

3-1-1942

Memoranda Book 150: Carey Hand Funeral Home records, March 1, 1942 to April 17, 1942

Carey Hand Funeral Home

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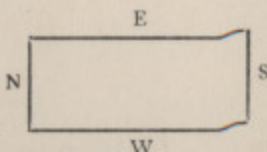
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Carey Hand Funeral Home

Name of deceased *Mr Wm H. Shank*
 Date of death *Mar-1st 42* *12:25* *A* M
 Cause of death *O. G. H.*
 Place of death *Winter Park 124 N. Eng Ave*
 Residence *Winter Park 124 N. Eng Ave*
 Age *32* Yrs *4* Mo's *28* Days
 Weight *200* Height *5* ft. *11* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Mar 2* 1942 *4 P.* M
 Account charged *Mrs H. H. Shank*
 Address *124 N. Eng Ave Winter Park*
 Account guaranteed *Doc Telephone Co*
 Address *Doc*
 Embalming *Yes* 35.00
 Robe, Suit, Dress 10.00
 Underwear and Hose 250.00
 Casket *6-6-Gr. Cloth*
 Casket with Copper Lin.
 Style of Casket *R.C. State H. Case*
 No. of Casket
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *Ext*
 Pillow Set *Yes*
 Name Plate
 Cemetery *Woodlawn*
 Section Lot

I Other Graves



X Grave on this date

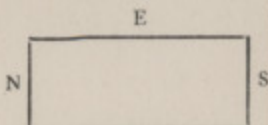
Cremation *P.B. Car* 5.00
 Urn *min Can* 3.99
 Single Grave 15.00
 Opening and Closing Grave *Teate*
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister *Rev Paul Tucker* 5.00
 Music *yes* 5.00
 Casket Wagon *(1)*
 Physician *Dr. M. Egan*
 County or City Burial 15.00
 Automobiles *S & S*
 Baggage or Express Train No. *B*

345.00

Curry Hand Funeral Home

Name of deceased Sgt John T. Farrell
 Date of death Wed. Mar. 1-31-42 4:20 P.M.
 Cause of death Cerebral Vascular Occlusion
 Place of death Am. Base Hospital
 Residence 43 Alexander Place - Culand
 Age 82 Y's 1 Mo's 27 Days 24
 Weight 150 Height 5 ft. 10 in. Eyes Blue
 Funeral at Chapel
 Date Tues. Mar. 3, 1942 4 P.M.
 Account charged Mrs. John T. Farrell
 Address 43 Alexander Place
 Account guaranteed Guarantee
 Address St. Louis
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hosiery ✓
 Casket 6-3-41 Joe 100.00
 Casket with Copper Lin. ✓
 Style of Casket Ed. H. Cap.
 No. of Casket 1972 Tampa
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes
 Name Plate W. Farrell
 Cemetery Arlington Va
 Section Lot

I Other Graves



X Grave on this date

27347 & 9 OF 898

Cremation ✓
 Urn ✓
 Single Grave ✓
 Opening and Closing Grave ✓
 Body Shipped to Am. Base
 R. R. Ticket 30.90 - 29.05 145 61.40
 Cash advanced ✓
 Autos ✓ 1.19
 Telegram ✓
 Minister W. Davis C. S. Service
 Music Organ
 Casket Wagon 10.00
 Physician S. R. Bloomenthal
 County or City Burial Culand Am. Base
 Automobiles ✓
 Baggage or Express Train No. 92

Wed. 3-4-42

only take

207.59

61.40

\$146.19

Consigned to
 Office of the Day
 W. T. Myers

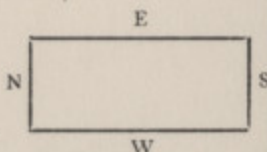
Carey Hand Funeral Home

Name of deceased <i>Mr. J. M. Morton Billings</i>		
Date of death <i>Jan-1-42</i>		<i>6:30 P.M.</i>
Cause of death		
Place of death <i>Bey</i>		
Residence <i>1419 Pine Crest Ave Orlando</i>		
Age <i>82</i>	Y'rs <i>8</i>	Mo's <i>16</i> Days
Weight	Height	ft. in. Eyes
Funeral at <i>No Services</i>		
Date		194 <i>2</i> M
Account charged <i>Mrs. Katie Billings</i>		
Address <i>1419 Pine Crest Ave</i>		
Account guaranteed		
Address		
Embalming	<i>Yes</i>	<i>30</i>
Robe, Suit, Dress		
Underwear and Hose		
Casket		
Casket with Copper Lin.	<i>Body cremated</i>	
Style of Casket	<i>9-A.M. Mon</i>	
No. of Casket	<i>3-2-42</i>	
Outside Box		
Shipping Case or Vault	<i>will call for</i>	
Handles		
Pillow Set		
Name Plate		
Cemetery		
Section		Lot
E		
I Other Graves	<div style="border: 1px solid black; width: 150px; height: 50px; margin: 0 auto; position: relative;"> N S </div>	
X Grave on this date	W	
Cremation	<i>Cremation</i>	<i>50</i>
Urn		
Single Grave		
Opening and Closing Grave		
Body Shipped to		
R. R. Ticket		
Cash advanced		
Autos		
Telegram		
Minister		
Music		
Casket Wagon	<i>(1)</i>	<i>5.00</i>
Physician		
County or City Burial		
Automobiles		
Baggage or Express Train No.		
		<i>85.00</i>

Carey Hand Funeral Home

Name of deceased *Mrs. Margaret Anderson*
 Date of death *Thurs Feb 11* M
 Cause of death *Heart Miss*
 Place of death *Portland, Ore*
 Residence *Portland, Ore*
 Age *70* Yrs. *4* Mo's. Days
 Weight *150* Height *5* ft. *5* in. Eyes
 Funeral at *Chapel*
 Date *Wed Feb 11* 194*2* M
 Account charged *Funeral Expense*
 Address *First Nat Bank*
 Account guaranteed *Cash*
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket *Simple Chg* 25.00
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket 10.00
 Cash advanced *X C. S. Rogers* 15.00
 Autos *(1) & Labeled*
 Telegram
 Minister *Mrs. Lusk*
 Music
 Casket Wagon *(1)* 5.00
 Physician
 County or City Burial
 Automobiles *S. & L. Labeled* 35.00
 Baggage or Express Train No.

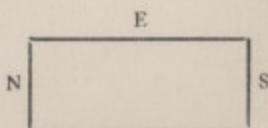
Taken *X Labeled and*
 Placed in *Immediate*
Fun Mar 8-42
 \$90.00

0408866 Air Corp
De Ridder Army Air Base
Carey Hand Funeral Home

2+

Name of deceased **JOHN F. STEVENSON**
Date of death **Tues Mar 3-42** **A M**
Cause of death **Air Plane Crash** **entire body crushed**
Place of death **1-Mi. East of Bithlo**
Residence **San Diego Calif**
Age **23** Yrs **8** Mo's **20** Days
Weight _____ Height _____ ft. _____ in. Eyes _____
Funeral at **Cent**
Date _____ 194 _____ M
Account charged **Gov** **Contract**
Address _____
Account guaranteed _____
Address _____
Embalming _____ **35.00**
Robe, Suit, Dress ☒
Underwear and Hosiery ☒
Casket **6-3-32 Gov** **55.00**
Casket with Copper Lin **Metal Lined** **50.00**
Style of Casket **Ext H. Cap**
No. of Casket **1972 Tampa**
Outside Box **Reg**
Shipping Case or Vault ☒
Handles **Ext**
Pillow Set _____
Name Plate _____
Cemetery _____
Section _____ Lot _____

I Other Graves



X Grave on this date

0408866 Air Corp **W** from
Cremation **De Ridder Army Air Base**
Urn _____

Single Grave _____
Opening and Closing Grave _____
Body Shipped to **San Diego**
R. R. Ticket **Gov** **Calif**
Cash advanced _____
Autos _____
Telegram _____
Minister _____
Music _____
Casket Wagon _____ **10.00**
Physician _____
County or City Burial _____
Automobiles _____
Baggage or Express Train No. **92** **Ab**

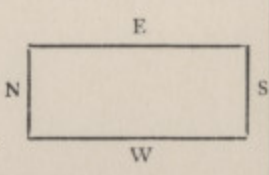
Wed 3-4-42

750.00

Plane fell one mile east of Bithlo
about 1245 PM - 3-3-42
Body in Very Bad Condition
badly mangled

#18026188 **SEERIG**
 22 *obsequies* *Squadron*
 Carry Hand Funeral Home
 Sgt *Severig*
 Name of deceased **ARTHUR J. SEVERIG**
 Date of death **TUES MAR 3-42** **AM**
 Cause of death **AIRPLANE CRASH**
 Place of death **1 mi East of Bithlo**
 Residence **San Antonio Texas**
 Age **27** Yrs **3** Mo's **23** Days
 Weight Height ft. in. Eyes
 Funeral at
 Date 194 **M**
 Account charged **Gen Contract**
 Address
 Account guaranteed
 Address
 Embalming **35.00**
 Robe, Suit, Dress
 Underwear and Hose
 Casket **6-3-12** **55.00**
 Casket with Copper Lin. **Metal lined** **50.00**
 Style of Casket **Get. N. Cap**
 No. of Casket **1972** **Tamp. 2**
 Outside Box **Reg**
 Shipping Case or Vault
 Handles **Ext**
 Pillow Set
 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 **San Antonio**
 R. R. Ticket **Texas**
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon **10.00**
 Physician
 County or City Burial
 Automobiles **3-4-42**
 Baggage or Express Train No. **92**

Plain **1-1-MI E of Bithlo** **750.00**
about 1245 PM 3-3-42
Body Badly mangled

Carey Hand Funeral Home

Name of deceased *Carl Carithers*
 Date of death *Tues. Mar. 3-42* 4:30 P. M.
 Cause of death *accidental trauma*
 Place of death *Lake at Ocala Vista*
 Residence *Ocala Vista*
 Age *8* Y'rs *11* Mo's *10* Days
 Weight *90* Height *4* ft. *—* in. Eyes *—*
 Funeral at *Chapel*
 Date *Fri 3-6-42* 194 *3* P. M.
 Account charged *H. M. Carithers*
 Address *Ocala Vista Fla*
 Account guaranteed *Insurance*
 Address *—*
 Embalming *I Dress*
 Robe, Suit, Dress *—*
 Underwear and Hose *—*
 Casket *5-0 White L*
 Casket with Copper Lin. *—*
 Style of Casket *Oct. H. Cap*
 No. of Casket *103 Tampa*
 Outside Box *Reg*
 Shipping Case or Vault *—*
 Handles *Reg*
 Pillow Set *yes*
 Name Plate *—*
 Cemetery *Rose Hill* *Hessomina*
 Section *—* Lot *—*

I Other Graves

Labor at Hessomina
Ed Street

X Grave on this date

Cremation *Am't no chg*

Urn *C. H. no chg*

Single Grave

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Autos

Telegram

Minister *Rev Swin*

Music *yes*

Casket Wagon

Physician *R*

County or City Burial

Automobiles *S & S*

Baggage or Express Train No. *—*

E

N

S

W

35.00
6.75
75.00

90

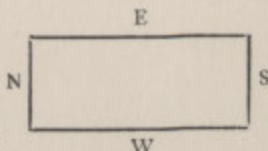
15.00

732.45

Carey Hand Funeral Home

Name of deceased *Rev Charles Smith Mills*
 Date of death *March 3 11:30 P. M*
 Cause of death *Cerebral apoplexy in Park*
 Place of death *Alabama Notes*
 Residence *Jeffers N. H.*
 Age *81* Yrs *2* Mo's *14* Days
 Weight *165* Height *5* ft. *7* in. Eyes
 Funeral at *West*
 Date *March* 194 *M*
 Account charged *Chas. M. Mills*
 Address *Jeffers N. H.*
 Account guaranteed *Chas. M. Mills*
 Address
 Embalming *Yes* *35.00*
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket *6-3-5 in. 6 1/2 in.* *250.00*
 Casket with Copper Lin. ✓
 Style of Casket *P. E. State*
 No. of Casket *4118- Shiner*
 Outside Box *R. & G.*
 Shipping Case or Vault ✓
 Handles *Ext*
 Pillow Set *Yes*
 Name Plate *Name + Date*
 Cemetery *Sedar Hill Hartford Conn*
 Section Lot

I Other Graves



X Grave on this date

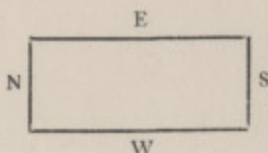
Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Hartford Conn*
 R. R. Ticket *41.90 44.00 940*
 Cash advanced *N. Y. transfer*
 Autos
 Telegram
 Minister
 Music
 Casket Wagon *(2)* *10.00*
 Physician *Hartford*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *76*

Wed Night 3-4-42 *395.30*

Carey Hand Funeral Home

Name of deceased *Fritz Munnen Rumpf*
 Date of death *Thurs. Mar 5-42* *6 AM*
 Cause of death *Pulmonary Edema*
 Place of death *Deland Church St*
 Residence *West Hallifolis Ohio*
 Age *75* Yrs *6* Mo's *5* Days
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at *Least*
 Date *March* 194 *M*
 Account charged *Caddy Munnen Rumpf*
 Address *Hallifolis Ohio*
 Account guaranteed *OK*
 Address _____
 Embalming *Dressing* 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *4/6 Oak Casket* 295 00
 Casket with Copper Lin. _____
 Style of Casket *State 1/2 Carch.*
 No. of Casket *162 Tennessee*
 Outside Box *Req*
 Shipping Case or Vault _____
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Charlton, W. Va*
 Section _____ Lot _____

I Other Graves



X Grave on this date

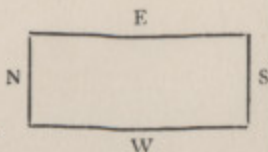
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Huntington W. Va*
 R. R. Ticket *34.20* *1-19-53* 53 73
 Cash advanced _____
 Autos _____
 Telegram *76-78* 1 55
 Minister *Least*
 Music _____
 Casket Wagon *(2)* 10 00
 Physician *Dr. Hal Beardsall*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. *92*

Sunday 4:28 PM 3-8-42 \$39.528

Carey Hand Funeral Home

Name of deceased Walter Hynes
 Date of death Mar 5-42 P.M.
 Cause of death Cerebral Hemorrhage
 Place of death Atlanta Ga
 Residence Atlanta Ga
 Age 65 Yrs. Mo's. Days.
 Weight. Height. ft. in. Eyes.
 Funeral at West
 Date March 1942 M
 Account charged Atlanta Pub. Serv. Co
 Address Atlanta Ga
 Account guaranteed State
 Address State
 Embalming & Dressing 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 4/4 Metal Casket 325.00
 Casket with Copper Lin. Inner Seal
 Style of Casket State H. Cap
 No. of Casket Harrison
 Outside Box Reg
 Shipping Case or Vault
 Handles Set
 Pillow Set yes
 Name Plate
 Cemetery West
 Section. Lot.

I Other Graves



X Grave on this date

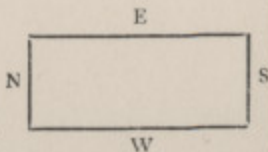
Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to Van Buren Ark
 R. R. Ticket
 Cash advanced
 Autos Ant 5.00
 Telegram
 Minister West
 Music
 Casket Wagon (2) 10.00
 Physician Dr. Knicker
 County or City Burial
 Automobiles
 Baggage or Express Train No. 92

Sat Mar 7 4:28 AM. 375.00

Carey Hand Funeral Home

Name of deceased Pete S. Steele
 Date of death Mar 8-42 M
 Cause of death Prising Bichloride Sulphuric
 Place of death Res -
 Residence Detand Beach -
 Age 53 Y'rs 5 Mo's 6 Days
 Weight 140 Height 5 ft 8 in. Eyes
 Funeral at
 Date 194 M
 Account charged Haig & Smith
 Address
 Account guaranteed OK
 Address
 Embalming Commation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket Body Shroud
 Casket with Copper Lin.
 Style of Casket 430 P. on Gr
 No. of Casket 3-6-42 -
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

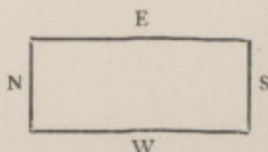
Cremation
 Urn wooden
 Single Grave Body Cremated
 Opening and Closing Grave P-A m
 Body Shipped to Det - 3-7-42
 R. R. Ticket
 Cash advanced Exp. ins. Ashes to
 Autos Mrs. Paul Steele
 Telegram 19818 miles over
 Minister Cleveland, Ohio
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased David Morris Fisher
 Date of death Mar 3-42 M
 Cause of death Not given on Permit
 Place of death Cashland Fla -
 Residence Ormond Fla -
 Age 85 Yrs 1 Mo's _____ Days _____
 Weight 85 Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged Hig & Crooks
 Address _____
 Account guaranteed Yes -
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body arrived by
 Casket with Copper Lin. Aug 230 P.M.
 Style of Casket See 3-6-42
 No. of Casket _____
 Outside Box Body Cremated
 Shipping Case or Vault 8-4 on
 Handles See 3-7-42
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

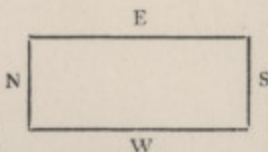
Cremation _____
 Urn wooden
 Single Grave Ashes Express
 Opening and Closing Grave Yes
 Body Shipped to Hig & Crooks -
 R. R. Ticket Empire Coach
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of deceased Samuel C. Mannix
 Date of death Mar 28-42 M
 Cause of death Coronary Thrombosis
 Place of death Res
 Residence Daytona Beach Fla
 Age 56 Y'rs 7 Mo's 23 Days
 Weight 160 Height 5 ft. 10 in. Eyes Blue
 Funeral at 194 M
 Date Mar 28-42
 Account charged King & Crofts
 Address Daytona Beach
 Account guaranteed OK
 Address Daytona Beach
 Embalming Cremation 37.50
 Robe, Suit, Dress Body covered
 Underwear and Hose Body covered
 Casket 230 P. M. Friday
 Casket with Copper Lin. 3-6-42
 Style of Casket Body covered
 No. of Casket Body covered
 Outside Box 8-A. In Sat. 3-7-42
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

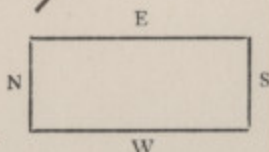
Cremation Express Aides to
 Urn wooden King & Crofts
 Single Grave Daytona Beach
 Opening and Closing Grave Fla
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Harold Barnet Miller
 Date of death Wed Mar 6-42 PM
 Cause of death _____
 Place of death Nursing Home Twilock, N.C.
 Residence Balson Park N.C.
 Age 61 Yrs 8 Mo's _____ Days _____
 Weight 100 Height 5 ft 8 in. Eyes br
 Funeral at N. Sun
 Date _____ 194 _____ M
 Account charged Mrs Mary Jane Miller
 Address Balson Park Fla
 Account guaranteed Payment
 Address _____
 Embalming Cremation 50.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Family has
 Casket with Copper Lin Nothing
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles Body cremated
 Pillow Set 8-A.M.
 Name Plate Sun 3-8-42
 Cemetery _____
 Section with Call of st order

I Other Graves



X Grave on this date

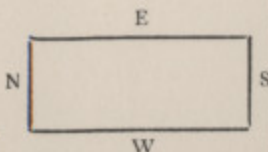
Cremation _____
 Urn wooden
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express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

50.00

Carey Hand Funeral Home

Name of deceased *Dr. Frank B. Sault*
 Date of death *Mar 6-42* M
 Cause of death *Not given on Permit*
 Place of death *Eustis Fla*
 Residence *Eustis Fla*
 Age *71* Y'rs *4* Mo's *15* Days
 Weight Height ft. in. Eyes
 Funeral at
 Date 194 M
 Account charged *Gellars & Rehlmann*
 Address *Eustis Fla -*
 Account guaranteed *OK*
 Address
 Embalming *Cremation* 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. *Body buried*
 Style of Casket *by auto 4:35 P.M.*
 No. of Casket *Lat Mar 7-42*
 Outside Box
 Shipping Case or Vault *Body cremated*
 Handles *S.A.M. Sun 3-8-42*
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

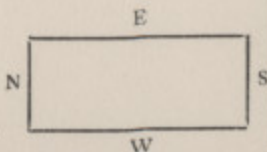
Cremation
 Urn *wooden*
 Single Grave *ashes exposed*
 Opening and Closing Grave
 Body Shipped to *Gellars & Rehlmann*
 R. R. Ticket *Eustis Fla -*
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Curry Hand Funeral Home

Name of deceased *Miss Mary E. Forde*
 Date of death *Sun Mar 8 1942 4:15 P. M.*
 Cause of death _____
 Place of death *Res* _____
 Residence *Bundy & Conway Rd -* _____
 Age *50* Yrs *2* Mo's *21* Days _____
 Weight *200* Height *5* ft. _____ in. Eyes _____
 Funeral at *Chapel* _____
 Date *Tues - Mar 10 1942 4 P. M.* _____
 Account charged *James L. Forde* _____
 Address *1419 Hillcrest Ave Ocala* _____
 Account guaranteed _____
 Address _____
 Embalming *Yes* _____ *20.00*
 Robe, Suit, Dress ☒ _____
 Underwear and Hose ☒ _____
 Casket *6-3 by Joe Smith* _____ *25.00*
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery *Cremation* _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

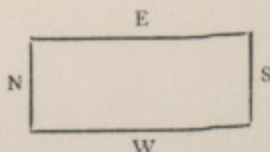
Cremation *Cremation* _____ *50.00*
 Urn *wooden* _____
 Single Grave *Body cremated* _____
 Opening and Closing Grave *8-4 PM* _____
 Body Shipped to *Wed - Mar 11-42* _____
 R. R. Ticket _____
 Cash advanced *When Expensed To* _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

100.00

Carey Hand Funeral Home

Name of deceased Mr Samuel H Woods
 Date of death Mar 7-42 M
 Cause of death Pulmonary Oedema
 Place of death At
 Residence New Smyrna
 Age 78 Y'rs. 8 Mo's. 11 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged Robinson & Taver
 Address New Smyrna Fla
 Account guaranteed OK
 Address _____
 Embalming Cremation 39.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Body covered
 Style of Casket 4 P. M. Sunday
 No. of Casket 3-8-42
 Outside Box _____
 Shipping Case or Vault Body Cremated
 Handles 8-9-42
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

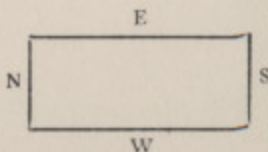
Cremation _____
 Urn Wooden
 Single Grave As per Express to
 Opening and Closing Grave B. Hays Son
 Body Shipped to 17 River St
 R. R. Ticket Ft. Plain, N.Y.
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

39.50

Carey Hand Funeral Home

Name of deceased *Lewis Miles Jr.*
 Date of death *Mar 9* 4. M
 Cause of death
 Place of death
 Residence *Taft Fla*
 Age *2* Y's *12* Mo's *12* Days
 Weight Height ft. in. Eyes
 Funeral at *Graceland*
 Date *Mon 10 1942* 2 P. M
 Account charged *Lewis Miles Jr*
 Address *Taft Fla*
 Account guaranteed *Insurance*
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket *3/4 White L.S.* 12.50
 Casket with Copper Lin.
 Style of Casket *Age H. M.*
 No. of Casket
 Outside Box *Req*
 Shipping Case or Vault
 Handles *yes*
 Pillow Set *yes*
 Name Plate
 Cemetery *Oak Ridge*
 Section Lot

I Other Graves



X Grave on this date

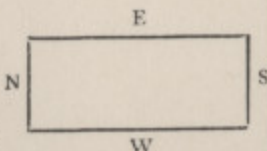
Cremation
 Urn
 Single Grave
 Opening and Closing Grave *etc* 5.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister *By Family*
 Music
 Casket Wagon *T9 Taft* 2.50
 Physician *Duckworth*
 County or City Burial
 Automobiles *Auto* 5.00
 Baggage or Express Train No.

25.00

Carey Hand Funeral Home

Name of deceased Henry Lee Will Shankle
 Date of death Mon Mar 9-42 7 AM
 Cause of death Sarcoma of Kidney
 Place of death Duke Hall Orlando
 Residence Duke Hall
 Age 46 Y'rs 11 Mo's 25 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graceland - St Petersburg Fla
 Date Tues Mar 10 1942 2 PM
 Account charged Pauline Shankle Stover
 Address Duke Hall Orlando Fla
 Account guaranteed Payments
 Address _____
 Embalming Dressing 35.00
 Robe, Suit, Dress _____ 3 2.50
 Underwear and Hose _____ 100.00
 Casket 4/3 Grey Wood
 Casket with Copper Lin. _____
 Style of Casket Oct. H Cap
 No. of Casket 1972 - Tampa
 Outside Box Yes
 Shipping Case or Vault _____
 Handles Yes
 Pillow Set Yes
 Name Plate _____
 Cemetery St Petersburg Fla
 Section _____ Lot _____

I Other Graves



X Grave on this date

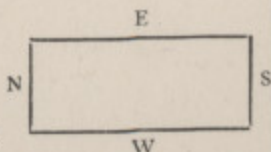
Cremation _____
 Urn Yes at St Pete
 Single Grave Ralph Cemetery
 Opening and Closing Grave _____
 Body Shipped to By auto to St. Petersburg
 R. R. Ticket RR 35.00
 Cash advanced _____
 Autos Expense at St Petersburg
 Telegram _____
 Minister at St Petersburg Fla
 Music _____
 Casket Wagon _____
 Physician Dr. Seltzer
 County or City Burial _____
 Automobiles 515 to St Pete 50.00
 Baggage or Express Train No. _____

Current Total: 222.50

Carey Hand Funeral Home

Name of deceased John L. Graves
 Date of death Wed Mar 11-42-2- P. M
 Cause of death Heart attack
 Place of death Res
 Residence 222 West Amelia
 Age 75 Yrs. 6 Mo's. 7 Days
 Weight 150 Height 5 ft. 9 in. Eyes Blue
 Funeral at Chapel
 Date Sun Mar 15-1942 4 P. M
 Account charged Mrs. A. F. Peble
 Address 1404 - 22nd St. Orlando
 Account guaranteed Estate
 Address
 Embalming & Dressing 35.00
 Robe, Suit, Dress
 Underwear and Hosiery
 Casket 6-6-8 City in Metal 295.00
 Casket with Copper Lin.
 Style of Casket State 1-2
 No. of Casket Bates Tampa
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext
 Pillow Set yes
 Name Plate
 Cemetery Woodlawn
 Section Lot

I Other Graves



X Grave on this date

Cremation	<u>BB Cal</u>	<u>5.00</u>
Urn	<u>Cal Men</u>	<u>5.00</u>
Single Grave		
Opening and Closing Grave	<u>T & etc</u>	<u>10.00</u>
Body Shipped to		
R. R. Ticket		
Cash advanced		
Autos		
Telegram		
Minister	<u>Rev E. G. Blystone</u>	
Music	<u>yes</u>	
Casket Wagon	<u>yes</u>	<u>5.00</u>
Physician	<u>Duckworth</u>	
County or City Burial		
Automobiles	<u>S. S.</u>	<u>15.00</u>
Baggage or Express Train No.		

375.00

Mr. Graves died
sudden at his Res

Carey Hand Funeral Home

Leve

Name of deceased Mr. L. W. Dodendorf
 Date of death Thurs Mar 12-42 5 PM
 Cause of death Heart disease (arterio sclerosis)
 Place of death Ret.
 Residence 604 Ridgewood
 Age 72 Yrs 3 Mo's 12 Days
 Weight 151 Height 5 ft. 3 in. Eyes
 Funeral at Chapel
 Date Sun Mar 1942 2:30 PM
 Account charged Mrs. Sada Dodendorf
 Address 604- Ridgewood
 Account guaranteed Estate
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress
 Underwear and Hose Yes
 Casket 6-6 Metal S. H. Fin 425.00
 Casket with Copper Lin. Inner
 Style of Casket Stat. H. Cap.
 No. of Casket Saline Shiner
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes
 Name Plate Name & Date
 Cemetery Woodlawn
 Section 7 Lot 94

E

I Other Graves

N

S

X Grave on this date

W

Cremation P. B. Car 5.00
 Urn Mini Car 5.00
 Single Grave Family Car 5.00
 Opening and Closing Grave T & etc 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Dr. Fred Turner
 Music Organ
 Casket Wagon
 Physician Dr. Tolson
 County or City Burial
 Automobiles S & S 15.00
 Baggage or Express Train No.

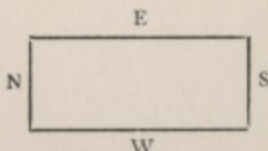
Masonic Srv at
 Grave side

500.00

Carey Hand Funeral Home

Name of deceased Patricia A Walker
 Date of death Thurs. Mar - 12 - 42 4 PM
 Cause of death Chronic Myocarditis (Rheumatic fever)
 Place of death Res
 Residence Winter Garden
 Age 5 Yrs. 9 Mo's. 6 Days 7
 Weight Height ft. in. Eyes
 Funeral at M. E. Church at Mt Unde
 Date Fri Mar 13 1942 4 P. M
 Account charged Geo. Cadwell
 Address Winter Garden Fla
 Account guaranteed Cash + Payments
 Address
 Embalming X Dress - 25.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 4-a Th. Plank 75.00
 Casket with Copper Lin. ✓
 Style of Casket Det. H. Top
 No. of Casket 427 - Shiner
 Outside Box ✓
 Shipping Case or Vault Concrete 25.00
 Handles Small
 Pillow Set Yes
 Name Plate OD
 Cemetery Mt Unde
 Section Lot

I Other Graves



X Grave on this date

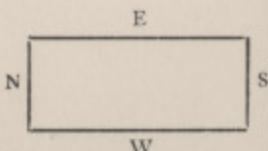
Cremation
 Urn
 Single Grave
 Opening and Closing Grave Det. Transfer 10.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister By Family
 Music
 Casket Wagon
 Physician Dr. Sinclair
 County or City Burial
 Automobiles S & S 15.00
 Baggage or Express Train No.

any tek 150.00
50.00
100.00
 Payments 20.00 Pa Mo

Carey Hand Funeral Home

Name of deceased *Mrs. Elta D. Barnett*
 Date of death *Thurs Mar 12-42 5:30 P.M.*
 Cause of death *Angina Pectoris*
 Place of death *Residence*
 Residence *244 - W. Washington St*
 Age *57* Y'rs *10* Mo's *1* Days
 Weight Height ft. in. Eyes
 Funeral at
 Date 19*42* M
 Account charged *Elta D. Barnett*
 Address *244 W. Washington St*
 Account guaranteed
 Address
 Embalming *Yes*
 Robe, Suit, Dress *Pr. 5.00 Pd.*
 Underwear and Hose *Yes*
 Casket *6-2 in. Maple*
 Casket with Copper Lin. *Yes*
 Style of Casket *Six*
 No. of Casket *Tampa 72*
 Outside Box *Box*
 Shipping Case or Vault *Yes*
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate *Yes*
 Cemetery *West*
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Fulton N.Y.*
 R. R. Ticket *44 90 - 2646*
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon *(2)*
 Physician *Dr. J. A. Hall*
 County or City Burial
 Automobiles
 Baggage or ~~Express~~ Train No. *28*

35.00

75.00

71.36

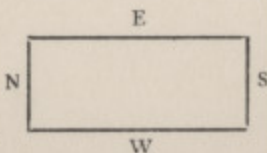
10.00

791.36

Carey Hand Funeral Home

Name of deceased *Mrs. Mary Goldsmith*
 Date of death *Sat Mar 14-42 4:30 AM*
 Cause of death *Cerebral Hemorrhage*
 Place of death *Reg - P. Rd*
 Residence *East A. P. Rd*
 Age *74* Y'rs. Mo's *10* Days
 Weight Height ft. in. Eyes
 Funeral at *East*
 Date 194 M
 Account charged *Alexander Goldsmith*
 Address *Delaware St. - 1st*
 Account guaranteed *East*
 Address
 Embalming *Yes*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *6-3-4 Large*
 Casket with Copper Lin.
 Style of Casket *See H.C.*
 No. of Casket *12 - Tampa*
 Outside Box *Reg*
 Shipping Case or Vault
 Handles *East*
 Pillow Set *Yes*
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

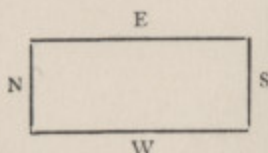
Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Patterson N. Y.*
 R. R. Ticket *38.85 S.E. at 40/95*
 Cash advanced *N.Y. Transfer*
 Autos
 Telegram
 Minister
 Music
 Casket Wagon *21*
 Physician *Dr. Sulger*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *92*

Sun Mar 15-42
204.80

Carey Hand Funeral Home

Name of deceased *Mrs Jennie E. Gardner*
 Date of death *Sat Mar 14-42* *8-A* M
 Cause of death _____
 Place of death *Res*
 Residence *Jellwood*
 Age *79* Yrs. *3* Mo's. *14* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *M. C. Church* *Jellwood Fla*
 Date *Sun Mar 15-42* *5-P.* M
 Account charged *Mrs H. C. Goolsby*
 Address *Jellwood Fla*
 Account guaranteed *Ans -*
 Address _____
 Embalming *Yes*
 Robe, Suit, Dress ☒
 Underwear and Hose *Yes*
 Casket *6-3-52* *Yes*
 Casket with Copper Lin. *Yes*
 Style of Casket *Ed. H. Co*
 No. of Casket *1972 - Tampa*
 Outside Box *Yes*
 Shipping Case or Vault ☒
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Tangerine*
 Section _____ Lot _____

I Other Graves



X Grave on this date

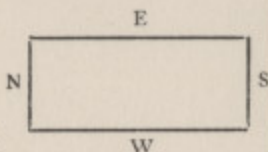
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave *Ticket* *15.00*
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram *Clayton*
 Minister *Bay Church*
 Music *Bay Church* *5.00*
 Casket Wagon *1*
 Physician *Dr. McBride of Apka*
 County or City Burial _____
 Automobiles *8 & S* *15.00*
 Baggage or Express Train No. *2*

770.00

Carey Hand Funeral Home

Name of deceased Henry Maxwell
 Date of death Mar 12-42 M
 Cause of death Paralysis
 Place of death Ogden, U.
 Residence Winter Park
 Age about 35 Y'rs Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at same place
 Date _____ 194 _____ M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3-Case 14.50
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

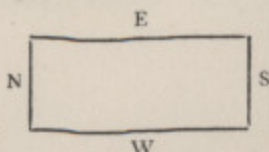
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Smith & Smart
 R. R. Ticket got the call
 Cash advanced we received body
 Autos A.M. 3-14-42
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

14.50

Carey Hand Funeral Home

Name of deceased *Mrs Mary L Adams*
 Date of death *Sat. Mar 15-42* A.M.
 Cause of death _____
 Place of death *Res -*
 Residence *15 Allanna St*
 Age *71* Y'rs. *5* Mo's. *25* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Monday Mar 16, 1942* 4 P. M.
 Account charged *Ben Adams*
 Address *15 Allanna St*
 Account guaranteed *small manner*
 Address _____
 Embalming *& Dressing* 35.00
 Robe, Suit, Dress *White ARK 879* 5.00
 Underwear and Hose _____
 Casket *6-6-6 Six Plunk* 145.00
 Casket with Copper Lin. _____
 Style of Casket *Oct 2-2*
 No. of Casket *1927*
 Outside Box _____
 Shipping Case or Vault _____
 Handles *Yes*
 Pillow Set _____
 Name Plate _____
 Cemetery *Woodlawn*
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation *Yes* 5.00
 Urn *P.B. Can* 5.00
 Single Grave _____
 Opening and Closing Grave *& etc* 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Powell Tucker* 5.00
 Music *Yes* 5.00
 Casket Wagon *(1)* 5.00
 Physician *Dr. Combs*
 County or City Burial _____
 Automobiles *S & S* 15.00
 Baggage or Express Train No. _____

235.00

Carey Hand Funeral Home

Name of deceased Wm Steward Holt
 Date of death Mon - 13 - 42 M
 Cause of death not given on Permit
 Place of death Res
 Residence St Petersburg Fla
 Age 55 Yrs. 7 Mo's. 5 Days
 Weight 125 Height 5 ft 9 in. Eyes
 Funeral at St Petersburg
 Date 194 M
 Account charged Ralph Cooksey
 Address St Petersburg Fla
 Account guaranteed OK -
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. Body Arrived
 Style of Casket by quote 6-8 M
 No. of Casket Set 3-14-42
 Outside Box
 Shipping Case or Vault Body
 Handles Cremated 3-15-42
 Pillow Set J. A. M.
 Name Plate
 Cemetery ashes expressed to
 Section Cooksey 41 Home
St Petersburg Fla

I Other Graves

N

S

X Grave on this date

W

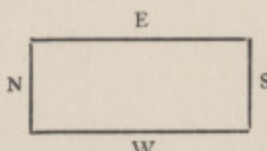
Cremation
 Urn wooden
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Walter J. Blystone
 Date of death Sat Mar 14-42 P. M.
 Cause of death O. G. St.
 Place of death Amsterdam
 Residence New York
 Age 86 Yrs. 8 Mo's. 15 Days
 Weight 150 Height 5 ft. 7 in. Eyes
 Funeral at Chapel
 Date Tue 3-20 1942 3 P. M.
 Account charged Mrs. Leo B. Smith
 Address Elmira N.Y.
 Account guaranteed
 Address
 Embalming & Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose 5.00 50.00
 Casket 6-2 1/2 x 28
 Casket with Copper Lin. ✓
 Style of Casket Box. H. C.
 No. of Casket 1922 - 7
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles ✓
 Pillow Set ✓
 Name Plate ✓
 Cemetery Cremation
 Section Lot

I Other Graves



X Grave on this date

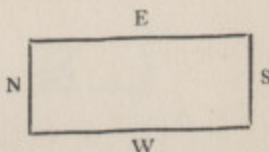
Cremation Cremation 50.00
 Urn wooden
 Single Grave Body Casketed
 Opening and Closing Grave 8.00
 Body Shipped to Sat 3-21-42
 R. R. Ticket
 Cash advanced will call for
 Autos ✓
 Telegram 113 113
 Minister Rev. A. Fred Turner
 Music Organ
 Casket Wagon 27.00 10.00
 Physician Dr. Carr
 County or City Burial ✓
 Automobiles
 Baggage or Express Train No.

141.13

Carey Hand Funeral Home

Name of deceased Sallie T. Hutchins
 Date of death Mar 15 4:15 P. M
 Cause of death _____
 Place of death Smith's Nursing Home
 Residence 1849 W. Central Ave
 Age 90 Y'rs 5 Mo's 1 Days _____
 Weight 120 Height 5 ft. 3 in. Eyes _____
 Funeral at Chapel
 Date Tues Mar 17 1942 10 A. M
 Account charged S. A. Hutchins
 Address 1849 W. Central Ave
 Account guaranteed Payments
 Address _____
 Embalming & Dressing 85.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 In. Oak 100.00
 Casket with Copper Lin. ✓
 Style of Casket Ext. Et. C
 No. of Casket 1922 Temp. 4
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes
 Name Plate ✓
 Cemetery Illustration
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Winston Salem N.C.
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev. Powell Tucker
 Music Organ
 Casket Wagon _____
 Physician Dr. T. G. Neal
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 28

28.06

10.00

173.06

entry cash 28.06

entry cash 145.00

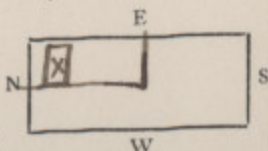
50.00

Payment 95.00
30-60-90-Day

Carey Hand Funeral Home

Name of deceased *Augusta K. Paul*
 Date of death *Mar 15 11:30 AM*
 Cause of death *Hodgkins Disease*
 Place of death *Res*
 Residence *1210 S. Osceola St - Orlando*
 Age *68* Y's *5* Mo's *5* Days *5*
 Weight *100* Height *5 ft 5 in* Eyes *Blue*
 Funeral at *German Lutheran Church*
 Date *Wed Mar 18 1942 4 P M*
 Account charged *Louisa K. Paul*
 Address *1210 S. Osceola St*
 Account guaranteed *Payments*
 Address _____
 Embalming *1 - Dressing* 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-3 Br. Plank* 190.00
 Casket with Copper Lin. ☒
 Style of Casket *Oct 1/2 - C*
 No. of Casket *1927 Shiner*
 Outside Box ☒
 Shipping Case or Vault *Cement* 60.00
 Handles *Ext*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Greenwood*
 Section *V* *N.E. 1/4* Lot *4*

I Other Graves



X Grave on this date

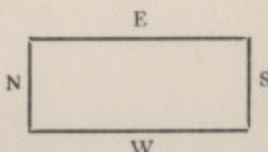
Cremation *Out* 5.00
 Urn ☒
 Single Grave ☒
 Opening and Closing Grave *etc* 15.00
 Body Shipped to ☒
 R. R. Ticket ☒
 Cash advanced ☒
 Autos ☒
 Telegram _____
 Minister *Rev Geo Traff*
 Music *By Church* 5.00
 Casket Wagon _____
 Physician *Dr. Spencer Folsom*
 County or City Burial _____
 Automobiles *SVS* 15.00
 Baggage or Express Train No. *B*

325.00

Carey Hand Funeral Home

Name of deceased Maryjorie Baker Webb
 Date of death Mar 13 - 1942 M
 Cause of death Pneumonia (sanche)
 Place of death Lee Land Fla
 Residence Bellows Falls Vt.
 Age 61 Y's 6 Mo's 2 Days
 Weight 170 Height 5 ft 9 in. Eyes
 Funeral at Lee Land Fla
 Date Mar 194 M
 Account charged Allen-Summerhill F.H.
 Address Lee Land Fla
 Account guaranteed Check
 Address
 Embalming
 Robe, Suit, Dress Emulation 3750
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket Body covered
 No. of Casket at 9 a.m.
 Outside Box Monday Mar 16-42
 Shipping Case or Vault
 Handles
 Pillow Set Body Covered
 Name Plate 8 a.m. Tuesday
 Cemetery Mar 17-42
 Section Lot

I Other Graves



X Grave on this date

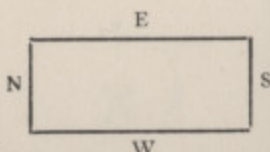
Cremation Will call for.
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

3750

Carey Hand Funeral Home

Name of deceased *Mr. G. A. Muller*
 Date of death *Tues. May-17-42* *2:30 P.M.*
 Cause of death *South Nursing Home*
 Place of death *Ogden Utah 4314 Ave*
 Residence *Ogden Utah 4314 Ave*
 Age *86* Y's *2* Mo's *11* Days
 Weight *170* Height *5* ft. *8* in. Eyes
 Funeral at *St. Saviour*
 Date *194* *M*
 Account charged :
 Address
 Account guaranteed
 Address
 Embalming *Yes* *35.00*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *See tag* *25.00*
 Casket with Copper Lin.
 Style of Casket
 No. of Casket *Body Cremated*
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

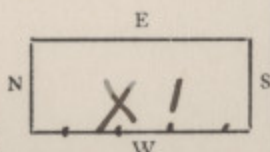
Cremation *Cremation* *50.00*
 Urn *wooden*
 Single Grave
 Opening and Closing Grave *Body*
 Body Shipped to *Cremated 18-AM*
 R. R. Ticket *Mon 3-23-42*
 Cash advanced
 Autos *Given by friend to*
 Telegram *Mr. Muller*
 Minister *Ogden Utah*
 Music *5.00*
 Casket Wagon *(1)*
 Physician *Dr. T. A. Neal*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *\$115.00*

Dr. Neal Acct 55.00
Cremation Single 11.60
Smith N. H. 61.00
\$127.60

Carey Hand Funeral Home

Name of deceased Mrs Emma De Allen
 Date of death Tues Mar-17-42 9:30 PM
 Cause of death O. H.
 Place of death O. H.
 Residence 409 S. Concord Ave
 Age 81 Y'rs 7 Mo's 24 Days
 Weight 125 Height 5 ft. 5 in. Eyes
 Funeral at Chapel
 Date Wed Mar 18 1942 5 P.M.
 Account charged Mrs Linton Allen
 Address
 Account guaranteed Estate
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-6 In. Elth. N. O. 225.00
 Casket with Copper Lin. ✓
 Style of Casket N. O. State
 No. of Casket 48 - Tampa
 Outside Box R-1
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes
 Name Plate ✓
 Cemetery Greenwood
 Section 2 Lot 29

I Other Graves



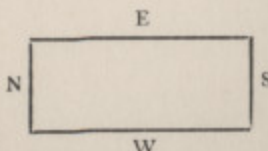
X Grave on this date

Cremation P. O. C. 5.00
 Urn Can. Iron 5.00
 Single Grave 15.00
 Opening and Closing Grave T & H
 Body Shipped to Family Car
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Rev D. H. Rutter
 Music Organ 5.00
 Casket Wagon W. Gray
 Physician Dr. F. Gray
 County or City Burial 15.00
 Automobiles S & S
 Baggage or Express Train No. 8
305.00

Carey Hand Funeral Home

Name of deceased *Mr. Morris S. Tauson*
 Date of death *Tues. Mar. 17-42* A.M.
 Cause of death *O. S. H.*
 Place of death *O. S. H.*
 Residence *Orange Court Hotel & Shaker Heights, Ohio*
 Age *76* Y'rs. *9* Mo's. *13* Days
 Weight *240* Height *6* ft. *3* in. Eyes
 Funeral at *G. L. L. L.*
 Date *Wed. Mar. 18* 1942 1 P.M.
 Account charged *Mr. Sheldon Tauson*
 Address *Cleveland, Ohio*
 Account guaranteed *Cash*
 Address *Dressing*
 Embalming *Yes* 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket *1/2 Crystal* 100.00
 Casket with Copper Lin.
 Style of Casket *Oct. N. Cap*
 No. of Casket *1972 - Tampa*
 Outside Box
 Shipping Case or Vault
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate *Yes*
 Cemetery *Greenview*
 Section Lot

I Other Graves



X Grave on this date

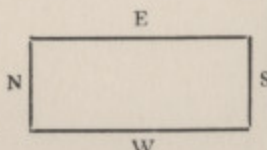
Cremation *Yes* 50.00
 Urn *Body cremated 8 A.M.*
 Single Grave *Tues. Mar. 19-42*
 Opening and Closing Grave
 Body Shipped to *Cash Express*
 R. R. Ticket *Suff. Lakeview, Ohio*
 Cash advanced *Cleveland* 5.00
 Autos *Ohio* 5.00
 Telegram *Am. Bus. 3-16-42*
 Minister
 Music 5.00
 Casket Wagon
 Physician *Dr. Mallory*
 County or City Burial
 Automobiles
 Baggage or Express Train No.

195.00

Carey Hand Funeral Home

Name of deceased *Mr Charles Dickerson*
 Date of death *Mar - 14 - 42 -* M
 Cause of death _____
 Place of death *New Smyrna Fla*
 Residence *Detroit Mich*
 Age *64* Y'rs *4* Mo's _____ Days _____
 Weight *134* Height *5* ft *4* in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged *Robinson & Tanner*
 Address *4 S. Street New Smyrna*
 Account guaranteed *Cash*
 Address _____
 Embalming *Cremation* 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *Body Guard*
 Casket with Copper Lin. *Y. G. G. Co.*
 Style of Casket *7 - R. M.*
 No. of Casket *3 - 12 - 42*
 Outside Box _____
 Shipping Case or Vault *Body Guard*
 Handles *S. A. M. 3 - 12 - 42*
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

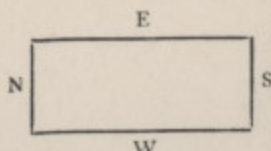
Cremation _____
 Urn *wooden*
 Single Grave *Express Urn*
 Opening and Closing Grave *15*
 Body Shipped to *Mrs. D. H. Moulton*
 R. R. Ticket *915 Dempster St*
 Cash advanced *Evolution*
 Autos *Mrs*
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of deceased *Mrs May C Britzfeld*
 Date of death *Mar 19 - 1942* *2:30 PM*
 Cause of death _____
 Place of death *Res*
 Residence *1020 S. Mill St*
 Age *86* Y'rs *1* Mo's *15* Days _____
 Weight *140* Height *5* ft. *6* in. Eyes _____
 Funeral at *Chapel*
 Date *Friday Mar 20 1942* *2 P.M*
 Account charged *Carl W. Wilson*
 Address *1020 S. Mill - Orlando Fla*
 Account guaranteed _____
 Address _____
 Embalming & Dressing *35.00*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6/3 Grey Wood* *60.00*
 Casket with Copper Lin. _____
 Style of Casket *Oct N. Cap*
 No. of Casket *Tampa 72*
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery *Cremation*
 Section _____ Lot _____

I Other Graves



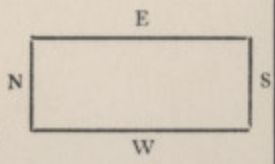
X Grave on this date

Cremation *50.00*
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *E. Lee Smith*
 Music *yes*
 Casket Wagon *(1)* *5.00*
 Physician *Hal Beardsall*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____
150.00

Carey Hand Funeral Home

Name of deceased George J. Lindner
 Date of death Monday 19 59 M
 Cause of death Cancer of Lung (Rt)
 Place of death Res.
 Residence 420 N. Magnolia Ave
 Age 40 Y'rs. 4 Mo's 19 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Catholic Church
 Date Monday Mar 23 1942 P.M.
 Account charged Mrs. Ruth Lindner
 Address 420 N. Magnolia Ave
 Account guaranteed _____
 Address _____
 Embalming & dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Woodlawn
 Section _____ Lot _____

I Other Graves



X Grave on this date

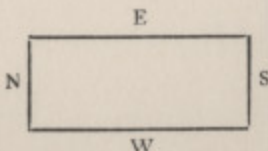
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Reverend Bishop
 Music _____
 Casket Wagon (1) 5 00
 Physician Dr. Ford
 County or City Burial _____
 Automobiles S.Y.S 15 00
 Baggage or Express Train No. _____

Family Exp. Co.
have nothing

Carey Hand Funeral Home

Name of deceased *L. Persons W. King*
 Date of death *Mar 20-42-7-A* M
 Cause of death *Coronary Occlusion*
 Place of death *Albany 316 N. Main*
 Residence *Canaan N. H.*
 Age Y'rs. Mo's. Days
 Weight *150* Height *5* ft. *2* in. Eyes
 Funeral at *Dest*
 Date *1942* M
 Account charged *Mrs. P. W. King*
 Address
 Account guaranteed
 Address *CD*
 Embalming *35.00*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *6-6 Metal G. W. King 690.00*
 Casket with Copper Lin.
 Style of Casket *N. E. State Iron Co*
 No. of Casket *Ulysses Spring*
 Outside Box *Ref*
 Shipping Case or Vault
 Handles *Ref*
 Pillow Set *Yes Tagboard*
 Name Plate *Name & Date 1942*
 Cemetery *Dest*
 Section Lot

I Other Graves



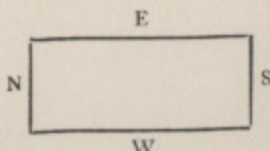
X Grave on this date

Cremation *Burial*
 Urn *Glens Falls N.Y.*
 Single Grave
 Opening and Closing Grave
 Body Shipped to *St. Edmund N.Y.*
 R. R. Ticket *✓ P. 226.34*
 Cash advanced *N.Y. Transfer 5.00*
 Autos *2.53*
 Telegram *134-119*
 Minister
 Music
 Casket Wagon *(2) 10.00*
 Physician *Dr. Andrews*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *92*
Sat 3-21-42 968.87

Carey Hand Funeral Home

Name of deceased Mrs. Laura Teaff
 Date of death May - 15 - 42 M
 Cause of death not given on Certificate
 Place of death Bellevue
 Residence 14 Petrusburg Ave.
 Age 80 Y'rs 5 Mo's 29 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged Ralph G. Crookston
 Address 14 Petrusburg Ave.
 Account guaranteed OK
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body covered
 Casket with Copper Lin. 11 x 12 in
 Style of Casket Set. 3-21-42
 No. of Casket _____
 Outside Box Body Cremated
 Shipping Case or Vault 1-6 in
 Handles Set. 3-21-42
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn wooden
 Single Grave Casket Expensed
 Opening and Closing Grave 10
 Body Shipped to Crookston & Home
 R. R. Ticket 14 Petrusburg Ave.
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of deceased *Mrs Maudie M. Louche*
 Date of death *Mar 20-42* M
 Cause of death *Pulmonary Tuberculosis*
 Place of death *Ref*
 Residence *Danford Fla*
 Age *30* Yrs *11* Mo's *22* Days
 Weight *150* Height *5* ft *11* in. Eyes
 Funeral at *Chapel*
 Date *Sun 3-22-42* 19*42* *6 P.* M
 Account charged *Quelan & Home*
 Address *Danford Fla*
 Account guaranteed *Cash*
 Address
 Embalming *Cremation* 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket *4-3-42*
 Casket with Copper Lin.
 Style of Casket
 No. of Casket *Body arrived*
 Outside Box *by auto 6:15 P.M.*
 Shipping Case or Vault *Sunday*
 Handles *Mar 22-42*
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

 I Other Graves
wooden

N
E
S
W

 X Grave on this date

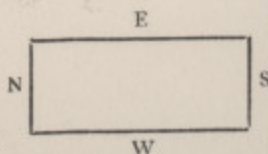
 Cremation *Body cremated 8-AM*
 Urn *Monday 3-23-42*
 Single Grave
 Opening and Closing Grave *Also by hand*
 Body Shipped to *Enclosed by Home*
 R. R. Ticket *Danford Fla*
 Cash advanced *C.S. Reader* 5.00
 Autos
 Telegram
 Minister *Gravio*
 Music *Organ*
 Casket *Wagon*
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No. *7*

42.50

Carey Hand Funeral Home

Name of deceased *Mrs. Isakell Grant*
 Date of death *Mon Mar 23-42* *A.M.*
 Cause of death *Leukemia*
 Place of death *Wa. Dant*
 Residence *1218 Shady Lane Dr*
 Age *63* Y'rs. *10* Mo's. *3* Days
 Weight *165* Height *5* ft. *5* in. Eyes *—*
 Funeral at *Chapel*
 Date *Tuesday Mar 24 1942* *3 P.M.*
 Account charged *Grant Grant*
 Address *1218 Shady Lane Dr. Oakland -*
 Account guaranteed *Estate*
 Address *—*
 Embalming *+ Dussing* *35.00*
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *6-3- 1/2 Til Pine* *195.00*
 Casket with Copper Lin. *✓*
 Style of Casket *Set 1/2 - C*
 No. of Casket *1927- Shiner*
 Outside Box *✓*
 Shipping Case or Vault *✓*
 Handles *Set*
 Pillow Set *White*
 Name Plate *✓*
 Cemetery *Cumtani*
 Section *—* Lot *—*

I Other Graves



X Grave on this date

Cremation *Cumtani* *50.00*

Urn *—*

Single Grave *Body Cremated*

Opening and Closing Grave *8-AM*

Body Shipped to *Wed 3-25-42*

R. R. Ticket *—*

Cash advanced *will call for*

Autos *—*

Telegram *Mrs. Grant* *5.00*

Minister *Rev Mr. Hair*

Music *—* *5.00*

Casket Wagon *(1)*

Physician *Dr. T. A. Neal*

County or City Burial *—*

Automobiles *—*

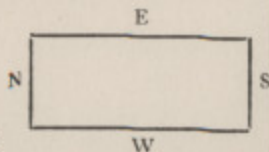
Baggage or Express Train No. *68*

290.00

Carry Hand Funeral Home

Name of deceased Albert Schock
 Date of death Mar 21-42 M
 Cause of death Concussion
 Place of death Bayton Beach - Fla
 Residence Bayton Beach - Fla
 Age 61 Yrs 7 Mo's 27 Days
 Weight 160 Height 5 ft 11 in Eyes
 Funeral at 194 M
 Date Mar 23-42
 Account charged High & Crooks
 Address Bayton Beach - Fla
 Account guaranteed
 Address Bayton Beach - Fla
 Embalming Yes 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket Body arrived
 Casket with Copper Lin. by auto
 Style of Casket 3 30 P. M.
 No. of Casket men Mar 23-42
 Outside Box
 Shipping Case or Vault Body Cremated
 Handles 8-11 in Mar 23-42
 Pillow Set
 Name Plate Expressed To
 Cemetery High & Crooks
 Sections Bayton Beach - Fla

I Other Graves



X Grave on this date

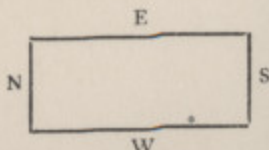
Cremation
 Urn wooden
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Herbert E. Hardy
 Date of death March 24 7:40a M
 Cause of death _____
 Place of death C. G. H.
 Residence 1421 - E. Washington St
 Age 69 Y'rs. 8 Mo's. 27 Days
 Weight 170 Height 5 ft. 4 in. Eyes _____
 Funeral at Chapel
 Date Wed Mar 25 1943 7 PM M
 Account charged Mrs. H. E. Hardy
 Address Alhambra Fla 1421 - E. Wash St
 Account guaranteed Settle Payments
 Address _____
 Embalming Yes deresing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hosiery ✓
 Casket 6 - 3 - 31 - 31 100.00
 Casket with Copper Lin. ✓
 Style of Casket Oct. Top
 No. of Casket 1972 9 amp. 2
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles Set
 Pillow Set Set
 Name Plate ✓
 Cemetery Cremation
 Section _____ Lot _____

I Other Graves



X Grave on this date

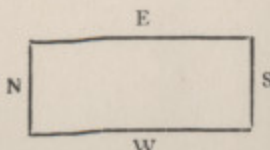
Cremation _____ 50.00
 Urn wooden
 Single Grave Body cremated
 Opening and Closing Grave 8 AM
 Body Shipped to Thurs - 3 - 26 - 42
 R. R. Ticket _____
 Cash advanced will call for order
 Autos _____
 Telegram _____
 Minister Mr. Tait Hill
 Music _____
 Casket Wagon _____ 5.00
 Physician Dr. H. M. Ryan
 County or City Burial _____ 5.00
 Automobiles amb Sw
 Baggage or Express Train No. _____

795.00

Cary Hand Funeral Home

Name of deceased *Mr. Oisday L. Maltree*
 Date of death *Mon. May 23-42 11:30 A.M.*
 Cause of death _____
 Place of death *At Home*
 Residence *Albion Springs*
 Age *77* Y'rs. _____ Mo's. _____ Days _____
 Weight *150* Height *5* ft. *6* in. Eyes _____
 Funeral at *Chapel*
 Date *Thurs. May 26 1942 2 P. M.*
 Account charged *Cash*
 Address *Mr. C. S. Cline 7 Albion*
 Account guaranteed _____
 Address _____
 Embalming *+ Dressing* 35.00
 Robe, Suit, Dress *tie* 1.00
 Underwear and Hose _____
 Casket *6-6 Metal Box 21 in* 375.00
 Casket with Copper Lin. _____
 Style of Casket *State H. Cap*
 No. of Casket *Gibson*
 Outside Box *Reg*
 Shipping Case or Vault _____
 Handles *Set*
 Pillow Set *Yes* 18.64
 Name Plate *Name* 19.42
 Cemetery *Forest Lawn Buffalo N.Y.*
 Section _____ Lot _____

I Other Graves



X Grave on this date

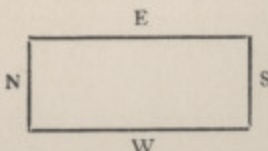
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Buffalo N.Y.*
 R. R. Ticket *Swift*
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Dean Vance*
 Music *Organ only* 10.00
 Casket Wagon *(2)* 15.00
 Physician *Dr. Hobart*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. *92*

Thurs 3-26-42 426.00

Carey Hand Funeral Home

Name of deceased *Albert Powers Allen*
 Date of death *Mar 24-42*
 Cause of death *Ruptured aneurysm aorta*
 Place of death *Albany, N.Y.*
 Residence *Back Lodge, Ala*
 Age *73* Y'rs. *8* Mo's. *27* Days
 Weight *148* Height *5* ft. *8* in. Eyes
 Funeral at
 Date *Mar 24-42* 194 *M*
 Account charged *J. E. Moore*
 Address *Escoba, Ala*
 Account guaranteed *OK*
 Address
 Embalming *Cremation* 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket *Body arrived*
 Casket with Copper Lin. *5:30 P.M.*
 Style of Casket *Wesley 3-24-42*
 No. of Casket
 Outside Box *Body cremated*
 Shipping Case or Vault *8-A.M.*
 Handles *Wed - 3-25-42*
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

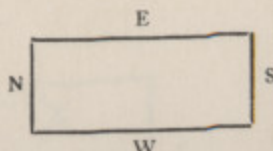
Cremation *ashes to be*
 Urn *Scattered Greenwood*
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased *Baby Maynard*
 Date of death *Mar 25-42* M *Mon*
 Cause of death *Infantile Still Born*
 Place of death *P. H.*
 Residence *Conway Rd*
 Age *1* Yrs. *1* Mo's. *1* Days *✓*
 Weight *1* Height *1* ft. *1* in. Eyes *1*
 Funeral at *Taylor A*
 Date *3-26-42* 194 *11 A* M
 Account charged *Wm R Maynard*
 Address *1520 Conway Rd*
 Account guaranteed *✓*
 Address *Conway*
 Embalming *Embalmed* *3.00*
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *✓*
 Casket with Copper Lin. *✓*
 Style of Casket *✓*
 No. of Casket *Body Embalmed*
 Outside Box *1-P.M.*
 Shipping Case or Vault *3-26-42*
 Handles *✓*
 Pillow Set *✓*
 Name Plate *will call for*
 Cemetery *✓*
 Section *✓* Lot *✓*

I Other Graves



X Grave on this date

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

5.00

Carey Hand Funeral Home

Name of deceased Mr. Margaret S. Duncan
 Date of death Mon - 25-42 8-AM M
 Cause of death Chro. Leger myocardia arous
 Place of death Res - Selma
 Residence 1517 - East Amelia
 Age 74 Y'rs. 4 Mo's. 16 Days
 Weight 140 Height 5 ft. 5 in. Eyes
 Funeral at Chapel 4P M
 Date Tue Mar 27 1942
 Account charged James Duncan son
 Address
 Account guaranteed Refinements
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓ 200.00
 Casket 6-6 Oak 1/2 - e
 Casket with Copper Lin. ✓
 Style of Casket State 1/2 - e
 No. of Casket 433 - Con
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set for
 Name Plate ✓
 Cemetery Guernsey
 Section V NW 1/4 Lot 67
 HEAD OF GRAVE EAST
 I Other Graves

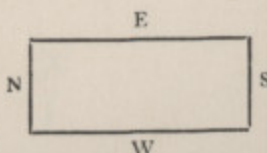
X Grave on this date

Cremation P. B. Can 5.00
 Urn Can Min 5.00
 Single Grave 10.00
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Ed. T. Man
 Music Organ 5.00
 Casket Wagon
 Physician Dr. L. L. Leger
 County or City Burial
 Automobiles S & S 15.00
 Baggage or Express Train No. 275.00

Carey Hand Funeral Home

Name of deceased Chas Robert Fair
 Date of death Wed - Mar - 23 - 42 P M
 Cause of death Shock due to acute blood loss
 Place of death 29th
 Residence Opore
 Age 24 Yrs. 1 Mo's. 4 Days
 Weight 165 Height 5 ft. 8 in. Eyes
 Funeral at Graceland
 Date Tuesday Mar 24, 1942 2 P M
 Account charged Mrs C. F. Fair
 Address Opore Fla
 Account guaranteed
 Address
 Embalming Y Dressing 35.00
 Robe, Suit, Dress 14.25 11.25 } 16.90
 Underwear and Hose 65-25 } 275.00
 Casket 6-6 metal 54 in
 Casket with Copper Lin. ✓
 Style of Casket State 12-2
 No. of Casket major Tampa
 Outside Box ✓
 Shipping Case or Vault burned 60.00
 Handles Ext
 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 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Rev Albert A. Stulch
 Music 5.00
 Casket Wagon (1)
 Physician Dr. J. S. McEwan
 County or City Burial
 Automobiles S. & S 15.00
 Baggage or Express Train No. B

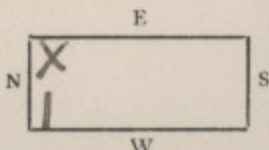
Crnk See No Chg

421.90

Carey Hand Funeral Home

Name of deceased Pola Newell
Date of death Mar 26 9A. M
Cause of death Pulmonary abscess - bronchitis
Place of death P. O.
Residence Park Park & Shire St
Age 44 Y'rs. 9 Mo's. 14 Days
Weight 125 Height 5 ft 5 in. Eyes
Funeral at Chapel
Date Sat Mar 28 194 3P. M
Account charged Harold Newell
Address Park Park & Shire St
Account guaranteed
Address
Embalming & Dins 35.00
Robe, Suit, Dress ✓
Underwear and Hose ✓
Casket 6-3-54 Plush 200.00
Casket with Copper Lin. ✓
Style of Casket Ext. 1/2-e
No. of Casket 1927-Standard
Outside Box Reg.
Shipping Case or Vault ✓
Handles Ext.
Pillow Set Yes
Name Plate ✓
Cemetery Greenwood
Section 2-114 Lot

I Other Graves



X Grave on this date

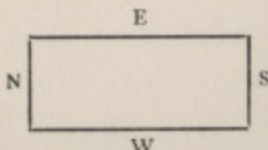
Cremation	<i>F. B. (un)</i>	5.00
Urn	<i>Can. Minn</i>	5.00
Single Grave		
Opening and Closing Grave	<i>etc</i>	15.00
Body Shipped to		
R. R. Ticket		
Cash advanced		
Autos		
Telegram		
Minister	<i>Rev. E. Clark & Rev. Tucker</i>	
Music	<i>Organ</i>	
Casket Wagon		
Physician	<i>Dr. Gray</i>	
County or City Burial		
Automobiles	<i>20.5</i>	15.00
Baggage or Express Train No.		

275.00

Carey Hand Funeral Home

Name of deceased Willis B. Boardman
 Date of death Mar 15 M
 Cause of death Skull Fractured by fatal shot
 Place of death St. Petersburg Fla.
 Residence St. Petersburg Fla.
 Age 62 Y'rs. 4 Mo's. 14 Days
 Weight 160 Height 5 ft. 9 in. Eyes Dark
 Funeral at St. Petersburg Fla.
 Date March 1942 M
 Account charged Ralph G. Godsey F. H.
 Address St. Petersburg Fla.
 Account guaranteed Check
 Address _____
 Embalming _____
 Robe, Suit, Dress Cremation 3050
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket by Auto 1 hour
 Outside Box 12:30 P. M.
 Shipping Case or Vault Mar 26-42
 Handles _____
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery Friday 8 A. M.
 Section Mar 27-1942 Lot _____

I Other Graves



X Grave on this date

Cremation ashes expressed
 Urn to Avery Brothers
 Single Grave Fun Home
 Opening and Closing Grave Yesterly
 Body Shipped to R. J. C.
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

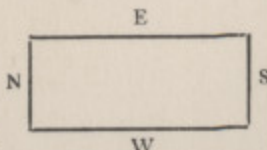
3750

Carey Hand Funeral Home

Name of deceased Mr. Joseph Wm Helms
 Date of death Mar 26 - P. M
 Cause of death _____
 Place of death Apopka, Fla
 Residence Apopka, Fla
 Age 62 Y'rs 3 Mo's 29 Days
 Weight 150 Height 5 ft 6 in. Eyes _____
 Funeral at Grave Side
 Date Sunday Mar 29th 1942 M
 Account charged Mrs Joseph W Helms
 Address Apopka, Fla
 Account guaranteed H. R. Sumner
 Address _____
 Embalming Yes
 Robe, Suit, Dress Suit
 Underwear and Hose Yes
 Casket 6-3-91 Doe
 Casket with Copper Lin. Yes
 Style of Casket Det. D.C
 No. of Casket 1972
 Outside Box Ref
 Shipping Case or Vault Each by Family
 Handles Ref
 Pillow Set Ref
 Name Plate _____
 Cemetery Acree
 Section _____ Lot _____

25.00
 70.00
 100.00

I Other Graves



X Grave on this date

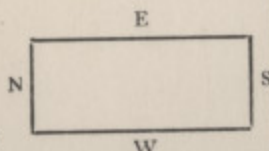
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave Det. D.C 10.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister By Family
 Music _____
 Casket Wagon _____
 Physician Dr. M. B. Bide
 County or City Burial _____
 Automobiles S. V. S 15.00
 Baggage or Express Train No. 24

160.00

Carey Hand Funeral Home

Name of deceased Anna Eliza Hodges
 Date of death Mar 26 2:40 P. M.
 Cause of death Apoplectic Cerebral Hemiplegia
 Place of death Smith Nursing Home
 Residence Windermere Fla
 Age 80 Y'rs 5 Mo's ✓ Days
 Weight ✓ Height ✓ ft. ✓ in. Eyes ✓
 Funeral at Graveside
 Date Sat Mar 28 1942 2 P. M.
 Account charged Mrs. D. W. Thomas
 Address Windermere Fla
 Account guaranteed Insurance
 Address ✓
 Embalming ✓ 35.00
 Robe, Suit, Dress White
 Underwear and Hose ✓ 75.00
 Casket 63 - 42 - 20
 Casket with Copper Lin. ✓
 Style of Casket Top H. Cap
 No. of Casket 72
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes
 Name Plate ✓
 Cemetery Landen, Fla
 Section ✓ Lot ✓

I Other Graves



X Grave on this date

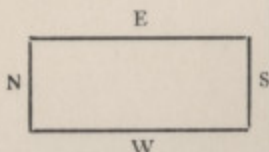
Cremation

Urn Del Box 15.00
 Single Grave ✓
 Opening and Closing Grave ✓
 Body Shipped to Landen, Fla
 R. R. Ticket ✓
 Cash advanced ✓
 Autos ✓
 Telegram ✓
 Minister Rev. Stickland
 Music ✓
 Casket Wagon 1
 Physician Dr. E. E. Eason
 County or City Burial ✓
 Automobiles 575 25.00
 Baggage or Express Train No. ✓ 150.00

Carey Hand Funeral Home

Name of deceased *Mr. Edward Armon*
 Date of death *Mar 26* M
 Cause of death *Exhaustion of Pt. Lung Disease*
 Place of death *N. Y. N. of ribs*
 Residence *Succasunna, New Jersey*
 Age *65* Y's *2* Mo's *2.5* Days *✓*
 Weight *160* Height *5* ft *10* in. Eyes *✓*
 Funeral at *Destination*
 Date *Mar* 194 *2* M
 Account charged *John Armon*
 Address *Succasunna N. J.*
 Account guaranteed *Chuch*
 Address *✓*
 Embalming *✓* *35.00*
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *6-6-Metal Fin* *550.00*
 Casket with Copper Lin. *✓*
 Style of Casket *Hot 12-e*
 No. of Casket *✓*
 Outside Box *Reg*
 Shipping Case or Vault *✓*
 Handles *✓*
 Pillow Set *Yes Taylor*
 Name Plate *✓*
 Cemetery *✓*
 Section *✓* Lot *✓*

I Other Graves



X Grave on this date

Cremation *N. J.*
 Urn *Emil Hachentem*
 Single Grave *✓*
 Opening and Closing Grave *✓*
 Body Shipped to *Newark N. J.*
 R. R. Ticket *38.00 39.90 714*
 Cash advanced *✓*
 Autos *✓*
 Telegram *✓*
 Minister *West*
 Music *Amv Ser*
 Casket Wagon *(2)*
 Physician *Dr. Duncan M. Luan*
 County or City Burial *✓*
 Automobiles *✓*
 Baggage or ~~Express~~ Train No. *92*

86.94

5.00
10.00

Lat- 3-28-42

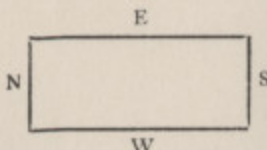
686.94

was stored by City of
Colonel Town

Carey Hand Funeral Home

Name of deceased Donald A. Munro
 Date of death March 26 9:30 A M
 Cause of death Coronary Type - Undersize
 Place of death D. A. H.
 Residence Miami Beach, Fla
 Age 2 Y'rs 10 Mo's 6 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at West
 Date Mar 1942 M
 Account charged J. A. Munro
 Address _____
 Account guaranteed Carey Hand Fun Home
 Address Miami, Fla
 Embalming & Dressing 25.00
 Robe, Suit, Dress _____
 Underwear and Hose _____ 42.50
 Casket 3-6- H. L.
 Casket with Copper Lin. Oct. H. T.
 Style of Casket Oct. H. T.
 No. of Casket Tampa 103
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Small
 Pillow Set Yes
 Name Plate ✓
 Cemetery Miami Fla
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Miami Fla
 R. R. Ticket 915-915 18.30
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister West
 Music _____
 Casket Wagon X Amb 10.00
 Physician Dr. Frank Gray
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. SAZ

8-P.M. 3-27-42

Cr. by Chk

Bal 2.49

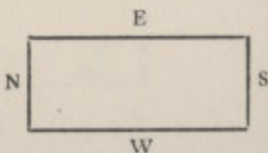
95.80

93.31

Carey Hand Funeral Home

Name of deceased *Agnes Higbee Mrs. Gee*
 Date of death *Mar 27* *11:10 P.* M
 Cause of death _____
 Place of death *Fla. Sanit.*
 Residence *220 Page Ave.*
 Age *61* Y'rs. *8* Mo's *19* Days _____
 Weight *200* Height *5* ft. *5* in. Eyes *Brown*
 Funeral at *Chapel*
 Date *Sunday* 1942 *P.* M
 Account charged *Thurs B. M. Gee*
 Address *936 W. Colonial Drive - Orlando*
 Account guaranteed *Payment*
 Address _____
 Embalming *Therapeutic* 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6 3 In. Oak* 110.00
 Casket with Copper Lin. _____
 Style of Casket *Oct. H. Cap*
 No. of Casket *1922*
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Cremation*
 Section _____ Lot _____

I Other Graves



X Grave on this date

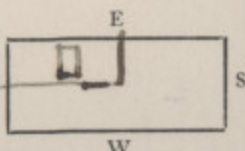
Cremation 50.00
 Urn _____
 Single Grave *Body Cremated*
 Opening and Closing Grave *B. M. Gee*
 Body Shipped to *Mar 30-42*
 R. R. Ticket _____
 Cash advanced *will call for urn*
 Autos _____
 Telegram *J. P. Robinson Photo*
 Minister *Rev*
 Music *Organ*
 Casket Wagon *(1)* 5.00
 Physician *Dr. Larson*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

200.00

Carey Hand Funeral Home

Name of deceased Mrs Anna Laubach
 Date of death Fri Mar 27-42 P.M.
 Cause of death D.S.H.
 Place of death S. Jackson
 Residence S. Jackson
 Age 76 Y'rs. 5 Mo's. 23 Days
 Weight 185 Height 5 ft. 6 in. Eyes
 Funeral at Chapel
 Date Sun Mar 29 1942 2:30 P.M.
 Account charged Mrs. H. H. H. H. H.
 Address 701 - 29 - S. H. H. H.
 Account guaranteed Emile
 Address
 Embalming S. H. H. H. 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-6-34 6th 250.00
 Casket with Copper Lin.
 Style of Casket R. L. S. L. S.
 No. of Casket 7-48-9 m. p. a.
 Outside Box R-9
 Shipping Case or Vault
 Handles Ext
 Pillow Set
 Name Plate
 Cemetery Greenwood
 Section A KE 1/4 Lot 120

I Other Graves Bought 20 ft. x 10 ft.
Mrs J. J. H. H. H.
Do H. H. H.
 X Grave on this date

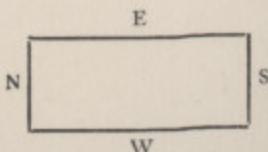


Cremation Burial Lot 35.00
 Urn P. B. C. C. 5.00
 Single Grave C. C. C. C. 5.00
 Opening and Closing Grave 1st & 2nd 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music Organ 5.00
 Casket Wagon 11
 Physician Dr. M. C. C. C.
 County or City Burial
 Automobiles 6 & 3 15.00
 Baggage or Express Train No.
Babea Lodge - Chapel 365.00
F. C. H. H. H. - Grave

Carey Hand Funeral Home

Name of deceased *Miles W Dawson*
 Date of death *Tue Mar 27-42* *11 P. M*
 Cause of death _____
 Place of death *The Dent*
 Residence *Winter Park*
 Age *78* Y'rs. *10* Mo's. *14* Days _____
 Weight *165* Height *5* ft. *7* in. Eyes _____
 Funeral at *Chapel*
 Date *Mon - 4 P M* 194*2* *3-30-42* M
 Account charged *Mrs Grace X Dawson*
 Address *868 5th Ave Winter Park*
 Account guaranteed *Paym'ts* *Later*
 Address _____
 Embalming *Care of Body* 25.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *See body* 50.00
 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

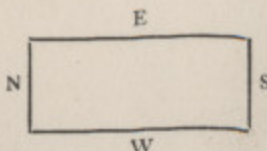
Cremation *Cremation* 50.00
 Urn *wooden with case for*
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Body cremated*
 R. R. Ticket *8 A M*
 Cash advanced _____
 Autos *body cremated*
 Telegram *8 A M Mar 30 42*
 Minister _____
 Music *Organ*
 Casket Wagon _____
 Physician *Dr Lynn*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

125.00

Carey Hand Funeral Home

Name of deceased Betty Ann Russ
 Date of death Oct Nov-28- M
 Cause of death _____
 Place of death Res
 Residence Glencora
 Age 13 Y'rs. 2 Mo's. 10 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Tues 3-31-42 194 5-P M
 Account charged John E Russ
 Address Glencora Pa
 Account guaranteed Insurance
 Address _____
 Embalming Yes
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 5-0 H. Park
 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

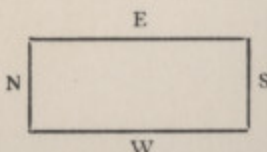
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music 2- trips
 Casket Wagon John E Russ 10.00
 Physician Dr. Austin
 County or City Burial _____
 Automobiles 5.00 15.00
 Baggage or Express Train No. _____

765.00

Carey Hand Funeral Home

Name of deceased *Mrs. Grace E. Kretzinger*
 Date of death *Oct- 2-28-42* *11:09 AM*
 Cause of death *Flu*
 Place of death *Flu*
 Residence *Bridgeport Winter Park*
 Age *Y's* *Mo's* *Days*
 Weight *Height* *ft.* *in.* *Eyes*
 Funeral at *Chapel*
 Date *Sun Mar 29* *1942* *1-P. M*
 Account charged *Harry Kretzinger*
 Address *Winter Park*
 Account guaranteed *Estate*
 Address *Idaho*
 Embalming *Yes* *35.00*
 Robe, Suit, Dress ☒
 Underwear and Hosiery ☒
 Casket *6-3-12-12-12-12* *325.00*
 Casket with Copper Lin. ☒
 Style of Casket *Oct 1-12*
 No. of Casket *2638 12-12-12*
 Outside Box *12-12*
 Shipping Case or Vault ☒
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate ☒
 Cemetery *Idaho*
 Section *Idaho* Lot *Idaho*

I Other Graves



X Grave on this date

Cremation ☐
 Urn ☐
 Single Grave ☐
 Opening and Closing Grave ☐
 Body Shipped to *Chicago Ills*
 R. R. Ticket *Bought & Sent*
 Cash advanced ☐
 Autos ☐
 Telegram *Yes*
 Minister *Dean Johnson*
 Music *Organ*
 Casket Wagon *Yes* *10.00*
 Physician *Dr. Ruth Clark*
 County or City Burial ☐
 Automobiles *Auto Sent* *5.00*
 Baggage or Express Train No. *92*

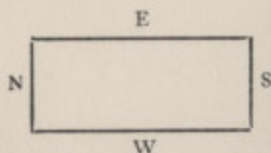
Sun 3-29-42-

375.00

Carey Hand Funeral Home

Name of deceased Harmon Canoll
 Date of death Mar 26-42 M
 Cause of death Large Nephritis
 Place of death Res
 Residence Harmon Haven Fla
 Age 81 Y'rs. 3 Mo's. 18 Days
 Weight _____ Height 6 ft. 2 in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged Harmon & Son
 Address Harmon Haven Fla
 Account guaranteed OK
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Coffin
 Casket with Copper Lin. By auto
 Style of Casket 5 ft. in flat
 No. of Casket 3-28-42
 Outside Box _____
 Shipping Case or Vault Coffin
 Handles Harmon & Son 3-29-42
 Pillow Set _____
 Name Plate By us
 Cemetery Harmon & Son
 Section Harmon Lot

I Other Graves



X Grave on this date

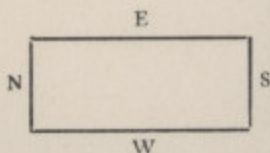
Cremation _____
 Urn wooden
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express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

37.50

Carey Hand Funeral Home

Name of deceased *Frederick B. Dickinson*
 Date of death *Wed Mar 28-42* P. M
 Cause of death *Obesity*
 Place of death *Lakeland Fla*
 Residence *Lakeland Fla*
 Age *67* Y'rs. *6* Mo's. *1* Days
 Weight *195* Height *6* ft. *2* in. Eyes
 Funeral at
 Date *194* M
 Account charged *Smith F. Home*
 Address *Lakeland Fla*
 Account guaranteed *ok*
 Address
 Embalming *Commence* 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. *Body moved*
 Style of Casket *11 A.M. 3-29-42*
 No. of Casket
 Outside Box *Refrigerator Room*
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

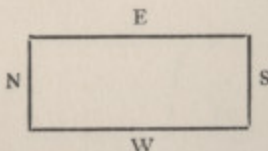
Cremation *Body cremated*
 Urn *8-A m m m*
 Single Grave *3-30-42*
 Opening and Closing Grave
 Body Shipped to *Johns Eyreman*
 R. R. Ticket *Smith F. Home*
 Cash advanced *Lakeland Fla*
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carroll Hand Funeral Home

Name of deceased Thommie Ragins
 Date of death Mon Mar 30-42 A.M.
 Cause of death Res-
 Place of death Res-
 Residence Alpha
 Age 6 Yrs. Mo's. 27 Days
 Weight 110 Height 5 ft. in. Eyes Blue
 Funeral at Alpha
 Date Tuesday 3-31-1942 3 P.M.
 Account charged Thommie Ragins
 Address Alpha
 Account guaranteed Thommie
 Address Alpha
 Embalming Yes 25.00
 Robe, Suit, Dress 8.29
 Underwear and Hosiery 50.00
 Casket 3-6 Heavy Black
 Casket with Copper Lin. Yes
 Style of Casket Oct N. Top
 No. of Casket 107
 Outside Box Yes
 Shipping Case or Vault Yes
 Handles Yes
 Pillow Set Yes
 Name Plate Alpha
 Cemetery Alpha
 Section Alpha Lot Alpha

I Other Graves



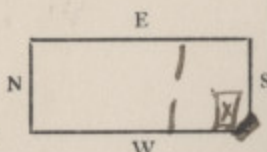
X Grave on this date

Cremation Yes
 Urn Yes
 Single Grave Yes
 Opening and Closing Grave By Family
 Body Shipped to Yes
 R. R. Ticket Yes
 Cash advanced Yes
 Autos Yes
 Telegram Yes
 Minister By Family
 Music Yes
 Casket Wagon Yes
 Physician Yes
 County or City Burial
 Automobiles with other body N. Top
 Baggage or Express Train No. 8339

Curry Hand Funeral Home

Name of deceased *Mrs. Margaret Hand*
 Date of death *Mon Mar 30-42 4 P.M.*
 Cause of death *Res -*
 Place of death *Res -*
 Residence *1023 Glenview Ave*
 Age *90* Y's *6* Mo's *13* Days
 Weight *194* Height *5* ft. *13* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *1942* M
 Account charged *John Hand*
 Address *Chapel*
 Account guaranteed *Estate*
 Address *Chapel*
 Embalming *Yes* *35.00*
 Robe, Suit, Dress *195.00*
 Underwear and Hose *Plush*
 Casket *4-3-42 Std-Plth* *150.00*
 Casket with Copper Lin. *Yes*
 Style of Casket *Set 1/2 - C.*
 No. of Casket *1927 - Shmr*
 Outside Box *Yes* *150.00*
 Shipping Case or Vault *air seal*
 Handles *Ext*
 Pillow Set *Yes*
 Name Plate *Yes*
 Cemetery *Greenwood*
 Section *M* Lot *61*

I Other Graves



X Grave on this date

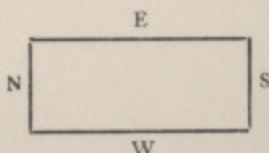
Cremation *Yes*
 Urn *Yes*
 Single Grave *Yes*
 Opening and Closing Grave *etc* *15.00*
 Body Shipped to *Yes*
 R. R. Ticket *Yes*
 Cash advanced *Yes*
 Autos *Yes*
 Telegram *Yes*
 Minister *Anthony Runk C.S.*
 Music *Organ*
 Casket Wagon *No Chg*
 Physician *Fred Walker*
 County or City Burial *Yes*
 Automobiles *5 x 5* *15.00*
 Baggage or Express Train No. *3* *15.00*

*The way the monument is set
 the Head of this grave is about
 2 1/2 ft East of space 8 -
 but grave is space 8 - can be
 move East But all monumts
 will in proper place*

Carey Hand Funeral Home

Name of deceased Richard F. Williams
 Date of death Mar 30 11:30 A M
 Cause of death Uremia
 Place of death Res
 Residence Custal Fla
 Age 80 Y's 6 Mo's 11 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graveside
 Date Thurs Apr 2nd 1942 4 P. M
 Account charged Mr James F. Rogers
 Address 1242 W. 4th Ave Eustal
 Account guaranteed Insurance
 Address Calley Williams 131 Ave
 Embalming Yes 35.00
 Robe, Suit, Dress Blue Suit } 15.00
 Underwear and Hose }
 Casket Yes Grey } 100.00
 Casket with Copper Lin. }
 Style of Casket Oct H. Cap
 No. of Casket 1972-Palmer
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Yes
 Pillow Set Yes
 Name Plate _____
 Cemetery Palmer Cemetery
 Section _____ Lot _____

I Other Graves



X Grave on this date

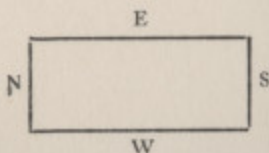
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev Boshart
 Music _____
 Casket Wagon F. Quate's 15.00
 Physician Dr. R. H. Williams
 County or City Burial Custal Fla
 Automobiles 575 15.00
 Baggage or Express Train No. _____

\$195.00

Carey Hand Funeral Home

Name of deceased George W. S. Fearing
 Date of death Mar 31 4 P M
 Cause of death _____
 Place of death Bay Pines Fla
 Residence Winter Park Fla
 Age 65 Yrs. 1 Mo's. 11 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sat April 4 194 4 P M
 Account charged Mrs. Helen L. Fearing
 Address 520 International Ave N. C.
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-2-Standard
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Cremation
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn wooden
 Single Grave Body buried by hand
 Opening and Closing Grave buried
 Body Shipped to S. A. M. Sun 4-5-42
 R. R. Ticket will call for
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Lillian Vance
 Music _____
 Casket Wagon _____
 Physician At Bay Pines, Fla.
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

50.00

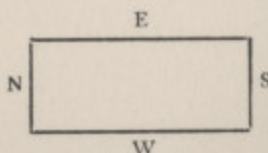
50.00

The F. & A. Co.
 The S. Star Co.

Carey Hand Funeral Home

Name of deceased Tillman Smith
 Date of death Mar 31st A.M.
 Cause of death Res
 Place of death Wm. Garden Rd
 Residence 4-3-
 Age..... Y'rs..... Mo's..... Days.....
 Weight..... Height..... ft..... in. Eyes.....
 Funeral at Grave side
 Date Thurs Apr 2- 1942 3 P. M
 Account charged
 Address
 Account guaranteed
 Address
 Embalming Yes
 Robe, Suit, Dress Wk
 Underwear and Hose
 Casket 6-3-Gr Engr
 Casket with Copper Liner
 Style of Casket Top
 No. of Casket 72-Top
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext
 Pillow Set yes
 Name Plate Cover
 Cemetery
 Section..... Lot.....

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave Ticket 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Rev. Irwin
 Music
 Casket Wagon
 Physician Dr. Moore
 County or City Burial
 Automobiles S & S 15.00
 Baggage or Express Train No.

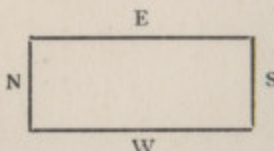
145.00

April 1st 1942

Carey Hand Funeral Home

Name of deceased Louis Brulacher
Date of death Mar 31-42 M
Cause of death Cancer of Esophagus
Place of death 9-12
Residence Bayton Beach Fla
Age 78 Yrs. 6 Mo's 24 Days
Weight 160 Height 6 ft. — in. Eyes —
Funeral at —
Date — 194 — M
Account charged Baggett & Son's Funeral Home
Address Bayton Beach
Account guaranteed OK
Address —
Embalming Cumulation 37.50
Robe, Suit, Dress —
Underwear and Hose —
Casket —
Casket with Copper Lin. Body Shipped
Style of Casket by order 11-AM
No. of Casket 4-1-42
Outside Box —
Shipping Case or Vault Body Buried
Handles 8-AM-4-2-42
Pillow Set —
Name Plate when exposed to
Cemetery Baggett & Son's Funeral Home
Section Bayton Beach Fla

I Other Graves



X Grave on this date

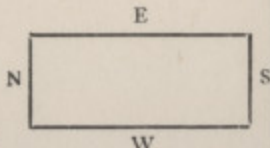
Cremation —
Urn —
Single Grave —
Opening and Closing Grave —
Body Shipped to —
R. R. Ticket —
Cash advanced —
Autos —
Telegram —
Minister —
Music —
Casket Wagon —
Physician —
County or City Burial —
Automobiles —
Baggage or Express Train No. —

37.50

Carey Hand Funeral Home

Name of deceased Chas. L. Allen
 Date of death 3-31-42 M
 Cause of death suicide
 Place of death here
 Residence Rockledge Fla
 Age 63 Y'rs 6 Mo's 21 Days
 Weight 120 Height 5 ft. 6 in. Eyes
 Funeral at
 Date 194 M
 Account charged J. B. Room Fun Home
 Address Cocoa, Fla
 Account guaranteed ok
 Address
 Embalming terminal 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket body covered
 No. of Casket by order 11-A M
 Outside Box Wed - Apr - 1 - 42
 Shipping Case or Vault
 Handles body cremated
 Pillow Set 8-A M
 Name Plate 4-2-42
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

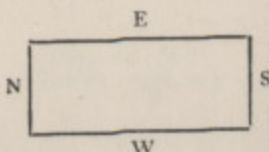
Cremation
 Urn wooden
 Single Grave
 Opening and Closing Grave
 Body Shipped to will call for
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No. 7A

37.50

Carey Hand Funeral Home

Name of deceased Hilda Papia
 Date of death 8-31-42 2:15 P. M
 Cause of death B. T. Simpson
 Place of death St. B. Hospital
 Residence Tampa 215 La Salle St
 Age 23 Yrs. 5 Mo's. 17 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged Yellow Department
 Address Hillside C. O.
 Account guaranteed Tampa Fla
 Address _____
 Embalming ☒ 50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket G. D. from Tampa
 Casket with Copper Lin. Came for
 Style of Casket the Bids
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

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

50

Carey Hand Funeral Home

Name of deceased *J. Canoll Trench*
 Date of death *Thurs Apr - 2 - 42 9 M P.*
 Cause of death *O. G. H.*
 Place of death *O. G. H.*
 Residence *1210 - Conway Rd*
 Age *70* Y'rs. *7* Mo's. *12* Days
 Weight *180* Height *5* ft. *11* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Sat Apr 4 - 1942 230 P M*
 Account charged *Mrs Helen Trench Wife*
 Address *1210 Conway Rd -*
 Account guaranteed *Estato*
 Address *Estato*
 Embalming *Y Dress* 30.00
 Robe, Suit, Dress *Y*
 Underwear and Hose *Y*
 Casket *6-6-5 3rd Bth* 350.00
 Casket with Copper Lin. *Y*
 Style of Casket *State H. Co.*
 No. of Casket *1*
 Outside Box *Y*
 Shipping Case or Vault *Y*
 Handles *Y*
 Pillow Set *Y*
 Name Plate *Y*
 Cemetery *Cummins*
 Section *1* Lot *1*

I Other Graves

	E	
N	<i>Name & Date required</i>	S
	W	

X Grave on this date

Cremation *Cremation* 50.00
 Urn *Brass*
 Single Grave *Name & Date Eng* 50.00
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced *Spa of Thomas* 10.00
 Autos
 Telegram
 Minister *Lindsay McVair*
 Music *Organ* 5.00
 Casket Wagon *1*
 Physician *Dr Gray* 5.00
 County or City Burial *Am. Soc*
 Automobiles
 Baggage or Express Train No.

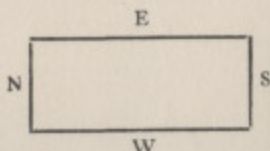
Body cremated 8-AM *455.00*
 Sun Apr - 5 - 42 - *\$505.00*

Will call you

Carey Hand Funeral Home

Name of deceased Philip Meng
 Date of death 4-2-31-42 A.M.
 Cause of death not given on Certificate
 Place of death Her
 Residence Rockledge Fla
 Age 56 Y'rs. 4 Mo's. 29 Days
 Weight 185 Height 5 ft. 11 in. Eyes
 Funeral at Prayer Funerary Room
 Date Fri 4-3-42 194 4 P.M.
 Account charged J. S. Keen F. Home
 Address Cocoa Fla
 Account guaranteed Call
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket Body moved
 No. of Casket by order 300 PM
 Outside Box Fri-4-3-42
 Shipping Case or Vault
 Handles Body Cremated
 Pillow Set 28-A.M.
 Name Plate Sat 4-4-42
 Cemetery
 Section will call for

I Other Graves



X Grave on this date

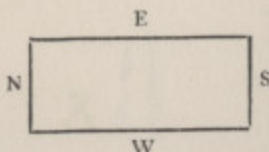
Cremation
 Urn wooden
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Thos Sanderson
 Date of death Fri Apr - 3-42 4:30 P.M.
 Cause of death _____
 Place of death 618 Terrace Blvd
 Residence Chicago N.D.
 Age 80 Yrs. 11 Mo's. 8 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Deat
 Date _____ 194 M
 Account charged Mrs Sarah Lutz
 Address 618 Terrace Blvd
 Account guaranteed OK
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 45.00
 Casket with Copper Lin. _____
 Style of Casket Exp
 No. of Casket 1 10.00
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Reg
 Pillow Set _____
 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 _____
 R. R. Ticket _____ 123.59
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Deat
 Music _____ 10.00
 Casket Wagon (2)
 Physician Dr. M. M. Anderson
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 80

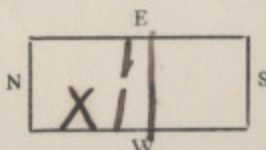
105 P.M. Sun 4-5-42

22359

Carey Hand Funeral Home

Name of deceased *Joe Taylor Cashion*
 Date of death *Set Apr-4-42 1030 A.M.*
 Cause of death *File sent*
 Place of death *File sent*
 Residence *1420 Sells ave*
 Age *18* Y'rs *7* Mo's *16* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date _____ 194 _____ M
 Account charged *Mrs. Frank Cashion*
 Address *1420 - Sells ave*
 Account guaranteed *Insurance*
 Address _____
 Embalming *Yes* 35.00
 Robe, Suit, Dress *Yes*
 Underwear and Hose *Yes*
 Casket *6-3-41 Box* 125.00
 Casket with Copper Lin. *Yes*
 Style of Casket *Art. N. Oak*
 No. of Casket *13-11-8*
 Outside Box *Yes*
 Shipping Case or Vault *Cement* 60.00
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate *Yes*
 Cemetery *Greenwood*
 Section *R 1/2* Lot *21*

I Other Graves



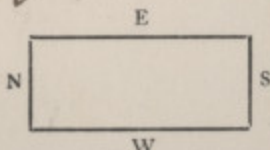
X Grave on this date

Cremation *Family car N. Ch* 5.00
 Urn *P.B. car* 5.00
 Single Grave *Car man* 15.00
 Opening and Closing Grave *1st etc*
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *W. L. Hambrick*
 Music *Organ by Family* 5.00
 Casket Wagon *11*
 Physician *Dr. - Sister*
 County or City Burial _____
 Automobiles *S & S* 15.00
 Baggage or Express Train No. _____
265.00

Carey Hand Funeral Home

Name of deceased Mrs Emily Kasal
 Date of death Apr - 3 - 42 M
 Cause of death Not given on burial
 Place of death Res
 Residence Leedsburg
 Age 24 Y's 4 Mo's 2 Days 1
 Weight 100 Height 5 ft. 4 in. Eyes Blue
 Funeral at Leedsburg Fla
 Date April 7 194 2 M
 Account charged F. C. Page First
 Address Leedsburg Fla
 Account guaranteed Check
 Address Leedsburg Fla
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Body covered
 Style of Casket W. auto 13-PM
 No. of Casket Not 4-4-42
 Outside Box _____
 Shipping Case or Vault Body covered
 Handles 8-7 on Jan 4-5-42
 Pillow Set _____
 Name Plate Express to L. C. Page
 Cemetery Home
 Section Leedsburg Lot Fla

I Other Graves



X Grave on this date

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

37.50

Carey Hand Funeral Home

Name of deceased *Mr John H. Wilcox*
 Date of death *Sat Apr - 4-42* P.M.
 Cause of death *Myocardial Infarction*
 Place of death *West Haven Conn*
 Residence *Palm Beach St. Doverport, Ctd*
 Age *71* Y'rs. *2* Mo's. *6* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date _____ 194____ M
 Account charged *Mrs. E. H. Sherrill*
 Address *Samrat Ctd*
 Account guaranteed *Car. Pd by Mrs. E. H. Sherrill*
 Address *of Orlando*
 Embalming *Yes* *35.00*
 Robe, Suit, Dress _____
 Underwear and Hosiery _____ *50.00*
 Casket *6-3 Sun Oak*
 Casket with Copper Lin. _____
 Style of Casket *Oct*
 No. of Casket *1472-9*
 Outside Box _____
 Shipping Case or Vault _____
 Handles *Set*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Cremation*
 Section _____ Lot _____
 I Other Graves _____
 X Grave on this date _____
 Cremation *Cremation* *50.00*
 Urn *wooden*
 Single Grave *Body arrived 10 P.M.*
 Opening and Closing Grave *Sat - 4-4-42*
 Body Shipped to _____
 R. R. Ticket *Body cremated*
 Cash advanced *E. H. M. Thurs - 4-9-42*
 Autos _____
 Telegram *Will call*
 Minister _____
 Music _____ *15.00*
 Casket Wagon *X Res*
 Physician *Dr. Chapman Taylor*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

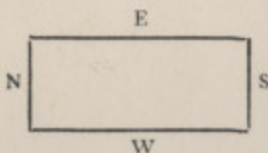
150.00

3-18-53

Carey Hand Funeral Home

Name of deceased *Mr. William Davis Grand*
 Date of death *Mar 12-5-42* *AM*
 Cause of death
 Place of death *549-N. Orange*
 Residence *Osborne Kansas*
 Age *89* Y'rs. *—* Mo's. *17* Days
 Weight *170* Height *5* ft. *8* in. Eyes
 Funeral at *Best*
 Date *194* *M*
 Account charged *Mrs. B. C. Jewell*
 Address *549-N. Orange Ave*
 Account guaranteed
 Address
 Embalming *Y. Dressing* *35.00*
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *6-3 in. Oak-E* *350.00*
 Casket with Copper Lin. *✓*
 Style of Casket *R. Cor. Slat*
 No. of Casket *6008* *Shain*
 Outside Box *R. 9*
 Shipping Case or Vault *✓*
 Handles *Ext*
 Pillow Set *Yes*
 Name Plate
 Cemetery *Best*
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Osborne Kan*
 R. R. Ticket
 Cash advanced
 Autos *Route Saw for Travel*
 Telegram *in Chapel*
 Minister *McNair*
 Music
 Casket Wagon *(2)* *10.00*
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

111-
RR-

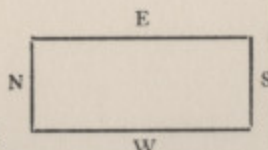
395.00
51.95
32.18
479.13

Carey Hand Funeral Home

Name of deceased *Geo. Anderson*
 Date of death *June 5 - 42* *2 P.M.*
 Cause of death *Had heart*
 Place of death *Auto Accident 300 ft. from*
 Residence *Jackson Ala -*
 Age *Yrs.* *Mo's.* *Days.*
 Weight *Height* *ft.* *in.* *Eyes*
 Funeral at *27* *194* *M*
 Date *27*
 Account charged *Jackson F. Home*
 Address *Birmingham Ala*
 Account guaranteed *Cash*
 Address
 Embalming *Yes*
 Robe, Suit, Dress *C. H. H.*
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section *Lot*

35.00
15.00

I Other Graves



X Grave on this date

Jackson
 Cremation *Yes*
 Urn *Funeral Home*
 Single Grave *Birmingham Ala*
 Opening and Closing Grave *Same*
 Body Shipped to *for the body*
 R. R. Ticket *with auto*
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician *B. Rogers (Carr)*
 County or City Burial *White Yard*
 Automobiles
 Baggage or Express Train No.

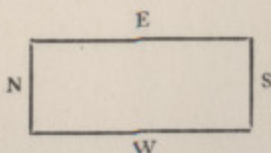
50.00

Carey Hand Funeral Home

Name of deceased Private Lacy T. Smith
 Date of death Sun Apr 5 - 1942
 Cause of death Head crushed
 Place of death Accident son of Gen
 Residence Montgomery Ala
 Age 33 Yrs. 4 Mo's 13 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged Gov Contract
 Address _____
 Account guaranteed _____
 Address _____
 Embalming Yes
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 4-3 in both
 Casket with Copper Lin. Yes
 Style of Casket Set A. C
 No. of Casket 1972
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Yes
 Pillow Set Yes
 Name Plate Set
 Cemetery _____
 Section _____ Lot _____

I Other Graves

X Grave on this date



Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Montgomery Ala
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2)
 Physician Gov + Gen Dr
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 92

Tues - 4-7-42

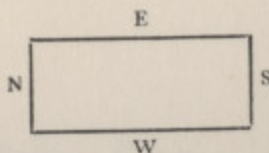
100.00

Polard

Carry Hand Funeral Home

Name of deceased Johnie Hilson
 Date of death Mar-12-42 A M
 Cause of death Accidental Drowning
 Place of death Jellwood
 Residence Jellwood
 Age 20 Yrs 10 Mo's 26 Days
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at Grave side
 Date Apr-7-42 194 A M
 Account charged County Comm
 Address _____
 Account guaranteed County
 Address 9 Mrs. Redwell
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 Cor
 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 Body was received by
 Urn Stark & King
 Single Grave _____
 Opening and Closing Grave Beloved
 Body Shipped to 4-7-42 by the
 R. R. Ticket County
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

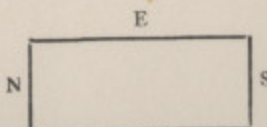
14.50

14.50

Carey Hand Funeral Home

Name of deceased *Mrs. Elizabeth Mossor*
 Date of death *Mon. April 6-42* P. M.
 Cause of death *Carcinoma of Uterus*
 Place of death *Holiday House*
 Residence *Miller Ave*
 Age *84* Y'rs. Mo's *19* Days
 Weight _____ Height _____ ft. in. Eyes _____
 Funeral at *St. James Chapel*
 Date *Thurs. Apr 9-42* 1942 *2:30* M P
 Account charged *Mrs. W. J. Mossor*
 Address *Port Washington, L.I.*
 Account guaranteed *Cash*
 Address _____
 Embalming *& Dressing* 25.00
 Robe, Suit, Dress 5.00
 Underwear and Hosiery 50.00
 Casket *6-3 - 12 Maple*
 Casket with Copper Lin. _____
 Style of Casket *Exp. N. C. Co.*
 No. of Casket *22 Tampa*
 Outside Box *Reg*
 Shipping Case or Vault _____
 Handles *Exp*
 Pillow Set *Exp*
 Name Plate _____
 Cemetery *Woodlawn*
 Section _____ Lot _____

I Other Graves



X Grave on this date

Note: Ashes of Willie Sisson
Placed in casket also the same
 Cremation of *Mrs. F. J. Lobb*
 Urn *placed in same casket*

Single Grave 15.00
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Father Bishop*
 Music _____
 Casket Wagon _____
 Physician *J. M. Chappell*
 County or City Burial _____
 Automobiles *S. & S* 15.00
 Baggage or Express Train No. _____

710.00

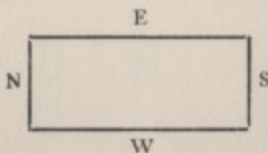
10.00

7 \$100.00

Carey Hand Funeral Home

Name of deceased Ralph Clarkson
 Date of death April 15 194 8:20 P. M
 Cause of death _____
 Place of death Chgo.
 Residence 14 W. Elm St. Chicago Ill
 Age 80 Y'rs. 8 Mo's. 2 Days
 Weight 170 Height 5 ft 5 in. Eyes _____
 Funeral at Home
 Date _____ 194 M
 Account charged Mrs. Frances C. Clarkson
 Address 14 W. Elm St. Chicago Ill
 Account guaranteed Estate
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose _____
 Casket 6-3-6-2-2 50.00
 Casket with Copper Lin. _____
 Style of Casket Oct
 No. of Casket _____
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles Exp
 Pillow Set Exp
 Name Plate ✓
 Cemetery Cremation
 Section _____ Lot _____

I Other Graves

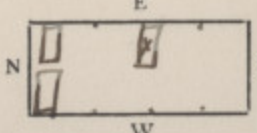


X Grave on this date

Cremation 50.00
 Urn wooden
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced Oral Sm 10.00
 Autos _____
 Telegram _____
 Minister ✓
 Music ✓
 Casket Wagon C. 1 5.00
 Physician Dr. Spencer Folsom
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. BB

150.00

Carey Hand Funeral Home

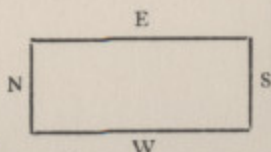
Name of deceased Bob Warren
 Date of death April 7th 11 P. M
 Cause of death Suicide by household gas
 Place of death Residence
 Residence 530 - E. Pine St
 Age 44 Y'rs 9 Mo's 13 Days
 Weight 200 Height 5 ft 5" in. Eyes
 Funeral at Res of Mother - Terrace Ave
 Date Friday Apr 10 1942 5 P M
 Account charged Mrs Bob Warren
 Address 530 - E. Pine St
 Account guaranteed
 Address
 Embalming & dressing 35.00
 Robe, Suit, Dress 20.00
 Underwear and Hose
 Casket 6-6- Metal 1/2-C 350.00
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box
 Shipping Case or Vault 6000 60.00
 Handles
 Pillow Set
 Name Plate
 Cemetery Greenwood
 Section P Lot 46
Space 7-
 I Other Graves

 X Grave on this date
 Cremation auto
 Urn
 Single Grave
 Opening and Closing Grave etc 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon 17 5.00
 Physician Dr. Luckworth
 County or City Burial
 Automobiles 5.15 15.00
 Baggage or Express Train No.

300.00

Carey Hand Funeral Home

Name of deceased *Irving David Smith*
 Date of death *April 8* 194*2* *4:40 A.M.*
 Cause of death *Acute Myo Carditis*
 Place of death *134-E Livingston Ave*
 Residence *Shanectelle, New York*
 Age *59* Y'rs. *Mo's* *8* Days
 Weight *150* Height *5* ft. *10* in. Eyes *Blue*
 Funeral at *Shanectelle*
 Date *April 10* 194*2* *M*
 Account charged *Mrs. Cecil H. Smith*
 Address *Shanectelle, New York*
 Account guaranteed *Club*
 Address *Shanectelle, New York*
 Embalming *+ Shansing* 35.00
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *6-3- Mahogany* 380.00
 Casket with Copper Lin. *✓*
 Style of Casket *Modern Style 12" x 24"*
 No. of Casket *431- Can*
 Outside Box *Red*
 Shipping Case or Vault *✓*
 Handles *Ext*
 Pillow Set *Yes Taylor*
 Name Plate *Front & Side*
 Cemetery *Shanectelle, N.Y.*
 Section *1* Lot *1*

I Other Graves



X Grave on this date

Cremation *Survival Shanectelle*
 Urn *N.Y.*
 Single Grave *✓*
 Opening and Closing Grave *✓*
 Body Shipped to *Saratoga N.Y.*
 R. R. Ticket *Direct*
 Cash advanced *New York Home* 5.00
 Autos *✓* 1.90
 Telegram *(1)*
 Minister *Shanectelle*
 Music *✓*
 Casket Wagon *(2)* 10.00
 Physician *Dr. Duncan M. L. L.*
 County or City Burial *✓*
 Automobiles *✓*
 Baggage or Express Train No. *16*

Total Night 4-8-42 431.90

Carey Hand Funeral Home

Name of deceased *Mary Elizabeth Chancy*
 Date of death *April 8* *7 A. M.*
 Cause of death *Prematurity 2 mos*
 Place of death *Residence*
 Residence *2137 - W. Jackson St*
 Age *Yrs.* *Mo's.* *Days* *12*
 Weight *ft.* *in.* *Eyes*
 Funeral at *No Service*
 Date *1942* *M*
 Account charged *Ray Chancy*
 Address *2137 W. Jackson St*
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress *Estimation* *5.00*
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket *Body Cremated*
 No. of Casket *Third 8 a.m.*
 Outside Box *April 9 - 42*
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section *Lot*

 I Other Graves

E
 N S
 W

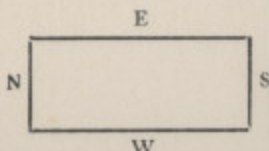
 X Grave on this date
 Cremation *Will Call for*
 Urn *Urn*
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician *Dr. Sinclair*
 County or City Burial
 Automobiles
 Baggage or Express Train No.

5.00

Carey Hand Funeral Home

Name of deceased *Mary C. Garnett*
 Date of death *April 5* M
 Cause of death *Angina Pectoris*
 Place of death *Port Orange Fla*
 Residence *Port Orange Fla*
 Age *82* Y's *4* Mo's *2* Days *2*
 Weight *120* Height *5* ft. *6* in. Eyes *Blue*
 Funeral at *Port Orange Fla*
 Date *April 7* 194*2* M
 Account charged *Budget-Ins. Int'l. F. B.*
 Address *1150 N. Beach Fla*
 Account guaranteed *Church*
 Address *Port Orange Fla*
 Embalming *Yes*
 Robe, Suit, Dress *Estimate 37.50*
 Underwear and Hose *Yes*
 Casket *Yes*
 Casket with Copper Lin. *Yes*
 Style of Casket *Body Arrived*
 No. of Casket *by auto 11:45 a.m.*
 Outside Box *Wed Apr 8-42*
 Shipping Case or Vault *Yes*
 Handles *Yes*
 Pillow Set *Body Cremated*
 Name Plate *Thurs 8 a.m.*
 Cemetery *April 9-42*
 Section *Lot*

I Other Graves



X Grave on this date

Cremation *Yes*
 Urn *to Budget-Ins. Int'l. F. B.*
 Single Grave *Yes*
 Opening and Closing Grave *Yes*
 Body Shipped to *Beach Fla*
 R. R. Ticket *Yes*
 Cash advanced *Yes*
 Autos *Yes*
 Telegram *Yes*
 Minister *Yes*
 Music *Yes*
 Casket Wagon *Yes*
 Physician *Yes*
 County or City Burial *Yes*
 Automobiles *Yes*
 Baggage or Express Train No. *Yes*

37.50

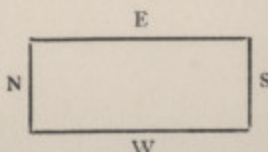
Curry Hand Funeral Home

Name of deceased Louis Whitfield Bragdon
 Date of death Apr - 10 - 42 6 - P M
 Cause of death Compensated Heart
 Place of death Holiday House
 Residence Potomac Ohio
 Age 76 Y'rs 10 Mo's 23 Days
 Weight 150 Height 5 ft 6 in. Eyes
 Funeral at East
 Date 194 M
 Account charged Depler F. Home
 Address Potomac Ohio
 Account guaranteed
 Address Garang
 Embalming Yes 30.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3-42 100.00
 Casket with Copper Lin. Yes
 Style of Casket Ed. H. Q
 No. of Casket 1312 - Shm
 Outside Box Yes
 Shipping Case or Vault Yes
 Handles Yes
 Pillow Set Yes
 Name Plate Yes
 Cemetery East
 Section _____ Lot _____
 I Other Graves
 X Grave on this date
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Potomac Ohio
 R. R. Ticket RR 70.00
 Cash advanced Non Express
 Autos Yes 5.00
 Telegram L. & Phoe Tel & Dr 5.00
 Minister Ambr Sen 10.00
 Music _____
 Casket Wagon 2
 Physician Dr Luther
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 92
Tric 4-10-42 225.00

Carey Hand Funeral Home

Name of deceased John C. Baxter
 Date of death April 7, 1942 M
 Cause of death Suicide
 Place of death Winter Haven Fla
 Residence Winter Haven Fla
 Age 70 Y'rs. Mo's. Days.
 Weight 165 Height 5 ft. 4 in. Eyes
 Funeral at Winter Haven Fla
 Date April 1942 M
 Account charged Wm. B. Bingham F. H.
 Address Winter Haven Fla
 Account guaranteed Check
 Address
 Embalming
 Robe, Suit, Dress Cremation 37.50
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket Body arrived
 No. of Casket by auto 4:30 P.M.
 Outside Box Friday Apr 12-42
 Shipping Case or Vault
 Handles
 Pillow Set Body Cremated
 Name Plate Wm. B. Bingham
 Cemetery April 11: 42
 Section Lot

I Other Graves



X Grave on this date

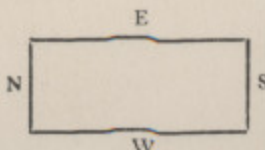
Cremation Asper expressed
 Urn to Wm. B. Bingham
 Single Grave Fun. Home
 Opening and Closing Grave Winter
 Body Shipped to Haven. Fla
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Mrs. Ella J. Preston
 Date of death Mon. 9-10-42 P.M.
 Cause of death Per
 Place of death Per
 Residence Island, Rt. 4 - 7 Miles E.
 Age 72 Y'rs. 9 Mo's. 30 Days
 Weight 125 Height 5 ft. 5 in. Eyes
 Funeral at Chapel
 Date Sun. April 12 1942 4 P.M.
 Account charged Frank Preston
 Address Island, Fla. R.F.D. 4 - Son
 Account guaranteed 9-Mi. Rd.
 Address Island by same at P.D.
 Embalming Yes
 Robe, Suit, Dress Blue #698 35.00
 Underwear and Hosiery Yes 125.00
 Casket 6-3- Gr. Maple
 Casket with Copper Lin. Yes
 Style of Casket Det. No. 2
 No. of Casket 1312 Same
 Outside Box Reg.
 Shipping Case or Vault Yes
 Handles Yes
 Pillow Set Yes
 Name Plate Yes
 Cemetery Draury
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave Yes 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Rev. Murphy - Rev. Hall
 Music 5.00
 Casket Wagon (1)
 Physician Dr. Beardsall
 County or City Burial 15.00
 Automobiles S. & S.
 Baggage or Express Train No. 8.00

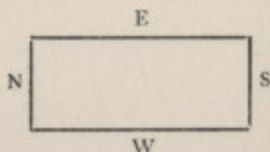
205.00
205.00
200.00
25.00
175.00

Note 1/2 Same

Carey Hand Funeral Home

Name of deceased John S. Arnold
 Date of death Apr - 11 - 42 8:30 P.M.
 Cause of death caner of throat
 Place of death Home
 Residence Opore
 Age 60 Y'rs 7 Mo's 10 Days
 Weight 150 Height 5 ft. 10 in. Eyes Blue
 Funeral at Grave Side
 Date Mon - Apr 13 1942 3-P. M.
 Account charged Grave Arnold
 Address Osceola, Fla.
 Account guaranteed Cash & Payment
 Address Opore
 Embalming Yes 35.00
 Robe, Suit, Dress 21.50
 Underwear and Hose 75.00
 Casket 6-3-Gr. Type
 Casket with Copper Lin. Yes
 Style of Casket See H. C.
 No. of Casket 72 Tampa
 Outside Box Reg
 Shipping Case or Vault Yes
 Handles Yes
 Pillow Set Yes
 Name Plate Yes
 Cemetery Opore
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles 8 & 3 15.00
 Baggage or Express Train No.

Old acct

Sept-5-1929

1/2 from

761.50

140.50

221.00

100.00

15.00

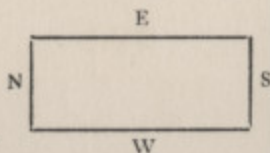
8136.00

Carey Hand Funeral Home

Name of deceased Tully Wm M Kinney
 Date of death Sun Apr - 12 - 42 4:15 P M
 Cause of death Cancer
 Place of death Res
 Residence 722 Rugby
 Age 67 Yrs. 6 Mo's. 14 Days
 Weight 160 Height 6 ft 0 in. Eyes
 Funeral at Chapel
 Date Mon Apr - 13 1942 5 P M
 Account charged Robt S Bradford
 Address First City Hammond St 2
 Account guaranteed
 Address
 Embalming Yes
 Robe, Suit, Dress White
 Underwear and Hose Yes
 Casket 6-3-22
 Casket with Copper Lin. Yes
 Style of Casket Set. H. C
 No. of Casket 1311 - Shiner
 Outside Box 11-29
 Shipping Case or Vault Yes
 Handles Yes
 Pillow Set Yes
 Name Plate
 Cemetery Friendship
 Section Cordale

35.00
 15.00
 135.00

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to Cordale Ga
 R. R. Ticket 1040 542
 Cash advanced
 Autos
 Telegram
 Minister Singer for
 Music Organ church
 Casket Wagon (2)
 Physician Dr. Larson
 County or City Burial
 Automobiles
 Baggage or Express Train No. 76

16 02

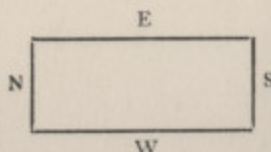
10.00

Monday Night 4-13-42 197.52

Carry Hand Funeral Home

Name of deceased Mrs. Francis W. Hawes
 Date of death Apr - 11 - 42 M
 Cause of death Paralysis
 Place of death Res
 Residence Winter Haven
 Age 71 Y'rs 2 Mo's 14 Days
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged Wm. Y. Smith
 Address Winter Haven
 Account guaranteed OK
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin Body Covered
 Style of Casket 3 P. 2 H.
 No. of Casket Imm Apr 13 - 42
 Outside Box _____
 Shipping Case or Vault Body Covered
 Handles Mrs. Apr 14 - 42 8-AM
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

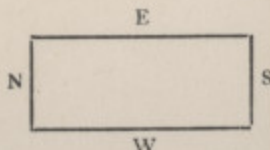
Cremation _____
 Urn wooden
 Single Grave Other Ex/imp -
 Opening and Closing Grave _____
 Body Shipped to Carl B. Wilson
 R. R. Ticket Durham Road
 Cash advanced _____
 Autos Searsdale
 Telegram N. Y.
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of deceased Mrs. Lizzie E. Longley
 Date of death Apr 10 - 42 M
 Cause of death Leaden of Colon
 Place of death Fla
 Residence Busti Fla
 Age 82 Yrs 3 Mo's 7 Days
 Weight 73 Height 5 ft. 10 in. Eyes Blue
 Funeral at 194 M
 Date Apr 10 - 42
 Account charged Jellison & Reibman
 Address Busti Fla
 Account guaranteed OK
 Address Busti Fla
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket Body Unm'd
 Casket with Copper Lin. Y and
 Style of Casket 330 P. M
 No. of Casket 4-13-42
 Outside Box Mon 4-13-42
 Shipping Case or Vault
 Handles Body Cremated
 Pillow Set 18-A.M. Tuesday
 Name Plate Apr 14 42
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

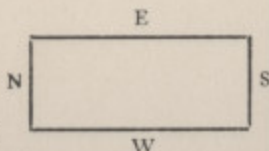
Cremation
 Urn wooden
 Single Grave ashes expressed
 Opening and Closing Grave
 Body Shipped to Jellison & Reibman
 R. R. Ticket Busti Fla
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased *Mrs. Lena R. Grune*
 Date of death *Mon Apr 14-42* *8:20 P M*
 Cause of death *Ap of Tan Mrs Hunt Covid*
 Place of death *Waterville N.Y.*
 Residence *Waterville N.Y.*
 Age *76* Y'rs. *—* Mo's. *18* Days *—*
 Weight *—* Height *—* ft. *—* in. Eyes *—*
 Funeral at *Dest*
 Date *—* 194 *—* M
 Account charged *Mrs. Lena Hunt*
 Address *Orinda Fla*
 Account guaranteed *—*
 Address *—*
 Embalming *Y Dressing* *35.00*
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *6-3-4 Doe* *185.00*
 Casket with Copper Lin. *✓*
 Style of Casket *Cot 12-9*
 No. of Casket *1391- Shiner*
 Outside Box *R-9*
 Shipping Case or Vault *✓*
 Handles *Cot 12-9*
 Pillow Set *for H*
 Name Plate *✓*
 Cemetery *Dest*
 Section *—* Lot *—*

I Other Graves



X Grave on this date

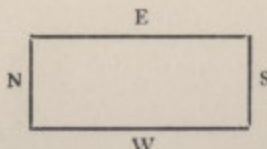
Cremation *—*
 Urn *Burial at La Fayette N.Y.*
 Single Grave *La Fayette N.Y.*
 Opening and Closing Grave *—*
 Body Shipped to *Syracuse N.Y.*
 R. R. Ticket *—*
 Cash advanced *R.R. - 44.00* *88.10*
 Autos *—*
 Telegram *—*
 Minister *—*
 Music *—*
 Casket Wagon *to R.R. 10.00 to Sta 5.00* *15.00*
 Physician *Dr. Puleon of Sanford*
 County or City Burial *—*
 Automobiles *—*
 Baggage or Express Train No. *92*

Sat Apr 18-42 *323.10*
New Escat

Carey Hand Funeral Home

Name of deceased Mrs Isabelle Wiscott
 Date of death Nov - 12 - 42 M
 Cause of death General apoplexy
 Place of death Res -
 Residence St Petersburg Fla
 Age 70 Y'rs 2 Mo's 23 Days
 Weight _____ Height _____ ft. _____ in Eyes _____
 Funeral at St Petersburg Fla
 Date _____ 194 _____ M
 Account charged Roach Coffins
 Address St Petersburg Fla
 Account guaranteed OK -
 Address _____
 Embalming Examination 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin Body buried
 Style of Casket ly. auto 2:30 P.M.
 No. of Casket Ord 4-15-42
 Outside Box _____
 Shipping Case or Vault Body
 Handles examined
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

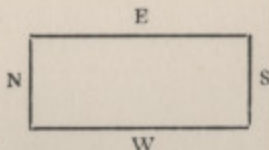
Cremation _____
 Urn wooden
 Single Grave will call for
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage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

37.50

Carey Hand Funeral Home *Coland*

Name of deceased *Art Alfred R Paine*
 Date of death *Wed Apr - 15 - 42* P.M.
 Cause of death _____
 Place of death *D. A. Base Hospital*
 Residence _____
 Age _____ Y'rs. _____ Mo's. _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged _____
 Address _____
 Account guaranteed _____
 Address _____
 Embalming *Yes*
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-3* *Gr. Oak*
 Casket with Copper Lin. ☒
 Style of Casket *Oct. H. Cap*
 No. of Casket *1972* _____
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *West* _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation *Body Posted here*
 Urn *Then placed over*
 Single Grave *X Stake & String*
 Opening and Closing Grave *X Complete*
 Body Shipped to *and ship*
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon *(2)*
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. *8*

100.00

Carey Hand Funeral Home

Name of deceased *Mrs. Margaret Best*
 Date of death *Wed. Apr-15-42 6:15 P.M.*
 Cause of death *Cerebral Hemorrhage*
 Place of death *Nursing Home Fairbanks Ave*
 Residence *126- E. Klug Ave Olando*
 Age *75* Y'rs. *3* Mo's. *17* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Sat Apr 18 1942* *2:00* P.M.
 Account charged *Lincoln Out Ford*
 Address *Olando Fla*
 Account guaranteed *Payments*
 Address _____
 Embalming *J. Dressing* 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *Am*
 Casket with Copper Lin. _____
 Style of Casket *Det-6-3 5x6x2* 40.00
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery *Cremation*
 Section _____ Lot _____

I Other Graves E

 N S

 X Grave on this date W

Cremation *Body Cremated* 50.00
 Urn *Lin-4-24-42*
 Single Grave _____
 Opening and Closing Grave *will call for*
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Rev Lindsey M. Haur*
 Music _____
 Casket Wagon _____
 Physician *Dr. Lynn*
 County or City Burial _____
 Automobiles *B*
 Baggage or Express Train No. _____

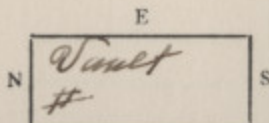
Mr. Robinson Jr
Dr Phillips Jr
OK Alex
Mrs. Best was residing in
Florida for 40-ya

125.00

Carey Hand Funeral Home

Name of deceased Archibald W. Taggart
 Date of death Apr. 15 10:30 P.M.
 Cause of death _____
 Place of death Residence
 Residence Lynnman Ave. Winter Park Fla.
 Age 74 Yrs. 6 Mo's. 12 Days
 Weight 170 Height 5 ft. 9 in. Eyes _____
 Funeral at C. Chapel
 Date Sunday Apr. 19 1942 5 P.M.
 Account charged Mrs. Wm. Taggart
 Address Winter Park Lynnman Ave. Fla.
 Account guaranteed Estate
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓ 75.00
 Casket 6-3-Gr. Maple
 Casket with Copper Lin. ✓
 Style of Casket See H. Cap.
 No. of Casket 72 Tampa 50.00
 Outside Box Reg. Lined
 Shipping Case or Vault ✓
 Handles Exp.
 Pillow Set yes
 Name Plate ✓
 Cemetery Vault
 Section _____ Lot _____

I Other Graves



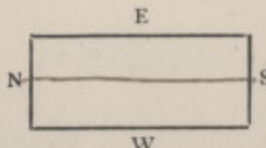
X Grave on this date

Cremation Shp. about June 1st
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev. Wyatt
 Music Organ
 Casket Wagon (2) 10.00
 Physician Dr. Ramsey
 County or City Burial _____
 Automobiles ✓
 Baggage or Express Train No. 170.00

Curry Hand Funeral Home

Name of deceased Mary C. Parrish
 Date of death April 16 3:30 a. M.
 Cause of death _____
 Place of death Residence
 Residence 1021 New Hampshire Ave
 Age 56 Y'rs 4 Mo's 19 Days
 Weight 135 Height 5 ft 4 in. Eyes _____
 Funeral at Chapel
 Date Sat Apr 18 1942 4 P M
 Account charged Insurance
 Address Mr. C. Parrish Son
 Account guaranteed 1021 New Hampshire
 Address _____
 Embalming Yes
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 Br Case
 Casket with Copper Lin. ✓
 Style of Casket Exp. H Case
 No. of Casket 72 Tampa
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes
 Name Plate _____
 Cemetery Greenwood
 Section J W 1/2- Lot 125

I Other Graves



X Grave on this date

Cremation P.O. Par 5.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister A. Fred Turner
 Music Organ
 Casket Wagon _____ 5.00
 Physician Dr. Mallory
 County or City Burial _____
 Automobiles 5.15 15.00
 Baggage or Express Train No. _____

750.00

Carey Hand Funeral Home

Name of deceased *Sgt Sgt Harvey C Allen*
 Date of death *Thurs Apr - 16 - 42* *A M*
 Cause of death *Thrombosis. Atrial of Coronary*
 Place of death *Islands A Base*
 Residence *630 Malloy St - Islands*
 Age *54* Y'rs *7* Mo's *18* Days
 Weight *150* Height *5* ft *10* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Sat April 18 1942* *3 P M*
 Account charged *U.S. Government*
 Address *Islands*
 Account guaranteed *Contract*
 Address *Islands*
 Embalming *Yes* *35.00*
 Robe, Suit, Dress *Yes*
 Underwear and Hosiery *Yes*
 Casket *1/2 Grey cloth* *55.00*
 Casket with Copper Lin. *Yes*
 Style of Casket *Reg.*
 No. of Casket *1*
 Outside Box *Reg.*
 Shipping Case or Vault *Yes*
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate *Yes*
 Cemetery *Islands*
 Section *1* Lot *1*
 I Other Graves *Yes*
 X Grave on this date *Yes*
 Cremation *Yes*
 Urn *Yes*
 Single Grave *Yes*
 Opening and Closing Grave *Yes*
 Body Shipped to *Jefferson Barrade*
 R. R. Ticket *Yes*
 Cash advanced *Saturday 1:35 a.m.*
 Autos *April 19 - 42*
 Telegram *Yes*
 Minister *Yes*
 Music *(2)* *10.00*
 Casket Wagon *Yes*
 Physician *Capt C Franka Peni*
 County or City Burial *Yes*
 Automobiles *Yes*
 Baggage or Express Train No. *Yes*

100.00