

5-24-1941

Memoranda Book 144: Carey Hand Funeral Home records, May 24, 1941 to July 1, 1941

Carey Hand Funeral Home

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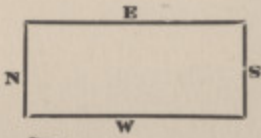
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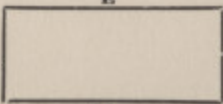
Garry Hand Funeral Home

Name of deceased Mrs Sam Kruty
 Date of death Fri May-23-41 11 30 PM
 Cause of death _____
 Place of death Res
 Residence Conway Rd
 Age 72 Y'rs 8 Mo's 3 Days _____
 Weight 150 Height 5 ft. 7 in. Eyes _____
 Funeral at No Service
 Date _____ 193 M
 Account charged Mrs S. Kruty
 Address Olando St Conway Rd
 Account guaranteed Catote
 Address _____
 Embalming & Disposing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket Low Casket 10.00
 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 
 X Grave on this date _____
 Cremation Cremation 50.00
 Urn _____
 Single Grave Body Cremated
 Opening and Closing Grave S-A M
 Body Shipped to Fun May-24-41
 R. R. Ticket _____
 Cash advanced will call for Ashes
 Telegram _____
 Minister _____
 Casket Wagon (1) 5.00
 Physician Dr Andrews
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 100 00
No Service of any kind

Garey Hand Funeral Home

Name of deceased Garrle N. Juergensen
 Date of death Sat-May-24-41 PM
 Cause of death O. B. H.
 Place of death Forest City
 Residence Forest City
 Age 56 Y'rs 8 Mo's 11 Days
 Weight 125 Height 5 ft. 4 in. Eyes
 Funeral at Chapel
 Date Monday May 26 1941 4 P. M
 Account charged Waller W. Juergensen
 Address Islands R. F. D. #2
 Account guaranteed
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3-In Maple 50.00
 Casket with Copper Lin.
 Style of Casket Set
 No. of Casket Temp. 1972
 Outside Box
 Shipping Case or Vault
 Handles Ext
 Pillow Set yes
 Name Plate
 Cemetery Calmar
 Section Lot

I Other Graves
 X Grave on this date



Cremation Cremation 50.00
 Urn
 Single Grave none 5.00
 Opening and Closing Grave Spa Towers 5.00
 Body Shipped to Body cremated 8-AM
 R. R. Ticket Tues May 27-41
 Cash advanced will call for action
 Telegram
 Minister Rev A. Fred Turner
 Casket Wagon (1) 5.00
 Physician Les Gray
 County or City Burial
 Automobiles
 Baggage or Express Train No.

180.00

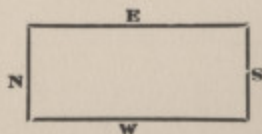
Garey Hand Funeral Home

Colored

Name of deceased Wallace Owens
 Date of death May 24 4:30 PM
 Cause of death _____
 Place of death Q. 314
 Residence Winter Park Fla
 Age 1 Yrs 6 Mo's 14 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at 6
 Date Buried County 1991 M
 Account charged _____
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2-6-Case & Box
 Casket with Copper Lin. _____
 Style of Casket HM
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery County Home
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician Dr. Sinclair

County or City Burial Peters

Automobiles _____

Baggage or Express Train No. _____

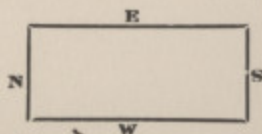
14.50

14.50

Garry Hand Funeral Home

Name of deceased Joshua Hince Carroll
 Date of death May 25 7:15 P.M.
 Cause of death Heart Failure due to Alcoholism
 Place of death Tampa Fla
 Residence Orlando Vista Fla
 Age 61 Y's Mo's 15 Days
 Weight 160 Height 5 ft. 7 in. Eyes
 Funeral at Chapel
 Date Tues May - 27 1941 4 P. M
 Account charged Guiney Jane Infinger
 Address _____
 Account guaranteed Insurance
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress Gr suit 15.00
 Underwear and Hose _____
 Casket 6-3-Gr Cloth 150.00
 Casket with Copper Lin. _____
 Style of Casket Get H. C.
 No. of Casket 1600 Tampa
 Outside Box 8-9
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Lake Hill Cemetery
 Section _____ Lot _____

I Other Graves



X Grave on this date

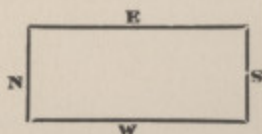
Cremation Auto Min 5.00
 Urn Auto 5.00
 Single Grave _____
 Opening and Closing Grave Tute 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev Swin
 Casket Wagon (1) 5.00
 Physician P. G. Luchurch
 County or City Burial _____
 Automobiles 8 & S 15.00
 Baggage or Express Train No. 28

245.00

Garry Hand Funeral Home

Name of deceased Robert L Starling
 Date of death May 26 3 A.M.
 Cause of death _____
 Place of death Res
 Residence 48 Christmas Fla
 Age 61 Y'rs 10 Mo's 9 Days _____
 Weight 90 Height 6 ft. _____ in. Eyes _____
 Funeral at Graveside
 Date Tues May 27 1941 4 P. M
 Account charged Mrs. Robt L. Starling
 Address 48 Christmas Fla
 Account guaranteed Payments
 Address _____
 Embalming + Dussing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 4-3 In Loc 90.00
 Casket with Copper Lin. ✓
 Style of Casket Oct. N.E.
 No. of Casket 1972 Tampa
 Outside Box yes
 Shipping Case or Vault ✓
 Handles Ed
 Pillow Set yes
 Name Plate _____
 Cemetery Ft Christmas
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave T+etc 15.00

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister By Family 10.00

Casket Wagon (1)

Physician Dr. Sutter

County or City Burial _____

Automobiles 3 v 3 15.00

Baggage or Express Train No. 46

city cash 65.00
65.00

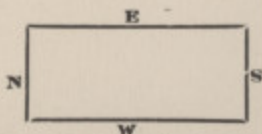
Payments 100.00
100.00

Garry Hand Funeral Home

Name of deceased Baby Flynn
 Date of death May 27 4:30 a.m.
 Cause of death _____
 Place of death Fla. Saint
 Residence Chla Vista Fla
 Age _____ Y'rs _____ Mo's _____ Days 4 1/2
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graveside
 Date True May 27 1941 5:30 P.M.
 Account charged Aubrey S. Flynn
 Address Chla Vista Fla.
 Account guaranteed Cash
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2/0 White R. S. 12.00
 Casket with Copper Lin. _____
 Style of Casket N. m.
 No. of Casket _____
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles Short
 Pillow Set yes
 Name Plate _____
 Cemetery Greenwood
 Section _____ Lot _____

I Other Graves



X Grave on this date

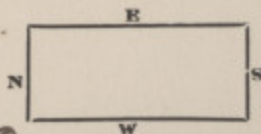
Cremation Auto 5.00
 Urn _____
 Single Grave Baby Grave 7.50
 Opening and Closing Grave Etc 2.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev Clark
 Casket Wagon _____
 Physician Dr. Harms
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$29.50

Garey Hand Funeral Home

Name of deceased Charles Powers
 Date of death May 27th
 Cause of death _____
 Place of death Daytona Beach Fla
 Residence Montclair New Jersey
 Age 72 Yrs Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at least
 Date June 1941 M
 Account charged Gaggett & Kothary
 Address _____
 Account guaranteed _____
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose sent at the
 Casket Not for Hotel B & W
 Casket with Copper Lin. Handled this
 Style of Casket Casket - 180⁰⁰
 No. of Casket they brought set his
 Outside Box Personal effects over
 Shipping Case or Vault of which we
 Handles packed & shipped to
 Pillow Set Harold Schroeder
 Name Plate to Arthur Brown
 Cemetery Montclair New Jersey
 Section by Express Lot _____

I Other Graves



X Grave on this date

Cremation Cremation

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister least

Casket Wagon _____

Physician Dr. Dayton Beach

County or City Burial _____

Automobiles 4.00 per hr 2.00

Baggage or Express Train No. _____

when acct is sent

mont B & W 10.00

there acct 180⁰⁰

also for 1/2 hr 12.50

39.50

Garry Hand Funeral Home

Name of deceased Grant Graham
 Date of death May 28 3:30 P.M.
 Cause of death Coronary Thrombosis
 Place of death Res
 Residence Deland Rt #3
 Age 77 Y's 6 Mo's 18 Days
 Weight 170 Height 5 ft. 7 in. Eyes
 Funeral at Chapel
 Date June 1 194 4 P. M
 Account charged Mrs Grant Graham
 Address Deland Rt 3
 Account guaranteed Cash & Payments
 Address
 Embalming & Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3-50 95.00
 Casket with Copper Lin.
 Style of Casket Oct. St. Corp
 No. of Casket 1972 Tampa
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Oct
 Pillow Set yes
 Name Plate
 Cemetery Greenwood
 Section 8 Lot

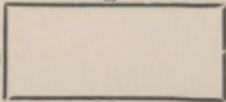
I Other Graves
 X Grave on this date

E
N
S
W

Cremation
 Urn
 Single Grave White 15.00
 Opening and Closing Grave Teak 1 etc 15.00
 Body Shipped to P. B. Car 5.00
 R. R. Ticket Car mini 5.00
 Cash advanced
 Telegram
 Minister
 Casket Wagon 5.00
 Physician Dr. J. Redding
 County or City Burial
 Automobiles 313- 10.00
 Baggage or Express Train No.

Cash - 785.00
65.00
6-mo Note 120.00

Garey Hand Funeral Home

Name of deceased Wm Conklin
 Date of death May - 12 - 41
 Cause of death _____
 Place of death Rex
 Residence St Pete, Fla - 13 Ave - Sou
 Age 22 Y'rs 8 Mo's 25 Days _____
 Weight 145 Height 5 ft. 10 - in. Eyes _____
 Funeral at St Petersburg Fla
 Date _____ 193 M
 Account charged Ralph G. Company
 Address G. Home St Petersburg Fla
 Account guaranteed OK
 Address 3150 - 1st
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket What Top
 Casket with Copper Lin. _____
 Style of Casket Body covered
 No. of Casket 4 ends 12 P.M
 Outside Box Fun May - 30 - 41
 Shipping Case or Vault _____
 Handles Body cremated 2 P.M
 Pillow Set Fun May - 30 - 41
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
wooden
 I Other Graves 
 X Grave on this date _____
 Cremation Ashes Expressed to
 Urn Ralph G. Company F. H.
 Single Grave St Petersburg 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. _____

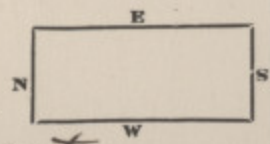
37.50

Garry Hand Funeral Home

Name of deceased Raymond O. Hand
 Date of death May 29-41
 Cause of death Pro Pneumonia
 Place of death Gov. Harp Augusta Ga
 Residence Hinter Park
 Age 53 Y'rs 8 Mo's 28 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date May 31-1941 4-P M
 Account charged Mrs R. O. Hand
 Address Hinter Park
 Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3-Set. H. Pap
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box Johnson
 Shipping Case or Vault air Seal 125.00
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves

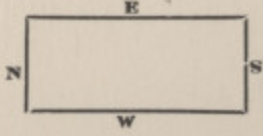


X Grave on this date

Cremation 2 auto 10.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave Tight & d 15.00
 Body Shipped to auto
 R. R. Ticket auto
 Cash advanced auto
 Telegram _____
 Minister Whitman 5.00
 Casket Wagon (1)
 Physician _____
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. _____

170.00

Garey Hand Funeral Home

Name of deceased Fannie E. M. Scott
 Date of death May - 31 - 1941
 Cause of death _____
 Place of death Res
 Residence Ft Pierce Fla
 Age 74 Y'rs 0 Mo's 21 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Ft Pierce
 Date _____ 193 _____ M
 Account charged Gates F. Home
 Address Ft Pierce Fla.
 Account guaranteed _____
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body Guard
 No. of Casket by auto. A.M.
 Outside Box Fun June 1-41-
 Shipping Case or Vault _____
 Handles Body Cremated
 Pillow Set 8-A M Mon 6-2-41
 Name Plate _____
 Cemetery will call for
 Section _____ Lot _____
wood run
 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. _____

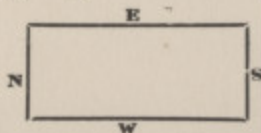
37.50

Garry Hand Funeral Home

BEND. & FRANKLIN

Name of deceased Mrs. Martha L. Franklin
 Date of death May-30-41
 Cause of death Cancer
 Place of death Res
 Residence Cocoa Fla
 Age 72 Yrs 0 Mo's 25 Days
 Weight 140 Height ft. in. Eyes
 Funeral at
 Date 193 M
 Account charged Koon F. Home
 Address Cocoa Fla
 Account guaranteed ok
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket Flot Top
 Casket with Copper Lin. Body unlined
 Style of Casket H 30 R. Pm
 No. of Casket Fun June-1-41
 Outside Box
 Shipping Case or Vault Body Cremated
 Handles 8- A M. Mon June 2-41
 Pillow Set
 Name Plate ashes to be scattered
 Cemetery Greenwood Cemetery
 Section Wed-June 4-41 Lot.

I Other Graves

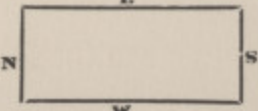


X Grave on this date

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

37.50

Garry Hand Funeral Home

Name of deceased *Mrs Mary Elizabeth Gray*
 Date of death *Sun June 1-41- 230 A.M.*
 Cause of death *Cornary Occlusion*
 Place of death *N.Y.*
 Residence *30 E. King Ave*
 Age *73* Yrs *5* Mo's *12* Days
 Weight *170* Height *5 ft. 3* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Tuesday June 3 1941 11-A-M*
 Account charged *H.R. Gray* *Surv*
 Address *30 E. King Ave Grand-*
 Account guaranteed *Payments*
 Address _____
 Embalming *Yes* 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *Low Chg* 15.00
 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 *wood run*
 X Grave on this date 
 Cremation *Cremating* 50.00
 Urn *wooden*
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Body cremated*
 R. R. Ticket *S-A N.Y. Rd 6-4-41*
 Cash advanced _____
 Telegram *will call for ashes*
 Minister _____
 Casket Wagon _____
 Physician *Dr. Christensen*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

Cash 10.00

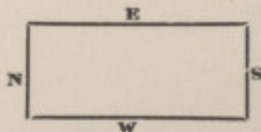
Pr Paid 10.00

100.00

Garry Hand Funeral Home

Name of deceased James H. Swan
 Date of death June 1-41 PM
 Cause of death falling from auto accident
 Place of death Kissimmee
 Residence Marion N. Car
 Age _____ Y'rs _____ Mo's _____ Days _____
 Weight 180 Height 5 ft. 9 in. Eyes _____
 Funeral at West
 Date _____ 193 _____ M
 Account charged Gov
 Address _____
 Account guaranteed _____
 Address _____
 Embalming & Dress 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-42 Doe 55.00
 Casket with Copper Lin. ☒
 Style of Casket Col. H. C.
 No. of Casket 1311-3 Shiner
 Outside Box 9-9
 Shipping Case or Vault ☒
 Handles ext
 Pillow Set yes
 Name Plate ☒
 Cemetery West
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Andrews N. Co.
 R. R. Ticket by Gov
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon (2) 10.00
 Physician Cornor at Kissimmee
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 92 8

Tues - June 3-41

100.00

Garey Hand Funeral Home

Name of deceased Samuel H. Carlton
 Date of death June 2 - 2 P.M.
 Cause of death _____
 Place of death O. F. H.
 Residence Winter Park.
 Age 79 Y'rs 2 Mo's 1 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Tues. June 3 1934 4 P.M.
 Account charged Harry Williams
 Address Winter Park Fla
 Account guaranteed Insurance
 Address _____
 Embalming Yes Pressing 25 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 3 Grey.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Eumalion
 Section _____ Lot _____

 I Other Graves
 E
 N S
 W

 X Grave on this date _____
 Cremation Cremation 50 00
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Body Cremated
 R. R. Ticket 8 a.m. Wed.
 Cash advanced June 4 - 41
 Telegram _____
 Minister Will Call for ushers
 Casket Wagon _____
 Physician Dr. Cundern
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 75.00

Garry Hand Funeral Home

Name of deceased Mary Essa Agar.
 Date of death June 2nd 1941 4:30 P.M.
 Cause of death Pneumonia
 Place of death Res
 Residence 1215 N. Mills St
 Age 76 Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Chapel
 Date Wed June 4 1941 2 P. M
 Account charged Charles Agar
 Address 1215 N. Mills St
 Account guaranteed Small Insurance
 Address
 Embalming & Dressing 35 00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6/3 Grey 75 00
 Casket with Copper Lin.
 Style of Casket Sgs N. Cap
 No. of Casket Tampa 72
 Outside Box Res
 Shipping Case or Vault
 Handles Yes
 Pillow Set Yes
 Name Plate
 Cemetery Greenwood
 Section Lot
 I Other Graves
 X Grave on this date
 Cremation
 Urn
 Single Grave Single Grave (M) 15 00
 Opening and Closing Grave etc 15 00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister Dean Johnson
 Casket Wagon (1) 5 00
 Physician M. Andrews
 County or City Burial
 Automobiles SYS 15 00
 Baggage or Express Train No. # 160 00

Garey Hand Funeral Home

Name of deceased Mrs Helen B. Aking
 Date of death Tues June - 3 - 41 - 11:30 AM
 Cause of death Acute Edema of lungs
 Place of death at home
 Residence 835 N. Fern Creek
 Age 41 Yrs 1 Mo's 1 Days
 Weight 160 Height 5 ft. 5 in. Eyes
 Funeral at Chapel
 Date June - 4 - 1941 4 P. M
 Account charged Mr. Aking
 Address 835 N. Fern Cr
 Account guaranteed Insurance
 Address
 Embalming & Dressing 35.00
 Robe, Suit, Dress -
 Underwear and Hose -
 Casket 6-3-62 Doe 90.00
 Casket with Copper Ljn.
 Style of Casket Pat H. Cap
 No. of Casket Temp 1972
 Outside Box R & G
 Shipping Case or Vault -
 Handles Ext
 Pillow Set yes
 Name Plate -
 Cemetery Greenwood
 Section A-5146 Lot 24
 I Other Graves
 X Grave on this date
 Cremation Burial Lot 37.50
 Urn - Can R.B. 5.00
 Single Grave -
 Opening and Closing Grave etc 15.00
 Body Shipped to -
 R. R. Ticket -
 Cash advanced -
 Telegram -
 Minister Rev
 Casket Wagon (1) 5
 Physician Dr. W.S. Mitchell
 County or City Burial
 Automobiles SVS 15.00
 Baggage or Express Train No.

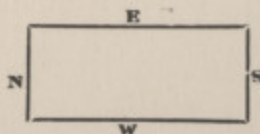
202.50
 9.25
 200.00

Garey Hand Funeral Home

Name of deceased Ella M. Lander
 Date of death June 3 9:00 a.m.
 Cause of death Cause Undetermined
 Place of death Res
 Residence 307 - W. Concord
 Age 81 Y'rs 4 Mo's 3 Days 3
 Weight Height ft. in. Eyes
 Funeral at Chapel
 Date 4 1944 M
 Account charged Ada E. Parmenter
 Address 307 - W. Concord
 Account guaranteed

Address
 Embalming + Dressing 25.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket C-3 In Dr 75.00
 Casket with Copper Lin.
 Style of Casket Sgt. N. C
 No. of Casket 72 Tampa
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Greenwood
 Section G-1 Lot

I Other Graves



X Grave on this date

Cremation

Urn
 Single Grave White 15.00
 Opening and Closing Grave 15.00

Body Shipped to
 R. R. Ticket
 Cash advanced

Telegram
 Minister Frederick Tucker
 Casket Wagon

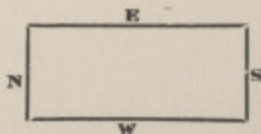
Physician Dr. Mitchell
 County or City Burial
 Automobiles 3 & 5 15.00

Baggage or Express Train No. 14.50

Proctor Day
Poor Dr. not
send statement
if pay ok & if not ok

Garry Hand Funeral Home

Name of deceased *Emma Florence Piper*
 Date of death *Wed - June 4 - 41 - PM*
 Cause of death *Apoplexy*
 Place of death *Res -*
 Residence *736 Putnam St*
 Age *75* Yrs *4* Mo's *4* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Friday June 6 1941* *4 P. M*
 Account charged *Ralph B. Piper*
 Address *736 Putnam St*
 Account guaranteed *Pay inside*
 Address _____
 Embalming *Dressing* *35.00*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *Price 60.00* *50.00*
 Casket with Copper Lin. _____
 Style of Casket *Box*
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Cremation*
 Section _____ Lot _____
wooden
 I Other Graves _____
 X Grave on this date _____
 Cremation *Cremation* *50.00*
 Urn *wooden*
 Single Grave _____
 Opening and Closing Grave *Body*
 Body Shipped to *Cremated*
 R. R. Ticket *S-A. M Sat-6-741*
 Cash advanced _____
 Telegram _____
 Minister *Rev. Frasier*
 Casket Wagon *(1)* *5.00*
 Physician *Dr. Redding*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____



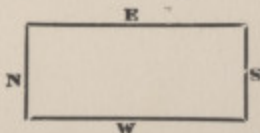
Express order to
John J. Piper
Townsend - Mass

\$ 140.00

Garry Hand Funeral Home

Name of deceased Mr Walter P. Bassett
 Date of death Wed June 4 1941 PM
 Cause of death Failure of Bladder
 Place of death Res
 Residence 1633 Ferris Drive
 Age 78 Yrs 9 Mo's 19 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sat June 7 1941 4 P. M
 Account charged Minnie Bassett
 Address 1633 Ferris St. Erie
 Account guaranteed Estab
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hosiery _____
 Casket 6-3-12 6th 125.00
 Casket with Copper Lin. _____
 Style of Casket Oct. H. C.
 No. of Casket 1311 Shir
 Outside Box 7-19
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Woodlawn
 Section B - Lot 17

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave P. B. & Min 5.00

Opening and Closing Grave etc 15.00

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister Rev Lindsay M. Harris 5.00
(1)

Casket Wagon _____

Physician Dr. Kunder

County or City Burial _____

Automobiles SYS 15.00

Baggage or Express Train No. _____

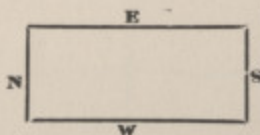
200.00

Garry Hand Funeral Home

1941

Name of deceased Joseph C. Kremer
 Date of death June 5 - 5:20 p.m.
 Cause of death Coronary Heart Disease
 Place of death Res
 Residence Midland Fla
 Age 54 Y'rs 5 Mo's 10 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Leest
 Date June 1941 M
 Account charged Fannie Kremer
 Address Chick
 Account guaranteed OK
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-6 Metal 1/2-C. 235.00
 Casket with Copper Lin. _____
 Style of Casket Style 1/2-C.
 No. of Casket Helena Shrine
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Patterson N.J.
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to Newark N.J.

R. R. Ticket (1)

Cash advanced _____

Telegram _____

Minister Leest

Casket Wagon (2)

Physician Dr. R. Hotard

County or City Burial _____

Automobiles _____

Baggage or Express Train No. 92

Fri June 6 - 41 -

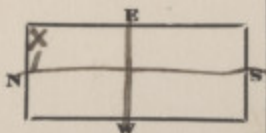
314.55

Garey Hand Funeral Home

Name of deceased Mrs Anna Anderson
 Date of death Fri June 6-41 4:20 AM
 Cause of death Arterio Sclerotic heart
 Place of death D.G.H.
 Residence Winter Park
 Age _____ Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grace Side
 Date Mon. June 9- 1941 4 P.M.
 Account charged Mrs.

Address _____
 Account guaranteed Insurance
 Address _____
 Embalming & Dressing 25.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-12 50.00
 Casket with Copper Lin. ☒
 Style of Casket Oct No. 2
 No. of Casket 1312-3 X
 Outside Box ☒
 Shipping Case or Vault air seal 125.00
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Palm Cemetery
 Section A Lot 79

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave T + etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Lois French
 Casket Wagon No Chg
 Physician Dr. Charles M. Mather
 County or City Burial _____
 Automobiles S + S- 15.00
 Baggage or Express Train No. _____

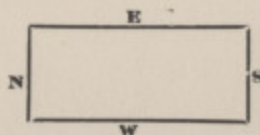
Ins Policy 203.00

230.00
 30.00
200.00

Garey Hand Funeral Home

Name of deceased Mr Joseph A Scott
 Date of death Tue June 6-41 PM
 Cause of death arteriosclerotic heart
 Place of death County Home disease
 Residence _____
 Age 88 Y'rs 1 Mo's 26 Days _____
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at Grave Side
 Date Mon June 9-1941 2 P. M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____
 Embalming Ed Cook
 Robe, Suit, Dress Blk 4⁰⁰
 Underwear and Hose _____
 Casket 6-3 Case & B-1 14.50
 Casket with Copper Lin. _____
 Style of Casket Spr
 No. of Casket H. M
 Outside Box R+g
 Shipping Case or Vault _____
 Handles Short
 Pillow Set _____
 Name Plate _____
 Cemetery Oak Ridge
 Section _____ Lot _____

I Other Graves



X Grave on this date

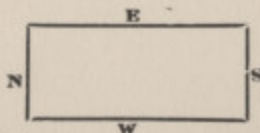
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev Hall
 Casket Wagon _____
 Physician Dr Charles Mathews
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train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

\$ 14.50

Garey Hand Funeral Home

Name of deceased Mrs Annie King A
 Date of death June - 7 - 41 1252 M
 Cause of death Pneumonia
 Place of death Ref
 Residence 906 Shady Lane
 Age 79 Y'rs 9 Mo's 4 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date June 8 1941 2-P. M
 Account charged Chas King
 Address 906 Shady Lane
 Account guaranteed Profit Mtg
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress White & 21st 10.00
 Underwear and Hose Yes
 Casket C-3-Dr Gr. Plunk- 175.00
 Casket with Copper Lin. Yes
 Style of Casket Oct 12-P
 No. of Casket 1927 Shiner
 Outside Box No
 Shipping Case or Vault Yes 125.00
 Handles Ext -
 Pillow Set Yes 21st
 Name Plate Yes
 Cemetery Greenwood
 Section P Lot 61

I Other Graves



X Grave on this date

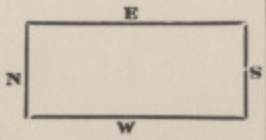
Cremation P. B. Par 5.00
 Urn Car Mini 5.00
 Single Grave none 5.00
 Opening and Closing Grave T & etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev Bookhart 5.00
 Casket Wagon (1)
 Physician Dr Andrews
 County or City Burial _____
 Automobiles 8 & 5 15.00
 Baggage or Express Train No. B

395.00

Garry Hand Funeral Home

Name of deceased Mr. Louise S. Kipphuth
 Date of death Sat June 7-41 538 A
 Cause of death Acute Uremic
 Place of death Fila Mont
 Residence New Haven Conn
 Age 66 Yrs 2 Mo's 26 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sun 8-8-41 1941 M
 Account charged Mr Robt J. H. Kipphuth
 Address New Haven Conn
 Account guaranteed OK
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress _____
 Underwear and Hosiery _____
 Casket 6-2 St. Joe 175.00
 Casket with Copper Lining _____
 Style of Casket Oct-12-2
 No. of Casket 1391 Shrin
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery West
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to New Haven Conn
 R. R. Ticket 3790-2150-2150
 Cash advanced _____
 Telegram (1)
 Minister Dean Johnson
 Casket Wagon (2)
 Physician Dr. Sutter
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 92

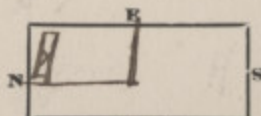
80 90
 76
 10.00

Sun June 8-41 301.66

Garry Hand Funeral Home

Name of deceased *Mr Julius B. Asher*
 Date of death *Sat - June 7 - 41 - 6:20-AM*
 Cause of death *Acute Myeloid Leukemia*
 Place of death *O.R.*
 Residence *228 Annie St -*
 Age *51* Y'rs *9* Mo's *21* Days
 Weight *170* Height *5* ft. *7* in. Eyes
 Funeral at *Chapel*
 Date *June 8 1941* *4 P. M*
 Account charged *Mrs J.B. Asher*
 Address *228 Annie St*
 Account guaranteed *Insurance*
 Address
 Embalming *+ Dressing* 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket *6-3- Gr. Oak. C.* 250.00
 Casket with Copper Lin. ✓
 Style of Casket *R. C. State*
 No. of Casket *4118 Shain*
 Outside Box *R-19*
 Shipping Case or Vault ✓
 Handles *Ext -*
 Pillow Set *yes*
 Name Plate
 Cemetery *Greenwood*
 Section *S* *NE 1/4* Lot *57*

I Other Graves
 Head of Grave
 Feet -
 X Grave on this date



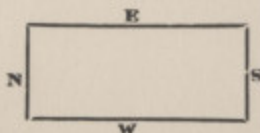
Cremation *Burial Lot* 50.00
 Urn *(2) P.B. Car* 10.00
 Single Grave *Car man* 5.00
 Opening and Closing Grave *T. etc* 15.00
 Body Shipped to *T. Car No Chg*
 R. R. Ticket
 Cash advanced
 Telegram
 Minister *Dean Johnson Robt Skiff*
 Casket Wagon *(1) No Chg*
 Physician *Dr J. S. McEwen*
 County or City *Burial* *Ch. Economon*
 Automobiles *S & S* 15.00
 Baggage or Express Train No.

5 Return Home *Trucks* 330.00
20.00
350.00

Carry Hand Funeral Home

Name of deceased Frank - Barto
 Date of death June - 8 - 41 AM
 Cause of death O. G. H. Arterio Sclerosis
 Place of death O. G. H.
 Residence Islip, L.I., New York
 Age 79 Yrs 9 Mo's 6 Days
 Weight 160 Height 5 ft. 7 in. Eyes
 Funeral at Best
 Date 193
 Account charged Mrs Ruth Sweetman M
 Address Queens New York Don
 Account guaranteed
 Address
 Embalming & Dressing 35
 Robe, Suit, Dress Burial Suit 12 00
 Underwear and Hose
 Casket 46 Grey B. Cloth 350 00
 Casket with Copper Lin.
 Style of Casket Bo. Co. St. N. C.
 No. of Casket 8108 - Shires
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext
 Pillow Set Yes - Tailored
 Name Plate
 Cemetery Destiniam
 Section Lot

I Other Graves



X Grave on this date

Cremation

Urn

Single Grave

Opening and Closing Grave

Body Shipped to Islip L.I. N.Y.

R. R. Ticket (1)

Cash advanced

Telegram

Minister Best

Casket Wagon (2)

Physician Dr. L. E. O'Connell Kunderst

County or City Burial

Automobiles

Baggage or Express Train No. 92

June 12 41

46 25

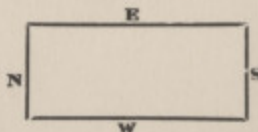
10. 00

453.25

Carey Hand Funeral Home

Name of deceased *Miss Frankie Smith*
 Date of death *June 8 - 10:30 a.m.*
 Cause of death *Stomachic Sarcoma with metastasis*
 Place of death *P. H. N.*
 Residence *Winter Garden Fla*
 Age *4* Y'rs *2* Mo's *21* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *M.E. Church - Winter Garden*
 Date *Monday June 9 1941 5:30 p.m.*
 Account charged *J. G. J. Smith*
 Address *Winter Garden Fla*
 Account guaranteed *small insurance*
 Address _____
 Embalming *& Dressing* 25. --
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *3-6-White L* 37. 50
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery *Acoll.*
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave *etc* 10. --

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister *Rev. Peeler* 5. --

Casket Wagon *(1)*

Physician *Dr. Walker*

County or City Burial _____

Automobiles *Clard Pm* 5. --

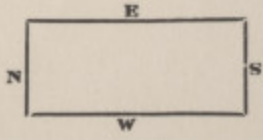
Baggage or Express Train No. 82 50

*Large box in
lorry*

Garey Hand Funeral Home

Name of deceased Wm. J. Higgins
 Date of death June 8 20am.
 Cause of death Heart Failure
 Place of death at Bethels Fla
 Residence Bethels Fla
 Age 61 Y'rs 11 Mo's 13 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Wed June 11 1941 3 P. M
 Account charged Mrs Hilma H. Naeck
 Address 2908- Nash Place S.E. Washington D.C
 Account guaranteed Insurance
 Address _____
 Embalming + Dressing 35.⁰⁰
 Robe, Suit, Dress Black Suit 10.⁰⁰
 Underwear and Hose _____ 95.⁰⁰
 Casket 6-3-32 Pine
 Casket with Copper Lin. _____
 Style of Casket Ext. H. C.
 No. of Casket 1972 - Temp.
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set Yes
 Name Plate _____
 Cemetery Chickasha Fla.
 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 Clyde Traxler 5.⁰⁰
 Casket Wagon (1)
 Physician C. Duckworth
 County or City Burial _____
 Automobiles S & S 15.⁰⁰
 Baggage or Express Train No. 8
175.00

Garry Hand Funeral Home

Name of deceased George W. Howard
 Date of death June 8th 3 P.M.
 Cause of death Decomposed heart
 Place of death Res
 Residence 1438 W. Church St
 Age 23 Y'rs 8 Mo's 8 Days
 Weight 165 Height 5 ft. 7 in. Eyes
 Funeral at Chapel
 Date Tuesday 10 A.M. 1941 10 A.M
 Account charged Mrs. Geo. W. Howard
 Address 1438 W. Church St
 Account guaranteed Mrs. C. L. Reson
 Address 1307 Portland St. Portland, Me.
 Embalming & Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hosiery ✓
 Casket 6-3-22 Doe 75.00
 Casket with Copper Lin. ✓
 Style of Casket See H. C
 No. of Casket 77 - Tampa
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Cremation
 Section Lot

I Other Graves

wooden Box

N

E

S

W

X Grave on this date

Cremation

Cremation

50.00

Urn

Single Grave

Body cremated

Opening and Closing

Grave 8-4 PM

Body Shipped to

Wed - June 11 - 41

R. R. Ticket

Cash advanced

will call for

Telegram

Minister

1 Telegram

1.13

Casket Wagon

(1)

5.00

Physician

Dr. M. Andrews

County or City Burial

Automobiles

Baggage or Express Train No.

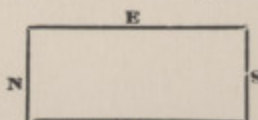
166.13

7166.13

Garry Hand Funeral Home

Name of deceased Kent Ferguson.
 Date of death June 7th
 Cause of death No Cause given on permit
 Place of death Ocala Fla
 Residence Ocala Fla
 Age Y's Mo's Days 1
 Weight 7^{1/2} lbs Height ft. in. Eyes
 Funeral at Ocala Fla
 Date Sunday June 8th 1941 M
 Account charged J. Miles Hers F. Home
 Address Ocala Fla
 Account guaranteed Chick
 Address
 Embalming Cremation 7.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. Body
 Style of Casket assembled
 No. of Casket Express 10:30
 Outside Box a.m. Monday
 Shipping Case or Vault S.A.P.R.R.
 Handles June 9. 1941
 Pillow Set
 Name Plate Body Cremated
 Cemetery Wed 8 a.m.
 Section June 11th Lot 1941

I Other Graves



X Grave on this date

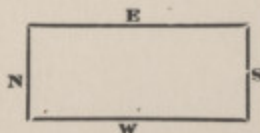
Cremation Ashes to be
 Urn Called for by
 Single Grave Mr & Mrs G. E.
 Opening and Closing Grave Ferguson
 Body Shipped to Ocala Fla.
 R. R. Ticket
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician A. Ocala Fla.
 County or City Burial
 Automobiles
 Baggage or Express Train No.

7.50

Garry Hand Funeral Home

Name of deceased Mr. Chas E. Coffin
 Date of death June 9th 1931 10:30 a.m.
 Cause of death Uremia
 Place of death At. O. G. N.
 Residence Winter Park Fla
 Age 26 Yrs 6 Mo's 4 Days -
 Weight 170 Height 6 ft. - in. Eyes -
 Funeral at 9:00
 Date Mon June 10 1931 4-19 M
 Account charged Mr. Chas E. Coffin
 Address 336 Interlachen av. Winter Park Fla
 Account guaranteed Estate
 Address -
 Embalming & Dressing 35.00
 Robe, Suit, Dress -
 Underwear and Hose -
 Casket 6-4 in. Birch 250.00
 Casket with Copper Lin. -
 Style of Casket A. Ca 3/4
 No. of Casket 48- Tampa
 Outside Box 9.00
 Shipping Case or Vault -
 Handles Ext -
 Pillow Set yes -
 Name Plate -
 Cemetery Winter Park
 Section - Lot -

I Other Graves



X Grave on this date

Cremation -

Urn -

Single Grave -

Opening and Closing Grave etc 15.00

Body Shipped to -

R. R. Ticket -

Cash advanced -

Telegram -

Minister Rev Vincent

Casket Wagon (1) 5.00

Physician Mr. Mathers

County or City Burial -

Automobiles S.V.S - 15.00

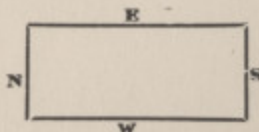
Baggage or Express Train No. \$

320.00

Garry Hand Funeral Home

Name of deceased Benjamin F. Fuller
 Date of death June 6 - 1941
 Cause of death _____
 Place of death M. C. V. Hospital - Richmond Va
 Residence Wilmington N. Car
 Age 48 Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Mon June 9 - 1941 11:30 A M
 Account charged Mrs Benj F. Fuller
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 66 Mahgon
 Casket with Copper Lin. _____
 Style of Casket B. C. State 1/2 -
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault air Seal
 Handles Ext -
 Pillow Set yes
 Name Plate Greenwood
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave exc

Body Shipped to _____

R. R. Ticket _____

Cash advanced Extra Labor at Home

Telegram _____

Minister M. C. Kair

Casket Wagon (1)

Physician _____

County or City Burial _____

Automobiles S & S

Baggage or Express Train No. _____

Amie 91- 11-8

Mon 6-9-41

15.00

5.00

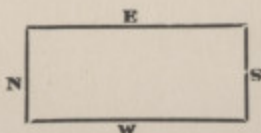
5.00

15.00

\$ 40.00

Name of deceased George E. Little
 Date of death June 7th 9 a.m.
 Cause of death Auto accident
 Place of death Wilson N.C.
 Residence Fair Villa Fla
 Age 25 Y'rs 4 Mo's 22 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graveside
 Date Tuesday June 10 1941 - 4 - P.M.
 Account charged of Mrs. Geo E. Little
 Address Fair Villa Fla.
 Account guaranteed Insurance
 Address _____
 Embalming Care of Body 15.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3-5
 Casket with Copper Lin. ✓
 Style of Casket Oct H. Cap
 No. of Casket _____
 Outside Box B-19 built up
 Shipping Case or Vault concrete by Trinity
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Acoll
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave Del Box 5 Front +

Opening and Closing Grave etc

Body Shipped to _____

R. R. Ticket For Express

Cash advanced H. F. D. Wilson N.C.

Telegram _____

Minister Rev Daniels Pule

Casket Wagon (1)

Physician _____

County or City Burial _____

Automobiles S & S

Baggage or Express Train No. _____

75.00
 7.50
 41.40
 167.50
 1.31
 5.00

15.00

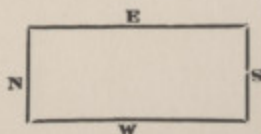
Health

252.71
 7.50
 260.21

Garry Hand Funeral Home

Name of deceased Paul P. Merideth
 Date of death June 7th 9 a.m.
 Cause of death Auto accident
 Place of death Wilson, N.C.
 Residence Apopka Fla
 Age 32 Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Gravestone
 Date Tuesday June 10 1931 4 P.M
 Account charged Mrs Paul P. Merideth
 Address Apopka Fla
 Account guaranteed Insurance
 Address
 Embalming Care of Body 15.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 4-3 In over
 Casket with Copper Liner
 Style of Casket Set A. 2
 No. of Casket
 Outside Box R-17 quilt count
 Shipping Case or Vault by Terminal
 Handles Ext
 Pillow Set yes
 Name Plate
 Cemetery Coll
 Section Lot

I Other Graves



X Grave on this date

Cremation

Urn

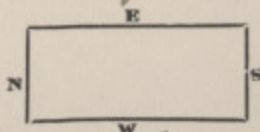
Single Grave Trans Del 3-4 7.50
 Opening and Closing Grave etc
 Body Shipped to
 R. R. Ticket via Express 41.40
 Cash advanced F. D. Wilson N.C 167.50
 Telegram 1.31
 Minister Sanib & Paul 5.00
 Casket Wagon (1)
 Physician Dr
 County or City Burial
 Automobiles S.V.S. 15.00
 Baggage or Express Train No.

Double Funeral 252.71
Very Large Wraith 7.50
260.21

Garry Hand Funeral Home

Name of deceased Walter Rae Walker
 Date of death June 8
 Cause of death Cardiac Decompensation
 Place of death Sebring Fla
 Residence Detroit Mich.
 Age 50 Y's 2 Mo's 4 Days
 Weight 140 Height 5 ft. 8 in. Eyes Blue
 Funeral at Sebring Fla
 Date June 1941 M
 Account charged Stephenson F. Home
 Address Sebring Fla
 Account guaranteed Check
 Address _____
 Embalming Columbian 3758
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket by Jants
 Outside Box Monday
 Shipping Case or Vault 4:15 P.M.
 Handles June 9 - 41
 Pillow Set _____
 Name Plate _____
 Cemetery Body Cremated
 Section SA. M. Ties Lot June 10 - 41

I Other Graves



X Grave on this date

Cremation Ashes expressed
 Urn to - Mrs Walter R. Walker
 Single Grave 9763 Glenholme
 Opening and Closing Grave Detroit
 Body Shipped to Mich.
 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 Mary Jane Potter
 Date of death June - 8 - 41
 Cause of death Chronic Myocarditis
 Place of death Dayton Black Flg

Residence _____
 Age 59 Y'rs 6 Mo's 12 Days _____
 Weight 135 Height 5 ft. 9 in. Eyes _____
 Funeral at _____

Date _____ 193
 Account charged Baggett Walter G & M Inc
 Address _____

Account guaranteed _____
 Address _____

Embalming Cremation 37.50

Robe, Suit, Dress _____

Underwear and Hose _____

Casket _____

Casket with Copper Lin. Body Interment

Style of Casket 10.30 A M Inter

No. of Casket June - 10 - 41

Outside Box _____

Shipping Case or Vault Body Cremated

Handles 8 - 4 - 41

Pillow Set Wed - June 11 - 41

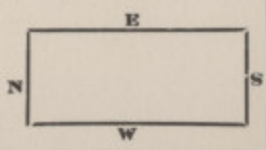
Name Plate _____

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 _____

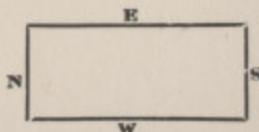
Baggage or Express Train No. _____

37.50

Garey Hand Funeral Home

Name of deceased Sally G. Chilson
 Date of death June 10 - 8 P.M.
 Cause of death Cardiac Failure
 Place of death 28th St. Orlando Fla.
 Residence Alcoa, Fla.
 Age 52 Y'rs 7 Mo's 8 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Gravestone
 Date Thurs June 12 1941 4 P. M
 Account charged Mr Jesse E. Chilson
 Address Alcoa, Fla.
 Account guaranteed Gulf Ins Co
 Address _____
 Embalming & Dressing
 Robe, Suit, Dress White Dress
 Underwear and Hose _____
 Casket 6/3 Grey Cloth
 Casket with Copper Lin. _____
 Style of Casket Ext N.C.
 No. of Casket Tampa 1972
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Alcoa -
 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 E. J. Daniels (1) 5.00

Casket Wagon _____

Physician Dr. Mathers

County or City Burial _____

Automobiles S & S 15.00

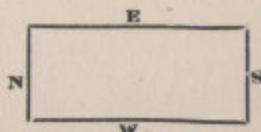
Baggage or Express Train No. _____

170.00

Garrey Hand Funeral Home

Name of deceased James Gilbert Angell Jr.
 Date of death June 10 - 41
 Cause of death Convulsions
 Place of death Res -
 Residence Daytona Beach Fla
 Age Y's Mo's 11 Days 26
 Weight 18 Height 30 in. in. Eyes Blue
 Funeral at Daytona Beach Fla
 Date June 1941 M
 Account charged Baggett - M. Inter
 Address Daytona Beach Fla
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress Cremation 10 00
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket by Auto Wed
 Outside Box 1 P.M. June 11 - 41
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery 84th Thurs June 12 - 41
 Section _____ Lot _____

I Other Graves



X Grave on this date

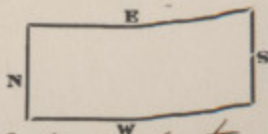
Cremation Ashes expressed
 Urn to Baggett - M. Inter
 Single Grave 1 P.M. Daytona
 Opening and Closing Grave Beach Fla
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$ 10.00

Garey Hand Funeral Home

Name of deceased Mrs. Agnes G. Ansdan
 Date of death June 10 - 41
 Cause of death _____
 Place of death Dayton Beach, Fla
 Residence Dayton Beach, Fla
 Age 74 Y's 6 Mo's 20 Days _____
 Weight 90 Height 5 ft. 5 in. Eyes _____
 Funeral at Daytona _____ M
 Date _____ 193 _____
 Account charged Baggett
 Address _____
 Account guaranteed _____
 Address _____
 Embalming Yes Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body arrived
 Casket with Copper Lin. by order 9 AM
 Style of Casket Simple June 12 - 41
 No. of Casket _____
 Outside Box Body Cremated
 Shipping Case or Vault 8 AM
 Handles June 13 - 41
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves
wooden Box



X Grave on this date _____

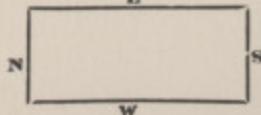
Cremation Ashes Expressed to
 Urn Baggett Williams M. J. J.
 Single Grave Daytona Beach Fla
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Garey Hand Funeral Home

Name of deceased *Mrs. Lillie Alexander*
 Date of death *June 10-41*
 Cause of death *Not given on Permit*
 Place of death *Hospital St. Johns Beach*
 Residence *Pahokee Fla*
 Age *34* Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Pahokee*
 Date _____ 193____ M____
 Account charged *Everglades F. Home*
 Address *J. C. Amy*
 Account guaranteed *ok*
 Address _____
 Embalming *Cremation* 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *Body buried*
 Casket with Copper Lin. *4.00*
 Style of Casket *15 PM*
 No. of Casket *June 12-41*
 Outside Box _____
 Shipping Case or Vault *Body cremated*
 Handles *8-A.M. Fri 6-13-41*
 Pillow Set _____
 Name Plate *Engraved to*
 Cemetery *Everglades F. Home*
 Section *Pahokee Fla*

I Other Graves



X Grave on this date

Cremation

Urn *Scp Orange # M. 32* 31.50

Single Grave

Opening and Closing Grave

Body Shipped to *Name & Date Engraved*

R. R. Ticket

Cash advanced

Telegram

Minister

Casket Wagon

Physician

County or City Burial

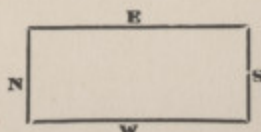
Automobiles

Baggage or Express Train No.

69.00
 37.50
 31.50
erly ok
Bal Due

Name of deceased *Mr Geo Denny White*
 Date of death *Fri June 13-41* *AM*
 Cause of death *Heart trouble*
 Place of death *County Prison Farm*
 Residence *Jellwood Ga*
 Age *41* Y'rs *5* Mo's *25* Days
 Weight *185* Height *5* ft. *7* in. Eyes
 Funeral at *West*
 Date *193* *M*
 Account charged *John White* *Bio*
 Address
 Account guaranteed
 Address
 Embalming *✓ Dressing* *35.00*
 Robe, Suit, Dress *alt # J. W. 54* *25.00*
 Underwear and Hose
 Casket *6-3 G. 6th* *250.00*
 Casket with Copper Lin. *✓*
 Style of Casket *P. on State*
 No. of Casket *4118 Shiner*
 Outside Box *11x9*
 Shipping Case or Vault *✓*
 Handles *alt*
 Pillow Set *yes*
 Name Plate *✓*
 Cemetery *West*
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to *Richmond Ky*

R. R. Ticket *2515-* *50 30*

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon *(2) trips* *10.00*

Physician *Judge Bucknath J. R.*

County or City Burial _____

Automobiles _____

Baggage or Express Train No. *92*

Sat - June 14-41

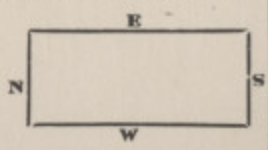
370 30

50 30

320 00

Name of deceased John Douglas Beane
 Date of death Fri June 13-41 AM
 Cause of death Broken Neck
 Place of death Morehead City N.C.
 Residence Winter Garden
 Age 31 Y'rs 5 Mo's 1 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Baptist Church W. Garden
 Date Sun June 15 1941 3 P. M
 Account charged Colbert Beane
 Address Winter Garden
 Account guaranteed Insurance
 Address Catawba & Deeping
 Embalming 2755
 Robe, Suit, Dress Gr 24th
 Underwear and Hose
 Casket 6-6-Gr 6th
 Casket with Copper Lin. ☒
 Style of Casket R. Cor Slat
 No. of Casket 48 Tampa
 Outside Box Reg
 Shipping Case or Vault ☒
 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 To etc 15.00

Body Shipped to _____ 4.50

R. R. Ticket Long S. Phone 148.00

Cash advanced N. G. Hill P. D. 1.99

Telegram (1) _____ 5.00

Minister Rev. E. J. Daniels 5.00

Casket Wagon 42 5.00

Physician Moving & Res 15.00

County or City Burial _____

Automobiles S. V. S 15.00

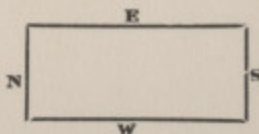
Baggage or Express Train No. _____

Cr. by Cash 435.49
25.00
410.49

Garry Hand Funeral Home

Name of deceased *Buty Albert Wm Poter*
 Date of death *Fri June 13-41 4:15 PM*
 Cause of death *O.S.H.*
 Place of death *O.S.H.*
 Residence *336 1/2 - Hilcrest ave*
 Age *—* Y'rs *—* Mo's *20* Days *—*
 Weight *—* Height *—* ft. *—* in. Eyes *—*
 Funeral at *Chapel*
 Date *Sat June 14 1941 4 P. M*
 Account charged *Albert W Poter*
 Address *336 1/2 - Hilcrest*
 Account guaranteed *Payor's*
 Address *—*
 Embalming *One of Body* 15. *—*
 Robe, Suit, Dress *—*
 Underwear and Hose *—*
 Casket *2-0 # 2-* 25. *—*
 Casket with Copper Lin. *—*
 Style of Casket *Oct. N. Top*
 No. of Casket *103 1/2 m.f.a*
 Outside Box *Reg*
 Shipping Case or Vault *—*
 Handles *small*
 Pillow Set *yes*
 Name Plate *—*
 Cemetery *Greenwood*
 Section *P.* Lot *29*

I Other Graves



X Grave on this date

Cremation *—*

Urn *—*

Single Grave *—*

Opening and Closing Grave *Yes* 5. *—*

Body Shipped to *—*

R. R. Ticket *—*

Cash advanced *—*

Telegram *—*

Minister *Rev Powell Tucker*

Casket Wagon *—*

Physician *Dr Andrews*

County or City Burial *—*

Automobiles *cloud car* 5. *—*

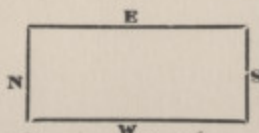
Baggage or Express Train No. *—*

50.00

Garry Hand Funeral Home

Name of deceased *Mrs Louise C. Crandall*
 Date of death *June 12-41-*
 Cause of death *Cancer of Intestines*
 Place of death *As*
 Residence *Daytona Beach*
 Age *54* - Yrs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at *Daytona*
 Date *May 31* 193 M
 Account charged *Maig by Brookes*
 Address *Ch*
 Account guaranteed
 Address
 Embalming *Cremation* 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket *6-3 Hat Plush*
 Casket with Copper Lin.
 Style of Casket *Oct. H. C.*
 No. of Casket
 Outside Box *Body covered*
 Shipping Case or Vault *by auto*
 Handles *430 P.M. Sat*
 Pillow Set *June 14-41*
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

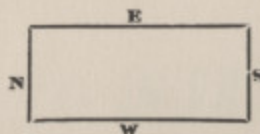
Cremation *Body Cremated*
 Urn *P. A. M. Mon*
 Single Grave *June-16-41-*
 Opening and Closing Grave
 Body Shipped to *Ashe to be*
 R. R. Ticket *Scattered*
 Cash advanced *Greenwood*
 Telegram *Cemetery*
 Minister
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Garry Hand Funeral Home

Name of deceased Charles H. Tichenor
 Date of death Sun - June 15
 Cause of death Coronary Thrombosis D.C.N
 Place of death Res E. Jefferson St
 Residence 1615
 Age 62 Y's ✓ Mo's 19 Days ✓
 Weight ✓ Height ✓ ft. ✓ in. ✓ Eyes ✓
 Funeral at Chapel
 Date Wed June 18 1934 109. M
 Account charged Mrs Chas H. Tichenor
 Address 1615 E. Jefferson St
 Account guaranteed Estble
 Address ✓
 Embalming & Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 4/3 Grey Wood 125.00
 Casket with Copper Lin. ✓
 Style of Casket Art IV. C.
 No. of Casket ✓
 Outside Box Req.
 Shipping Case or Vault ✓
 Handles Req.
 Pillow Set yes
 Name Plate ✓
 Cemetery Woodlawn
 Section ✓ Lot ✓

I Other Graves



X Grave on this date

Cremation

Urn

Single Grave

Opening and Closing Grave etc

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister Rev Powell Tucker

Casket Wagon (1)

Physician R. M. Andrews

County or City Burial

Automobiles 5.15

Baggage or Express Train No.

15.00

5.00

15.00

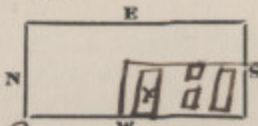
195.00

Barry Hand Funeral Home

Name of deceased Charles W. Shaw
 Date of death June 15th 1941 PM
 Cause of death Heart An Aneurism - Probably
 Place of death Res - Apoplexy
 Residence 1001 W. Central Ave
 Age 61 Y'rs 5 Mo's 11 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Tuesday June 17 1941 2 P M
 Account charged Mrs. Chas W. Shaw
 Address 1001 W. Central Ave
 Account guaranteed Estate
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 1/3 Grey Cloth 175.00
 Casket with Copper Lin. _____
 Style of Casket Oct H.C. 1/2 B
 No. of Casket 7-1600-1400
 Outside Box Yes
 Shipping Case or Vault _____
 Handles Yes
 Pillow Set Yes
 Name Plate _____
 Cemetery Greenwood
 Section U S.W. 1/4 Lot 15

I Other Graves

Head of Grave
East



X Grave on this date

Cremation Direct Vault by Family

Urn _____

Single Grave _____

Opening and Closing Grave etc 15.00

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister D. C. F. Ledy

Casket Wagon (1) 5.00

Physician Dr. Knowles

County or City Burial _____

Automobiles SVS 15.00

Baggage or Express Train No. _____

Pd Cash

248.00

Garey Hand Funeral Home

Name of deceased Alma Sarah Beach
 Date of death June 14
 Cause of death acute uremic
 Place of death Res -
 Residence Lakeland Fla
 Age 78 Y'rs 11 Mo's 2 Days
 Weight 160 Height 5 ft. 5 in. Eyes Blue
 Funeral at Lakeland Fla
 Date June 1934 M
 Account charged Smith & Leuke F.H.
 Address Lakeland Fla
 Account guaranteed Check
 Address _____
 Embalming _____
 Robe, Suit, Dress Cremation 37 50
 Underwear and Hose _____
 Casket Sp. Maple Urn #m32 31 50
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Body arrived
 Outside Box By Air to Monday
 Shipping Case or Vault 4:30 P.M.
 Handles June 16-41
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery Trus 8 a.m.
 Section June 17-41/Lot

I Other Graves

E	
N	S
<u>Alma Sarah Beach</u> <u>July 12 - June 14</u> <u>1862 - 1941</u>	
W	

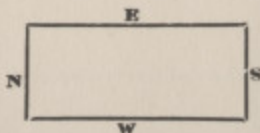
X Grave on this date

Cremation Ashes expressed to
 Urn Frank M. Beach
 Single Grave 10904 Irving Ave
 Opening and Closing Grave Chicago Ill
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 69.00

Garey Hand Funeral Home

Name of deceased John Phillips
 Date of death June 16 - 1935
 Cause of death Pung Abscess
 Place of death T. B. Sant
 Residence Immokalee Fla
 Age 58 Y'rs ✓ Mo's 29 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 1935 M
 Account charged H. Graham Copeland - Chairman
 Address of Board Co Commissioners
 Account guaranteed Everglades Collins Co
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 4/3 Coffin & Box 23 50
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles ✓
 Pillow Set ✓
 Name Plate _____
 Cemetery Greenwood
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave etc 6 50

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician L. H. Kingsburg

County or City Burial _____

Automobiles 545 15 00

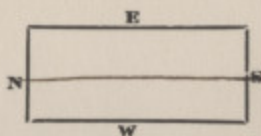
Baggage or Express Train No. _____

\$ 45.00

Garry Hand Funeral Home

Name of deceased Robert R. Nettles
 Date of death June 16
 Cause of death _____
 Place of death Bay Pines Hospital
 Residence Orlando Fla
 Age 47 Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Thurs June 18 1941 11 A. M
 Account charged _____
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Gray Cloth
 Casket with Copper Lin. _____
 Style of Casket Oct H. Cap
 No. of Casket _____
 Outside Box Reg
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section A E 1/2 Lot 76

I Other Graves



X Grave on this date

Cremation	_____	
Urn	<u>out</u>	<u>5.00</u>
Single Grave	_____	
Opening and Closing Grave	<u>etc</u>	<u>15.00</u>
Body Shipped to	_____	
R. R. Ticket	<u>P. B. Car</u>	<u>5.00</u>
Cash advanced	_____	
Telegram	_____	
Minister	<u>Father Bishop</u>	
Casket Wagon	<u>(u)</u>	<u>5.00</u>
Physician	<u>At Bay Pines</u>	
County or City Burial	_____	
Automobiles	<u>5.15</u>	<u>15.00</u>
Baggage or Express Train No.	_____	

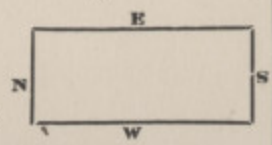
Body at 12:30 PM Mon
Wed - June - 18 - 41

45.00

Garry Hand Funeral Home

Name of deceased Frank Maxon
 Date of death June 19-41-6:50 AM
 Cause of death Myocarditis
 Place of death Res-403 S Rosalind
 Residence 403 S Rosalind
 Age 78 Y'rs 5 Mo's 5 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sunday June 22 1941 3 P.M
 Account charged Mrs Wm F. Maxon
 Address 403 S. Rosalind Ave
 Account guaranteed Estate
 Address _____
 Embalming Yes
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 Sr Doe
 Casket with Copper Lin. ☒
 Style of Casket Set H. e
 No. of Casket 1241- Orleans
 Outside Box ☒
 Shipping Case or Vault John seal
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery La Grange Fla.
 Section _____ Lot _____

I Other Graves



X Grave on this date

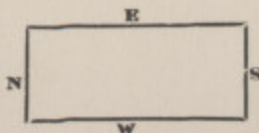
Cremation None
 Urn Auto
 Single Grave _____
 Opening and Closing Grave Del Seal
 Body Shipped to La Grange Fla
 R. R. Ticket py auto
 Cash advanced _____
 Telegram _____
 Minister Rev A Fred Turner
 Casket Wagon 12
 Physician Dr. Frank Gray
 County or City Burial _____
 Automobiles S r S
 Baggage or Express Train No. 28

35.00
125.00
125.00
15.00 X
25.00
5.00
35.00
365.00
15.00 X
350.00

Garry Hand Funeral Home

Name of deceased Abraham Sobey
 Date of death June 16-41 A M
 Cause of death _____
 Place of death Smith Nursing Home
 Residence 431 S. Church
 Age 80 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Thurs June 19 1941 4 P. M
 Account charged Eda Sobey Son
 Address _____
 Account guaranteed Cash
 Address _____
 Embalming X 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 9" x 10" Gr. Doe 30.00
 Casket with Copper Lin. ✓
 Style of Casket Spr. H. M
 No. of Casket 1st
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Chert
 Pillow Set ✓
 Name Plate _____
 Cemetery Jewish
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave T + etc 15.00

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister Rabbi Skoff 5.00

Casket Wagon (1)

Physician Dr

County or City Burial _____

Automobiles S V S 15.00

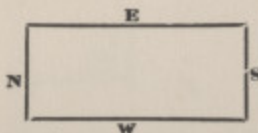
Baggage or Express Train No. 8

100.00

Garry Hand Funeral Home

Name of deceased Mrs Julia Francis Hammond
 Date of death Fri June 20th 9 A.M.
 Cause of death Myocarditis - due to infected lungs
 Place of death G. H. H.
 Residence 8. 1st Ave
 Age 33 Y'rs 1 Mo's 20 Days
 Weight 159 Height 5 ft. 8 in. Eyes
 Funeral at Chapel
 Date Sun June 22 1941 2 P. M
 Account charged Harry Hammond
 Address East Robinson Ave
 Account guaranteed
 Address
 Embalming Dressing 35.⁰⁰
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-Set in Plush 125.⁰⁰
 Casket with Copper Lin. ☒
 Style of Casket Ed. 1/2-CP
 No. of Casket 1927-
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate ☒
 Cemetery ☒
 Section Lot

I Other Graves



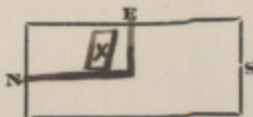
X Grave on this date

Cremation Cremation 50.⁰⁰
 Urn
 Single Grave Body Cremated
 Opening and Closing Grave S. A. M.
 Body Shipped to New York - 23-41
 R. R. Ticket
 Cash advanced will call for
 Telegram
 Minister Rev John Ashby 5.⁰⁰
 Casket Wagon 11
 Physician Dr
 County or City Burial
 Automobiles omit Service 5.⁰⁰
 Baggage or Express Train No. 27000

Garry Hand Funeral Home

Name of deceased Mr Edward F O'Carroll
 Date of death June 20-41 AM
 Cause of death State Hospital Cheltenham
 Place of death State Hospital Cheltenham
 Residence 243 S. Garland
 Age _____ Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Cheltenham
 Date Sunday June 22 1941 4 P. M
 Account charged Mrs E. F. O'Carroll
 Address 243 S. Garland
 Account guaranteed _____
 Address _____
 Embalming X
 Robe, Suit, Dress Blue Serge
 Underwear and Hose _____
 Casket 6-4- Metal Oak 7 in 200.00
 Casket with Copper Lin. X
 Style of Casket State 12-2
 No. of Casket Legion Temple
 Outside Box 2-4
 Shipping Case or Vault X
 Handles X
 Pillow Set X
 Name Plate _____
 Cemetery Greenwood
 Section B-NE 1/4 Lot 63

I Other Graves



X Grave on this date

Cremation Burial Lot W 3500
 Urn Lot Bought Direct

Single Grave _____
 Opening and Closing Grave State 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced J. S. at Cheltenham 25.00
 Telegram _____
 Minister _____
 Casket Wagon State Hospital 75.00
 Physician _____
 County or City Burial
 Automobiles S 1 S 15.00
 Baggage or Express Train No. _____

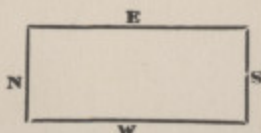
335.00
33.00

Pd Cash 300.00

Garey Hand Funeral Home

Name of deceased Mrs Mary P.N. Conklin
 Date of death Tue June 20-41- PM
 Cause of death Acute Cardiac Dilatation
 Place of death Res
 Residence Winter Park Fla
 Age 88 Yrs 5 Mo's 5 Days
 Weight 135 Height 5 ft. 5 in. Eyes
 Funeral at West
 Date June 1941 M
 Account charged Jane E. Conklin
 Address 318 Victoria Ave Winter Park
 Account guaranteed Wife
 Address
 Embalming & Dressing 35.00
 Robe, Suit, Dress -
 Underwear and Hose 5c
 Casket 6-3 in Soc 135.00
 Casket with Copper Lin. -
 Style of Casket Oct H. Cap
 No. of Casket 1311 Shiner
 Outside Box 7-9
 Shipping Case or Vault -
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery West
 Section Lot

I Other Graves



X Grave on this date

Cremation

Urn

Single Grave

Opening and Closing Grave

Body Shipped to Middleton N.Y. 57.45

R. R. Ticket 3690-2055

Cash advanced N.Y. Transp 5.00

Telegram

Minister West

Casket Wagon (2) 10.00

Physician Dr. Stataud

County or City Burial

Automobiles

Baggage or Express Train No. 92

Sat June 21-41 42.45

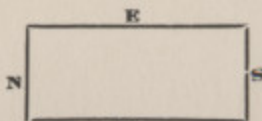
62.45

\$180.00

Garey Hand Funeral Home

Name of deceased *Mr. Wm B. Young*
 Date of death *Sat. June 22 1941 8:15 AM*
 Cause of death _____
 Place of death *Res*
 Residence *Orlando*
 Age *73* Y'rs *7* Mo's *18* Days _____
 Weight *100* Height *5* ft. *8* in. Eyes _____
 Funeral at *Grave side*
 Date *Sun June 22 1941 2 P. M*
 Account charged *Mrs W. B. Young*
 Address *Orlando*
 Account guaranteed *Estate*
 Address _____
 Embalming *Yes* *Dressing* 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-6-Metal* 250.00
 Casket with Copper Lin. _____
 Style of Casket *Style 12-e*
 No. of Casket *Graham*
 Outside Box *Reg*
 Shipping Case or Vault _____
 Handles *Ext*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Orlando*
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation *Moved Body*
 Urn *No Charge*

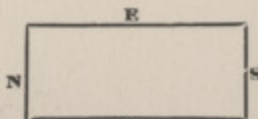
Single Grave _____
 Opening and Closing Grave *Trade* 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon *(1) & Res* 10.00
 Physician _____
 County or City Burial _____
 Automobiles *S. S* 15.00
 Baggage or Express Train No. *Ph*

325.00

Garry Hand Funeral Home

Name of deceased Kennith Steadman
 Date of death Tue June 20-41- 8:50 PM
 Cause of death O. G. H.
 Place of death O. G. H.
 Residence Oakland & Church
 Age 43 Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Crematory Room
 Date Sun 6-22-41- 193 _____ 10 AM
 Account charged City
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3- case & box 15.00
 Casket with Copper Lin. _____
 Style of Casket Spr & M
 No. of Casket _____
 Outside Box 4-9
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation Friends Bought
 Urn single grave 15.00

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

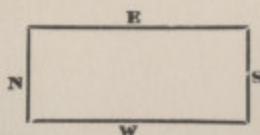
\$ 15.00

Mrs. J B Arnold
Preston Hollow
New York

Garry Hand Funeral Home

Name of deceased *Mr. Harry C. Heggenbloom*
 Date of death *June 19 - 41*
 Cause of death *not given on Permit*
 Place of death _____
 Residence *Leesburg Fla*
 Age *50* - Y's _____ Mo's _____ Days _____
 Weight *180* Height *6* ft. in. Eyes _____
 Funeral at *Leesburg*
 Date _____ 193 _____ M
 Account charged *Page Funeral Home*
 Address *Leesburg Fla*
 Account guaranteed *OK*
 Address _____
 Embalming *Examination* 37. 50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin *Body Guard*
 Style of Casket *by out 6 - P.M.*
 No. of Casket *Fun June 22 - 41*
 Outside Box _____
 Shipping Case or Vault *Body cremated*
 Handles *S-A in Mon 6 - 23 - 41*
 Pillow Set _____
 Name Plate *Oshes Express & Co*
 Cemetery *Page F. Home*
 Section *Leesburg Fla* Lot _____

I Other Graves
wood box
 X Grave on this date



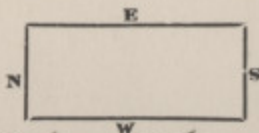
Cremation _____
 Urn *wooden*
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Oshes Express*
 R. R. Ticket *Page Funeral*
 Cash advanced *Home Leesburg*
 Telegram *Fla Via*
 Minister *Bus Lane*
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 37. 50

Garry Hand Funeral Home

Name of deceased *Mr. Edwin C. Myers*
 Date of death *June 20-41*
 Cause of death *Carcinoma of Liver*
 Place of death *Res*
 Residence *De Land Fla.*
 Age *63* Y'rs *2* Mo's *8* Days
 Weight *135* Height *6* ft. *—* in. Eyes
 Funeral at *De Land*
 Date *193* M
 Account charged *Allen & Summerhill*
 Address *De Land Fla*
 Account guaranteed
 Address
 Embalming *Cremation* 87.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket *Body covered by*
 Casket with Copper Lin. *inside*
 Style of Casket *S. A. M*
 No. of Casket *Seen 6-22-41*
 Outside Box
 Shipping Case or Vault *Body cremated*
 Handles *S. A. M 6-23-41*
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves

wooden box



X Grave on this date

Cremation *Ashes Expressed to*
 Urn *Allen & Summerhill*
 Single Grave *De Land Fla*

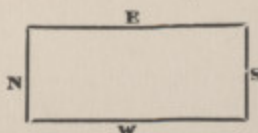
Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No. 37.50

Carey Hand Funeral Home

Name of deceased Henry R Johnson
 Date of death June 19 1941
 Cause of death Pul T. B.
 Place of death Appl
 Residence _____
 Age 22 Y'rs 8 Mo's 21 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date was June 24 1941 10:30 A M
 Account charged Lacy Johnson
 Address Houston Texas
 Account guaranteed Immortal
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section P Lot 21

I Other Graves



X Grave on this date

Cremation _____
 Urn Auto
 Single Grave Auto
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister Rev C. Clark
 Casket Wagon (1)
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

5-00
 0-00
 15-00

5-00

15-00

45-00

Garey Hand Funeral Home

Name of deceased Baby Fleckenstein.
 Date of death June 23 - 4-m.
 Cause of death Still Born
 Place of death Fla. Inst
 Residence Orlando - Fla
 Age Y'rs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at
 Date 193 M
 Account charged Robert A. Fleckenstein
 Address Orlando - Fla
 Account guaranteed Cash
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose Calumation 5.00
 Casket
 Casket with Copper Lin.
 Style of Casket Body Cremated
 No. of Casket 8 a.m. Tuesday
 Outside Box June 24 - 41
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot
 I Other Graves
 N S
 E
 W

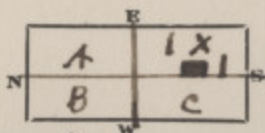
 X Grave on this date
 Cremation Will call for
 Urn ashes
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Telegram
 Minister
 Casket Wagon
 Physician Dr. Lynn
 County or City Burial
 Automobiles
 Baggage or Express Train No.

5.00

Garry Hand Funeral Home

Name of deceased Mrs Mary Francis Baker
 Date of death Mon June 23-41 6:20 PM
 Cause of death Res
 Place of death Holt Ave
 Residence 225 Holt Ave
 Age 64 Y'rs 6 Mo's 24 Days
 Weight 125 Height 5 ft. 4 in. Eyes
 Funeral at Chapel
 Date Fri June 27 1941 4:30 P.M.
 Account charged Samuel Bonance
 Address Richmond, Maine
 Account guaranteed Estate
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 Solid Birch 250.00
 Casket with Copper Lin.
 Style of Casket R. Co State H Co
 No. of Casket 4118 Shiner
 Outside Box 11-9
 Shipping Case or Vault —
 Handles Ext
 Pillow Set yes
 Name Plate —
 Cemetery Palm Cemetery N.P.
 Section 62 - Lot D

I Other Graves



X Grave on this date

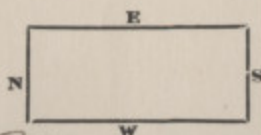
Cremation Can't 5.00
 Urn Can P. B. 5.00
 Single Grave —
 Opening and Closing Grave Tota 15.00
 Body Shipped to —
 R. R. Ticket —
 Cash advanced —
 Telegram —
 Minister Dean Johnson 5.00
 Casket Wagon —
 Physician Dr. Holst
 County or City Burial —
 Automobiles S & S 15.00
 Baggage or Express Train No. —

330.00

Garry Hand Funeral Home

Name of deceased Mr Geo Finne
 Date of death Mon June 23 41 9 PM
 Cause of death Coronary Occlusion
 Place of death Per
 Residence Keytone Dr
 Age 71 Yrs — Mo's 23 Days —
 Weight — Height — ft. — in. Eyes —
 Funeral at Chapel
 Date June 22 1941 M
 Account charged Mr Geo Finne
 Address Keytone Dr Osland
 Account guaranteed Insomone
 Address —
 Embalming T. Dunning 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3-8-10-12 100.00
 Casket with Copper Lin. ✓
 Style of Casket Oct. H. C
 No. of Casket 1972
 Outside Box R-9
 Shipping Case or Vault ✓
 Handles ✓
 Pillow Set yes
 Name Plate ✓
 Cemetery Guernwood
 Section — Lot —

I Other Graves



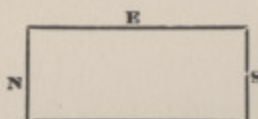
X Grave on this date

Cremation Aut. P. D. 5.00
 Urn Aut. Finne 5.00
 Single Grave —
 Opening and Closing Grave T & etc 15.00
 Body Shipped to —
 R. R. Ticket —
 Cash advanced —
 Telegram —
 Minister Lindsay McNeil 5.00
 Casket Wagon (11)
 Physician Dr
 County or City Burial —
 Automobiles S & S 15.00
 Baggage or Express Train No. — \$
180.00

Garry Hand Funeral Home

Name of deceased Fred Eaton
 Date of death June 23rd
 Cause of death Acute dilatation of heart
 Place of death Res
 Residence Lakeland Fla
 Age 49 Yrs 1 Mo's 26 Days
 Weight 195 Height 5 ft. 8 in. Eyes —
 Funeral at Lakeland Fla
 Date June 1941 M
 Account charged Smith & Senke
 Address Lakeland Fla
 Account guaranteed Cheek
 Address —
 Embalming —
 Robe, Suit, Dress —
 Underwear and Hose Cremation 37.50
 Casket —
 Casket with Copper Lin. —
 Style of Casket —
 No. of Casket Body arrived
 Outside Box by auto Wed
 Shipping Case or Vault 12:45 P.M.
 Handles June 25 - 1941
 Pillow Set —
 Name Plate Body cremated
 Cemetery Thurs 8 A.M.
 Section June 26 - 41 Lot

I Other Graves



X Grave on this date

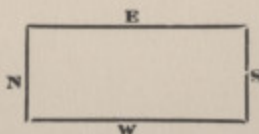
Cremation Refuse Ashes to
 Urn Smith & Senke
 Single Grave Lakeland Fla
 Opening and Closing Grave —
 Body Shipped to —
 R. R. Ticket —
 Cash advanced —
 Telegram —
 Minister —
 Casket Wagon —
 Physician —
 County or City Burial —
 Automobiles —
 Baggage or Express Train No. —

37.50

Garry Hand Funeral Home

Name of deceased Mrs Adeline M Canale
 Date of death Wed. June 25-41 7:45 P.M.
 Cause of death Coronary Left Heart A.C. Aff
 Place of death Res
 Residence 2420 San Hart Memorial
 Age 41 Yrs 1 Mo's 28 Days
 Weight 160 Height 5 ft. in. Eyes
 Funeral at Chapel
 Date June 27 1941 3 P. M
 Account charged Trans. Parish
 Address 2420 San Hart Memorial
 Account guaranteed Payments
 Address Emt
 Embalming Yes 25.00
 Robe, Suit, Dress Yes 5.00
 Underwear and Hose Yes
 Casket 6-3-52 Doe 65.00
 Casket with Copper Lin.
 Style of Casket Sgt. V. T.
 No. of Casket N+M.
 Outside Box Reg
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery Greenwood
 Section Lot

I Other Graves



X Grave on this date

Cremation

Urn

Single Grave White 15.00

Opening and Closing Grave Yes 15.00

Body Shipped to

R. R. Ticket

Cash advanced

Telegram

Minister

Casket Wagon

Physician

County or City Burial

Automobiles 5 x 5 15.00

Baggage or Express Train No.

6 mo. N.C.

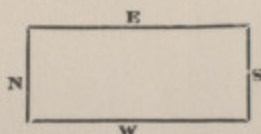
People Day P.C.

7.40 00

Garry Hand Funeral Home

Name of deceased Mrs Orlando Steel
 Date of death Fri June 27-41 6:10 AM
 Cause of death _____
 Place of death Res
 Residence 814 Virginia Drive
 Age 83 Y's 5 Mo's 23 Days _____
 Weight 145 Height 5 ft. 9 in. Eyes Blue
 Funeral at Chapel
 Date Sunday June 29 1941 4:30 P.M.
 Account charged Prescot W. Steele
 Address 814 Virginia Drive
 Account guaranteed Pay ment
 Address _____
 Embalming & Dressing 25.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Grey cloth 75.00
 Casket with Copper Lin. _____
 Style of Casket Oct N. Cap.
 No. of Casket 1341 Orleans
 Outside Box _____
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Cremation
 Section _____ Lot _____

I Other Graves

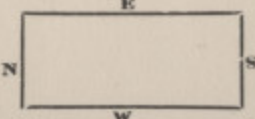


X Grave on this date

Cremation Cremation 50.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister _____
 Casket Wagon _____
 Physician Dr Redding
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$150.00

Garry Hand Funeral Home

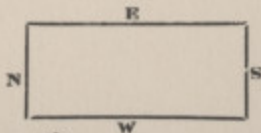
Name of deceased Bailey Clifton Lynn
 Date of death Sat June 28 41 8 AM
 Cause of death _____
 Place of death Res -
 Residence 431- E. Church st
 Age 57 Yrs — Mo's 4 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at M Service
 Date _____ 193 M
 Account charged Mrs. Louise Lynn
 Address 431 E. Church. P. O. Box 1469
 Account guaranteed Payments
 Address _____
 Embalming See Chg 20.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault Body cremated
 Handles 8-A-22-6-129-41
 Pillow Set _____
 Name Plate will call for
 Cemetery _____
 Section Wooden Case Lot _____
 I Other Graves 
 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 (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

75.00

Garry Hand Funeral Home

Name of deceased Dr. Louis Buss
 Date of death Sat June 28-41 3 PM
 Cause of death Smelly
 Place of death Res
 Residence 3018 Dade ave
 Age 73 Y'rs 5 Mo's 7 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Home
 Date _____ 193 _____ M
 Account charged Mrs. Alice Buss Li
 Address 3018 Dade ave
 Account guaranteed Payments
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket No Service
 Outside Box any kind
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation Cremation 50.00

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket Family Dry Box

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon _____

Physician Dr. Christensen

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

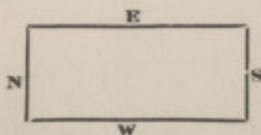
each 10.00

Pr Me 10.00 50.00

Carey Hand Funeral Home

Name of deceased Mrs Ruth E. Walker
 Date of death Set June 28-41- 4 P.M
 Cause of death Chylcystitis acute
 Place of death G.H.
 Residence 2008 Kent Jackson
 Age 34 Yrs 7 Mo's 23 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Mon June 30 1941 3 P.M
 Account charged Quator Walker (Deceased)
 Address 2008 Kent Jackson
 Account guaranteed Check
 Address _____
 Embalming Yes
 Robe, Suit, Dress _____ Prude
 Underwear and Hose ✓
 Casket 6-3 H L.S.
 Casket with Copper Lin. ✓
 Style of Casket Set 1/2 - C
 No. of Casket 7-1575-
 Outside Box R-19
 Shipping Case or Vault ✓
 Handles Ext - white
 Pillow Set yes
 Name Plate _____
 Cemetery Deat
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to Charleston H. Va

R. R. Ticket 31. - 1660

Cash advanced _____

Telegram (1)

Minister M. Fair

Casket Wagon (2)

Physician Dr. Gross

County or City Burial _____

Automobiles _____

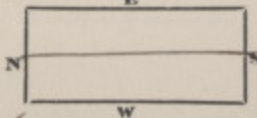
Baggage or Express Train No. 92 249.73

Mon June 30-41

35.00
 6.00
 150.00

47.60
 1.13
 10.00

Garry Hand Funeral Home HOPPER

Name of deceased *Mrs. Mary G. Hopper*
 Date of death *Sat. June 28-41* *PM*
 Cause of death _____
 Place of death *Cottage 7-4th St*
 Residence *440 N. Summellin*
 Age *53* Y's *6* Mo's *21* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Tues July 1-1941* *3. M*
 Account charged *Albert W. Hopper*
 Address *440 N. Summellin*
 Account guaranteed *estate*
 Address _____
 Embalming *& Dressing* *35.00*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3- Dark Gr Plush* *185.00*
 Casket with Copper Lin. _____
 Style of Casket *Oct. 1/2 - e -*
 No. of Casket *1927 - Shuer*
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *Ext*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Greenwood*
 Section *V W 1/2 - 27* Lot _____
David Brown Lot
 I Other Graves 
 X Grave on this date _____
 Cremation *cont* *5.00*
 Urn _____
 Single Grave _____
 Opening and Closing Grave *T + etc* *15.00*
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister *Rev. W. R. Black*
 Casket Wagon *(1)* *5.00*
 Physician *Dr. Lynn*
 County or City Burial _____
 Automobiles *S. S.* *15.00*
 Baggage or Express Train No. *26*

Music

260.00
5.00

265

Garey Hand Funeral Home

Name of deceased Mr Fred W. Hester
 Date of death Sat June 30 - 41 - 11:30 PM
 Cause of death Coronary Sclerosis
 Place of death Res
 Residence 429 Ruth St
 Age 68 Yrs 4 Mo's 10 Days
 Weight 150 Height 5 ft. 5 in. Eyes
 Funeral at Chapel
 Date Mon June 30 1941 2 P. M
 Account charged Mrs Fred Hester
 Address 429 Ruth St
 Account guaranteed Estate
 Address
 Embalming + Dress 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-6 Metal Coffin 425.00
 Casket with Copper Lin. Inner
 Style of Casket State H. Cap
 No. of Casket Mason Shain
 Outside Box Rt 9
 Shipping Case or Vault
 Handles CA
 Pillow Set yes
 Name Plate Name + Date
 Cemetery West
 Section _____ Lot _____

I Other Graves
 X Grave on this date

E
N
S
W

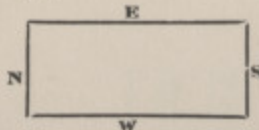
Cremation
 Urn amit
 Single Grave Shanestates N.Y.
 Opening and Closing Grave N.Y. Transfer 5.00
 Body Shipped to Syracuse N.Y.
 R. R. Ticket 4368 7220 1525 17.95
 Cash advanced 4348 10.00
 Telegram Wm J. Thomas 2.26
 Minister M. C. Kinn
 Casket Wagon (2) 10.00
 Physician Dr J. S. McEuan
 County or City Burial
 Automobiles
 Baggage or Express Train No. 76

Mon Night 6-30-41 662.21
662.21

Garry Hand Funeral Home

Name of deceased Jacob Kiser
 Date of death Sun June 29-41- PM
 Cause of death _____
 Place of death Res
 Residence Near Chapman Dairy
 Age 75 Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Tues. July 1 - 1941 10 A M
 Account charged John Kiser
 Address _____
 Account guaranteed Payments
 Address _____
 Embalming Dressing
 Robe, Suit, Dress Blk
 Underwear and Hose _____
 Casket C-3 Care & Ice
 Casket with Copper Lin. ☒
 Style of Casket See H m
 No. of Casket H m
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Reg
 Pillow Set ☒
 Name Plate See H m
 Cemetery See H m
 Section County Home

I Other Graves



X Grave on this date

Cremation Auto
 Urn _____
 Single Grave White
 Opening and Closing Grave T & A
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Telegram _____
 Minister E. L. Smith
 Casket Wagon (1)
 Physician Dr
 County or City Burial _____
 Automobiles S & S
 Baggage or Express Train No. _____

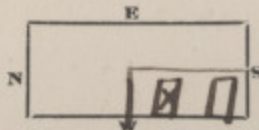
Had no money at all
made County Burial

25.00
 5.00
 35.00
 14.50
 5.00
 15.00
 15.00
 5.00
 15.00
 120.00
 14.50

Carey Hand Funeral Home

Name of deceased Mrs. Mable Russell
 Date of death Fri. June 27
 Cause of death _____
 Place of death Ann Arbor Mich
 Residence _____
 Age 71 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 193 _____ M
 Account charged H. C. Loeuf
 Address Ann Arbor Mich
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Ex. Emb. Doe
 Casket with Copper Lin. _____
 Style of Casket Exp. H. Pap
 No. of Casket _____
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Exp
 Pillow Set yes
 Name Plate _____
 Cemetery Greenwood
 Section G. SW 1/4 Lot 33

I Other Graves



X Grave on this date

Cremation out

Urn _____

Single Grave _____

Opening and Closing Grave 71.52

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Telegram _____

Minister _____

Casket Wagon (1)

Physician _____

County or City Burial _____

Automobiles SVS

Baggage or Express Train No. _____

5.00

15.00

5.00

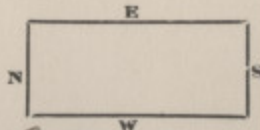
15.00

\$40.00

Garry Hand Funeral Home

Name of deceased *Miss Dossa Touchstone*
 Date of death *Mon June 30. 1 P.M.*
 Cause of death _____
 Place of death *Municipal Hpt Tampa Fla*
 Residence _____
 Age *22* Yrs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Wed July 2 1914* *3 P.M.*
 Account charged *Miss*
 Address _____
 Account guaranteed *Payments*
 Address _____
 Embalming _____
 Robe, Suit, Dress *White Gown*
 Underwear and Hose *5*
 Casket *6-3 Salem Moray*
 Casket with Copper Lin. ☒
 Style of Casket *Oct-1/2-C*
 No. of Casket *7-1575 Tampa*
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *EA*
 Pillow Set *yes*
 Name Plate ☒
 Cemetery *Greenwood*
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation *Auto P. B.* 5.00
 Urn *Bought Direct*
 Single Grave *Single Room*
 Opening and Closing Grave *Trst* 15.00
 Body Shipped to *Missie* 5.00
 R. R. Ticket *Auto Min* 5.00
 Cash advanced _____
 Telegram *Auto F. No chg*
 Minister *Lawell Tucker*
 Casket Wagon *To Tampa* 25.00
 Physician _____
 County or City Burial _____
 Automobiles *S v S* 15.00
 Baggage or Express Train No. _____

262.50