

12-12-1942

Memoranda Book 155: Carey Hand Funeral Home records, December 12, 1942 to January 31, 1943

Carey Hand Funeral Home

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

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

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

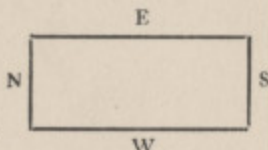
Recommended Citation

Carey Hand Funeral Home, "Memoranda Book 155: Carey Hand Funeral Home records, December 12, 1942 to January 31, 1943" (1942). *Carey Hand Funeral Home Records*. 155.
<https://stars.library.ucf.edu/cfm-ch-records/155>

Carey Hand Funeral Home

Name of deceased John A. Hendry
 Date of death Dec 11 194 M
 Cause of death Pul. T. B.
 Place of death State, D. B. Snyder
 Residence West Brookfield
 Age 36 Y'rs 2 Mo's 1 Days
 Weight 85 Height 5 ft. 10 in. Eyes Blue
 Funeral at Home
 Date Dec 11 194 M
 Account charged Mrs. John A. Hendry
 Address West Brookfield
 Account guaranteed Cash
 Address West Brookfield
 Embalming Cremation 50.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket C. H. & Son Chicago 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
 Urn wooden
 Single Grave
 Opening and Closing Grave Body
 Body Shipped to Cremated
 R. R. Ticket 8-AM 12-13-42
 Cash advanced
 Autos Express to Mrs. Hendry
 Telegram West Brookfield
 Minister
 Music
 Casket Wagon
 Physician at West Brookfield
 County or City Burial
 Automobiles
 Baggage or Express Train No.

75.00

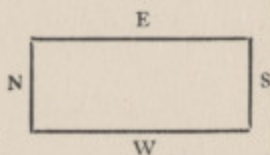
Carey Hand Funeral Home

Closed

Name of deceased Edgar S. Smith
 Date of death Dec 12-47 A. M.
 Cause of death Cerebral Hemorrhage
 Place of death County Home
 Residence 510 N. South St. Orlando Fla
 Age 73 - Y'rs. Mo's. Days
 Weight. Height. ft. in. Eyes.
 Funeral at Grave Side
 Date 194 P. M.
 Account charged County
 Address
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3 Case
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery County Home
 Section Lot

14.50

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 Dr. Mason
 County or City Burial
 Automobiles
 Baggage or Express Train No.

14.50

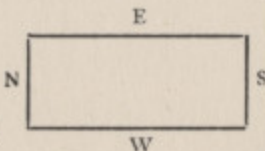
Carey Hand Funeral Home

Colored

Name of deceased G. W. Horn
 Date of death Dec 13 1942 3:30a M
 Cause of death _____
 Place of death Fort Christmas
 Residence Fort Christmas
 Age 68 Y'rs. Mo's. Days.
 Weight _____ Height _____ ft. in. Eyes _____
 Funeral at Fort Christmas Fla
 Date Dec 13 1942 P.M
 Account charged Moody Turfentine Co.
 Address Wenahatchee Fla.
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Coffin 6-3
 Casket with Copper Lin. _____
 Style of Casket Eq. T. T. 7
 No. of Casket 4. 20
 Outside Box R. 23
 Shipping Case or Vault _____
 Handles small
 Pillow Set _____
 Name Plate _____
 Cemetery Nascona Fla
 Section _____ Lot _____

15.00

I Other Graves



X Grave on this date

Cremation Bought Casket and
 Urn don't have own
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Colored-
 Music _____
 Casket Wagon _____
 Physician Dr. Hankins
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

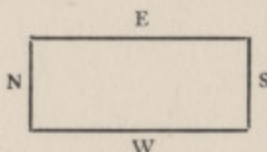
15.00

Aug. Nelson Lumber Co.

Carey Hand Funeral Home

Name of deceased Ewell Edward Crawford
 Date of death Dec 13 1942 M
 Cause of death Crushed Auto accident
 Place of death South of Winter Haven
 Residence Winter Garden Fla.
 Age 28 Y's 6 Mo's 11 Days
 Weight 150 Height 5 ft. 11 in. Eyes W. Garden
 Funeral at Baptist Church
 Date Tues Dec 15 1942 4 P.M
 Account charged Mrs Ewell E. Crawford
 Address Winter Garden Fla
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6 x 3 Sil Black 195.00
 Casket with Copper Lin. Yes
 Style of Casket Set 1/2 - C
 No. of Casket 1927-1/2 - C
 Outside Box Reg
 Shipping Case or Vault Consent by Family
 Handles Ext -
 Pillow Set Yes -
 Name Plate Yes
 Cemetery Winter Garden
 Section _____ Lot _____

I Other Graves



X Grave on this date

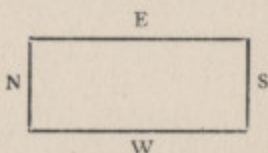
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave Testate 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced Hou & Smith 50.00
 Autos _____
 Telegram _____
 Minister At Winter Garden
 Music _____
 Casket Wagon 70 - W. Headden 25.00
 Physician _____
 County or City Burial _____
 Automobiles 5 x 5 15.00
 Baggage or Express Train No. _____

Killed auto accident
 Set on fire
 Winter Garden
 or by cash 300.00
 50.00
 250.00

Carey Hand Funeral Home

Name of deceased Anna E. Jones Palmer
 Date of death Dec 11 E 42 M
 Cause of death Carcinoma Med. Astinal
 Place of death Leeland, Fla
 Residence Leeland, Fla
 Age 67 Y's 3 Mo's 3 Days
 Weight 125 Height 5 ft 8 in. Eyes
 Funeral at Carey Hand Chapel
 Date Sunday Dec 13 1942 5 P. M
 Account charged Allen Summerhill
 Address Leeland Fla
 Account guaranteed Check
 Address
 Embalming
 Robe, Suit, Dress Estimation 37.50
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket Body draped
 No. of Casket 1 by Auto 4:45 P.M.
 Outside Box Sunday Dec 13-42
 Shipping Case or Vault
 Handles
 Pillow Set Body Cremated
 Name Plate 8 A.M. - Monday
 Cemetery Dec 14-42
 Section Lot

I Other Graves



X Grave on this date

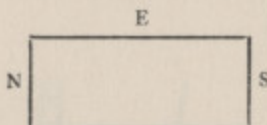
Cremation ashes expressed to
 Urn John S. Traylor
 Single Grave 117 W. Highway
 Opening and Closing Grave Leeland Fla
 Body Shipped to
 R. R. Ticket Allen & Summerhill
 Cash advanced Leeland Fla
 Autos
 Telegram S. W. Auxiliary 2nd -
 Minister Chapel 5 P.M.
 Music Organ
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased *John C. H. Siemer*
 Date of death *Sun. Dec. 13-42* H.M.
 Cause of death *Res.*
 Place of death *Res.*
 Residence *Vineland Rd - Deland. Rt-3* Box 12
 Age *19* Yrs. *11* Mo's. *4* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date _____ 194 _____ M
 Account charged *C. H. Siemer*
 Address *Deland Rt-3 Box 12*
 Account guaranteed _____
 Address _____
 Embalming *Yes* 85.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *5-0. H. R.* 57.50
 Casket with Copper Lin. _____
 Style of Casket *Set H. R.*
 No. of Casket *103 - Tampa*
 Outside Box *Reg*
 Shipping Case or Vault _____
 Handles *Short*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Lake Hill*
 Section _____ Lot _____

I Other Graves



X Grave on this date

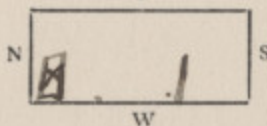
Cremation *Auto no dig*
 Urn _____
 Single Grave _____
 Opening and Closing Grave *T. & H.* 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon *(1) Johnson* 5.00
 Physician *Dr. Johnson*
 County or City Burial _____
 Automobiles *S. & S.* 15.00
 Baggage or Express Train No. _____

127.50

Carey Hand Funeral Home

Name of deceased *Mrs. Sophie Jacobson*
 Date of death *Dec. 14, 1942* *5-15 A. M.*
 Cause of death *Coronary Occlusion*
 Place of death *Res - Brown St. Duland*
 Residence *210 - N. Brown St. Duland*
 Age *67* Yrs *8* Mo's *22* Days
 Weight *140* Height *5* ft *10* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Wed. Dec 16, 1942* *11 A. M.*
 Account charged *Christ. M. Jackson*
 Address *Lake View Flt*
 Account guaranteed *insurance*
 Address *...*
 Embalming *Yes* *35.00*
 Robe, Suit, Dress *...*
 Underwear and Hose *...*
 Casket *4-3- Sil. Plush* *195.00*
 Casket with Copper Lin. *...*
 Style of Casket *Oct. 12-2*
 No. of Casket *1937-Blue*
 Outside Box *...*
 Shipping Case or Vault *Concrete* *60.00*
 Handles *Ext.*
 Pillow Set *Yes*
 Name Plate *...*
 Cemetery *H. Greenwood*
 Section *H.* Lot *234*

I Other Graves



X Grave on this date

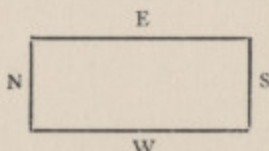
Cremation *...*
 Urn *...*
 Single Grave *...*
 Opening and Closing Grave *Yes* *15.00*
 Body Shipped to *P.B.C.* *5.00*
 R. R. Ticket *Car Inn* *5.00*
 Cash advanced *...*
 Autos *...*
 Telegram *...*
 Minister *Rev. A. Fred Turner*
 Music *...* *5.00*
 Casket Wagon *1*
 Physician *Dr. Mowbray*
 County or City Burial *...*
 Automobiles *3 v. 3* *15.00*
 Baggage or Express Train No. *...*

335.00

Carry Hand Funeral Home

Name of deceased Robert Edmund And
 Date of death Dec 10-42 M
 Cause of death Auto accident
 Place of death Delaware
 Residence Delaware
 Age 14 Y'rs. 3 Mo's. 2 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged Sam Pyle
 Address Wala - Wala -
 Account guaranteed ok
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Walt H
 Casket with Copper Liner Body max 8
 Style of Casket 10 30 A.M. by
 No. of Casket Auto -
 Outside Box _____
 Shipping Case or Vault Body
 Handles Operated 8 A.M.
 Pillow Set Nov 12-15 42
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

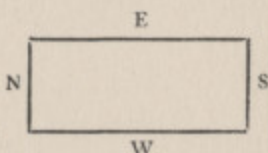
Cremation _____
 Urn wooden
 Single Grave Express to Sam Pyle
 Opening and Closing Grave _____
 Body Shipped to Funeral Home
 R. R. Ticket Wala - Wala
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles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

37.50

Carey Hand Funeral Home

Name of deceased Col. Charles S. Bullock
 Date of death Mon Dec. 14-42 1-40 P. M
 Cause of death Symphysal aneurysm
 Place of death Res -
 Residence 32 E. Yale -
 Age 75 Y'rs. 9 Mo's. 1 Days
 Weight 160 Height 5 ft. 9 in. Eyes
 Funeral at Chapel
 Date Thurs 12-17- 1942 11:15 A M
 Account charged Mrs Charles S. Bullock
 Address
 Account guaranteed Estate
 Address
 Embalming + Dressing 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3 in. Cloth 320.00
 Casket with Copper Lin.
 Style of Casket R. Cu. Slab
 No. of Casket 4118 Shrine
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext -
 Pillow Set Yes
 Name Plate
 Cemetery Arlington Nat Cemetery
 Section Lot

I Other Graves



X Grave on this date

Cremation

Urn

Single Grave Arlington Nat

Opening and Closing Grave Cemetery

Body Shipped to St. Marys Ave

R. R. Ticket 1-3091 1-4081

Cash advanced

Autos

Telegram

Minister A Fred Turner

Music Organ

Casket Wagon (2)

Physician D. M. Egan

County or City Burial

Automobiles

Baggage or Express Train No. 92

Thurs Dec 17-42

71.72
3.75
3.68

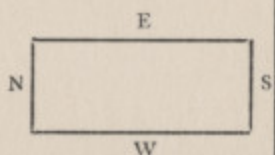
10.00

444.15

Carey Hand Funeral Home

Name of deceased Susie M. M. Cardy
 Date of death Dec 6 1942
 Cause of death Cardio Vascular Renal
 Place of death Lakeland Fla
 Residence Detroit Mich
 Age 68 Yrs 6 Mo's 25 Days
 Weight 110 Height 5 ft 4 in. Eyes Blue
 Funeral at Lakeland Fla
 Date Dec 15 1942 M
 Account charged Gentry-Morrison F. H.
 Address Lakeland Fla
 Account guaranteed Check
 Address _____
 Embalming Cremation
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived
 No. of Casket Tuesday 5 P.M.
 Outside Box Dec 15 1942
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body cremated
 Name Plate Wed 8 A.M.
 Cemetery Dec 16 - 42
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation Ashes expressed to -
 Urn Dr. Joseph Vance
 Single Grave Presbyterian
 Opening and Closing Grave Church
 Body Shipped to 39 Edmund Place
 R. R. Ticket Detroit, Mich
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

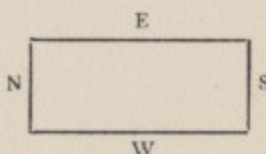
3750

3750

Carey Hand Funeral Home

Name of deceased St. Joseph B English
 Date of death Dec 10 62 42 AM
 Cause of death air plane crash
 Place of death 5-M.E. of Stewart Point Calif
 Residence Mt Verde
 Age 25 Yrs 1 Mo's 24 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at church Mt Verde
 Date Wed Dec - 14 1942 3 P.M
 Account charged R. A. English
 Address Mt Verde, Fla
 Account guaranteed yes
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3- Oct 11 cop. by birth
 Casket with Copper Lin. Wagon
 Style of Casket 4 sided P.O. &
 No. of Casket English at home
 Outside Box _____
 Shipping Case or Vault to mount 60.00
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Mt Verde
 Section _____ Lot _____

I Other Graves



X Grave on this date

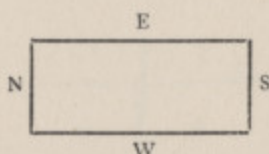
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave Trute 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister at Mt Verde
 Music _____
 Casket Wagon (1) 5.00
 Physician Vernon Silvershield
 County or City Burial Santa Rosa
 Automobiles S & S Calif 15.00
 Baggage or Express Train No. _____

Body committed on a casket # 89 95.00
 Date Dec 15-42

Carry Hand Funeral Home

Name of deceased John N. Ratigan Jr.
 Date of death Dec 16 1942 9 A. M.
 Cause of death Acute Pericarditis Edema.
 Place of death Residence
 Residence 1401 E. Amelia Ave
 Age 1 Yrs 1 Mo's 26 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Catholic Church
 Date Dec 18 1942 9 A. M.
 Account charged John N. Ratigan Sr.
 Address 1401 E. Amelia Ave
 Account guaranteed _____
 Address _____
 Embalming Yes
 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 Oak Minister
 Single Grave _____
 Opening and Closing Grave 4.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Father Bishop
 Music _____
 Casket Wagon 12
 Physician Dr. Allen Jones
 County or City Burial _____
 Automobiles Cloud Pak
 Baggage or Express Train No. _____

35.00
 37.50
 39.00

5.00
 10.00

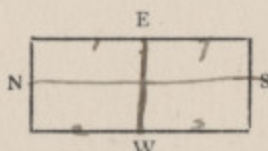
5.00
 5.00

99.00
 97.50
 auto- 3 5.00
 102.50

Carey Hand Funeral Home

Name of deceased Baby Jack Victor Hart
 Date of death Dec 16 9:30a. M
 Cause of death Branch Pneumonia
 Place of death C. F. N.
 Residence Chuluota Fla.
 Age 3 Yrs 12 Mo's 12 Days
 Weight 15 Height 3 ft 10 in. Eyes Blue
 Funeral at Gravestone
 Date Friday Dec 18 194 2 20 M
 Account charged Pinckney Hart
 Address Chuluota, Fla.
 Account guaranteed _____
 Address _____
 Embalming Yes 25. 00
 Robe, Suit, Dress Yes
 Underwear and Hose Yes
 Casket 2-6-10 28. 50
 Casket with Copper Lin. Yes
 Style of Casket Set 107
 No. of Casket 103 Tampa
 Outside Box Yes
 Shipping Case or Vault _____
 Handles Small
 Pillow Set Yes
 Name Plate _____
 Cemetery Gravestone
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation Burial Lot
 Urn 2 and 3- Blk 33 25. 00
 Single Grave _____
 Opening and Closing Grave 11 etc 10. 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev. Sorrow
 Music _____
 Casket Wagon (1) 5. 00
 Physician Dr. Allen Jones
 County or City Burial _____
 Automobiles Clord Sedan 5. 00
 Baggage or Express Train No. 2

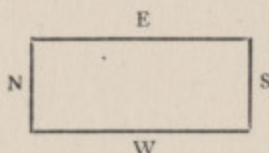
108.50

Carey Hand Funeral Home

Name of deceased Sam Collins Jr.
 Date of death Dec 16 1942 2:30 P.M.
 Cause of death Pulmonary T. B.
 Place of death State T. B. Sanatorium
 Residence Key West, Fla.
 Age 43 Y'rs 2 Mo's 13 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Key West, Fla.
 Date Dec 17 1942 2 P.M.
 Account charged Sam Collins Sr.
 Address Key West, Fla.
 Account guaranteed Carey Hand Funeral Home
 Address Key West, Fla.
 Embalming Yes
 Robe, Suit, Dress Black Robe
 Underwear and Hose _____
 Casket 4-3-12 in with
 Casket with Copper Lin. Yes
 Style of Casket Open Top
 No. of Casket H. M.
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Not
 Pillow Set _____
 Name Plate _____
 Cemetery Key West, Fla.
 Section _____ Lot _____

35.00
 10.00
 1.00
 30.00

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced Express to Key West
 Autos _____
 Telegram (2) 50
 Minister _____
 Music _____
 Casket Wagon (2)
 Physician Dr. John A. Kelch
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 9

40.42
 1.00
 10.00

R. B. L. O'Connell
carey Key West

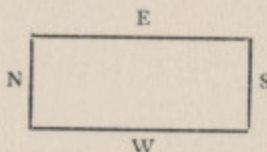
47.42

Carey Hand Funeral Home

Colored

Name of deceased Gussie Butlers
 Date of death Dec 16 194 4:30 PM
 Cause of death
 Place of death Camp at Christmas
 Residence
 Age 26 Y'rs. Mo's. Days.
 Weight Height ft. in. Eyes.
 Funeral at
 Date 194 M
 Account charged Moody Funeral Home Co
 Address Murahotie Fla
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3 Case 15.00
 Casket with Copper Lin.
 Style of Casket Spr at M
 No. of Casket
 Outside Box Reg
 Shipping Case or Vault Bought
 Handles Can Done here
 Pillow Set can up and
 Name Plate filed they can
 Cemetery Permit
 Section Lot

I Other Graves



X Grave on this date

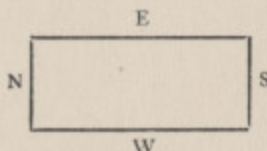
Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician Dr. Harrison
 County or City Burial
 Automobiles
 Baggage or Express Train No.

15.00

Carey Hand Funeral Home

Name of deceased *Harry Smaman*
 Date of death *Wed. Dec. - 16 - 42* P.M.
 Cause of death *Coronary Occlusion*
 Place of death *Greenmount Apt 41 306*
 Residence *Oil City Penn*
 Age..... Y's..... Mo's..... Days.....
 Weight..... Height..... ft..... in. Eyes.....
 Funeral at *Oil City*
 Date..... 194..... M
 Account charged *Mrs. H. B. Smaman*
 Address *Oil City Penn*
 Account guaranteed.....
 Address.....
 Embalming *& Dress* 35.00
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *4-B 3 1/2 x 6 1/2 - Oak* 385.00
 Casket with Copper Lin. *✓*
 Style of Casket *R. Ca State*
 No. of Casket *8108*
 Outside Box *Reg*
 Shipping Case or Vault *✓*
 Handles *Ext Heavy Padded*
 Pillow Set *Yes*
 Name Plate *✓*
 Cemetery *Oil City*
 Section..... Lot.....

I Other Graves



X Grave on this date

Cremation *Cremation* ~~50.00~~
 Urn.....
 Single Grave.....
 Opening and Closing Grave..... 3.10
 Body Shipped to *Oil City Penn*
 R. R. Ticket *1-43.78 148.16 11.32* 103.27
 Cash advanced *Tax 3.10* ~~8.10~~
 Autos.....
 Telegram *Del Body to Res* ~~5.00~~
 Minister.....
 Music..... 10.00
 Casket Wagon *2* ~~15.00~~
 Physician *Dr. Green*
 County or City Burial..... ~~15.00~~
 Automobiles *S & S K Penn*
 Baggage or Express Train No. *92*

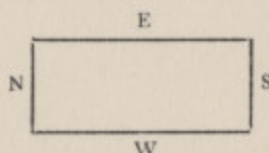
Dec 12-18-42

536.37

Carey Hand Funeral Home

Name of deceased *Miss Annie M. Smith*
 Date of death *Dec - 17 - 42* *4:55 P.M.*
 Cause of death *Basal Ganglia Indecarilia*
 Place of death *W. H. S.*
 Residence *Winter Garden*
 Age *29* - Y'rs *5* Mo's *25* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Central Baptist Church W. H. S.*
 Date *Fri Dec 18* 194*2* *3 P. M.*
 Account charged *A. M. Smith*
 Address *Winter Garden Fla*
 Account guaranteed *insurance*
 Address _____
 Embalming *+ Dress* *35.00*
 Robe, Suit, Dress *Blue Velvet* *12.50*
 Underwear and Hose _____
 Casket *6-3* *2* *100.00*
 Casket with Copper Lin. _____
 Style of Casket *Del H. Cap.*
 No. of Casket *1922* *Tampa*
 Outside Box _____
 Shipping Case or Vault *Reg Family*
 Handles *Ext*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Winter Garden*
 Section _____ Lot _____

I Other Graves



X Grave on this date

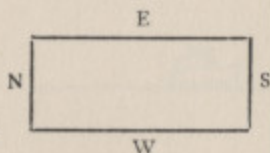
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave *Del Bx etc* *15.00*
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Rev. Puffer*
 Music *By Church*
 Casket Wagon *1* *5.00*
 Physician _____
 County or City Burial _____
 Automobiles *S. & S* *15.00*
 Baggage or Express Train No. *8*

187.50

Curry Hand Funeral Home

Name of deceased *Ethel Adeline Murchie*
 Date of death *Thurs - Dec 17-42* P. M.
 Cause of death *acute myocardial infarction*
 Place of death *Res* *chronic heart disease*
 Residence *Winter Park Fla*
 Age *59* Y'rs *4* Mo's *2* Days
 Weight *145* Height *5* ft *6* in. Eyes *Blue*
 Funeral at *at Res - (Private)*
 Date *Fri Dec-19-* 1942 P. M.
 Account charged *Mr Guy Murchie*
 Address *Winter Park*
 Account guaranteed _____
 Address _____
 Embalming *Yes* *35.00*
 Robe, Suit, Dress *✓*
 Underwear and Hosiery *✓*
 Casket *6-3 in Oak Cth.* *365.00*
 Casket with Copper Lin. *✓*
 Style of Casket *State*
 No. of Casket *Shirley 7218*
 Outside Box *✓*
 Shipping Case or Vault *✓*
 Handles *Ext -*
 Pillow Set *Yes -*
 Name Plate *✓*
 Cemetery *Cremation*
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation *Cremation* *50.00*
 Urn *Grange Urn #* *60.00*
 Single Grave *Body Cremated*
 Opening and Closing Grave *P-F H*
 Body Shipped to *Dec 12-30-42*
 R. R. Ticket *will call*
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Private Sew at Res -*
 Music _____
 Casket Wagon *Q* *10.00*
 Physician _____
 County or City Burial _____
 Automobiles *St S & R 10* *16.00*
 Baggage or Express Train No. *10*

535.00

Curry Hand Funeral Home

Name of deceased *Mrs. Lula Golden*
 Date of death *Thurs Dec 17-42* M
 Cause of death _____
 Place of death *Res.*
 Residence *Marion*
 Age *63* Yrs. Mo's _____ Days _____
 Weight *270* Height *5 ft. 7* in. Eyes _____
 Funeral at *Chapel*
 Date *Sun Dec-20* 1942 *3 P. M*

Account charged _____
 Address _____
 Account guaranteed *Estate*
 Address _____

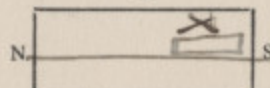
Embalming *Yes* *35.00*
 Robe, Suit, Dress *✓*
 Underwear and Hosiery *✓*

Casket *6-6 Metal* *450.00*
 Casket with Copper Lin. *Inner*
 Style of Casket *State H. C*

No. of Casket *Graham Temple*
 Outside Box *✓*
 Shipping Case or Vault *Cement* *60.00*

Handles *Ext*
 Pillow Set *yes*
 Name Plate *✓*
 Cemetery *Greenwood*

Section *S E 1/2* Lot *62*
Head of Grave North

I Other Graves _____


X Grave on this date _____
 Cremation *Can R. C.*
 Urn *Can inner*

Single Grave _____
 Opening and Closing Grave *± Tent* *15.00*

Body Shipped to _____
 R. R. Ticket *Home & Res & Return* *15.00*
 Cash advanced _____

Autos _____
 Telegram _____
 Minister *A. Fred Turner* *5.00*

Music *yes* *5.00*
 Casket Wagon *42* *5.00*
 Physician *Dr. Redding*

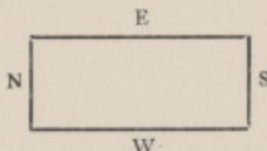
County or City Burial _____
 Automobiles *815* & *Super* *15.00*
 Baggage or Express Train No. *2*

600.00

Carey Hand Funeral Home *Clord*

Name of deceased *James, Server*
 Date of death *Dec 18-42* *A* M
 Cause of death *Chronic myocarditis*
 Place of death *County Home*
 Residence _____
 Age *63* Y'rs *4* Mo's *2* Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Home Side-*
 Date *Oct 12-19* 194 *2* *A* 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 *149*
 Outside Box *Reg*
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery *County Home*
 Section _____ Lot _____

I Other Graves



X Grave on this date

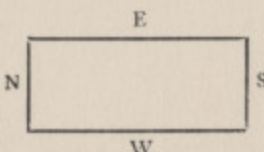
Cremation *Admitted to Home 1-20-42*
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician *Dr*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

14.50

Carey Hand Funeral Home

Name of deceased *Mrs. Olive M. Conant*
 Date of death *Dec - 18* *11:50 P. M*
 Cause of death *Cerebral Thrombosis*
 Place of death *Holloway House*
 Residence *116 McKee*
 Age *65* Y'rs. Mo's. Days.
 Weight. Height. ft. in. Eyes.
 Funeral at *Deaf*
 Date *194* M
 Account charged *Estimate M. O'Connor*
 Address *918 Valon Dr Orlando*
 Account guaranteed *Estate*
 Address *W. H. Ellis Attorney*
 Embalming *Yes*
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *C-3- Sil in Plush*
 Casket with Copper Lin. ☒
 Style of Casket *Get 1/2 - G*
 No. of Casket *1427- Shrine*
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *Ed*
 Pillow Set *Yes w*
 Name Plate ☒
 Cemetery *West*
 Section. Lot.

I Other Graves



X Grave on this date

Cremation *Funial*
 Urn *Jefferson Va*
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Richmond Va*
 R. R. Ticket *5412*
 Cash advanced *Express 163 Tax*
 Autos
 Telegram *-1-*
 Minister
 Music
 Casket Wagon *(2) Gray*
 Physician *Dr. G. H. Gray*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *76*

35.00

200.00

55.75

1.65

10.00

Set night Dec 19-42

30040

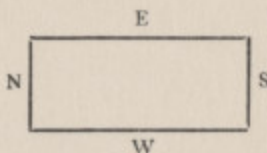
30040

30145

Carey Hand Funeral Home

Name of deceased *Dr. James A. Redding*
 Date of death *Dec. 19* *1-11* *M*
 Cause of death
 Place of death *Res. Lockhart*
 Residence *Spantonburg S.C.*
 Age *60* Y'rs *5* Mo's *2* Days
 Weight *200* Height *5* ft. *10* in. Eyes
 Funeral at *Sent -*
 Date *194* *M*
 Account charged *J. P. Williamson*
 Address *Spantonburg S.C.*
 Account guaranteed *ok -*
 Address
 Embalming *+ D* *35.00*
 Robe, Suit, Dress *✓*
 Underwear and Hose
 Casket *4-3- Ex. Bur. 8x* *175.00*
 Casket with Copper Lin.
 Style of Casket *Box A.C.*
 No. of Casket *1312 Shure*
 Outside Box *R-9*
 Shipping Case or Vault *✓*
 Handles *Ext -*
 Pillow Set *yes -*
 Name Plate *✓*
 Cemetery *Sent X*
 Section Lot

I Other Graves



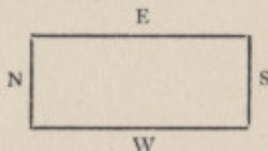
X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Spantonburg S.C.*
 R. R. Ticket
 Cash advanced *Exp. 3464 Tax 110* *37.74*
 Autos
 Telegram *1- N Bob F.D.*
 Minister
 Music
 Casket Wagon *(2)* *10.00*
 Physician *Dr. J. A. Redding*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *92*
Sum 12-20-42 *252.74*

Carey Hand Funeral Home

Name of deceased Baby Spheer
 Date of death Dec 19 / 2-11 M
 Cause of death Still Born
 Place of death Res
 Residence Taft
 Age Yrs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Grave side
 Date 19 M
 Account charged O. H. Spheer
 Address Taft Ave
 Account guaranteed
 Address
 Embalming Case of Body 51.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 2-0-11-2- 12.50
 Casket with Copper Lin.
 Style of Casket Reg
 No. of Casket H. M.
 Outside Box Reg
 Shipping Case or Vault
 Handles Reg
 Pillow Set
 Name Plate
 Cemetery Oak Ridge
 Section Lot

I Other Graves



X Grave on this date

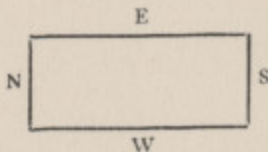
Cremation
 Urn
 Single Grave Auto 5.00
 Opening and Closing Grave T. & etc 10.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician Dr. Rivers
 County or City Burial
 Automobiles
 Baggage or Express Train No.

32.50

Carey Hand Funeral Home

Name of deceased Mrs. Minnie H. Green
 Date of death Oct. 19-42 4:30 P. M.
 Cause of death Hypertension Cardio. Renal
 Place of death Home of Mrs. Norquist
 Residence 415 S. Cole St.
 Age 83 Y'rs 8 Mo's 4 Days
 Weight 90 Height 5 ft. 5 in. Eyes
 Funeral at Chapel
 Date Sun Dec 20 1942 2 P. M.
 Account charged Le Roy Norquist
 Address Deland, Fla.
 Account guaranteed Payments
 Address
 Embalming Yes
 Robe, Suit, Dress White Velvet
 Underwear and Hose
 Casket 6-3 Dr. Birch
 Casket with Copper Lin. Yes
 Style of Casket Oct 1/2 - C.
 No. of Casket 1937 Shiner
 Outside Box Yes
 Shipping Case or Vault Yes
 Handles Ext.
 Pillow Set Yes
 Name Plate
 Cemetery West
 Section Lot

I Other Graves



X Grave on this date

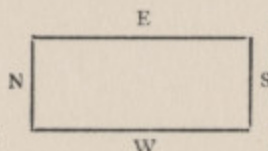
Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to Alto S. Co.
 R. R. Ticket
 Cash advanced Cadillac Co. to S.C. 10 00
 Autos
 Telegram
 Minister A. Fred Turner
 Music Yes
 Casket Wagon
 Physician Dr. J. A. Redding
 County or City Burial
 Automobiles
 Baggage or Express Train No.

\$150.00

Carey Hand Funeral Home

Name of deceased *Wm. G. Patterson*
 Date of death *Dec 16 - 42* M
 Cause of death *Not given on Permit*
 Place of death _____
 Residence _____
 Age *79* Y'rs *6* Mo's *27* Days _____
 Weight *130* Height *5* ft. *6* in. Eyes *Blue*
 Funeral at *Koon G. Home*
 Date _____ 19*4* M
 Account charged *Koon G. Home*
 Address *Capoa Fla*
 Account guaranteed *OK*
 Address _____
 Embalming *Cremated* 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *Body Guard*
 Casket with Copper Lin. *11:30 A.M.*
 Style of Casket *Set-12-19-42*
 No. of Casket _____
 Outside Box *Body Cremated*
 Shipping Case or Vault *8-A.M.*
 Handles *Nov-12-20-42*
 Pillow Set _____
 Name Plate *Express to Koon*
 Cemetery *G. Home*
 Section *Capoa Fla* Lot _____

I Other Graves



X Grave on this date

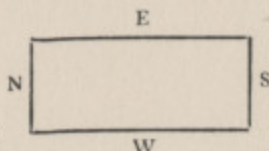
Cremation _____
 Urn *wooden*
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or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

37.50

Carey Hand Funeral Home

Name of deceased Infant Mason
 Date of death Sun 12-20-42 A M
 Cause of death Prematurity
 Place of death D. J. H.
 Residence Winters Garden
 Age 1 Y'rs. 1 Mo's. 194 Days 1
 Weight 1 Height 1 ft. 1 in. Eyes 1
 Funeral at 1
 Date 1 194 M
 Account charged Mrs. Margaret A. Mason
 Address Winters Garden Fla
 Account guaranteed 1
 Address 1
 Embalming Complete 5.00
 Robe, Suit, Dress 1
 Underwear and Hose 1
 Casket 1
 Casket with Copper Lin. 1
 Style of Casket Body Complete
 No. of Casket 1
 Outside Box 1
 Shipping Case or Vault 1
 Handles 1
 Pillow Set 1
 Name Plate 1
 Cemetery 1
 Section 1 Lot 1

I Other Graves



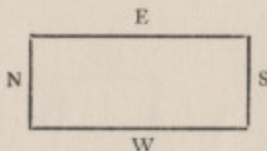
X Grave on this date

Cremation 1
 Urn 1
 Single Grave 1
 Opening and Closing Grave 1
 Body Shipped to 1
 R. R. Ticket 1
 Cash advanced 1
 Autos 1
 Telegram 1
 Minister 1
 Music 1
 Casket Wagon 1
 Physician 1
 County or City Burial 1
 Automobiles 1
 Baggage or Express Train No. 1

Carey Hand Funeral Home

Name of deceased Samuel P. Murphy
 Date of death Sun Dec 20-42 M.P.
 Cause of death Respiratory obstruction
 Place of death 1305 E. 1st Ave
 Residence Res - 1305 E 1st Ave
 Age 78 Yrs 3 Mo's 2 Days
 Weight 135 Height 5 ft 6 in. Eyes
 Funeral at Grave Side
 Date Sun Dec 22 1942 4 P. M
 Account charged Wm Allen Attorney
 Address E. 1st St
 Account guaranteed Estate
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-6-6 Birch 205.00
 Casket with Copper Lin.
 Style of Casket R. C. 2 Stile
 No. of Casket 48 - Tampa
 Outside Box Reg
 Shipping Case or Vault
 Handles Yes
 Pillow Set
 Name Plate
 Cemetery Oviedo
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave Trade 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Rev Y F. A. M.
 Music 5.00
 Casket Wagon 1
 Physician Dr. Meyer
 County or City Burial
 Automobiles Cad - 15.00
 Baggage or Express Train No. 8

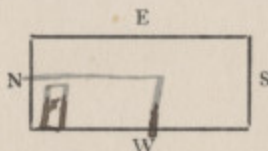
275.00

Music Service
 at Grave Side

Carry Hand Funeral Home

Name of deceased Paul a. Bonon
 Date of death Mon Dec 20-42 M P.
 Cause of death _____
 Place of death Res -
 Residence 1834 Girda Terrace
 Age 53 Yrs 6 Mo's 26 Days
 Weight 145 Height 5 ft 4 in. Eyes _____
 Funeral at Chapel
 Date Tues Dec 22, 1942 4 P. M
 Account charged Mrs. Luma Bonon
 Address 1834 Girda Terrace
 Account guaranteed Insurance
 Address _____
 Embalming & Dress 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-6-42 Cloth 256.00
 Casket with Copper Lin. _____
 Style of Casket R. Ar Slot
 No. of Casket 7-48-Tampa
 Outside Box Red
 Shipping Case or Vault _____
 Handles yes
 Pillow Set yes
 Name Plate _____
 Cemetery Greenwood
 Section 5 N.W. 1/4 Lot 48

I Other Graves



X Grave on this date

Cremation	<u>P.B. Car</u>	<u>5.00</u>
Urn	<u>1- H.P.B. Car</u>	<u>5.00</u>
Single Grave	<u>Car Mgr</u>	<u>5.00</u>
Opening and Closing Grave	<u>Tate</u>	<u>15.00</u>
Body Shipped to		
R. R. Ticket		
Cash advanced	<u>Burial Lot</u>	<u>68.75</u>
Autos		
Telegram		
Minister		
Music	<u>yes</u>	
Casket Wagon	<u>11</u>	<u>5.00</u>
Physician	<u>Dr. Knoles</u>	
County or City Burial		
Automobiles	<u>8 x 5 -</u>	<u>15.00</u>
Baggage or Express Train No.		
		<u>403.75</u>

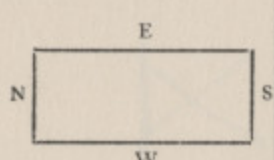
Carey Hand Funeral Home

Name of deceased JASPER NEWTON DEAN
 Date of death May 21-42 P.M.
 Cause of death Secondary Recurrence
 Place of death Gila Park
 Residence Morganston West Va
 Age 83 Y'rs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Deat
 Date 194 M
 Account charged J. H. Bourmoy
 Address Chesment 940-
 Account guaranteed Estate
 Address
 Embalming & Dress 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket new 1st 35.00
 Casket with Copper Lin. Express
 Style of Casket Monarch & Stahl
 No. of Casket 442 Cask at
 Outside Box Morganston
 Shipping Case or Vault West Va
 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 Shipped to
 R. R. Ticket Body Cremation
 Cash advanced 9-VA M Two
 Autos Dec 22-42
 Telegram
 Minister
 Music
 Casket Wagon (1) 5.00
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No. 725.00

Carey Hand Funeral Home

Name of deceased *Mr. Wm. M. Loung*
 Date of death *Wed Dec 23-42* M.P.
 Cause of death *Pneumonia*
 Place of death *Sick apt N. York*
 Residence *Ellsworth Maine*
 Age *80* Yrs *3* Mo's *20* Days
 Weight *180* Height *6* ft *-* in. Eyes
 Funeral at *Orat*
 Date *194* M
 Account charged *Mrs W. M. Loung*
 Address *Ellsworth Maine*
 Account guaranteed *OK*
 Address *& Dress*
 Embalming *35.00*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *6 x 10 R.C. Stab M. City 200.00*
 Casket with Copper Lin.
 Style of Casket *R.C. Stab*
 No. of Casket *44 Tampa*
 Outside Box *R.C.*
 Shipping Case or Vault
 Handles *Ext*
 Pillow Set *yes 10.00*
 Name plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Ellsworth Maine*
 R. R. Ticket *Y.P.* 197.33
 Cash advanced
 Autos
 Telegram
 Minister
 Music *ext* 5.00
 Casket Wagon *2* 10.00
 Physician *Dr. H. H. H. H.*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *92* \$

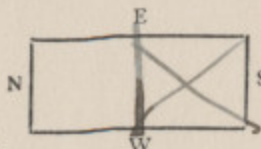
447.33
447.33

Carry Hand Funeral Home

Name of deceased *Mr. Henry Sikes*
 Date of death *Fri. Dec - 25-43 3:50 P.M.*
 Cause of death *Pneumonia*
 Place of death *Res -*
 Residence *W. Side Park. Orlando - Rt 2*
 Age *80* Y'rs. *2* Mo's. *11* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Sun Dec 27- 1943 3 P. M.*
 Account charged *Mrs. H. N. Sikes*
 Address *Orlando Rt. 2 -*
 Account guaranteed *Cash -*
 Address _____
 Embalming *Yes* 35.00
 Robe, Suit, Dress ☒
 Underwear and Hosiery ☒
 Casket *6-8-14 Maple* 110.00
 Casket with Copper Lin. ☒
 Style of Casket *Ext. H. C.*
 No. of Casket *1972 -*
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *Ext -*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Epiphany*
 Section *A* *N 1/2* Lot *A*

I Other Graves

X Grave on this date



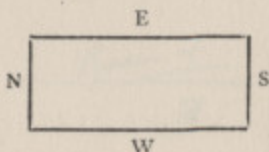
Cremation *Burial Lot* 12.50
 Urn *None* 5.00
 Single Grave _____ 15.00
 Opening and Closing Grave *7+ etc*
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Rev Mann*
 Music _____ 5.00
 Casket Wagon *(1)*
 Physician _____
 County or City Burial _____ 10.00
 Automobiles *S. Y. S.*
 Baggage or Express Train No. _____

197.50

Carey Hand Funeral Home

Name of deceased Wm G. Mc Caffey
 Date of death Dec - 25 - 42 M
 Cause of death Not given on Permit
 Place of death Omaha
 Residence _____
 Age 76 Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at M. E. Church Conway
 Date Wed - 12 - 30 - 194 2 P. M
 Account charged _____
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hosiery _____
 Casket 6-4 Oct. H. Cap. Emb. P.
 Casket with Copper Lin. _____
 Style of Casket Oct. H. E.
 No. of Casket _____
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set Yes
 Name Plate _____
 Cemetery Conway
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave 4.00 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Owens
 Music Boy Church 5.00
 Casket Wagon (1)
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 15.00

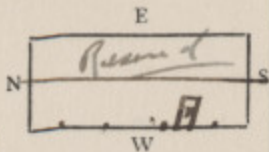
Arrived on S.A.R. 122 Sat 35.00
 122 = 24.00 = 4.00

Carey Hand Funeral Home

Name of deceased *Gladys Burkhalter*
 Date of death *Sat Dec 26-42* *10 AM*
 Cause of death *Septicemic acute Colitis*
 Place of death *St. Jackson*
 Residence *2137 - St. Jackson*
 Age *6* Yrs. Mo's Days
 Weight Height ft. in. Eyes
 Funeral at *Chapel*
 Date *Tuesday Jan 29 1943* *4 PM*
 Account charged *Gladys Burkhalter*
 Address *2137 St. Jackson*
 Account guaranteed *Inc. -*
 Address
 Embalming *Yes* *35.00*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *4-0. H. R.* *57.50*
 Casket with Copper Lin.
 Style of Casket *Oct. H. R.*
 No. of Casket *103- Tampa*
 Outside Box
 Shipping Case or Vault *current* *35.00*
 Handles *R-69-*
 Pillow Set *yes*
 Name Plate
 Cemetery *Greenwood*
 Section *S. W 1/2 -* Lot *14*

I Other Graves

X Grave on this date

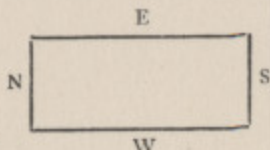


Cremation *auto* *5.00*
 Urn
 Single Grave
 Opening and Closing Grave *T. & etc* *15.00*
 Body Shipped to
 R. R. Ticket
 Cash advanced *Burial Lot* *62.50*
 Autos
 Telegram
 Minister
 Music *Organ*
 Casket Wagon
 Physician *Dr. Jones*
 County or City Burial
 Automobiles *Stearns* *15.00*
 Baggage or Express Train No. *B*
225.00

Carey Hand Funeral Home

Name of deceased Roscoe C. Livingston
 Date of death Dec. 26-42 P.M.
 Cause of death Hypertension Senile myocarditis
 Place of death Res -
 Residence 30-11- Westmoreland
 Age 65 Yrs. 1 Mo's. 11 Days.
 Weight 120 Height 5 ft. 7 in. Eyes
 Funeral at Chapel
 Date Thurs. Dec. 31, 1942 4 P.M.
 Account charged Mrs. Anna Livingston
 Address 30-11- Westmoreland
 Account guaranteed Insurance
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-2 Ex. Doe 145.00
 Casket with Copper Lin. ✓
 Style of Casket Get. H. Cof.
 No. of Casket 1311- Shiner
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext.
 Pillow Set yes
 Name Plate ✓
 Cemetery Greenwood
 Section B - Lot 68

I Other Graves



X Grave on this date

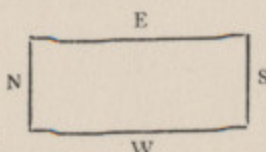
Cremation F. Par 5.00
 Urn P.B. Par 5.00
 Single Grave Min. Con. of 5.00
 Opening and Closing Grave ✓ 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Dean Johnson
 Music Organ 5.00
 Casket Wagon (1)
 Physician Dr. M. Andrews
 County or City Burial 15.00
 Automobiles S. & S
 Baggage or Express Train No. ✓

230.00

Carey Hand Funeral Home

Name of deceased *Mrs. Mary A. Masters*
 Date of death *Oct. 26, 1943* *5 P. M.*
 Cause of death *Pulmonary Edema Cerebral Hem.*
 Place of death *Kilgus Nursing Home*
 Residence *Trinloak Ave H. Park*
 Age *79* Y'rs *10* Mo's *6* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Home*
 Date _____ 194____ M
 Account charged *Carey H. Home*
 Address *St. Augustine*
 Account guaranteed _____
 Address _____
 Embalming *Y*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket *and Ser*
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn *Del Body to the*
 Single Grave *Carey H. Home*
 Opening and Closing Grave _____
 Body Shipped to *St. Augustine*
 R. R. Ticket *Sum Dec - 27 -*
 Cash advanced *by auto*
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon *(1)*
 Physician *Dr. Candell*
 County or City Burial _____
 Automobiles *Home & St. Augustine*
 Baggage or Express Train No. _____

35.00

5.00

5.00

50.00

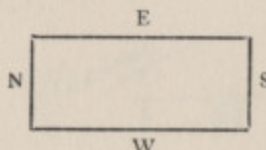
95.00

Carey Hand Funeral Home

Name of deceased *Ed. Monroe Hilleney*
 Date of death *Sat - Dec - 26 - 42 6:30 PM*
 Cause of death *Heart Failure*
 Place of death *Home 1415 Hilleney*
 Residence *1415 Hilleney*
 Age *62* Y'rs. *—* Mo's. *15* Days *—*
 Weight *—* Height *—* ft. *—* in. Eyes *—*
 Funeral at *Home*
 Date *—* 194 *—* M
 Account charged *Mrs. Ed. M. Hilleney*
 Address *1415 Hilleney*
 Account guaranteed *Estate*
 Address *—*
 Embalming *Yes*
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *4-8 in 61th*
 Casket with Copper Lin. *—*
 Style of Casket *6 in state 1/2 c*
 No. of Casket *2638 1/2 S*
 Outside Box *Reg*
 Shipping Case or Vault *—*
 Handles *Ext —*
 Pillow Set *yes —*
 Name Plate *—*
 Cemetery *Home*
 Section *—* Lot *—*

I Other Graves

X Grave on this date



Cremation *—*
 Urn *—*
 Single Grave *—*
 Opening and Closing Grave *—*
 Body Shipped to *Baltimore Md.*
 R. R. Ticket *—*
 Cash advanced *Cash Express*
 Autos *—*
 Telegram *2 Phone & Air*
 Minister *—*
 Music *—*
 Casket Wagon *21*
 Physician *Duckworth*
 County or City Burial *—*
 Automobiles *—*
 Baggage or Express Train No. *92*

35.00

350.00

72 74

3.50

10.00

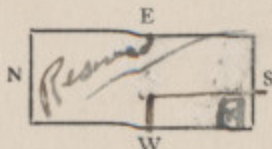
Sum - 12 - 27 - 42

471.24

Carey Hand Funeral Home

Name of deceased Tillie D. Carson
 Date of death Mon Dec. 28-42 6:51 M
 Cause of death Also myocarditis
 Place of death Res
 Residence 41- N. Garland St
 Age 48 Y'rs. 11 Mo's 28 Days
 Weight 180 Height 5 ft. 8 in. Eyes
 Funeral at Chapel
 Date Wed Dec 30 194 2 4:30 PM
 Account charged Miss Tillie D. Carson
 Address 41- N. Garland St
 Account guaranteed Insurance
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hosiery ✓
 Casket 6-8 in. Birch 320.00
 Casket with Copper Lin. ✓
 Style of Casket R. Co. State H. Co.
 No. of Casket 4118 Sham
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes
 Name Plate ✓
 Cemetery Greenwood
 Section I S. E 1/4 Lot 18

I Other Graves



X Grave on this date

Cremation P.O. Car 5.00
 Urn Can. Mini 5.00
 Single Grave
 Opening and Closing Grave etc 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced Burial 24 62.50
 Autos
 Telegram
 Minister Rev. Lee
 Music By Family
 Casket Wagon Ch 5.00
 Physician Dr. Redding
 County or City Burial
 Automobiles SPS 15.00
 Baggage or Express Train No.

\$ 62.50

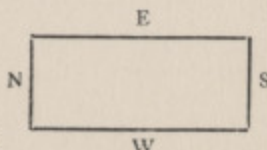
Cary Hand Funeral Home

Ans

Name of deceased *Ella Elmira Brighton*
 Date of death *Mon Dec 28-42* *8:15 A.M.*
 Cause of death *Pneumonia*
 Place of death *At Home*
 Residence *124 - Harvard*
 Age *66* Y's *4* Mo's *1* Days *1*
 Weight *145* Height *5 ft 3* in. Eyes *Blue*
 Funeral at *Funeral Home*
 Date *Dec* 194 *2* M
 Account charged *J. P. Neighbors*
 Address *134 - E. Harvard St*
 Account guaranteed *Insurance*
 Address *Insurance*
 Embalming *Yes*
 Robe, Suit, Dress *Silvest G.*
 Underwear and Hosiery *Yes*
 Casket *6-3- State Metal*
 Casket with Copper Lin. *Yes*
 Style of Casket *State H.C. & F.*
 No. of Casket *Garbo - Tampa*
 Outside Box *Reg -*
 Shipping Case or Vault *Yes*
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate *None*
 Cemetery *Yes*
 Section *Lot*

35.50
17.50
345.00

I Other Graves



X Grave on this date

3890
4275
 Cremation *4275*
 Urn *668*
 Single Grave *118*
 Opening and Closing Grave
 Body Shipped to *Cambridge Md*
 R. R. Ticket *R.R. & F.*
 Cash advanced
 Autos *Auto*
 Telegram *11*
 Minister *West*
 Music
 Casket Wagon *21*
 Physician *Dr. Sutcliffe*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *26*
Mon Night 12-28-42

131.09
5.00
1.17

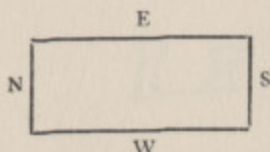
10.00

564.76

Carey Hand Funeral Home

Name of deceased J. J. Welch Powell
 Date of death Mon Dec 28-42 AM
 Cause of death O.H.
 Place of death Delanda St 2
 Residence Delanda St 2
 Age 24 Yrs 1 Mo's 7 Days
 Weight 182 Height 5 ft 10 in. Eyes
 Funeral at Chapel
 Date 194 M
 Account charged Mrs J. J. Powell
 Address Delanda St 2
 Account guaranteed Insurance
 Address 4000
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3-12 110.00
 Casket with Copper Lin. ✓
 Style of Casket Oct. 42
 No. of Casket 1972
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Yes
 Pillow Set Yes
 Name Plate ✓
 Cemetery Woodlawn
 Section 1 Lot 1

I Other Graves



X Grave on this date

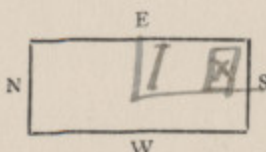
Cremation Yes 5.00
 Urn Yes 5.00
 Single Grave 15.00
 Opening and Closing Grave 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Rev Cole
 Music Yes 5.00
 Casket Wagon 11 15.00
 Physician Dr. M. Egan
 County or City Burial
 Automobiles S + S
 Baggage or Express Train No.

190.00

Carey Hand Funeral Home

Name of deceased *Joseph Janiski*
 Date of death *Mon Dec 30-42* AM
 Cause of death *Heart Failure*
 Place of death *Ref*
 Residence *Denny Hwy City Limits*
 Age *77* Yrs. *9* Mo's. *9* Days
 Weight *170* Height *5* ft. *10* in. Eyes *Blue*
 Funeral at *St. James Church*
 Date *Sat Jan 2* 1943 *99* M
 Account charged *James Grodowski*
 Address *3* *Deland Fla.*
 Account guaranteed *Estate*
 Address *3*
 Embalming *Yes* *35.00*
 Robe, Suit, Dress *Yes*
 Underwear and Hose *Yes*
 Casket *6-3* *Yes* *100.00*
 Casket with Copper Lin. *Yes*
 Style of Casket *Box H. Oak*
 No. of Casket *1972* *Tampa*
 Outside Box *Yes*
 Shipping Case or Vault *Yes*
 Handles *Ext*
 Pillow Set *Yes*
 Name Plate *Embossed*
 Cemetery *Greenwood*
 Section *S. E. 1/4* Lot *66*

I Other Graves



X Grave on this date

Cremation *For Min* *5.00*
 Urn *Cor. P.B.* *5.00*
 Single Grave *Yes*
 Opening and Closing Grave *Yes* *15.00*
 Body Shipped to *Yes*
 R. R. Ticket *Yes*
 Cash advanced *Yes*
 Autos *Yes*
 Telegram *Yes*
 Minister *Father Gishol*
 Music *By Church* *5.00*
 Casket Wagon *(1)*
 Physician *Duckworth*
 County or City Burial *Yes*
 Automobiles *Yes* *15.00*
 Baggage or Express Train No. *Yes*

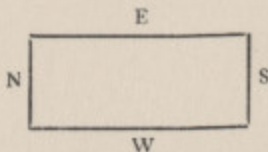
80.00

was found dead had in his home
been dead several hr

Curry Hand Funeral Home

Name of deceased *Mrs Emily Manthel*
 Date of death *Dec 29-41* *10 A.M.*
 Cause of death
 Place of death *Wilbur N. Home*
 Residence *Dear Lake Lockhart*
 Age *60* Y'rs *8* Mo's *9* Days
 Weight *140* Height *5 ft. 2 in.* Eyes *Blue*
 Funeral at *Chapel*
 Date *Dec 30-42* *194* *11 A.M.*
 Account charged *M. Herman Manthel*
 Address *Wauwatosa, Wis.*
 Account guaranteed *Cash*
 Address
 Embalming *& Dressing*
 Robe, Suit, Dress *Saver*
 Underwear and Hose *81¢ 1/2*
 Casket
 Casket with Copper Lin.
 Style of Casket
 No. of Casket *Body Cremated*
 Outside Box *Thurs 8 A.M.*
 Shipping Case or Vault *Dec 31-42*
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

Cremation *Asker expressed to* *50.00*
 Urn *M. Herman Manthel*
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister *E. Lee Smith* *5.00*
 Music
 Casket Wagon
 Physician *Dr. Ryan*
 County or City Burial
 Automobiles
 Baggage or Express Train No.

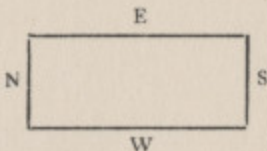
\$122.25

Cary Hand Funeral Home

Name of deceased Mrs. Mary Alice Hunt
 Date of death Thurs Dec 31-42 P.M.
 Cause of death _____
 Place of death 415 - Boone St -
 Residence 415 Boone St
 Age 74 Yrs. 4 Mo's. 10 Days _____
 Weight 145 Height 5 ft. 6 in. Eyes _____
 Funeral at Central
 Date Sun 3-11-43 1943 20 M
 Account charged Mont Hunt
 Address Home at Redding Mass
 Account guaranteed _____

Address _____
 Embalming + Dress 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3- + 5 75.00
 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

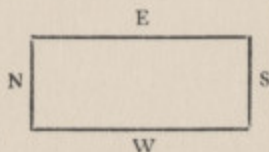
Cremation Cremation 50.00
 Urn Marble 35.00
 Single Grave Body Cremated
 Opening and Closing Grave 8-A.M.
 Body Shipped to Mon 9-4-43
 R. R. Ticket _____
 Cash advanced Express
 Autos 1
 Telegram Redding Mass
 Minister Rev Fred Turner
 Music _____
 Casket Wagon (1) 5.00
 Physician Dr. W. C. Egan
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. B

200.00

Carry Hand Funeral Home

Name of deceased *Henry Scott*
 Date of death *Thurs. Dec. 31-42* P.M.
 Cause of death _____
 Place of death *Res*
 Residence *Worcester*
 Age *67* Y'rs *11* Mo's *22* Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Grave Side*
 Date *Thurs. Jan 3-1943* *3 P* M
 Account charged *M. J. Scott*
 Address _____
 Account guaranteed *Catote*
 Address _____
 Embalming *Yes*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3 in. for*
 Casket with Copper Lin. *Set - W. C*
 Style of Casket _____
 No. of Casket *1311- S -*
 Outside Box *Reg*
 Shipping Case or Vault _____
 Handles *Set*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Green*
 Section _____ Lot _____

I Other Graves



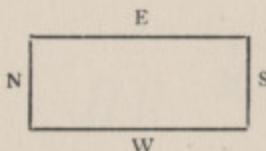
X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave *15.00*
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram *50- L.S. Phone 255* *3.05*
 Minister _____
 Music _____
 Casket Wagon *(1)* *5.00*
 Physician _____
 County or City Burial _____
 Automobiles *15.00*
 Baggage or Express Train No. *8*
229.00
225.00

Carey Hand Funeral Home

Name of deceased James T. Tanell
 Date of death Thurs - Dec - 31 - 42 P.M.
 Cause of death Lympho Sarcoma
 Place of death Winderhurst Fla.
 Residence Chicago Ill.
 Age 57 Y'rs 1 Mo's 26 Days
 Weight 150 Height 5 ft. 7 in. Eyes
 Funeral at Chapel
 Date Sat - Jan - 2 - 1943 2 P. M.
 Account charged Mrs. J. T. Tanell
 Address Winderhurst Fla.
 Account guaranteed
 Address
 Embalming 4 Dues 35.00
 Robe, Suit, Dress
 Underwear and Hosiery
 Casket 6-3-6 S. & S. S. Co. Chicago 25.00
 Casket with Copper Lin.
 Style of Casket 1311 -
 No. of Casket 02 H P
 Outside Box
 Shipping Case or Vault
 Handles Ext -
 Pillow Set yes
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

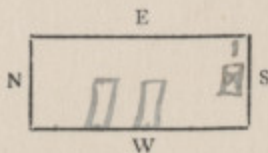
Cremation Cremation 50.00
 Urn
 Single Grave Body cremated 8-AM
 Opening and Closing Grave Jan Jan
 Body Shipped to 3-1943
 R. R. Ticket Ashes Scotland
 Cash advanced Greenwood Cemetery
 Autos Jan - 6-43 - 3.15
 Telegram
 Minister Dean Johnson
 Music ✓ 5.00
 Casket Wagon (1) Lawrence
 Physician Dr. Lawrence
 County or City Burial
 Automobiles
 Baggage or Express Train No.

168.15

Carry Hand Funeral Home

Name of deceased Baby Mrs James Jr
 Date of death 12-31-42 P.M.
 Cause of death Aggr
 Place of death Aggr
 Residence 713 1/2 - Arlington Ave
 Age 1 Y's 3 Mo's 4 Days
 Weight Height ft. in. Eyes
 Funeral at Chapel
 Date Sun Jan 3 1942 3 P.M.
 Account charged Mrs H. James
 Address 713 1/2 - Arlington Ave
 Account guaranteed
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 3-0 1/2 x 2 39.50
 Casket with Copper Lin. ✓
 Style of Casket Pat. H. Top
 No. of Casket 108 - Tampa
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Reg
 Pillow Set Yes
 Name Plate Yes
 Cemetery Greenwood
 Section 2 Lot 108

I Other Graves



X Grave on this date

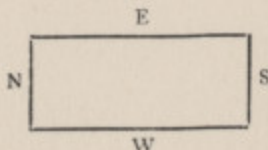
Cremation Closed Car 5.00
 Urn Car Mini 5.00
 Single Grave
 Opening and Closing Grave 4 etc 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced T.L. Robinson Pictone 3.00
 Autos
 Telegram
 Minister Sennaway
 Music Organ 5.00
 Casket Wagon
 Physician Dr Jones
 County or City Burial
 Automobiles Closed Car 5.00
 Baggage or Express Train No.

112.50

Carey Hand Funeral Home

Name of deceased Joseph John Bevins
 Date of death Dec 31 1943 M
 Cause of death not given in Form
 Place of death Rich
 Residence St. Petersburg
 Age 76 Y'rs 1 Mo's 13 Days
 Weight 120 Height 5 ft. 10 in. Eyes
 Funeral at
 Date 194 M
 Account charged R. J. Cooney T.A.
 Address St. Petersburg
 Account guaranteed OK
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. Body and
 Style of Casket by appt. 1-PM
 No. of Casket Set - 1-2-43
 Outside Box
 Shipping Case or Vault Body
 Handles Cremated 8-PM
 Pillow Set Jan 1-3-43
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

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

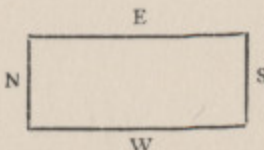
37.50

Carey Hand Funeral Home

Name of deceased Mrs. Fred L. Bates
 Date of death Dec 30 - 42 M
 Cause of death _____
 Place of death Res -
 Residence Haines City
 Age 76 Yrs 3 Mo's 13 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Haines City
 Date _____ 194 _____ M
 Account charged Carey Hand
 Address Haines City
 Account guaranteed Yes
 Address _____
 Embalming Cremation
 Robe, Suit, Dress 30.00
 Underwear and Hose Marble Lin
 Casket Marble
 Casket with Copper Lin. Inner
 Style of Casket State N. Cap.
 No. of Casket _____
 Outside Box ✓
 Shipping Case or Vault _____
 Handles Yes
 Pillow Set Yes
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

37.50
 22.00

I Other Graves



X Grave on this date

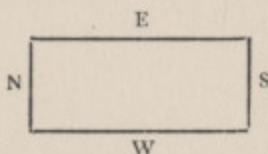
Cremation _____
 Urn Marble
 Single Grave Body arrived by
 Opening and Closing Grave Auto
 Body Shipped to 120 P. M.
 R. R. Ticket Sat - 1-2-43
 Cash advanced Body cremated
 Autos 8-A.M. Sun 1-3-43
 Telegram _____
 Minister Miss P. J.
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

64.50

Carey Hand Funeral Home

Name of deceased Mrs. Bessie L. Hutchins
 Date of death Jan - 4 - 42 8:45 A.M.
 Cause of death Cancer
 Place of death At Home
 Residence Alhambra, Cal. #2-
 Age 52 Y'rs 6' Mo's 3 Days
 Weight _____ Height _____ ft. in. Eyes _____
 Funeral at Baptist Church
 Date Wed Jan 6 1942 4 P.M.
 Account charged John Hutchins
 Address HUTCHINS
 Account guaranteed Payor's
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress _____
 Underwear and Hosiery _____
 Casket 6-3-12 Oak Plank 20.00
 Casket with Copper Lin. _____
 Style of Casket White & Oak
 No. of Casket _____
 Outside Box Yes
 Shipping Case or Vault Cement 60.00
 Handles Yes
 Pillow Set _____
 Name Plate _____
 Cemetery Woodlawn
 Section _____ Lot _____

I Other Graves



X Grave on this date

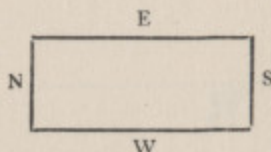
Cremation Yes 5.00
 Urn Earthen 5.00
 Single Grave Closed 5.00
 Opening and Closing Grave Yes 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Paul T. Tucker
 Music Boy's Church 5.00
 Casket Wagon Cl. M. Dixon
 Physician Dr. M. Dixon
 County or City Burial _____
 Automobiles Yes 15.00
 Baggage or Express Train No. _____

Total 345.00
245.00

Carey Hand Funeral Home

Name of deceased Thos H Jones
 Date of death Mon Jan 4-43 P.M.
 Cause of death _____
 Place of death Nursing Home
 Residence 2500 Richard Ave Orlando
 Age 87 Yrs 3 Mo's 27 Days _____
 Weight 110 Height 5 ft. 7 in. Eyes _____
 Funeral at No Service
 Date _____ 194____ M____
 Account charged Thos R. Jones
 Address 630 W. Harding Ave Orlando
 Account guaranteed _____
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Surv Chg - 35.00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Cumtation
 Section _____ Lot _____

I Other Graves



X Grave on this date

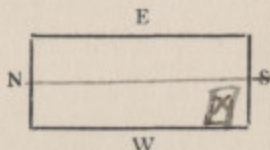
Cremation Cumtation 50.00
 Urn _____
 Single Grave Body cremated
 Opening and Closing Grave P-A 9m
 Body Shipped to Wed Jan 6-43
 R. R. Ticket _____
 Cash advanced will call for
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (11) 5.00
 Physician Dr. Redding
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

725.00

Carey Hand Funeral Home

Name of deceased *Mr. Clarence Gray Russell*
 Date of death *Tues. Jan 5-43* P. M.
 Cause of death *Explosion at Air Base East*
 Place of death *Jackson, Tenn. under C. -*
 Residence *P. O. Box 4 - Box 186 - 10*
 Age *20* Y'rs. *1* Mo's. *2* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Jan* 194*3* M
 Account charged *Mrs. C. G. Russell*
 Address *Page ave*
 Account guaranteed *Mr. Jackson*
 Address _____
 Embalming *Yes* 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *4-3 in. Maple* 65.00
 Casket with Copper Lin. _____
 Style of Casket *Open N. E*
 No. of Casket *2012-5*
 Outside Box *Reg*
 Shipping Case or Vault _____
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Greenwood*
 Section *18* *W 1/2* Lot *2*

I Other Graves



X Grave on this date

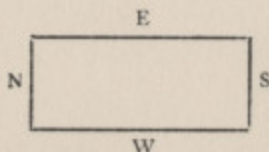
Cremation *Burial Lot* 20.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave *etc* 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Rev Louis Frank*
 Music _____
 Casket Wagon _____
 Physician *Duckworth*
 County or City Burial _____
 Automobiles *5* 15.00
 Baggage or Express Train No. _____ 150.00

wanted for Jackson Fire works Co
both hands & face are badly mangled
jaw broken & several bones in body

Carey Hand Funeral Home

Name of deceased Marion P. Gray
 Date of death Jan 6th 5:45 a.m.
 Cause of death Carcinoma of Cervix
 Place of death P. Y. N.
 Residence Montverde Fla.
 Age 53 Y'rs 8 Mo's 10 Days
 Weight 95 Height 5 ft. 6 in. Eyes Blue
 Funeral at Chapel - (Private)
 Date Friday Jan 8 1943 2:30 P.M.
 Account charged Ralph Gray
 Address Montverde Fla.
 Account guaranteed Insurance (John Hancock Co.)
 Address _____
 Embalming & Dressing _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-7 Silk Plush 1927 115.00
 Casket with Copper Lin. _____
 Style of Casket Body Cremated
 No. of Casket 82. In Suit
 Outside Box Jan 10 - 1943
 Shipping Case or Vault _____
 Handles Yes
 Pillow Set Yes
 Name Plate _____
 Cemetery Cremation
 Section _____ Lot _____

I Other Graves



X Grave on this date

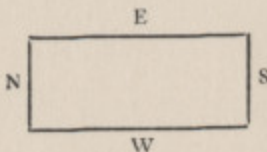
Cremation Will call for ashes 50.00
 Urn Cong M-29 50.00
 Single Grave Name & Set Eng. and
 Opening and Closing Grave _____
 Body Shipped to Body Cremated 8-A.M.
 R. R. Ticket at 9-9-43
 Cash advanced _____
 Autos Amb To Montverde 10.00
 Telegram _____
 Minister Rev. Friedman
 Music Friend
 Casket Wagon CI 5.00
 Physician Dr. Duncan M. Evans
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

215.00

Carey Hand Funeral Home

Name of deceased *Mrs. Theodore J. E. Laph*
 Date of death *Thurs Jan 7-43* A.M.
 Cause of death *Cerebral Thrombosis*
 Place of death *Orlando*
 Residence *Orlando*
 Age *55* Yrs. *—* Mo's *20* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel of the Cross*
 Date *Sunday Jan 10 1943* 4 P.M.
 Account charged *Wm. S. M. Hutchison*
 Address *Whitely Haven, Fla.*
 Account guaranteed *Estate & Insurance*
 Address _____
 Embalming *Yes* 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *1/2 Solid Blue* 200.00
 Casket with Copper Lin. _____
 Style of Casket *Oct 1/2 Couch*
 No. of Casket *1922* 6.00
 Outside Box *Carpeted*
 Shipping Case or Vault _____
 Handles *Yes*
 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 *Yes* 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos *Auto* 5.00
 Telegram *W. Rev Austin*
 Minister _____
 Music _____
 Casket Wagon *Yes* 5.00
 Physician *Dr. S. Folsom*
 County or City Burial _____
 Automobiles *SIS* 15.00
 Baggage or Express Train No. *8*

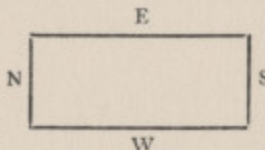
335.00

Carry Hand Funeral Home

Name of deceased J. B. Gilliam
 Date of death Wed Jan 8-43 9:30 AM
 Cause of death _____
 Place of death County Home
 Residence Winter Park
 Age 47 Yrs. 5 Mo's 8 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date _____ 194 _____ M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hosiery _____
 Casket 6-3 Case
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 1st
 Outside Box Reg -
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery County Home
 Section _____ Lot _____

14.50

I Other Graves



X Grave on this date

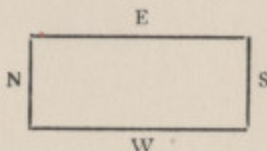
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician Dr. Moon
 County or City Burial _____
 Automobiles _____
 Baggage or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

14.50

Carey Hand Funeral Home

Name of deceased Burton & French
 Date of death Oct. 10 - 9 - 43 9.30 A.M.
 Cause of death Coronary Thrombosis
 Place of death County Home
 Residence Deland R.H.S.
 Age 76 Yrs 8 Mo's 24 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Home Side
 Date _____ 194 _____ M
 Account charged County
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3-Care 14.50
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery County Home
 Section _____ Lot _____

I Other Graves



X Grave on this date

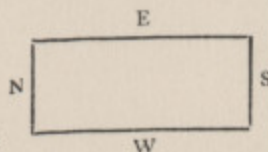
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician Dr. Moon
 County or City Burial _____
 Automobiles _____
 Baggage or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

14.50

Carey Hand Funeral Home

Name of deceased Harry M. Dunham
 Date of death Jan 6-43 M
 Cause of death Not given on Corrit
 Place of death St. Petersburg
 Residence St. Petersburg
 Age 71 Y'rs 4 Mo's 10 Days
 Weight 170 Height 5 ft 10 in. Eyes
 Funeral at St. Petersburg Fla
 Date 194 M
 Account charged R. G. Bookery
 Address St. Petersburg Fla
 Account guaranteed OK
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket None N.C.
 Casket with Copper Lin. Body covered
 Style of Casket by auto 3-P.M.
 No. of Casket Del-1-9-43-
 Outside Box
 Shipping Case or Vault Body Cremated
 Handles 8-A.M. Sun 1-10-43
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

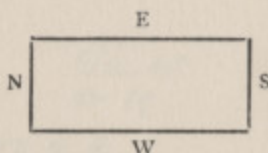
Cremation
 Urn wooden
 Single Grave Express Urn &
 Opening and Closing Grave
 Body Shipped Bookery T.H.
 R. R. Ticket St. Petersburg Fla
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased James H. Parker
 Date of death Mon. Jan 10-43 10:30 AM
 Cause of death Heart Disease
 Place of death Home
 Residence 9 Fairbank Ave H. Park
 Age 70 Yrs - Mo's 26 Days -
 Weight - Height - ft. - in. Eyes -
 Funeral at Grave Side
 Date Mon. Jan - 11 - 1943 4 P. M
 Account charged J. Holt Parker
 Address Winter Garden Rd one
 Account guaranteed Yes - Am
 Address -
 Embalming Yes 35 25.00
 Robe, Suit, Dress ✓
 Underwear and Hosiery ✓
 Casket 4-3-12 75.00
 Casket with Copper Lin. ✓
 Style of Casket Dict 2
 No. of Casket -
 Outside Box Yes
 Shipping Case or Vault -
 Handles Yes
 Pillow Set Yes
 Name Plate -
 Cemetery Woodlawn
 Section 8 Lot -

I Other Graves



X Grave on this date

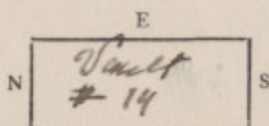
Cremation -
 Urn -
 Single Grave -
 Opening and Closing Grave 15.00
 Body Shipped to -
 R. R. Ticket -
 Cash advanced amb. fee 5.00
 Autos -
 Telegram -
 Minister Rev E. Lee Smith
 Music -
 Casket Wagon 11 5.00
 Physician -
 County or City Burial -
 Automobiles 3.00 15.00
 Baggage or Express Train No. 8

140.00

Carey Hand Funeral Home

Name of deceased Jim Caringer
 Date of death Sun Jan 10 1943 P.M.
 Cause of death Catastrophic Death
 Place of death 516 S. 1st St.
 Residence 516 S. 1st St.
 Age 55 Yrs. 8 Mo's 25 Days
 Weight 230 Height 5 ft. 7 in. Eyes Blue
 Funeral at Chapel
 Date Wed - Jan - 13 1943 4 P. M.
 Account charged Mrs. J. M. Caringer
 Address 516 S. 1st St.
 Account guaranteed Same & Estate
 Address 516 S. 1st St.
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-4 Metal Gr. Fin 425.00
 Casket with Copper Lin. Inner
 Style of Casket State N. Cap.
 No. of Casket Salmon
 Outside Box Reg. American & French 15.00
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes Tuffed - Gr -
 Name Plate Name & Date
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date 5:00 P.M. W

Cremation Body Placed in Vault
 Urn Ship. in May 1943
 Single Grave Mansion Ohio
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Dean Johnson
 Music Organ
 Casket Wagon (2) 10.00
 Physician _____
 County or City Burial _____
 Automobiles BB
 Baggage or Express Train No. 485.00

Carey Hand Funeral Home

Name of deceased Baby Westz
 Date of death Jan 13 1943 10:00 A.M.
 Cause of death _____
 Place of death Q. C. H.
 Residence 839 Floral Drive
 Age Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at No Service
 Date 1943 M
 Account charged Balt. Q. C. Westz
 Address 839 Floral Drive
 Account guaranteed Cash Albert Haupt
 Address 839 Floral Drive
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Cremation 5.00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box Body Cremated
 Shipping Case or Vault 8 a. m.
 Handles Thurs. Jan 14 1943
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

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

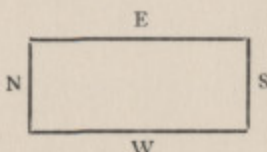
 Cremation Ashes Scattered in
 Urn Greenwood Cemetery
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister
 Music _____
 Casket Wagon _____
 Physician Dr. Brasin
 County or City Burial _____
 Automobiles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

\$ 5.00

Carry Hand Funeral Home

Name of deceased Charlotte W. Taylor
 Date of death Jan 13 6 PM
 Cause of death _____
 Place of death P. Y. N.
 Residence 436 N. Shine St
 Age 64 Yrs 6 Mo's 8 Days _____
 Weight 145 Height 5 Ft. 5 in. Eyes _____
 Funeral at Chapel
 Date Friday Jan 15 1943 11 AM
 Account charged F. W. Taylor
 Address 436 N. Shine St
 Account guaranteed Insurance
 Address _____
 Embalming Yes
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Open Chg
 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
 Urn wooden
 Single Grave Body cremated
 Opening and Closing Grave 8-AM
 Body Shipped to Oct 1-16-43
 R. R. Ticket _____
 Cash advanced will pay for
 Autos _____
 Telegram _____
 Minister Rev Lindsey M. Hair
 Music Organ
 Casket Wagon
 Physician Dr. Kirk
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

35.00

15.00

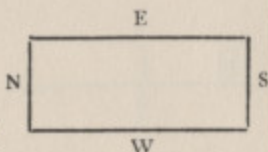
50.00

\$100.00

Carey Hand Funeral Home

Name of deceased *Thomas M. Jewell*
 Date of death *Jan 13 - 1943* A.M.
 Cause of death *Myocardial failure*
 Place of death *Residence*
 Residence *1019 Seville Place*
 Age *74* Y'rs *6* Mo's *10* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Friday Jan 15 - 1943* 4 P.M.
 Account charged *Thomas M. Jewell*
 Address *1019 Seville Place*
 Account guaranteed *Estate*
 Address _____
 Embalming & Dressing *35.00*
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket *6-3-3rd-Clth* *350.00*
 Casket with Copper Lin. ✓
 Style of Casket *R.C. State H. Cap.*
 No. of Casket *6008- Shaker*
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles *Ext. Oak O.S.*
 Pillow Set *Yes Taylor*
 Name Plate ✓
 Cemetery *Edenwathorpe*
 Section _____ Lot _____

I Other Graves



X Grave on this date

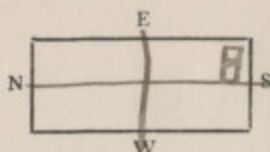
Cremation _____ *50.00*
 Urn *Marble* *42.50*
 Single Grave _____
 Opening and Closing Grave *Body*
 Body Shipped to _____ *Terminal 8-AM*
 R. R. Ticket *at Jan 16-43-*
 Cash advanced *Will call for*
 Autos *if left on my length of time*
 Telegram *3.00 per yr*
 Minister *Dean Johnson*
 Music _____
 Casket Wagon *4* *5.00*
 Physician *Dr. W. Malloy*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. *8*

482.50

Carey Hand Funeral Home

Name of deceased Edward Shank
 Date of death Jan 8 ^M
 Cause of death Central Pacemaker - Skull
 Place of death Hospital, Elizabeth H. J. Fraden
 Residence Winter Park Fla.
 Age 28 Yrs. 10 Mo's. 20 Days
 Weight 170 Height 5 ft. 8 in. Eyes
 Funeral at Graveside
 Date Thurs Jan 14 1943 30 M
 Account charged Wm Shank
 Address Winter Park Fla
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6/8 Grey Cloth
 Casket with Copper Lin. Body Arrives
 Style of Casket Med 12:05
 No. of Casket Jan 12-1943
 Outside Box Reg.
 Shipping Case or Vault
 Handles Ed -
 Pillow Set yes
 Name Plate
 Cemetery Winter Park.
 Section Lot

I Other Graves



X Grave on this date

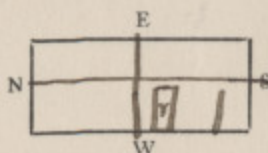
Cremation	
Urn	
Single Grave	
Opening and Closing Grave	<u>etc</u> 15.00
Body Shipped to	
R. R. Ticket	
Cash advanced	
Autos	
Telegram	
Minister	<u>Major Crank</u>
Music	<u>Military Service</u>
Casket Wagon	5.00
Physician	<u>At - Elizabeth H. J.</u>
County or City Burial	
Automobiles	<u>S & S</u> 15.00
Baggage or Express Train No.	

all done at Grave side 35.00
Maj Paul Brink
Alto
Firing Squad

Carey Hand Funeral Home

Name of deceased Annie Lee Kirby
 Date of death Jan 11 M
 Cause of death Leukemia
 Place of death Miami Fla
 Residence Orlando Fla
 Age 74 Y's Mo's Days 3
 Weight _____ Height _____ ft. in. Eyes _____
 Funeral at Chapel
 Date Thurs Jan 14 1943 5 P M
 Account charged Wm H. V. Starling
 Address Miami 55-10 N.W. 5th Ave
 Account guaranteed Cash
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/4 Grey Cloth
 Casket with Copper Lin. _____
 Style of Casket Ext. H. Cap
 No. of Casket _____
 Outside Box Reg
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Yls
 Name Plate _____
 Cemetery Greenwood
 Section A S W 14 Lot 96

I Other Graves



X Grave on this date

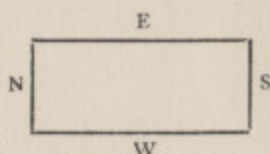
Cremation		
Urn	<u>Auto</u>	5.00
Single Grave		
Opening and Closing Grave	<u>etc</u>	15.00
Body Shipped to		
R. R. Ticket		
Cash advanced		
Autos		
Telegram		
Minister	<u>Rev Ray Humberly</u>	
Music		
Casket Wagon	<u>61</u>	5.00
Physician		
County or City Burial		
Automobiles	<u>SVS</u>	15.00
Baggage or Express Train No.		

40.00

Carey Hand Funeral Home

Name of deceased Helen E. Garlington
 Date of death Jan 13 1943 6:15 P. M.
 Cause of death Hypertensive Pneumonia
 Place of death Mobile Ala.
 Residence Mobile Ala.
 Age 74 Y'rs 2 Mo's 3 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at M. E. Church
 Date Friday Jan 15 1943 11 A. M.
 Account charged Mrs. W. H. Garlington
 Address Birmingham, Ala.
 Account guaranteed ✓ Insurance
 Address _____
 Embalming ✓ Dressing
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 4-3- Sil Plush
 Casket with Copper Lin. ✓
 Style of Casket Det 1/2-E
 No. of Casket 1927- Shiner
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext -
 Pillow Set yes -
 Name Plate _____
 Cemetery Woodlawn
 Section A 149 Lot 4, 5, 6

I Other Graves



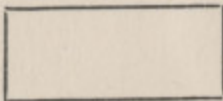
X Grave on this date

Cremation _____
 Urn Auto
 Single Grave _____
 Opening and Closing Grave etc
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev Austin
 Music _____
 Casket Wagon (1)
 Physician Dr. Blouner
 County or City Burial _____
 Automobiles SVS
 Baggage or Express Train No. #

277.19

Carey Hand Funeral Home

Name of deceased *Mrs. Melvina C. Elyston*
 Date of death *Jan 14* *A.M.*
 Cause of death *Long Hypertension*
 Place of death *Residence*
 Residence *Keystone Drive*
 Age *71* Y's *Mo's* *Days*
 Weight *225* Height *5* ft. *6* in. Eyes
 Funeral at *Int*
 Date *194* *M*
 Account charged *James Peters N.J.*
 Address *Wentworth*
 Account guaranteed *Note T. Clark*
 Address
 Embalming *Y. Duns* *35.00*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *6-6-XXX Se Do* *200.00*
 Casket with Copper Lin.
 Style of Casket *Ch. of Cal.*
 No. of Casket *S-1311- Shrin*
 Outside Box *N.Y.* *5.00*
 Shipping Case or Vault
 Handles *Int*
 Pillow Set *Yes*
 Name Plate
 Cemetery *Int*
 Section Lot

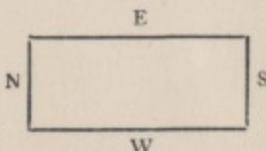
I Other Graves

 X Grave on this date

Cremation *Burial at*
 Urn *Freehold New Jersey*
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Wentworth N.J.*
 R. R. Ticket *3750 2670* *64.20*
 Cash advanced
 Autos
 Telegram
 Minister
 Music *10.00*
 Casket Wagon *2-*
 Physician *Dr. Redding*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *76*
Int Night Jan 16-43 *314.20*
in bank *194.20*
Note
50.00 Pa 9mo *200.00*

Carey Hand Funeral Home

Name of deceased *J. Wallace Duncan*
 Date of death *Sat Jan 16 - 6 P. M*
 Cause of death *Ag. Cerebral Infarct*
 Place of death *Phila. Pa.*
 Residence *Philadelphia*
 Age *83* Y'rs *6* Mo's *11* Days
 Weight *175* Height *5 ft 7 in* Eyes
 Funeral at *Chapel*
 Date *Mon Jan 18 1943* *5 P. M*
 Account charged *Mrs. Louise Duncan*
 Address *6235 Columbia Ave. Phila Pa*
 Account guaranteed
 Address
 Embalming *Yes* *35.00*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *4-2-1 in. Oak - C -* *425.00*
 Casket with Copper Lin.
 Style of Casket *R. C. Estate*
 No. of Casket *6008 - H Cofr*
 Outside Box *11-29*
 Shipping Case or Vault
 Handles *Ext. 9 in. Tin*
 Pillow Set *Yes* *Gray Toyland*
 Name Plate
 Cemetery *West*
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn *1-3- Amb den* *5.00*
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Milton Penn* *62.08*
 R. R. Ticket
 Cash advanced
 Autos
 Telegram *Mr. Kahn* *.99*
 Minister *Organ*
 Music *Organ* *10.00*
 Casket Wagon *2*
 Physician *Dr. W. Mallory*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *76*

Mon Night 1-18-43 *538.07*

-45.19

583.26

107.19

476.07

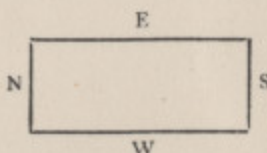
428.18

Del. E. Ramech F.D.
Milton Penn
Tax

Carey Hand Funeral Home

Name of deceased Mr. Edward E. Casper
 Date of death Oct - Jan 16 - 43 M
 Cause of death Res
 Place of death Res
 Residence 2102 Weber Ave
 Age 36 Yrs 9 Mo's 7 Days
 Weight 180 Height 5 ft. 9 in. Eyes
 Funeral at Chapel
 Date Jan 1943 M
 Account charged Mr. Edw. E. Casper
 Address 2102 Weber Ave
 Account guaranteed Yes
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress Blue Suits 18.00
 Underwear and Hose Yes
 Casket 6-6-Gr. E. Stone 235.00
 Casket with Copper Lin.
 Style of Casket R. Cor Stone
 No. of Casket 48 - Temple
 Outside Box Yes
 Shipping Case or Vault
 Handles Yes
 Pillow Set Yes
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

Cremation Auto C.B. 5.00
 Urn
 Single Grave
 Opening and Closing Grave 4 etc 15.00
 Body Shipped to
 R. R. Ticket Spokane & Co Station 5.00
 Cash advanced
 Autos
 Telegram
 Minister
 Music 5.00
 Casket Wagon 11 5.00
 Physician Dr. Larson
 County or City Burial 15.00
 Automobiles S & S
 Baggage or Express Train No.

338.00

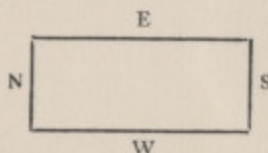
250.00

88.00

Carey Hand Funeral Home

Name of deceased *Mrs Viola Rudd*
 Date of death *Mon - Jan - 17 - 12:05 AM*
 Cause of death *C. G. H.*
 Place of death *C. G. H.*
 Residence *1231 Mt Vernon*
 Age *65* Y'rs. *5* Mo's. *22* Days
 Weight *130* Height *5* ft. *11* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Tuesday Jan 19 1943* *11 AM*
 Account charged *Insurance*
 Address *M. R. H. Rudd*
 Account guaranteed *1231 Mt Vernon*
 Address *1231 Mt Vernon*
 Embalming *& Dress* *35.00*
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *6-3-21x Clark* *200.00*
 Casket with Copper Lin. *✓*
 Style of Casket *Oct-12-C*
 No. of Casket *1922-12-C Shm*
 Outside Box *Red*
 Shipping Case or Vault *✓*
 Handles *Ant*
 Pillow Set *for Operta H*
 Name Plate *✓*
 Cemetery *Antioch Quincy Fla*
 Section *Lot*

I Other Graves



X Grave on this date

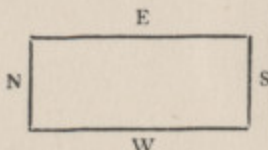
Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket *23 44*
 Cash advanced
 Autos *48*
 Telegram *(1)*
 Minister *Rev Clarke*
 Music *Organ*
 Casket Wagon *2* *10.00*
 Physician *Dr. Gray*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *92*

Tues Jan 19-43 *269.12*
Tax *33*
269.45

GENEVIVE Carey Hand Funeral Home

Name of deceased *Mrs. Jennie Walters*
 Date of death *Jan 17-43* *4-8 M*
 Cause of death *Drowned*
 Place of death *Lake Lanier Ga*
 Residence *Atlanta Ga*
 Age *45* Y'rs *—* Mo's *8* Days *—*
 Weight *120* Height *5 ft. 4* in. Eyes *—*
 Funeral at *Chapel*
 Date *Wed Jan. 20* 1943 *11 A M*
 Account charged *M. Walters*
 Address *Atlanta Ga*
 Account guaranteed *—*
 Address *—*
 Embalming *Yes* *35.00*
 Robe, Suit, Dress *—*
 Underwear and Hose *—*
 Casket *6-3-42 Doe* *100.00*
 Casket with Copper Lin. *—*
 Style of Casket *Oct. A Cap.*
 No. of Casket *1972- Tampa*
 Outside Box *Red*
 Shipping Case or Vault *—*
 Handles *Ext. —*
 Pillow Set *—*
 Name Plate *—*
 Cemetery *Greenwood*
 Section *—* Lot *—*

I Other Graves



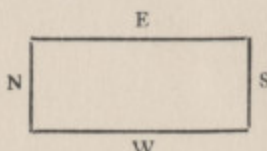
X Grave on this date

Cremation *auto* *5.00*
 Urn *—*
 Single Grave *White* *25.00*
 Opening and Closing Grave *etc* *15.00*
 Body Shipped to *—*
 R. R. Ticket *—*
 Cash advanced *—*
 Autos *—*
 Telegram *—*
 Minister *Elder Pomeroy*
 Music *Organ*
 Casket Wagon *(1)* *5.00*
 Physician *Suckumth*
 County or City Burial *—*
 Automobiles *S & S* *15.00*
 Baggage or Express Train No. *—*
200.00

Carey Hand Funeral Home

Name of deceased Wm J. Anderson
 Date of death Jan 12 - 1943 11:15 A M
 Cause of death General Anesthesia
 Place of death Res
 Residence 436 - 5th St. Sedro Woolley WA
 Age 59 Yrs 2 Mo's 25 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at West Way Cross WA
 Date _____ 194 _____ M
 Account charged Mrs J. L. Hendricks
 Address _____
 Account guaranteed OK
 Address _____
 Embalming _____
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 4 - 2 in Blk 250
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery West
 Section _____ Lot _____

I Other Graves



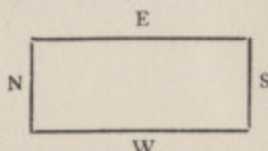
X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Way Cross WA
 R. R. Ticket _____
 Cash advanced Exp 15.18
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 92
Wed - Jan 13 - 43 315.18
Chk - 316.22
315.18
Refund 1.04

Carey Hand Funeral Home

Name of deceased Col. Royal Page Davidson
 Date of death Jan 7 1943 M
 Cause of death I came not given on form
 Place of death Res
 Residence Avon Park, Fla.
 Age _____ Y's _____ Mo's _____ Days _____
 Weight 200 Height 5 ft. 10 in. Eyes Blue
 Funeral at Avon Park Fla
 Date Jan 1943 M
 Account charged Stephenson F. Home
 Address Avon Park, Fla
 Account guaranteed E. H. Ch
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose Cremation 37.50
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body arrived by
 No. of Casket Auto Monday
 Outside Box 1:30 P. M. Jan 18-43
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery Tuesday 8 A. M.
 Section Jan 19-43 Lot _____

I Other Graves



X Grave on this date

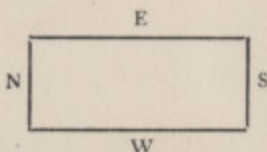
Cremation Ashes exposed to
 Urn Stephenson F. Home
 Single Grave Sebring, Fla
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket Woods
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of deceased *Mr. John Riley*
 Date of death *Mon Jan - 18 - 43* P.M.
 Cause of death
 Place of death *Old Berman Res - Lake Sue*
 Residence *720 Edgewater Dr C.C. CLIFTON*
 Age *68* Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at *Chapel*
 Date *Wed - Jan - 3* 1943 *4 P* M
 Account charged
 Address
 Account guaranteed *Cash - 58*
 Address
 Embalming *& Dress* 35.00 *25.00*
 Robe, Suit, Dress 10.00 *8.00*
 Underwear and Hose
 Casket *6-3 Pine* 50.00 *25.00*
 Casket with Copper Lin.
 Style of Casket *Sgt. Flat Top*
 No. of Casket *N. M.*
 Outside Box *Req*
 Shipping Case or Vault
 Handles *Short*
 Pillow Set
 Name Plate
 Cemetery *Greenwood*
 Section *G.* Lot

I Other Graves



X Grave on this date

Cremation *Wm. Butch Wm. Don*
 Urn *City of New York*
 Single Grave *Reburial*
 Opening and Closing Grave
 Body Shipped to *Reburial*
 R. R. Ticket *Reburial*
 Cash advanced
 Autos
 Telegram *460*
 Minister *Reburial*
 Music *Organ*
 Casket Wagon *N. Chg*
 Physician *Reburial*
 County or City Burial
 Automobiles *N. Chg*
 Baggage or Express Train No.

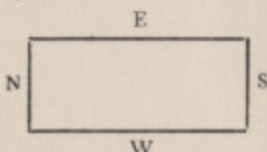
See at same time as with
Alex. Rodin
1-21-43

58.

Carey Hand Funeral Home

Name of deceased Arthur Lee Hayward
 Date of death Thurs Jan - 19-43 1:40 M.P.
 Cause of death _____
 Place of death 310 S. Amelia Ave. Oakland
 Residence 310 S. Amelia
 Age 68 Y'rs. _____ Mo's. _____ Days _____
 Weight 80 Height 5 ft. 7 in. Eyes _____
 Funeral at Chapel
 Date Wed Jan 20- 1943 4 P. M.
 Account charged Gov allowance
 Address for burial
 Account guaranteed _____
 Address _____
 Embalming Yes
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 in Maple
 Casket with Copper Lin. ✓
 Style of Casket Vict N. Rich
 No. of Casket 1972
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes
 Name Plate ✓
 Cemetery Greenwood
 Section Amelia Legum Lot 4

I Other Graves



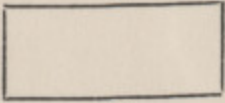
X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave 10.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles SVJ 15.00
 Baggage or Express Train No. _____

Mrs Lillian M. Hall
310 S. Amelia Ave
125.00
25.00
100.00

Carey Hand Funeral Home

Name of deceased Mrs. Eugenia Bouchie
 Date of death Wed. Jan 20-43 A.M.
 Cause of death Heart
 Place of death Nursing Home
 Residence 523 Grand Ave
 Age 79 Yrs. 3 Mo's. 5 Days
 Weight 140 Height 5 ft. 10 in. Eyes Blue
 Funeral at St. John's Catholic Church
 Date Friday Jan 22 1943 9 A.M.
 Account charged Wm. J. McNeill
 Address 523 Grand Ave
 Account guaranteed Estate
 Address Grand Ave
 Embalming Yes 35.00
 Robe, Suit, Dress Yes 10.00
 Underwear and Hose Yes 100.00
 Casket 6-3 Yes
 Casket with Copper Lin. Yes
 Style of Casket Oct. H. Cop
 No. of Casket 1972
 Outside Box Yes
 Shipping Case or Vault Yes
 Handles Yes
 Pillow Set Yes
 Name Plate Yes
 Cemetery Greenwood
 Section G Lot

I Other Graves 
 X Grave on this date

Cremation Yes Minister 5.00
 Urn Yes P. B 5.00
 Single Grave Yes 25.00
 Opening and Closing Grave Yes 15.00
 Body Shipped to Yes 5.00
 R. R. Ticket amb. car 1-15-43
 Cash advanced Yes
 Autos Yes
 Telegram Yes
 Minister Yes
 Music Yes 5.00
 Casket Wagon Yes
 Physician Yes
 County or City Burial Yes 15.00
 Automobiles Yes
 Baggage or Express Train No. Yes

220.00

Carey Hand Funeral Home

Name of deceased Carlton W. Taylor
 Date of death Jan 18 M
 Cause of death Cancer of Prostate
 Place of death DeLand Fla
 Residence Lake Helen Fla
 Age 80 Y'rs. 9 Mo's. 27 Days
 Weight 140 Height 5 ft. 10 in. Eyes
 Funeral at DeLand Fla
 Date Jan 1943 M
 Account charged Allen - Summerhill
 Address DeLand Fla -
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress Cremation 37.50
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket Body covered
 No. of Casket 4:45 P.M.
 Outside Box Wed Jan 20-43
 Shipping Case or Vault by auto
 Handles
 Pillow Set Body Cremated
 Name Plate Thurs 8 A.M.
 Cemetery Jan 21-43
 Section Lot

I Other Graves
 N S
 X Grave on this date W

Cremation Will Call
 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.

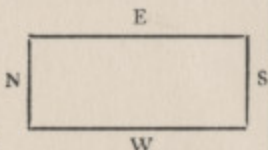
37.50

37.50

Carey Hand Funeral Home

Name of deceased Ellen B. Johns.
 Date of death Jan 19 M
 Cause of death not given on permit
 Place of death Res
 Residence Strat Fla
 Age Y'rs. Mo's. Days.
 Weight 110 Height 5 ft 3 in. Eyes Brown
 Funeral at Strat Fla
 Date Jan 1943 M
 Account charged John's mortuary
 Address Strat Fla
 Account guaranteed Check
 Address
 Embalming
 Robe, Suit, Dress Cremation 3750
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket Body arrived
 No. of Casket 5000 - 2nd
 Outside Box Jan 20-43
 Shipping Case or Vault by auto
 Handles
 Pillow Set
 Name Plate Body Cremated
 Cemetery Thurs 8 a.m.
 Section Jan 21-43 Lot

I Other Graves



X Grave on this date

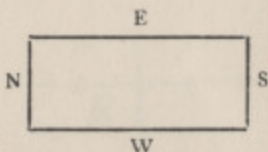
Cremation Will Call
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Baby John Wasser
 Date of death Thurs Jan 21-42 11:30 M P
 Cause of death Bronch Pneuonia
 Place of death D. H.
 Residence Orlando Next Amelia Ave
 Age ✓ Y'rs ✓ Mo's 22 Days ✓
 Weight ✓ Height ✓ ft. ✓ in. Eyes ✓
 Funeral at Rest
 Date 194 M
 Account charged John J. Wasser
 Address Cash
 Account guaranteed Cash
 Address ✓
 Embalming ✓
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 2-0-4-2
 Casket with Copper Lin. ✓
 Style of Casket Oct. H. Col.
 No. of Casket 103- Tampa
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Shut
 Pillow Set yes
 Name Plate ✓
 Cemetery Rest
 Section ✓ Lot ✓

I Other Graves



X Grave on this date

Cremation Burial
 Urn Christopher ills
 Single Grave ✓
 Opening and Closing Grave ✓
 Body Shipped to Carbondale Ills
 R. R. Ticket Bought Direct
 Cash advanced ✓
 Autos ✓
 Telegram ✓
 Minister ✓
 Music ✓
 Casket Wagon (2)
 Physician Dr. Collins
 County or City Burial ✓
 Automobiles ✓
 Baggage on Express Train No. 92

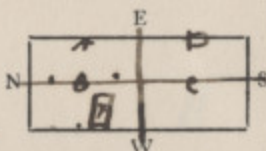
Thurs Jan 22-43

25.00
 32.50
 5.00
 62.50

Carey Hand Funeral Home

Name of deceased Ed. S. Harper
 Date of death Wed Jan 22 - 42 9 M
 Cause of death Flu
 Place of death Fla. San
 Residence 1044 Deland Ave H.P.
 Age Yrs Mo's Days
 Weight Height ft in Eyes
 Funeral at Chapel
 Date Thurs Jan 24 1943 4 P. M
 Account charged Mrs. S. S. Harper
 Address 1044 Deland Ave H.P.
 Account guaranteed Insurance
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress Yes
 Underwear and Hose Yes
 Casket 66 - In. to both 250.00
 Casket with Copper Lin. Yes
 Style of Casket State S. Cap
 No. of Casket 56 - Tampa
 Outside Box Yes
 Shipping Case or Vault Cement 60.00
 Handles Yes
 Pillow Set yes Taylor
 Name Plate Yes
 Cemetery Winter Park
 Section 88 Lot B

I Other Graves



X Grave on this date

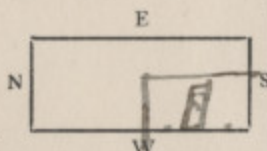
Cremation P. B. Car 5.00
 Urn Classed Car 5.00
 Single Grave
 Opening and Closing Grave Trst 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram Rev. Louis Freink
 Minister Yes 5.00
 Music Yes 5.00
 Casket Wagon 1
 Physician Dr. Ruth Jewett
 County or City Burial
 Automobiles S & S 15.00
 Baggage or Express Train No. B

395.00

Carey Hand Funeral Home

Name of deceased *Mr. Sam P. Booth*
 Date of death *Sat Jan 23-42* *2:45* *A.M.*
 Cause of death *Res*
 Place of death *Res*
 Residence *902 South Highway*
 Age *76* Y'rs *7* Mo's *7* Days *7*
 Weight *150* Height *5* ft. *9* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Mon Jan 25* 194*2* *4 P.* M
 Account charged *J. R. Booth*
 Address *902 South Highway*
 Account guaranteed *Ans -*
 Address *Ans -*
 Embalming *Y* *Dress* *101*
 Robe, Suit, Dress *Blue dress 382* *10.00*
 Underwear and Hose *Y*
 Casket *6-3-52 Plank* *200.00*
 Casket with Copper Lin. *Y*
 Style of Casket *Oct-1/2-E*
 No. of Casket *1927-3-*
 Outside Box *R-9*
 Shipping Case or Vault *Y*
 Handles *Ans -*
 Pillow Set *Ans -*
 Name Plate *Y*
 Cemetery *Guernwood*
 Section *9 SW 1/4* Lot *6*

I Other Graves



X Grave on this date

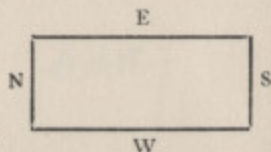
Cremation *Auto* *5.00*
 Urn *Burned Lot* *62.50*
 Single Grave *15.00*
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon *(1)* *5.00*
 Physician
 County or City Burial
 Automobiles *S & S* *15.00*
 Baggage or Express Train No. *28*

280.00
62.50
342.50

Carey Hand Funeral Home

Name of deceased Mrs. B. Johnson
 Date of death Sat Jan 23-42 AM
 Cause of death _____
 Place of death Res.
 Residence Left Fla
 Age _____ Y'rs. _____ Mo's. _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Home side
 Date _____ 1942 _____ M
 Account charged Mrs. J. Johnson
 Address Left Fla
 Account guaranteed Payments
 Address _____
 Embalming Yes
 Robe, Suit, Dress _____
 Underwear and Hosiery _____
 Casket 6-3-34 Emb. In
 Casket with Copper Lin. _____
 Style of Casket See H.C. Feb 17
 No. of Casket 12-1000-2
 Outside Box Yes
 Shipping Case or Vault _____
 Handles Short
 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 _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev. H. Murphy
 Music _____
 Casket Wagon (1) X Res
 Physician Dr. Mann
 County or City Burial _____
 Automobiles 3 & 3
 Baggage or Express Train No. 2

35.00
 9.00
 75.00

15.00

5.00

15.00

Payments 154.00

Carey Hand Funeral Home

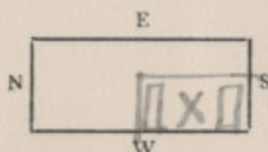
Name of deceased *Mr. Chas A. Knickmeyer*
 Date of death *Wed. Jan. 23-43* *3 P. M*
 Cause of death _____
 Place of death *County Home*
 Residence *Richport Pa*
 Age *68* Y'rs *6* Mo's *10* Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Mon Jan 25* 1943 *2 P. M*
 Account charged *Chas Knickmeyer*
 Address *1428 Horton Ave Grand Rapids Mich*
 Account guaranteed _____
 Address _____
 Embalming *Yes* 35.00
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *6-3-42 Box* 135.00
 Casket with Copper Lin. *✓*
 Style of Casket *Oct. H. Cap*
 No. of Casket *1381- Shm*
 Outside Box *Reg-*
 Shipping Case or Vault *✓*
 Handles *Reg-*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Greenwood*
 Section *G.A.R.* Lot _____
Mr. Chas
 I Other Graves E
N G.A.R. S
W
 X Grave on this date _____
 Cremation *Auto* 5.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music *Organ*
 Casket Wagon *Wagon* 5.00
 Physician *Dr. Moon*
 County or City Burial _____
 Automobiles *S & S* 15.00
 Baggage or Express Train No. *8*

210.00

Carey Hand Funeral Home

Name of deceased *Mrs. Pauline A. Himm*
 Date of death *Sat - Jan 23-43* *2:30 P.M.*
 Cause of death
 Place of death *Hillside Nursing Home*
 Residence *1630 Hillcrest Ave*
 Age Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at *Chapel*
 Date *Tue Jan 26* 1943 *3 P.M.*
 Account charged *Mrs. J. Himm Hottel*
 Address *1630 Hillcrest Ave*
 Account guaranteed *Insurance*
 Address
 Embalming *Yes*
 Robe, Suit, Dress *Trunk*
 Underwear and Hose
 Casket *6-3 1/2 x 30*
 Casket with Copper Lin.
 Style of Casket *Set 1/2-C-*
 No. of Casket *1391 Himm*
 Outside Box
 Shipping Case or Vault *Cement*
 Handles *Set*
 Pillow Set *Yes*
 Name Plate
 Cemetery *Greenwood*
 Section Lot

I Other Graves



X Grave on this date

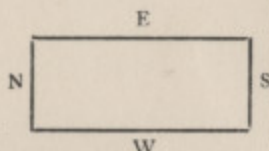
Cremation
 Urn
 Single Grave
 Opening and Closing Grave *Trunk*
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister *Dean Johnson*
 Music
 Casket Wagon *(1)*
 Physician *Dr. Wendell*
 County or City Burial
 Automobiles *35*
 Baggage or Express Train No. *8*

312.00

Carey Hand Funeral Home

Name of deceased Major Emory Brown
 Date of death Jan 23 43 M
 Cause of death ill from cancer
 Place of death Co. H. Orange & North
 Residence 632 Stetson
 Age 51 Y'rs. 6 Mo's. 15 Days
 Weight 185 Height 5 ft. 4 in. Eyes
 Funeral at Chapel
 Date Wed - Jan. 27 1943 11-A M
 Account charged Mrs M. S. Brown
 Address 632 Stetson Ave
 Account guaranteed Yes & Rev
 Address
 Embalming & Best
 Robe, Suit, Dress Rutlands
 Underwear and Hose
 Casket 4-2
 Casket with Copper Lin.
 Style of Casket Octagon, Oak
 No. of Casket 1311 - Stetson
 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
 Urn wooden
 Single Grave
 Opening and Closing Grave
 Body Shipped to Body Crematorium
 R. R. Ticket 8-4 2nd. Union
 Cash advanced Jan 28-43
 Autos Will call for
 Telegram
 Minister A Fred Turner
 Music Yes
 Casket Wagon
 Physician Dr. T. H. Hall
 County or City Burial
 Automobiles
 Baggage or Express Train No.

35.00
 15.00
 60.00

50.00

5.00
 5.00

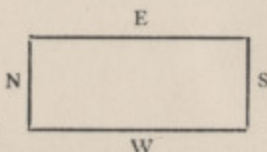
Legion Serv at Chapel

70.00

Carey Hand Funeral Home

Name of deceased Mrs Andrew M. Lyon
 Date of death Jan 21-42 M
 Cause of death Cancer
 Place of death De Land Fla
 Residence De Land
 Age 82 Y's 3 Mo's 4 Days
 Weight 100 Height 5 ft. 6 in. Eyes
 Funeral at De Land
 Date 194 M
 Account charged Allen & Lymmerhill
 Address De Land - Fla
 Account guaranteed OK
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket Body unlined
 Casket with Copper Lin. 4 sets
 Style of Casket 430 P. M
 No. of Casket Set Jan 23-43
 Outside Box
 Shipping Case or Vault Body cremated
 Handles Jan Jan 24-43
 Pillow Set
 Name Plate will call for
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

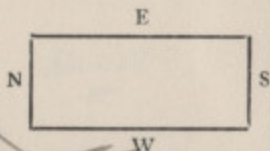
Cremation
 Urn wooden
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Infant Alligood
 Date of death Oct. 23-43 P.M.
 Cause of death
 Place of death Catharine Hospital
 Residence Oakland, Fla.
 Age 1 Y'rs. 0 Mo's. 0 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged _____
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Winter Garden
 Section _____ Lot _____

I Other Graves



X Grave on this date

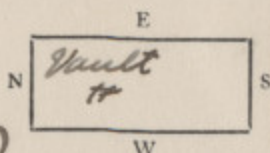
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician Dr. Hartman
 County or City Burial _____
 Automobiles _____
 Baggage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

omb exp from Oakland to
Sept 15th
X Res. No. Chg

Carey Hand Funeral Home

Name of deceased Mr. Wm. G. Tallman
 Date of death Sun Jan 24-43 6:55 AM
 Cause of death Myocardial infarction
 Place of death at home
 Residence 925 Seville Place
 Age 68 Yrs 11 Mo's 29 Days
 Weight 192 Height 5 ft 9 in. Eyes blue
 Funeral at Gravel
 Date Tuesday Jan 26 1943 4:30 PM
 Account charged Mr. W. G. Tallman
 Address 925 Seville Place
 Account guaranteed Estate
 Address _____
 Embalming Yes
 Robe, Suit, Dress Yes
 Underwear and Hose Yes
 Casket 6-6 Metal Std S.F. 1-2
 Casket with Copper Lin. Yes
 Style of Casket State H. Cap.
 No. of Casket Gibson Temp. A
 Outside Box Reg
 Shipping Case or Vault Yes
 Handles Yes
 Pillow Set Yes
 Name Plate Yes
 Cemetery In Vault
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation Vault 5:00 P. Mo
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev. Fred Turner
 Music 2nd
 Casket Wagon (2)
 Physician Dr. Mallory
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

35.00

475.00

Music 5.00

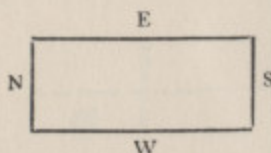
520.00
520.00

Carey Hand Funeral Home

Name of deceased Ruth E. Moore
 Date of death Jan 24 1943 12:35 A.M.
 Cause of death Cerebral Hemorrhage
 Place of death Q. C. N.
 Residence 136 - E. Washington St
 Age 52 Yrs 9 Mo's 14 Days
 Weight Height ft. in. Eyes
 Funeral at Home
 Date Jan 1943 M
 Account charged Milton Moore
 Address Calhoun St
 Account guaranteed Insurance
 Address
 Embalming Valleyman
 Robe, Suit, Dress Fresh
 Underwear and Hose 92
 Casket 6-3 1/2 Doe
 Casket with Copper Lin. Yes
 Style of Casket Oct-Style
 No. of Casket 1311- Shiner
 Outside Box 4-29
 Shipping Case or Vault ✓
 Handles Ext -
 Pillow Set Yes
 Name Plate
 Cemetery Eastman La
 Section Lot

35.00
 7.00
 145.00

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to Eastman La
 R. R. Ticket 202 - 256
 Cash advanced 20.00 20.00
 Autos
 Telegram
 Minister Home
 Music
 Casket Wagon 22
 Physician Dr. Frank Gray
 County or City Burial
 Automobiles
 Baggage or Express Train No. 76

20.58
 40.00

10.00

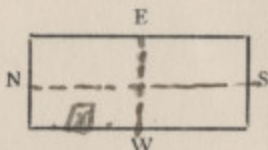
Mon Night 1-25-42

257.58

Carey Hand Funeral Home MARLAR

Name of deceased *Mrs. Mary Belle Marlar*
 Date of death *Jan 25* *P.M.*
 Cause of death *Pneumonia - Pleurisy*
 Place of death *Home*
 Residence *212 E. Evans St.*
 Age *60* Yrs *3* Mo's *6* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Thurs Jan 28 1943* *3 P.M.*
 Account charged *Mrs. Taylor*
 Address *212 E. Evans*
 Account guaranteed *Cash*
 Address _____
 Embalming *Yes* 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3-5 Sil. Oak* 200.00
 Casket with Copper Lin. _____
 Style of Casket *Get 12-2*
 No. of Casket *1927*
 Outside Box _____
 Shipping Case or Vault *Concrete Vault* 60.00
 Handles *Ext*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Windsor Park*
 Section *B* Lot *92*

I Other Graves



X Grave on this date

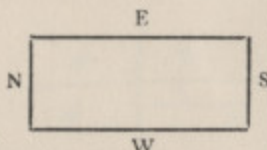
Cremation *(1) Out* 5.00
 Urn *(1) out P.B.* 5.00
 Single Grave *Car Min* 5.00
 Opening and Closing Grave *etc* 15.00
 Body Shipped to _____
 R. R. Ticket *D. Gra. Tidous* 15.00
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Rev. T. H. Smith*
 Music *Organ*
 Casket Wagon *(1)* 5.00
 Physician *Dr. Lynn*
 County or City Burial _____
 Automobiles *5.00* 15.00
 Baggage or Express Train No. _____

360.00

Carey Hand Funeral Home

Name of deceased Martha A. Johansen
 Date of death Jan 28 M
 Cause of death Cerebral Hemorrhage
 Place of death Smith Nursing Home
 Residence 35 W. Merrill Ave
 Age 55 Y's 3 Mo's — Days —
 Weight 135 Height 5 ft. 5 in. Eyes Blue
 Funeral at Chapel
 Date Wed Jan 27 1943 2 P M
 Account charged Chas. Johansen
 Address 35 W. Merrill Ave
 Account guaranteed Emerson
 Address —
 Embalming + Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket New Chg- 60.00
 Casket with Copper Lin. —
 Style of Casket Ext-W. C
 No. of Casket —
 Outside Box —
 Shipping Case or Vault —
 Handles Ext -
 Pillow Set yes
 Name Plate —
 Cemetery Brimmerton
 Section — Lot —

I Other Graves



X Grave on this date

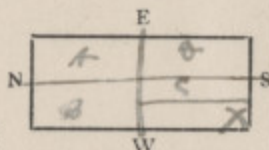
Cremation — 50.00
 Urn wooden
 Single Grave Cady estimated 8-A-M
 Opening and Closing Grave Thurs
 Body Shipped to Jan - 28 - 43
 R. R. Ticket —
 Cash advanced —
 Autos will call for
 Telegram —
 Minister Rev. L. L. Lusi
 Music Organ 5.00
 Casket Wagon (1)
 Physician Lt. Frank Gray
 County or City Burial —
 Automobiles —
 Baggage or Express Train No. B

150.00

Carey Hand Funeral Home

Name of deceased *Mr. Sprigg Poland*
Date of death *Jan 26 4:45 P. M*
Cause of death
Place of death *P. Y. N.*
Residence *808 - Mr. Intyre Ave. - W. B.*
Age *54* Y'rs. *3* Mo's. *4* Days
Weight Height ft. in. Eyes
Funeral at *Chapel*
Date *Sat. Jan. 30 1943 4 P. M*
Account charged *Mr. Sprigg Poland*
Address *808 Mr. Intyre Ave*
Account guaranteed
Address
Embalming *& Dressing* 35.00
Robe, Suit, Dress -
Underwear and Hose -
Casket *4-2 In. Doe* 110.00
Casket with Copper Lin. *Det. M. Coff*
Style of Casket
No. of Casket *1972 - Temp. 2*
Outside Box
Shipping Case or Vault *Cement* 60.00
Handles *Ext -*
Pillow Set *yes -*
Name Plate
Cemetery *Palm Cemetery*
Section *92 W 1/2 C* Lot *92*

I Other Graves



X Grave on this date

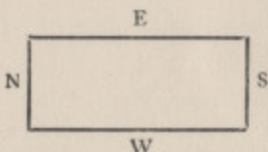
Cremation	
Urn	
Single Grave	
Opening and Closing Grave <i>etc</i>	15.00
Body Shipped to	
R. R. Ticket	
Cash advanced	
Autos	
Telegram	
Minister <i>Rev. M. V. Merideth</i>	
Music <i>Organ</i>	
Casket Wagon <i>Ch. Wagon</i>	5.00
Physician <i>Dr. J. H. Green</i>	
County or City Burial	
Automobiles <i>S&S</i>	15.00
Baggage or Express Train No. <i>2</i>	
<i>Gov allowance</i>	240.00

Auto used Orlando and
Orange Ave
8-AM 1-26-43

Carey Hand Funeral Home

Name of deceased Edward Athins
 Date of death Jan 26 M
 Cause of death _____
 Place of death Residence
 Residence 508 Putnam St
 Age 91 Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft _____ in _____ Eyes _____
 Funeral at Chapel
 Date Thurs Jan 28-43 194 4:30 P.M
 Account charged Dr. E. G. Athins
 Address Bridgeport Conn
 Account guaranteed 1115 Main St
 Address _____
 Embalming & Dressing
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket Low Ctg
 Casket with Copper Lin. ✓
 Style of Casket Set A. C
 No. of Casket 1311
 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 5000
 Urn wooden
 Single Grave Body Cremated
 Opening and Closing Grave S-A-M
 Body Shipped to W. Jan - 29-43
 R. R. Ticket _____
 Cash advanced amb. car 5.00
 Autos _____
 Telegram 1 1.24
 Minister Exp. & Dr. E. G. Athins
 Music 1115 Main St Bridgeport 5.00
 Casket Wagon 1
 Physician Dr. Redding
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

151.24

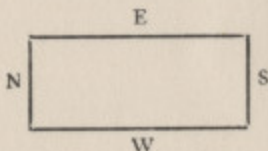
7.124

158.00

Carey Hand Funeral Home

Name of deceased Benjamin F. Russell
 Date of death Jan 27 12:45 A M
 Cause of death myocardial degeneration
 Place of death Res.
 Residence 1537 Clay St. Winter Park
 Age 66 Y'rs. 8 Mo's. 5 Days.
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graveside
 Date Sunday Jan 31 1943 4 P. M
 Account charged Mrs. Sally P. Russell
 Address 1537 Clay St. W. Park
 Account guaranteed Insurance
 Address _____
 Embalming + dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-6 Metal H. Coff 475.00
 Casket with Copper Lin. inner
 Style of Casket Met. H. Coff
 No. of Casket Lampston
 Outside Box ✓
 Shipping Case or Vault Cement 60.00
 Handles Ext.
 Pillow Set yes
 Name Plate Name & Date
 Cemetery Woodlawn
 Section F. Lot 223

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 Major Paul Crank
 Music _____
 Casket Wagon (1) 5.00
 Physician Dr. Pym
 County or City Burial _____
 Automobiles 5.00 15.00
 Baggage or Express Train No. 8
605.00

all serv at Graveside
Legion & Paul Crank

Carey Hand Funeral Home

Name of deceased Rev. E. Lee Smith
 Date of death Jan 27 2:30 P. M.
 Cause of death Cardiac Thrombosis
 Place of death Res.
 Residence 410 W. Concord
 Age 77 Yrs. 4 Mo's. 4 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sunday Jan 31 1943 2 P. M.
 Account charged Estate
 Address _____
 Account guaranteed Cash
 Address _____
 Embalming & Dressing
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section _____ Lot _____

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

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev Correll Tucker
 Music _____
 Casket Wagon _____
 Physician Dr. J. A. Ford
 County or City Burial _____
 Automobiles 5.15 15 00
 Baggage or Express Train No. _____

Rev. Small Means Day Service 100.00
Complete Service
Very Large Serv 8.05 at Chapel
F. H. M. at Grave Side

Carey Hand Funeral Home

Cadwell

Name of deceased *Robert Griffin*

Date of death *Jan 26* *9* A.M.

Cause of death *Pulmonary T.B. by Hemorrhage*

Place of death *County T.B. Unit*

Residence *518 7th Ave SE*

Age *40* Yrs. Mo's. Days.

Weight. Height. ft. in. Eyes.

Funeral at *✓*

Date *Tues Jan 26* 1943 *P* M

Account charged *County*

Address

Account guaranteed

Address

Embalming

Robe, Suit, Dress

Underwear and Hose

Casket *Coffin*

Casket with Copper Lin.

Style of Casket

No. of Casket

Outside Box

Shipping Case or Vault

Handles

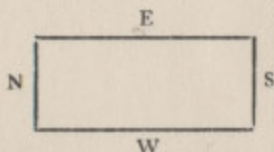
Pillow Set

Name Plate

Cemetery *Bounty Home*

Section. Lot.

I Other Graves



X Grave on this date

Cremation *Stark & Strong got the*

Urn *Call*

Single Grave

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash advanced

Autos

Telegram

Minister

Music

Casket Wagon

Physician *Dr. Moore*

County or City Burial

Automobiles

Baggage or Express Train No.

14.50

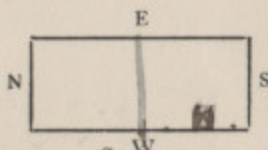
14.50

Carey Hand Funeral Home

3rd

Name of deceased Kingman C. Moore
 Date of death Jan - 27 - 43 10 45 P.M
 Cause of death Glystheria
 Place of death Ch. L. H.
 Residence 117 Thelma
 Age 6 Y'rs. 1 Mo's. 22 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave side
 Date Sat - 10 - A.M. 1943 Jan 30 - M
 Account charged Mr. K. C. Moore
 Address 117 Thelma
 Account guaranteed _____
 Address _____
 Embalming Yes
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 4-0- H-L -
 Casket with Copper Lin ✓
 Style of Casket Det. H. T. H.
 No. of Casket 103 - Triumph
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Shat
 Pillow Set yes
 Name Plate ✓
 Cemetery Greenwood
 Section N 392 Lot 29

I Other Graves



X Grave on this date

Cremation Not Bought Direct
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket Auto No. Chg
 Cash advanced C. Hogan No. Chg
 Autos _____
 Telegram _____
 Minister Rev. M. C. Caslin
 Music _____
 Casket Wagon _____
 Physician Dr. A. Jones
 County or City Burial _____
 Automobiles S & S
 Baggage or Express Train No. B

25.00
57.00

15.00

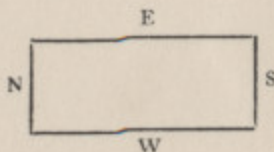
15.00

112.00

Carey Hand Funeral Home

Name of deceased John B. Parisian
 Date of death Thurs. Jan 28 11:30 A.M.
 Cause of death O.G.H.
 Place of death Haddon Heights
 Residence 22nd Ave
 Age 20 Yrs. Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Home
 Date Jan 30, 1943 3:30 P.M.
 Account charged J. J. Parisian son
 Address 2036 22nd St
 Account guaranteed Fayonants
 Address _____
 Embalming V. Dress 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3-54 100.00
 Casket with Copper Lin. ✓
 Style of Casket Set H. C.
 No. of Casket 1311-5-X
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext -
 Pillow Set yes
 Name Plate ✓
 Cemetery Greenwood
 Section G Lot _____

I Other Graves



X Grave on this date

Cremation Labor City 9.00
 Urn _____ 25.00
 Single Grave White 15.00
 Opening and Closing Grave 6.00
 Body Shipped to Outs
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram Dean Johnson
 Minister Organ
 Music 11 5.00
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles 3 x S 15.00
 Baggage or Express Train No. _____

209.00

e. Cons

34.00

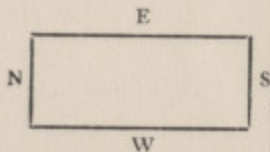
6-10-11-12

175.00

Cary Hand Funeral Home

Name of deceased Louis Alvin Price
 Date of death Jan - 29 - 43 AM
 Cause of death Old in years
 Place of death _____
 Residence Wendover
 Age 55 Yrs 10 Mo's 18 Days _____
 Weight 1 Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date _____ 194 _____ M
 Account charged Mrs L. A. Price
 Address Wendover Ga
 Account guaranteed _____
 Address _____
 Embalming Y
 Robe, Suit, Dress _____ 18
 Underwear and Hose _____
 Casket 6-3- 9. Doe
 Casket with Copper Lin. _____
 Style of Casket Oct. W. Cap
 No. of Casket 1311- S -
 Outside Box R-9 -
 Shipping Case or Vault _____
 Handles Est
 Pillow Set Yes
 Name Plate _____
 Cemetery Greenwood
 Section 14 Lot _____

I Other Graves



X Grave on this date

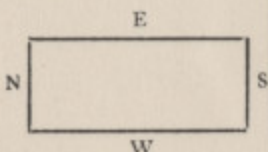
Cremation Burial Lot 62.50
 Urn Auto 5.00
 Single Grave _____
 Opening and Closing Grave _____ 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music Organ 5.00
 Casket Wagon (1)
 Physician Dr. Lawrence
 County or City Burial _____
 Automobiles 3.45 15.00
 Baggage or Express Train No. 8

287.50

Carey Hand Funeral Home

Name of deceased Charles Fay Badgley
 Date of death Jan 29 6:20 AM
 Cause of death Cardiac Failure - Hypertension
 Place of death Fla Sanit
 Residence Quincy Ill
 Age 58 Yrs 4 Mo's 29 Days
 Weight 160 Height 5 ft. 9 in. Eyes
 Funeral at Leest
 Date Feb 194M
 Account charged Mrs. Chas. F. Badgley
 Address Quincy Ill
 Account guaranteed Check
 Address
 Embalming depressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-6- Metal 365.00
 Casket with Copper Lin. ✓
 Style of Casket State of Cal.
 No. of Casket Knight Tampa
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles ✓
 Pillow Set ✓
 Name Plate ✓
 Cemetery Leest
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to Quincy Ill
 R. R. Ticket ✓ 53.12
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon CR 10.00
 Physician Dr. Ruth Jewett
 County or City Burial
 Automobiles
 Baggage or Express Train No. 72 3

Set Jan 30-43

463.12

Carey Hand Funeral Home

Name of deceased *Patricia Alice Browning*
 Date of death *Jan 30* *4:50 A.M.*
 Cause of death _____
 Place of death *Fla. Spine*
 Residence *2005 E. Jefferson St*
 Age _____ Y'rs. _____ Mo's. *15* Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Catholic Church*
 Date *Monday Feb 1 1943* *10 A.M.*
 Account charged *Pat A. Browning*
 Address *2005 E. Jefferson St*
 Account guaranteed _____
 Address _____
 Embalming *YD* 25.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *2-0-2-2-* 12.50
 Casket with Copper Lin. ☒
 Style of Casket *Exp. Nym*
 No. of Casket _____
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *small*
 Pillow Set ☒
 Name Plate *Engraving*
 Cemetery *Greenwood*
 Section *9* Lot _____

E
 I Other Graves
N
S
W

 X Grave on this date

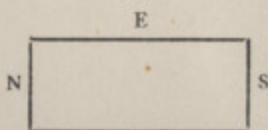
 Cremation *Auto* 5.00
 Urn *Auto* 5.00
 Single Grave *Baby Grave* 12.50
 Opening and Closing Grave *Y. H. C.* 7.50
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Father Bishop*
 Music _____
 Casket Wagon _____
 Physician *Dr. Jones*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

67.50

Carey Hand Funeral Home

Name of deceased Horace Wilson
 Date of death Sat Jan 30-1943 8:30 A.M.
 Cause of death Heart attack
 Place of death in Amb High St. City
 Residence Cambridge Ma
 Age 33 Y's 6 Mo's 13 Days
 Weight 145 Height 6 ft - in. Eyes
 Funeral at Chapel
 Date Wed-2-6-43 1943 4:00 M
 Account charged P. & the Co come for
 Address the Body 4 auto
 Account guaranteed cash
 Address
 Embalming & Dress 35.00
 Robe, Suit, Dress 10.00
 Underwear and Hose 2.50
 Casket 6-3-Case 10
 Casket with Copper Lin. See City
 Style of Casket See City
 No. of Casket See City 5.00
 Outside Box Reg -
 Shipping Case or Vault
 Handles Short -
 Pillow Set
 Name Plate
 Cemetery Greenwood
 Section V. Lot

I Other Graves



X Grave on this date

Cremation See British Consulate
 Urn The City gave small one
 Single Grave Later
 Opening and Closing Grave
 Body Shipped to See relatives & Co
 R. R. Ticket Travel
 Cash advanced
 Autos 4.00 for telegram
 Telegram
 Minister Dean Johnson
 Music Organ
 Casket Wagon See City
 Physician Duckworth Duckworth
 County or City Burial
 Automobiles 15.00
 Baggage or Express Train No. 250.00

Service at some time as with
Alfred Rodan
1-31-43