

12-27-1943

Memoranda Book 162: Carey Hand Funeral Home records, December 27, 1943 to February 5, 1944

Carey Hand Funeral Home

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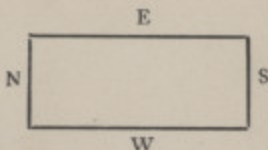
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<https://stars.library.ucf.edu/cfm-ch-records/162>

Carey Hand Funeral Home

Name of deceased Mrs. Lucie E. Tucker
 Date of death Mon. Dec - 27-43 3 P.M.
 Cause of death _____
 Place of death Tela Sant
 Residence Languard
 Age 74 Yrs. 11 Mo's. 25 Days
 Weight 90 Height 5 ft. 5 in. Eyes _____
 Funeral at Chapel
 Date Thurs. Dec 30 1943 4 P.M.
 Account charged Mrs. Iva Thomas
 Address Lake Charles La.
 Account guaranteed _____
 Address _____
 Embalming Dress 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-3 in cloth 200.00
 Casket with Copper Lin. ☒
 Style of Casket Set 4 cap
 No. of Casket 1575
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles Set
 Pillow Set Yes Taylor
 Name Plate ☒
 Cemetery ☒
 Section ☒ Lot _____

I Other Graves



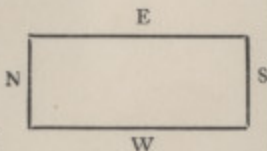
X Grave on this date

Cremation Cremation 50.00
 Urn small bronze 12.00
 Single Grave Eng. Urn 5.00
 Opening and Closing Grave _____
 Body Shipped to Body Crematory 8 AM
 R. R. Ticket Thurs. Dec 31-43
 Cash advanced will call for
 Autos _____
 Telegram _____
 Minister Rev. Chicheine
 Music Organ
 Casket Wagon (1) 5.00
 Physician Dr. Hart
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____
Bonding placed
in the urn 312.00
with ashes

Carey Hand Funeral Home

Name of deceased *Mrs. Martha Lewis*
 Date of death *Mon Dec 27* P.M.
 Cause of death
 Place of death *Wilbur Nursing Home*
 Residence *Apopka*
 Age *73* Yrs. *11* Mo's *23* Days
 Weight Height ft. in. Eyes
 Funeral at *First Baptist Church - Apopka*
 Date *Thursday Dec 30 1943* 2 P.M.
 Account charged *Francis Thomas*
 Address *Apopka Fla*
 Account guaranteed *Cash*
 Address
 Embalming *J. Duss*
 Robe, Suit, Dress *Van Sclut*
 Underwear and Hose
 Casket *4-3-1/2 Plush*
 Casket with Copper Lin.
 Style of Casket *Ext. 1/2 - R Tampa*
 No. of Casket *7-1850-*
 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 *Ante*
 Urn
 Single Grave
 Opening and Closing Grave *etc*
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister *Rev*
 Music
 Casket Wagon *11*
 Physician *Dr. M. B. Bide*
 County or City Burial
 Automobiles *S & S*
 Baggage or Express Train No.

Pd - Cash
 350.50
 350.00

Carey Hand Funeral Home

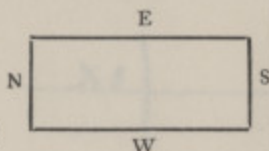
Name of deceased *Mrs. Olga N. Hales*
 Date of death *Nov Dec 22* 3:55 P.M.
 Cause of death *Old Age*
 Place of death *Old Age*
 Residence _____
 Age *81* Y'rs. *—* Mo's. *29* Days _____
 Weight *145* Height *5* ft. *6* in. Eyes _____
 Funeral at *St. James*
 Date _____ 194 *—* M
 Account charged *Charles N. Hales*
 Address *Turn Park-*
 Account guaranteed _____
 Address _____
 Embalming *+ Dress* 35.00
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *Low Chg*
 Casket with Copper Lin. _____
 Style of Casket *Low Chg* 35.00
 No. of Casket _____
 Outside Box *Yes Hales No Service*
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 I Other Graves _____
 X Grave on this date _____
 Cremation *Cremation* 50.00
 Urn *wooden*
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Body Cremated*
 R. R. Ticket *S-A On*
 Cash advanced *Body Cremated*
 Autos *Jan 9 of 44* AM
 Telegram _____
 Minister *wife call for*
 Music _____
 Casket Wagon *W. C. Swan* 5.00
 Physician *Dr. M. C. Swan*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

\$25.00

Carey Hand Funeral Home

Name of deceased John W. Cogbill
 Date of death Mon Dec - 27 - 1943 A. M.
 Cause of death _____
 Place of death Res
 Residence Gallwood
 Age 60 Y'rs. 8 Mo's. 5 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date Thursday Dec 29 1943 3 P. M.
 Account charged Mrs John W Cogbill
 Address Gallwood Fla
 Account guaranteed Ans -
 Address _____
 Embalming Yes
 Robe, Suit, Dress Blue
 Underwear and Hose _____
 Casket 6-3 Cloth 4 in Fin
 Casket with Copper Lin. ✓
 Style of Casket R.C. Style
 No. of Casket 48 - Tampa
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext -
 Pillow Set Yes -
 Name Plate ✓
 Cemetery Langavine
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation auto
 Urn _____
 Single Grave _____
 Opening and Closing Grave Yes
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram Rev Woodall
 Minister By Family
 Music By Family
 Casket Wagon (1)
 Physician Dr. Harnscl.
 County or City Burial _____
 Automobiles 8 & 5
 Baggage or Express Train No. _____

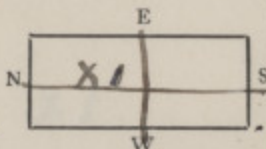
339.50

Carey Hand Funeral Home

Name of deceased Winifred Hattaway
 Date of death Dec. 25 M
 Cause of death _____
 Place of death Glenville Ga
 Residence _____
 Age 61 Y'rs. _____ Mo's. _____ Days _____
 Weight 120 Height 5 ft. 5 in. Eyes _____
 Funeral at Home side
 Date Mon Dec 27 1943 4 P. M
 Account charged Charles A. Wales
 Address Fernpark, Fla.
 Account guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box O S Box 10. --
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood Winter Park
 Section A E 1/2 Lot 80

I Other Graves



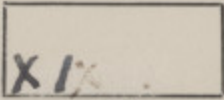
X Grave on this date

Cremation Body brought to
 Urn Island by plane
 Single Grave Sun - 12-26-43 15. --
 Opening and Closing Grave 11 P M
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles S & S 15. --
 Baggage or Express Train No. _____

40.00

Carey Hand Funeral Home

Name of deceased Ella A. Wald
 Date of death 12-28-43 4 9 M
 Cause of death Hall Star Duette
 Place of death Savannah Ga
 Residence Savannah -
 Age 64 Y'rs. 9 Mo's. 22 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Tues 12-28 1943 2 30 M P.
 Account charged Mrs. Mary
 Address _____
 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 Emmit 60.00
 Handles Ext -
 Pillow Set yes -
 Name Plate _____
 Cemetery Greenwood
 Section 9 Lot 12

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

Cremation Family car 5.00
 Urn P. B. + Min. Car 5.00
 Single Grave _____
 Opening and Closing Grave 7.00 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister A. Fred Turner
 Music Organ + Violon 5.00
 Casket Wagon (1)
 Physician _____
 County or City Burial _____
 Automobiles S. & S 15.00
 Baggage or Express Train No. 8

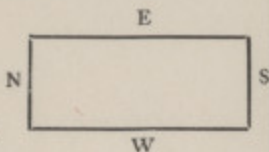
Paid Cash
12-28-43

705.00

Carey Hand Funeral Home

Name of deceased *Mrs. Susan E. Reiche*
 Date of death *Tues. Dec 28-47 8:30 A.M.*
 Cause of death *Shot through left Breast*
 Place of death *Res at stn*
 Residence *Maitland*
 Age *76* Y'rs *9* Mo's *11* Days
 Weight *120* Height *5* ft *2* in. Eyes
 Funeral at *Chapel*
 Date *Sun Jan 3-1948 4 P.M.*
 Account charged *J. A. Reiche*
 Address *Maitland Fla.*
 Account guaranteed *Estate*
 Address
 Embalming *Yes* *35.00*
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *4-3-9 1/2 Oak* *175.00*
 Casket with Copper Lin. *✓*
 Style of Casket *Set 7-2-C*
 No. of Casket *7-1850-Tamp.*
 Outside Box *Reg*
 Shipping Case or Vault *✓*
 Handles *Ext*
 Pillow Set *Yes*
 Name Plate *✓*
 Cemetery *Maitland*
 Section Lot

I Other Graves



X Grave on this date

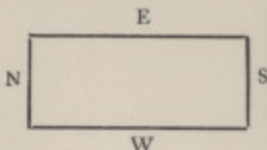
Cremation *Auto* *5.00*
 Urn
 Single Grave
 Opening and Closing Grave *9 ft* *15.00*
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister *Rev* *5.00*
 Music *Yes* *5.00*
 Casket Wagon *11* *5.00*
 Physician *Judge Duckworth*
 County or City Burial *15.00*
 Automobiles *5.00*
 Baggage or Express Train No. *255.00*

was shot through left Breast 32-Pw4
by Nelson A. Olmes
then he shot him self
through the Head

Carey Hand Funeral Home

Name of deceased Nelson A. Almas
 Date of death Tues Dec 28-43 430 MP
 Cause of death Shot through head him self
 Place of death Here Maillard
 Residence Maillard
 Age 71 Y'rs. 3 Mo's. 25 Days
 Weight 160 Height 5 ft. 8 in. Eyes
 Funeral at Chapel
 Date Sun Jan 2 1944 4P. M
 Account charged F. A. Reichs
 Address Maillard, Tex.
 Account guaranteed Estate
 Address
 Embalming Yes
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 4-5 in cloth
 Casket with Copper Lin. ☒
 Style of Casket Set 1/2 C
 No. of Casket 7-1850 Tampa
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set yes
 Name Plate ☒
 Cemetery Maillard
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation Auto
 Urn
 Single Grave
 Opening and Closing Grave Yes
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Rev
 Music yes
 Casket Wagon (1)
 Physician Judge Duckworth
 County or City Burial
 Automobiles 2 or 3
 Baggage or Express Train No.

shot him self through head
died in Hospital

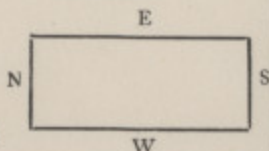
35.00
 175.00

5.00
 15.00
 5.00
 5.00
 15.00
 255.00

Carey Hand Funeral Home

Name of deceased William B. Brooks
 Date of death Dec 25-43 M
 Cause of death not given on Permit
 Place of death St Petersburg Fla
 Residence Beverly Mass
 Age 78 Y's 9 Mo's 22 Days
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at St Petersburg Fla
 Date _____ 194 _____ M
 Account charged Cemetery F. Home
 Address St Petersburg Fla
 Account guaranteed ck-
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Body Guard
 Casket with Copper Lin. by auto
 Style of Casket 11-A M Tue 12-28
 No. of Casket _____
 Outside Box Body Cremated
 Shipping Case or Vault 8-A M
 Handles Wed Dec 29-43
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

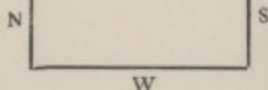
Cremation _____
 Urn wooden
 Single Grave Ashes Exposed
 Opening and Closing Grave _____
 Body Shipped to County H. Hall
 R. R. Ticket F. Home
 Cash advanced Ellis Square
 Autos Beverly Mass
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of deceased *Mr. Fred Thomas Johnson*
 Date of death *Dec 22-42* M
 Cause of death *1st given on Permit*
 Place of death *Orlando Fla*
 Residence _____
 Age *69* Y'rs *7* Mo's *21* Days _____
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at *Crescent F. Home*
 Date _____ 19*4* M
 Account charged *Crescent & Wigginton*
 Address *E. Church St Orlando Fla*
 Account guaranteed *OK*
 Address _____
 Embalming *Cremation* 37.50
 Robe, Suit, Dress _____
 Underwear and Hosiery _____
 Casket *Body Arrived*
 Casket with Copper Lin. *by auto*
 Style of Casket *3. P. 1st*
 No. of Casket *Trans Dec 28-43*
 Outside Box _____
 Shipping Case or Vault *Body Cremated*
 Handles *Mid-Dec 29-43*
 Pillow Set *8-A m.*
 Name Plate *ashes Del to*
 Cemetery *Crescent & Wigginton*
 Section *F. Home E. Church St Orlando*

I Other Graves



X Grave on this date

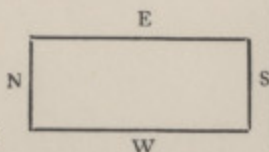
Cremation _____
 Urn *wooden*
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or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

37.60

Carey Hand Funeral Home

Name of deceased Lulma Niff
 Date of death Wed Dec-29 10:10 AM
 Cause of death _____
 Place of death O. G. H.
 Residence Beland- R. I. D. Conway
 Age 45 Yrs. 3 Mo's. 20 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel _____
 Date Thurs- 12-30 1943 2:30 PM
 Account charged Flourie Niff
 Address Beland- Rt 5- Price Ave
 Account guaranteed Payments
 Address _____
 Embalming Yes
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket Simple
 Casket with Copper Lin. ✓
 Style of Casket Set 1 Cap
 No. of Casket 1922- enfe
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles Set
 Pillow Set Yes
 Name Plate _____
 Cemetery Cremation
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation Cremation
 Urn wooden
 Single Grave _____
 Opening and Closing Grave Body
 Body Shipped to Cremated 8 AM
 R. R. Ticket Am Dec-31-43
 Cash advanced _____
 Autos will call for
 Telegram _____
 Minister Dean Johnson
 Music Organ
 Casket Wagon ✓
 Physician Dr. Mallory
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. B

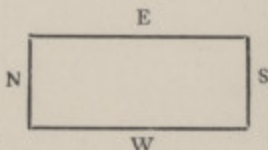
\$40.00

was in on
Private Sect for
3rd year

Carey Hand Funeral Home

Name of deceased Mrs. Kate Conall
 Date of death Thurs Dec 30 5 30 MA
 Cause of death _____
 Place of death Louis N. Home
 Residence Pine Castle
 Age 73 Y's 4 Mo's 19 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Sun Jan 2 1943 2 30 MP
 Account charged Dr. J. Sweet
 Address Pine Castle, Fla
 Account guaranteed Mrs
 Address _____
 Embalming Yes 25.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3-12 Plush 135.00
 Casket with Copper Lin. ✓
 Style of Casket Set H. Cap
 No. of Casket 1850 Tampa
 Outside Box 400 Cement 60.00
 Shipping Case or Vault _____
 Handles Yes
 Pillow Set Yes
 Name Plate _____
 Cemetery Conway
 Section _____ Lot _____

I Other Graves



X Grave on this date

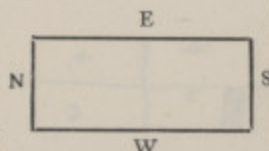
Cremation _____
 Urn Cost No Chg
 Single Grave _____
 Opening and Closing Grave Y etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician Dr. Morn
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. _____

\$ 250.00

Carey Hand Funeral Home

Name of deceased Baby Nimeth
 Date of death Dec 30-43 9:30 MP
 Cause of death _____
 Place of death Ata Sant
 Residence 1347-20th St Orlando
 Age ✓ Yrs. ✓ Mo's. ✓ Days 3 Hrs
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave Side
 Date _____ 194 _____ M
 Account charged James L Nimeth
 Address Orlando
 Account guaranteed Payment
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 2-0-H-L- 15.00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate Guernwood
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

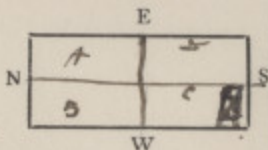
Cremation _____
 Urn _____
 Single Grave Baby Grave 12.50
 Opening and Closing Grave 5.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician Dr Capt Gulp
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

Ray no chq \$ 32.50

Carey Hand Funeral Home

Name of deceased Mr. Robt David Gaulby
 Date of death Fri Dec 31-43 P.M.
 Cause of death Myocardial - Coronary Sclerosis
 Place of death At
 Residence Wynne Park
 Age 68 Yrs. 9 Mo's. 18 Days
 Weight 170 Height 5 ft. 8 in. Eyes
 Funeral at Res -
 Date Wed Jan 5 1943 3 P.M.
 Account charged Mrs Robt D Gaulby
 Address 868 Golf View Dr W. Park
 Account guaranteed Estate
 Address
 Embalming Yes
 Robe, Suit, Dress Ext Sur
 Underwear and Hosiery
 Casket L-3 Oak. Big Trim
 Casket with Copper Lin.
 Style of Casket State of Calif.
 No. of Casket 110 Tampa
 Outside Box Yes
 Shipping Case or Vault Cement
 Handles Ext wooden
 Pillow Set Yes
 Name Plate Yes
 Cemetery Palm W. Park
 Section 69 Lot C

I Other Graves




X Grave on this date

Cremation 2- R B. Cars
 Urn 1- Min. Car
 Single Grave Car Tomb
 Opening and Closing Grave N. str
 Body Shipped to
 R. R. Ticket
 Cash advanced Am. Sur (2)
 Autos
 Telegram
 Minister
 Music
 Casket Wagon (1)
 Physician Dr. E. Evans
 County or City Burial
 Automobiles S. & S
 Baggage or Express Train No.

Flag 521.00
or y me out. 526.00
521.00

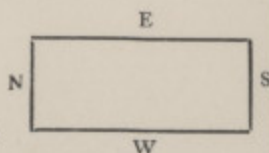
Carey Hand Funeral Home

Name of deceased	Mrs Lillian Moore		
Date of death	Tue Dec 31-43		P.M.
Cause of death			
Place of death	O. G. H.		
Residence	Parkview Hotel		
Age	65	Y'rs.	11 Mo's 6 Days
Weight		Height	
Funeral at	Chapel		
Date	Wed. Jan 5 1944		3 P.M.
Account charged	Mrs Louise H. Van Buren		
Address			
Account guaranteed	Estate		
Address			
Embalming	Done		35.00
Robe, Suit, Dress			
Underwear and Hose			
Casket	6-3-42 Cloth		185.00
Casket with Copper Lin.			
Style of Casket	Oct. 1/2 - e		
No. of Casket	7-1850-		
Outside Box			
Shipping Case or Vault			
Handles	Ext		
Pillow Set	yes		
Name Plate			
Cemetery	Lincoln		
Section		Lot	
<div style="text-align: center;"> <p>I Other Graves</p>  </div>			
X Grave on this date			
Cremation	Cremation		50.00
Urn	Urn		
Single Grave	Body cremated		
Opening and Closing Grave	8-4-44		
Body Shipped to	Times 1-6-44		
R. R. Ticket			
Cash advanced	will pay for		
Autos			
Telegram			
Minister	Rev. L. L. Lundy		
Music			
Casket Wagon	1-4-44		5.00
Physician	Dr. G. L. Gidson		
County or City Burial			
Automobiles			
Baggage or Express Train No.			
			275.00

Carey Hand Funeral Home

Name of deceased Annemie B. Truif
 Date of death Fri. Dec. 31-43 P. M.
 Cause of death O. D. H.
 Place of death Rockport
 Residence Rockport
 Age 56 Yrs. 4 Mo's. 14 Days
 Weight 145 Height 5 ft. 6 in. Eyes
 Funeral at Chapel
 Date Monday Jan 3rd 1944 4 P. M.
 Account charged Arthur J. Truif
 Address Rockport, Fla.
 Account guaranteed Yes
 Address 48
 Embalming Yes 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket Lin - Chg 60.00
 Casket with Copper Lin
 Style of Casket Ext. N. P.
 No. of Casket
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Cremation
 Section Lot

I Other Graves



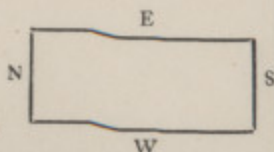
X Grave on this date

Cremation Cremation 50.00
 Urn None
 Single Grave ☒
 Opening and Closing Grave
 Body Shipped to Body cremated
 R. R. Ticket 8 A. M. Jan - 4-44
 Cash advanced
 Autos will call for
 Telegram
 Minister
 Music
 Casket Wagon (1) 5.00
 Physician Dr. F. J. Brown
 County or City Burial
 Automobiles
 Baggage or Express Train No.

150.00

Carey Hand Funeral Home

Name of deceased *Mr Arthur A. Stape*
 Date of death *Dec. 29-43* M
 Cause of death *Not given in Permit*
 Place of death *St. Meyers Va*
 Residence :
 Age *62* Yrs. Mo's. Days.
 Weight. Height. ft. in. Eyes.
 Funeral at *St. Meyers*
 Date 194 M
 Account charged *Sharon & Singleheart*
 Address *St. Meyers Va*
 Account guaranteed *Chk -*
 Address
 Embalming *Cremation* 37.50
 Robe, Suit, Dress
 Underwear and Hose *Body unwid*
 Casket *by Express 26*
 Casket with Copper Lin. *Set morning*
 Style of Casket
 No. of Casket *Body Cremated*
 Outside Box *8 P.M. Sun*
 Shipping Case or Vault *Jan - 2 - 44*
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section. Lot.
 I Other Graves
 X Grave on this date
 Cremation
 Urn *wooden*
 Single Grave *Ashes*
 Opening and Closing Grave *Expressed*
 Body Shipped to *Sharon & Singleheart*
 R. R. Ticket *St. Meyers Va*
 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 Robert C. Mc. Intosh
 Date of death Sun Jan 2 - 44 11:30 A.M.
 Cause of death _____
 Place of death Wills Nursing Home
 Residence Bell Isle Fla
 Age 64 Y'rs 3 Mo's 8 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Wed Jan 5 1944 4:30 P.M.
 Account charged Sarah Mc. Intosh
 Address 734 S. Orange Ave Orlando Fla
 Account guaranteed Estate
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-9 1/2 x 28 135.00
 Casket with Copper Lin. ✓
 Style of Casket Oct H. Cap
 No. of Casket 1850 -
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles Ext -
 Pillow Set yes -
 Name Plate ✓
 Cemetery Cremation
 Section _____ Lot _____

 I Other Graves E

NS

 X Grave on this date W

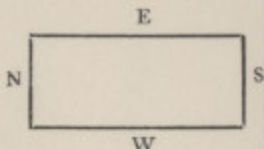
 Cremation Cremation 50.00
 Urn wooden
 Single Grave Body Cremated 8-A.M.
 Opening and Closing Grave Thurs 1-5-44
 Body Shipped to _____
 R. R. Ticket Ashes Deposit Home
 Cash advanced Woodlawn Cemetery
 Autos 9-A.M. Jan 7-44 -
 Telegram ✓
 Minister Dandys
 Music Organ
 Casket Wagon (1) 5.00
 Physician Dr. M. Malloy
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

225.00

Carey Hand Funeral Home

Name of deceased Charles Palmer
 Date of death Sun Jan 2 - 44 AM
 Cause of death was found dead Had been dead
 Place of death Rich St. G.
 Residence 2 Miles South of Apoka Rd
 Age 79 Y'rs 8 Mo's 4 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Baptist Church
 Date Fri Jan 7 - 1944 11 AM
 Account charged W. G. Tallon
 Address Apoka
 Account guaranteed Estate
 Address _____
 Embalming Case of Body 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3-12 125.00
 Casket with Copper Lin. ✓
 Style of Casket Oct. H. Pop
 No. of Casket 1972-9
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set Yes
 Name Plate ✓
 Cemetery Apoka
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation Burns Lot 10.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev. Patterson
 Music By Church 10.00
 Casket Wagon to Res
 Physician J. P. at Apoka
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. _____

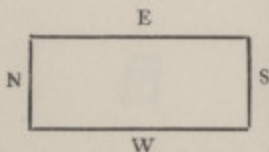
Wm. H. Palmer
New London Wis.

\$ 210.00

Carey Hand Funeral Home

Name of deceased Marion Luther Hollins
 Date of death Jan 3rd 11 A. M.
 Cause of death Wilsey Nursing Home
 Place of death Pockhart Fla
 Residence Pockhart Fla
 Age 68 Yrs. 9 Mo's. 28 Days
 Weight 90 Height 5 ft. 5 in. Eyes
 Funeral at Chapel
 Date Tuesday Jan 4 1944 3 P. M.
 Account charged W. H. C. Hollins
 Address Pockhart Fla
 Account guaranteed Cash
 Address
 Embalming ☒ 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 4-3-Gr. Doe 135.00
 Casket with Copper Lin.
 Style of Casket Ext. H Cap.
 No. of Casket 1850 Tampa
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery Lake Hill
 Section Lot

I Other Graves



X Grave on this date

Cremation auts 5.00
 Urn auts 5.00
 Single Grave
 Opening and Closing Grave etc 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Rev. Carder
 Music Organ & Violin
 Casket Wagon (1) 5.00
 Physician Dr. Moon
 County or City Burial
 Automobiles SVS 15.00
 Baggage or Express Train No.

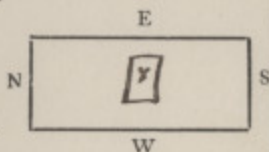
215.00

Carey Hand Funeral Home

Name of deceased *Mrs Anna Huppel*
Date of death *Tues Jan - 4 - 44 -* *7* A.M.
Cause of death *Ag. H.*
Place of death *Ag. H.*
Residence *1309 E. Robinson*
Age *39* Y'rs *9* Mo's *28* Days
Weight *145* Height *5* ft. *5* in. Eyes
Funeral at *Chapel*
Date *Friday Jan 6, 1944* *4:30 P.M.*
Account charged *J. B. Huppel*
Address *2010 - Leelanau St. Grand Haven*
Account guaranteed *Estate*
Address
Embalming *Yes* *35.00*
Robe, Suit, Dress *Grey Silk Robe* *25.00*
Underwear and Hose *Yes*
Casket *6-3-12 Tiger Plank* *350.00*
Casket with Copper Lin. *Yes*
Style of Casket *Oct 1/2 - C -*
No. of Casket *2637 1/2 -*
Outside Box *Reg*
Shipping Case or Vault *Yes*
Handles *Steel*
Pillow Set *Yes Fresh*
Name Plate *Yes*
Cemetery *Greenwood*
Section *6 - Bell - 14* Lot *24*

HEAD OF CREEK
EAST

I Other Graves



X Grave on this date

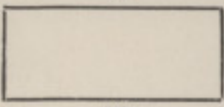
Cremation	2 - extra P.B.	10.00
Urn	Case Min	5.00
Single Grave	Interment from Chapel	5.00
Opening and Closing Grave	etc	15.00
Body Shipped to		
R. R. Ticket		
Cash advanced		
Autos		
Telegram		
Minister	Rev. Yes Traffic	5.00
Music	yes	5.00
Casket Wagon	(1)	
Physician	Dr. Crocker	
County or City Burial		
Automobiles	SVS	15.00
Baggage or Express Train No.		

470.00

5465.00

Carey Hand Funeral Home

Name of deceased *Mr Alfred Austin*
 Date of death *Tues. June 4-44* *3:10 P.M.*
 Cause of death *Death*
 Place of death *Death*
 Residence *Trammell Ky.*
 Age *82* Yrs. *25* Mo's. *25* Days
 Weight *150* Height *5* ft. *10* in. Eyes *Blue*
 Funeral at *Leest*
 Date *Jan* 194 *4* M
 Account charged _____
 Address _____
 Account guaranteed _____
 Address _____
 Embalming *Yes* *35.00*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *4-6* *Wm - H. Pope* *450.00*
 Casket with Copper Lin. *Yes*
 Style of Casket *State*
 No. of Casket _____
 Outside Box *Yes*
 Shipping Case or Vault *Yes*
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Beach Grove Ky.*
 Section _____ Lot _____

I Other Graves _____
 X Grave on this date _____


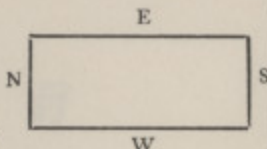
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Bowling Green Ky* *102.87*
 R. R. Ticket *Yes*
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon *(2)* *10.00*
 Physician *Dr. Day*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

597.87

Carey Hand Funeral Home

Name of deceased Sandra Du Pree
 Date of death Wed Jan 5 - 11 A M
 Cause of death O.A.H.
 Place of death O.A.H.
 Residence 1119 Indiana Ave Deland
 Age 1 Yrs. Mo's 4 Days 4
 Weight Height ft. in. Eyes
 Funeral at Chapel
 Date Thurs Jan 6 - 1944 11-A M
 Account charged Gas B. Johnson
 Address 1119 Indiana Ave - Deland
 Account guaranteed Cash
 Address
 Embalming Pres of Body 25.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 2-6-11 Plush 25.00
 Casket with Copper Lin.
 Style of Casket Ext H. 9x7
 No. of Casket 103- Tampa
 Outside Box ☒
 Shipping Case or Vault ☒
 Handles small
 Pillow Set yes
 Name Plate
 Cemetery Edmondson
 Section Lot

I Other Graves



X Grave on this date

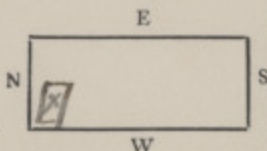
Cremation Cremation 25.00
 Urn wooden
 Single Grave
 Opening and Closing Grave late
 Body Shipped to Body cremated
 R. R. Ticket 8-A. In
 Cash advanced Fri Jan 7-44
 Autos
 Telegram will call
 Minister Rev Jackson
 Music Organ
 Casket Wagon (1) N. 8x9-
 Physician Dr. Allen Jones
 County or City Burial
 Automobiles
 Baggage or Express Train No.

75.00

Carey Hand Funeral Home

Name of deceased *Mary Louise Dollar*
 Date of death *Wed Jan 5 - 44 12:35 PM*
 Cause of death _____
 Place of death *Res*
 Residence *1805 - West Wash St*
 Age *80* Yrs. *7* Mo's. *15* Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Catholic Church*
 Date *Sat Jan 8 1944 9 AM*
 Account charged *Mrs Walter Gascott*
 Address *1805 - W. Wash St*
 Account guaranteed *Estate*
 Address _____
 Embalming *+ \$* 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3-12 Box* 135.00
 Casket with Copper Lin. _____
 Style of Casket *Oct - H. Cap*
 No. of Casket *1850 Tampa*
 Outside Box *Reg*
 Shipping Case or Vault _____
 Handles *Ext*
 Pillow Set *yes*
 Name Plate *crucifix*
 Cemetery *Greenwood*
 Section *E* *con. line* Lot *F*

I Other Graves



X Grave on this date

Cremation *Auto - P.B.* 5.00
 Urn *auto min* 5.00
 Single Grave _____
 Opening and Closing Grave *etc* 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Father O'Ferrell*
 Music *by Church*
 Casket Wagon *(1)* 5.00
 Physician *Dr. Horace Day*
 County or City Burial _____
 Automobiles *S&S* 15.00
 Baggage or Express Train No. _____

215.00

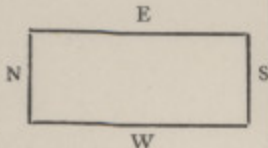
Carry Hand Funeral Home

Name of deceased John Thos T. Brewer
 Date of death Jan 5 29. M
 Cause of death _____
 Place of death Res.
 Residence 109 Liberty St
 Age 77 Y'rs. 10 Mo's. 16 Days
 Weight 140 Height 5 ft. 5 in. Eyes Blue
 Funeral at Chapel
 Date Friday Jan 7 1944 2:30 P M
 Account charged Mrs Thos T. Brewer
 Address 104 Liberty
 Account guaranteed Board P.
 Address _____
 Embalming & Dressing 95.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 4-3-3 in cup 75.00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Cremation
 Section _____ Lot _____
 I Other Graves _____
 X Grave on this date _____
 Cremation Cremation 50.00
 Urn wooden
 Single Grave Body transported
 Opening and Closing Grave P-A-M
 Body Shipped to San - 1 - 9 - 44
 R. R. Ticket _____
 Cash advanced Spec of Tidings 10.00
 Autos with call for
 Telegram 83 - 328 4.11
 Minister Rev Allan Johnson
 Music Organ 5.00
 Casket Wagon (1)
 Physician Dr. T. A. Neal
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____
764.11

Carey Hand Funeral Home

Name of deceased John R. Hamilton
 Date of death Frid. Jan. 5-44 M.P.
 Cause of death Cerebral Hemorrhage
 Place of death C. G. A.
 Residence Minneapolis, Minn.
 Age 57 Y'rs. 5 Mo's. 12 Days
 Weight 180 Height 5 ft. 9 in. Eyes
 Funeral at Elect
 Date Jan 1944 M
 Account charged Mrs. Edna P. Hamilton
 Address Minneapolis, Minn.
 Account guaranteed Check
 Address
 Embalming Y. Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 6-6 Birch & Metal 250.00
 Casket with Copper Lin. ☒
 Style of Casket R. P. State
 No. of Casket 48 - Tampa
 Outside Box Req.
 Shipping Case or Vault ☒
 Handles Ext -
 Pillow Set yes
 Name Plate ☒
 Cemetery Destinarian
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn Aulmar 13.11
 Single Grave
 Opening and Closing Grave
 Body Shipped to Winnipeg Canada
 R. R. Ticket
 Cash advanced
 Autos omb Sen 5.00
 Telegram
 Minister Destinarian
 Music
 Casket Wagon (2) 10.00
 Physician Dr. Mallory
 County or City Burial
 Automobiles
 Baggage or Express Train No.

Mrs. John R. Hamilton

Winnipeg Manitoba
Canada

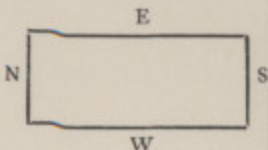
313.11

Carry Hand Funeral Home

Name of deceased *Mrs Anna E Holliday*
 Date of death *Thurs Jan 6 - 44* *120 P M*
 Cause of death
 Place of death *Hospital in Deland*
 Residence *Deland*
 Age *83* Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at *Chapel*
 Date *Jan 8 Sat* 194*4* *119* M
 Account charged *R. V. Allen*
 Address *Enterprise Fla*
 Account guaranteed *Yes*
 Address
 Embalming *Dress*
 Robe, Suit, Dress *Suit*
 Underwear and Hose
 Casket *6-3 in. Maple*
 Casket with Copper Lin.
 Style of Casket *Oct St. Pap*
 No. of Casket *1923 Tampa*
 Outside Box *Res.*
 Shipping Case or Vault
 Handles *Ext. wood*
 Pillow Set *eyes*
 Name Plate
 Cemetery *Greenwood*
 Section Lot

35.00
 15.00
 1.50
 122.50

I Other Graves



X Grave on this date

Cremation *auto Min & P.B* 5.00
 Urn
 Single Grave *Single Grave* 25.00
 Opening and Closing Grave *etc* 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister *Dr. Fred Turner*
 Music *Organ*
 Casket Wagon *X Deland* 10.00
 Physician *Dr. Hugh West*
 County or City Burial
 Automobiles *S & S* 15.00
 Baggage or Express Train No. *3*

244.00

Carry Hand Funeral Home

Name of deceased Mrs. Mary B. Jewett
 Date of death Thurs. Jan-6-44 A M
 Cause of death _____
 Place of death Fun. Parl.
 Residence Fun. Parl.
 Age 90 Y'rs. 5 Mo's. 29 Days _____
 Weight 90 Height _____ ft. _____ in. Eyes _____
 Funeral at Family Room
 Date Mon Jan 9 - 1944 10 M/A
 Account charged Ruth C. Nash
 Address Fun. Parl. Fla.
 Account guaranteed Payment
 Address _____
 Embalming Y 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 _____
 Section _____ Lot _____

I Other Graves E
N S
W

X Grave on this date _____

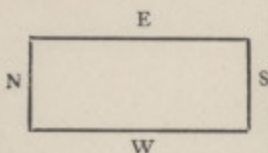
Cremation Cremation 50.00
 Urn wooden
 Single Grave Body cremated
 Opening and Closing Grave 8 - A.M.
 Body Shipped to Mem. 1-10-44
 R. R. Ticket _____
 Cash advanced will call for
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon * Res. 7 10.00
 Physician Dr. G. H. Hart
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

cr tak
145.00
95.00

Carey Hand Funeral Home

Name of deceased Baby Mabius
 Date of death Tues Jan 6-44 7 A M
 Cause of death Still Born
 Place of death Tula
 Residence 521- River St
 Age 2 Y's 1 Mo's 1 Days 1
 Weight 10 Height 18 ft. 0 in. Eyes Blue
 Funeral at Chapel
 Date Mon Jan 10 1944 11 A M
 Account charged Jack C Mabius
 Address 521 River St
 Account guaranteed Ch
 Address Ch
 Embalming Care of Body 15.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 2.0. H L 27.50
 Casket with Copper Lin. ✓
 Style of Casket Oct. H Top
 No. of Casket 103 Tampa
 Outside Box 8.00
 Shipping Case or Vault ✓
 Handles Small
 Pillow Set Yes
 Name Plate ✓
 Cemetery Greenwood
 Section ✓ Lot ✓

I Other Graves



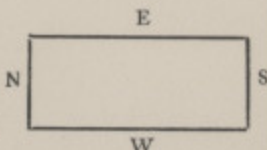
X Grave on this date

Cremation ✓
 Urn ✓
 Single Grave Baby Grave 12.50
 Opening and Closing Grave 4.50
 Body Shipped to ✓
 R. R. Ticket ✓
 Cash advanced ✓
 Autos ✓
 Telegram ✓
 Minister Chaplain from Bere
 Music Organ
 Casket Wagon ✓
 Physician Dr. Gault
 County or City Burial ✓
 Automobiles Sedan 6.50
 Baggage or Express Train No. ✓ 66.00

Carey Hand Funeral Home

Name of deceased Robert Hysd Nutt
 Date of death Jan 3 M
 Cause of death Congestive heart failure
 Place of death Quincy Fla
 Residence Int Lora Fla
 Age 89 Y'rs 3 Mo's 18 Days
 Weight 150 Height 6 ft. 5 in. Eyes Gray
 Funeral at Int Lora Fla
 Date Jan 1944 M
 Account charged Rebbaum & Company
 Address Int Lora Fla
 Account guaranteed Check
 Address _____
 Embalming _____
 Robe, Suit, Dress Cremation 37.50
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket Body covered
 No. of Casket 5:30 P.M. Thurs
 Outside Box Jan 6 - 44
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body cremated
 Name Plate 8:15: Friday
 Cemetery Jan 3 - 44
 Section _____ Lot _____

I Other Graves



X Grave on this date

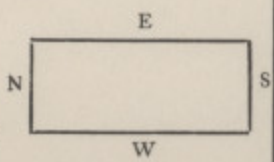
Cremation Ashes expressed to
 Urn Mr. F. Richards & Sons
 Single Grave Hackensack
 Opening and Closing Grave New Jersey
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home *Cooney*

Name of deceased *Fenton Grant Hooney*
 Date of death *Thurs Jan 6-44* *17 M*
 Cause of death *Accidentally took poison*
 Place of death *1130 Edgewood Dr*
 Residence *Greenfield Ind*
 Age *76* Y's *10* Mo's *194* Days *M*
 Weight *180* Height *5* ft *10* in Eyes *Blue*
 Funeral at *Best*
 Date *Jan 10* 194 *M*
 Account charged *Mrs. Ida L. Cooney*
 Address *Greenfield Ind*
 Account guaranteed *Payments - Cash 30.00*
 Address *Greenfield Ind*
 Embalming *4 Durs* 35.00
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *6-3 in triple* 95.00
 Casket with Copper Lin. *✓*
 Style of Casket *2-4 H. Cap*
 No. of Casket *71-Tampa*
 Outside Box *Reg*
 Shipping Case or Vault *✓*
 Handles *that*
 Pillow Set *yes*
 Name Plate *son*
 Cemetery *son*
 Section *son* Lot *son*

I Other Graves



X Grave on this date

Cremation *✓*
 Urn *✓*
 Single Grave *✓*
 Opening and Closing Grave *✓*
 Body Shipped to *Greenfield Ind*
 R. R. Ticket *A.R.*
 Cash advanced *A.R.*
 Autos *✓*
 Telegram *✓*
 Minister *✓*
 Music *✓*
 Casket Wagon *2*
 Physician *Mrs. Ford*
 County or City Burial *✓*
 Automobiles *✓*
 Baggage *✓* Express Train No. *76*

87.63

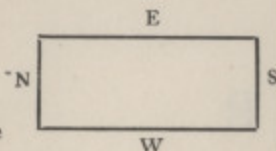
10.00

Tue Night 1-7-44
21 cash
 227.63
 30.00
 197.63
 87.63
 \$110.00
Paid

Carey Hand Funeral Home

Name of deceased *Mrs Susan Va Beer*
 Date of death *Tue Jan 7-44* *2 30 AM*
 Cause of death _____
 Place of death *Res -*
 Residence *Orlando. Rt. 2 -*
 Age _____ Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Sun Jan 9* 19*44* *2 30 PM*
 Account charged *Fred R Beer*
 Address *Rt. 2 - Box 309 - Orlando.*
 Account guaranteed *Payorants*
 Address _____
 Embalming *Yours* *35.00*
 Robe, Suit, Dress *White Dress* *5.00*
 Underwear and Hose _____
 Casket *6-3- in. Casket* *100.00*
 Casket with Copper Lin. _____
 Style of Casket *Oct- 1942 -*
 No. of Casket *Oct 4 Cal.*
 Outside Box *R-eg*
 Shipping Case or Vault _____
 Handles *Ext -*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Pleasant Hill* *Kearney*
 Section _____ Lot _____

I Other Graves



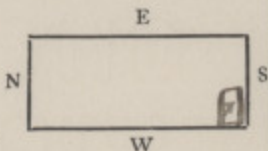
X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave *15.00*
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon *(1)* *5.00*
 Physician _____
 County or City Burial _____
 Automobiles *5 x 3* *15.00*
 Baggage or Express Train No. _____
175.00

Carey Hand Funeral Home

Name of deceased Mrs Carrie S. Wilson
 Date of death Tue Jan - 7 - 44 10 A M
 Cause of death Chc Myocarditis
 Place of death Res
 Residence 235 Ridgewood
 Age 76 Yrs. 4 Mo's — Days —
 Weight — Height — ft. — in. Eyes —
 Funeral at Carrie S. Wilson
 Date Mon Jan 10 1944 4 P. M
 Account charged Harry Wilson
 Address —
 Account guaranteed Estate
 Address —
 Embalming Y 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose —
 Casket 6-6 1/2 Yr cloth 250.00
 Casket with Copper Lin. —
 Style of Casket Oct H Cap
 No. of Casket 1808 Wilson
 Outside Box R-9
 Shipping Case or Vault —
 Handles Ext -
 Pillow Set Yes Taylor
 Name Plate —
 Cemetery Greenwood
 Section 5 - Lot 99

I Other Graves



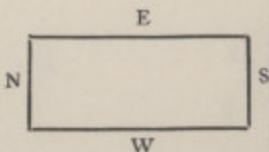
X Grave on this date

Cremation P. B. Car 5.00
 Urn Car Mrs 5.00
 Single Grave Family car 15.00
 Opening and Closing Grave —
 Body Shipped to —
 R. R. Ticket —
 Cash advanced —
 Autos —
 Telegram —
 Minister Mrs E. G. — 5.00
 Music yes - Mrs Cole 2.50
 Casket Wagon (1) 5.00
 Physician Dr. & M. Egan
 County or City Burial — 15.00
 Automobiles 5 & 3
 Baggage or Express Train No. — 337.50

Carey Hand Funeral Home

Name of deceased James Donald Moore
 Date of death Tue Jan 7-44 4:30 MP
 Cause of death _____
 Place of death in auto in Winter Garden
 Residence mt Verde
 Age 71 Y'rs 6 Mo's 13 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Church at mt Verde
 Date _____ 194 _____ M
 Account charged Harvey Moore
 Address Winter Garden
 Account guaranteed Ins -
 Address _____
 Embalming yes
 Robe, Suit, Dress Blue Sat
 Underwear and Hose _____
 Casket 6-3- in box
 Casket with Copper Lin. ✓
 Style of Casket Oct. 1/2-C
 No. of Casket 7-1850 Transp
 Outside Box R-19
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery mt Verde
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave yes

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Autos _____

Telegram _____

Minister _____

Music _____

Casket Wagon H. H. G. 2 trips

Physician Dr. Larson

County or City Burial _____

Automobiles 5 & 3

Baggage or Express Train No. _____

35.00
 25.00
 1.50
 175.00

15.00

8.50

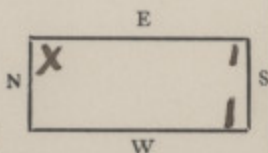
15.00

275.00

Carey Hand Funeral Home

Name of deceased Mrs. Ruth C. Cameron
 Date of death Sat Jan 8-44 4 M
 Cause of death 218 Rollins Ave.
 Place of death _____
 Residence Rollins Ave
 Age 45 Y'rs. 10 Mo's. 24 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Tues Jan 11 1944 4 P M
 Account charged Mrs. R. J. Cameron
 Address 218- Rollins
 Account guaranteed Estate
 Address _____
 Embalming Y S 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 4-9- In Church 175.00
 Casket with Copper Lin. ✓
 Style of Casket Set 2-C
 No. of Casket 7-1850 Temple
 Outside Box Reg-
 Shipping Case or Vault ✓
 Handles Ext -
 Pillow Set Yes -
 Name Plate ✓
 Cemetery Greenwood
 Section U Lot 24

I Other Graves



X Grave on this date

Cremation P. B car 5.00
 Urn Car 2nd 5.00
 Single Grave Car Family
 Opening and Closing Grave Y etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Elder Montwell
 Music By Family
 Casket Wagon (1) 5.00
 Physician Dr. L. J. Linn
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. _____

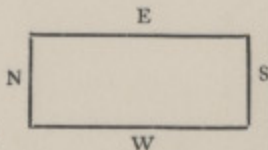
255.00

Carey Hand Funeral Home

Name of deceased Forest Hart
 Date of death Sat Jan 8-44 A M
 Cause of death _____
 Place of death Per
 Residence Orlando Rt 5
 Age 68 Y's 11 Mo's 2 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grave side
 Date Mon Jan 10- 1944 2 P. M
 Account charged Miss Marie Hart
 Address Orlando Rt 5
 Account guaranteed _____
 Address _____
 Embalming Y
 Robe, Suit, Dress Blue Serge
 Underwear and Hose _____
 Casket 6-3-4 in Cope
 Casket with Copper Lin. 5
 Style of Casket Top H. Cap
 No. of Casket 71 Temple
 Outside Box Reg
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Conway
 Section _____ Lot _____

35.00
 10.00
 2.00
 95.00

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave 4 etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev. S. J. ...
 Music _____
 Casket Wagon (1) 5.00
 Physician Dr. M. ...
 County or City Burial _____
 Automobiles 3 x 3 15.00
 Baggage or Express Train No. _____

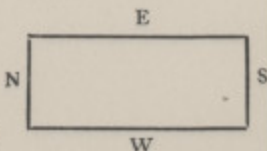
177.00
 178.00
 105.00
 70.00

or by ch

Carey Hand Funeral Home

Name of deceased Wm T. Wisenup
 Date of death Jan 6-44 M
 Cause of death
 Place of death Remigious Cemetery
 Residence Sanford Fla
 Age 71 Y'rs 10 Mo's 11 Days
 Weight Height ft. in. Eyes
 Funeral at Sanford
 Date 194 M
 Account charged R & Brissson
 Address S. H. Sanford Fla
 Account guaranteed OK
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin. Body Guard
 Style of Casket by order 11-A-M
 No. of Casket Set-1-8-44
 Outside Box
 Shipping Case or Vault Body Guard
 Handles 8-A-M Sun 1-9-44
 Pillow Set
 Name Plate will call for
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

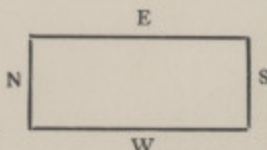
Cremation
 Urn wooden
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Frank Griffin
 Date of death Jan - 5 - 44 M
 Cause of death Not given on Permit
 Place of death _____
 Residence Delanda -
 Age 82 Y'rs. 5 Mo's. 6 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged Exchater & Higginson
 Address E. Church st
 Account guaranteed ok
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Body
 Style of Casket Quarid by
 No. of Casket Del 4 P. M
 Outside Box Del Jan 8-44
 Shipping Case or Vault _____
 Handles Body Cremated 8-AM
 Pillow Set Fun - Jan 9-44
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

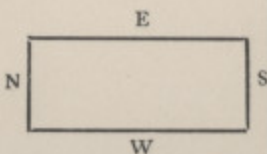
Cremation _____
 Urn wooden
 Single Grave Del 8
 Opening and Closing Grave _____
 Body Shipped to Exchater & Higginson
 R. R. Ticket Delanda -
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of deceased Mr Curtis Coel
 Date of death Wed Jan 8-44 P.M.
 Cause of death Heart Attack
 Place of death Res.
 Residence Deland Rd Blair Lake
 Age 66 Yrs. 1 Mo's. 4 Days
 Weight 185 Height 5 ft 8 in. Eyes
 Funeral at Chapel
 Date Wed Jan 12 1944 10 30 M
 Account charged Mrs Curtis Coel
 Address
 Account guaranteed Estate
 Address
 Embalming & Dress 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-6 Oak. Gr. Fin 350.00
 Casket with Copper Lin. ✓
 Style of Casket State 12-2
 No. of Casket 7-110 Tampa
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles yes
 Pillow Set yes
 Name Plate ✓
 Cemetery West
 Section..... Lot.....

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to Cincinnati Ohio
 R. R. Ticket 1-(3807) 2-(2710)
 Cash advanced
 Autos
 Telegram tel 5.49 28 Phm 300 8.89
 Minister Rev. Gordon
 Music Organ 15.00
 Casket Wagon 2-10-5
 Physician J. P. Altman
 County or City Burial
 Automobiles
 Baggage or Express Train No. 92 3

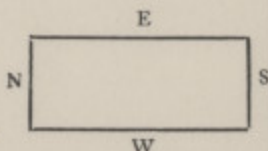
Wed Jan 12-44

301.14

Carey Hand Funeral Home

Name of deceased Conie Boddy
 Date of death Mon Jan - 9 - 44 5 A M
 Cause of death _____
 Place of death County Home
 Residence Winter Garden
 Age 72 Y'rs. 10 Mo's. 5 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Wed Jan 12 1944 10 30 M A
 Account charged Clyde Rowe
 Address Orlando -
 Account guaranteed Insurance
 Address _____
 Embalming Y & S 25.00
 Robe, Suit, Dress _____ 10.00
 Underwear and Hose _____ 90.00
 Casket 6-3- in Maple
 Casket with Copper Lin. Spr H. Cap
 Style of Casket _____
 No. of Casket 71- Temp
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles that
 Pillow Set yes
 Name Plate Greenwood
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____

Urn _____ 25.00

Single Grave White 15.00

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash advanced _____

Autos _____

Telegram _____

Minister Rev Linn

Music Organ 5.00

Casket Wagon (1)

Physician Dr. Moore

County or City Burial _____

Automobiles 8 & 3 15.00

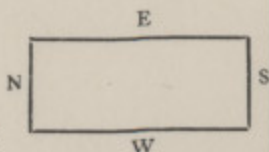
Baggage or Express Train No. _____

185.00
 % 1.50
175.00
25.00
200.00

Carey Hand Funeral Home

Name of deceased Joyaint (Corfenter)
 Date of death Jan 8 - 44 10:20 P.M.
 Cause of death Old
 Place of death Orlando, Fla
 Residence Orlando, Fla
 Age Yrs. 2 Mo's 2 Days
 Weight Height ft. in. Eyes
 Funeral at L
 Date 1944 M
 Account charged Mrs. Yes B. Corfenter
 Address Orlando Fla
 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 Cremation
 Section Lot

I Other Graves



X Grave on this date

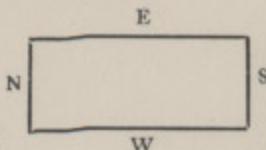
Cremation
 Urn
 Single Grave Body cremated
 Opening and Closing Grave 8-4 N
 Body Shipped to Tues - 1-14-44
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Will Call
 Music
 Casket Wagon
 Physician Dr. Brann
 County or City Burial
 Automobiles
 Baggage or Express Train No.

10.00

Carey Hand Funeral Home

Name of deceased Dwight A. Risener
 Date of death Jan 7 11:30 A M
 Cause of death _____
 Place of death Apopka Fla
 Residence Apopka Fla
 Age 41 Y'rs. 10 Mo's. 22 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Jan 10 - Monday 1944 2 A M
 Account charged Fred Risener
 Address Apopka Fla
 Account guaranteed Insurance
 Address _____
 Embalming & preserving 35 00
 Robe, Suit, Dress _____
 Underwear and Hose Shirt Collar & Tie 5 00
 Casket 6/6 State Hinge Casket 375 00
 Casket with Copper Lin. Black
 Style of Casket _____
 No. of Casket 8808 - Orleans
 Outside Box Cement Vault 60 00
 Shipping Case or Vault _____
 Handles Set
 Pillow Set yes
 Name Plate Apopka
 Cemetery Old Cemetery
 Section _____ Lot _____

I Other Graves



X Grave on this date

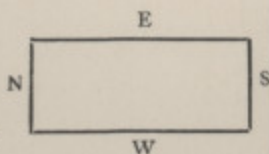
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev Patterson
 Music Organ
 Casket Wagon _____ 5 00
 Physician Dr. M. E. Kende
 County or City Burial _____
 Automobiles _____ 85 00
 Baggage or Express Train No. _____

\$510 00

Carey Hand Funeral Home

Name of deceased *Miss Etta Silverfriend*
 Date of death *Mon Jan 10-44* *12 30 MA*
 Cause of death *Eden Grant*
 Place of death *3100 Edgewater Dr*
 Residence *Estero Fla* *2nd Co*
 Age *77* Y'rs. *1* Mo's. *11* Days
 Weight *120* Height *5* ft. *11* in. Eyes *Blue*
 Funeral at *Estero*
 Date *1944* *M*
 Account charged *Henry Silverfriend*
 Address *Estero Fla*
 Account guaranteed _____
 Address _____
 Embalming *Yes* *35.00*
 Robe, Suit, Dress *Yes*
 Underwear and Hosiery *Yes*
 Casket *4-3-5 in. Maple* *90.00*
 Casket with Copper Lin. *Yes*
 Style of Casket *Sgt. St. Cap*
 No. of Casket *71-10mpa*
 Outside Box *Reg*
 Shipping Case or Vault *Yes*
 Handles *Short*
 Pillow Set *yes*
 Name Plate _____
 Cemetery *Estero*
 Section _____ Lot _____

I Other Graves



X Grave on this date

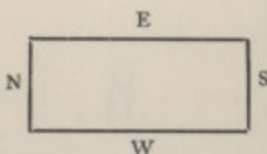
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to *Get Myers*
 R. R. Ticket *by auto*
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon *(1)* *5.00*
 Physician *Dr. Hester*
 County or City Burial _____
 Automobiles *4 to 10-44* *65.00*
 Baggage or Express Train No. _____

195.00
3.00
198.00

Carey Hand Funeral Home

Name of deceased William F. Baas.
 Date of death Jan 9th M
 Cause of death Cause not given on permit
 Place of death Stuart, Fla.
 Residence Stuart, Fla.
 Age 87 Y'rs 2 Mo's 20 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Stuart, Fla.
 Date Jan 194 4 M
 Account charged Johns Mortuary.
 Address Stuart, 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 4 Auto Wed
 Outside Box 11:30 a. m - 44
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body Cremated
 Name Plate Thurs 8 a. m - 44
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

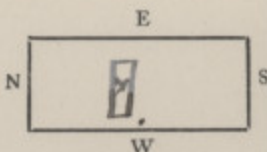
Cremation Will call for ashes
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____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

37.50

Carey Hand Funeral Home

Name of deceased Fannie Edna Briley
 Date of death Jan 12 1944 5:03 P M
 Cause of death Heart
 Place of death Res
 Residence Oakland
 Age 83 Y'rs. 8 Mo's. 15 Days
 Weight 110 Height 5 ft 5 in. Eyes Blue
 Funeral at Res
 Date Fri Jan - 14 1944 4 P M
 Account charged Mr Sam J. Briley
 Address Oakland
 Account guaranteed Est
 Address 4000
 Embalming Yes 35.00
 Robe, Suit, Dress Yes
 Underwear and Hose Yes
 Casket 6-6- Walnut 520.00
 Casket with Copper Lin. Yes
 Style of Casket Exp. 12-2
 No. of Casket 300 Trumps
 Outside Box Yes
 Shipping Case or Vault Cement 60.00
 Handles Exp.
 Pillow Set Yes
 Name Plate Oakland
 Cemetery Oakland
 Section _____ Lot _____

I Other Graves



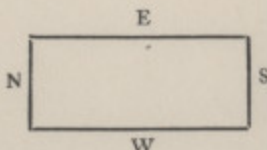
X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave Te etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev Hunter & Rev Tate
 Music By Family 5.00
 Casket Wagon Yes
 Physician Dr. Filanigan
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. 18
650.00

Carey Hand Funeral Home

Name of deceased Emma E. Peters
 Date of death Jan 13 3:30 P M
 Cause of death Myocarditis
 Place of death Fla. Saint
 Residence 1255 Palmella St Winter Park
 Age 40 Y'rs 5 Mo's 3 Days
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at Chapel
 Date Sunday Jan 16 1944 4 PM
 Account charged Warren E. Peters
 Address Winter Park Fla
 Account guaranteed Yes
 Address _____
 Embalming Yes 1900 35.00
 Robe, Suit, Dress Flax 17.00
 Underwear and Hose ✓
 Casket 6-3 In. Oak 175.00
 Casket with Copper Lin. ✓
 Style of Casket Oct 7-C
 No. of Casket 7-1850-
 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

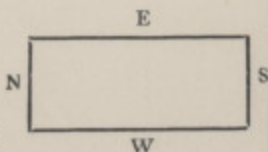
Cremation P.B. Cor 5.00
 Urn Cor. Iron 5.00
 Single Grave Auto. Temporary 5.00
 Opening and Closing Grave etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev. Serrano
 Music _____
 Casket Wagon W 5.00
 Physician John Heitz
 County or City Burial SVS 15.00
 Automobiles _____
 Baggage or Express Train No. 2

277.00

Carey Hand Funeral Home

Name of deceased Margaret H. Winkelman
 Date of death Jan 14 1949 12:45 P. M.
 Cause of death _____
 Place of death Residence
 Residence Oakland, Fla
 Age 74 Y'rs. 11 Mo's. 20 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graveside
 Date Sunday Jan 16 1949 2 P. M.
 Account charged S. B. Hull
 Address Oakland Fla
 Account guaranteed Cata
 Address _____
 Embalming ☒ Pressing 35.00
 Robe, Suit, Dress white 19.00
 Underwear and Hose _____
 Casket 6/3 Sil Plush 225.00
 Casket with Copper Lin. _____
 Style of Casket Oct 1/2 Couch
 No. of Casket 1927
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext.
 Pillow Set yes
 Name Plate ✓
 Cemetery Berlah
 Section _____ Lot _____

I Other Graves



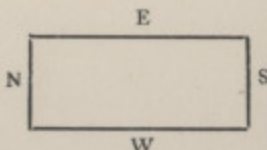
X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev Tate
 Music B of G. Cornish 5.00
 Casket Wagon ✓
 Physician Dr. Flanagan
 County or City Burial _____
 Automobiles 505 15.00
 Baggage or Express Train No. _____
314.00

Carey Hand Funeral Home

Name of deceased Mr. Charles Nelson
 Date of death Jan 12, 1944 M
 Cause of death got gun in front
 Place of death Tampa
 Residence _____
 Age 79 Y'rs. Mo's. Days _____
 Weight _____ Height _____ ft. in. Eyes _____
 Funeral at grave Lat
 Date Sat Jan - 15 1944 3 P. M
 Account charged _____
 Address _____
 Account guaranteed Cash
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3-4 etc
 Casket with Copper Lin. _____
 Style of Casket etc 1/2-c
 No. of Casket _____
 Outside Box yes
 Shipping Case or Vault _____
 Handles etc
 Pillow Set yes
 Name Plate _____
 Cemetery Overlook
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave yes 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. _____

Ed Cash

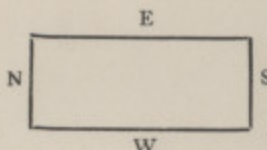
35.00

Body arrived 2:15 74
Lat morning

Carey Hand Funeral Home

Name of deceased *Mr Charles E. Burns*
 Date of death *Feb 15 5:41 M*
 Cause of death *Heart attack*
 Place of death *Home 263 1/2 St*
 Residence *Malden 19 Staves Ct*
 Age *68* Y'rs. Mo's. Days.
 Weight. Height. ft. in. Eyes.
 Funeral at *West*
 Date. 194. M
 Account charged *Funeral Home*
 Address *Malden 7th St*
 Account guaranteed *W. E. C.*
 Address.
 Embalming *Yes* 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket *6-3 1/2 x 2 1/2* 125.50
 Casket with Copper Lin.
 Style of Casket *Oct H. Pop*
 No. of Casket *1972*
 Outside Box *Reg -*
 Shipping Case or Vault ☒
 Handles *Ext -*
 Pillow Set *yes*
 Name Plate ☒
 Cemetery *Westlawn*
 Section. Lot.

I Other Graves



X Grave on this date

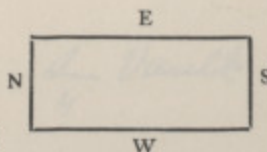
Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to *Boston Mass*
 R. R. Ticket
 Cash advanced *Express* 94.50
 Autos
 Telegram *2-9 Feb 1944*
 Minister
 Music
 Casket Wagon *2* 10.00
 Physician *Dr. Luckhurst*
 County or City Burial *Stoughton*
 Automobiles
 Baggage or Express Train No.

245.00

Carey Hand Funeral Home

Name of deceased Maurice B. Nash
 Date of death 1-13-44 M
 Cause of death _____
 Place of death At Residence
 Residence Names City
 Age 62 Y'rs. _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M
 Account charged Save Lane
 Address Names City
 Account guaranteed OK
 Address _____
 Embalming Cremation 37.50
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Body Service
 Style of Casket 2 ga. P.M. by note
 No. of Casket Jan 15 - 44
 Outside Box _____
 Shipping Case or Vault Body - A.M.
 Handles Cremated
 Pillow Set Same - 1-14-44
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

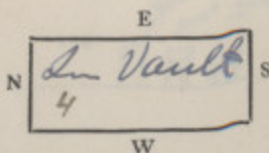
Cremation _____
 Urn wooden
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express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

37.50

Carey Hand Funeral Home

Name of deceased Mr. Nathan E. Hurston
 Date of death Sat Jan - 13 - 44 P.M.
 Cause of death _____
 Place of death Res
 Residence Killbuck, Killbuck, Fla
 Age 73 Y'rs 3 Mo's 20 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Rest
 Date _____ 1944 M
 Account charged W. E. Hurston
 Address Killbuck, Fla & Weedsport, N.Y.
 Account guaranteed _____
 Address _____
 Embalming & Pres 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 4-4- Coffin 1050.00
 Casket with Copper Lin. Inner
 Style of Casket State of N.Y.
 No. of Casket _____
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Exp
 Pillow Set Yes
 Name Plate Name & Date 1944
 Cemetery Rest
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to will condify when
 R. R. Ticket to ship
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music C. H. & Ha
 Casket Wagon to Rest
 Physician Dr. Hester
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

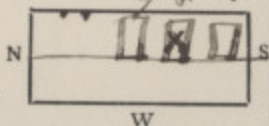
5.00
10.00

1100.00

Carey Hand Funeral Home

Name of deceased *Mrs Margaret Robson*
 Date of death *Jan 9 6* *9:00 A.M.*
 Cause of death *Old Age*
 Place of death *Old Age*
 Residence *1234 S. Kuhl Ave*
 Age *Yrs.* *Mo's.* *Days.*
 Weight *120* Height *5 ft. 6* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Mon Jan 17* 194*9* *4 P.M.*
 Account charged *Russel Robson* *Sam*
 Address *Chapel*
 Account guaranteed *Haywards*
 Address *Chapel*
 Embalming *Yes* *25.00*
 Robe, Suit, Dress *Yes*
 Underwear and Hosiery *Yes*
 Casket *6-3 5x8x6* *150.00*
 Casket with Copper Lin. *Yes*
 Style of Casket *Oct. 24. 1949*
 No. of Casket *1850 -*
 Outside Box *Reg*
 Shipping Case or Vault *Yes*
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate *Yes*
 Cemetery *Greenwood*
 Section *E 1/2* Lot *41*

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 *Wm. J. Dindis*

Music *Organ*

Casket Wagon

Physician

County or City Burial

Automobiles *5 x 5* *15.00*

Baggage or Express Train No.

Same as for Mrs
Robson

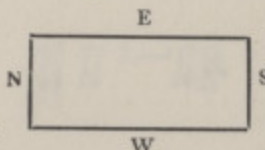
Current Notice

7 205.00
14 5.00
7 200.00
3.00
205.00

Carey Hand Funeral Home

Name of deceased Harriet E. Lewis
 Date of death Jan 16 54 M
 Cause of death _____
 Place of death Orlando
 Residence Apopka Fla
 Age _____ Yrs _____ Mo's _____ Days 24
 Weight _____ Height _____ ft _____ in _____ Eyes _____
 Funeral at Trinity
 Date Monday Jan 17 1944 11 A M
 Account charged John W. Lewis
 Address Apopka Fla
 Account guaranteed _____
 Address _____
 Embalming ☒
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 2-0 H. L. 15 "
 Casket with Copper Lin. ☒
 Style of Casket See H. L.
 No. of Casket H. L.
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles Short
 Pillow Set ☒
 Name Plate ☒
 Cemetery Apopka
 Section New Cemetery Lot _____

I Other Graves



X Grave on this date

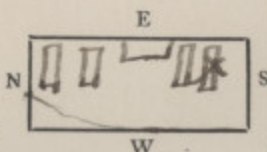
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave Yes 10 "
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev. Sargent
 Music _____
 Casket Wagon _____
 Physician Dr. Sinclair
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

25 "

Carey Hand Funeral Home

Name of deceased Mr Arthur B. Lerner
 Date of death Jan 16 4 M
 Cause of death _____
 Place of death Residence
 Residence 1000 Castle Road
 Age 45 Y'rs 2 Mo's 27 Days _____
 Weight 145 Height 6 ft — in. Eyes _____
 Funeral at Chapel
 Date Tues Jan 18 1944 10 30 M.P.
 Account charged Mrs A B Lerner
 Address Deland Rd - 1 - Box 458
 Account guaranteed Estate & ins
 Address _____
 Embalming Y 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3-30 135.00
 Casket with Copper Lin. ✓
 Style of Casket Get H. Pope
 No. of Casket 1850-1000/9
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set yes
 Name Plate ✓
 Cemetery Greenwood
 Section J Lot 118

I Other Graves



X Grave on this date

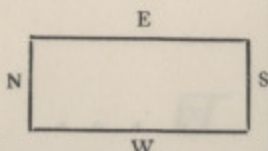
Cremation Auto 6.00
 Urn auto 5.00
 Single Grave _____
 Opening and Closing Grave Y etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Dean Johnson
 Music Organ 5.00
 Casket Wagon (1)
 Physician Dr. Wendell
 County or City Burial _____
 Automobiles 8 & 3 15.00
 Baggage or Express Train No. 2

215.00

Carey Hand Funeral Home

Name of deceased Mrs. Minnie A. Reaves
 Date of death Sun Jan 14 - 44 4:35 P.M.
 Cause of death _____
 Place of death Andrews Nursing Home
 Residence Winters Garden P.O.
 Age 51 Yrs. 9 Mo's. 20 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Grand Side
 Date _____ 1944 _____ M
 Account charged Grace Reaves
 Address _____
 Account guaranteed Payments
 Address _____
 Embalming & 8 days 35.00
 Robe, Suit, Dress Dark 7.00
 Underwear and Hose ✓
 Casket 6-3-4 Plush 135.00
 Casket with Copper Lin. ✓
 Style of Casket Set of 4 Cap
 No. of Casket 114 Penn
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Set
 Pillow Set yes
 Name Plate ✓
 Cemetery Bureau
 Section _____ Lot _____

I Other Graves



X Grave on this date

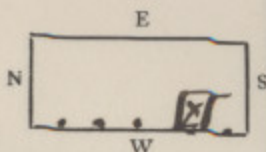
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave 4 etc 15.00
 Body Shipped to ✓
 R. R. Ticket ✓
 Cash advanced ✓
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (12) 5.00
 Physician Dr. Moore
 County or City Burial _____
 Automobiles 243 15.00
 Baggage or Express Train No. 3

212.00

Carey Hand Funeral Home

Name of deceased Mr. Nixon Butts
 Date of death Jan 17 44 1-17 A M
 Cause of death _____
 Place of death Bel -
 Residence 331 Cherokee Dr
 Age _____ Y's _____ Mo's _____ Days _____
 Weight _____ Height _____ ft _____ in _____ Eyes _____
 Funeral at Chapel
 Date Wed Jan 19 1944 4 P. M
 Account charged Mrs. Nixon Butts
 Address _____
 Account guaranteed _____
 Address _____
 Embalming Yes
 Robe, Suit, Dress ✓
 Underwear and Hosiery ✓
 Casket 6-6 in. E. L. Co.
 Casket with Copper Lin. ✓
 Style of Casket Bot. of Cap.
 No. of Casket 56 - Tampa
 Outside Box ✓
 Shipping Case or Vault Convent
 Handles Ext -
 Pillow Set Yes
 Name Plate ✓
 Cemetery Greenwood
 Section A Lot 66

I Other Graves



X Grave on this date

Cremation Auto G.
 Urn Auto P. B.
 Single Grave Auto M.
 Opening and Closing Grave T. & S.
 Body Shipped to _____
 R. R. Ticket Three Auto P. B.
 Cash advanced No. Ship
 Autos _____
 Telegram _____
 Minister Mr. Nair & Goudy
 Music Yes - Quartet
 Casket Wagon (1)
 Physician Dr.
 County or City Burial _____
 Automobiles S. & S.
 Baggage or Express Train No. B

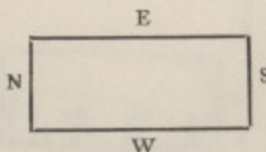
Very Large Funeral

400.00

Carey Hand Funeral Home

Name of deceased Lola Schmidt
 Date of death Jan 17 - 44 3 30 A M
 Cause of death Old Age
 Place of death St. B. North
 Residence St. B. North
 Age 53 Yrs Mo's Days
 Weight 165 Height 5 ft 6 in. Eyes
 Funeral at St. B. North
 Date 194 M
 Account charged E. Thompson
 Address T. B. Sant
 Account guaranteed
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 4-3-2 135.00
 Casket with Copper Lin.
 Style of Casket Art. N. C.
 No. of Casket 1972 Tampa
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext
 Pillow Set Yes
 Name Plate
 Cemetery St. B. North
 Section Lot

I Other Graves



X Grave on this date

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to New Halstern
 R. R. Ticket Express 94 85
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon 21 10.00
 Physician Dr. Mallow
 County or City Burial
 Automobiles
 Baggage or Express Train No. 74

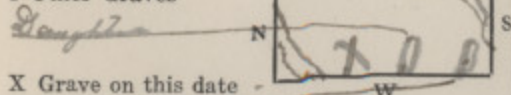
Tues Night 1-18-44 274 85
9 530
269.55

Dr. Thompson
T. B. Sant ok Deek

Carey Hand Funeral Home

Name of deceased Mr. Wm. B. Williams
 Date of death Tues Jan - 18 - 44 A M
 Cause of death Old
 Place of death Orlando, Fl.
 Residence Orlando, Fl.
 Age 86 Yrs. 3 Mo's. 0 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Wed Jan 19 1944 20 M
 Account charged Brother Williams Reggett
 Address P.O. S. Box 517
 Account guaranteed _____
 Address _____
 Embalming Y 35 "
 Robe, Suit, Dress Fun suit
 Underwear and Hose Y
 Casket 6-3 in box 135 "
 Casket with Copper Lin. Y
 Style of Casket Oct. Top
 No. of Casket 1850
 Outside Box Y
 Shipping Case or Vault Cement 60 "
 Handles Y
 Pillow Set Y
 Name Plate Y
 Cemetery Greenwood
 Section J Lot 300

I Other Graves



X Grave on this date

Wm. Williams
 Cremation Yes 5 "
 Urn _____
 Single Grave _____
 Opening and Closing Grave Y 15 "
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced Wm. Williams 15 "
 Autos _____
 Telegram _____
 Minister Dean Johnson
 Music Organ 5 "
 Casket Wagon Y
 Physician Dr. Brooks
 County or City Burial _____
 Automobiles S & S 15 "
 Baggage or Express Train No. _____

285.00

Carey Hand Funeral Home *Fianon*

Body received 11-18-18-1941

Name of deceased *Mr. But C. C. C.*
 Date of death *Thurs Jan 17* *10 10 P.M.*
 Cause of death *Chro myocarditis*
 Place of death *Daytona Beach Fla*
 Residence *Daytona Beach Fla*
 Age *79* Yrs. *3* Mo's. *5* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Thurs Jan 20* 194 *4* *8 P. M.*
 Account charged *Mrs Gertrude Condy*
 Address *125 N. Ocean Ave. Daytona Beach Fla*
 Account guaranteed _____
 Address _____
 Embalming *Yes* *35*
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *See Chg* *35*
 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 _____

E

I Other Graves

N

S

X Grave on this date

W

Cremation *Cremation* *50 00*
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister *Rev. L. L. L.*
 Music _____
 Casket Wagon *41* *5 00*
 Physician *Dr. F. J. Pyle*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

Cash

125.00

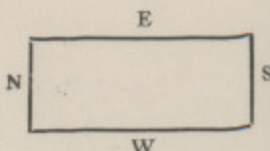
Go. Da. N. G.

100.00

Carey Hand Funeral Home

Name of deceased Mrs. Alice May Hook
 Date of death Tues. Jan 18 5 P. M.
 Cause of death Tuba Cont
 Place of death Winters Park Fla.
 Residence Winters Park Fla.
 Age 83 Y'rs 7 Mo's 14 Days
 Weight 148 Height 5 ft. 11 in. Eyes Blue
 Funeral at Congregational Church
 Date Sunday Jan 23 1944 12:30 P. M.
 Account charged A. W. Hook
 Address 148 W. Lyman Ave. Winters Park Fla.
 Account guaranteed Yes
 Address VS
 Embalming Yes 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket Fun 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 Cremation
 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

8-4 M.

R. R. Ticket

Mon - Jan 24

Cash advanced

Autos

will call for

Telegram

Minister

Rev. E. Heine

Music

Casket Wagon

Ch. Larson

Physician

County or City Burial

Automobiles

Baggage or Express Train No.

cc by w. 3. 1. 1.

25.00

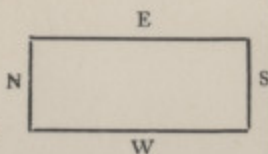
125.00

600.00

Carey Hand Funeral Home

Name of deceased Carolyn Louise Paul
 Date of death Jan 17 M
 Cause of death Cancer
 Place of death Tampa Fla.
 Residence Winter Haven Fla.
 Age 54 Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Winter Haven
 Date Jan 19 1944 M
 Account charged Ware-Smith & Hone
 Address Winter Haven Fla.
 Account guaranteed Cleech
 Address
 Embalming Cremation 3750
 Robe, Suit, Dress Body arrived
 Underwear and Hose Wed 5 P.M.
 Casket Jan 19-1944
 Casket with Copper Lin. auto
 Style of Casket
 No. of Casket Body Cremated
 Outside Box Jan 21-1944
 Shipping Case or Vault 8 A.M.
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot

I Other Graves



X Grave on this date

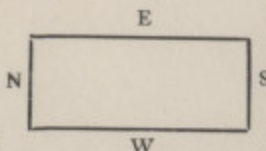
Cremation Express Ashes to-
 Urn Ware-Smith & Hone
 Single Grave Winter Haven Fla.
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

3750

Carry Hand Funeral Home

Name of deceased Mr. Paul G. Merritt
 Date of death Jan 19 - 1948 9:30 AM
 Cause of death Pneumonia - Left Pleural cavity
 Place of death P. G. H.
 Residence Newburgh, N. Y.
 Age Yrs. Mo's. Days
 Weight 135 Height 5 ft. 8 in. Eyes
 Funeral at Chapel
 Date Sunday Jan 23, 1948 4:30 PM
 Account charged Rev. A. Merritt
 Address 610 - W. 11 - St. Wilmington
 Account guaranteed Payments
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6-3-2 125.00
 Casket with Copper Lin.
 Style of Casket Oct. Hi. Col.
 No. of Casket 1872 Tampa
 Outside Box Yes
 Shipping Case or Vault ✓
 Handles Yes
 Pillow Set Yes
 Name Plate Yes
 Cemetery Greenwood
 Section Lot

I Other Graves



X Grave on this date

Cremation

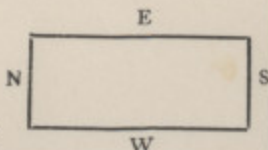
Urn
 Single Grave White 25.00
 Opening and Closing Grave etc 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Rev. W. M. Smith
 Music
 Casket Wagon 5.00
 Physician Les. McQuay
 County or City Burial
 Automobiles 3.15 15.00
 Baggage or Express Train No. 8

220.00

Carey Hand Funeral Home

Name of deceased Henry A. McNeil
 Date of death Jan 19 2:50 P. M
 Cause of death Residence
 Place of death Residence
 Residence Acree, Fla
 Age 77 Y'rs 11 Mo's 15 Days
 Weight Height ft in. Eyes
 Funeral at Chapel
 Date Friday 1944 11 A. M
 Account charged J. R. S. McNeil
 Address Acree, Fla
 Account guaranteed Paymaster
 Address
 Embalming & Dressing 35.00
 Robe, Suit, Dress Blue Serp 10.00
 Underwear and Hose
 Casket 6-3-21 2 1/2 175.00
 Casket with Copper Lin.
 Style of Casket State H. Co.
 No. of Casket 31-7amp
 Outside Box Reg
 Shipping Case or Vault
 Handles Ext
 Pillow Set yes
 Name Plate
 Cemetery Woodlawn
 Section 4 Lot 81

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 Fisher
 Music yes
 Casket Wagon 41 5.00
 Physician Dr. Scott
 County or City Burial
 Automobiles S.V.S 15.00
 Baggage or Express Train No.

255.00

5.00

250.00

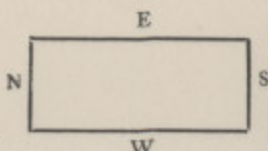
115.00

carey Posh

Carey Hand Funeral Home

Name of deceased Amelia Ellen Cook
 Date of death Jan 19 4 P. M
 Cause of death Branches Pneumonia
 Place of death Residence
 Residence Winter Park Fla
 Age 84 Y'rs 9 Mo's 12 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graveside
 Date Friday Jan 21 1948 2 P. M
 Account charged Ward S. Cook
 Address Rt 1 - Box 450 - Winter Park Fla
 Account guaranteed Personal Cash
 Address _____
 Embalming Dissection 25.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-9 1/2 x 12 1/2 25.00
 Casket with Copper Lin. _____
 Style of Casket Sgt. H. Cook
 No. of Casket 71 - Tampa
 Outside Box Req
 Shipping Case or Vault _____
 Handles Short
 Pillow Set yes
 Name Plate _____
 Cemetery Marland
 Section _____ Lot 31

I Other Graves



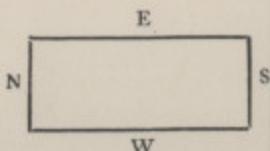
X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced Spice flowers 10.00
 Autos _____
 Telegram _____
 Minister Rev
 Music _____
 Casket Wagon _____ 5.00
 Physician Dr. Redding
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. _____
745.00

Carey Hand Funeral Home

Name of deceased Thomas R. Hunt
 Date of death Jan 19 7:30 a. M
 Cause of death _____
 Place of death O. Y. N.
 Residence Arredondo Fla
 Age 56 Yrs 11 Mo's 6 Days
 Weight 165 Height 5 ft 7 in. Eyes _____
 Funeral at Chapel
 Date Friday Jan 21 1944 3:30 P. M
 Account charged Mrs Thomas R. Hunt
 Address Arredondo Fla
 Account guaranteed Estate
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress ☒
 Underwear and Hose ☒
 Casket 4-3 in cloth 185.00
 Casket with Copper Lin. ☒
 Style of Casket State of Fla
 No. of Casket 31 Tampa
 Outside Box Reg
 Shipping Case or Vault ☒
 Handles End under
 Pillow Set yes
 Name Plate yes
 Cemetery Arredondo
 Section _____ Lot _____

I Other Graves



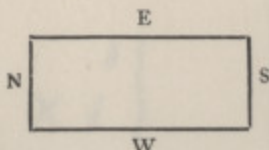
X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced amb serv 10.00
 Autos _____
 Telegram _____
 Minister Rev R. O. Nelson
 Music Organ 5.00
 Casket Wagon 117
 Physician Dr
 County or City Burial _____
 Automobiles 515 15.00
 Baggage or Express Train No. _____
265.00

Carey Hand Funeral Home

Name of deceased Claude D. Goodman
 Date of death Jan 20 2:25 P M
 Cause of death _____
 Place of death Andrew Nursing Home
 Residence Ocala Fla
 Age 72 Y'rs 9 Mo's 28 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graveside
 Date Sunday Jan 23 1948 M
 Account charged J. C. Goodman
 Address Ocala Fla
 Account guaranteed Self ins
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress Self 15.00
 Underwear and Hose _____ 2.50
 Casket 6-3-4 W. Cup 125.00
 Casket with Copper Lin. _____
 Style of Casket Ext H. Cup
 No. of Casket 1972 Tampa
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext wood
 Pillow Set Self
 Name Plate _____
 Cemetery Ocala
 Section _____ Lot _____

I Other Graves



X Grave on this date

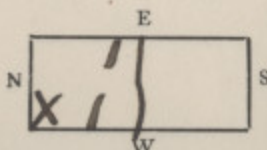
Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc 15 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev
 Music _____
 Casket Wagon (1) 5 00
 Physician Dr. Harts
 County or City Burial _____
 Automobiles 515 15 00
 Baggage or Express Train No. _____

212.50
 2.50
 15.00
 5.00
 15.00
210.00

Carey Hand Funeral Home

Name of deceased A. C. Christopher
 Date of death Thurs Jan 20-44 P. M.
 Cause of death Rel
 Place of death Rel
 Residence 213 West Jackson
 Age 80 Y'rs 10 Mo's — Days —
 Weight — Height — ft. — in. Eyes —
 Funeral at Chapel
 Date Sat Jan 22 1944 M.
 Account charged Mrs. Ella Nolan
 Address 213 W. Jackson
 Account guaranteed Payments
 Address —
 Embalming 4.00 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 Gr. Eldh 185.00
 Casket with Copper Lin. ✓
 Style of Casket State N. Cap.
 No. of Casket 31- Tompa
 Outside Box Reg-
 Shipping Case or Vault ✓
 Handles Est
 Pillow Set yes
 Name Plate ✓
 Cemetery Greenwood
 Section A R 1/2 Lot 49

I Other Graves



X Grave on this date

Cremation cod P. B. 5.00
 Urn cod Mrs 5.00
 Single Grave cod Family 5.00
 Opening and Closing Grave 4.00 15.00
 Body Shipped to —
 R. R. Ticket —
 Cash advanced —
 Autos —
 Telegram —
 Minister Rev Du Wiese
 Music Organ
 Casket Wagon (1) 5.00
 Physician Dr
 County or City Burial —
 Automobiles S. V. S. 15.00
 Baggage or Express Train No. —

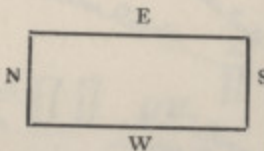
270 00

Carey Hand Funeral Home

Name of deceased Dallace Snow
 Date of death Jan 21-44 P.M.
 Cause of death Inf. Grad. N. England
 Place of death at St. N. England
 Residence _____
 Age 45 Y'rs. 3 Mo's. 22 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date _____ 194 _____ M

Account charged _____
 Address _____
 Account guaranteed Small Sons
 Address _____
 Embalming 48 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Low Chg 35.00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box at all
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation Cremation 50.00
 Urn wooden
 Single Grave Body cremated
 Opening and Closing Grave 2-4-44
 Body Shipped to Sat Jan 29-44
 R. R. Ticket _____
 Cash advanced will call for
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon 1 5.00
 Physician Bucknuth
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 8

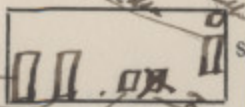
125.00

Carey Hand Funeral Home

Name of deceased Louis W. Fuller
 Date of death Sat Jan 22-44 A M
 Cause of death St. Sant
 Place of death St. Sant
 Residence 430 San Roslin
 Age 73 Y'rs 10 Mo's 14 Days
 Weight Height ft in. Eyes
 Funeral at Chapel
 Date Tues Jan 25-1944 3 P. M
 Account charged Mrs. R. W. Fuller
 Address 430 S Roslin
 Account guaranteed Estate
 Address
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-3 in cloth 250.00
 Casket with Copper Lin. ✓
 Style of Casket Reclining
 No. of Casket 48 Tampa
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles Yes
 Pillow Set Yes
 Name Plate ✓
 Cemetery Greenwood
 Section Lot

I Other Graves

X Grave on this date



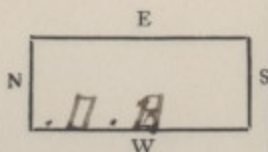
Cremation Cremation 50.00
 Urn wooden 5.00
 Single Grave Cement Box 5.00
 Opening and Closing Grave per box 5.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister Rev. A. Fred Turner
 Music Yes 5.00
 Casket Wagon 112
 Physician Dr. Larson
 County or City Burial
 Automobiles
 Baggage or Express Train No.

350.00

Carey Hand Funeral Home

Name of deceased Mrs Catherine S. Knex
 Date of death Jan - 18 - 44 M
 Cause of death Coronary Thrombosis
 Place of death Res
 Residence Louisville Ky
 Age 44 Y'rs Mo's Days
 Weight 135 Height ft in. Eyes
 Funeral at Grave side
 Date Sun Jan 23 1944 3 P. M
 Account charged M Knex
 Address
 Account guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 4-3 by 6 1/2 ft
 Casket with Copper Lin.
 Style of Casket Style 12-C
 No. of Casket
 Outside Box
 Shipping Case or Vault Cement 60.00
 Handles Ext wood
 Pillow Set yes
 Name Plate
 Cemetery Greenwood
 Section A Lot

I Other Graves



X Grave on this date

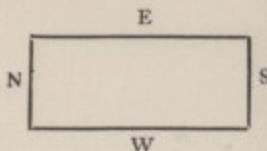
Cremation
 Urn
 Single Grave
 Opening and Closing Grave 7 ft 15.00
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister A. Fred Turner
 Music
 Casket Wagon (1) 5.00
 Physician
 County or City Burial 15.00
 Automobiles S & S
 Baggage or Express Train No.

95.00

Carey Hand Funeral Home

Name of deceased *Mrs Faith J. Haley*
 Date of death *Jan 22-44* P.M.
 Cause of death *typhoid* 1st 3rd degree
 Place of death *Ocala* *Fla*
 Residence *Ocala -*
 Age *25* Yrs. *1* Mo's. *3* Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Tues Jan 25* 1944 *4:30 P.M.*
 Account charged *John Haley*
 Address *Ocala Fla*
 Account guaranteed _____
 Address _____
 Embalming *Yes* *35.00*
 Robe, Suit, Dress *Yes* *15.00*
 Underwear and Hose _____
 Casket *4-3- In Oak* *150.00*
 Casket with Copper Lin. _____
 Style of Casket *Ext H. Pal*
 No. of Casket *1850* *9 am*
 Outside Box *Yes*
 Shipping Case or Vault _____
 Handles *Ext -*
 Pillow Set *Yes*
 Name Plate _____
 Cemetery *Ocala Fla*
 Section *Restoration* Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave *Yes* *15.00*
 Body Shipped to *Murdersville W. Va*
 R. R. Ticket *29.35 - 40.29* *70.14*
 Cash advanced _____
 Autos *Amv.* *5.00*
 Telegram _____
 Minister *Dr. Howell*
 Music *Organ*
 Casket Wagon *(2)* *10.00*
 Physician *Thorace Leary*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. *76*

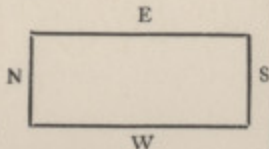
Tuesday Night 1-25-44

285.14

Carey Hand Funeral Home

Name of deceased Harold C Mendelson
 Date of death Sun Jan 23-44 12 30 MA
 Cause of death O.S.H.
 Place of death O.S.H.
 Residence Manhasset L.I. New York
 Age 68 Y'rs 7 Mo's 13 Days
 Weight Height ft. in. Eyes
 Funeral at Family Room
 Date Tue Jan 25 - 1944 11-A M
 Account charged Mrs Mary C Mendelson
 Address Manhasset L.I. New York
 Account guaranteed
 Address
 Embalming ✓ 8
 Robe, Suit, Dress
 Underwear and Hose ✓
 Casket 4-3-4 in wood
 Casket with Copper Lin. ✓
 Style of Casket Oct St Cup
 No. of Casket 1972 Temp
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles Oct
 Pillow Set Yes
 Name Plate ✓
 Cemetery Cumtation
 Section Lot

I Other Graves



X Grave on this date

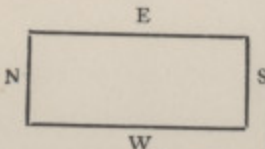
Cremation Cumtation
 Urn wooden
 Single Grave will call for
 Opening and Closing Grave Body
 Body Shipped to Cumtation
 R. R. Ticket 8-A.M.
 Cash advanced Wed 1-26-44
 Autos one car
 Telegram
 Minister Dean Johnson
 Music Organ
 Casket Wagon (1)
 Physician Dr. Mallory
 County or City Burial
 Automobiles
 Baggage or Express Train No.

2 - certified copies 240.00
10.00
241.00

Carry Hand Funeral Home

Name of deceased Irving Pylon Fletcher
 Date of death Jan 20 M
 Cause of death Coronary Occlusion
 Place of death Res
 Residence Leeland Fla
 Age 71 Yrs. 4 Mo's. 26 Days
 Weight 165 Height 5 ft. 18 in. Eyes Brown
 Funeral at Leeland Fla
 Date Jan 1948 M
 Account charged Allen - Sumnerhill
 Address Leeland Fla
 Account guaranteed Check
 Address _____
 Embalming _____
 Robe, Suit, Dress Cremation 37 58
 Underwear and Hose _____
 Casket Body arrived
 Casket with Copper Lin. Sunday
 Style of Casket 4 p.m. Jan
 No. of Casket 23 - 1948
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body Cremated
 Name Plate Tuesday 8 p.m.
 Cemetery Jan 24 - 48
 Section _____ Lot _____

I Other Graves



X Grave on this date

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

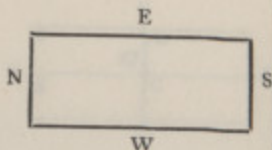
37-58

Carey Hand Funeral Home

Potlaid

Name of deceased Horace Tweller
 Date of death Sun Jan 23-44 P.M.
 Cause of death Inf. - Carcinoma of liver
 Place of death County Home
 Residence Orlando Rt 5
 Age 58 Y'rs. Mo's. 21 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Yours Side
 Date Mon Jan 1-25 1944 A.M.
 Account charged County
 Address _____
 Account guaranteed County
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 4 etc
 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. Mason
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

14.50

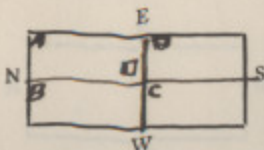
14.50

Carey Hand Funeral Home

Thomas

Name of deceased Dr. Phillip Cook Thomas
 Date of death Jan 24-44 2 PM
 Cause of death O. S. H.
 Place of death Winter Park
 Residence 2165 Via Turin
 Age 70 Yrs. 10 Mo's. 1 Days
 Weight 200 Height 5 ft. 9 in. Eyes Brown
 Funeral at Graveside
 Date Fri Jan 1944 5 M
 Account charged Amr
 Address Estete
 Account guaranteed Inst
 Address 35
 Embalming Yes
 Robe, Suit, Dress 40
 Underwear and Hose 40
 Casket Lea
 Casket with Copper Lin. 35
 Style of Casket 35
 No. of Casket 35
 Outside Box 35
 Shipping Case or Vault 35
 Handles 35
 Pillow Set 35
 Name Plate 35
 Cemetery Palm Cemetery
 Section 59 Lot A

I Other Graves



X Grave on this date

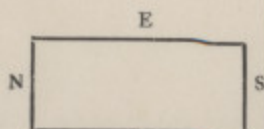
Cremation Cremation 50
 Urn wooden
 Single Grave 50
 Opening and Closing Grave Body Cremated
 Body Shipped to B. A. M. Thomas
 R. R. Ticket Jan - 27-44
 Cash advanced 5
 Autos 5
 Telegram 5
 Minister 5
 Music 5
 Casket Wagon 5
 Physician Dr. E. E. Brown
 County or City Burial Amr
 Automobiles 5
 Baggage or Express Train No. 5

135.00

Carey Hand Funeral Home

Name of deceased *Mrs Sarah Furen*
 Date of death *Mon Jan 2 - 44* *A M*
 Cause of death *O.S.H.*
 Place of death *O.S.H.*
 Residence *1612 Howell Blvd*
 Age *90* Y'rs *1* Mo's *28* Days
 Weight *160* Height *5* ft. *10* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Tues Jan 25* 1944 *2 P. M*
 Account charged *Elizabeth H. Furen*
 Address *1612 Howell Blvd*
 Account guaranteed *Estate*
 Address *1612 Howell Blvd*
 Embalming *Yes* *35.00*
 Robe, Suit, Dress *Yes*
 Underwear and Hose *Yes*
 Casket *4-8 in Cloth* *235.00*
 Casket with Copper Lin. *Yes*
 Style of Casket *State A.C.*
 No. of Casket *37 - Tempia*
 Outside Box *Yes*
 Shipping Case or Vault *Cement* *60.00*
 Handles *Ext - 1st Vault Set* *10.00*
 Pillow Set *Yes*
 Name Plate *Yes*
 Cemetery *at Sanford Lake View*
 Section *10* Lot *10*

I Other Graves



X Grave on this date

W

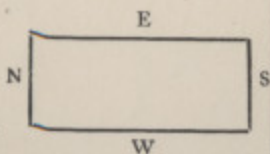
Cremation *(X) Auto to* *10.00*
 Urn *Yes* *20.00*
 Single Grave *Yes*
 Opening and Closing Grave *Sanford* *10.00*
 Body Shipped to *Sanford*
 R. R. Ticket *Yes*
 Cash advanced *Yes*
 Autos *Yes*
 Telegram *Yes*
 Minister *Dean Johnson*
 Music *Yes*
 Casket Wagon *Yes* *5.00*
 Physician *Dr. Folsom*
 County or City Burial *Sanford*
 Automobiles *3.15 & Sanford* *20.00*
 Baggage or Express Train No. *Yes*

385.00
375.00

Carey Hand Funeral Home

Name of deceased *Mrs Emma Nixon*
 Date of death *Jan 33-44* *11:30 A.M.*
 Cause of death *Natural Cause*
 Place of death *Nursing Home Jacksonville*
 Residence _____
 Age *49* Y'rs *1* Mo's *36* Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Wed 1-26-44* 194 *4-P.* M
 Account charged *L.H. Nixon*
 Address *2301 S. Brown St*
 Account guaranteed *Yes*
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket *6-3-42 Pine* *195.00*
 Casket with Copper Lin. _____
 Style of Casket *Rect. 1/2 P.*
 No. of Casket *116-Home*
 Outside Box *Reg -*
 Shipping Case or Vault *✓*
 Handles *Yes -*
 Pillow Set *Yes -*
 Name Plate _____
 Cemetery *Greenwood*
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation *1 - auto* *5.00*
 Urn _____
 Single Grave *Single Grave* *15.00*
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced *Kramer & Estess* *50.00*
 Autos _____
 Telegram *Explain to Beland* *15.00*
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles *S.V. 9* *15.00*
 Baggage or Express Train No. _____

Estess Kramer 59.98
Fla. Capitol 3615

249.00
225.00

Carey Hand Funeral Home

Name of deceased		<u>RALPH E. FERGUSON</u>	
Date of death		<u>Tues Jan 25-44</u>	<u>AM</u>
Cause of death		<u>Old</u>	
Place of death		<u>Chapel</u>	
Residence		<u>101 Tacoma Circle</u>	
Age	<u>80</u>	Y'rs	<u>10</u>
		Mo's	<u>16</u>
		Days	
Weight	<u>125</u>	Height	<u>5 ft 9 in</u>
Funeral at		<u>Chapel</u>	
Date		<u>Tues Jan 26</u>	<u>11-AM</u>
Account charged		<u>W. H. Ferguson</u>	
Address			
Account guaranteed		<u>Ins</u>	
Address			
Embalming	<u>Yes</u>		<u>35.00</u>
Robe, Suit, Dress	<u>Yes</u>		
Underwear and Hose	<u>Yes</u>		
Casket	<u>Low Chg</u>		<u>40.00</u>
Casket with Copper Lin.	<u>Yes</u>		
Style of Casket	<u>Rect</u>		
No. of Casket	<u>1</u>		
Outside Box	<u>Yes</u>		
Shipping Case or Vault	<u>Yes</u>		
Handles	<u>Yes</u>		
Pillow Set	<u>Yes</u>		
Name Plate	<u>Yes</u>		
Cemetery	<u>Cumtation</u>		
Section		Lot	

I Other Graves		
X Grave on this date		
Cremation	<u>Cumtation</u>	<u>50.00</u>
Urn	<u>wooden</u>	
Single Grave	<u>Body cremated</u>	
Opening and Closing Grave	<u>8-AM</u>	
Body Shipped to	<u>Sat 1-29-44</u>	
R. R. Ticket	<u>fare 3.00</u>	<u>5.00</u>
Cash advanced	<u>will call for</u>	
Autos		
Telegram	<u>Paul Frank</u>	
Minister	<u>Organ</u>	
Music	<u>1</u>	<u>5.00</u>
Casket Wagon	<u>Dr & M. Egan</u>	
Physician		
County or City Burial		
Automobiles		
Baggage or Express Train No.		

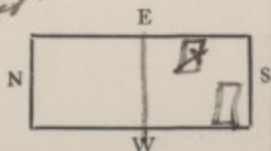
135.00

Carey Hand Funeral Home

Name of deceased *Amr Augusta J. Perryhardt*
 Date of death *Tuesday Jan 23-44 9³⁰ AM*
 Cause of death _____
 Place of death *Res -*
 Residence *33- Alexander Place -*
 Age *87* Yrs *6* Mo's *27* Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at *Chapel*
 Date *Thursday Sept 27 1944 4 P M*
 Account charged _____
 Address _____
 Account guaranteed *Cash*
 Address _____
 Embalming *Yes* 35.00
 Robe, Suit, Dress *✓*
 Underwear and Hose *✓*
 Casket *4-3-41 Cloth* 335.00
 Casket with Copper Lin. *✓*
 Style of Casket *A. Co. Style 1/2-2*
 No. of Casket *7-48*
 Outside Box *✓*
 Shipping Case or Vault *Laurent* 60.00
 Handles *Exp -*
 Pillow Set *Yes Tagged*
 Name Plate *✓*
 Cemetery *Greenwood*
 Section *S N 1/2* Lot *48*

Head of Grave East

I Other Graves



X Grave on this date

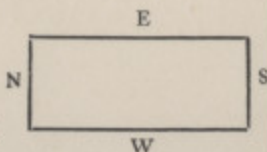
Cremation *Auto* 5.00
 Urn *Auto* 5.00
 Single Grave _____
 Opening and Closing Grave *✓ etc* 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced *Flower* 20.00
 Autos *to min* 5.00
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon *✓* 5.00
 Physician *E. G. Huchingsh.*
 County or City Burial _____
 Automobiles *S & S* 15.00
 Baggage or Express Train No. _____

500.00

Carey Hand Funeral Home

Name of deceased Miss Lois I. Hobbs
 Date of death Jan 24-44 M
 Cause of death Comany Thrombosis
 Place of death Res
 Residence Rockledge Fla
 Age 67 Y'rs 3 Mo's 16 Days
 Weight 180 Height 5 ft. 1 in. Eyes
 Funeral at
 Date 194 M
 Account charged Koon Funeral Home
 Address Cocoa Fla
 Account guaranteed OK
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose
 Casket Body Guard
 Casket with Copper Lin. W / auto
 Style of Casket
 No. of Casket 530 PM Wed
 Outside Box Jan - 26 - 44
 Shipping Case or Vault Body Cremated
 Handles 8-4 in 1-027-44
 Pillow Set
 Name Plate Ashes Express to the
 Cemetery Koon Funeral Home
 Section Cocoa Fla Lot

I Other Graves



X Grave on this date

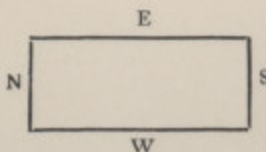
Cremation
 Urn wooden
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

3750

Carey Hand Funeral Home

Name of deceased *John Francis Walker*
 Date of death *Jan 26-44* *6 A M*
 Cause of death *Pneumonia*
 Place of death *Hosp at Gainesville Fla*
 Residence *425 W Hazel ave*
 Age *17* Y's *3* Mo's *20* Days
 Weight Height ft. in. Eyes
 Funeral at *St James Catholic Church*
 Date *Sat Jan 29* *1944* *9 A M*
 Account charged *Grace Walker*
 Address *425 W Hazel ave*
 Account guaranteed *Ins -*
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket *C-3 - Hot Park* *195.00*
 Casket with Copper Lin
 Style of Casket *Ext 1/2 - E -*
 No. of Casket
 Outside Box
 Shipping Case or Vault *Cement* *60.00*
 Handles *Ext*
 Pillow Set *yes*
 Name Plate *Crucifix*
 Cemetery *Woodlawn*
 Section Lot

I Other Graves



X Grave on this date

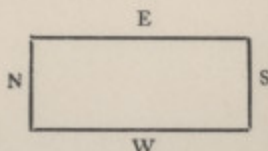
Cremation *auto* *5.00*
 Urn *P.3 cor* *5.00*
 Single Grave *cor men* *5.00*
 Opening and Closing Grave *gate* *15.00*
 Body Shipped to *Auto to Hosp* *5.00*
 R. R. Ticket *35.00*
 Cash advanced *Thomas Under*
 Autos
 Telegram
 Minister *Father O'Connell*
 Music *By Church* *35.00*
 Casket Wagon *To Gainesville*
 Physician
 County or City Burial *15.00*
 Automobiles *S. V. S.*
 Baggage or Express Train No.

375.00

Carey Hand Funeral Home

Name of deceased *Mr Albert John Eaton*
 Date of death *Jan - 27 - 44* *1-30 P. M*
 Cause of death *@ 9 A. M.*
 Place of death *Lockhart Fla*
 Residence *Lockhart Fla*
 Age *74* Y'rs *3* Mo's *28* Days
 Weight *175* Height *5* ft *11* in. Eyes *Blue*
 Funeral at *Chapel*
 Date *Sat Jan 29 - 1944* *11 A. M*
 Account charged *Mrs Mary Eaton*
 Address *Lockhart Fla Box 110*
 Account guaranteed *Yes*
 Address *48*
 Embalming *Yes* *35.00*
 Robe, Suit, Dress *Yes*
 Underwear and Hose *Yes*
 Casket *Low Price* *45.00*
 Casket with Copper Lin. *Yes*
 Style of Casket *Lockhart*
 No. of Casket *1*
 Outside Box *Yes*
 Shipping Case or Vault *Yes*
 Handles *Yes*
 Pillow Set *Yes*
 Name Plate *Yes*
 Cemetery *Cumtation*
 Section *1* Lot *1*

I Other Graves



X Grave on this date

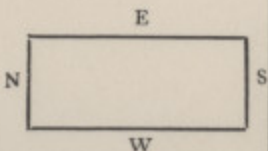
Cremation *Cumtation* *50.00*
 Urn *Wooden*
 Single Grave *Yes*
 Opening and Closing Grave *Body*
 Body Shipped to *Cumtation P. M*
 R. R. Ticket *Prin Jan 31-44*
 Cash advanced *Yes*
 Autos *Cash Settled*
 Telegram *Guaranteed Cumtation*
 Minister *Rev Love*
 Music *Organ* *5.00*
 Casket Wagon *(1)*
 Physician *Dr. Mallons*
 County or City Burial *Yes*
 Automobiles *Yes*
 Baggage or Express Train No. *1*

135.00

Carey Hand Funeral Home

Name of deceased Mrs. Corie E. Dietrich
 Date of death Jan 23-44 M
 Cause of death not given on Permit
 Place of death State Hospital Chattanooga
 Residence _____
 Age 86 Y'rs. _____ Mo's. _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date Jan 1-28 1944 3 P M
 Account charged Dr. E. Dietrich
 Address _____
 Account guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. Body covered
 Style of Casket by Bagge & Co.
 No. of Casket 335 A.M.
 Outside Box Jan 1-28-44
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation Cremation

50.00

Urn wooden

Single Grave Body cremated

Opening and Closing Grave 8-AM

Body Shipped to Jan 1-29-44

R. R. Ticket _____

Cash advanced will call for

Autos _____

Telegram _____

Minister A. Fred Turner

Music Organ

Casket Wagon (1)

Physician _____

County or City Burial _____

Automobiles _____

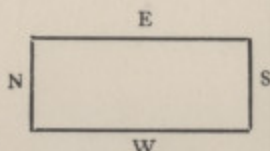
Baggage or Express Train No. _____

50.00

Carey Hand Funeral Home

Name of deceased Archie O'Berry
 Date of death Tue Jan - 28 - 44 5 P. M.
 Cause of death _____
 Place of death Kuerten Nursing Home
 Residence 1502 N. Mill St
 Age 48 Yrs 7 Mo's 22 Days
 Weight 175 Height 5 ft 2 in. Eyes _____
 Funeral at Church in New Smyrna Fla
 Date Sunday Jan 30 1944 2 P. M.
 Account charged W. H. O'Berry
 Address 224 E. Church St Jan Fla
 Account guaranteed Estate
 Address _____
 Embalming 4 Days 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 4-3 Emb Box 100.00
 Casket with Copper Lin. ✓
 Style of Casket Det H Cap
 No. of Casket Tla -
 Outside Box Reg -
 Shipping Case or Vault ✓
 Handles Ext -
 Pillow Set yes
 Name Plate ✓
 Cemetery New Smyrna Fla
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Home 10th Mar 2nd 12.00
 R. R. Ticket _____
 Cash advanced T. S. at New Smyrna 10.00
 Autos _____
 Telegram _____
 Minister At - New Smyrna
 Music _____ 5.00
 Casket Wagon (1)
 Physician Dr. J. C. Kirk
 County or City Burial _____
 Automobiles At New Smyrna 25.00
 Baggage or Express Train No. _____

P. S - 65

287.00

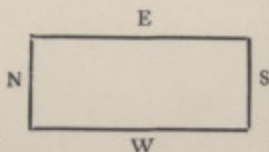
Cost 25

182.00

Carey Hand Funeral Home

Name of deceased Ruth Amanda Garner
 Date of death Jan 28 11:20 P M
 Cause of death _____
 Place of death O. G. H.
 Residence Rockhart Fla.
 Age 53 Y'rs 1 Mo's 17 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Epiphany Church Apopka Fla
 Date Monday Jan 31 1944 3 P. M
 Account charged Ernest A. Garner
 Address Rockhart Fla
 Account guaranteed _____
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress White 19 15.00
 Underwear and Hose _____
 Casket 6-3-1/2 Pine 250.00
 Casket with Copper Lin. _____
 Style of Casket Oct 1/2 - C -
 No. of Casket 7-1850-7-
 Outside Box ✓
 Shipping Case or Vault Cement 60.00
 Handles Oct -
 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 Spa Thomas 10.00
 Autos _____
 Telegram _____
 Minister at Apopka
 Music _____
 Casket Wagon _____ 5.00
 Physician Dr. Leay
 County or City Burial _____
 Automobiles 5.00 15.00
 Baggage or Express Train No. _____

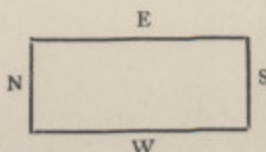
405.00

5400.00

Carey Hand Funeral Home

Name of deceased Alice H. Curtis
 Date of death Sun Jan 30 44 A.M.
 Cause of death _____
 Place of death Res.
 Residence Myrtle Dr Bay 60 E. Rt 5
 Age 76 Yrs 1 Mo's 23 Days _____
 Weight _____ Height _____ ft _____ in. Eyes _____
 Funeral at Chapel
 Date _____ 194 _____ M
 Account charged _____
 Address _____
 Account guaranteed Estate
 Address _____
 Embalming Yes 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket Sun 1000 45.00
 Casket with Copper Lin. _____
 Style of Casket Set of 4
 No. of Casket 1830
 Outside Box ✓
 Shipping Case or Vault _____
 Handles Set
 Pillow Set Set
 Name Plate ✓
 Cemetery Cremation
 Section _____ Lot _____

I Other Graves



X Grave on this date

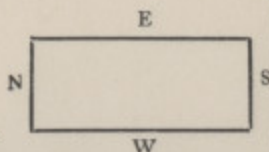
Cremation Cremation 50.00
 Urn wood 5.00
 Single Grave Cremat Box 5.00
 Opening and Closing Grave Body
 Body Shipped to Cremat 5.00
 R-R Ticket from 8 P
 Cash advanced _____ 5.00
 Autos Auto 1 car
 Telegram _____
 Minister Lindley H. Hunt D.D.
 Music Organ 5.00
 Casket Wagon 1
 Physician Dr. Lawson
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

150.00

Carey Hand Funeral Home

Name of deceased *Influenza of Mrs. J. M. Gail*
 Date of death _____ M
 Cause of death *Still Born*
 Place of death *414 1/2 Cent*
 Residence *2100 N. Westmoreland*
 Age *4* Yrs. *4* Mo's *4* Days
 Weight *4* Height *4* ft. *4* in. Eyes _____
 Funeral at _____
 Date _____ 1944 M
 Account charged *G. C. Jones*
 Address *2100 N. Westmoreland Ave.*
 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 _____
 Urn *wooden*
 Single Grave *Body Cremated*
 Opening and Closing Grave *9-A M*
 Body Shipped to *Mrs. J. M. Gail 31-44*
 R. R. Ticket _____
 Cash advanced *will call for*
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician *Dr. Capt. Gail*
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

Platinum

10. 22

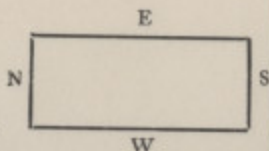
10. 22

Carey Hand Funeral Home

Behanone

Name of deceased Mr Hubert O Bohannon
 Date of death Jan 30-44 5:30 P.
 Cause of death Calapathia
 Place of death Pinema City
 Residence Pinema City
 Age..... Y'rs..... Mo's..... Days.....
 Weight..... Height..... ft..... in..... Eyes.....
 Funeral at Baptist Church W. Hart
 Date Feb 5-44 194 1-P M
 Account charged Mrs H.O Bohannon
 Address Winter Garden Fl Box 234
 Account guaranteed Funerance
 Address Pinema City
 Embalming Yes 35.00
 Robe, Suit, Dress Suit 21.50
 Underwear and Hose 1.50
 Casket 4-3-4 Plush 225.00
 Casket with Copper Lin. Yes
 Style of Casket Oct 2-E
 No. of Casket 1927-3
 Outside Box Yes
 Shipping Case or Vault Cerment 60.00
 Handles Yes
 Pillow Set Yes
 Name Plate Yes
 Cemetery Winter Garden
 Section..... Lot.....

I Other Graves



X Grave on this date

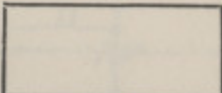
Cremation.....
 Urn None 5.00
 Single Grave.....
 Opening and Closing Grave 4 etc 15.00
 Body Shipped to.....
 R. R. Ticket Calapathia
 Cash advanced Amv - Sew
 Autos Amv Sew to Calapathia 53.50
 Telegram.....
 Minister.....
 Music.....
 Casket Wagon (1) Trailer 5.00
 Physician Trailer
 County or City Burial.....
 Automobiles 3 & 3 15.00
 Baggage or Express Train No. 8

436.50

Carey Hand Funeral Home

Name of deceased Carl W. Jagua
 Date of death Sun Jan 30 1944 M
 Cause of death _____
 Place of death 926 - Ind Ave
 Residence 925 Indiana Ave
 Age 77 Yrs 1 Mo's 28 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at West
 Date Feb 1944 M
 Account charged Jean Martindale
 Address 926 Indiana Ave
 Account guaranteed _____
 Address _____
 Embalming & Dress
 Robe, Suit, Dress Suit
 Underwear and Hose 150 27
 Casket 4-3 1/2 x 6 1/2
 Casket with Copper Lin. ✓
 Style of Casket Hot H.C
 No. of Casket 37 Tampa
 Outside Box Reg
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set yes
 Name Plate ✓
 Cemetery West
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Portland, Me.
 R. R. Ticket 6935 3760
 Cash advanced 583 99
 Autos _____
 Telegram _____
 Minister West
 Music _____
 Casket Wagon (2)
 Physician Dr. Redding
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 92

Tues Feb 1-44-

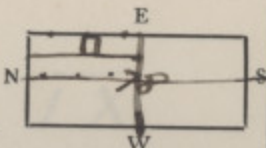
35.00
 17.50
 1.79
 200.00

113.78

10.00

378.07

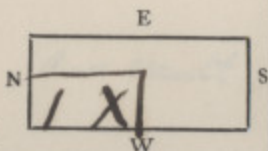
Carey Hand Funeral Home

Name of deceased	Mary Adelaide Mac Guire		
Date of death	Thurs Jan 30-44	M.P.	
Cause of death			
Place of death	Tela Sant		
Residence	Winter Park Fla.		
Age	74 Yrs	Mo's	Days 10
Weight		Height	ft. in. Eyes
Funeral at	Chapel		
Date	Wed Feb 2	1944	10:30 A.M.
Account charged	Mrs E. Mac Guire		
Address	Winter Park Fla.		
Account guaranteed	Estate		
Address			
Embalming	Yuss		35.00
Robe, Suit, Dress			
Underwear and Hose			
Casket	6-3 1/2 Plush		225.00
Casket with Copper Lin			
Style of Casket	Get. 1/2 - C		
No. of Casket	1927 Shiner		
Outside Box			
Shipping Case or Vault	Cement		60.00
Handles	Ed -		
Pillow Set	2		
Name Plate			
Cemetery	Palm		
Section	78 E 1/2	Lot	A
<p>I Other Graves</p> 			
<p>X Grave on this date</p>			
Cremation			
Urn			
Single Grave			
Opening and Closing Grave	etc		15.00
Body Shipped to			
R. R. Ticket			
Cash advanced			
Autos			
Telegram			
Minister	Rev Mesidick		
Music	Organ		
Casket Wagon	(1)		5.00
Physician	Dr. Evans		
County or City Burial			
Automobiles	5.00		15.00
Baggage or Express Train No.			
			355.00

Carey Hand Funeral Home

Name of deceased Thomas J. Parsons
 Date of death Mon Jan 31 A M
 Cause of death _____
 Place of death Reg -
 Residence 321- S. Garland -
 Age _____ Yrs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft _____ in _____ Eyes _____
 Funeral at Chapel
 Date Wed Feb 2 1944 3 P M
 Account charged _____
 Address _____
 Account guaranteed _____
 Address _____
 Embalming Y
 Robe, Suit, Dress Blue Sny
 Underwear and Hose _____
 Casket 6-2 in Plunk
 Casket with Copper Lin. _____
 Style of Casket Oct A box
 No. of Casket 1850
 Outside Box Reg
 Shipping Case or Vault _____
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery General
 Section A N 4 1/4 Lot _____

I Other Graves



X Grave on this date

Cremation Auto 5.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave Y etc 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister Rev Baker
 Music Organ 5.00
 Casket Wagon (1)
 Physician Judge Duckworth
 County of City Burial
 Automobiles S & S 15.00
 Baggage or Express Train No. _____

234.50
 5.00
 224.50

C- auto

Feb 2 - 1944

Carry Hand Funeral Home

Name of deceased Hattie N. Gibson
Date of death Feb 1 9:30 P. M.
Cause of death _____
Place of death Seminole Living Park
Residence E. Curpa New York
Age 78 Y'rs 3 Mo's 10 Days
Weight 120 Height 5 ft. 4 in. Eyes _____
Funeral at Chapel Private
Date Friday Feb 4 1944 3 P. M.
Account charged Ben White
Address Seminole Living Park - Longway
Account guaranteed Estate
Address _____
Embalming 48 35.00
Robe, Suit, Dress _____
Underwear and Hose _____
Casket 4-2-44 1st th 350.00
Casket with Copper Lin. Inner 100.00
Style of Casket State
No. of Casket 230 Tampa
Outside Box R-9
Shipping Case, or Vault _____
Handles Ext wood
Pillow Set yes
Name Plate _____
Cemetery on Vault
Section _____ Lot _____

I Other Graves _____

X Grave on this date _____

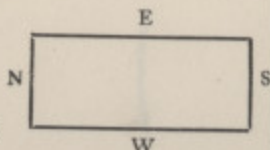
Cremation in April ship
Urn _____
Single Grave _____
Opening and Closing Grave _____
Body Shipped to _____
R. R. Ticket _____
Cash advanced _____
Autos _____
Telegram _____
Minister Dean Johnson
Music _____
Casket Wagon 18.00 2 15.00
Physician Dr. J. W. Curran
County or City Burial _____
Automobiles _____
Baggage or Express Train No. _____

500.00

Carey Hand Funeral Home

Name of deceased Robert N. Brooke
 Date of death Feb 2nd P.M.
 Cause of death Heart disease Arterio Sclerosis
 Place of death N.Y.C.
 Residence 465 Grand Circle 3811
 Age 72 Y'rs 4 Mo's 17 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Interment
 Date Friday 1944 M.
 Account charged Mrs Alice N. Brooke
 Address Katon Island N.Y.
 Account guaranteed Check
 Address _____
 Embalming & Dress 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 4-3-5 Cloth 250.00
 Casket with Copper Lin. ✓
 Style of Casket State N. Pop
 No. of Casket 48- Tampa
 Outside Box N.Y.
 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 Burial Sandy Spring Md
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Washington D.C.
 R. R. Ticket 342 2189 1210 1573 93.67
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (21) 10.00
 Physician Dr
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 92 8

Feb 2-4-44
Extra Ref
388.67
23.71
411.38

Carey Hand Funeral Home

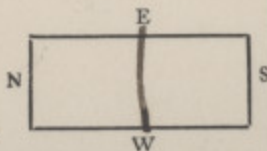
Name of deceased Eugene Hoffner
 Date of death Wed Feb 2nd 1944 A.M.
 Cause of death _____
 Place of death Cocoa Fla
 Residence Orlando
 Age 46 Y'rs. 6 Mo's. 10 Days
 Weight 180 Height 5 ft. 7 in. Eyes _____
 Funeral at Chapel
 Date Sat 2-5- 1944 2:30 P.M.
 Account charged Mrs Maude Hoffner
 Address Orlando Fla
 Account guaranteed Kayman
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6-3 1/2 x 6 1/2 225.00
 Casket with Copper Lin. _____
 Style of Casket State of Cal.
 No. of Casket 37-Tampa
 Outside Box ✓
 Shipping Case or Vault Coronet 60.00
 Handles Ext
 Pillow Set yes
 Name Plate _____
 Cemetery Greenwood
 Section N N 1/2 Lot 44

I Other Graves _____

space

X Grave on this date _____



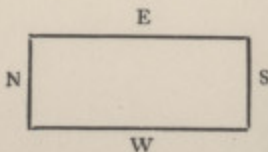
Cremation P.O. Par 5.00
 Urn Cor. Min 5.00
 Single Grave Family Par 15.00
 Opening and Closing Grave State
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced Korn T. Name 35.00
 Autos _____
 Telegram _____
 Minister Rev Quinn
 Music _____
 Casket Wagon X Cocoa 10.00
 Physician _____
 County or City Burial _____
 Automobiles S & S 15.00
 Baggage or Express Train No. 8

370.00

Carey Hand Funeral Home

Name of deceased Justin Van Buskirk
 Date of death Feb 2 10:30 P. M.
 Cause of death Cerebral Hemiparesis
 Place of death C. S. H.
 Residence Panama City Fla.
 Age 82 Yrs 11 Mo's 19 Days
 Weight 150 Height 5 ft. 3 in. Eyes
 Funeral at Chapel
 Date Sat Feb 5 1944 8 P. M.
 Account charged Mrs Maynard Van Buskirk
 Address Panama City Fla.
 Account guaranteed Estate
 Address
 Embalming & Dressing 35.00
 Robe, Suit, Dress ✓
 Underwear and Hose ✓
 Casket 6-7 in. Cloth 200.00
 Casket with Copper Lin. ✓
 Style of Casket Oct St. Pop.
 No. of Casket 1575
 Outside Box ✓
 Shipping Case or Vault ✓
 Handles Ext
 Pillow Set yes
 Name Plate ✓
 Cemetery Cremation
 Section Lot

I Other Graves



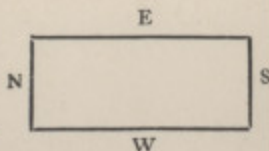
X Grave on this date

Cremation 50.00
 Urn wooden
 Single Grave ✓
 Opening and Closing Grave Body
 Body Shipped to Cremated
 R. R. Ticket 8-AM Mon 2-7-44
 Cash advanced with call for
 Autos
 Telegram
 Minister Mrs Geo C. S. 5.00
 Music yes 5.00
 Casket Wagon (1) 5.00
 Physician Dr. R. White
 County or City Burial
 Automobiles
 Baggage or Express Train No. 3 00.00

Carey Hand Funeral Home

Name of deceased Elice Black Sutherland
 Date of death Feb 3 8:18 AM
 Cause of death Arterio sclerotic heart
 Place of death C. F. N.
 Residence 730 Maplewell St. City
 Age 74 Yrs. 11 Mo's. 4 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destination
 Date Feb 1944 M
 Account charged Mrs. C. H. Richards
 Address Mo. Minnville, Tenn.
 Account guaranteed _____
 Address _____
 Embalming Y Pressing
 Robe, Suit, Dress White 13
 Underwear and Hose _____
 Casket 4-3 4 Plush
 Casket with Copper Lin. Y
 Style of Casket Det. H. Cap.
 No. of Casket 1850 4 Plush
 Outside Box Reg-
 Shipping Case or Vault -
 Handles Ext-
 Pillow Set yes
 Name Plate _____
 Cemetery Destination
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to M. E. Minnville
 R. R. Ticket _____
 Cash advanced 30 37
 Autos _____
 Telegram 3- amb sup. 9.00
 Minister Destination
 Music _____
 Casket Wagon (2) 10.00
 Physician Levi
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. 76 2

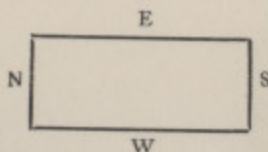
Thus Night 2-3-44

267.37

Carey Hand Funeral Home

Name of deceased Mrs. Carrie A Phillips
 Date of death Feb. 2-44- M
 Cause of death Not given on Permit
 Place of death Rich
 Residence Ft. Meyers
 Age 81 Y'rs 7 Mo's 1 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Ft. Myers Fla
 Date Feb 194 M
 Account charged Sharon & Englehart
 Address Ft. Myers Fla
 Account guaranteed Yes
 Address _____
 Embalming Cremation
 Robe, Suit, Dress _____
 Underwear and Hose Body moved
 Casket by Express Jones & 75
 Casket with Copper Lin. 2-4-44
 Style of Casket _____
 No. of Casket Body cremated
 Outside Box 8-A.M. Set
 Shipping Case or Vault 2-5-44
 Handles Express Car to
 Pillow Set Mrs. Betty Brooks
 Name Plate Pearl St
 Cemetery Malone New York
 Section _____ Lot _____

I Other Graves



X Grave on this date

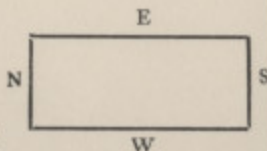
Cremation _____
 Urn provided
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or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

37.50

Carey Hand Funeral Home

Name of deceased Mrs. Adda F. Cushing
 Date of death Feb. 2 - 44 M
 Cause of death Alzheim on Pernix
 Place of death Alzheim Palatka
 Residence Bitter Springs
 Age 75 Y'rs. 7 Mos. 5 Days
 Weight 150 Height 5 ft. 4 in. Eyes
 Funeral at
 Date Feb 2 - 1944 M
 Account charged Allen & Summerville
 Address De Land Fla
 Account guaranteed ok -
 Address
 Embalming Cremation 37.50
 Robe, Suit, Dress
 Underwear and Hose Body unwashed
 Casket by auto 4-PM
 Casket with Copper Lin. Feb 2 - 4-44
 Style of Casket
 No. of Casket Body cremated
 Outside Box 8-AM
 Shipping Case or Vault Feb 2 - 5-44
 Handles
 Pillow Set Express Ashes &
 Name Plate Allen & Summerville
 Cemetery De Land Fla
 Section Lot

I Other Graves



X Grave on this date

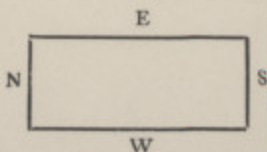
Cremation
 Urn wooden
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

37.50

Carey Hand Funeral Home

Name of deceased Infant EISSMAN
 Date of death Jan 31-44 M
 Cause of death Colon Rouge
 Place of death Shil Corn
 Residence
 Age..... Y'rs..... Mo's..... Days.....
 Weight..... Height..... ft..... in. Eyes.....
 Funeral at
 Date 194..... M
 Account charged Trus Harper
 Address Winter Park in Chg
 Account guaranteed
 Address
 Embalming Body arrived by Express
 Robe, Suit, Dress Jac 2 # 91-
 Underwear and Hose 2-4-44
 Casket Body in Vault
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section..... Lot.....

I Other Graves



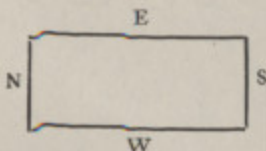
X Grave on this date

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

Carey Hand Funeral Home

Name of deceased Mrs. Mabel Turner La Breck
 Date of death Feb 3rd M
 Cause of death Angina Pectoris
 Place of death Mt Lora Fla
 Residence Mt Lora Fla
 Age 53 Yrs 11 Mo's 14 Days known
 Weight 150 Height 5 ft 8 in. Eyes known
 Funeral at Mt Lora Fla
 Date Feb 1944 M
 Account charged Rebbaum & Company
 Address Mt Lora Fla
 Account guaranteed Chech
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose Cremation 37.50
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket body arrived
 No. of Casket quadr 5 P. m.
 Outside Box Sat. Feb 5-44
 Shipping Case or Vault _____
 Handles _____
 Pillow Set Body Cremated
 Name Plate Sat. m Sunday
 Cemetery Feb 6-1944
 Section _____ Lot _____

I Other Graves



X Grave on this date

Cremation ashes expressed to
 Urn Rebbaum & Co F. Home
 Single Grave Mount Tusco
 Opening and Closing Grave new york
 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