

5-11-1943

Memoranda Book 158: Carey Hand Funeral Home records, May 11, 1943 to July 8, 1943

Carey Hand Funeral Home

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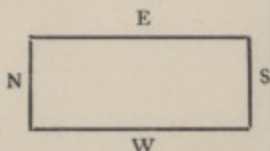
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Carey Hand Funeral Home

Name of deceased *Mrs Estelle Tryon*
 Date of death *Thurs May-11-43* *AM*
 Cause of death *T. B. Pal*
 Place of death *St. J. B. Saint*
 Residence *Port of Joe Fla-*
 Age *26* Y'rs. *11* Mo's. *7* Days
 Weight..... Height..... ft..... in. Eyes.....
 Funeral at *Dest*
 Date *8-11-43* *1943* *M*
 Account charged *Walter Tryon*
 Address *811-Myrtle Ave*
 Account guaranteed *OK-*
 Address.....
 Embalming *Yes*
 Robe, Suit, Dress *Full*
 Underwear and Hose.....
 Casket *6-3 In the Church*
 Casket with Copper Lin. *✓*
 Style of Casket *Bel-12-e*
 No. of Casket *1927 Shain*
 Outside Box *Reg*
 Shipping Case or Vault *✓*
 Handles *Ext-*
 Pillow Set *yes*
 Name Plate.....
 Cemetery *Dest*
 Section..... Lot.....

I Other Graves



X Grave on this date

Cremation.....
 Urn.....
 Single Grave.....
 Opening and Closing Grave.....
 Body Shipped to *Birmingham Ala*
 R. R. Ticket *1178-838*
 Cash advanced.....
 Autos.....
 Telegram *1-*
 Minister.....
 Music.....
 Casket Wagon *(2)*
 Physician *at T. B. Saint*
 County or City Burial.....
 Automobiles.....
 Baggage or Express Train No. *92*

35.00
 15.00
 1.50
 200.00

20.15

1.37

10.00

Wed- May-12-43

283.03

Carey Hand Funeral Home

Name of deceased Annice Long Johnston
 Date of death May 13 9:15 A.M.
 Cause of death acute Cerebral Hemorrhage
 Place of death La. Sant
 Residence 338 Cathcart St
 Age 78 Y'rs 7 Mo's 21 Days
 Weight 180 Height 5 ft. 6 in. Eyes
 Funeral at Chapel
 Date Friday May 14 1943 8 P. M
 Account charged Madelaide Johnson
 Address 338 Cathcart St.
 Account guaranteed Estate
 Address
 Embalming Yes Dressing 35 00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 4/3 Grey Blush 175 00
 Casket with Copper Lin.
 Style of Casket Queen Cap
 No. of Casket 1575 Tampa
 Outside Box
 Shipping Case or Vault
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Calmation
 Section Lot

 I Other Graves

E
 N S
 W

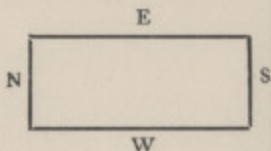
 X Grave on this date
 Cremation Body Cremated 50 00
 Urn 8 A.M. Sat
 Single Grave May 15. 43
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket Will Call -
 Cash advanced
 Autos
 Telegram
 Minister Rev. Leean Johnson
 Music
 Casket Wagon To Sant (1) 5 00
 Physician Dr. Pyms
 County or City Burial
 Automobiles
 Baggage or Express Train No.

265 00

Carey Hand Funeral Home

Name of deceased *Mr Charles B Hunt*
 Date of death *Wed - May - 12 - 43* P.M.
 Cause of death *Cause not given in R. Permit*
 Place of death *North Davis Island Tampa Fla*
 Residence *Orlando -*
 Age *39* Y'rs *3* Mo's *11* Days
 Weight *165* Height *5* ft *7* in. Eyes
 Funeral at *Chapel*
 Date *Sun May 1943* *2:30 P.M*
 Account charged *Mrs Sarah Hunt* *24*
 Address *24*
 Account guaranteed *Mrs*
 Address
 Embalming *Yes* *35.00*
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-3 In. Box* *115.00*
 Casket with Copper Lin. ☒
 Style of Casket *Oct - 24*
 No. of Casket *8175* *Tampa*
 Outside Box *Reg -*
 Shipping Case or Vault ☒
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate
 Cemetery *Greenwood*
 Section *G -* Lot

I Other Graves



X Grave on this date

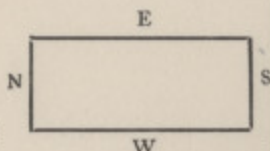
Cremation *Auto* *5.00*
 Urn *Auto* *5.00*
 Single Grave *White* *25.00*
 Opening and Closing Grave *Teste* *15.00*
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister *Rev*
 Music *Organ*
 Casket Wagon *Tampa* *35.00*
 Physician *at Tampa*
 County or City Burial
 Automobiles *S & S* *15.00*
 Baggage or Express Train No.

250.00

Carey Hand Funeral Home

Name of deceased *Mrs Lucy Castleberry*
 Date of death *May 14-43 10:30 AM*
 Cause of death *Senility*
 Place of death *Res*
 Residence *Ola Vista*
 Age *85* Y'rs *8* Mo's *7* Days
 Weight *110* Height *5* ft *6* in. Eyes
 Funeral at *Dest*
 Date *1943* M
 Account charged *M. M. Castleberry* *Sen*
 Address *Ola Vista*
 Account guaranteed *OK*
 Address
 Embalming *Yes* 35.00
 Robe, Suit, Dress *✓*
 Underwear and Hosiery *✓*
 Casket *6-9-12* 125.00
 Casket with Copper Lin. *✓*
 Style of Casket *Oct. H. Oak*
 No. of Casket *8175*
 Outside Box *Reg*
 Shipping Case or Vault *✓*
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate
 Cemetery *at Kingville Fla*
 Section *✓* Lot

I Other Graves



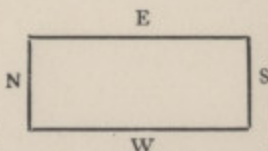
X Grave on this date

Cremation *✓*
 Urn *✓*
 Single Grave *✓*
 Opening and Closing Grave *✓*
 Body Shipped to *Maiana Fla*
 R. R. Ticket *✓* *Tex*
 Cash advanced *Exp 25.22* 76 25.98
 Autos *Yes* *Flowers* 15.00
 Telegram
 Minister
 Music
 Casket Wagon *(2)* 10.00
 Physician *Dr. Scott*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *80* *8*
Sat - 5-15-43 - 210.98

Carey Hand Funeral Home

Name of deceased Mrs Ida May Cooper
 Date of death Apr-30-43 M
 Cause of death Not given on Permit
 Place of death St Petersburg Fla
 Residence _____
 Age 87 Y'rs 3 Mo's 12 Days _____
 Weight 90 Height 5 ft. 3 in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged Ralph Cooksey
 Address St Petersburg Fla
 Account guaranteed _____
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose Body Anna's
 Casket 11-A.M. May 14-43
 Casket with Copper Lin. _____
 Style of Casket Body Cremated
 No. of Casket 8-A.M. Sat
 Outside Box May-15-43
 Shipping Case or Vault Express Quin
 Handles Cooksey F. Home
 Pillow Set St Petersburg Fla
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

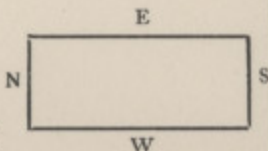
Cremation _____
 Urn wooden
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express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

37.50

Carey Hand Funeral Home

Name of deceased *Mrs Mary B. A. Horne*
 Date of death *Apr 19-43* M
 Cause of death *gt given in Permit*
 Place of death *St Petersburg Fla*
 Residence _____
 Age _____ Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged *Ralph Cookman*
 Address *St Petersburg Fla*
 Account guaranteed *OK*
 Address _____
 Embalming *Cremation* 32.50
 Robe, Suit, Dress _____
 Underwear and Hose *Body Unwired*
 Casket *by auto 11:45 AM Fri*
 Casket with Copper Lin. *May-14-43*
 Style of Casket _____
 No. of Casket *Body Cremated*
 Outside Box *P.M. Sat*
 Shipping Case or Vault *May-15-*
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

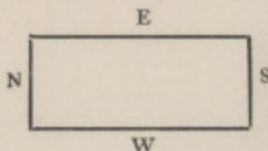
Cremation _____
 Urn *wooden*
 Single Grave *urn expressed to*
 Opening and Closing Grave _____
 Body Shipped to *James T. Pratt & Co*
 R. R. Ticket *71 Farmington AVE*
 Cash advanced _____
 Autos *Hartford Conn*
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of deceased *John A. Sheppard*
 Date of death *May-14-43* P.M.
 Cause of death *Myocarditis 17 years*
 Place of death *Outpatient Hospital*
 Residence *Wintu Garden*
 Age *79* Yrs *10* Mo's *8* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Sun May-16 1943* 5 P.M.
 Account charged *H. W. Sheppard*
 Address *Wintu Garden 442*
 Account guaranteed *Payments*
 Address _____
 Embalming *A. Dussing*
 Robe, Suit, Dress *Blue Sng*
 Underwear and Hose _____
 Casket *6-3-Gr Box*
 Casket with Copper Lin. *Yes*
 Style of Casket *Set 2-2*
 No. of Casket *1871-1*
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Wintu Garden*
 Section _____ Lot *19*

I Other Graves



X Grave on this date

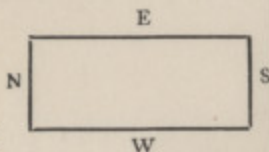
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave *T & etc* 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Rev F. Morgan*
 Music *Yes* 5.00
 Casket Wagon _____
 Physician *Dr. Tindall*
 County or City Burial _____
 Automobiles *S & S* 15.00
 Baggage or Express Train No. *26*

Spa of Wintu 10.00
Pd - Cash for same 262.50

Carey Hand Funeral Home

Name of deceased *Infant - Capt J. F. Mc Guire*
 Date of death *May - 16 - 43* *AM*
 Cause of death *Exhaustion in lead*
 Place of death *Ex. H.*
 Residence *Clermont Fla.*
 Age *Yrs* *Mo's* *Days*
 Weight *Height* *ft.* *in.* Eyes
 Funeral at *No service*
 Date *1943* *M*
 Account charged *Capt J. F. Mc Guire*
 Address *Clermont Fla.*
 Account guaranteed
 Address
 Embalming ☒
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *2-0* *W. H. H.* *10.00*
 Casket with Copper Lin.
 Style of Casket *Sgt. J. F. Mc*
 No. of Casket *Mc*
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles ☒
 Pillow Set ☒
 Name Plate *Guernwood*
 Cemetery *Guernwood*
 Section *Guernwood* Lot

I Other Graves



X Grave on this date

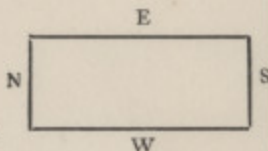
Cremation
 Urn
 Single Grave *Body Grave* *12.50*
 Opening and Closing Grave *4.50*
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram *✓ Father Bishop*
 Minister
 Music
 Casket Wagon
 Physician *Dr. Brann*
 County or City Burial
 Automobiles *Clared Pm & Son* *5.00*
 Baggage or Express Train No.

Leapt John F. Mc Guire *\$ 32.00*
266 - Inf - 66 - Div
Camp Blending

Carey Hand Funeral Home

Name of deceased *Mr August Schauble*
 Date of death *May 18 - 1943* AM
 Cause of death *Esophageal Cancer*
 Place of death *Delaware*
 Residence *Winter Park*
 Age *71* Y'rs. *9* Mo's. *12* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *West*
 Date *May* 1943 M
 Account charged *Mr August Schauble*
 Address *Winter Park Fla*
 Account guaranteed *Mrs Schauble*
 Address _____
 Embalming *& Dis* 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *4-6-92 Std-E* 300.00
 Casket with Copper Lin. ☒
 Style of Casket *Rice State*
 No. of Casket *6808*
 Outside Box *Reg.*
 Shipping Case or Vault ☒
 Handles *ext*
 Pillow Set *Set for casket*
 Name Plate ☒
 Cemetery *West*
 Section _____ Lot _____

I Other Graves



X Grave on this date

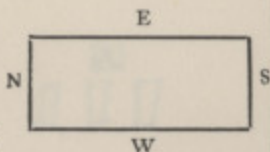
Cremation *Burial*
 Urn *Lansdale Penn*
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Philadelphia*
 R. R. Ticket *36.60* 47.40 84.00
 Cash advanced _____ 5.00
 Autos *5-15-43rd St*
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon *2* 10.00
 Physician *Dr. Harder*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. *92*

May - 21 - 43 - 434.00
Admission cash 66.00
Tolls arranged for the 500.00
Ans - 500.00
Pennsylvania Ins Co.
Delaware Fla -

Carey Hand Funeral Home

Name of deceased *Emma L. Brooks*
 Date of death *May 18* M
 Cause of death *Cerebral Hemorrhage*
 Place of death *C. G. K. Cincinnati*
 Residence *419 - W. Concord*
 Age *70* Yrs. *9* Mo's. *10* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Sunday May 23 1943* *5 P. M.*
 Account charged *Henry S. Brooks Jr*
 Address *419 - W. Concord*
 Account guaranteed _____
 Address _____
 Embalming & Dressing _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *Leis 649*
 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 *wood*
 Single Grave *Body Cremated*
 Opening and Closing Grave *8 - A. M.*
 Body Shipped to *Mon May - 24*
 R. R. Ticket _____
 Cash advanced *will call for*
 Autos _____
 Telegram _____
 Minister *Rev (Friend)*
 Music *Organ*
 Casket *Wagon*
 Physician *Dr. L. M. Cavan*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. *26*

35.00

60.00

50.00

2.49

5.00

Spa of Flowers 152.49
 10.00
 162.49

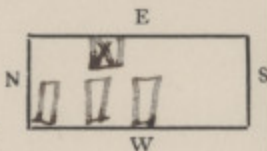
500 Flowers ordered by
 the Son Pd.

Carey Hand Funeral Home

Name of deceased Henry N. Ingram
 Date of death May 19 1943 54 M
 Cause of death Acute Coronary Occlusion
 Place of death Residence
 Residence 144 E. Church St.
 Age 58 Y'rs 9 Mo's 24 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Friday May 21 1943 10 A.M.
 Account charged Wm. Henry N. Ingram
 Address 144 E. Church St.
 Account guaranteed Estate
 Address _____
 Embalming Yes Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hosiery _____
 Casket 6-3- Gun M. 60th 275.00
 Casket with Copper Lin. _____
 Style of Casket State M. Cal
 No. of Casket _____
 Outside Box Yes
 Shipping Case or Vault Cement 60.00
 Handles Ext.
 Pillow Set Yes
 Name Plate _____
 Cemetery Greenwood
 Section U Lot 1

I Other Graves

Head of Grave
East -



X Grave on this date

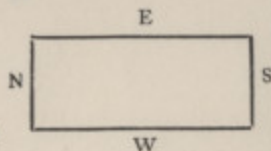
Cremation P.O. Can 5.00
 Urn Can 5.00
 Single Grave Family 5.00
 Opening and Closing Grave etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev. Rudder 5.00
 Music Music 5.00
 Casket Wagon U 5.00
 Physician Dr. Ryan
 County or City Burial _____
 Automobiles SVS 15.00
 Baggage or Express Train No. _____

425.00

Carey Hand Funeral Home

Name of deceased *Richard B. Odom*
 Date of death *Wed. May 19-43* M.P.
 Cause of death *Suppurative Edema*
 Place of death *St. J. H.*
 Residence *726 Washington St*
 Age *79* Y'rs *10* Mo's *11* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *West*
 Date _____ 194 _____ M
 Account charged *Debra Lewis*
 Address *Orlando Fla.*
 Account guaranteed *Payments*
 Address _____
 Embalming *Yes*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-6-11 In Box*
 Casket with Copper Lin. _____
 Style of Casket *Oct. H. Cap.*
 No. of Casket *1972 Tampa*
 Outside Box *Yes*
 Shipping Case or Vault _____
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Suffolk Va.*
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket *3355-3335-2725*

Cash advanced _____

Autos _____

Telegram _____

Minister *West*

Music _____

Casket Wagon _____

Physician *Dr. Knowles*

County or City Burial _____

Automobiles _____

Baggage or Express Train No. *92*

Ans 5-21-43

274.35

35.00

135.00

94.35

10.00

Carey Hand Funeral Home

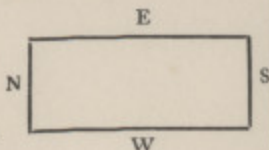
Name of deceased *Mrs. Gertrude E. Brunders*
 Date of death *May 20* *P.M.*
 Cause of death *Hypostatic Pneumonia*
 Place of death *Residence*
 Residence *749 W. Colonial*
 Age *91* Y's *4* Mo's *5* Days
 Weight *80* Height *5* ft *5* in. Eyes
 Funeral at *Chapel*
 Date *del May 22* 1943 *5* M
 Account charged *Am. J. B. Davis*
 Address *742 W. Col 8-*
 Account guaranteed
 Address
 Embalming *Yes* *35.00*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *6-3 in Box* *100.00*
 Casket with Copper Lin.
 Style of Casket *Del A C*
 No. of Casket *1872*
 Outside Box *Reg*
 Shipping Case or Vault
 Handles *del*
 Pillow Set *yes*
 Name Plate
 Cemetery *Woodlawn*
 Section *A* Lot *294*
space - 6
 I Other Graves
 X Grave on this date
 Cremation
 Urn
 Single Grave
 Opening and Closing Grave *Yes* *15.00*
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister *Rev Denny*
 Music *Organ* *5.00*
 Casket Wagon
 Physician *Dr. Redding*
 County or City Burial
 Automobiles *5.00*
 Baggage or Express Train No.

170.00

Carey Hand Funeral Home

Name of deceased Justin Harden
 Date of death May 20-43 5 P. M
 Cause of death _____
 Place of death Kuester Nursing Home
 Residence Conway Rd
 Age 42 Y'rs 7 Mo's 9 Days _____
 Weight 135 Height 5 ft 5 in. Eyes _____
 Funeral at Chapel
 Date Sat. May-22-1943 10 A M
 Account charged Frank Darden
 Address Conway Rd Box
 Account guaranteed Payments
 Address _____
 Embalming Y 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-5 the box 100.00
 Casket with Copper Lin. ✓
 Style of Casket Full D.C.
 No. of Casket 22 sample
 Outside Box Red
 Shipping Case or Vault ✓
 Handles short
 Pillow Set yes
 Name Plate ✓
 Cemetery Woodlawn
 Section _____ Lot _____

☐ Other Graves



☒ Grave on this date

Cremation auto 5.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave 7+dc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev
 Music Organ
 Casket Wagon (1) 5.00
 Physician Dr. Kish
 County or City Burial _____
 Automobiles 2 15.00
 Baggage or Express Train No. _____

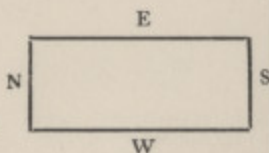
cc cork

775.00
100.00
75.00

Carey Hand Funeral Home

Name of deceased *Mr John Kilpatrick*
 Date of death *Fri May - 21-43* C.M.
 Cause of death _____
 Place of death *Res*
 Residence *1st Christmas*
 Age *64* Y'rs _____ Mo's _____ Days _____
 Weight *160* Height *5* ft. *9* in. Eyes _____
 Funeral at *Grave side*
 Date *Thurs June 27* 19*43* *3 P* M
 Account charged *Mrs J. Kilpatrick*
 Address *1st Christmas*
 Account guaranteed *Estate*
 Address _____
 Embalming *Yes* 35.⁰⁰
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3-12 Box* 115.⁰⁰
 Casket with Copper Lin. *Yes*
 Style of Casket *Ext. H.C.*
 No. of Casket *1472* 7
 Outside Box *Res*
 Shipping Case or Vault _____
 Handles *Ext*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *1st Christmas*
 Section _____ Lot _____

I Other Graves



X Grave on this date

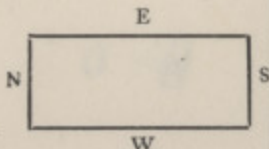
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave *Teile* 15.⁰⁰
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *by Family*
 Music _____
 Casket Wagon *Res* 10.⁰⁰
 Physician _____
 County or City Burial _____
 Automobiles *3 & 3* 15.⁰⁰
 Baggage or Express Train No. _____

\$90.00

Carey Hand Funeral Home

Name of deceased *Infant of Wm M Parish*
 Date of death *May 21-43* *11:50* *M P*
 Cause of death *Still Born Premature*
 Place of death *D. G. N.*
 Residence *2307 Adams st*
 Age *Yrs* *Mo's* *Days*
 Weight *ft.* *in.* *Eyes*
 Funeral at *194* *M*
 Date *May 21-43*
 Account charged *Adams*
 Address *2307 Adams st*
 Account guaranteed
 Address
 Embalming *Cremation*
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

Cremation *Boys Cremated Mon*
 Urn *wooden* *May-24-43*
 Single Grave *P.A.M.*
 Opening and Closing Grave
 Body Shipped to *will call for*
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician *Dr. Collins*
 County or City Burial
 Automobiles
 Baggage or Express Train No.

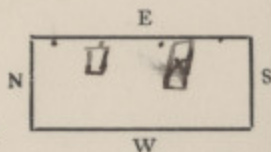
5.00

5.00

Carey Hand Funeral Home

Name of deceased Mrs L. S. Gullis
 Date of death May 16 M
 Cause of death not given in family
 Place of death Tampa
 Residence Tampa
 Age..... Yrs..... Mo's..... Days.....
 Weight..... Height..... ft..... in. Eyes.....
 Funeral at Grave Side
 Date Wed - 5-20 1943 2-P M
 Account charged Mrs L. S. Gullis
 Address
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-6- in cloth
 Casket with Copper Lin. 4-e
 Style of Casket Side h-e
 No. of Casket
 Outside Box
 Shipping Case or Vault Cement 60.00
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Greenwood
 Section V Lot 49

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave Teile 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon (1) 5.00
 Physician
 County or City Burial
 Automobiles 8.45 15.00
 Baggage or Express Train No. 95.00

Carey Hand Funeral Home

Name of deceased John C. Stewart.
 Date of death May 12 2 A.M.
 Cause of death Heart Attack
 Place of death Residence
 Residence Orlando Fla.
 Age 57 Y'rs 3 Mo's 20 Days
 Weight 150 Height 5 ft. 5 in. Eyes —
 Funeral at Eiselstein-Wigginton H.
 Date Sat May 22 1943 3 P.M.
 Account charged Eiselstein-Wigginton
 Address Orlando Fla.
 Account guaranteed Check
 Address —
 Embalming —
 Robe, Suit, Dress Cremation 37.50
 Underwear and Hose —
 Casket —
 Casket with Copper Lin. —
 Style of Casket Body arrived
 No. of Casket at old Crematory
 Outside Box Monday 10:30 a.m.
 Shipping Case or Vault May 24-43
 Handles —
 Pillow Set —
 Name Plate Body Cremated
 Cemetery 1:30 p.m. Monday
 Section May 24-34 Lot —

E

I Other Graves

N

S

X Grave on this date

W

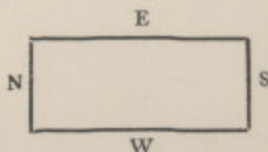
Cremation Ashes delivered
 Urn to Eiselstein-Wigginton
 Single Grave Home
 Opening and Closing Grave Orlando Fla.
 Body Shipped to Tuesday 2 p.m.
 R. R. Ticket May 25-43
 Cash advanced —
 Autos —
 Telegram —
 Minister —
 Music —
 Casket Wagon —
 Physician —
 County or City Burial —
 Automobiles —
 Baggage or Express Train No. —

37.50

Carey Hand Funeral Home

Name of deceased Thomas John Connolly
 Date of death May 23rd 7:25 P. M.
 Cause of death accidental poisoning with
 Place of death C. Y. N. Phenocetin
 Residence Winters Park Fla.
 Age 1 Yrs. 6 Mo's. 7 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Restoration
 Date May 1943 3 M
 Account charged ft. Col. Jas C. Connolly
 Address Winters Park Fla
 Account guaranteed check
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hosiery _____
 Casket 3/6 White Plush 125.00
 Casket with Copper Lin. _____
 Style of Casket Slip top
 No. of Casket 43 Shores
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles Set
 Pillow Set yes
 Name Plate _____
 Cemetery Restoration
 Section _____ Lot _____

I Other Graves



X Grave on this date

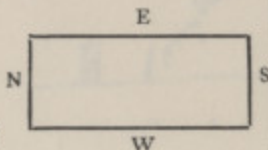
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Waco, Texas by
 R. R. Ticket Air plane
 Cash advanced _____
 Autos _____
 Telegram 1-124
 Minister Rest.
 Music _____
 Casket Wagon 2 trips 10.00
 Physician Dr. Allen Jones
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

Remains taken by 170.00
Air Plane Tuesday
9 A.M. May 25-43
to Waco, Texas

Carey Hand Funeral Home

Name of deceased Irene Maye Howard
 Date of death May 24 10:10 P.M.
 Cause of death Pneumonia - lobar (left)
 Place of death C. G. F.
 Residence Apopka, Fla.
 Age 33 Y'rs 2 Mo's 14 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graveside
 Date May 27 Thurs 1943 3 P.M.
 Account charged Leah N. Howard
 Address Apopka, Fla.
 Account guaranteed Insurance
 Address _____
 Embalming ☒ Dressing
 Robe, Suit, Dress Pink 15.00
 Underwear and Hose 12.50
 Casket 6-3 Gr 6th 2-Tone 275.00
 Casket with Copper Lin. _____
 Style of Casket State of Cal.
 No. of Casket 4018 Shower
 Outside Box Reg.
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set yes
 Name Plate ✓
 Cemetery Apopka
 Section _____ Lot _____

I Other Graves



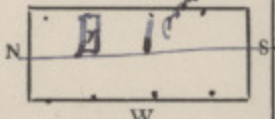
X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister My Family
 Music _____
 Casket Wagon (1) 5.00
 Physician Dr. C. J. Collins
 County or City Burial _____
 Automobiles 5.00 15.00
 Baggage or Express Train No. _____

Cash

357.50
200.00
157.50

Carey Hand Funeral Home

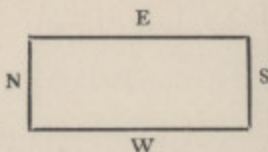
Name of deceased *Mrs Christina Glynn*
 Date of death *Tues May - 25-43* P.M.
 Cause of death _____
 Place of death *Res-*
 Residence *1200 S. 4th Ave*
 Age *83* Y'rs. *11* Mo's. *19* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Friday May 28* 1943 *10 A.M*
 Account charged *A. E. Harr*
 Address *1200 S. Robinson*
 Account guaranteed *Estate*
 Address _____
 Embalming *Yes*
 Robe, Suit, Dress *Robo #2945* 19.50 35.00
 Underwear and Hosiery 2.00 15.00
 Casket *6-6-3 6 1/2* 185.00 2.00
 Casket with Copper Lin. _____
 Style of Casket *Set H. Col.*
 No. of Casket *3218 Adams*
 Outside Box _____
 Shipping Case or Vault *Cement* 60.00
 Handles *Set*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Greenwood*
 Section _____ Lot _____
A.L. Ston Lot
 I Other Graves 
 X Grave on this date _____
 Cremation *P.O. Car* 5.00
 Urn *Lead Car* 5.00
 Single Grave *Car man* 5.00
 Opening and Closing Grave *etc* 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Lindsay M. Hall*
 Music *Organ* 5.00
 Casket Wagon *(1)*
 Physician *Dr. H. M. Egan*
 County or City Burial _____
 Automobiles *875* 15.00
 Baggage or Express Train No. _____

347.00

Carey Hand Funeral Home

Name of deceased *Mr John Jespersen.*
 Date of death *Tues May - 28-43* P.M.
 Cause of death *Cancer of Stomach*
 Place of death *Holme Nursing Home*
 Residence *Orlando R.F.D. #2*
 Age *84* Y'rs *7* Mo's *11* Days
 Weight *160* Height *5* ft. *7* in. Eyes
 Funeral at *Chapel*
 Date *Thurs May 27 1943* 3 P.M.
 Account charged *Geo. J. Jespersen*
 Address *Orlando R.F.D. #2*
 Account guaranteed
 Address
 Embalming *Yes*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *See 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
 Urn *wooden*
 Single Grave *Body cremated*
 Opening and Closing Grave *8-AM*
 Body Shipped to *Sat May - 29-43*
 R. R. Ticket
 Cash advanced *will call for*
 Autos
 Telegram
 Minister *Rev Liden*
 Music
 Casket Wagon *11*
 Physician *Dr. Ogles.*
 County or City Burial
 Automobiles
 Baggage or Express Train No.

Reverend Luther
Minister

35.00

60.00

50.00

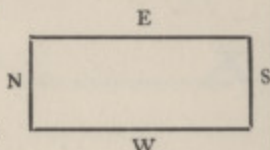
5.00

150.00

Carey Hand Funeral Home

Name of deceased *Mrs Catherine V. M. Howard*
 Date of death *Wed May-26-43* 5:25 PM
 Cause of death *metastatic carcinoma of lung*
 Place of death *O.S.H.*
 Residence *Mt Airy, N.C.*
 Age *25* Yrs *19* Mo's *19* Days
 Weight *100* Height *5ft-3* in. Eyes
 Funeral at *Home*
 Date *May* 1943 M
 Account charged *Mrs. Party Box*
 Address *170 Cherry St Mt Airy N.C.*
 Account guaranteed *Cash & Payments*
 Address
 Embalming *Yes*
 Robe, Suit, Dress *Yes*
 Underwear and Hose *Yes*
 Casket *4-3 Rego Blush* 350.00
 Casket with Copper Lin. *Yes*
 Style of Casket *Set 1/2 - C*
 No. of Casket *2638-1/2 - Shrier*
 Outside Box *Reg*
 Shipping Case or Vault *Yes*
 Handles *Ext*
 Pillow Set *yes*
 Name Plate *Yes*
 Cemetery *Hamptonsville N.C.*
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Winston Salem N.C.*
 R. R. Ticket *22.55 - 152.9*
 Cash advanced *152.9 152.9*
 Autos *amb 4 hrs*
 Telegram
 Minister
 Music
 Casket Wagon *Q* 10.00
 Physician *Dr. H. M. Evans*
 County or City Burial
 Automobiles
 Baggage or Express Train No. *92*

Thurs May-27-43 473.42
city park 245.87
Red Cross will pay 227.55
The Sister Mrs Cox will pay 27.55

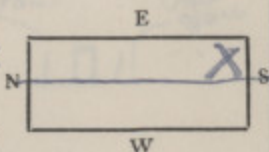
Carey Hand Funeral Home

Name of deceased Mr. John Frank Deasy
 Date of death May 22nd 3:38 P.M.
 Cause of death Auto accident fractured skull
 Place of death Highway near Del. & Limb.
 Residence 402 E. Church St. Deland Fla
 Age 29 Yrs 2 Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Chapel
 Date Friday May 28, 1943 11 A.M.
 Account charged Mr. John F. Deasy
 Address 402 E. Church St. Deland Fla
 Account guaranteed Cash
 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 Cement 60.00
 Handles
 Pillow Set
 Name Plate
 Cemetery Greenwood
 Section N E 1/2 Lot 32

I Other Graves

Lot bought Direct



X Grave on this date

Cremation	<u>P. B. Car</u>	<u>5.00</u>
Urn	<u>Car main</u>	<u>5.00</u>
Single Grave		
Opening and Closing Grave	<u>etc</u>	<u>15.00</u>
Body Shipped to		<u>2.42</u>
R. R. Ticket	<u>N. Y. via N.Y. & More</u>	<u>71.05</u>
Cash advanced	<u>for expenses</u>	<u>2.65</u>
Autos	<u>2.00 phone</u>	
Telegram		
Minister	<u>Dean Johnson</u>	<u>5.00</u>
Music	<u>yes</u>	<u>5.00</u>
Casket Wagon	<u>(1)</u>	
Physician		
County or City Burial		
Automobiles	<u>545</u>	<u>15.00</u>
Baggage or Express Train No.		

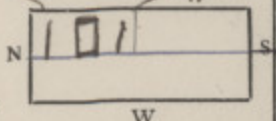
184.17

Carey Hand Funeral Home

Name of deceased Elihu Ware
 Date of death May 23 M
 Cause of death Suit
 Place of death Bag Pines
 Residence Islands Rt 1- B-2 428
 Age Y'rs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Chapel
 Date Thurs May 27 1943 11-A M
 Account charged Mrs. Hattie Ware
 Address
 Account guaranteed Ralph Lewis & Son
 Address

Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3- Oct 4 Plush
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Guernsey
 Section J- # 12 Lot 147

I Other Graves



X Grave on this date

Cremation	<u>2 Family car</u>	<u>10.00</u>
Urn	<u>P. B. car</u>	<u>5.00</u>
Single Grave	<u>one car</u>	<u>5.00</u>
Opening and Closing Grave	<u>etc</u>	<u>15.00</u>
Body Shipped to		
R. R. Ticket		
Cash advanced		
Autos		
Telegram		
Minister	<u>W. T. Higgins</u>	
Music	<u>Organ</u>	
Casket Wagon	<u>(1)</u>	<u>5.00</u>
Physician		
County or City Burial		
Automobiles	<u>S. V. S.</u>	<u>15.00</u>
Baggage or Express Train No.		

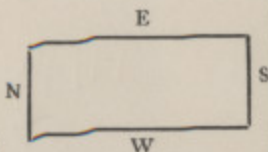
55.00

Maj. Grant & Leger
at the Grave side

Carey Hand Funeral Home

Name of deceased _____
 Date of death Wed - May - 24 Lane P.M.
 Cause of death _____
 Place of death O.G.H.
 Residence Clement
 Age _____ Yrs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged No Charge
 Address _____
 Account guaranteed _____
 Address _____
 Embalming yes
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Bro from Home City
 Casket with Copper Lin. Came for
 Style of Casket Body -
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



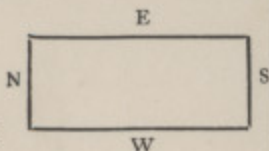
X Grave on this date

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

Carey Hand Funeral Home

Name of deceased *Infant of F K Stueb*
 Date of death *May 27-1943* *620 M A*
 Cause of death *Infant*
 Place of death *Infant*
 Residence *1st Christmas*
 Age *Y's* *Mo's* *Days*
 Weight *Height* *ft* *in* *Eyes*
 Funeral at *Grave Side*
 Date *Thurs May 27* *1943* *4 P M*
 Account charged *F K Stueb*
 Address *1st Christmas*
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket *2-0-11*
 Casket with Copper Lin.
 Style of Casket *Open*
 No. of Casket
 Outside Box *Reg*
 Shipping Case or Vault
 Handles *Small*
 Pillow Set
 Name Plate
 Cemetery *1st Christmas*
 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 *Took body out*
 Autos *at same time as the*
 Telegram *Kept in funeral*
 Minister
 Music *No Extra Service*
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

12 50

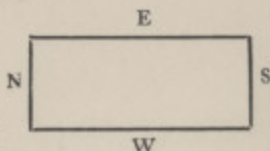
5 00

17.50

Carey Hand Funeral Home

Name of deceased *Mrs Margaret Stuart*
 Date of death *May 28 1943* *8:45 MA*
 Cause of death
 Place of death *Tula Dept*
 Residence *Clumment -*
 Age *55* Y'rs *11* Mo's *8* Days
 Weight Height ft. in. Eyes
 Funeral at *Chapel*
 Date *Sun May 30 1943* *3 P M*
 Account charged *Mrs E. Stuart*
 Address
 Account guaranteed
 Address
 Embalming *yes*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *Sun Chy*
 Casket with Copper Lin.
 Style of Casket *Body Casketed*
 No. of Casket *8- off on*
 Outside Box *Nov. May - 31-43*
 Shipping Case or Vault
 Handles *will call for*
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

Cremation *cremation* *50.00*
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced *Spa of Sharon* *5.00*
 Autos
 Telegram
 Minister *Rev*
 Music *Organ* *5.00*
 Casket Wagon
 Physician *Dr. Egan*
 County or City Burial
 Automobiles
 Baggage or Express Train No.

Mrs Stuart paid 55.00 cash for the Minister

55.00

Carey Hand Funeral Home

Name of deceased Ensign Robt John Haggerty
 Date of death May 14 - 43 M
 Cause of death uncl. Cause
 Place of death in Bay Seattle Wash -
 Residence Winton Road
 Age 22 Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at St James Catholic Church
 Date Tues. June - 1 - 1943 9:30 A M
 Account charged Robt J. Haggerty
 Address
 Account guaranteed
 Address

Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-6 Bay Tree
 Casket with Copper Lin.
 Style of Casket slate
 No. of Casket not
 Outside Box Red Cement Vault 600
 Shipping Case or Vault
 Handles ext
 Pillow Set
 Name Plate
 Cemetery Woodlawn
 Section 21. Bought Street Lot

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

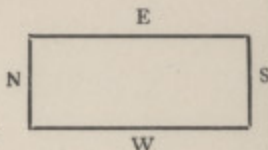
Cremation 2 - P. B. Car 10.00
 Urn Car 5.00
 Single Grave Car Family 5.00
 Opening and Closing Grave 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Father Bishop
 Music by Church 5.00
 Casket Wagon (1)
 Physician
 County or City Burial
 Automobiles S. X. S 15.00
 Baggage or Express Train No.

115.00

Carey Hand Funeral Home

Name of deceased *Miss Kate E. Turner*
 Date of death *May 28-43* M
 Cause of death *not given on Permit*
 Place of death *Home*
 Residence *Knawles Ave W. Park*
 Age *24* Yrs. Mo's Days
 Weight Height ft. in. Eyes
 Funeral at
 Date 194 M
 Account charged *Emulstein & Huggins*
 Address
 Account guaranteed *Cash*
 Address
 Embalming *Cremation* 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket *9 x 9*
 Casket with Copper Lin. *Body Annie*
 Style of Casket *10 - A.M. Sun 5-30*
 No. of Casket
 Outside Box *Body Cremated*
 Shipping Case or Vault
 Handles *8 - A.M. Mon 5-31-43*
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

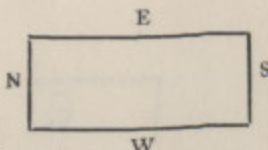
Cremation
 Urn *wooden*
 Single Grave *Other Del X*
 Opening and Closing Grave
 Body Shipped to *Emulstein & Huggins*
 R. R. Ticket *Home*
 Cash advanced *E. Church st*
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Mrs Gertrude R. Brink
 Date of death Jan May-30-43 M
 Cause of death _____
 Place of death Res
 Residence Old Apopka Rd
 Age 75 Yrs 2 Mo's 24 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Methodist Church - Apopka
 Date Wed June 2nd 1943 P. M.
 Account charged Richard Voelkel
 Address Apopka, Fla.
 Account guaranteed Estate
 Address _____
 Embalming ☒ Pressing 35.00
 Robe, Suit, Dress White Dress 7.50
 Underwear and Hose _____ 5.00
 Casket 4 1/2 x 12 x 12 175.00
 Casket with Copper Lin. _____ 2.00
 Style of Casket _____
 No. of Casket 31 Tampa
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Old Cemetery - Apopka
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Sargent & Son, M. C. Cook
 Music _____ 5.00
 Casket Wagon _____
 Physician Dr. T. W. Smith
 County or City Burial _____
 Automobiles _____ 15.00
 Baggage or Express Train No. _____

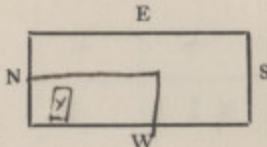
Total paid in 10.00

9 54.50
 9 4.50
 250.00

Carey Hand Funeral Home

Name of deceased Olga Nordberg
 Date of death May 27 M
 Cause of death Cause not given on Removal
 Place of death Rochester, Minn. Funeral
 Residence _____
 Age 47 Y's _____ Mo's _____ Days _____
 Weight 100 Height 5 ft 2 in. Eyes _____
 Funeral at Chapel
 Date Tues June 1st 1943 4 P M
 Account charged Hugo Nordberg
 Address Delande Fla
 Account guaranteed Ins -
 Address _____
 Embalming 675
 Robe, Suit, Dress Blue-Tan 18.00
 Underwear and Hose _____
 Casket Amee Big-Turn
 Casket with Copper Lin. _____
 Style of Casket State A. C. Y
 No. of Casket National
 Outside Box ✓
 Shipping Case or Vault Cement 60.00
 Handles Ext
 Pillow Set _____
 Name Plate Hugo & Olga
 Cemetery Greenwood
 Section 3 N W 1/4 Lot 3

I Other Graves



X Grave on this date

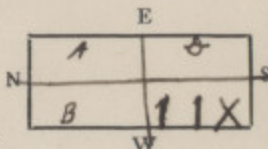
Cremation P.O. Car 5.00
 Urn Car Min 3.00
 Single Grave Family Car 3.00
 Opening and Closing Grave etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles 5.00 15.00
 Baggage or Express Train No. 2

128.00

Carey Hand Funeral Home

Name of deceased John H. Wesson
 Date of death May 29 M
 Cause of death No Cause given
 Place of death Res Lake Alfred
 Residence _____
 Age 79 Y'rs _____ Mo's _____ Days _____
 Weight 165 Height 5 ft. 6 in. Eyes _____
 Funeral at Graceland
 Date Monday May 31 1943 3:30 PM
 Account charged Office Wesson
 Address Lake Alfred Fla
 Account guaranteed Cash
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 Spr. St. Cap
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Palm Cemetery
 Section 42 Lot C

I Other Graves



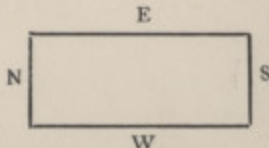
X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon 41 5 00
 Physician _____
 County or City Burial _____
 Automobiles SVS 15 00
 Baggage or Express Train No. _____
 Total 35 00
 Paid Cash 25 00

Carey Hand Funeral Home

Name of deceased Alonso P. Hoffman
 Date of death May 27 M
 Cause of death Cause not given
 Place of death Lakeland Fla
 Residence Lakeland Fla
 Age 68 Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Lakeland Fla
 Date 1943 M
 Account charged Gentry - Marston F.N.
 Address Lakeland Fla
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress Cremation 37 50
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket
 No. of Casket Body arrived
 Outside Box by express Monday
 Shipping Case or Vault 2:18 P.M.
 Handles May 31-43
 Pillow Set
 Name Plate Body Cremated
 Cemetery Tuesday 8 A.M.
 Section June 1-43 Lot

I Other Graves



X Grave on this date

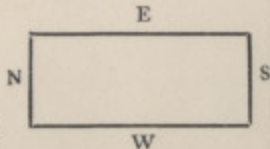
Cremation Ashes expressed
 Urn to
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram Hold Ashes
 Minister until notified
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.00

Carey Hand Funeral Home

Name of deceased Lila Mae Moore
 Date of death May 31 3:20 P
 Cause of death Cancer of Ovary
 Place of death P. G. N.
 Residence Gellwood Fla
 Age 38 Yrs Mo's 7 Days
 Weight 90 Height 5 ft 4 in. Eyes
 Funeral at Chapel
 Date Wed June 2 1943 5 P
 Account charged W. P. Moore
 Address Gellwood Fla
 Account guaranteed lets
 Address
 Embalming Shrading
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3 St Joe
 Casket with Copper Lin.
 Style of Casket St. Cap
 No. of Casket 31 Tampa
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext
 Pillow Set yes
 Name Plate
 Cemetery Brimation
 Section Lot

I Other Graves



X Grave on this date

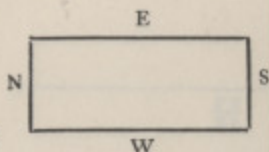
Cremation 50.00
 Urn wooden
 Single Grave Body terminated
 Opening and Closing Grave P. & M.
 Body Shipped to Tampa June 3-43
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Rev. M. G. Harris
 Music yes Organ
 Casket Wagon 41 5.00
 Physician Dr. J. Collins
 County or City Burial
 Automobiles
 Baggage or Express Train No. 265.00

Express Am X
Richmond and Gety
Taylors Penn
W. P. Moore
% John D. Crawford
Taylors Penn Rt One

Carey Hand Funeral Home

Name of deceased *Mrs. Mathilda Hogging*
 Date of death *Thursday June 17* M
 Cause of death *Ag. St.*
 Place of death *Ag. St.*
 Residence *532 2nd St. S. Ave. Duland.*
 Age *72* Y'rs. *1* Mo's. *17* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date _____ 194 _____ M
 Account charged *Helen Van Murbke*
 Address *352 2nd St. S. Ave. Duland.*
 Account guaranteed *Ins. & Payments*
 Address _____
 Embalming *Yes* 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3-4 1/2* 150.00
 Casket with Copper Lin. _____
 Style of Casket *Top H. Cap.*
 No. of Casket *Tempa 31*
 Outside Box _____
 Shipping Case or Vault *Cement* 60.00
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Greenwood*
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation *P. G.* 5.00
 Urn *Can. Min.* 5.00
 Single Grave _____ 15.00
 Opening and Closing Grave *& etc.*
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Rev. Brownlee of Ind.*
 Music *Yes*
 Casket Wagon *12 1/2*
 Physician *Dr. H. Day*
 County or City Burial _____
 Automobiles *3 x 2* 15.00
 Baggage or Express Train No. _____

285.00

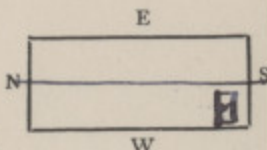
Carey Hand Funeral Home

Name of deceased Frank Carl Rajcany
 Date of death June 1 1943 M.
 Cause of death _____
 Place of death Residence
 Residence 2032 W. South St
 Age 51 Y'rs 9 Mo's 8 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Thurs June 3rd 1943 2 P. M.
 Account charged Mrs. Frank C. Rajcany
 Address 2032 W. South St
 Account guaranteed Insurance
 Address _____
 Embalming ✓ Dressing 35.00
 Robe, Suit, Dress Blk 10.00
 Underwear and Hose _____ 85.00
 Casket 4-3- in oak
 Casket with Copper Lin. _____
 Style of Casket Sgt. H. C.
 No. of Casket 72 - Temp.
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Cot
 Pillow Set Yls
 Name Plate _____
 Cemetery Greenwood
 Section I W 1/2 - 44 Lot _____

I Other Graves

Paid 1/2 SW 1/4
Bel in Pough

X Grave on this date



Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave etc

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Autos _____

Telegram _____

Minister Farther Smith

Music _____

Casket Wagon 41

Physician _____

County or City Burial _____

Automobiles 5.55

Baggage or Express Train No. _____

Co. 4 to 6

215.00

42.50

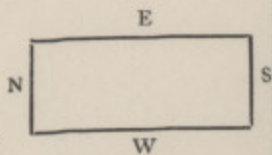
172.50

Carey Hand Funeral Home

Name of deceased Chas. Friend
 Date of death Wed June 2 - 43 P.M.
 Cause of death O.G.M.
 Place of death O.G.M.
 Residence New York
 Age 67 Yrs. Mo's. Days
 Weight 180 Height 5 ft. 8 in. Eyes
 Funeral at Rest
 Date 194 M
 Account charged Halter Williams F.S.
 Address 152 E 74 St N.Y. City
 Account guaranteed H. W. Lick
 Address
 Embalming 40
 Robe, Suit, Dress
 Underwear and Hose
 Casket 4-3- In Box
 Casket with Copper Lin.
 Style of Casket Spruce
 No. of Casket 72 - Tampa
 Outside Box Reg
 Shipping Case or Vault
 Handles that
 Pillow Set yes
 Name Plate
 Cemetery Rest
 Section Lot

35.00
 12.00
 90.00

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to New York
 R. R. Ticket
 Cash advanced Express 7654-2.30
 Autos
 Telegram (1)
 Minister
 Music
 Casket Wagon (2)
 Physician Dr. Beardsall
 County or City Burial
 Automobiles
 Baggage or Express Train No. 24

78.86
 1.14

10.00

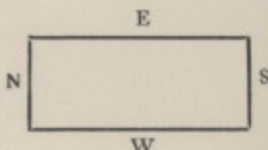
Thursday Night June 3-43 227.00
2.00

#2252

Carey Hand Funeral Home

Name of deceased Adolph R. Shaw
 Date of death June 2 11:00 M
 Cause of death _____
 Place of death O. Y. N.
 Residence 217 S. Bunch St
 Age 56 Y'rs 7 Mo's 14 Days
 Weight _____ Height _____ ft _____ in Eyes _____
 Funeral at Chapel
 Date Sat June 5 1943 4 P.M.
 Account charged Mr Myrtle J. Shaw
 Address 217 S. Bunch St
 Account guaranteed Insurance
 Address _____
 Embalming Yes Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket See Chg 50.00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Columbian
 Section _____ Lot _____

I Other Graves



X Grave on this date

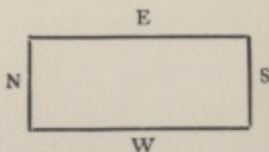
Cremation _____ 50.00
 Urn wooden
 Single Grave Body cremated
 Opening and Closing Grave 8-AM
 Body Shipped to Mem June 7-43
 R. R. Ticket _____
 Cash advanced will call for
 Autos _____
 Telegram _____
 Minister Rev A. Fred Turner
 Music Organ 5.00
 Casket Wagon 1
 Physician _____
 County or City Burial _____
 Automobiles rent 5.00
 Baggage or Express Train No. 7

150.00

Carey Hand Funeral Home

Name of deceased Bruce Lewis Davis
 Date of death Sat June 5-43 7 A M
 Cause of death Q&A
 Place of death Q&A
 Residence 736 N. 9th Ave
 Age 20 Y'rs 9 Mo's — Days —
 Weight — Height — ft. — in. Eyes —
 Funeral at Chapel Memorial Ser
 Date Mon June 7-43 194 M
 Account charged Mrs Paul Davis
 Address —
 Account guaranteed small insurance
 Address —
 Embalming Care of Body 15.00
 Robe, Suit, Dress —
 Underwear and Hose — 25.00
 Casket See Chg
 Casket with Copper Lin. —
 Style of Casket —
 No. of Casket —
 Outside Box —
 Shipping Case or Vault —
 Handles —
 Pillow Set —
 Name Plate —
 Cemetery —
 Section — Lot —

I Other Graves



X Grave on this date

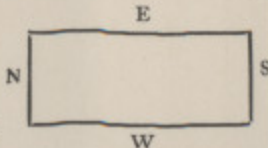
Cremation Cremation 50.00
 Urn —
 Single Grave Body Cremated
 Opening and Closing Grave —
 Body Shipped to S-A-M. Sur
 R. R. Ticket June 6-43
 Cash advanced —
 Autos Will Call for
 Telegram —
 Minister —
 Music —
 Casket Wagon (1) 5.00
 Physician —
 County or City Burial —
 Automobiles Amul Sur 5.00
 Baggage or Express Train No. —

100.00

Carey Hand Funeral Home

Name of deceased Chas M Hall
 Date of death June 3-43 M
 Cause of death Not given on Permit
 Place of death Lakeland
 Residence _____
 Age 76 Y'rs. _____ Mo's. _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Lakeland Fla
 Date _____ 194 _____ M
 Account charged Gentry Morrison F. Home
 Address Lakeland Fla
 Account guaranteed OK
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Body
 Style of Casket wood
 No. of Casket Express
 Outside Box June 5-43 2:15 PM
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body Cremated
 Name Plate 8-A M
 Cemetery June 6-1943
 Section _____ Lot _____

I Other Graves



X Grave on this date

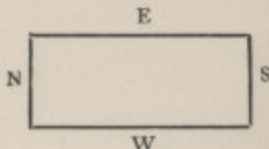
Cremation _____
 Urn wooden
 Single Grave Chas Expressed to
 Opening and Closing Grave _____
 Body Shipped to Kelser F. Home
 R. R. Ticket Marshall much
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles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

37.50

Carey Hand Funeral Home

Name of deceased *Mr Alexander Watanen*
 Date of death *Sun June 6-1943* *7:30 A.M.*
 Cause of death *Acc.*
 Place of death *Acc.*
 Residence *Fenny Farms Wa*
 Age *68* Yrs *3* Mo's *—* Days *—*
 Weight *150* Height *5* ft. *2* in. Eyes *—*
 Funeral at *Chapel*
 Date *Mon June 7, 1943* *P.M.*
 Account charged *Mrs - Elsa Harkka*
 Address *Fenny Farms Wa*
 Account guaranteed *OK*
 Address *—*
 Embalming *Yes*
 Robe, Suit, Dress *—*
 Underwear and Hose *—*
 Casket *See Chg*
 Casket with Copper Lin. *—*
 Style of Casket *Oct. H. C*
 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*
 Urn *wooden*
 Single Grave *—*
 Opening and Closing Grave *Body*
 Body Shipped to *Cremated*
 R. R. Ticket *S-A. M. June 6-8-43*
 Cash advanced *—*
 Autos *—*
 Telegram *—*
 Minister *Mark A. Hobbs*
 Music *Organ*
 Casket Wagon *(1) Gray*
 Physician *Dr. Gray*
 County or City Burial *—*
 Automobiles *—*
 Baggage or Express Train No. *—*

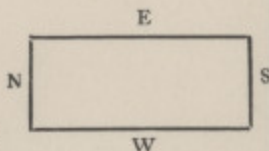
ery tel

175.00

Carey Hand Funeral Home

Name of deceased Mr. Toba Hannus
 Date of death June 8 11:30 P.M.
 Cause of death Coronary Occlusion
 Place of death Residence
 Residence 337 Concede Leon Place
 Age 48 Y'rs. 9 Mo's. 29 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Elstination
 Date June 1943 M
 Account charged Mr. Alfred Hannus
 Address 337 Concede Leon Place
 Account guaranteed _____
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Of Metal Coffin 445.00
 Casket with Copper Lin. _____
 Style of Casket State Full Arch
 No. of Casket 2019 Casket Bros
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Yes
 Pillow Set Yes
 Name Plate _____
 Cemetery Pittsburgh Pa
 Section _____ Lot _____

I Other Graves



X Grave on this date

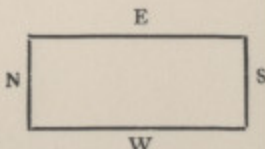
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket Express 81.74
 Cash advanced Tax 2.85
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 92 \$374.19

Wed 2:18 P.M. 6/9-43
Cas. signed to -
Ralph Schugas - P.D.
Pittsburgh Pa.

Carey Hand Funeral Home

Name of deceased Sgt Benj Bradford Odell
 Date of death June 5-43 M
 Cause of death _____
 Place of death _____
 Residence Miami Beach Fla
 Age 35 Y'rs 9 Mo's 35 Days
 Weight 200 Height 6 ft 4 in. Eyes _____
 Funeral at Crematory Chapel
 Date Wed-6-9-43 1943 4 P M
 Account charged Edge F. Home
 Address Shoreland Fla
 Account guaranteed OK
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Body Arrived
 Style of Casket by auto from
 No. of Casket Sample 230 PM
 Outside Box Wed June 9-43
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body in Sealed Case
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

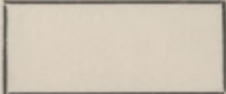
Cremation Body Cremated
 Urn 8-A M Thurs June 10-43
 Single Grave _____
 Opening and Closing Grave will
 Body Shipped to Call for
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev. Friends of Church
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

was killed in Manassas
large truck 18. other killed
same accident

37.50

Carey Hand Funeral Home

Name of deceased Mrs Nellie S. Savage
 Date of death Thurs June 10-43 AM
 Cause of death Bronchitis Pneumonia
 Place of death Res
 Residence Easton Tla
 Age 64 Y'rs 5 Mo's 17 Days
 Weight 20 Height 5 ft 2 in. Eyes
 Funeral at Chapel
 Date Sat June 12 1943 4 P M
 Account charged M
 Address
 Account guaranteed
 Address
 Embalming Yes
 Robe, Suit, Dress
 Underwear and Hose
 Casket See Chg
 Casket with Copper Lin
 Style of Casket Set No
 No. of Casket 1972
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles ☒
 Pillow Set Yes
 Name Plate
 Cemetery Union
 Section Lot

I Other Graves
 X Grave on this date


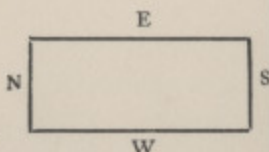
Cremation Cremation
 Urn wooden
 Single Grave
 Opening and Closing Grave
 Body Shipped to Body Cremated
 R. R. Ticket S-A-M. Sun
 Cash advanced June 13-43
 Autos
 Telegram
 Minister Dean Johnson
 Music Organ
 Casket Wagon (1)
 Physician Dr. Jones
 County or City Burial
 Automobiles
 Baggage or Express Train No.

Dr. Ken P. M.
A.M. Sun-6-13-43

150.00
175.00

Carey Hand Funeral Home

Name of deceased *Mr Roy W. Kelley*
 Date of death *June 8-43* *MA*
 Cause of death
 Place of death *Troy Ala*
 Residence *3202 Middlesex Rd Oaklands*
 Age Yrs Mo's Days
 Weight Height ft in Eyes
 Funeral at *Chapel*
 Date *Tue June 11-1943* *10-A M*
 Account charged *Mrs Kelley*
 Address *3202 Middlesex Rd*
 Account guaranteed
 Address
 Embalming *Changing of Body*
 Robe, Suit, Dress
 Underwear and Hose
 Casket *See Casket* *25.00*
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot
 I Other Graves
 X Grave on this date
 Cremation *Cremation* *50.00*
 Urn
 Single Grave
 Opening and Closing Grave *Body*
 Body Shipped to *Cremated*
 R. R. Ticket *8-A.M. Sat June*
 Cash advanced *12-43*
 Autos *Make Call for Ashes*
 Telegram
 Minister *Rev Denny*
 Music *Organ*
 Casket Wagon *(1)*
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.



Body arrived 922 #75
Thursday morning 6-10-43

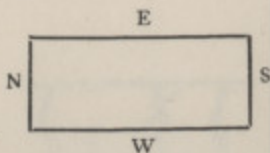
75.00

Carey Hand Funeral Home

Name of deceased Mr. Cyrus M. Arnold
 Date of death June 8-1943 M
 Cause of death not given on Permit
 Place of death Sarasota
 Residence Cocoa Fla
 Age 72 Y'rs. 8 Mo's. Days
 Weight 160 Height 6 ft 2 in. Eyes
 Funeral at
 Date 1943 M
 Account charged Edith A. Stanback
 Address Cocoa Fla
 Account guaranteed
 Address
 Embalming Cremation
 Robe, Suit, Dress 3 Thacker
 Underwear and Hose Sanbilder
 Casket
 Casket with Copper Lin.
 Style of Casket Oct Kings Pop
 No. of Casket
 Outside Box Body arrived Orlando
 Shipping Case or Vault 115 A M
 Handles Trans June 10-43
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

50.10
 12.50
 32.50

I Other Graves



X Grave on this date

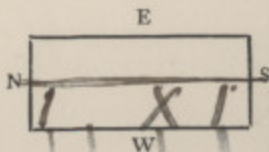
Cremation
 Urn wooden
 Single Grave will call
 Opening and Closing Grave
 Body Shipped to Body cremated
 R. R. Ticket 8-A On that June
 Cash advanced 12-43
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

32.50

Carey Hand Funeral Home

Name of deceased *Mrs Ida C Brown*
 Date of death *Thurs June 10-43* *8* M *7*
 Cause of death *O. G. H.*
 Place of death *O. G. H.*
 Residence *1600 Philadelphia St*
 Age *87* Y'rs. *11* Mo's. *10* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Fri June 11-* 194*3* *5 P. M*
 Account charged *Willis Brown* *son*
 Address _____
 Account guaranteed _____
 Address _____
 Embalming *Care of Bodies* *25.00*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3-Gr. Oak* *45.00*
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery *Greenwood*
 Section *B-W 1/2* Lot *3*

I Other Graves



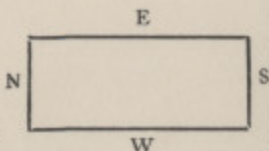
X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave *etc* *15.00*
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Rev Powell Tucker*
 Music *Gagan*
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles *S. & J.* *15.00*
 Baggage or Express Train No. *\$* *100.00*

Carry Hand Funeral Home

Name of deceased Fannie P. Harshue
 Date of death June 8 8:30 AM
 Cause of death _____
 Place of death Wilsey Nursing Home
 Residence _____
 Age 77 Y'rs. Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sat June 12 1943 10 a. M
 Account charged _____
 Address _____
 Account guaranteed _____
 Address _____
 Embalming Yes
 Robe, Suit, Dress _____
 Underwear and Hose White
 Casket 4-3-6-8-10-12 Sw. Chg
 Casket with Copper Lin. ✓
 Style of Casket Pet-
 No. of Casket 1422
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles Set
 Pillow Set for
 Name Plate _____
 Cemetery Cremations
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation Cremation
 Urn No
 Single Grave Body cremated
 Opening and Closing Graves A H
 Body Shipped to Sun June 13-43
 R. R. Ticket and fare
 Cash advanced Express
 Autos James P. Kates 486 N Main St
 Telegram Palmer Mass
 Minister Rev Morris Book
 Music Organ
 Casket Wagon (1)
 Physician Dr. Myer H.P.
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

35.00
 10.00
 48.00

50.00

5.00

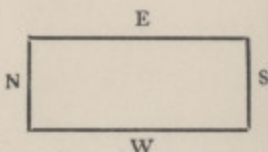
150.00

have made per arrangements
 complete for C. urn which
 is quoted and and total
 acct - 150.00

Carey Hand Funeral Home

Name of deceased Gloria A Toler
 Date of death Nov - 11 - 43 A M
 Cause of death unlabeled
 Place of death at home
 Residence Deer
 Age 3 Y'rs 13 Mo's 13 Days
 Weight 110 Height 5 ft. 10 in. Eyes blue
 Funeral at Grave Side
 Date Nov 12 1943 M
 Account charged Gloria Toler
 Address Deer
 Account guaranteed _____
 Address _____
 Embalming Case of Body 20.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2-6-3gr Whit 19.00
 Casket with Copper Lin. _____
 Style of Casket gr A top
 No. of Casket 77 9th
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles small
 Pillow Set _____
 Name Plate _____
 Cemetery Deer
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave by Family
 Body Shipped to Vault by Family
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister By Family
 Music _____
 Casket Wagon Dr. Jones Dr. Clower
 Physician Dr. Jones Dr. Clower
 County or City Burial _____
 Automobiles Clower Car 5.00
 Baggage or Express Train No. _____

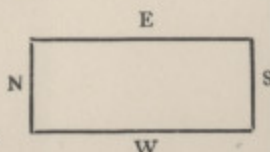
cash

44.00
 30.00
 14.00

Carey Hand Funeral Home

Name of deceased Jonah Hancock
 Date of death May 12-43 3:30 P. M.
 Cause of death Coronary Occlusion
 Place of death Bed
 Residence Bethel
 Age 22 Y'rs. 9 Mo's. 8 Days
 Weight 160 Height 5 ft. 6 in. Eyes
 Funeral at Grave Side
 Date Sun June 13 1943 4 M
 Account charged Mrs. Voss Hancock
 Address Bethel
 Account guaranteed
 Address Drums
 Embalming 25.00
 Robe, Suit, Dress 5.00
 Underwear and Hose
 Casket 4-3-32 Cope 35.00
 Casket with Copper Lin.
 Style of Casket See Flat Top
 No. of Casket X
 Outside Box Recd
 Shipping Case or Vault
 Handles Short
 Pillow Set
 Name Plate
 Cemetery First Christian
 Section Lot

I Other Graves



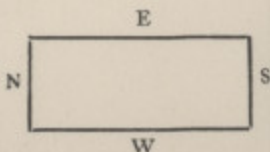
X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave etc 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister By Family
 Music
 Casket Wagon
 Physician Dr. Moore
 County or City Burial
 Automobiles 3.00 15.00
 Baggage or Express Train No. 95.00

Carey Hand Funeral Home

Name of deceased *Mrs Margaret Sucker*
 Date of death *Sat June 12- 6:30 P.M.*
 Cause of death
 Place of death *Nursing Home*
 Residence *1509 Woodward Ave*
 Age *58* Y's *5* Mo's *24* Days
 Weight Height ft. in. Eyes
 Funeral at *Chapel*
 Date *Monday June 14 1943 3 P.M.*
 Account charged *Mrs Louis Sucker*
 Address *1509 Woodward Ave*
 Account guaranteed
 Address
 Embalming *Y*
 Robe, Suit, Dress *White Gown*
 Underwear and Hose
 Casket *6-3 4x8oe*
 Casket with Copper Lin.
 Style of Casket *Oct 1/2-C*
 No. of Casket *7-1850 Temp's*
 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

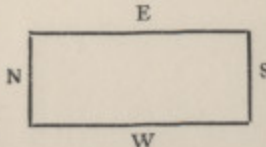
Cremation *Cremation*
 Urn *wouldn't*
 Single Grave *Body Cremated*
 Opening and Closing Grave *P. A. M.*
 Body Shipped to *Tues June 15-43*
 R. R. Ticket
 Cash advanced *will call for*
 Autos
 Telegram
 Minister *Rev Denby*
 Music *Organ*
 Casket Wagon *(1)*
 Physician *Dr. Harris*
 County or City Burial
 Automobiles
 Baggage or Express Train No.

260.00

Carey Hand Funeral Home

Name of deceased Mrs. Mary Ann Pace
 Date of death Sat June 12-43 P.M.
 Cause of death O. I. H.
 Place of death O. I. H.
 Residence 812 West Church
 Age 54 Yrs. 4 Mo's. 7 Days
 Weight 125 Height 5 ft. 6 in. Eyes
 Funeral at Chapel
 Date Thurs 6-17- 1943 10 30 A.M.
 Account charged Mrs. Mary Ann Pace
 Address 812 West Church
 Account guaranteed Ans & Cash
 Address
 Embalming
 Robe, Suit, Dress Blk H. Lin
 Underwear and Hosiery
 Casket 6-3 Gr. Soc
 Casket with Copper Lin.
 Style of Casket Oct. St. Cap
 No. of Casket 1972-9
 Outside Box Red
 Shipping Case or Vault
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery East
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to Saluda N.C.
 R. R. Ticket 22.39 1416 1416
 Cash advanced
 Autos
 Telegram
 Minister May M. Donald
 Music Organ
 Casket Wagon (2)
 Physician Dr. Anderson
 County or City Burial
 Automobiles amb. Soc
 Baggage or Express Train No. 92

35.00
 15.00
 100.00

50.71

10.00

5.00

ex by cash 15.00
 ex by Soc 114.00
 ex by cash

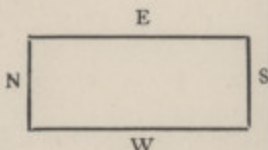
215.71

Carey Hand Funeral Home

Name of deceased *Mr Isaac James Graham*
 Date of death *June 10 1943* M
 Cause of death *myocarditis*
 Place of death *Res*
 Residence *Vero Beach Fla*
 Age *76* Y'rs *9* Mo's *7* Days
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged *Cox F. H. Corp*
 Address *Vero Beach Fla*
 Account guaranteed *Yes*
 Address _____
 Embalming *Cremation*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket *Body moved*
 No. of Casket *1*
 Outside Box *6-12-43*
 Shipping Case or Vault *Yes 6-12-43*
 Handles _____
 Pillow Set *Body cremated*
 Name Plate *F. H. Corp*
 Cemetery *June 13-43*
 Section *will call for* Lot _____

37.50

I Other Graves



X Grave on this date

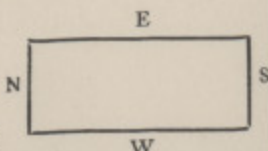
Cremation _____
 Urn *wooden*
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or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

37.50

Carey Hand Funeral Home

Name of deceased Sarah Josephine Rabb
 Date of death Jan June - 13 - 93 P M
 Cause of death old lady Brown
 Place of death Lake Holden
 Residence 1050 West - 22nd St
 Age 17 Y'rs 6 Mo's 5 Days
 Weight Height ft. in. Eyes
 Funeral at Chapel
 Date Tues June 13 1993 10:30 M A
 Account charged John J. G. Rabb
 Address 1050 West 22nd St.
 Account guaranteed Chas. Guff
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 4-3-Flush Oiled 2.00.00
 Casket with Copper Lin.
 Style of Casket Oct 12 - C
 No. of Casket 2-1575 - Tampa
 Outside Box
 Shipping Case or Vault Concrete 60.00
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Woodlawn
 Section Lot

I Other Graves



X Grave on this date

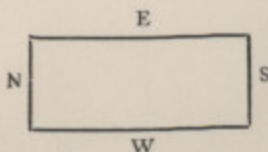
Cremation P.O. Car 0.00
 Urn Car - Mar 5.00
 Single Grave
 Opening and Closing Grave Y etc 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music Yes 5.00
 Casket Wagon (1)
 Physician Judge Baker
 County or City Burial 15.00
 Automobiles S V
 Baggage or Express Train No.

335.00

Carey Hand Funeral Home

Name of deceased Johanna Wissert
 Date of death June 14 5:25 A.M.
 Cause of death Chro Myocarditis
 Place of death P. J. N. Colquial
 Residence 1608 - 3rd
 Age 71 Y'rs. 3 Mo's. 8 Days
 Weight 135 Height 5 ft. 5 in. Eyes
 Funeral at Chapel
 Date Thurs June 17 1943 1-15 P. M
 Account charged Martha Wissert
 Address 1634 W. 1st St Chicago
 Account guaranteed Estate
 Address
 Embalming ☒ Pressing 35.00
 Robe, Suit, Dress
 Underwear and Hosiery
 Casket 4-3-12 Gr. Std - C 235.00
 Casket with Copper Lin.
 Style of Casket Det. St. Pap
 No. of Casket 1808
 Outside Box
 Shipping Case or Vault Cement 60.00
 Handles Yes
 Pillow Set Yes
 Name Plate
 Cemetery Woodlawn
 Section Lot

I Other Graves



X Grave on this date

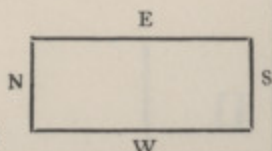
Cremation V. B. & Son 5.00
 Urn Ante 5.00
 Single Grave
 Opening and Closing Grave etc 15.00
 Body Shipped to
 R. R. Ticket Am. S. N. 5.00
 Cash advanced
 Autos
 Telegram
 Minister Geo. Trapp
 Music Organ
 Casket Wagon 111 5.00
 Physician Dr. H. W. Evans
 County or City Burial
 Automobiles 505 15.00
 Baggage or Express Train No.

380.00

Carey Hand Funeral Home

Name of deceased Samuel Roberts
 Date of death June 10 M
 Cause of death not given as permit
 Place of death Res.
 Residence Melbourne Fla.
 Age 35 Y'rs 5 Mo's 8 Days
 Weight 160 Height 5 ft. 6 in. Eyes Brown
 Funeral at Melbourne Fla.
 Date June 1943 M
 Account charged Brownlee Funeral Home
 Address Melbourne, Fla.
 Account guaranteed Cash.
 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 P.M. Monday
 Outside Box June 14-43
 Shipping Case or Vault by auto
 Handles
 Pillow Set
 Name Plate Body Cremated
 Cemetery E.A. Va. Tuesday
 Section June 15-43 Lot

I Other Graves



X Grave on this date

Cremation Ashes expressed
 Urn to - Brownlee Funeral Home
 Single Grave Melbourne, Fla.
 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

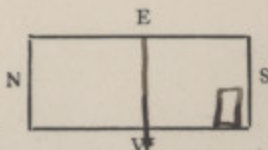
9-1-1941

Name of deceased P.F.C. Wm A Humphries
 Date of death June 12-43 1127 PM M
 Cause of death Tumor Brain
 Place of death Hazlet Clinton Iowa
 Residence Orlando Fla
 Age 21 Y'rs. 9 Mo's 11 Days
 Weight 180 Height 6 ft in. Eyes
 Funeral at
 Date Thurs June 17 1943 2- PM
 Account charged Wm A Humphries Sr
 Address Orlando
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose Yes
 Casket 6-3-Oct In B.E. H. Cap
 Casket with Copper Lin.
 Style of Casket State Met H. Cap Same
 No. of Casket Seal Taylor Spine 600.00
 Outside Box
 Shipping Case or Vault Cement 60.00
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Greenwood
 Section R-3-1/2 Lot 48

I Other Graves

yes - 4 -

X Grave on this date



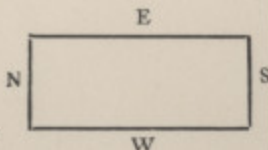
Cremation P.B. Cap 5.00
 Urn cap same 5.00
 Single Grave
 Opening and Closing Grave Yes 15.00
 Body Shipped to Heaven Moving Body
 R. R. Ticket to Church & Extra Help 20.00
 Cash advanced
 Autos
 Telegram
 Minister Rev Rutter 5.00
 Music Yes 5.00
 Casket Wagon (1)
 Physician
 County or City Burial
 Automobiles S & S 15.00
 Baggage or Express Train No.

Burial city Casket 725.00
5-1-4-100 100.00
750.00

Carey Hand Funeral Home

Name of deceased *Mrs Margaret Downing*
 Date of death *Wed June 16-43* P.M.
 Cause of death *O.B.H.*
 Place of death *O.B.H.*
 Residence *Sept 20 years - 1324 N. W. 1st St. in Florida*
 Age *42* Y'rs. *8* Mo's. *16* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *least*
 Date *June 1943* M
 Account charged *F. H. C. S. Downing*
 Address *On A. Case*
 Account guaranteed _____
 Address _____
 Embalming *+ Dressing* 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *4-3-4 1/2 1/2* 195.00
 Casket with Copper Lin _____
 Style of Casket *Oct. H. Cap.*
 No. of Casket *3218* *Delmon*
 Outside Box *B-13*
 Shipping Case or Vault _____
 Handles *Ext*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *West*
 Section _____ Lot _____

I Other Graves



X Grave on this date

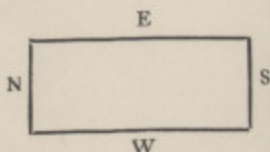
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Winnipeg Canada*
 R. R. Ticket *Bought & kept*
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon *(2)* 10.00
 Physician _____
 County or City Burial _____
 Automobiles *Arr. 6-12-43* 5.00
 Baggage or Express Train No. *B*

Mail Statement to *245.00*
Lt. J. H. Hensley
Army Emergency Relief office AAFSAT
1 Bldg 1st 2559
Orlando Air Base
Orlando.

Carey Hand Funeral Home

Name of deceased Wm. H. Bryan Jr
 Date of death Thurs - June 17 1943 7:30 P.
 Cause of death _____
 Place of death Res. Wright Park
 Residence 2040 Jewell Ave
 Age 1 Y'rs. 9 Mo's. 9 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sat - June 19 1943 10 A M
 Account charged Wm. H. Bryan
 Address 2040 Jewell Ave W. Park
 Account guaranteed _____
 Address _____
 Embalming Yes 25.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 2 - 6 - W X 30.00
 Casket with Copper Lin. Yes
 Style of Casket Box
 No. of Casket 102
 Outside Box Yes
 Shipping Case or Vault _____
 Handles Small
 Pillow Set Yes
 Name Plate _____
 Cemetery Greenwood
 Section 9 Lot _____

I Other Graves



X Grave on this date

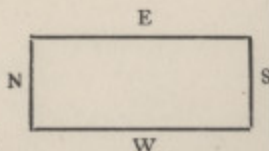
Cremation Auto 5.00
 Urn _____
 Single Grave Baby Grave 12.50
 Opening and Closing Grave 10.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced Spa. Titman 2.50
 Autos _____
 Telegram _____
 Minister Dean Johnson
 Music Organ
 Casket Wagon _____
 Physician Dr. Sinclair
 County or City Burial _____
 Automobiles Clare Con 5.00
 Baggage or Express Train No. _____

\$90.00

Carey Hand Funeral Home

Name of deceased Mike Pruvignak
 Date of death 9:11 June 18-43 P.M.
 Cause of death _____
 Place of death Res-
 Residence 346- N. Paramore
 Age 53 Y'rs 4 Mo's 18 Days _____
 Weight 200 Height 5 ft. 9 in. Eyes _____
 Funeral at Catholic Church
 Date Monday June 21 1943 9 A.M.
 Account charged Mrs Susan Pruvignak
 Address 346- N. Paramore St
 Account guaranteed Mrs
 Address _____
 Embalming & Dress 35.00
 Robe, Suit, Dress ✓
 Underwear and Hosiery ✓
 Casket 6-3 metal & 4 Tin 750.00
 Casket with Copper Lin. Inner
 Style of Casket R. Cor. Stat.
 No. of Casket King Shiner
 Outside Box ✓
 Shipping Case or Vault Cement 60.00
 Handles Ext -
 Pillow Set Yes
 Name Plate Name & Date & Address
 Cemetery Woodland
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation P. B. Car 5.00
 Urn Car min 5.00
 Single Grave Family Car 5.00
 Opening and Closing Grave 4.00 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Trathan Bishop
 Music by Church
 Casket Wagon (1) 5.00
 Physician Dr Selzer
 County or City Burial _____
 Automobiles S-3 15.00
 Baggage or Express Train No. _____

895.00

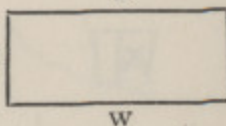
Carey Hand Funeral Home

Name of deceased *Mrs Lucinda J. McCawley*
 Date of death *Sat June 19-43* A.M.
 Cause of death _____
 Place of death *Res* _____
 Residence *1815 E. Marks St -*
 Age *94* Y'rs *8* Mo's *3* Days _____
 Weight *90* Height *5 ft 5* in. Eyes _____
 Funeral at *Chapel*
 Date *Mon Jan - 31 - 1943* 1:30 P.M.
 Account charged *Mrs Walter K. Shute*
 Address *1815 E. Marks*
 Account guaranteed *Yes*
 Address _____
 Embalming *& Durs* 35.00
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *4-3 in box* 125.00
 Casket with Copper Lin. *✓*
 Style of Casket *Oct. H.C.*
 No. of Casket *1972 - Temp.*
 Outside Box *Reg*
 Shipping Case or Vault *✓*
 Handles *5*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Greenwood*
 Section _____ Lot *204*

I Other Graves

Leonard Lot N S

X Grave on this date



Cremation *P.B. Car* 5.00
 Urn *Car* 5.00
 Single Grave 15.00
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *A. Fred Turner*
 Music *Yes*
 Casket Wagon *W. Gray*
 Physician *Dr. Gray*
 County or City Burial _____
 Automobiles *S.V. 3* 15.00
 Baggage or Express Train No. _____

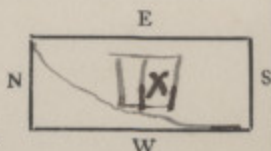
Mrs. Car

200.00
 5.00
 195.00

Carey Hand Funeral Home

Name of deceased *Mr James Edmund Roosa*
 Date of death *Sat June 19-43* P.M.
 Cause of death
 Place of death *Altamont Spring, N.Y.*
 Residence *Altamont Spring, N.Y.*
 Age *73* Y'rs. *11* Mo's. *15* Days
 Weight *180* Height *5* ft. *10* in. Eyes
 Funeral at *Reg*
 Date *Tues June 22* 194*3* *4:30* P.M.
 Account charged *Mrs Carrie M.K. Roosa*
 Address *Altamont Springs*
 Account guaranteed *Estate*
 Address
 Embalming *Dressing* 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket *4-6-Metal Sil Tin* 485.00
 Casket with Copper Lin. ✓
 Style of Casket *State 12-C*
 No. of Casket *Scamaria Shure*
 Outside Box ✓
 Shipping Case or Vault *Box Family*
 Handles *Ext*
 Pillow Set *Yes Taylor*
 Name Plate *Name & Date*
 Cemetery *Greenwood*
 Section *V* Lot *72*

I Other Graves



X Grave on this date

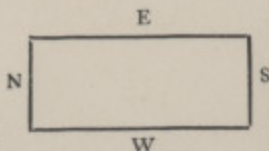
Cremation *P.B. Car* 5.00
 Urn *2 Rust metal* 10.00
 Single Grave
 Opening and Closing Grave *Interact* 15.00
 Body Shipped to
 R. R. Ticket *amb sur*
 Cash advanced
 Autos *amb sur (2)* 10.00
 Telegram
 Minister *Rev Danks*
 Music *By Family*
 Casket Wagon *(1)* 5.00
 Physician *Dr. Hottel*
 County or City Burial 15.00
 Automobiles *S & S*
 Baggage or Express Train No.

4- Tel 350 580.00
Mr Roosa had the quick 380.00
vault 3 for a 2-built 33.00
3 yrs ago 583.50

Carey Hand Funeral Home

Name of deceased Mr Duncan V Oster
 Date of death Mon June - 20 - 43 M P.
 Cause of death _____
 Place of death D. G. H.
 Residence Winter Park
 Age 48 Y'rs. 3 Mo's. 19 Days _____
 Weight 150 Height 6 ft. _____ in. Eyes _____
 Funeral at Home side
 Date Wed - 6 - 23 1943 4:30 PM
 Account charged Mrs Bertie Oster
 Address 248 Gayfield Ave W. Park
 Account guaranteed _____
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress _____
 Underwear and Hosiery _____
 Casket 6-3-Gr Doe 150.00
 Casket with Copper Lin. _____
 Style of Casket Ext 1/2-2
 No. of Casket 616-Perma
 Outside Box Reg cost 14
 Shipping Case or Vault Perma
 Handles Ext wood
 Pillow Set Yes
 Name Plate _____
 Cemetery W. Park Palm
 Section _____ Lot _____

I Other Graves



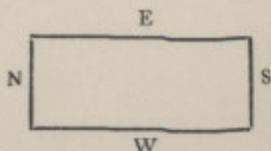
X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave Grave 15.00
 Body Shipped to Home Body & Burial 5.00
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister A. J. Davis
 Music Grave 5.00
 Casket Wagon (1)
 Physician Dr. Gray
 County or City Burial _____
 Automobiles S. V. S. 15.00
 Baggage or Express Train No. 28 225.00

Carey Hand Funeral Home

Name of deceased Baby R. Glenn Seely
 Date of death Sun June 20-13 M
 Cause of death O.G.H.
 Place of death O.G.H.
 Residence 525 - N. Hughes
 Age 1 Yrs. 1 Mo's. 1 Days 20 Hrs
 Weight 1 Height 1 ft. 1 in. Eyes 1
 Funeral at to serve
 Date 194 M
 Account charged Sgt Willis S. Seely
 Address 525 - N. Hughes
 Account guaranteed 1
 Address 1
 Embalming 1
 Robe, Suit, Dress 1
 Underwear and Hose 1
 Casket Cremation
 Casket with Copper Lin. 1
 Style of Casket 1
 No. of Casket Body Cremated
 Outside Box 1
 Shipping Case or Vault 8-A.M.
 Handles Tues 6-22-43
 Pillow Set 1
 Name Plate with call for
 Cemetery 1
 Section 1 Lot 1

I Other Graves



X Grave on this date

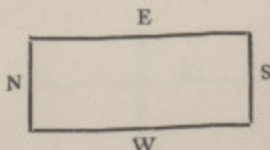
Cremation 1
 Urn 1
 Single Grave 1
 Opening and Closing Grave 1
 Body Shipped to 1
 R. R. Ticket 1
 Cash advanced 1
 Autos 1
 Telegram 1
 Minister 1
 Music 1
 Casket Wagon 1
 Physician 1
 County or City Burial 1
 Automobiles 1
 Baggage or Express Train No. 1

525

Carey Hand Funeral Home

Name of deceased Baby Stephens
 Date of death Jan. 20 1943 MP
 Cause of death Still Born
 Place of death City
 Residence 1520 E. Woodward
 Age 1 Yrs. 1 Mo's. 1 Days
 Weight 10 Height 18 ft. 1 in. Eyes Blue
 Funeral at Grave side
 Date Mon. June 21 1943 4:30 MP
 Account charged Mr. W. Stephens
 Address Cash
 Account guaranteed Cash
 Address Care of Body
 Embalming 5.00
 Robe, Suit, Dress 12.00
 Underwear and Hose 1.50
 Casket 2-0- H. H.
 Casket with Copper Lin. 15.00
 Style of Casket Box
 No. of Casket H. H.
 Outside Box Box
 Shipping Case or Vault ✓
 Handles Small
 Pillow Set ✓
 Name Plate Greenwood
 Cemetery Greenwood
 Section 4 Lot 1

I Other Graves



X Grave on this date

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

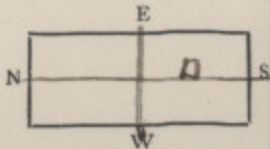
12.50
 4.50
 5.00

42.00

Carey Hand Funeral Home

Name of deceased Baby Lory L. Newton
 Date of death June 20 1943 M
 Cause of death O.A.
 Place of death O.A.
 Residence 1020 S. Hughes
 Age 2 Y's 2 Mo's 25 Days
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at Grave side
 Date Wed. June 23 1943 10-A M
 Account charged Tray Newton
 Address 1020 S. Hughes
 Account guaranteed Payments
 Address _____
 Embalming Care of Body 15.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2-A H.P. 32.50
 Casket with Copper Lin. _____
 Style of Casket Set. N. Top
 No. of Casket 103- Temp. 9
 Outside Box B-10
 Shipping Case or Vault _____
 Handles Short
 Pillow Set Yes
 Name Plate _____
 Cemetery Gravely
 Section -26-J Lot 4

I Other Graves



X Grave on this date

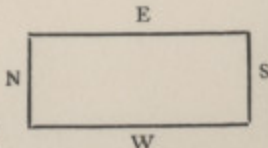
Cremation Burial Lot 10.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave Del. etc. 15.00
 Body Shipped to _____ 3.00
 R. R. Ticket T.P. Robinson
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician Dr. J.
 County or City Burial
 Automobiles Clared Car 5.00
 Baggage or Express Train No. _____

80.50

Carey Hand Funeral Home

Name of deceased Geo M Spangler
 Date of death June 18 1943 M
 Cause of death Cerebral Hemorrhage
 Place of death Winter Haven
 Residence Winter Haven
 Age 68 Y'rs 7 Mo's 19 Days
 Weight 170 Height 5 ft 9 in. Eyes
 Funeral at Winter Haven Fla
 Date June 24 1943 M
 Account charged Wm 34 South
 Address Winter Haven Fla
 Account guaranteed OK
 Address Cremation
 Embalming 32.50
 Robe, Suit, Dress
 Underwear and Hose Body anvil
 Casket 10-A.M. Mfr
 Casket with Copper Lin June - 21-43
 Style of Casket
 No. of Casket Body Cremated
 Outside Box 8-A.M. Tues
 Shipping Case or Vault June 22-43
 Handles
 Pillow Set Express to Wm & South
 Name Plate Winter Haven
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

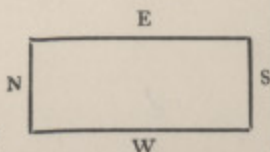
Cremation
 Urn Wooden
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

\$ 37.50

Carey Hand Funeral Home

Name of deceased George H. Linton
 Date of death June 20th 1943 M
 Cause of death Cardio Vascular Renal
 Place of death Residence Leisure
 Residence Mt Lora Fla
 Age 76 Y'rs 9 Mo's 3 Days
 Weight 150 Height 5 ft 10 in. Eyes Gray
 Funeral at Mt Lora Fla
 Date June 1943 M
 Account charged Rehbaum & Company
 Address Mt Lora Fla
 Account guaranteed E. Heck
 Address _____
 Embalming _____
 Robe, Suit, Dress Cremation 37 50
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Body Arrived
 Outside Box by auto 5 P. M.
 Shipping Case for Vault Tues - June 22
 Handles 1943
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery Tues 8 A. M. June 23
 Section 1943 Lot _____

I Other Graves



X Grave on this date

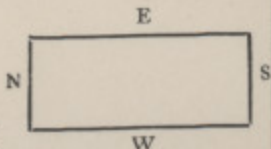
Cremation ashes expressed
 Urn to Rehbaum Co.
 Single Grave Mt Lora Fla
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles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

\$ 37.50

Carey Hand Funeral Home

Name of deceased Mrs. Monese M. ~~Cougan~~
 Date of death June 23- 1943 5-11 M
 Cause of death Pneumonia
 Place of death Ohio St
 Residence 1625 Ohio St
 Age 16 Y'rs 11 Mo's 12 Days
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at Chapel
 Date Friday June 25 1943 3 P.M
 Account charged M. Earl Cougan
 Address 1625 Ohio St
 Account guaranteed Yes
 Address _____
 Embalming Yes
 Robe, Suit, Dress White Lin
 Underwear and Hose Und
 Casket 1/2 Guy Lee
 Casket with Copper Lin. _____
 Style of Casket Oct N Cap
 No. of Casket 12 Pen
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set Yes
 Name Plate _____
 Cemetery Greenwood
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation	<u>P. B. Car</u>	<u>5.00</u>
Urn	<u>Minister Car</u>	<u>5.00</u>
Single Grave		<u>15.00</u>
Opening and Closing Grave	<u>etc</u>	<u>15.00</u>
Body Shipped to		<u>25.00</u>
R. R. Ticket	<u>Single Grave</u>	<u>25.00</u>
Cash advanced		
Autos		
Telegram		
Minister	<u>Rev</u>	
Music		
Casket Wagon	<u>11</u>	<u>5.00</u>
Physician	<u>Dr. Major Murphy</u>	
County or City Burial		
Automobiles	<u>5.15</u>	<u>15.00</u>
Baggage or Express Train No.		

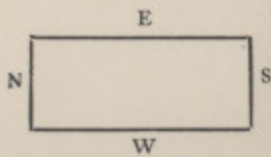
211.50

Carey Hand Funeral Home

Name of deceased Baby Harry P. Hagan
 Date of death June 23-1943 8:30 P.M.
 Cause of death Distichial Septic
 Place of death Winter Park
 Residence Winter Park
 Age 9 Y'rs. 9 Mo's. 9 Days
 Weight 12 Height 30 ft. 10 in. Eyes Blue
 Funeral at Grave Side
 Date June 24 1943 M
 Account charged Chas. Hagan
 Address Winter Garden
 Account guaranteed Chas. Hagan
 Address Winter Garden
 Embalming Yes
 Robe, Suit, Dress Yes
 Underwear and Hose Yes
 Casket W. L. S.
 Casket with Copper Lin. Yes
 Style of Casket H. M.
 No. of Casket 103
 Outside Box Yes
 Shipping Case or Vault Yes
 Handles Yes
 Pillow Set Yes
 Name Plate Yes
 Cemetery Winter Garden
 Section 103 Lot 103

25.00
 1.25
 32.50

I Other Graves



X Grave on this date

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

10.00

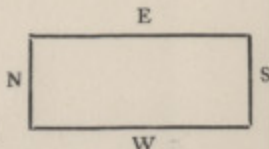
5.00

\$63.75

Carey Hand Funeral Home

Name of deceased Mr Hugh M Bowen
 Date of death Wed. June 23 P.M.
 Cause of death D.B.
 Place of death State G. B. Hospital
 Residence Moore Haven Fla.
 Age 45 Y'rs 4 Mo's 21 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Moore Haven Fla.
 Date June 194 M
 Account charged Rouse F. Home
 Address Dunwoody Fla.
 Account guaranteed Check
 Address _____
 Embalming ☒ 35
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles Rouse Funeral Home
 Pillow Set Dunwoody Fla.
 Name Plate slut for the
 Cemetery Body of Wed night
 Section June 23rd 13 Lot _____

I Other Graves



X Grave on this date

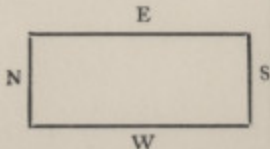
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister West
 Music _____
 Casket Wagon (1) 5
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$40 00

Carey Hand Funeral Home

Name of deceased Mrs. Carrie Alexander
 Date of death June 20-43 M
 Cause of death not given on permit
 Place of death GA.
 Residence Deland
 Age 60 Y's. Mo's. Days
 Weight. Height. ft. in. Eyes.
 Funeral at
 Date June 21-43 194 M
 Account charged Emeline Higgins
 Address 6. Church St
 Account guaranteed OK
 Address Cremation
 Embalming 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. Body Anne
 Style of Casket B-A-M
 No. of Casket June 6-25-43
 Outside Box
 Shipping Case or Vault Body
 Handles Cremation B-A-M
 Pillow Set June 6-25-43
 Name Plate
 Cemetery
 Section. Lot.

I Other Graves



X Grave on this date

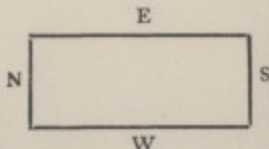
Cremation
 Urn wooden
 Single Grave Return N
 Opening and Closing Grave
 Body Shipped to Emeline Higgins
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased *Mr. S. T. Wilson*
 Date of death *Sat June 26-43* P. M.
 Cause of death *Myocarditis - Chas.*
 Place of death *Living Home* *Kuster*
 Residence *Apopka, Fla.*
 Age *69* Yrs *6* Mo's *9* Days
 Weight..... Height..... ft. in. Eyes.....
 Funeral at *Graveside*
 Date *July 2nd* 194*3* P. M.
 Account charged *County*
 Address.....
 Account guaranteed.....
 Address.....
 Embalming *Yes* *35.00*
 Robe, Suit, Dress.....
 Underwear and Hose.....
 Casket *Coffin* *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

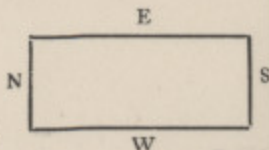
Cremation.....
 Urn.....
 Single Grave.....
 Opening and Closing Grave.....
 Body Shipped to.....
 R. R. Ticket.....
 Cash advanced.....
 Autos.....
 Telegram.....
 Minister.....
 Music.....
 Casket Wagon.....
 Physician *Dr. Moon*
 County or City Burial.....
 Automobiles.....
 Baggage or Express Train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

14.50

Carey Hand Funeral Home

Name of deceased *Mr Geo B. Weeks*
 Date of death *June 25-43* M
 Cause of death *not given on Permit*
 Place of death
 Residence *1822 S. Osceola*
 Age *80* Y'rs. *10* Mo's. *4* Days
 Weight Height ft. in. Eyes
 Funeral at
 Date *194* M
 Account charged *Episcopal & Higginson*
 Address *6 Church St*
 Account guaranteed *OK*
 Address
 Embalming *Cremation* 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin *Body Guard*
 Style of Casket *4 side 4:30 PM*
 No. of Casket *Sat-June 26-43*
 Outside Box
 Shipping Case or Vault *Body Cremated*
 Handles *Mon June 27-43*
 Pillow Set *8-AM*
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

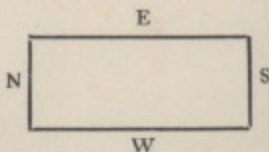
Cremation
 Urn *wooden*
 Single Grave *ashes del to the*
 Opening and Closing Grave
 Body Shipped to *Episcopal & Higginson*
 R. R. Ticket *F. Home*
 Cash advanced *6 Church St*
 Autos *6-28-43*
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Mr. Harry C. Ambler
 Date of death June 28, 1942 M
 Cause of death Not given in Permit
 Place of death St. Myers Fla
 Residence _____
 Age 23 Y'rs. 3 Mo's. 10 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged Hoover & Englehart F. H.
 Address St. Myers Fla
 Account guaranteed OK
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Body covered
 Style of Casket by Dr. J. J. J.
 No. of Casket 781 - Monday
 Outside Box 6-28-
 Shipping Case or Vault Body - 8 - A.M.
 Handles Cremation
 Pillow Set Mon 6-28-42
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn wooden
 Single Grave Express ashes &
 Opening and Closing Grave _____
 Body Shipped to Hoover &
 R. R. Ticket Englehart
 Cash advanced To Home
 Autos _____
 Telegram St. Myers Fla
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

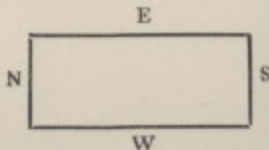
37.50

Carey Hand Funeral Home

Jack

Name of deceased Mr John L Shauling
 Date of death Mon June 28 1943 MA
 Cause of death Res -
 Place of death Res -
 Residence 1300 Edgewater Dr
 Age 64 Y'rs 5 Mo's 9 Days Blue
 Weight 170 Height 5 ft 8 in. Eyes Blue
 Funeral at Chapel
 Date Wed June 30 - 1943 4 P. M
 Account charged Mrs J. L. Shauling
 Address 1300 Edgewater Dr City
 Account guaranteed Estate
 Address Edwards
 Embalming Yes 35.00
 Robe, Suit, Dress Yes
 Underwear and Hose Yes
 Casket 6-6 Gr. Box S. L. 185.00
 Casket with Copper Lin. Yes
 Style of Casket State M. Cap.
 No. of Casket 29 -
 Outside Box Yes
 Shipping Case or Vault Yes
 Handles Yes
 Pillow Set Yes
 Name Plate Yes
 Cemetery Cumtation
 Section Lot

I Other Graves



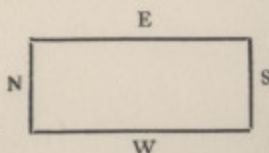
X Grave on this date

Cremation Cumtation 50.00
 Urn wooden
 Single Grave Yes
 Opening and Closing Grave Body 8-AM
 Body Shipped to Cumtation 8-AM
 R. R. Ticket Wed June 30 - 43
 Cash advanced July - 1 - 43
 Autos Yes
 Telegram Yes
 Minister A. Fred Turner
 Music Yes
 Casket Wagon Yes 5.00
 Physician Dr. Redding
 County or City Burial Yes
 Automobiles Yes
 Baggage or Express Train No. 275.00

Carey Hand Funeral Home

Name of deceased Edward May
 Date of death June 29 12:15 PM
 Cause of death _____
 Place of death Residence
 Residence 1122 Morris St. Orlando
 Age _____ Y'rs. _____ Mo's. _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at No Service
 Date _____ 1943 _____ M
 Account charged me
 Address _____
 Account guaranteed _____
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket See 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 Evergreen
 Section _____ Lot _____

I Other Graves



X Grave on this date

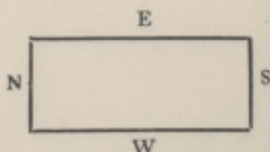
Cremation _____
 Urn wooden
 Single Grave Body Cremated
 Opening and Closing Grave P - 4 M.
 Body Shipped to Home July 1 - 43
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Ch.
 Music _____
 Casket Wagon See Chg 5.00
 Physician Leicester McLean
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. B

725.00

Carey Hand Funeral Home

Name of deceased Mr Julius Edwin Fisk
 Date of death Tues June 29- 550 AM
 Cause of death O. G. H.
 Place of death O. G. H.
 Residence 1920 Chamberlain
 Age 81 Yrs. — Mo's 28 Days —
 Weight 150 Height 5 ft 8 in. Eyes —
 Funeral at Dest
 Date — 194 — M
 Account charged Mr Jms Joe S. Sumner
 Address 1920 Chamberlain
 Account guaranteed State
 Address —
 Embalming Yes
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-24 Doe
 Casket with Copper Lin ✓
 Style of Casket State of E
 No. of Casket 29-
 Outside Box 13-9
 Shipping Case or Vault ✓
 Handles cut
 Pillow Set yes
 Name Plate ✓
 Cemetery Dest
 Section — Lot —

I Other Graves



X Grave on this date

Cremation —
 Urn —
 Single Grave —
 Opening and Closing Grave —
 Body Shipped to Minneapolis
 R. R. Ticket —
 Cash advanced K. G. H.
 Autos —
 Telegram 124-165-124-124-124
 Minister —
 Music —
 Casket Wagon (2)
 Physician Dr. Pyles
 County or City Burial —
 Automobiles —
 Baggage or Express Train No. 92

35.00

200.00

253.91

5.37

10.00

Wed June 30-43

50428

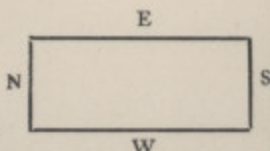
25391

250.87

Carey Hand Funeral Home

Name of deceased Hall Alvin Butler
 Date of death June 25th M
 Cause of death _____
 Place of death St Petersburg Fla
 Residence Le Land Fla
 Age 53 Y's 1 Mo's 6 Days _____
 Weight 170 Height 5 ft 10 in. Eyes _____
 Funeral at Le Land Fla
 Date June 29 1943 M
 Account charged Allen - Summerhelt
 Address Le Land Fla
 Account guaranteed Check
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body Arrived
 No. of Casket by Butts
 Outside Box July 3:30 PM
 Shipping Case or Vault June 29-43
 Handles _____
 Pillow Set _____
 Name Plate Body Cremated
 Cemetery F.A. Le Land
 Section July 30th Lot 43

I Other Graves



X Grave on this date

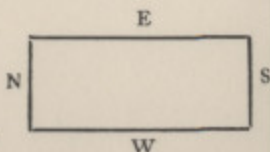
Cremation Ashes expressed
 Urn to Allen - Summerhelt
 Single Grave F.A. Le Land Fla
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of deceased Mrs. Major White
 Date of death Wed. June 30. M
 Cause of death _____
 Place of death Res.
 Residence 803 Grand ave
 Age 66 Y'rs. 1 Mo's. 21 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sat July 3 1943 M
 Account charged Mrs. Martha White
 Address _____
 Account guaranteed Insurance
 Address _____
 Embalming & S 35.00
 Robe, Suit, Dress &
 Underwear and Hose &
 Casket 6-3-4 125.00
 Casket with Copper Lin. &
 Style of Casket Oct. H Cap.
 No. of Casket 1972
 Outside Box &
 Shipping Case or Vault Cement 60.00
 Handles Ext.
 Pillow Set Yes
 Name Plate &
 Cemetery Woodlawn
 Section _____ Lot _____

I Other Graves



X Grave on this date

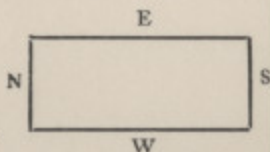
Cremation Car min 5.00
 Urn Car 5.00
 Single Grave _____
 Opening and Closing Grave & etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev. T. Morgan
 Music yes.
 Casket Wagon 11 5.00
 Physician _____
 County or City Burial _____
 Automobiles 5 & 3 15.00
 Baggage or Express Train No. _____

\$ 245.00
15.00
\$ 260.00

Carey Hand Funeral Home

Name of deceased Mr. Harley Ellis
 Date of death Wed June 30 P M
 Cause of death O. G. H.
 Place of death O. G. H.
 Residence Apopka
 Age 40 Yrs. 6 Mo's. 4 Days
 Weight 180 Height 6 ft. 6 in. Eyes
 Funeral at West
 Date 194 M
 Account charged Mrs. Harley Ellis
 Address Apopka Fla
 Account guaranteed Harmon
 Address
 Embalming Y. D.
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3-54 Do
 Casket with Copper Lin. ☒
 Style of Casket Oct. 12-2
 No. of Casket 1850 Tampa
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Statesboro Ga
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to Statesboro Ga
 R. R. Ticket 1-1599 1-1062
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon (2)
 Physician Dr
 County or City Burial
 Automobiles
 Baggage or ~~Express~~ Train No. 92

Fri July 2-43

35.00

175.00

26.61

10.00

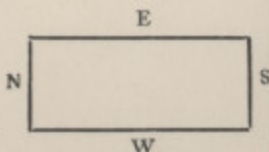
246.61

July 1
1943

Carey Hand Funeral Home

Name of deceased *Otis Herman*
 Date of death *Thurs July 1 - 43* *H M*
 Cause of death
 Place of death *Q. H.*
 Residence *810 - Arlington Ave*
 Age Y'rs Mo's Days
 Weight Height ft in Eyes
 Funeral at *Chapel*
 Date *Fri July 2 - 1943* *11-A M*
 Account charged *Mrs Otis Herman*
 Address *810 - Arlington Ave*
 Account guaranteed *Yes*
 Address
 Embalming *Yes* *35.00*
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-6-6 Ga B.C. State* *225.00*
 Casket with Copper Lin. ☒
 Style of Casket *State R.C. N. Cap*
 No. of Casket *47 - Tampa*
 Outside Box *Reg*
 Shipping Case or Vault ☒
 Handles *Yes*
 Pillow Set *Yes Traylord*
 Name Plate *Yes*
 Cemetery *West*
 Section Lot

I Other Graves



X Grave on this date

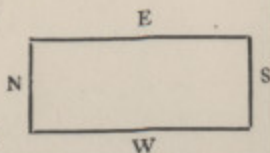
Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Tennille Ga*
 R. R. Ticket *Direct*
 Cash advanced
 Autos
 Telegram
 Minister *Dean Johnson*
 Music *Organ (2)* *10.00*
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No. *92*

Fri July 2 - 43 *and* *320.00*
Savannah Trif *325.00*
328.00

Carey Hand Funeral Home

Name of deceased Mrs Linda H Foster
 Date of death June 30-43 M
 Cause of death Endocarditis
 Place of death Cocoa Fla
 Residence Cocoa Fla
 Age 86 Y'rs. 1 Mo's 28 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged J E Keane
 Address Cocoa Fla
 Account guaranteed etc
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body arrived
 Casket with Copper Lin. 4 oak
 Style of Casket 16-A on
 No. of Casket Tri July 2-
 Outside Box _____
 Shipping Case or Vault Body
 Handles Cremated
 Pillow Set 8-A on Sat
 Name Plate July- 3-22-43
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn wood
 Single Grave Ashes & Express &
 Opening and Closing Grave _____
 Body Shipped to Walter E Foster
 R. R. Ticket _____
 Cash advanced 839 Bany Ave
 Autos _____
 Telegram Chicago sees
 Minister apt I. A.
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of deceased Mrs. Helen Hays Bate
 Date of death Fri July-2-49 PM
 Cause of death Tub. Cont
 Place of death Tub. Cont
 Residence Winter Park
 Age 74 Y'rs. 4 Mo's. — Days —
 Weight 70 Height 5 ft. 3 in. Eyes —
 Funeral at No serv here
 Date — 1949 M
 Account charged Mr. Harry Ricketts (810)
 Address 876 Old Eng. Ave. W. Park
 Account guaranteed Estate
 Address —
 Embalming —
 Robe, Suit, Dress —
 Underwear and Hose —
 Casket 6-3. Pine Oak
 Casket with Copper Lin. —
 Style of Casket Sgt. 79
 No. of Casket —
 Outside Box —
 Shipping Case or Vault —
 Handles —
 Pillow Set —
 Name Plate —
 Cemetery Cremation
 Section — Lot —

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

Cremation Cremation
 Urn wooden
 Single Grave —
 Opening and Closing Grave Body Cremated
 Body Shipped to S-A-M Mon July 5-49
 R. R. Ticket —
 Cash advanced Exp. Expensed to
 Autos Mr. R. Daniels F. Home
 Telegram Lakewood Ohio
 Minister Detroit Ave
 Music —
 Casket Wagon —
 Physician Dr. D. Notat
 County or City Burial —
 Automobiles —
 Baggage or Express Train No. —

35.00

35.00

50.00

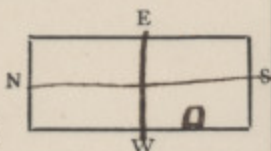
5.00

125.00

Carey Hand Funeral Home

Name of deceased Balf Crassley
 Date of death Tue July - 2 - 1943 P M
 Cause of death _____
 Place of death Tula Spout
 Residence Winter Park
 Age ✓ Y'rs ✓ Mo's ✓ Days 2 hr
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave side
 Date Mon July - 5 - 1943 5 P M
 Account charged Tula Crassley
 Address 325 - Schwan Blvd - W. P.
 Account guaranteed _____
 Address _____
 Embalming can of body
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2 - 0 4 - 2 10.00
 Casket with Copper Lin. _____
 Style of Casket Set
 No. of Casket W. P.
 Outside Box Bag
 Shipping Case or Vault ✓
 Handles ✓
 Pillow Set ✓
 Name Plate _____
 Cemetery Palm Cemetery W. P.
 Section 96 Lot C

I Other Graves



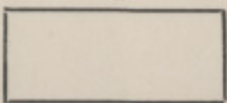
X Grave on this date

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

20.00

Carey Hand Funeral Home

Name of deceased Chas William Leonard
 Date of death July 2-43 M
 Cause of death Ad given on Permit
 Place of death St Petersburg
 Residence St Petersburg
 Age 63 Y's 6 Mo's 8 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 1943 M
 Account charged Cooksey F. Home
 Address St Petersburg Fla
 Account guaranteed OK
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body covered
 Casket with Copper Lin. by gate
 Style of Casket 630 P.M. Set
 No. of Casket July 3-43
 Outside Box _____
 Shipping Case or Vault Body cremated
 Handles S. A. M. Sun 7/4-43
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves

 X Grave on this date

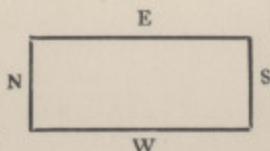
Cremation _____
 Urn wooden
 Single Grave ashes exposed to
 Opening and Closing Grave _____
 Body Shipped to Cooksey F. Home
 R. R. Ticket St Petersburg Fla
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____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

37.50

Carey Hand Funeral Home

Name of deceased Mr. John B. Fairbanks
 Date of death June 28-43 M
 Cause of death myocardial infarction
 Place of death St. Petersburg
 Residence St. Petersburg
 Age 79 Y'rs 7 Mo's 7 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged Coolidge F. Home
 Address St. Petersburg
 Account guaranteed OK.
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body moved
 Casket with Copper Lin. 4 into
 Style of Casket 630 P. M.
 No. of Casket Set July 3-43
 Outside Box _____
 Shipping Case or Vault Body Cremated
 Handles 8-AM Sun July 4-43
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

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

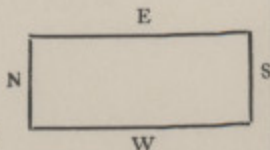
37.50

Carey Hand Funeral Home

Name of deceased *Mr. Geneva Stewart*
 Date of death *Sun July 4-43* A M
 Cause of death *T. B.*
 Place of death *Tula State P. B.*
 Residence *St. Louis Mo.*
 Age *25* Y'rs. *1* Mo's. *2* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *West*
 Date *July* 194 *3* M
 Account charged *Miss Rellian Long*
 Address *Okla. Fla.*
 Account guaranteed _____
 Address _____
 Embalming *Y*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *C-3 St. Joe*
 Casket with Copper Lin. _____
 Style of Casket *Set. of Casket*
 No. of Casket *1972 Tampa*
 Outside Box *B-9*
 Shipping Case or Vault _____
 Handles *CA*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Lansing, Mich.*
 Section _____ Lot _____

35.00
 2.50
 1.50
 125.00

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Lansing Mich.*
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram *2-61*
 Minister *West*
 Music _____
 Casket Wagon *21*
 Physician *Dr. John A. Kelch*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

72.93

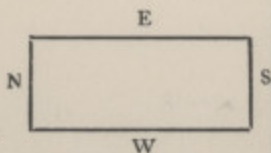
10.00

\$1251.93

Carey Hand Funeral Home

Name of deceased Chas H Eyles
 Date of death Sat - July 3 - 43 5:30 P.M.
 Cause of death _____
 Place of death Carey Hand
 Residence 440 N. Summerville
 Age _____ Y'rs. _____ Mo's. _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at the Service
 Date _____ 1943 _____ M
 Account charged John H. Eyles
 Address 440 N. Summerville
 Account guaranteed Son
 Address _____
 Embalming ☒
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Son
 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
 Urn Wooden
 Single Grave _____
 Opening and Closing Grave Body
 Body Shipped to Cremated
 R. R. Ticket S. A. M. West
 Cash advanced July - 6 - 43
 Autos _____
 Telegram Express Love & Mns
 Minister Lillian Dickinson
 Music 1409 W. St. Clair St
 Casket Wagon (1) Pittsburg
 Physician Wagon Pa
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

John H. Eyles
1409 N. St. Clair
Pittsburg, Pa

35.00

10.00

50.00

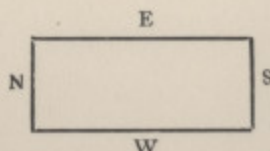
5.00

100.00

Carey Hand Funeral Home

Name of deceased Baby Corry
 Date of death Mon July 5-43 P. M.
 Cause of death ag. H.
 Place of death ag. H.
 Residence _____
 Age ✓ Y'rs. ✓ Mo's. ✓ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Home
 Date Tues July 6-1943 1943 4 P. M.
 Account charged L. M. Corry
 Address _____
 Account guaranteed Payments
 Address J. Curtis O'Neil & Co.
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2.0 H-L
 Casket with Copper Lin. _____
 Style of Casket sq
 No. of Casket H. M.
 Outside Box Key
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section 21 Lot _____

I Other Graves



X Grave on this date

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

12.50

12.50
4.50

5.00

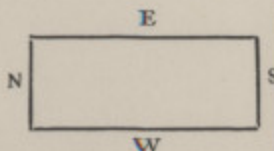
34.50
 10.00
24.50

ex by cash

Carey Hand Funeral Home

Name of deceased Mr. Owen E. Tison
 Date of death Mon. July 5- M
 Cause of death O.A.
 Place of death O.A.
 Residence 438 Hunter st
 Age 66 Y'rs. 7 Mo's. 17 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Tue. July 6- 1943 4 P. M
 Account charged Mrs. O. E. Tison
 Address _____
 Account guaranteed insurance
 Address _____
 Embalming & Dress 35.00
 Robe, Suit, Dress ☒
 Underwear and Hosiery ☒
 Casket 6-3-Emb. Doe 125.00
 Casket with Copper Lin. ☒
 Style of Casket Ext. H.C.
 No. of Casket 1972 - Temp.
 Outside Box Reg.
 Shipping Case or Vault ☒
 Handles Ext.
 Pillow Set Yes
 Name Plate _____
 Cemetery Woodlawn
 Section _____ Lot _____

I Other Graves



X Grave on this date

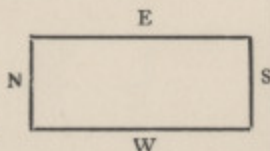
Cremation P. B. Car. (1) 5.00
 Urn Car. min. 10.00
 Single Grave _____ 3.00
 Opening and Closing Grave Teats 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Raymond Tuley & A. Paul Turner
 Music Organ 5.00
 Casket Wagon (1) Gray
 Physician _____
 County or City Burial _____ 15.00
 Automobiles S.V.S.
 Baggage or Express Train No. _____

210.00
 205.00
 5.00
200.00

Carey Hand Funeral Home

Name of deceased Thos M Newton
 Date of death July - 3 - 43 M
 Cause of death varicella enteral sclerosis
 Place of death Pa
 Residence Kissimmee Fla
 Age 74 Yrs. 9 Mo's. 4 Days
 Weight 150 Height 6 ft. — in. Eyes
 Funeral at Kissimmee
 Date 194 M
 Account charged Guggen T. Home
 Address Kissimmee Fla
 Account guaranteed OK
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket Body wood
 Casket with Copper Lin. 4 Auto
 Style of Casket 10 A
 No. of Casket 7-6-43
 Outside Box Body cremated
 Shipping Case or Vault 2 A
 Handles Wed - July 7-43
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

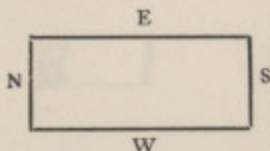
Cremation
 Urn wooden
 Single Grave ashes exposed
 Opening and Closing Grave
 Body Shipped to the Guggen
 R. R. Ticket Funeral Home
 Cash advanced Kissimmee Fla
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

3750

Carey Hand Funeral Home

Name of deceased *Mr Thos M George*
 Date of death *Wed July-7-43* *3 A M*
 Cause of death _____
 Place of death *Res -*
 Residence *Winter Garden*
 Age *78* Y'rs *1* Mo's *1* Days _____
 Weight *160* Height *5* ft *2* in. Eyes _____
 Funeral at *no service here*
 Date _____ 194
 Account charged *Mrs Elda M Noye* *M*
 Address _____
 Account guaranteed *ok*
 Address _____
 Embalming *Y* *35.00*
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *low eq* *45.00*
 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

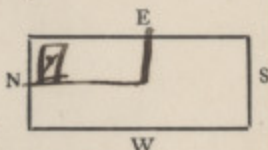
Cremation *Cumtation* *50.00*
 Urn *wooden*
 Single Grave *Body Cremated*
 Opening and Closing Grave *8- A M*
 Body Shipped to *Tru 7-9-43*
 R. R. Ticket _____
 Cash advanced *lin & express*
 Autos *Super int Washington*
 Telegram *Cumtation*
 Minister *Kansas City Mo -*
 Music _____
 Casket Wagon *(1)* *5.00*
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

135.00

Carey Hand Funeral Home

Name of deceased Mrs Eva Bellus
 Date of death Wed July 2-43 3:15 MP
 Cause of death _____
 Place of death Savage Nursing Home
 Residence S. Davis 2600
 Age 80 Y'rs 10 Mo's 6 Days _____
 Weight _____ Height _____ ft _____ in _____ Eyes _____
 Funeral at Chapel
 Date Wed July 7-43 1943 10 AM
 Account charged Mrs Alice Randall
 Address 1238 - 35th St Adden Heights
 Account guaranteed Payments
 Address _____
 Embalming VD 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 emb. box 125.00
 Casket with Copper Lin. _____
 Style of Casket Oct. H. Oct.
 No. of Casket 1972 Temp
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Oct
 Pillow Set Yes
 Name Plate _____
 Cemetery Greenwood
 Section 9 NE 1/4 Lot 37

I Other Graves



X Grave on this date

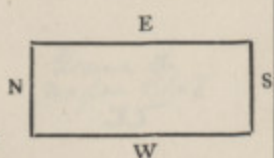
Cremation	<u>Burial Lot</u>	50.00
Urn	<u>None</u>	5.00
Single Grave	<u>P. B. & M. M.</u>	5.00
Opening and Closing Grave	<u>Typical</u>	15.00
Body Shipped to	<u>Cash on delivery</u>	1.00
R. R. Ticket	<u>Oct 82 - 82</u>	1.64
Cash advanced		
Autos		
Telegram		
Minister	<u>Paul Wavro C.S.</u>	
Music	<u>Organ</u>	
Casket Wagon	<u>(1) Redding</u>	5.00
Physician		
County or City Burial		
Automobiles	<u>S. V. S.</u>	15.00
Baggage or Express Train No.		

257.64
70
252.64
200.00
52.64

Carey Hand Funeral Home

Name of deceased *Mrs Bessie Shope*
 Date of death *Thurs July-8-43 4:30* MA
 Cause of death *Pulmonary T.B.*
 Place of death *County T.B. Hospital*
 Residence *Duland Rt. 3-Box*
 Age *53* Yrs *2* Mo's *23* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Duland*
 Date *July* 194 *3* M
 Account charged *E. M. Shope*
 Address *Duland Rt. 3-Box M-66*
 Account guaranteed *Payments*
 Address _____
 Embalming *Yes* 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-3-5-Emb. Box* 125.00
 Casket with Copper Lin. *Yes*
 Style of Casket *Oct. H.C.*
 No. of Casket *1922* -
 Outside Box *Reg.* -
 Shipping Case or Vault ☒
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate *Yes*
 Cemetery *Duland*
 Section _____ Lot _____

I Other Graves



X Grave on this date

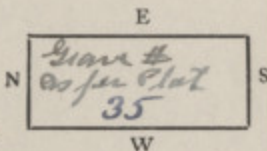
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Waycross Ga*
 R. R. Ticket *759 J. 540* 12.99
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *West*
 Music _____
 Casket Wagon *21* 10.00
 Physician *Dr. Moore*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. *92*

Fri July-9-43 182.99

Carey Hand Funeral Home

Name of deceased John Eric Johnson
 Date of death Thurs July 8 1943 6:30 A M
 Cause of death _____
 Place of death Kuuster Nursing Home
 Residence Spokane, R.F.D. Rudmont
 Age 76 Yrs. 2 Mo's. 20 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sun July 11, 1943 4 P M
 Account charged Rev. J. J. Donald 100 F
 Address Rt 5 - Box 50 J. Mc. Islands R.
 Account guaranteed _____
 Address _____
 Embalming Yes
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3-1/2 Dox
 Casket with Copper Lin. Yes
 Style of Casket Oct 1/2
 No. of Casket 12 - Penn
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext wooden
 Pillow Set yes
 Name Plate Yes
 Cemetery Greenwood
 Section 900 F Lot _____

I Other Graves _____



X Grave on this date _____

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave 12.00 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev. J. H. Butler
 Music Yes 5.00
 Casket Wagon 11 Kirk
 Physician Dr. Kirk
 County or City Burial _____
 Automobiles 8.00 15.00
 Baggage or Express Train No. _____

was all alone
Hand 169.00 saved

176.50
 7.50
169.00