial Lot \$ 170.00

Carey Hand Funeral Home

Name of deceased *Infant of Lonnie Bryant*
 Date of death *Thurs Oct 16-38* *PM*
 Cause of death *Premature*
 Place of death *O.S.H.*
 Residence *Jellwood*
 Age *1* Y'rs *2* Mo's *✓* Days *✓*
 Weight *✓* Height *✓* ft. *✓* in. Eyes *✓*
 Funeral at *✓*
 Date *1938* *M*
 Account charged *Lonnie Bryant*
 Address *Jellwood*
 Account guaranteed *✓*
 Address *✓*
 Embalming *Cremation* 5.00
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *✓*
 Casket with Copper Lin. *Cremated*
 Style of Casket *3-PM*
 No. of Casket *3-PM*
 Outside Box *Sat 10-8-38*
 Shipping Case or Vault *✓*
 Handles *✓*
 Pillow Set *Scatter the ashes*
 Name Plate *✓*
 Cemetery *✓*
 Section *✓* Lot *✓*
 I Other Graves

E

W

N

S

 X Grave on this date 5.00
 Cremation *✓*
 Urn *✓*
 Single Grave *✓*
 Opening and Closing Grave *✓*
 Body Shipped to *✓*
 R. R. Ticket *✓*
 Cash advanced *✓*
 Telegram *✓*
 Minister *✓*
 Casket Wagon *✓*
 Physician *✓*
 County or City Burial *✓*
 Automobiles *✓*
 Baggage or Express Train No. *✓*

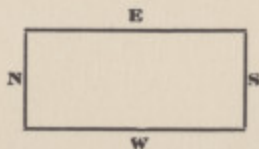
Garey Hand Funeral Home

Name of deceased *Mrs Josephine Marie Tolson*
 Date of death *Oct 6 - 1938* *1020 PM*
 Cause of death *arterial Sclerotic*
 Place of death *O S H.*
 Residence *1238 Spring Lake Dr*
 Age *76* Y'rs *9* Mo's *11* Days
 Weight *145* Height *5* ft. *6* in. Eyes
 Funeral at *Chapel*
 Date *Sat Oct 8* 193*8* *2 P* M
 Account charged *Dr Spencer Tolson*
 Address
 Account guaranteed
 Address
 Embalming *Dressing* *35.00*
 Robe, Suit, Dress *Dark Gown* *12.50*
 Underwear and Hose *3.65*
 Casket *6-6 Metal 1/2-Case* *300.00*
 Casket with Copper Lin.
 Style of Casket *State 1/2-C*
 No. of Casket *Winter Temp'd*
 Outside Box *Reg*
 Shipping Case or Vault
 Handles *Ext*
 Pillow Set *yes Don Sat 8 S Lin's*
 Name Plate *Name + Date*
 Cemetery *Greenwood*
 Section *E 1/2 -* Lot *100*
 I Other Graves
 X Grave on this date
 Cremation *P. B. Car* *5.00*
 Urn *Car Min* *5.00*
 Single Grave
 Opening and Closing Grave *W. etc* *15.00*
 Body Shipped to
 R. R. Ticket *Family Car*
 Cash advanced
 Telegram
 Minister *Dean Johnson*
 Casket Wagon
 Physician *Dr C. C. Collins*
 County or City Burial
 Automobiles *S & B* *15.00*
 Baggage or Express Train No. *\$ 387.50*

Garey Hand Funeral Home

Name of deceased Hyd Palmer Chapman
 Date of death Wed Oct 7-38 1 a m
 Cause of death Cerebral Thrombosis
 Place of death O B H
 Residence 511 S. Lanny St
 Age 78 Y'rs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at West
 Date 1938 M
 Account charged Bernice Chapman
 Address
 Account guaranteed Cash + Payments
 Address
 Embalming Y Dressing 35.00
 Robe, Suit, Dress ✓ 3.00
 Underwear and Hose ✓
 Casket 6-3 by Doe 95.00
 Casket with Copper Lin. ✓
 Style of Casket Oct - H. C
 No. of Casket Walter 54
 Outside Box P-19
 Shipping Case or Vault ✓
 Handles Oct
 Pillow Set yes
 Name Plate
 Cemetery West
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn Burial Temple Comm
 Single Grave
 Opening and Closing Grave
 Body Shipped to Waterbury Conn
 R. R. Ticket 38.40 27.75 66.15
 Cash advanced
 Telegram
 Minister
 Casket Wagon 2 10.00
 Physician Dr. Folsom
 County or City Burial
 Automobiles amb Doe 5.00
 Baggage or ~~Express~~ Train No 92 \$ 214.15

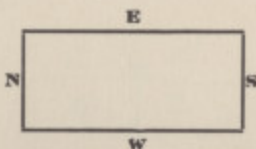
only cash \$140.00

Monday Oct 10-38

Garey Hand Funeral Home

Name of deceased Mary Barker.
 Date of death Oct 6th
 Cause of death Probably gastric Carcinoma
 Place of death Res
 Residence Miami Fla
 Age 85 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Miami Fla
 Date Oct 1938 M
 Account charged Van Audel Mortuary
 Address Miami Fla
 Account guaranteed _____
 Address _____
 Embalming Cremation 3750
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket by express Sunday
 Outside Box box by express
 Shipping Case or Vault Oct 9-38
 Handles _____
 Pillow Set Body Cremated
 Name Plate Monday 7 a.m
 Cemetery Oct 10 - 1938
 Section _____ Lot _____

I Other Graves

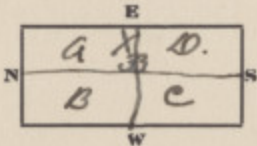


X Grave on this date

Cremation ashes expressed to
 Urn Van Audel Mortuary
 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. _____

37.50

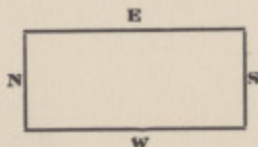
Garey Hand Funeral Home

Name of deceased Abram Hunter
 Date of death Oct 10 - 2:15 P.M.
 Cause of death Mitotic Carcinoma
 Place of death Residence
 Residence 288 W. Morse Blvd W.P.
 Age 73 Y'rs 11 Mo's 15 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graveside
 Date Wed Oct 12 1938 3 P.M.
 Account charged Mrs Abram Hunter
 Address 288 W. Morse Blvd - Winter Park
 Account guaranteed Estate
 Address _____
 Embalming + Dressing 30 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 1/2 Grey crepe 95 00
 Casket with Copper Lin. _____
 Style of Casket Oct N.E.
 No. of Casket 1972 - Tampa
 Outside Box Reg
 Shipping Case or Vault _____
 Handles _____
 Pillow Set yes
 Name Plate _____
 Cemetery Winter Park
 Section _____ Lot _____
 I Other Graves 
 X Grave on this date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev Barris
 Casket Wagon (1) 5 00
 Physician Dr. R. H. Ford
 County or City Burial _____
 Automobiles 505 15 00
 Baggage or Express Train No. _____

\$165.00

Gary Hand Funeral Home

Name of deceased Alpheus H. Smith
 Date of death Oct 10
 Cause of death Congestive Heart Failure
 Place of death West Palm Beach Fla
 Residence West Palm Beach Fla
 Age 68 Y'rs 7 Mo's 6 Days
 Weight 170 Height 5 ft. 10 in. Eyes
 Funeral at West Palm Beach
 Date Oct 11 1938 M
 Account charged L. S. Ferguson F. H.
 Address West Palm Beach Fla
 Account guaranteed Check
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin Body arrived
 Style of Casket Express Tuesday
 No. of Casket 3:15 a.m.
 Outside Box Oct 10 - 1938
 Shipping Case or Vault
 Handles
 Pillow Set Body Cremated
 Name Plate Tuesday 9 a.m.
 Cemetery Oct 11 1938
 Section Lot
 I Other Graves
 X Grave on this date
 Cremation Ashes returned to
 Urn L. S. Ferguson F. H.
 Single Grave West Palm Beach 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.



37.50

Garey Hand Funeral Home

Name of deceased Wm B. Newlin
 Date of death Oct 10 - 1938
 Cause of death Suicide - By shooting
 Place of death Ormond Beach
 Residence Daytona Beach, Fla
 Age 57 Y'rs 6 Mo's 21 Days
 Weight 190 Height 6 ft. ✓ in. Eyes Blue
 Funeral at Daytona Beach Fla
 Date Oct 1938 M
 Account charged Baggett-Wetherly Ind S
 Address Daytona Beach Fla
 Account guaranteed Check
 Address _____
 Embalming Columbian 37 50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Body Arrived
 Style of Casket Tuesday 4 P.m.
 No. of Casket Oct 11 - 1938
 Outside Box _____
 Shipping Case or Vault _____
 Handles Body Cremated
 Pillow Set Thurs 9 a.m.
 Name Plate Oct 13 - 1938
 Cemetery _____
 Section _____ Lot _____
 I Other Graves
 E
 N S
 W

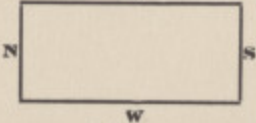
 X Grave on this date _____
 Cremation Ashes scattered
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 8 37.50

Carey Hand Funeral Home

Name of deceased Carolyn E. George
 Date of death Oct 18th
 Cause of death _____
 Place of death Fla. Sanit
 Residence 1413 Ferris
 Age 39 Y'rs _____ Mo's _____ Days _____
 Weight 120 Height 5 ft. 8 in. Eyes Brown
 Funeral at Chapel
 Date Friday Oct 14 1938 4 P. M
 Account charged Wm. H. George (Brother)
 Address 5 Fla Public Service Co Bldg
 Account guaranteed _____
 Address _____
 Embalming ☒ Crossing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 43 Low 60 --
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault Bronze Urn.
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 I Other Graves _____
 X Grave on this date _____
 Cremation Calcination 50 00
 Urn Big Sgr # 7012 25 00
 Single Grave Name engraved
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Friend
 Casket Wagon (1) 5 --
 Physician Dr. Mathers
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

175 00

Garey Hand Funeral Home

Name of deceased James Arthur Byrd
 Date of death Oct 11 - 38 11 P.M.
 Cause of death _____
 Place of death Daytona Beach, Fla
 Residence Port Orange, Fla
 Age 71 Y'rs 10 Mo's 3 Days _____
 Weight 150 Height 5 ft. 10 in. Eyes Brown
 Funeral at Daytona Beach, Fla
 Date Oct 1938 M
 Account charged Baggett - Witherspoon
 Address Daytona Beach, Fla
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Cremation 37.50
 Casket with Copper Lin. _____
 Style of Casket Body arrived by
 No. of Casket Auto Thursday
 Outside Box 10:30 A.M. Oct 13-38
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body Cremated
 Name Plate Thursday 2 P.M.
 Cemetery Oct 13-38
 Section _____ Lot _____
 I Other Graves 
 X Grave on this date _____
 Cremation Ashes exposed to
 Urn Baggett - Witherspoon
 Single Grave Daytona Beach
 Opening and Closing Grave 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

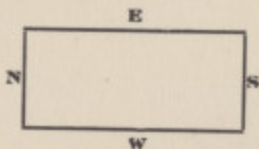
Carey Hand Funeral Home

Name of deceased Joseph McCall Lane
 Date of death Oct 13
 Cause of death Myocardial Failure
 Place of death County Home
 Residence Woolf Lane
 Age 71 Y'rs 3 Mo's 3 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Catholic Church
 Date Oct 14 - Friday 1938 8 a M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Coffin & box 14.50
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Woodlawn
 Section _____ Lot _____
 I Other Graves
 E
 N S
 W

 X Grave on this date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave No chg
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Father Bishop
 Casket Wagon _____
 Physician Frank Sullivan
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 14.50

Garey Hand Funeral Home

Name of deceased Carolyn Buncie
 Date of death Oct 9 1938
 Cause of death Chro. Multiple Arthritis
 Place of death Res
 Residence Daytona Beach Fla
 Age 77 Y'rs 1 Mo's 12 Days
 Weight 120 Height 5 ft. 10 in. Eyes Blue
 Funeral at Daytona Beach Fla
 Date Oct 10 1938 M
 Account charged Haigh & Brooks Ind
 Address Daytona Beach, Fla
 Account guaranteed Check
 Address _____
 Embalming Cremation
 Robe, Suit, Dress _____ 37.50
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket Thurs 4 P. M.
 Outside Box Auto Oct 13-38
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body Cremated
 Name Plate Thurs 3 P. M.
 Cemetery Oct 13-1938
 Section _____ Lot _____
 I Other Graves _____
 X Grave on this date _____
 Cremation Casket Expensed to
 Urn Haigh & Brooks Ind Co.
 Single Grave Daytona Beach 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. _____



37.50