

.....THE.....

AMERICAN FUNERAL RECORD

A READY REFERENCE DAY-BOOK FOR UNDERTAKERS

A few words of Explanation to the man who enters up the order for Funeral Arrangements:

This Record Book will be of great assistance to your profession in entering up funerals and arrangements for same, correctly, intelligently and completely. You will find it prudent to record all items that are given therein, as in doing this you will not only enhance the prestige of the profession, but also create admiration and confidence of your patrons in your work. Record items of a deceased are looked for at the Undertaker's quite frequently, and the more exact the record is kept with data that have bearing on the funeral, the better will be the results.

In entering up your work, observe the following:

State full name of the deceased on first line; also note on next line the relative position of same to the one the funeral is to be charged to; for instance: Husband of, wife of, son of, etc.

The two clauses, "Order given by," and "How secured," are important. They will assist you very materially in overcoming the embarrassment incident to asking security for an account.

The clause "Cause of Death" is very essential for several reasons: 1, to know whether the subject died of a contagious disease; 2, to adopt correct measures for embalming; 3, to ascertain necessity of disinfection, etc.

Occupation of the deceased, single or married, religion and age, are matters of biographical record and should be entered up most exact and correct in every case.

The pleasing and correct rotation, observed in the bill of items to be charged, is an essential and most practical feature of the chart, and this part of the record alone is worth the price of the book. Fill out such items as you were called upon to furnish, and leave the others blank. Read all items carefully when you render bill, in order to be sure that you have not omitted any charge. The extra lines on bill of items are for such charges as the printed items may not provide. You may, for instance, be called upon to charge outlays, such as Railroad Fares, Moneys Advanced, etc.

The Ledger part on bottom of each page will enable you to keep account of your entire funeral work in one book, though you may prefer to transfer the total of the bill as one item into your regular Ledger.

This Funeral Record has been compiled after laborious and close study into the proper requirements of your profession. It is the result of years of experience, and, if you will carefully enter up the spaces provided in this book, you will find that every item that might possibly be needed for future reference is recorded.

THE PUBLISHER.

FOR SALE BY ALL MANUFACTURERS AND JOBBERS OF UNDERTAKING SUPPLIES

N. B.—See Rules on "Funeral Ethics" on Next Page

Published and for Sale by

F. J. FEINEMAN
804 Pine Street
ST. LOUIS, MO.

FUNERAL ETHICS

The average Funeral Director, while conversant with the details of funeral work, cannot fail to find the following Rules on Funeral Etiquette interesting reading matter, with the chances of finding among them some points, the close observance of which will be of benefit to him, to-wit:

In all things use good judgment and cool deliberation in performing your work, and remember that you are not called upon to console the bereaved, but to take care of the remains, and do that in the most competent and least ostentatious way.

Be courteous and polite under any and all circumstances, however trying. Refrain from alluding to your work as "a job," it is not only bad form, but is also apt to offend your patrons. Term it "a call," "a funeral," or "an order."

Perform your work in a quiet and considerate manner, and make as few requests of the family as possible. Talk in an undertone while at the funeral house.

When selling the casket or coffin, do not be afraid to recommend the use of high-class goods. It will satisfy your customers better in the end and will prove an effective advertisement for yourself.

Take correct note of all arrangements for the funeral when the order for the casket is taken. Be sure that you have a clear understanding with your customer on all points pertaining to the funeral arrangements, and then note same in your Funeral Record Book. Also be careful that you have the correct spelling of name for the newspapers, etc. A memorandum sheet of the American Funeral Record will assist you greatly in these functions.

Take note of as many of the biographical items, such as religion, age, occupation, etc., of the deceased as you can obtain by easy suasion and insert them in the proper spaces provided in this Record Book. Items of record of a deceased are often inquired for at the Undertaker's, and by keeping complete account and record of all things, your patrons will see convincingly that you are doing your work on up-to-date principles, and that a funeral is handled by you better than a mere "putting the body under ground."

Have leave-taking occur prior to arrival of friends for the funeral and attend to closing casket or sealing of steel caskets or metallic linings before the services begin. Avoid all delay, hitch or misunderstanding with your helpers. Instruct bearers, drivers and others beforehand.

Use Badge with delicate flowers and smilax on the door instead of the antiquated cloth crepe.

Lining with evergreen helps very materially to make a grave seem less distressing during interment.

A very desirable adjunct to your equipment is some matting, and possibly a canopy to use at the cemetery, in sunshine or storm. The bereaved will appreciate it.

At the funeral services speeches of lodge members precede the sermon. These speeches are usually made at the grave. If societies attend in a body, the principal services are held at the grave. Episcopal services are usually held at the house. Roman Catholic always at the church.

Have your hearse paralleled with the sidewalk. (Do not back it into the pavement like a moving van.)

Order of funeral cortege is best arranged as follows: Automobile with pall-bearers—hearse—chief mourners' auto—Minister's auto—autos of friends. If lodge members conduct the rites, the lodge members lead the procession.

Where the deceased is buried without any religious services, or where the mourners are unable to engage the services of a preacher, the undertaker may officiate and offer the prayer.

If remains are to be shipped, see to it that the departure from the house is set so as to be at the depot at least one-half hour before train time. This will give the undertaker a chance to see to arrangements in proper manner and without undue flurry.

Stillborns are buried by the undertaker alone. It is unusual that any of the family attend the interment.

Where bodies are neither embalmed nor put on ice, keep in coolest place possible, perhaps best between two open windows, with the sunshades drawn down as far as needed, and use a bleacher frequently over face and hands of the deceased.

Let the entire funeral be conducted in a quiet, well-ordered and dignified manner, and you will have conferred a lasting favor upon those who required the sorrowful need of your service. This is the best method of advertising an undertaker can employ, and it is the stepping-stone for sure success.

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RECORD OF FUNERAL

Total No. 1226 Yearly No. 24 Date August 6th 1925

Name of Deceased Robert A. Smith (What Race) White (Where Born) Illinois, Iowa

Charge to Tarkio Electric & Water Co.
 Address Tarkio, Iowa, Mo.
 Order Given by J.C. Trout, Tarkio, Mo.
 How Secured City
 Date of Funeral August 6th 1925
 Residence Tarkio, Iowa
 Place of Death Tarkio, Mo.
 Funeral Services at Lamar, Ia. Farmer Res.
 Time of Funeral Service 2:30 P.M.
 Clergyman L.H. Hollenay
 Certifying Physician

His Residence
 Number of Burial Certificate
 Cause of Death Accidental Electro-cution
 Date of Death Aug 4th 25 7 P.M.
 Occupation of the Deceased Lineman

Single or Married Married Religion none
 Date of Birth Dec 21 1880
 Age 44 Years 7 Months 13 Days
 Name of Father Willard Smith

His Birthplace
 Name of Mother (Maiden Name)

Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin

Manufactured by
 Interment at Lamar, Ia. Rose Hill Cemetery

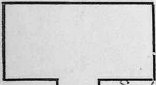


Diagram of Lot or Vault

Lot No. 53 S-
 Grave No.
 Section No.
Seby Chest. Rch

Casket or Coffin.....	\$	
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		14 00
Auto Limousines to Cemetery..@ \$.....		7 50
Autos to R. R. Station.....@ \$.....		7 50
Other Vehicle Service.....		
Acroplane Service.....		
Death Notices in..... Newspapers.....		
(Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations.....		
Outlay for Lot.....		50 00
Opening Grave or Vault.....		80 00
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		12 00
Singers.....		
Church Charges, \$..... Minister, \$.....	5 00	5 00
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	
By Amount Paid in Advance.....	\$	
Balance.....	\$	
Entered into Ledger, page..... or below.....		

To Funeral Charges..... Total, \$	By Cash..... \$
Body transported from Tarkio by Auto Hearse Aug 5 th by J.M. Casar	
Wm. D. Moore, Tarkio, Mo., E. P. De Janis, Colorado Springs, Colo. } Authorized exec.	

Names of Pall Bearers Len Fowler, St. Sorenson, Walter Hartley, John Smiley, F.M. Wells, O.C. Decker
 Names of Lodges
 SINGERS Lonella, Wight, Alvin, Walter, Edw. Wells, A.O.U. White
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Funeral Director A. Otis White

RECORD OF FUNERAL

Total No. 1207 Yearly No. 25 Date Aug. 23 1925

Name of Deceased Gracia Margaret Thomas (What Race) white (Where Born) Fanning, Kan.
 Human: Widow
 Spouse: Daughter of James G. Thomas

Charge to James Thomas
 Address Tulsa Okla.
 Order Given by James Thomas
 How Secured _____
 Date of Funeral Aug. 23, 1925
 Residence Tulsa, Okla.
 Place of Death Tulsa Okla.
 Funeral Services at Lamoni, Ia. L.O.S. Church
 Time of Funeral Service 2:30 PM
 Clergyman W.E. Prall - L.H. Halloway
 Certifying Physician W.W. Beasley, Tulsa Okla.
 His Residence Tulsa Okla.

Casket or Coffin	\$	
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with _____ Fluid)		
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
"Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15 00
Auto Limousines to Cemetery @ \$		2 50
Autos to R. R. Station @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in _____ Newspapers	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		40
Opening Grave or Vault		50 00
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page _____ or below		

Number of Burial Certificate _____
 Cause of Death Anter-Toxic Meningitis
 (Primary) _____ (Secondary) _____
 Date of Death Aug. 19, 1925
 Occupation of the Deceased None
 Single or Married Single Religion None
 Date of Birth Oct. 5, 1922
 Age 2 Years 10 Months 14 Days
 Name of Father James Thomas
 His Birthplace Pleasanton, Ia.
 Name of Mother Gracia Thompson
 (Maiden Name) _____
 Her Birthplace Little Sioux, Ia.
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by _____
 Interment at Lamoni, Ia. Rose Hill Cemetery

Lot No. 1596
 Grave No. 4
 Section No. _____
 Diagram of Lot or Vault
H. B. Hill Section

To Funeral Charges	Total, \$				By Cash	\$

Names of Pall Bearers Beida Lawler, Lois Prall, Corina Kelly, Gretchen Kelly
 Names of Lodges H.P.O.C. F.B.
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near _____
 Funeral Director A. O. White
 Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1209 Yearly No. 27 Date Sept 4th 1925
 Name of Deceased John Burnett White Washington Co. Iowa
 Husband--
 Wife--Widow
 Son--Daughter of Susanna K. Burnett (What Race) (Where Born)

Charge to Estate
 Address Lamoni, Ia.
 Order Given by Amos E. R.D. Burnett
 How Secured
 Date of Funeral Sept. 4 1925 2:30
 Residence So. Cherry, Lamoni, Ia.
 Place of Death Residence
 Funeral Services at Lamoni, R.D.S. Church
 Time of Funeral Service 2:30 P.M.
 Clergyman W. Holliday - Mr. Donker
 Certifying Physician O.N. Peterson
 His Residence Lamoni, Ia.
 Number of Burial Certificate
 Cause of Death Pulmonary Tuberculosis
 (Primary) (Secondary)
 Date of Death Sept. 1st 1925
 Occupation of the Deceased Retired farmer
 Single or Married Widow
 Date of Birth March 26 1852
 Age 73 Years 5 Months 5 Days
 Name of Father Robert W. Burnett
 His Birthplace Washington Co. Ia.
 Name of Mother Malinda Smith
 (Maiden Name)
 Her Birthplace Ill.
 Body to be Shipped to
 Size and Style of Casket or Coffin 1923 1/2 c
State Dr. Steel Gray
 Manufactured by A. B. C. Co.
 Interment Lamoni, Ia. Rose Hill Cemetery

Casket or Coffin	\$ 185.00
Metallic Lining	(State Kind)
Outside Box	(State Kind)
Grave Vault	(State Kind) 110.
Burial Suit or Dress	30.
Burial Slippers and Hose	40.00
Engraving Plate	
Embalming Body (with Fluid)	25.00
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	15.00
Auto Limousine to Cemetery, @ \$	
Auto to R. R. Station, @ \$	7.50
Other Vehicle Service	
Aeroplane Service	
Death Notices in	Newspapers
	(Names of Newspapers)
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	10
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
<u>Undertaker</u>	150
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

Diagram of Lot or Vault
 Section No. 776
 Grave No. 1
 Section No.
 Sexton = A. B. Bell

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers J. D. Schofield, Fred Lysinger, J. F. Hill, John Sweeney, John Corney, A. E. Lewis
 Names of Lodges
SIXER = Alvin Waldam, Maggie A. Anderson, Ed. Devery, White, David E. Donker
 Lodge Insurance, \$ Other Insurance, \$
 Funeral Director J. O. White
 Names of Street Vendors
 Compiled by P. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1212 Yearly No. 30 Date Sept 22 1925

Name of Deceased Rollin Dwight Richardson Harrison Twp
Harrison Co. Mo
(Where Born)
Husband son of Olive Roxie Richardson
Wife Richardson
Daughter of Richardson

Charge to Oliver F. Richardson
Address _____
Order Given by Oliver F. Richardson
How Secured _____

Date of Funeral Sept 22 1925
Residence Lucinda Twp Harrison Co Mo
Place of Death Lucinda Twp Harrison Co
Funeral Services at Lone Rock Church
Time of Funeral Service 2:30
Clergyman David E. Dowker
Certifying Physician Dr. P. Reynolds
His Residence Hatfield Mo

Number of Burial Certificate _____
Cause of Death Burns from Scalding water
(Primary) (Secondary)
Date of Death Sept 20 1925 9:30 PM
Occupation of the Deceased _____

Single or Married D Religion None
Date of Birth Feb 24 1923
Age 2 Years 6 Months 36 Days
Name of Father Oliver Flemons Richardson
His Birthplace Harrison Co Mo
Name of Mother Roxie Ann Brown
(Maiden Name)
Her Birthplace Harrison Co Mo
Body to be Shipped to 3

Size and Style of Casket or Coffin 3/6 No 111
Wh Emb - plush
Manufactured by R.C. Co
Interment Harrison Co Mo Lone Rock Cemetery

Diagram of Lot or Vault
SIXTON Mart Blake
Lot No. _____
Grave No. _____
Section No. _____

Casket or Coffin <u>case box</u>	\$ <u>500.00</u>
Metallic Lining	(State Kind)
Outside Box	(State Kind)
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	<u>1.50</u>
Interburying Plate	
Embalming Body (with <u>Chemical Fluid</u>)	<u>50.00</u>
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	
Auto Limousines to Cemetery, @ \$	<u>X X</u>
Autos to R. R. Station, @ \$	
Other Vehicle Service <u>box delivery</u>	<u>X X</u>
Aeroplane Service	
Death Notices in _____ Newspapers	
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lighting Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	<u>X X</u>
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	<u>36</u>
Pall Bearer Service	
<u>Tout</u>	<u>X X</u>
Total Footing of Bill	\$ _____
By Amount Paid in Advance	\$ _____
Balance	\$ _____
Entered into Ledger, page _____ or below _____	

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers _____
Names of Lodges _____
SINGERS - Lena Poxie - Frances Harris, David Dowker, A. O. White
Lodge Insurance, \$ _____ Other Insurance, \$ _____
Names of Next of Kin A. O. White

RECORD OF FUNERAL

Total No. 1217 Yearly No. 32 Date Oct 16th 1925

Name of Deceased Alfred Lovell Emyland (Where Race) (Where Born)
Husband...
Wife...Widow
Son...Daughter of } Sarah Lovell

Charge to Estate
Address
Order Given by Mrs. Jones
How Secured
Date of Funeral Oct. 16, 1925
Residence Louisiana, La. 44th & Toussaint 322
Place of Death Des Moines, La. M.E. Hospital
Funeral Services by James D. Saub
Time of Funeral Service 2 P.M.
Clergyman David E. Dauter W.E. Pray
Certifying Physician Chas. Ryan
His Residence Des Moines
Number of Burial Certificate
Cause of Death Edema of Embolism
(Primary) (Secondary)
Date of Death Oct. 13, 1925 9 AM
Occupation of the Deceased Retired Farmer
Single or Married Married Religion C.O.S.
Date of Birth Nov. 27 1844
Age 80 Years 10 Months 17 Days
Name of Father Ekrem Lovell
His Birthplace Emyland
Name of Mother Elizabeth Ramee
(Maiden Name)
Her Birthplace
Body to be Shipped to Des Moines, La.
Oct. 17th Evening 5 P.M.
Size and Style of Casket or Coffin
100
Manufactured by Root Casket
Interment Louisiana, La. Rose Hill Cemetery

Casket or Coffin	\$	
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress	<u>Dressing</u>	<u>X X</u>
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		
Dressing Body, \$	Shaving, \$	<u>X X</u>
Hair Dressing		<u>X X</u>
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse	<u>2. trip</u>	<u>X X</u>
Auto Limousines to Cemetery @ \$		
Autos to R. R. Station	<u>1.</u> @ \$	<u>X X</u>
Other Vehicle Service	<u>1.</u>	<u>X X</u>
Aeroplane Service		
Death Notices in Newspapers		
<u>Box</u> <u>delivered</u>	(Names of Newspapers)	<u>X X</u> <u>25.00</u>
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<u>8.00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		<u>6.5</u>
Pall Bearer Service		
<u>Reception</u>		<u>2.50</u>
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page		or below

Diagram of Lot or Vault
SEXTON Ad Bell

Lot No. 369
Grave No. 3
Section No.

To Funeral Charges	Total, \$					By Cash	\$

Names of Pall Bearers Don Anderson, John Swinney, Art Hoftager, Oliver Hayes, Sam White
Names of Lodges
SINGER David E. Dauter, Alex. Walden, Frances Jones, A. Alkhalid
Lodge Insurance, \$
Funeral Director A. O. White Other Insurance, \$
Names of Near Relatives

RECORD OF FUNERAL

Total No. 1215 Yearly No. 33 Date Oct 16 1925

Name of Deceased Mary Ellen Buey Whit Deaton & Son
Husband— (What Race) (Where Born)
Wife—
Son—
Daughter—
} James T. Buey Deaton

Charge to Gertrude Van Housling
Address Gertrude Van Housling
Order Given by Gertrude Van Housling
How Secured

Date of Funeral Oct. 16. 1925
Residence Lamar, Mo.
Place of Death Blairsville, Miss. Deaton
Funeral Services at Lamar, Mo. W. E. Chaney
Time of Funeral Service 2 P.M.
Clergyman W. B. Dillingham
Certifying Physician C. J. H. Peterman
His Residence Lamar, Mo.

Number of Burial Certificate
Cause of Death Pulmonary Edema
(Primary) (Secondary)
Date of Death Oct. 14 1925
Occupation of the Deceased Ret. Farmer
Single or Married Widow Religion

Date of Birth April 20 1855
Age 70 Years 5 Months 14 Days
Name of Father James T. Tapscott
His Birthplace Virginia
Name of Mother Mahuida Brooks
(Maiden Name)

Her Birthplace
Body to be Shipped to
Size and Style of Casket or Coffin No. 2 1/2 C
Wood Dark
Manufactured by North Casket Co.
Interment at Blairsville Supt. Gr. Chapel cemetery

Diagram of Lot or Vault

Section A-1311

Casket or Coffin.....	\$ 400
Metallic Lining.....	(State Kind)
Outside Box.....	(State Kind)
Grave Vault.....	(State Kind) <u>Ja</u> 110
Burial Suit or Dress.....	37
Burial Slippers and Hose.....	2 50
Embalming Plate.....	
Embalming Body (with Fluid)	25 00
Dressing Body, \$.....	Shaving, \$.....
Hair Dressing.....	
Use of Folding Chairs.....	
" " Candelabrum, \$.....	Candles, \$.....
Door Badge, \$.....	Gloves, \$.....
Hearse.....	15 00
Auto Limousines to Cemetery @ \$.....	
Autos to R. R. Station @ \$.....	
Other Vehicle Service.....	7 00
Aeroplane Service.....	
Death Notices in.....	Newspapers.....
(Names of Newspapers)	
Flowers, \$.....	Rental of Plants, \$.....
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	
Lining Grave with Evergreen or Muslin.....	
Matting, \$.....	Tent Rental, \$.....
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$.....	Minister, \$.....
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
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Total Footing of Bill.....	\$.....
By Amount Paid in Advance.....	\$.....
Balance.....	\$.....
Entered into Ledger, page.....	or below.....

To Funeral Charges.....	Total, \$.....	By Cash.....	\$.....
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Names of Pall Bearers Smith, W. Teale, B. M. Russer, Tom Alley, Jim Baird, Fred Pannock
Names of Lodges SINGERS - Wanda, Harmon, Derry, in city
Lodge Insurance, \$..... Other Insurance, \$.....
Names of Funeral Directors A. Otis Whit

RECORD OF FUNERAL

Total No. 1216 Yearly No. 274 Date Nov 6th 1925

Name of Deceased Ida Wendell White
(What Race) (Where Born)

Husband... John Wendell
Wife... (Where Born)

Charge to... John Wendell
 Address Lamoni, Mo.

Order Given by John Wendell
 How Secured

Date of Funeral Nov 6th 1925
 Residency Lamoni, Mo.

Place of Death Bethany, Mo.
 Funeral Services at M.E. Church, Lamoni

Time of Funeral 2 P.M.
 Clergyman Rev. Amos D. Gray

Certifying Physician Emmet L. Wood
 His Residence Bethany, Mo.

Number of Burial Certificate
 Cause of Death Caesura of Urinary Bladder
(Primary) (Secondary)

Date of Death Nov 2 25 6:30 AM
 Occupation of the Deceased at home

Single or Married Married Religion M.E.
 Date of Birth

Age 54 Years Months Days
 Name of Father

His Birthplace
 Name of Mother

Her Birthplace
 Body to be Shipped to

Size and Style of Casket or Coffin White East
Flush face cap

Manufactured by
 Interment at Rose Hill, Lamoni, Mo. Cemetery

Diagram of Lot or Vault
aa Bell Dexter

Lot No. 535

Grave No. one

Section No.

Casket or Coffin	\$	
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse <u>7 trips</u>		<u>25 00</u>
Auto Limousines to Cemetery @ \$		X X
Autos to R. R. Station @ \$		X X
Other Vehicle Service <u>drag</u>		X X
Aeroplane Service		
Death Notices in Newspapers		X X
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		<u>40 00</u>
Opening Grave or Vault		<u>8 00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		X X
Singers		X X
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		X X
Pall Bearer Service		
Total Footing of Bill \$		
By Amount Paid in Advance	\$	
Balanced	\$	
Entered into Ledger, page		or below

To Funeral Charges	Total, \$	By Cash
<u>Body shipped from Bethany to Chris City, Ia</u> <u>11:5 P.M. conveyed to Lamoni by bus</u> <u>8 M. Haas No. 1078 stopping under take</u>		

Names of Pall Bearers F. E. Jahn - McEvel - Wm Perry - Maurice DeLong - Maurice Richardson - Chas Kopp

Names of Lodges

Names of Near Relatives Note White

RECORD OF FUNERAL

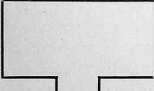
Total No. 1217 Yearly No. 35 Date Nov. 8 1925

Name of Deceased Edward H. Hays Jr. white Harrison Co. Mo.
Husband-- (What Race) (Where Born)
 Wife--Widow } Son

Charge to Edward H. Hays
 Address Lamoni Ia.
 Order Given by Ed. Hays
 How Secured _____
 Date of Funeral Nov. 8 - 1925
 Residence Hamilton Twp. Harrison Co. Mo.
 Place of Death Residence
 Funeral Services at Residence Pay for other
 Time of Funeral Service 2 P.M.
 Clergyman L. E. Jones
 Certifying Physician _____

Casket or Coffin	\$ <u>250.00</u>
Metallic Lining	(State Kind)
Outside Box	(State Kind)
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with _____ Fluid)	
Dressing Body, \$ _____ Shaving, \$ _____	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ _____ Candles, \$ _____	
Door Badge, \$ _____ Gloves, \$ _____	
Hearse	
Auto Limousines to Cemetery... @ \$ _____	
Autos to R. R. Station... @ \$ _____	
Other Vehicle Service	
Aeroplane Service	
Death Notices in _____ Newspapers	
<small>(Names of Newspapers)</small>	
Flowers, \$ _____ Rental of Plants, \$ _____	
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	<u>3.50</u>
Lining Grave with Evergreen or Muslin	
Matting, \$ _____ Tent Rental, \$ _____	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$ _____ Minister, \$ _____	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ _____
By Amount Paid in Advance	\$ _____
Balance	\$ _____
Entered into Ledger, page _____ or below _____	

His Residence _____
 Number of Burial Certificate _____
 Cause of Death _____
 Date of Death Nov. 7 1925 10 AM
(Primary) (Secondary)
 Occupation of the Deceased none
 Single or Married S. Religion Y.
 Date of Birth Nov 5th 1925
 Age 0 Years 0 Months 2 Days
 Name of Father Edward Fremburg Hays
 His Birthplace Ia.
 Name of Mother Idella Fern Gray
(Maiden Name)
 Her Birthplace Mech.
 Body to be Shipped to _____
 Size and Style of Casket or Coffin 2 1/2 15 1/2
Emb. Lamb Skin
 Manufactured by R. C. C.
 Interment at Lamoni Ia. New Hill Cemetery

Lot No. 410
 Grave No. 2
 Section No. _____

Diagram of Lot or Vault
A. A. Bell Sexton

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers _____
 Names of Lodges _____
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____
 Funeral Director Ed. Hays
 Printed by F. J. FEINERMAN, St. Louis, Mo. in the year 1925.

RECORD OF FUNERAL

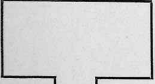
Total No. 1218 Yearly No. 36 Date Nov. 24 1925

Name of Deceased Joseph John P. Robidoux white Nashville Tenn
Husband---Widow (What Race) (Where Born)
 Wife---Widow } Martha Cecilia Robidoux
 Son---Daughter of }

Charge to M. Lilean Somme
 Address _____
 Order Given by Martha C. Robidoux
 How Secured _____
 Date of Funeral November 24, 1925
 Residence 307 1/2 Linden Lamoni, Ia
 Place of Death Residence
 Funeral Services at Lamoni, L.O.S. Church
 Time of Funeral Service 3 P.M.
 Clergyman W.E. Prall, E. Dewey White
 Certifying Physician O.W. Peterson
 His Residence Lamoni, Ia.

Number of Burial Certificate _____
 Cause of Death Chronic hypertensive nephritis
(Primary) (Secondary)
 Date of Death Nov. 22, 1925
 Occupation of the Deceased Retail meat Merchant
 Single or Married Married Religion _____
 Date of Birth March 26, 1853
 Age 72 Years 7 Months 26 Days
 Name of Father Isaac P. Robidoux
 His Birthplace Canada
 Name of Mother Barbara Mynst
(Maiden Name)
 Her Birthplace Germany

Body to be Shipped to _____
 Size and Style of Casket or Coffin Co. No. 200
Special Dark Stain Slate
 Manufactured by The Root Casket Co.
 Interment at Lamoni Rose Hill Cemetery

Diagram of Lot or Vault

Lot No. 266
Grave No. 1
Section No.
as full sexton

Casket or Coffin	\$	190	00
Metallic Lining	(State Kind)		
Outside Box	(State Kind)		
Grave Vault	<u>Dura</u> (State Kind)	110	
Burial Suit or Dress			
Burial Slippers and Hose	<u>collar</u>	35	
Engraving Plate			
Embalming Body (with Fluid)		25	
Dressing Body, \$	Shaving, \$		
Hair Dressing			
Use of Folding Chairs			
" " Candelabrum, \$	Candles, \$		
Door Badge, \$	Gloves, \$		
Hearse		15	
Auto Limousines to Cemetery, @ \$			
Autos to R. R. Station, @ \$			
Other Vehicle Service			
Aeroplane Service			
Death Notices in	Newspapers		
	(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	12	50
Other Decorations			
Outlay for Lot			
Opening Grave or Vault		10	00
Lining Grave with Evergreen or Muslin			
Matting, \$	Tent Rental, \$		
Use of Lowering Device			
Rental of Vault			
Outlay for Shipping Charges			
Removal Charges			
Incineration			
Personal Services			
Singers			
Church Charges, \$	Minister, \$		
Telegrams and Telephone Charges			
Pall Bearer Service			
<u>Mother</u>		1	00
Total Footing of Bill	\$		
By Amount Paid in Advance	\$		
Balance	\$		
Entered into Ledger, page			or below

	Total, \$
To Funeral Charges	By Cash

Names of Pall Bearers W. Blair, Bert Perry, W. Neal, W. H. Akins, Albert Fleet, T. J. Spradlock
 Names of Lodges F. B., Ida Gudrum, Kate Hill, Ada Moore, Mrs. F. W. Rauch
W. B. R. - Mrs. Alena, Walden, Frances, Jarvis, Thos. Holland, Mrs. Well
 Lodge Insurance \$ _____
 Funeral Director A. Otto White Other Insurance, \$ _____
 Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1219 Yearly No. 37 Date Nov. 27 1925

Name of Deceased Infant of H.C. Rosalee Hassell Lamar, Ia.
Husband---Widow (What Race) (Where Born)
Wife---Widow
Son---Daughter of

Charge to H.C. Hassell
Address Lamar, Ia.
Order Given by Paral. Hassell
How Secured
Date of Funeral December 27-28
Residence Lamar, Ia. R.M.C.
Place of Death Lamar, Ia. R.M.C.
Funeral Services at none
Time of Funeral Service 10 AM
Clergyman William E. Prall
Certifying Physician O.H. Peterson
His Residence Lamar, Ia.

Number of Burial Certificate
Cause of Death Still Born Premature
(Primary) (Secondary)
Date of Death Nov. 26 25
Occupation of the Deceased X

Single or Married X Religion X
Date of Birth Nov. 26 - 1925
Age X Years X Months X Days
Name of Father Harry C. Hassell
His Birthplace Iowa
Name of Mother Rosalee Turner
(Maiden Name)
Her Birthplace Virginia
Body to be Shipped to

Size and Style of Casket or Coffin 19
Manufactured by Hassell
Interment at Lamar, Ia. Rosalee Hassell Cemetery

Diagram of Lot or Vault
Lot No. 1148
Grave No. 4
Section No.
Sexton O.A. Bell

Casket or Coffin.....	\$	12.50
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
“ “ Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		
Auto Limousines to Cemetery...@ \$.....		
Autos to R. R. Station.....@ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers	(Names of Newspapers)	
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations.....		
Outlay for Lot <u>1. Rosalee Hassell</u>		
Opening Grave or Vault.....		3.50
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	
By Amount Paid in Advance.....	\$	
Balance.....	\$	
Entered into Ledger, page..... or below		

To Funeral Charges.....	Total, \$		By Cash.....	\$	

Names of Pall Bearers Funeral Director
Names of Lodges
Lodge Insurance, \$..... Other Insurance, \$.....
Names of Next of Kin Funeral Director Marion O. Smith
Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1925.

RECORD OF FUNERAL

Total No. 1220 Yearly No. 38 Date Dec 3 1925

Name of Deceased Chas. Bernice Kester, wife of M. J. Kester, Neb.
(What Race) (Where Born)
 Husband Chas. P. Kester
 Wife Eva L. Kester
 Daughter of Chas. P. and Eva L. Kester

Charge to Chas. P. Kester
 Address 316 W. Lexington Independence
 Order Given by Chas. P. Kester
 How Secured
 Date of Funeral Dec. 3, 1925
 Residence 706 So. Chas. Lamoni, Ia.
 Place of Death Residence, Lamoni
 Funeral Services at Lamoni, Sauk. Cham.
 Time of Funeral Service 2:30 P.M.
 Clergyman J. H. Halloway - W.C. Pratt
 Certifying Physician O. N. Peterson
 His Residence Lamoni
 Number of Burial Certificate
 Cause of Death acute exacerbation of kidney
myocarditis & embolism
(Primary) (Secondary)
 Date of Death Dec. 1st 1925 - 3 AM
 Occupation of the Deceased Scholar
 Single or Married Single Religion L.P.S.
 Date of Birth March 23, 1908
 Age 17 Years 8 Months 8 Days
 Name of Father Chas. P. Kester
 His Birthplace Ohio
 Name of Mother Eva L. Baker
(Maiden Name)
 Her Birthplace Neb.
 Body to be Shipped to
 Size and Style of Casket or Coffin 4/3 1907
Del. Gray, Co. plunk 1/2 C.
 Manufactured by Burlington Casket Co.
 Interment at Lamoni, Ia. Rose Hill Cemetery

Casket or Coffin	140.00	140.00
Music Lining		
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		22.50
Burial Slippers and Hose		4.50
Engraving Plate		
Embalming Body (with Fluid)		20.00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15.00
Auto Limousines to Cemetery, @ \$		
Autos to R. R. Station	@ \$	
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	10.50
Other Decorations		
Outlay for Lot		7.00
Opening Grave or Vault		8.00
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page		or below

Lot No. 1566
 Grave No. 1
 Section No.
 Diagram of Lot or Vault
Sexton O. A. Bell

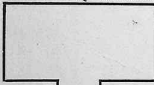
To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Ray Kopp, Earl Kelly, Harold Sumpster, Frank Jay, Max Green, Almon Radtke
Items P. B.
 Names of Lodges Union, Johnson, Georgia, Johnson, Beulah, Emma, Esther Halloway, Dorris, Baby
Marian, Birlein
 Lodge Insurance NGEP - Grace Lane, Nelson Lundberg, Dorothy Lunsdale, Dorothy Pratt
Funeral Director
 Names of Near Relatives A. Otis White, Marion, O. L. Smith

RECORD OF FUNERAL

Total No. 1224 Yearly No. 39 Date Dec 4 1925
 Name of Deceased Thomas Campbell white Ontario Canada
 Husband (What Race) (Where Born)
 Wife Ida May Campbell
 Son Daughter of

Charge to Estate
 Address Ida May Campbell
 Order Given by Ida May Campbell
 How Secured /
 Date of Funeral Dec 4 1925
 Residency Hubbards Sup. District G.A.
 Place of Death L.S. Va.
 Funeral Services Lanama L.O.S. Church
 Date of Funeral Service 2:30 P.M.
 Clergyman J. Holloway P.T. Williams
 Certifying Physician A.V. Peterson
 His Residence Lanama
 Number of Burial Certificate /
 Cause of Death Accidentally fell from cop car
 (Primary) (Secondary)
 Date of Death Dec 1 1925 6:57
 Occupation of the Deceased Farmer
 Single or Married Married Religion L.O.S.
 Date of Birth Oct 16 1861
 Age 64 Years 1 Months 15 Days
 Name of Father John Campbell
 His Birthplace Scotland
 Name of Mother Jean Black
 (Maiden Name) Scotland
 Her Birthplace Scotland
 Body to be Shipped to /
 Size and Style of Casket or Coffin 6/3 100 spec.
W.C. Dr. St. Gay End ply.
 Manufactured by The Best Chest Co.
 Interment at Lanama Va. Rose Hill Cemetery



Lot No. 1571
 Grave No. 1
 Section No. /

Casket or Coffin	\$ <u>1.50</u>
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault	
Burial Suit or Dress (State Kind)	<u>1.50</u>
Burial Slippers and Hose	<u>25</u>
Engraving Plate	
Embalming Body (with Fluid)	<u>25.00</u>
Dressing Body, \$	<u>2.25</u>
Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	
Cardles, \$	
Door Badge, \$	
Gloves, \$	
Hearse	<u>15.00</u>
Auto Limousines to Cemetery, @ \$	
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Acroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$	<u>15.00</u>
Rental of Plants, \$	
Other Decorations	
Outlay for Lot	<u>40</u>
Opening Grave or Vault	<u>8</u>
Lining Grave with Evergreen or Muslin	
Mattng, \$	
Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$	
Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
<u>Mark</u>	<u>1.00</u>
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Walter Edgington, Joshua Watson, Colman Briggs, Chas. DeGier, Rev. Seaborn
 Names of Lodges Fox and Quail
 SINGERS Maggie Cullin, Frances Jones
 Lodge Insurance, \$ / Other Insurance, \$ /
 General Director A. C. White
 Names of Near Relatives Mary E. Smith

RECORD OF FUNERAL

Total No. 1222 Yearly No. 70 Date Dec. 17 1925
 Name of Deceased John Hartschen White German
 (What Race) (Where Born)
 Husband... } Matilda Hartschen Older
 Wife...Widow }
 Son...Daughter }

Charge to E.T.
 Address
 Order Given by Wm. Hartschen
 How Secured
 Date of Funeral Dec. 17th 1925
 Residence Lanoni, Ia. 518 W. Main
 Place of Death Des Moines
 Funeral Services at Lanoni, South Church
 Time of Funeral Service 2.30 PM
 Clergyman J. Bell W.E. Pratt
 Certifying Physician Dr. B.A. Kelly
 His Residence Lanoni, Ia.
 Number of Burial Certificate
 Cause of Death Bright's disease and Paralysis
 (Primary) (Secondary)
 Date of Death Dec. 15, 1925 6 am.
 Occupation of the Deceased Ret. farmer
 Single or Married Married Religion C.P.S.
 Date of Birth May 14 1873
 Age 52 Years 7 Months 11 Days
 Name of Father
 His Birthplace
 Name of Mother
 (Maiden Name)
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin #200 Special
7 C. Shil. - 1 qt. silver trim.
 Manufactured by S.A. Coffin Co.
 Interment at Lanoni, Ia. Rose Hill Cemetery

Casket or Coffin	\$	190
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	110
Burial Suit or Dress	and <u>Underwear</u>	26.50
Burial Slippers and Hose		2.75
Engraving Plate		
Embalming Body (with	Fluid)	25.00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15
Auto Limousines to Cemetery	@ \$	
Autos to R. R. Station	@ \$	
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	9.50
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		10
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page		or below

Diagram of Lot or Vault
SEXTON J.A. Bell
 Lot No. 536
 Grave No. 243
 Section No.

To Funeral Charges	Total, \$					By Cash	\$	

Names of Pall Bearers Ed. Marshall, Maurin Franklin, Mark Sandberg, Sam. Rieker, Mark Bell, Leo Moran
 Names of Lodges SINGERS - Mabel Carls, Truman, Jarvis - Roy, Church - Leo, Lutz
 Lodge Insurance, \$ Other Insurance, \$
 Funeral Director A. O. White

RECORD OF FUNERAL

Total No. 1223 Yearly No. 41 Date Dec. 18 1925

Name of Deceased Sept. J. Williams Carman from St. Louis, Mo.
Husband of E. Elizabeth Ellen Williams (What Race) (Where Born)
Wife of E. Elizabeth Ellen Williams
Son of E. Elizabeth Ellen Williams

Charge to Estate
Address Elizabeth Ellen Williams
Order Given by Elizabeth Ellen Williams
How Secured December 18, 1925
Date of Funeral December 18, 1925
Residence Lanoni, Ia. Liberty Home
Place of Death Liberty Home
Funeral Services at Liberty Home
Time of Funeral Service 2:30 P.M.
Clergyman W. W. C. Brad
Certifying Physician Dr. Ruth A. Green
His Residence Lanoni, Ia.

Number of Burial Certificate 1
Cause of Death Aluminum Phosphate Anemia
(Primary) (Secondary)
Date of Death Dec. 16, 1925
Occupation of the Deceased Ret. Coal Miner

Single or Married Married Religion M. E.
Date of Birth Nov. 26, 1852
Age 73 Years 0 Months 20 Days
Name of Father Thomas Williams
His Birthplace Wales
Name of Mother E. Elizabeth James
(Maiden Name)
Her Birthplace Wales
Body to be Shipped to _____

Size and Style of Casket or Coffin qs #100
sp. Oak st. br. 1/2 c.
Manufactured by The Book Casket Co.
Interment at Lanoni, Ia. Rose Hill Cemetery

Diagram of Lot or Vault
Sex Male = aa Bell
Lot No. 965
Grave No. 4
Section No. _____

Casket or Coffin	\$ 150
Metallic Lining	
Outside Box	(State Kind)
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	3 50
Engraving Plate	
Embalming Body (with Fluid)	250 0
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	15
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$ 12
Other Decorations	
Outlay for Lot	20
Opening Grave or Vault	10
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page _____ or below _____	

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Frank F. White, Roy Deery, Jr., Frank J. Williams, Sam Beck, Jim Stanley
Names of Lodges SING, Lydia Wright, Mattie Lunsford, Roy Deery, A. O. White
Lodge Insurance, \$ _____ Other Insurance, \$ _____
Funeral Director A. O. White
Names of Near Relatives _____

RECORD OF FUNERAL

Total No. *1224* Yearly No. *1*

Date. *Jan. 27* 19*26*

Name of Deceased *Russell Plinn* (What Race) *White* (Where Born) *.....*

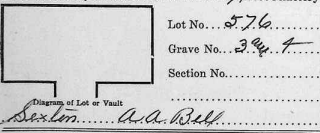
Husband...
Wife...Widow
Son...Daughter of

Charge to *Santa Home*
Address *.....*
Order Given by *Alice Vance*
How Secured *.....*
Date of Funeral *January 29 1926*
Residence *Lamar, La. Santa Home*
Place of Death *St. Home*
Funeral Services at *Santa Home*
Time of Funeral Service *2:30 P.M.*
Clergyman *W. J. Walker, P. J. Stearns*
Certifying Physician *A. H. Robinson*
His Residence *Lamar, La.*

Number of Burial Certificate *.....*
Cause of Death *Pneumonia*
(Primary) (Secondary)
Date of Death *January 27 1926 P.M.*
Occupation of the Deceased *.....*

Single or Married *.....* Religion *L.D.S.*
Date of Birth *Sept 19 1841*
Age *83* Years *3* Months *8* Days
Name of Father *.....*
His Birthplace *.....*
Name of Mother *.....*
(Maiden Name)

Her Birthplace *.....*
Body to be Shipped to *.....*
Size and Style of Casket or Coffin *13-7-13-0*
Black Wz. FC
Manufactured by *.....*
Interment at *Lamar, La. Rose Hill Cemetery*



Casket or Coffin.....	\$	85	00
Metallic Lining.....			
(State Kind)			
Outside Box.....			
(State Kind)			
Grave Vault.....			
(State Kind)			
Burial Suit or Dress.....			
Burial Slippers and Hose.....			
Engraving Plate.....			
Embalming Body (with <i>Chemical</i> Fluid).....			20
Dressing Body, \$..... Shaving, \$.....			
Hair Dressing.....			
Use of Folding Chairs.....			
“ “ Candelabrum, \$..... Candles, \$.....			
Door Badge, \$..... Gloves, \$.....			
Hearse.....		15	00
Auto Limousines to Cemetery, @ \$.....			
Autos to R. R. Station, @ \$.....			
Other Vehicle Service.....			
Aeroplane Service.....			
Death Notices in..... Newspapers.....			
(Names of Newspapers)			
Flowers, \$..... Rental of Plants, \$.....			
Other Decorations.....			
Outlay for Lot.....			
Opening Grave or Vault.....			00
Lining Grave with Evergreen or Muslin.....			
Matting, \$..... Tent Rental, \$.....			
Use of Lowering Device.....			
Rental of Vault.....			
Outlay for Shipping Charges.....			
Removal Charges.....			
Incineration.....			
Personal Services.....			
Singers.....			
Church Charges, \$..... Minister, \$.....			
Telegrams and Telephone Charges.....			
Pal Bearer Service.....			
Total Footing of Bill.....	\$		
By Amount Paid in Advance.....	\$		
Balance.....	\$		
Entered into Ledger, page..... or below			

To Funeral Charges.....	Total, \$	By Cash.....	\$
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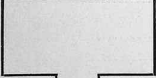
Names of Pall Bearers *P. J. Stearns, J. W. Parks, Marion Jordan, H. G. Brown, Wm. Drake, A. Otis White*
 Names of Lodges *SINCEPERS - Frances Jordan, Alvin Welden, Mattie Stearns, C. G. Jordan*
 Lodge Insurance \$..... Other Insurance, \$.....
 Names of Near Relatives *A. Otis White*

RECORD OF FUNERAL

Total No. 1225 Yearly No. 2 Date Feb 3rd 1926
 Name of Deceased Emma J. Carmichael White (What Race) Dearborn Co. Ind. (Where Born)

Husband--
 Wife--Widow
 Son--Daughter of }
 Charge to Estate
 Address
 Order Given by Estella B. McCullough
 How Secured A. Harmonson, Lubecite
 Date of Funeral Feb 3rd 1926
 Residence 127 Cherry, Lamoni, Ia.
 Place of Death St. James - Lamoni, Ia.
 Funeral Services Lamoni, Santa Church
 Time of Funeral Service 2:30 P.M.
 Clergyman J. A. Thomasley
 Certifying Physician W. H. Peterson
 His Residence Lamoni, Ia.
 Number of Burial Certificate
 Cause of Death Coronary Myocarditis
 (Primary) (Secondary)
 Date of Death Feb. 11th 1926 P.M.
 Occupation of the Deceased none
 Single or Married Single Religion L.O.S.
 Date of Birth Aug. 28th 1854
 Age 69 Years 5 Months 3 Days
 Name of Father Wm. Carmichael
 His Birthplace Ia.
 Name of Mother Susanna Cheppelton
 (Maiden Name)
 Her Birthplace Ia.
 Body to be Shipped to
 Size and Style of Casket or Coffin 4/3 190
1/2 c. r. a. p.
 Manufactured by A. Root, Cashier Co.
 Interment at Lamoni - Rose Hill Cemetery

Casket or Coffin	\$ 2500
Metallie Lining	(State Kind)
Outside Box	(State Kind)
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	2500
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	1500
Auto Limousines to Cemetery, @ \$	250
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in	Newspapers
	(Names of Newspapers)
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	500
Opening Grave or Vault	800
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

Diagram of Lot or Vault

 Lot No. 560
 Grave No. 347
 Section No.
Ad. Bell Sexton

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers John Smiley, Joe Lawrence, Joe Ludwig, John Lane, A. Harmonson, E. Harmonson
 Names of Lodges SINGER, Maggie Ludwig, m. 249
 Lodge Insurance, \$ Other Insurance, \$
 Names of Insurance Companies St. Paul
 Funeral Director

RECORD OF FUNERAL

Total No. 1236 Yearly No. 3 Date Feb. 12th 1926

Name of Deceased Sarah Jane Bailey White (What Race) Quincy, Mich
(Where Born)
 Husband--
 Wife--Widow of Samuel H. Bailey (Deceased)
 Son--Daughter of

Charge to Estate
 Address 707 E. S. Lammont Dr.
 Order Given by Geo. Kelley
 How Secured Feb. 12th 1926
 Date of Funeral Feb. 12th 1926
 Residence 707 E. S. Lammont Dr.
 Place of Death Residence, Geo. Kelley
 Funeral Services at Lammont L.D.S. Church
 Time of Funeral Service 3:00 P.M.
 Clergyman A. Hunsicker, A. Hammett
 Certifying Physician Dr. Bertha G. Fisher
 His Residence Lammont Dr.
 Number of Burial Certificate
 Cause of Death Intestinal Flu
(Primary) (Secondary)
 Date of Death Feb. 11 1926
 Occupation of the Deceased at Home
 Single or Married Widow, Religion L.D.S.
 Date of Birth Aug. 27 1841
 Age 84 Years 5 Months 14 Days
 Name of Father John C. Bailey
 His Birthplace Canada
 Name of Mother Phoebe Brooks
(Maiden Name)
 Her Birthplace Canada
 Body to be Shipped to 3. 700 Special
Blue steel or leaf Gray Int.
 Size and Style of Casket or Coffin
 Manufactured by Wood Casket Co
 Interment at Lammont Rose Hill Cemetery

Casket or Coffin.....	\$ 165.00
Metallie Lining.....	(State Kind)
Outside Box.....	(State Kind)
Grave Vault.....	(State Kind)
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with Fluid).....	
Dressing Body, \$.....	Shaving, \$.....
Hair Dressing.....	
Use of Folding Chairs.....	
" " Candelabrum, \$.....	Candles, \$.....
Door Badge, \$.....	Gloves, \$.....
Hearse.....	150.00
Auto Limousines to Cemetery..@ \$.....	
Autos to R. R. Station.....@ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in.....	
(Names of Newspapers)	
Flowers, \$.....	Rental of Plants, \$.....
Other Decorations.....	650
Outlay for Lot.....	
Opening Grave or Vault.....	80.00
Lining Grave with Evergreen or Muslin.....	
Matting, \$.....	Tent Rental, \$.....
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$.....	Minister, \$.....
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill..... \$	
By Amount Paid in Advance..... \$	
Balance..... \$	
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Lot No. 756
 Grave No. 2
 Section No.

Diagram of Lot or Vault	ad Well Sexto
To Funeral Charges..... Total, \$	By Cash..... \$
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Names of Pall Bearers Arvid Anderson, W. W. Blair, Joe La Tourette, R. J. Stephenson, R. J. Hollaway
 Names of Lodges Samuel, Grace Lane, Helen Anthony, W. H. Gold, Mrs. Langan
 Lodge Insurance, \$..... Other Insurance, \$.....
 General Director A. W. White

RECORD OF FUNERAL

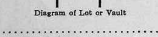
Total No. 1227 Yearly No. 4 Date Feb. 18, 1926
 Name of Deceased Wm. Marion Hark White (What Race) Nelson Co., Kentucky (Where Born)
 Husband of Mary Ellen Hark
 Wife--Widow
 Son--Daughter of

Charge to C. E. Hark
 Address Lamoni, Iowa
 Order Given by C. E. Hark
 How Secured
 Date of Funeral February 18, 1926
 Residence Lamoni, Iowa
 Place of Death Lamoni, Iowa
 Funeral Services at C. E. Hark's Res.
 Time of Funeral Service 2:30 P.M.
 Clergyman S. J. Bell; Walter Gray & Co.
 Certifying Physician Dr. S. J. Bell
 His Residence Lamoni, Iowa
 Number of Burial Certificate
 Cause of Death Paralytic Mental deficiency
 (Primary) (Secondary)
 Date of Death Feb. 17, 1926
 Occupation of the Deceased General Farmer
 Single or Married Married Religion S. O. S.
 Date of Birth July 29, 1850
 Age 76 Years 6 Months 18 Days
 Name of Father John Appenberry
 His Birthplace Nelson Co., Kentucky
 Name of Mother Wm. Jane Goune
 (Maiden Name)
 Her Birthplace Nelson Co., Kentucky
 Body to be Shipped to

Casket or Coffin	#165 N.	\$ 100.00
Metallie Lining		
Outside Box	(State Kind)	xx
Grave Vault	(State Kind)	
Burial Suit or Dress		25.00
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		25.00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		xx
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15.00
Auto Limousines to Cemetery, @ \$		
Autos to R. R. Station, @ \$		2.50
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	5.50
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		9.50
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		n.e.
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pal Bearer Service		
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Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
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Size and Style of Casket or Coffin #165 N.
 Manufactured by Hill
 Interment at Rose Hill Cemetery

Lot No. 409
 Grave No. 4
 Section No.



To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Neble Lowry, Mark Bell, Dave Dickelough, Frank Jones, Mike Savage, Ted Springs
 Names of Lodges

Lodge Insurance, \$
 Other Insurance \$
 Names of Near Relatives Mr. & Mrs. C. E. Hark, Mr. & Mrs. Sam Hark, Mr. & Mrs. Joe Hark

RECORD OF FUNERAL

Total No. 1202..... Yearly No. 5..... Date April 23, 1926..... 1926
 Name of Deceased Elizabeth Hannah Hauff..... (What Race) White..... (Where Born) Northampton, Mass.
 Husband--
 Wife--Widow
 Son--Daughter of } Widow

Charge to.....
 Address.....
 Order Given by Wilbur Hauff
 How Secured.....
 Date of Funeral April 23, 1926
 Residence Central Bldg., Hummer Co., Mo.
 Place of Death.....
 Funeral Services at W. Wendle
 Time of Funeral Service 2:00 P.M.
 Clergyman Brown
 Certifying Physician J. J. Wittingham
 His Residence.....
 Number of Burial Certificate.....
 Cause of Death Lobes Pneumonia
 (Primary) (Secondary)
 Date of Death Feb. 21, 1926
 Occupation of the Deceased Lab. Work
 Single or Married Widow Religion.....
 Date of Birth May 24, 1846
 Age 79 Years 8 Months 27 Days
 Name of Father Joseph Thompson
 His Birthplace.....
 Name of Mother Elizabeth Kelly and
 (Maiden Name)
 Her Birthplace Ireland
 Body to be Shipped to.....
 Size and Style of Casket or Coffin #910 4th St.
 Manufactured by.....
 Interment at Juliana, Mo. Cemetery

Casket or Coffin.....	\$	200.00
Metallic Lining..... (State Kind)		
Outside Box..... (State Kind)		X
Grave Vault..... (State Kind)		
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		10.00
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
" Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		10.00
Auto Limousine to Cemetery @ \$.....		X
Autos to R. R. Station @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		
(Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		8.00
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	
By Amount Paid in Advance.....	\$	
Balance.....	\$	
Entered into Ledger, page..... or below.....		

Diagram of Lot or Vault

Lot No.....
 Grave No.....
 Section No.....

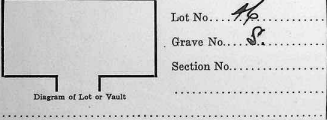
To Funeral Charges..... Total, \$	By Cash..... \$
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Names of Pall Bearers Chas. Hoff, John K. Kelly, Ernest Kelly, Harold Stanger
 Names of Lodges Bankers, Grand, Central, and St. John
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1229 Yearly No. 5 Date March 2, 1926
 Name of Deceased Sarah Jane Bergman White (What Race) White (Where Born) _____
 Husband _____ (Where Born) _____
 Wife---Widow White
 Son---Daughter of _____

Charge to _____
 Address _____
 Order Given by J. W. Carpenter
 How Secured _____
 Date of Funeral March 2, 1926
 Residence Andover, Mo.
 Place of Death Independence, Mo.
 Funeral Services at Methodist (Andover)
 Time of Funeral Service 3 P.M.
 Clergyman L. J. Kelley; Mrs. Dan, Ash
 Certifying Physician John R. Allen
 His Residence Independence, Mo.
 Number of Burial Certificate _____
 Cause of Death Caner of stomach
 (Primary) (Secondary)
 Date of Death February 26, 1926
 Occupation of the Deceased ft. home
 Single or Married Married; Religion D.S.
 Date of Birth _____
 Age 63 Years _____ Months _____ Days _____
 Name of Father _____
 His Birthplace _____
 Name of Mother _____
 (Maiden Name)
 Her Birthplace _____
 Body to be Shipped to Shipped from Independence
by C. W. Cannon & Son
 Size and Style of Casket or Coffin _____
 Manufactured by _____
 Interment at Samuel, Ia., New Hill Cemetery



Lot No. 46
 Grave No. 8
 Section No. _____

Casket or Coffin		
Metallic Lining		
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with _____ Fluid)		
Dressing Body, \$ _____ Shaving, \$ _____		
Hair Dressing		
Use of Folding Chairs		
“ “ Candelabrum, \$ _____ Candles, \$ _____		
Door Badge, \$ _____ Gloves, \$ _____		
Hearse		<u>15.00</u>
Auto Limousines to Cemetery... @ \$ _____		
Autos to R. R. Station... @ \$ _____		
Other Vehicle Service		
Aeroplane Service		
Death Notices in _____ Newspapers		
(Names of Newspapers)		
Flowers, \$ _____ Rental of Plants, \$ _____		
Other Decorations		
Outlay for Lot		<u>5.00</u>
Opening Grave or Vault		<u>2.00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$ _____ Tent Rental, \$ _____		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$ _____ Minister, \$ _____		
Telegrams and Telephone Charges		
Pal Bearer Service		
Total Footing of Bill		\$ _____
By Amount Paid in Advance		\$ _____
Balance		\$ _____
Entered into Ledger, page _____ or below _____		

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Len Hill, Ed Standy, Ed Standy, Jude Priel, Dr. Lang, Trip
 Names of Lodges _____
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1230 Yearly No. 7 Date March 13, 1926
 Name of Deceased Mattilda Emma Patrick White (What Race) Mouroe Co., Iowa (Where Born)
 Husband--
 Wife--Widow
 Son--Daughter of J. M. Patrick

Charge to J. B. Patrick
 Address
 Order Given by M. B. Patrick
 How Secured
 Date of Funeral March 12, 1926
 Residence 607 So. State St., Ames, Iowa
 Place of Death Residence
 Funeral Services at Mr. Rein Sound
 Time of Funeral Service 2 P.M.
 Clergyman
 Certifying Physician J. M. Nicks
 His Residence Ames, Iowa
 Number of Burial Certificate
 Cause of Death Apoplexy (Primary) (Secondary)
 Date of Death March 10, 1926
 Occupation of the Deceased Ap. Home
 Single or Married Married Religion
 Date of Birth Nov. 5, 1860
 Age... 65 Years... 4 Months... 5 Days
 Name of Father Jamie Rogers
 His Birthplace Illinois
 Name of Mother Nabeba Miller (Maiden Name)
 Her Birthplace Indiana
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by Patrick Casket
 Interment at City Park, Ames, Iowa Cemetery

Lot No. _____
 Grave No. _____
 Section No. _____
 Diagram of Lot or Vault

Casket or Coffin.....	\$ 16.50
Metallic Lining.....	(State Kind)
Outside Box.....	(State Kind) <u>xx</u>
Grave Vault.....	(State Kind) <u>110.00</u>
Burial Suit or Dress.....	<u>32.00</u>
Burial Slippers and Hose.....	<u>4.00</u>
Engraving Plate.....	<u>2.50</u>
Embalming Body (with _____ Fluid)	
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
" " Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	<u>15.00</u>
Auto Limousines to Cemetery. @ \$.....	<u>20.00</u>
Autos to R. R. Station. @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
(Name of Newspapers)	
Flowers, \$..... Rental of Plants, \$.....	<u>12.00</u>
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	<u>12.00</u>
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	<u>1X</u>
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	<u>6.0</u>
Pall Bearer Service.....	
<hr/>	
Total Footing of Bill.....	\$
By Amount Paid in Advance.....	\$
Balance.....	\$
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To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Delbert Burkman, O. G. Buchanan, Geo. Berger
 Names of Lodges
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1231 Yearly No. 8 Date March 13, 1926
 Name of Deceased Isaac Thomas Henderson (What Race) White (Where Born) Maion Co., Ill.
 Husband ---
 Wife --- Widow
 Son --- Daughter of Child

Charge to Santo Home
 Address camp, Iowa
 Order Given by Wm. P. Dancer
 How Secured
 Date of Funeral March 13, 1926
 Residence Santo Home, Ramoni, Iowa
 Place of Death Residence
 Funeral Services at Residence
 Time of Funeral Service 3:30 P.M.
 Clergyman D. J. Sell
 Certifying Physician D. H. Peterson
 His Residence Ramoni, Iowa

Number of Burial Certificates
 Cause of Death Senility (Primary) (Secondary)
 Date of Death March 11, 1926
 Occupation of the Deceased

Single or Married Married Religion P.O.S.
 Date of Birth April 9, 1848
 Age 77 Years 11 Months 2 Days
 Name of Father
 His Birthplace
 Name of Mother (Maiden Name)

Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by Robt. Hill
 Interment at Robt. Hill Cemetery

Diagram of Lot or Vault
 Lot No. 564
 Grave No. 4
 Section No.

Casket or Coffin.....	\$ <u>55.00</u>
Metallic Lining.....	(State Kind)
Outside Box.....	(State Kind) <u>XX</u>
Grave Vault.....	(State Kind)
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	<u>3.00</u>
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
“ “ Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	<u>5.00</u>
Auto Limousines to Cemetery @ \$.....	
Autos to R. R. Station @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
(Name of Newspaper)	
Flowers, \$..... Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	<u>8.00</u>
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill.....	\$
By Amount Paid in Advance.....	\$
Balance.....	\$
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To Funeral Charges..... Total, \$	By Cash..... \$
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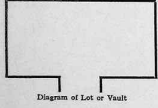
Names of Pall Bearers Oliver Hayer, John Midgarden, A. J. Livingston
 Names of Lodges or City, etc.
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives

RECORD OF FUNERAL

Total No. *1232* Yearly No. *9* Date *March 15, 1926*

Name of Deceased *Mrs. Maudie C. Brewley* (What Race) *White* (Where Born) *N.K.*
Husband...
Wife...Widow
Son...Daughter of *May Jim Brewley*

Charge to.....
Address.....
Order Given by *Dr. C. Brewley*
How Secured.....
Date of Funeral *March 15, 1926*
Residence *Yester, Mo.*
Place of Death *Yester, Mo.*
Funeral Services at *Mo. Church Linn.*
Time of Funeral Service *2:30 P.M.*
Clergyman *Rev. J. W. Smith*
Certifying Physician *Dr. A. H. White*
His Residence *Yester, Mo.*
Number of Burial Certificate.....
Cause of Death *Gangrene*
Date of Death *March 13, 1926*
Occupation of the Deceased.....
Single or Married *Married* Religion.....
Date of Birth.....
Age *76* Years..... Months..... Days.....
Name of Father.....
His Birthplace.....
Name of Mother.....
Her Birthplace.....
Body Shipped to *Yester, Mo.*
R. W. M. Council, No. 1005
Size and Style of Casket or Coffin.....
Manufactured by.....
Interment at *Winters Co. Ia. - Linn Co. Cemetery*



Lot No.....
Grave No.....
Section No.....

Casket or Coffin	\$.....
Metallic Lining	(State Kind) \$.....
Outside Box	(State Kind) \$.....
Grave Vault	(State Kind) \$.....
Burial Suit or Dress	\$.....
Burial Slippers and Hose	\$.....
Engraving Plate	\$.....
Embalming Body (with Fluid)	\$.....
Dressing Body	\$.....
Shaving	\$.....
Hair Dressing	\$.....
Use of Folding Chairs	\$.....
" " Candelabrum	\$.....
Candles	\$.....
Door Badge	\$.....
Gloves	\$.....
Hearse	<i>15.00</i>
Auto Limousines to Cemetery	@ \$.....
Autos to R. R. Station	@ \$.....
Other Vehicle Service	\$.....
Aeroplane Service	\$.....
Death Notices in Newspapers	(Names of Newspapers) \$.....
Flowers	\$.....
Rental of Plants	\$.....
Other Decorations	\$.....
Outlay for Lot	\$.....
Opening Grave or Vault	\$.....
Lining Grave with Evergreen or Muslin	\$.....
Matting	\$.....
Tent Rental	\$.....
Use of Lowering Device	\$.....
Rental of Vault	\$.....
Outlay for Shipping Charges	\$.....
Removal Charges	\$.....
Incineration	\$.....
Personal Services	\$.....
Singers	\$.....
Church Charges	\$.....
Minister	\$.....
Telegrams and Telephone Charges	\$.....
Pall Bearer Service	\$.....
Total Footing of Bill	\$.....
By Amount Paid in Advance	\$.....
Balance	\$.....
Entered into Ledger, page.....	or below.....

To Funeral Charges	Total	By Cash
	\$.....	\$.....

Names of Pall Bearers *H. H. Scott, Lewis Brasco, James Lyle, Tom Allen, Chas. Huch*

Names of Lodges.....
Lodge Insurance, \$..... Other Insurance, \$.....

Names of Near Relatives.....

RECORD OF FUNERAL

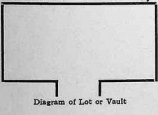
Total No. 1233 Yearly No. 10 Date March 18, 1926

Name of Deceased Jula Grace Adkins White (What Race) Lamoni Iowa (Where Born)

Husband---Wife
Wife---Widow
Son---Daughter of } Jewis Adkins

Charge to _____
 Address _____
 Order Given by Martha Young
 How Secured _____
 Date of Funeral March 18, 1926
 Residence New Castle, Wyoming
 Place of Death N.Y.
 Funeral Services at W. S. Shunk - Lamoni
 Time of Funeral Service 2:30 P.M.
 Clergyman W. C. Hall; L. J. Holway, Dech.
 Certifying Physician R. E. Kelly
 His Residence New Castle, N.Y.
 Number of Burial Certificate _____
 Cause of Death Aut. Tuberculosis
 Date of Death March 13, 1926
 Occupation of the Deceased Hardware
 Single or Married Married Religion W. S.
 Date of Birth March 10, 1887
 Age 39 Years 0 Months 3 Days
 Name of Father Thomas Young
 His Birthplace Ohio
 Name of Mother Dennis
 Her Birthplace Mass.
 Body to be Shipped to New Castle, N.Y.
 Size and Style of Casket or Coffin _____
 Manufactured by _____
 Interment at W. S. Hill - Lamoni Cemetery

Lot No. 960
 Grave No. 7
 Section No. _____



Casket or Coffin.....	\$	
Metallic Lining.....		
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....	(State Kind)	
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse <u>4. P. P. Service</u>		25.00
Auto Limousines to Cemetery..@ \$.....		3.50
Autos to R. R. Station.....@ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		
(Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations.....		
Outlay for Lot.....		20.00
Opening Grave or Vault.....		00.00
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	
By Amount Paid in Advance.....	\$	
Balance.....	\$	
Entered into Ledger, page..... or below.....		

To Funeral Charges..... Total, \$		By Cash..... \$	
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Names of Pall Bearers Ed Smith, Rep. Brown, Walter Taylor, Joe Hancock, Ed Linger, A. M. Field

Names of Lodges Singers, Lena Hall, James Norris

Lodge Insurance, \$..... Other Insurance, \$.....

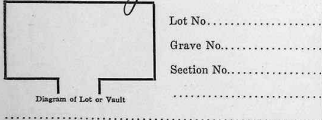
Names of Near Relatives Martha Young

RECORD OF FUNERAL

Total No. 1234 Yearly No. 11 Date March 21, 1926 1926
 Name of Deceased Harry Arizon Wickstrough White Little Sun, Iowa.
 (What Race) (Where Born)
 Husband...
 Wife--Widow } Ella Wickstrough
 Son--Daughter of }

Charge to.....
 Address.....
 Order Given by W.M. Wickstrough
 How Secured.....
 Date of Funeral March 21, 1926
 Residence Remond, Iowa
 Place of Death Remond
 Funeral Services at W.M. Wickstrough Res.
 Time of Funeral Service 10:00 P.M.
 Clergyman.....
 Certifying Physician C. H. Peterson
 His Residence Remond, Iowa
 Number of Burial Certificate.....
 Cause of Death Arteriosclerosis & Intoxication
 (Primary) (Secondary)
 Date of Death March 19, 1926
 Occupation of the Deceased At Home
 Single or Married Widow Religion R.O.S.
 Date of Birth Oct. 30, 1850
 Age 75 Years 7 Months 19 Days
 Name of Father Amos Chase
 His Birthplace Ohio
 Name of Mother Sarah Sibley
 (By Name)
 Her Birthplace Jerome
 Body to be Shipped to Puegal, Iowa
 Size and Style of Casket or Coffin # 1043
 Manufactured by.....
 Interment at Puegal Iowa Cemetery

Casket or Coffin.....	\$ <u>185.00</u>
Metallic Lining.....	
Outside Box.....	<u>Shipping Case</u> (State Kind) <u>xx</u>
Grave Vault.....	(State Kind)
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	<u>25.00</u>
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
" " Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	<u>5.00</u>
Auto Limousines to Cemetery @ \$.....	
Autos to R. R. Station @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers	
(Names of Newspapers)	
Flowers, \$..... Rental of Plants, \$.....	<u>10.00</u>
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill.....	\$.....
By Amount Paid in Advance.....	\$.....
Balance.....	\$.....
Entered into Ledger, page..... or below.....	



Lot No.....
 Grave No.....
 Section No.....

To Funeral Charges.....	Total, \$	By Cash.....	\$

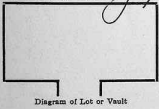
Names of Pall Bearers Earl Quinn, Red Good, Roy Wray, John Lane, Art Lane, Carl Ballantyne
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1235 Yearly No. 12 Date March 23 1926
 Name of Deceased. Rachel Anna Marcinkowski - Wife - Granddaughter, Mo.
 Husband---
 Wife---Widow
 Son---Daughter of } Max Marcinkowski
(What Race) (Where Born)

Charge to Samania, Iowa
 Address Samania, Iowa
 Order Given by Max Marcinkowski
 How Secured
 Date of Funeral March 23, 1926
 Residence Green Amazon, Ia
 Place of Death Midvale
 Funeral Services at "
 Time of Funeral Service 2:30 P.M.
 Clergyman Rev. T. S. J. Galloway, A.S.C.
 Certifying Physician O. H. Betters
 His Residence Samania, Iowa
 Number of Burial Certificate
 Cause of Death Leucemia Atroica
(Primary) (Secondary)
 Date of Death March 22, 1926
 Occupation of the Deceased at home
 Single or Married Married Religion
 Date of Birth Feb. 19, 1861
 Age 65 Years 1 Months 1 Days
 Name of Father Benjamin Wilcoxon
 His Birthplace Ill
 Name of Mother Ernesta Paterson
(Maiden Name)
 Her Birthplace Shively Co., Mo.
 Body to be Shipped to St. Joseph, Mo.
 Size and Style of Casket or Coffin
#152 Champagne Glass
 Manufactured by J. W. Pugh
 Interment at St. Joseph, Mo. Cemetery

Casket or Coffin <u>#152 Champagne Glass</u>	\$	200.00
Metallic Lining		
Outside Box <u>Shipping Case</u>		1.75
Grave Vault		
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		25.00
Dressing Body, \$ Shaving, \$		
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$ Candles, \$		
Door Badge, \$ Gloves, \$		
Hearse		15.00
Auto Limousine to Cemetery, @ \$		
Autos to R. R. Station, @ \$		XX
Other Vehicle Service		
Aeroplane Service		
Death Notices in Newspapers		
<small>(Names of Newspapers)</small>		
Flowers, \$ Rental of Plants, \$		
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$ Tent Rental, \$		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$ Minister, \$		
Telegrams and Telephone Charges		
Pall Bearer Service		
Lot No.		
Grave No.		
Section No.		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page		or below



To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers O. Vicky, Jack Quorby, Chas. Hill, Rob. Lee, Dave Kenny, Jim Nicholas
 Names of Judges Ma. & Mrs. J. J. Gentry, Helen Anthony, E. W. Wilcox
 Singers
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1236. Yearly No. 13. Date March 24, 1926. Name of Deceased Oba Marion Hayes, White, Pleasanton, Iowa.

Name of Deceased Oba Marion Hayes. Husband Frank H. Hayes. Address Pleasanton, Iowa. Date of Funeral March 24, 1926. Residence Pleasanton, Iowa. Time of Funeral Service 2:30 P.M. Cause of Death Bright's Disease.

Diagram of Lot or Vault. Lot No. 140. Grave No. 243. Section No. [blank].

Table of funeral services including Casket or Coffin, Burial Suit or Dress, Engraving Plate, and Total Footing of Bill.

Table with columns for To Funeral Charges, Total, and By Cash.

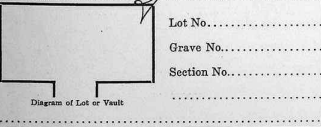
Names of Pall Bearers: Ed Hayes, Lloyd Rowland, Joe Hayes, Charles Hayes, Herman Hayes. Names of Lodges: [blank].

RECORD OF FUNERAL

Total No. 1237 Yearly No. 14 Date March 27, 1926
 Name of Deceased Theodore C. Crevling White (What Race) Penn. (Where Born)
 Husband—Wife—Widow—Son—Daughter of Della Lantry Crevling

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral
 Residence Jamoni, Iowa
 Place of Death La. C. Co. Res. New York City
 Funeral Services at
 Time of Funeral Service
 Clergyman
 Certifying Physician R. A. Latta
 His Residence Jamoni, Iowa
 Number of Burial Certificate
 Cause of Death Water Pneumonia, influenza
 (Primary) (Secondary)
 Date of Death March 26, 1926
 Occupation of the Deceased Jamoni
 Single or Married Married Religion
 Date of Birth Jan. 27, 1852
 Age 74 Years 2 Months 29 Days
 Name of Father Lemuel Crevling
 His Birthplace
 Name of Mother Eliza Shupp (Maiden Name) Iowa
 Her Birthplace
 Body to be Shipped By Lewis D. Cook
Cook Crevling Co., Mt. Airy, N.C.
 Size and Style of Casket or Coffin \$100.00
 Manufactured by Not
Mt. Airy Cemetery

Casket or Coffin	#100.00	\$200.00
Metallic Lining		
Outside Box	(State Kind)	xx
Grave Vault	(State Kind)	
Burial Suit or Dress	(State Kind)	30.00
Burial Slippers and Hose		25
Engraving Plate		
Embalming Body (with..... Fluid)		25.00
Dressing Body, \$.....	Shaving, \$.....	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$.....	Candles, \$.....	
Door Badge, \$.....	Gloves, \$.....	
Hearse		15.00
Auto Limousines to Cemetery.. @ \$.....		
Autos to R. R. Station .. @ \$.....		
Other Vehicle Service		
Aeroplane Service		
Death Notices in..... Newspapers		
(Names of Newspapers)		
Flowers, \$.....	Rental of Plants, \$.....	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$.....	Tent Rental, \$.....	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$.....
By Amount Paid in Advance		\$.....
Balance		\$.....
Entered into Ledger, page.....		or below.....



To Funeral Charges	Total, \$	By Cash	\$
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Names of Pall Bearers N. S. Scott, Ches. Gyle, Geo. Brown, Levi Brucke, Sam. Mann, Sam. Allen
 Names of Lodges
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives

Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

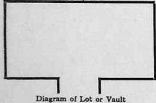
Total No. *1238* Yearly No. *15* Date *April 7, 1926*

Name of Deceased *Anton S. Lyden* *White* *Brandvold, Norway*
Husband *A* *Bertha Lyden*
Wife *A*
Son *A* Daughter of *A*

Charge to.....
 Address *Lamoni*
 Order Given by.....
 How Secured.....
 Date of Funeral *April 7, 1926*
 Residence *725 1/2 Ave. A, S. Lamoni*
 Place of Death *Bertholme*
 Funeral Services at *L. O. S. Church*
 Time of Funeral Service *3:00 P.M.*
 Clergyman *W. C. Neal; J. H. Sawyer, Assst.*
 Certifying Physician *D. O. S. Jorg*
 His Residence *Lamoni, Iowa*
 Number of Burial Certificate.....
 Cause of Death *Stroke*
 Date of Death *April 7, 1926*
 Occupation of the Deceased *Retail Salesman*
 Single or Married *Married* Religion *L. O. S.*
 Date of Birth *Nov. 7, 1871*
 Age *54* Years *4* Months *27* Days
 Name of Father *Olaf Lyden*
 His Birthplace *L. O. S. Norway*
 Name of Mother *Anne Sater*
 Her Birthplace *Norway*
 Body to be Shipped to.....
 Size and Style of Casket or Coffin *#200 Spec. Stl.*
 Manufactured by *Rock*
 Interment at *Rock Hill* Cemetery

Casket or Coffin #200	\$ 200 00
Metallic Lining (State Kind)	
Outside Box (State Kind)	<i>XX</i>
Grave Vault (State Kind)	
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	<i>25 00</i>
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	<i>15 00</i>
Hearse	<i>5 00</i>
Auto Limousines to Cemetery 2 @ \$ 2.50	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers (Names of Newspapers)	
Flowers, \$ Rental of Plants, \$	<i>15 00</i>
Other Decorations	
Outlay for Lot	<i>40 00</i>
Opening Grave or Vault	<i>8 00</i>
Lining Grave with Evergreen or Muslin	
Mattng, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page or below	

Lot No. *1593*
 Grave No. *31*
 Section No.



To Funeral Charges	Total \$	By Cash	\$

Names of Pall Bearers *Olaf Lyden, J. H. Sawyer, W. C. Neal, J. H. Sawyer, W. C. Neal, J. H. Sawyer*
 Names of Judges *W. C. Neal, J. H. Sawyer*
 Names of Pall Bearer's *W. C. Neal, J. H. Sawyer, W. C. Neal, J. H. Sawyer, W. C. Neal, J. H. Sawyer*
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1239 Yearly No. 16 Date April 11, 1926
 Name of Deceased E. Ana Ruth Vanderflute, - White - Harrison Co., Mo.
 Husband --- (What Race)
 Wife --- Widow
 Son --- Daughter of } W. E. Vanderflute, Jr. (Where Born)

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral April 11, 1926
 Place of Funeral Boysen, W. P., Harrison Co., Mo.
 Place of Death
 Funeral Services at P. O. S. Church, Lamasai.
 Time of Funeral Service 3:30 P. M.
 Clergyman J. G. Bell, etc. Harrison Co., Mo.
 Certifying Physician J. A. Speer
 His Residence Lamasai, Iowa
 Number of Burial Certificate

Cause of Death Tubercle Bacil; Tuberculosis
 Date of Death April 10, 1926
 Occupation of the Deceased House wife
 Single or Married Married Religion

Date of Birth March 11, 1901
 Age 25 Years 0 Months 29 Days
 Name of Father Olis Mayhew
 His Birthplace
 Name of Mother Ellen Kinder
 (Maiden Name)

Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin #131
 Manufactured by Wm. Hill

Interment at Wm. Hill Cemetery

Lot No. 521
 Grave No. 2
 Section No.

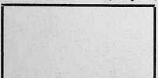


Diagram of Lot or Vault

Casket or Coffin	\$	85.00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress	(State Kind)	
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		25.00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15.00
Auto Limousines to Cemetery, @ \$		
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		8.00
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page		or below

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Wm. Perry, E. M. Perry, Nelson Brady, Ed. Hays, Liberator Steen
 Name of Lodges
 Lodges: Seas Mills, Nelson Anthony
 Lodge Insurance, \$ Other Insurance, \$

RECORD OF FUNERAL

Total No. 1240 Yearly No. 17

Date. April 19, 1926

Name of Deceased. Mahala S. Garland;
 Husband... Arch. Garland, Des.
 Wife... Arch. Garland, Des.
 Son... Arch. Garland, Des.
 Daughter of

Race: White (What Race)
 Where Born: Kenya Co., Ill.

Charge to... Garland, Des.

Address... Garland, Des.

Order Given by... Mrs. Geo. Smock

How Secured... Garland, Des.

Date of Funeral... April 14, 1926

Residence... Garland, Des.

Place of Death... Des.

Funeral Services at... Garland, Des.

Time of Funeral Service... 1:30 P.M.

Clergyman... E. H. Hays; J. B. Schreiner, Des.

Certifying Physician... A. O. H. Peterson

His Residence... Garland, Des.

Number of Burial Certificate... Garland, Des.

Cause of Death... Carcinoma Stomach

Date of Death... April 11, 1926

Occupation of the Deceased... Up. Km.

Single or Married... Married Religion... A. W. S.

Date of Birth... Sept. 2, 1855

Age... 70 Years... 7 Months... 3 Days

Name of Father... Mrs. M. P. Sharp

His Birthplace...

Name of Mother... Garland, Des.

Her Birthplace...

Body to be Shipped to...

Size and Style of Casket or Coffin...

Manufactured by... Garland, Des.

Interment at... Garland, Des. Cemetery

Lot No. 534

Grave No. 3

Section No.

Diagram of Lot or Vault

Casket or Coffin.....	\$ 100.00
Metallic Lining..... <small>(State Kind)</small>	
Outside Box..... <small>(State Kind)</small>	87
Grave Vault..... <small>(State Kind)</small>	
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	25.00
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
“ “ Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	15.00
Auto Limousines to Cemetery... @ \$.....	
Autos to R. R. Station... @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
<small>(Names of Newspapers)</small>	
Flowers, \$..... Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	8.00
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill.....	\$
By Amount Paid in Advance.....	\$
Balance.....	\$
Entered into Ledger, page..... or below.....	

To Funeral Charges..... Total, \$		By Cash.....	\$
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Names of Pall Bearers Walter Smock, Ralph Squish, J. B. Schreiner, J. W. Hines,

Names of Lodges Des. Masonic Lodge, Joseph...

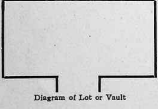
Lodge Insurance, \$..... Other Insurance, \$.....

Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1241 Yearly No. 18 Date April 15, 1926
 Name of Deceased Joseph Temple Silver; White; Salt Lake City, Utah
Husband X
Wife--Widow
Son--Daughter of John Anne Silver (What Race) (Where Born)

Charge to Lanoni
 Address Lanoni
 Order Given by Ralph & Howard Silver
 How Secured
 Date of Funeral April 15, 1926
 Residence 721 E. Main St., Lanoni
 Place of Death Ata.
 Funeral Services at L.O.S. Church
 Time of Funeral Service 2:30 P.M.
 Clergyman A. H. Holroyd; T. J. Bell, Ass.
 Certifying Physician D. W. King
 His Residence Lanoni, Ind.
 Number of Burial Certificate
 Cause of Death Arctic Insufficiency
(Primary) (Secondary)
 Date of Death April 13, 1926
 Occupation of the Deceased State Merchant
 Single or Married Married Religion Ev. C.
 Date of Birth May 16, 1867
 Age 56 Years 10 Months 31 Days
 Name of Father Joseph Silver
 His Birthplace England
 Name of Mother Anna Temple (Cross) Silver
(Maiden Name)
 Her Birthplace England
 Body to be Shipped to
 Size and Style of Casket or Coffin #100 Spec.
 Manufactured by W. H. Hill
 Interment at W. H. Hill Cemetery



Lot No. 301
 Grave No. 2
 Section No.

Casket or Coffin	\$	15000
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	XX
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		3 50
Engraving Plate		
Embalming Body (with Fluid)		25 00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15 00
Auto Limousines to Cemetery @ \$	2.50	5 00
Autos to R. R. Station @ \$		
Other Vehicle Service		
Airplane Service		
Death Notices in Newspapers	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	17 00
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		8 00
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		XX
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
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To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearers John Scullin, Sgt. Anderson, Rob. Anthony, A. Meyer, (S. B.)
 Names of Lodgers John, Howard, Phil, Ed. Lang, Rev. Mr. A. H. Holroyd, A. W. King, A. J. Jones (P.H.),
Maggie Anthony, Mabel Carline, Geo. Lutz, (Deceased)
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1242 Yearly No. 19 Date April 15 1926

Name of Deceased Joseph To write
Husband... White
Wife---Widow (What Race)
Son---Daughter of (Containing Only - Disposed dead along highway.)

Charge to.....
Address.....
Order Given by.....
How Secured.....
Date of Funeral.....
Residence St. Charles, La.
Place of Death Lafayette, La.
Funeral Service at.....
Time of Funeral Service.....
Clergyman.....
Certifying Physician.....
His Residence.....
Number of Burial Certificate.....
Cause of Death.....
Date of Death April 13, 1926
Occupation of the Deceased.....
Single or Married..... Religion.....
Date of Birth.....
Age..... Years..... Months..... Days.....
Name of Father.....
His Birthplace.....
Name of Mother.....
Her Birthplace.....
Body to be Shipped to.....
Size and Style of Casket or Coffin.....
Manufactured by.....
Interment at..... Cemetery

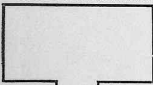


Diagram of Lot or Vault

Lot No.....
Grave No.....
Section No.....

Casket or Coffin.....	\$	
Metallic Lining.....		(State Kind)
Outside Box.....		(State Kind)
Grave Vault.....		(State Kind)
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		25.00
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		
Auto Limousines to Cemetery..@ \$.....		
Autos to R. R. Station.....@ \$.....		
Other Vehicle Service.....		
Acroplane Service.....		
Death Notices in..... Newspapers.....		
(Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	
By Amount Paid in Advance.....	\$	
Balance.....	\$	
Entered into Ledger, page..... or below.....		

To Funeral Charges..... Total, \$.....		By Cash..... \$.....

Names of Pall Bearers.....
Names of Lodges.....
Lodge Insurance, \$..... Other Insurance, \$.....
Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1244 Yearly No. 21 Date April 24, 1926
 Name of Deceased William Tom Gibon (What Race) White (Where Born) Missouri
 Husband/Wife/Son/Daughter of Emma B. Gibon

Charge to.....
 Address.....
 Order Given by C. C. Gibon
 How Secured.....
 Date of Funeral April 24, 1926
 Residence Samuel, Iowa
 Place of Death.....
 Funeral Services at M. E. Church, Laman
 Time of Funeral Service 10:00 AM
 Clergyman James King Peterson
 Certifying Physician C. A. Peterson
 His Residence Laman
 Number of Burial Certificates.....
 Cause of Death Cerebro Menigitide
 (Primary) (Secondary)
 Date of Death Apr. 21, 1926
 Occupation of the Deceased Retired Laman
 Single or Married Married Religion Methodist
 Date of Birth Sept. 1, 1852
 Age 71 Years 7 Months 21 Days
 Name of Father Joseph T. Gibon
 His Birthplace Grease Co., Penn.
 Name of Mother Mary C. Baker
 (Maiden Name)
 Her Birthplace Centre Co., Penn.
 Body to be Shipped to.....
 Size and Style of Casket or Coffin #100 Spec.
 Manufactured by Rich
 Interment at Wagon Co. Cem. Gravelly Cemetery
 Lot No.....
 Grave No.....
 Section No.....

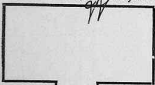


Diagram of Lot or Vault

Casket or Coffin <u>#100 Spec.</u>	\$ <u>150.00</u>
Metallic Lining.....	(State Kind)
Outside Box.....	(State Kind) <u>xx</u>
Grave Vault.....	(State Kind)
Burial Suit or Dress.....	
Burial Slippers and Hose.....	<u>35</u>
Engraving Plate.....	
Embalming Body (with..... Fluid)	<u>2.500</u>
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
“ “ Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	<u>15.00</u>
Auto Limousines to Cemetery... @ \$.....	
Autos to R. R. Station... @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	(Names of Newspapers)
Flowers, \$..... Rental of Plants, \$.....	<u>5.00</u>
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	<u>75</u>
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	<u>5.00</u>
Minister.....	
Total Footing of Bill.....	\$.....
By Amount Paid in Advance.....	\$.....
Balance.....	\$.....
Entered into Ledger, page..... or below.....	

To Funeral Charges..... Total, \$		By Cash.....	\$

Names of Pall Bearers Ark. T. Pfeiffer, Ark. Gault, Ernest Bell, Wm. Anderson, Wm. B. Sweeney, R. C. Hall, Walter Man.
 Names of Lodges.....

Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

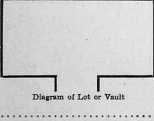
Total No. 1245 Yearly No. 23 Date May 4, 1926
 Name of Deceased Delia M. Vanderflugh (What Race) White (Where Born) Iowa
 Husband--
 Wife--Widow
 Son--Daughter of John Vanderflugh

Charge to John Vanderflugh
 Address Wingfield Co., Iowa
 Order Given by
 How Secured
 Date of Funeral May 4, 1926
 Residence Wingfield Co., Iowa
 Place of Death W. Camp, Iowa
 Funeral Services at A. O. S. Church, Lamoni
 Time of Funeral Service 2:30 P.M.
 Clergyman J. J. Bell, J. P. Shaw, Heck
 Certifying Physician L. W. Mitchell, Cornin
 His Residence Lamoni, Iowa

Number of Burial Certificate
 Cause of Death Suicide; Carbonic Acid Poisoning
 (Primary) (Secondary)
 Date of Death May 2, 1926, 10:30 P.M.
 Occupation of the Deceased at home
 Single or Married single Religion
 Date of Birth February 21, 1903
 Age 23 Years 2 Months Days
 Name of Father John Vanderflugh
 His Birthplace Walden, Iowa
 Name of Mother Annie B. Boyer
 (Maternal Name)
 Her Birthplace Deland, Ill.
 Body to be Shipped to

Size and Style of Casket or Coffin #100 Spec.
 Manufactured by Rohr
 Interment at Lamoni, West Hill Cemetery

Lot No. 1565
 Grave No. 1
 Section No.



Casket or Coffin <u>#100 Spec.</u>	\$ <u>150 00</u>
Metallic Lining (State Kind)	
Outside Box (State Kind)	<u>XX</u>
Grave Vault (State Kind)	
Burial Suit or Dress	<u>22 50</u>
Burial Slippers and Hose	<u>2 50</u>
Engraving Plate	
Embalming Body (with Fluid)	<u>25 00</u>
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
“ “ Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	<u>15 00</u>
Auto Limousines to Cemetery, @ \$	
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Acroplane Service	
Death Notices in Newspapers (Names of Newspapers)	
Flowers, \$ Rental of Plants, \$	<u>5 50</u>
Other Decorations	
Outlay for Lot	<u>40 00</u>
Opening Grave or Vault	<u>8 00</u>
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	<u>XX</u>
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page or below	

To Funeral Charges	Total, \$					By Cash	\$

Names of Pall Bearers Otto Dunbar, John Davengough, John Davengough Jr., LeRoy C. DeL...
 Names of Lodges W. P. O. U. L. No. 1, M. S. Lodge
P. I. N. C. E. R. S. - Grace, Lamoni, Francis, Lamoni
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1246 Yearly No. 23 Date May 8, 1936
Name of Deceased Thomas J. Thomson White Female

Charge to J. Carmichael, Bishop
Address
Order Given by Mrs. J. T. Williams
Date of Funeral May 1, 1936
Residence Liberty Home, Lamoni, Ia
Place of Death
Funeral Services at Body Shipped 1:34 P.M.
Clergyman B. A. Green
Certifying Physician
His Residence Lamoni
Cause of Death Peritonitis, Anemia
Date of Death May 1, 1936
Occupation of the Deceased
Single or Married
Date of Birth Feb. 27, 1852
Age 78 Years 2 Months 10 Days
Name of Father
His Birthplace
Name of Mother
Her Birthplace
Body to be Shipped to J. P. H. Stone, Independence, Mo.
Size and Style of Casket or Coffin 730 1/2 Card
Manufactured by
Interment at Independence, Mo. Cemetery

Table with columns for service item, price, and total. Includes items like Casket or Coffin (\$7.30 1/2), Burial Slippers and Hose (\$1.50), and Shipping Charges (\$12.38).

Summary table with columns: To Funeral Charges, Total, By Cash, and other insurance.

Names of Pall Bearers
Names of Lodges
Lodge Insurance, \$
Names of Near Relatives

RECORD OF FUNERAL

Total No. 1377 Yearly No. 27 Date May 30, 1926
 Name of Deceased Clara G. Elizabeth Paulson (What Race) White (Where Born) Sweden
 Husband Geo. A. Paulson, Dec.
 Wife--Widow
 Son--Daughter of

Charge to Mrs. Orier Stearns
 Address Mabel E. Sandstrom
 Order Given by Mabel E. Sandstrom
 How Secured
 Date of Funeral May 30, 1926
 Residence 402 1/2 Nat. St., Samois, Ia.
 Place of Death Mrs. L. D. J. Church
 Funeral Services at L. D. J. Church
 Time of Funeral Service 3 P. M. Mutual Case
 Clergyman (Rev. Lane Gust) Mutual Case
 Certifying Physician C. H. Peterson
 His Residence Samois, Ia.
 Number of Burial Certificate
 Cause of Death (Primary) Apoplexy; (Secondary) Arterio Sclerosis
 Date of Death May 28, 1926
 Occupation of the Deceased (Rev. Lane Gust)
 Single or Married Widow Religion W. O. J.
 Date of Birth March 13, 1869
 Age 57 Years 2 Months 15 Days
 Name of Father John Kirkpatrick
 His Birthplace
 Name of Mother Clara Elizabeth Jones
 Her Birthplace
 Body to be Shipped to

Casket or Coffin	\$ 185 00
Metallic Lining	
Outside Box	<u>dnr</u> xx
Grave Vault	
Burial Suit or Dress	
Burial Slippers and Hose	3 50
Engraving Plate	
Embalming Body (with Fluid)	25 00
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	15 00
Auto Limousines to Cemetery 2 @ \$	7 50
Autos to R. R. Station @ \$	5 00
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$
Other Decorations	27 00
Outlay for Lot	40 00
Opening Grave or Vault	8 50
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
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Size and Style of Casket or Coffin
 Manufactured by
 Interment at Samois, Ia., Rose Hill Cemetery

Lot No. 1569
 Grave No. 4
 Section No.
 Diagram of Lot or Vault

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers L. H. Muly, Neph. Jensen, Samois, Ia., Burton, J. W. Barr, E. J. Jensen
 Names of Lodges S. N. R. P. - Francis Morris, Sam. Wells, Geo. Stone, My. Church
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1228 Yearly No. 25 Date May 31 1926
 Name of Deceased Lynetta Graham (What Race) White (Where Born) Canada
 Husband---Wife---Widow } Mr David Graham, Dec.
 Son---Daughter of

Charge to Saints Home
 Address
 Order Given by J. H. Graham, Lenox, Ia.
 How Secured May 31, 1926
 Date of Funeral
 Residence Saints Home, Lamoni, Ia.
 Place of Death Reg
 Funeral Services at Reg
 Time of Funeral Service 1:30 P.M.
 Clergyman Arthur Kay
 Certifying Physician B. A. Gull
 His Residence Lamoni, Ia.
 Number of Burial Certificate
 Cause of Death

Casket or Coffin		\$	<u>2.50</u>
Metallie Lining	(State Kind)		
Outside Box	(State Kind)		
Grave Vault	(State Kind)		
Burial Suit or Dress			
Burial Slippers and Hose			
Engraving Plate			
Embalming Body (with..... Fluid)			<u>5.00</u>
Dressing Body, \$..... Shaving, \$.....			
Hair Dressing			
Use of Folding Chairs			
" " Candelabrum, \$..... Candles, \$.....			
Door Badge, \$..... Gloves, \$.....			
Hearse			<u>5.00</u>
Auto Limousines to Cemetery..@ \$.....			
Autos to R. R. Station.....@ \$.....			
Other Vehicle Service.....@ \$.....			
Acroplane Service.....			
Death Notices in..... Newspapers.....			
(Names of Newspapers)			
Flowers, \$..... Rental of Plants, \$.....			
Other Decorations			
Outlay for Lot			<u>5.00</u>
Opening Grave or Vault			<u>8.00</u>
Lining Grave with Evergreen or Muslin			
Matting, \$..... Tent Rental, \$.....			
Use of Lowering Device			
Rental of Vault			
Outlay for Shipping Charges			
Removal Charges			
Incineration			
Personal Services.....			
Singers			
Church Charges, \$..... Minister, \$.....			
Telegrams and Telephone Charges			
Pall Bearer Service			
Total Footing of Bill			
By Amount Paid in Advance			
Balance			
Entered into Ledger, page..... or below			

Date of Death May 29, 1926 (Primary) (Secondary)
 Occupation of the Deceased at home
 Single or Married Single Religion R. M. S.
 Date of Birth Aug. 16, 1841
 Age 84 Years 7 Months 13 Days
 Name of Father Joseph
 His Birthplace
 Name of Mother Margaret Shepherd
 Her Birthplace Canada (Mother's Name)
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Lamoni - Rose Hill Cemetery

Lot No. 557
 Grave No. 4
 Section No.

To Funeral Charges	Total, \$	By Cash	\$
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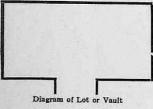
Names of Pall Bearer.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1250 Yearly No. 27 Date Aug. 2 1926
 Name of Deceased. Marcella Belle Cole (What Race) White (Where Born) Lansoni, Ia.

Husband...
 Wife...Widow
 Son...Daughter of

<p>Charge to <u>Marcella Cole</u> Address</p> <p>Order Given by <u>Anna Gustafson</u> How Secured</p> <p>Date of Funeral <u>Aug. 2, 1926</u> Residence <u>Lansoni, Ia.</u></p> <p>Place of Death <u>Iowa</u> Funeral Services at <u>Anna Gustafson, Lansoni</u></p> <p>Time of Funeral Service <u>10:30 A.M.</u> Clergyman <u>Rev. J. P. West</u></p> <p>Certifying Physician <u>J. P. West</u> His Residence <u>Lansoni, Ia.</u></p> <p>Number of Burial Certificate</p> <p>Cause of Death <u>Premature</u> (Primary) (Secondary)</p> <p>Date of Death <u>Aug. 1, 1926</u> Occupation of the Deceased <u>Wife</u></p> <p>Single or Married <u>Single</u> Religion <u>None</u></p> <p>Date of Birth <u>Aug. 1, 1896</u> Age <u>30</u> Years <u>9</u> Months <u>0</u> Weeks <u>0</u> Days</p> <p>Name of Father <u>W. R. Cole</u> His Birthplace <u>Lansoni, Iowa</u></p> <p>Name of Mother <u>Myrtle Gustafson</u> (Maiden Name)</p> <p>Her Birthplace <u>Lansoni, Iowa</u></p> <p>Body to be Shipped to</p> <p>Size and Style of Casket or Coffin</p> <p>Manufactured by</p> <p>Interment at <u>Lansoni - Rose Hill</u> Cemetery</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Casket or Coffin <u>4 Auto</u></td> <td style="text-align: right;">\$ 12.50</td> </tr> <tr> <td>Metallie Lining.....</td> <td style="text-align: right;">(State Kind)</td> </tr> <tr> <td>Outside Box.....</td> <td style="text-align: right;">(State Kind)</td> </tr> <tr> <td>Grave Vault.....</td> <td style="text-align: right;">(State Kind)</td> </tr> <tr> <td>Burial Suit or Dress.....</td> <td></td> </tr> <tr> <td>Burial Slippers and Hose.....</td> <td></td> </tr> <tr> <td>Engraving Plate.....</td> <td></td> </tr> <tr> <td>Embalming Body (with..... Fluid)</td> <td></td> </tr> <tr> <td>Dressing Body, \$..... Shaving, \$.....</td> <td></td> </tr> <tr> <td>Hair Dressing.....</td> <td></td> </tr> <tr> <td>Use of Folding Chairs.....</td> <td></td> </tr> <tr> <td>" " Candelabrum, \$..... Candles, \$.....</td> <td></td> </tr> <tr> <td>Door Badge, \$..... Gloves, \$.....</td> <td></td> </tr> <tr> <td>Hearse.....</td> <td></td> </tr> <tr> <td>Auto Limousines to Cemetery @ \$.....</td> <td></td> </tr> <tr> <td>Autos to R. R. Station @ \$.....</td> <td></td> </tr> <tr> <td>Other Vehicle Service.....</td> <td></td> </tr> <tr> <td>Aeroplane Service.....</td> <td></td> </tr> <tr> <td>Death Notices in..... Newspapers.....</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: center;">(Names of Newspapers)</td> </tr> <tr> <td>Flowers, \$..... Rental of Plants, \$.....</td> <td></td> </tr> <tr> <td>Other Decorations.....</td> <td></td> </tr> <tr> <td>Outlay for Lot.....</td> <td></td> </tr> <tr> <td>Opening Grave or Vault.....</td> <td style="text-align: right;">3.50</td> </tr> <tr> <td>Lining Grave with Evergreen or Muslin.....</td> <td></td> </tr> <tr> <td>Matting, \$..... Tent Rental, \$.....</td> <td></td> </tr> <tr> <td>Use of Lowering Device.....</td> <td></td> </tr> <tr> <td>Rental of Vault.....</td> <td></td> </tr> <tr> <td>Outlay for Shipping Charges.....</td> <td></td> </tr> <tr> <td>Removal Charges.....</td> <td></td> </tr> <tr> <td>Incineration.....</td> <td></td> </tr> <tr> <td>Personal Services.....</td> <td></td> </tr> <tr> <td>Singers.....</td> <td></td> </tr> <tr> <td>Church Charges, \$..... Minister, \$.....</td> <td></td> </tr> <tr> <td>Telegrams and Telephone Charges.....</td> <td></td> </tr> <tr> <td>Pall Bearer Service.....</td> <td></td> </tr> <tr> <td><u>Grave Marker</u></td> <td style="text-align: right;">1.00</td> </tr> <tr> <td>Total Footing of Bill.....</td> <td style="text-align: right;">\$.....</td> </tr> <tr> <td>By Amount Paid in Advance.....</td> <td style="text-align: right;">\$.....</td> </tr> <tr> <td>Balance.....</td> <td style="text-align: right;">\$.....</td> </tr> <tr> <td>Entered into Ledger, page..... or below.....</td> <td></td> </tr> </table>	Casket or Coffin <u>4 Auto</u>	\$ 12.50	Metallie Lining.....	(State Kind)	Outside Box.....	(State Kind)	Grave Vault.....	(State Kind)	Burial Suit or Dress.....		Burial Slippers and Hose.....		Engraving Plate.....		Embalming Body (with..... Fluid)		Dressing Body, \$..... Shaving, \$.....		Hair Dressing.....		Use of Folding Chairs.....		" " Candelabrum, \$..... Candles, \$.....		Door Badge, \$..... Gloves, \$.....		Hearse.....		Auto Limousines to Cemetery @ \$.....		Autos to R. R. Station @ \$.....		Other Vehicle Service.....		Aeroplane Service.....		Death Notices in..... Newspapers.....		(Names of Newspapers)		Flowers, \$..... Rental of Plants, \$.....		Other Decorations.....		Outlay for Lot.....		Opening Grave or Vault.....	3.50	Lining Grave with Evergreen or Muslin.....		Matting, \$..... Tent Rental, \$.....		Use of Lowering Device.....		Rental of Vault.....		Outlay for Shipping Charges.....		Removal Charges.....		Incineration.....		Personal Services.....		Singers.....		Church Charges, \$..... Minister, \$.....		Telegrams and Telephone Charges.....		Pall Bearer Service.....		<u>Grave Marker</u>	1.00	Total Footing of Bill.....	\$.....	By Amount Paid in Advance.....	\$.....	Balance.....	\$.....	Entered into Ledger, page..... or below.....	
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		To Funeral Charges..... Total, \$		By Cash.....	

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1251 Yearly No. 28 Date Aug. 10, 1926

Name of Deceased St. William J. Baker
 Husband Wife Son Daughter
Anna Baker, Dec. (What Race) White (Where Born) Badapsel, Germany

Charge to Saints Home

Address _____

Order Given by Alice P. Dancer, mother

How Secured _____

Date of Funeral Aug. 10, 1926

Residence Saints Home, Lamoni, Iowa

Place of Death Iowa

Funeral Services at Sts.

Time of Funeral Service 4 P. M.

Clergyman Arthur Jones, J. M. Stubbins

Certifying Physician G. C. Gray

His Residence Lamoni, Iowa

Number of Burial Certificate _____

Cause of Death Chronic Interstitial Nephritis
(Primary) (Secondary)

Date of Death Aug. 10, 1926

Occupation of the Deceased laborer

Single or Married widow Religion R. O. S.

Date of Birth Feb. 15, 1847

Age 79 Years 5 Months 25 Days

Name of Father Not known

His Birthplace _____

Name of Mother _____
(Maiden Name)

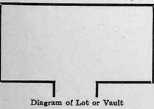
Her Birthplace _____

Body to be Shipped to _____

Size and Style of Casket or Coffin _____

Manufactured by _____

Interment at Lamoni West Hill Cemetery



Lot No. 256

Grave No. 4

Section No. _____

Casket or Coffin.....	\$ <u>55.00</u>
Metallic Lining.....	<small>(State Kind)</small>
Outside Box.....	<small>(State Kind)</small>
Grave Vault.....	<small>(State Kind)</small>
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	\$ <u>3.00</u>
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
“ “ Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	\$ <u>5.00</u>
Auto Limousines to Cemetery @ \$.....	
Autos to R. R. Station @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
<small>(Names of Newspapers)</small>	
Flowers, \$..... Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	\$ <u>2.00</u>
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill..... \$	
By Amount Paid in Advance..... \$	
Balance..... \$	
Entered into Ledger, page..... or below.....	

To Funeral Charges.....	Total, \$	By Cash.....	\$

Names of Pall Bearers.....

Names of Lodges.....

Lodge Insurance, \$..... Other Insurance, \$.....

Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1953 Yearly No. 29 Date August 11, 1926

Name of Deceased Clara G. Smith
Husband David Smith, Dec.

Write (What Rate) A.R. (Where Born)

Charge to C. A. Smith
Address C. U. Smith (P.O. No.)
Order Given by C. U. Smith (P.O. No.)
How Secured
Date of Funeral Aug. 14, 1926
Residence Independence, Mo.

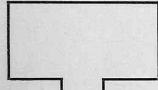
Casket or Coffin \$
Metallic Lining (State Kind)
Outside Box (State Kind)
Grave Vault (State Kind)
Burial Suit or Dress
Burial Slippers and Hose
Engraving Plate
Embalming Body (with Fluid)
Dressing Body \$ Shaving \$
Hair Dressing
Use of Folding Chairs
" Candelabrum \$ Candles \$
Door Badge \$ Gloves \$
Hearse 12
Auto Limousines to Cemetery 2 @ \$
Autos to R. R. Station @ \$
Other Vehicle Service
Aeroplane Service
Death Notices in Newspapers

Funeral Services at S. O. & Church Lane
Time of Funeral Service 2:30 P.M.
Clergyman J. B. Sawry, J. M. M. Oswald, etc.
Certifying Physician W. C. Messinger
His Residence Independence, Mo.

Number of Burial Certificate
Cause of Death
Date of Death Aug. 9, 1926
Occupation of the Deceased M. Man.
Single or Married Widow Religion S. O. P.
Date of Birth
Age 75 Years Months Days
Name of Father
His Birthplace
Name of Mother (Maiden Name)
Her Birthplace
Body to be Shipped to Frank Independence, Mo.

(Names of Newspapers)
Flowers \$ Rental of Plants \$
Other Decorations
Outlay for Lot 8.00
Opening Grave or Vault
Lining Grave with Evergreen or Muslin
Matting \$ Tent Rental \$
Use of Lowering Device
Rental of Vault
Outlay for Shipping Charges
Removal Charges
Incineration
Personal Services xx
Singers
Church Charges \$ Minister \$
Telegrams and Telephone Charges
Pall Bearer Service

Manufactured by
Interment at S. O. Hill Cemetery



Lot No. 443
Grave No. 112
Section No.

Total Footing of Bill \$
By Amount Paid in Advance \$
Balance \$
Entered into Ledger, page or below

Table with columns: To Funeral Charges, Total \$, By Cash \$

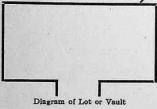
Names of Pall Bearers G. J. Apocantha, Phillip Baldwin, Frank Cox, T. S. Mulvey, etc.
Names of Lodges S. O. P. ...
Lodge Insurance \$ Other Insurance \$
Names of Near Relatives

RECORD OF FUNERAL

Total No. 1253 Yearly No. 30 Date August 13, 1926
 Name of Deceased John Sherman Cash, White Iowa
 Husband-A Wife--Widow Son--Daughter of J. S. Cash, Dec. (What Race) (Where Born)

Charge to _____
 Address Levas, Rhode
 Order Given by Levas, Rhode
 How Secured _____
 Date of Funeral Aug. 13, 1926
 Residence Ormsburg, Colo.
 Place of Death Res. Church, Lammie
 Funeral Services at M. C. Church, Lammie
 Time of Funeral Service 11 A.M.
 Clergyman Anna G. King
 Certifying Physician Geo. Collins
 His Residence Denver
 Number of Burial Certificate _____
 Cause of Death Cerebral Hemorrhage
 (Primary) (Secondary)
 Date of Death Aug. 6, 1926
 Occupation of the Deceased Gardner
 Single or Married Single Religion _____
 Date of Birth Feb. 27, 1866
 Age 60 Years 5 Months 10 Days
 Name of Father Joseph Cash
 His Birthplace Kentucky
 Name of Mother Mary Scott
 (Maiden Name)
 Her Birthplace Illinois
 Body to be Shipped to F. G. A. Denver
Stumpson Mottery
 Size and Style of Casket or Coffin _____
 Manufactured by _____
 Interment at Lammie, Lilly Cemetery

Casket or Coffin	\$		
Metallic Lining	(State Kind)		
Outside Box	(State Kind)		
Grave Vault	(State Kind)		
Burial Suit or Dress	(State Kind)		
Burial Slippers and Hose			
Engraving Plate			
Embalming Body (with Fluid)			
Dressing Body, \$	Shaving, \$		
Hair Dressing			
Use of Folding Chairs			
" " Candelabrum, \$	Candles, \$		
Door Badge, \$	Gloves, \$		
Hearse	<u>F. P. J. Swick</u>	<u>25.00</u>	
Auto Limousines to Cemetery <u>20</u>	\$ <u>40</u>		
Autos to R. R. Station	@ \$		
Other Vehicle Service			
Aeroplane Service			
Death Notices in	Newspapers		
(Names of Newspapers)			
Flowers, \$	Rental of Plants, \$		
Other Decorations			
Outlay for Lot			
Opening Grave or Vault		<u>8.00</u>	
Lining Grave with Evergreen or Muslin			
Matting, \$	Tent Rental, \$		
Use of Lowering Device			
Rental of Vault			
Outlay for Shipping Charges			
Removal Charges			
Incineration			
Personal Services			
Singers			
Church Charges, \$	Minister, \$		
Telegrams and Telephone Charges			
Pall Bearer Service			
Total Footing of Bill			\$
By Amount Paid in Advance			\$
Balance			\$
Entered into Ledger, page _____ or below _____			



Lot No. _____
 Grave No. _____
 Section No. _____

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers W. H. Hall, F. B. Murray, Geo. Evans, C. T. Rhodes, J. S. Cash, Ed. Scott
 Names of Lodges _____
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____

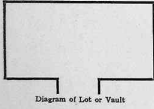
RECORD OF FUNERAL

Total No. 125A Yearly No. 31 Date Aug 13 1926
 Name of Deceased Etta Madeline Pull, White Okemba Co., Mich.
(What Race) (Where Born)
 Husband—Emmett Pull, Des.
 Wife—Widow
 Son—Daughter of

Charge to.....
 Address John Woodman
 Order Given by John Woodman
 How Secured.....
 Date of Funeral Aug. 13, 1926
 Residence Des Moines, Iowa
 Place of Death Dayette Sup. Occupas Co., Iowa
 Funeral Services by John Woodman Mrs., Desmoi
 Time of Funeral Service 9 P.M.
 Clergyman D. C. White; W. H. Spence, Des.
 Certifying Physician H. M. Gille
 His Residence Desmoi, Iowa
 Number of Burial Certificate.....
 Cause of Death Head Blck
(Primary) (Secondary)
 Date of Death Aug. 11, 1926 5:30 A.M.
 Occupation of the Deceased at home
 Single or Married Divorced Religion L. O. S.
 Date of Birth Aug. 29, 1884
 Age 41 Years 11 Months 17 Days
 Name of Father John Woodman
 His Birthplace Frank Co., Indiana, Indiana
 Name of Mother Anna A. Seyer
(maiden Name)
 Her Birthplace Tulsa, Okla.
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Rock Hill Cemetery

Casket or Coffin.....	\$ 85.00
Metallic Lining.....	(State Kind)
Outside Box.....	(State Kind)
Grave Vault.....	(State Kind)
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	25.00
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
" " Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	15.00
Auto Limousines to Cemetery. @ \$.....	XX
Autos to R. R. Station..... @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
<small>(Names of Newspapers)</small>	
Flowers, \$..... Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	40.00
Opening Grave or Vault.....	8.00
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	XX
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill..... \$	
By Amount Paid in Advance..... \$	
Balance..... \$	
Entered into Ledger, page..... or below	

Lot No. 1592
 Grave No. 3
 Section No.



To Funeral Charges.....	Total, \$			By Cash.....	\$

Names of Pall Bearers Albert Marshall, Mrs. Smith, Roy Dillon, Walter Wick, J. N. Beady, S. Augustine
 Names of Lodges.....

Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1255 Yearly No. 32 Date Aug 20 1920
 Name of Deceased Louana Johnson Triuk - White (What Race) W. Knoxville, Tenn., Mo., 7.9. (Where Born)
 Husband---
 *Wife---Widow } Nevala Triuk
 Son---Daughter of }

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral Aug. 20, 1920
 Residence Damou, Iowa (300 av. S.W.)
 Place of Death Iowa
 Funeral Services at Wm.
 Time of Funeral Service 3 P.M.
 Clergyman T. J. Bell
 Certifying Physician S. H. King
 His Residence Damou, Iowa
 Number of Burial Certificate
 Cause of Death Lehrnric Endocaulytic
 (Primary) (Secondary)
 Date of Death Aug. 18, 1920
 Occupation of the Deceased Catman member
 Single or Married married Religion
 Date of Birth July 30, 1850
 Age 70 Years 0 Months 18 Days
 Name of Father Lyman Triuk
 His Birthplace
 Name of Mother Arula Russell
 (Maiden Name)
 Her Birthplace
 Body to be Shipped to Halla Halla, Wash.
 Size and Style of Casket or Coffin #100 Special
 Manufactured by
 Interment at Halla Halla, Wash. Cemetery

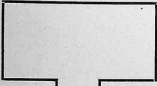


Diagram of Lot or Vault

Lot No.
 Grave No.
 Section No.

Casket or Coffin	\$ 165.00
Metallic Lining (State Kind)	
Outside Box (State Kind)	X X
Grave Vault (State Kind)	
Burial Suit or Dress (State Kind)	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	2.50
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	X X
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	12.00
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	X X
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers A. H. Bell, Fred Winger, Dewey White, John Viscor, Maria Smith, A. C. White
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1256 Yearly No. 33 Date Sept. 15, 1926

Name of Deceased Catherine Louise Bradley (What Race) White (Where Born) Missouri

Husband John W. Bradley, Dec.
 Wife
 Son
 Daughter

Charge to.....
 Address.....
 Order Given by Nelson J. James Bradley
 How Secured.....
 Date of Funeral Sept. 15, 1926
 Residence Lambert, Mo.
 Place of Death P. O. St. Charles, Mo., Lambert
 Funeral Services at.....
 Time of Funeral Service 3:30 P.M.
 Clergyman A. R. Kelly
 Certifying Physician J. H. King
 His Residence Lambert
 Number of Burial Certificate.....
 Cause of Death Concussion, I. A. Dravain
 (Primary) (Secondary)
 Date of Death Sept. 13, 1926
 Occupation of the Deceased Ch. Home
 Single or Married widow Religion R. O. S.
 Date of Birth May 24, 1889
 Age 37 Years 3 Months 13 Days
 Name of Father William Woodworth
 His Birthplace.....
 Name of Mother Pauline Lockwood
 (Maiden Name)
 Her Birthplace.....
 Body to be Shipped to.....
 Size and Style of Casket or Coffin # 300
 Manufactured by Rich
 Interment at Lambert Rich Hill Cemetery

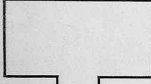


Diagram of Lot or Vault

Lot No. 814
 Grave No. 243
 Section No.....

Casket or Coffin.....	<u># 300</u>	\$ <u>225.00</u>
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	<u>xx</u>
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		<u>25.00</u>
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		<u>xx</u>
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		<u>15.00</u>
Auto Limousines to Cemetery..@ \$.....		<u>2.50</u>
Autos to R. R. Station.....@ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		
(Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		<u>8.50</u>
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		<u>xx</u>
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....		\$.....
By Amount Paid in Advance.....		\$.....
Balance.....		\$.....
Entered into Ledger, page..... or below.....		

To Funeral Charges..... Total, \$		By Cash..... \$	
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Names of Pall Bearers W. H. M. Meyer, Jim Stanley, W. A. Hopkins, G. P. Blair, Chas. Taylor, John Seavick

Names of Lodges M. E. S. Sons Reel, Francis Norris, Log 599, A. O. White

Lodge Insurance, \$..... Other Insurance, \$.....

Names of Near Relatives.....

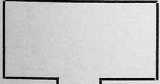
RECORD OF FUNERAL

Total No. *1257* Yearly No. *24* Date *Oct. 22, 1926*
 Name of Deceased *John Bend Anderson* *White*
 Husband (What Race) *Denmark*
 Wife--Widow *Marj Wilson Anderson* (Where Born)
 Son--Daughter of _____

Charge to _____
 Address _____
 Order Given by *Andrew G. Anderson*
 How Secured *Oct*
 Date of Funeral *Oct. 22, 1926*
 Residence *Samoa, Iowa (C. S. A.)*
 Place of Death *Iowa*
 Funeral Services at *Mrs.*
 Time of Funeral Service *3 P.M.*
 Clergyman *John Harris, X. M. Blair, Asst.*
 Certifying Physician *S. M. King*
 His Residence *Samoa*
 Number of Burial Certificate _____
 Cause of Death *Diabetes Mellitus + Nephritis*
 (Primary) (Secondary)
 Date of Death *Oct. 20, 1926 - 5 A.M.*
 Occupation of the Deceased *Retired Farmer*
 Single or Married *Married* Religion *P. O. P.*
 Date of Birth *March 23, 1842*
 Age *84* Years *6* Months *27* Days
 Name of Father *Andrew Christian Anderson*
 His Birthplace *Denmark*
 Name of Mother *William Jonsson*
 (Maiden Name)
 Her Birthplace *Denmark*
 Body to be Shipped to _____

Casket or Coffin	#100	\$	150 00
Metallic Lining			
Outside Box	(State Kind)		<i>x x</i>
Grave Vault	(State Kind)		
Burial Suit or Dress	(State Kind)		20 00
Burial Slippers and Hose			25
Engraving Plate			
Embalming Body (with _____ Fluid)			25 00
Dressing Body, \$_____	Shaving, \$_____		
Hair Dressing			
Use of Folding Chairs			<i>x x</i>
" " Candelabrum, \$_____	Candles, \$_____		
Door Badge, \$_____	Gloves, \$_____		
Hearse			15 00
Auto Limousines to Cemetery. @ \$_____	<i>Denmark</i>		<i>2. 40</i>
Autos to R. R. Station. @ \$_____			
Other Vehicle Service			
Aeroplane Service			
Death Notices in _____ Newspapers	(Names of Newspapers)		
Flowers, \$_____	Rental of Plants, \$_____		
Other Decorations			
Outlay for Lot			
Opening Grave or Vault			8 00
Lining Grave with Evergreen or Muslin			
Matting, \$_____	Tent Rental, \$_____		
Use of Lowering Device			
Rental of Vault			
Outlay for Shipping Charges			
Removal Charges			
Incineration			
Personal Services			<i>x x</i>
Singers			
Church Charges, \$_____	Minister, \$_____		
Telegrams and Telephone Charges			
Pall Bearer Service			
Total Footing of Bill		\$	
By Amount Paid in Advance		\$	
Balance		\$	
Entered into Ledger, page _____		or below	

Size and Style of Casket or Coffin *#100 Spec.*
 Manufactured by *Robt. J. Hill*
 Interment at *Samoa - Rose Hill* Cemetery



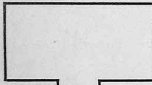
Lot No. *826*
 Grave No. *3*
 Section No. _____

To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearers *P. J. Stephenson, O. Hays, J. G. J. Hill, J. J. J. J. J., Neph. Linn Chas. J. J.*
 Names of Lodges _____
 Lodge Insurance, \$_____ Other Insurance, \$_____
 Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1258 Yearly No. 35 Date Oct. 18, 1926 No. 21
 Name of Deceased Louise Stalberg (What Race) White (Where Born) Franklin, Wash. Co., Ill.
 Husband John Stalberg
 Wife--Widow
 Son--Daughter of

Charge to.....
 Address Lamoni, Iowa
 Order Given by John Stalberg
 How Secured.....
 Date of Funeral Oct. 18, 1926
 Residence Lamoni
 Place of Death Lamoni, Iowa
 Funeral Services at W. D. Church, Lamoni
 Time of Funeral Service 7:30 P. M.
 Clergyman T. J. Bell - Anthony Lane, Asst.
 Certifying Physician D. W. Walker
 His Residence Lamoni
 Number of Burial Certificate.....
 Cause of Death Mitral Insufficiency
(Primary) (Secondary)
 Date of Death Oct. 16, 1926 - 9 A.M.
 Occupation of the Deceased th. Lma.
 Single or Married Married Religion W. D.
 Date of Birth March 2, 1859
 Age 67 Years 7 Months 14 Days
 Name of Father Peter Hansen
 His Birthplace Herrmann
 Name of Mother Anna Stalberg
(Maiden Name)
 Her Birthplace Herrmann
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Lamoni - Ross Hill Cemetery
 Lot No. 167
 Grave No. 4
 Section No.

 Diagram of Lot or Vault

Casket or Coffin.....	\$ 2.00 00
Metallic Lining..... <small>(State Kind)</small>	
Outside Box..... <small>(State Kind)</small>	xx
Grave Vault..... <small>(State Kind)</small>	110.00
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	25.00
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
" " Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	1.50 00
Auto Limousines to Cemetery...@ \$.....	2.50
Autos to R. R. Station.....@ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
<small>(Names of Newspapers)</small>	
Flowers, \$..... Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	10.00
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	xx
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
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Total Footing of Bill.....	\$.....
By Amount Paid in Advance.....	\$.....
Balance.....	\$.....
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To Funeral Charges..... Total, \$	By Cash..... \$
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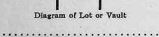
Names of Pall Bearers J. S. Keown, John Long, Frank Hummer, O. Hayes, H. L. Scott, Roy...
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1359 Yearly No. 36 Date Oct. 29, 1926
 Name of Deceased. Frank Smith M. O'Donnell White Lamoni, Iowa
 Husband-- Wife--Widow (What Race) (Where Born)
 Son-- Daughter of Frank M. O'Donnell

Charge to.....
 Address Independence, Mo.
 Order Given by Frank M. O'Donnell
 How Secured.....
 Date of Funeral Oct. 29, 1926
 Residence Independence, Mo.
 Place of Death.....
 Funeral Services at May Bente Ch., Lamoni
 Time of Funeral Services 2 P.M.
 Clergyman John Gustaf, A. W. Blain, Asst.
 Certifying Physician W. E. Messinger
 His Residence Independence, Mo.
 Number of Burial Certificate.....
 Cause of Death Cerebral meningitis
 (Primary) (Secondary)
 Date of Death Oct. 27, 1926 - 4:20 P.M.
 Occupation of the Deceased none
 Single or Married single Religion.....
 Date of Birth Feb. 12, 1922
 Age 4 Years 8 Months 19 Days
 Name of Father Frank M. O'Donnell
 His Birthplace Mo. Pleasant, Iowa
 Name of Mother Clara Ann Smith
 (Maiden Name)
 Her Birthplace Lamoni, Iowa
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Lamoni - Oak Hill Cemetery

Lot No. 297
 Grave No. 3
 Section No.



Casket or Coffin.....	\$.....
Metallic Lining.....	(State Kind)
Outside Box.....	(State Kind)
Grave Vault.....	(State Kind)
Burial Suit or Dress.....	(State Kind)
Burial Slippers and Hose.....	(State Kind)
Engraving Plate.....	(State Kind)
Embalming Body (with..... Fluid)	(State Kind)
Dressing Body, \$.....	Shaving, \$.....
Hair Dressing.....	\$.....
Use of Folding Chairs.....	XX
" Candelabrum, \$.....	Candles, \$.....
Door Badge, \$.....	Gloves, \$.....
Hearse <u>& Personal Services</u>	15.00
Auto Limousines to Cemetery, @ \$.....	XX
Autos to R. R. Station, @ \$.....	XX
Other Vehicle Service.....	\$.....
Aeroplane Service.....	\$.....
Death Notices in..... Newspapers.....	\$.....
(Names of Newspapers)	
Flowers, \$.....	Rent of Plants, \$.....
Other Decorations.....	\$.....
Outlay for Lot.....	\$.....
Opening Grave or Vault.....	5.00
Lining Grave with Evergreen or Muslin.....	\$.....
Matting, \$.....	Tent Rental, \$.....
Use of Lowering Device.....	\$.....
Rental of Vault.....	\$.....
Outlay for Shipping Charges.....	\$.....
Removal Charges.....	\$.....
Incineration.....	\$.....
Personal Services.....	XX
Singers.....	\$.....
Church Charges, \$.....	Minister, \$.....
Telegrams and Telephone Charges.....	\$.....
Pall Bearer Service.....	\$.....
Total Footing of Bill.....	\$.....
By Amount Paid in Advance.....	\$.....
Balance.....	\$.....
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To Funeral Charges.....	Total, \$.....		By Cash.....	\$.....

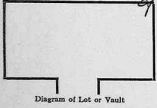
Names of Pall Bearers Louis May, Grace Under, Grace Hopkins, Marcella May, Corbetta, Eliza Kenton
 Names of Lodges.....

Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1360 Yearly No. 37 Date Nov. 14, 1926
 Name of Deceased Simon H. Poul White Marion Mo. Ia.
Husband-- (What Race) (Where Born)
Wife--Widow
Son--Daughter of Mabel S. Poul

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral Nov. 14, 1926
 Residence Lamar, Ia.
 Place of Death
 Funeral Services at Ch.
 Time of Funeral Service 7:30 P.M.
 Clergyman D. C. White; E. D. White, Deacon
 Certifying Physician L. E. Siphney
 His Residence Lamar
 Number of Burial Certificate
 Cause of Death Arterio-sclerotic Myocarditis Hypertrophy
(Primary) (Secondary)
 Date of Death Nov. 13, 1926
 Occupation of the Deceased Lamar
 Single or Married Married Religion R. D. P.
 Date of Birth Jan. 19, 1852
 Age 74 Years 9 Months 26 Days
 Name of Father John Henry Poul
 His Birthplace Germany
 Name of Mother Pauline Carter
(maiden Name)
 Her Birthplace Germany
 Body to be Shipped to Cambridge, Neb.
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Cambridge, Neb. Cemetery



Casket or Coffin.....	\$ 15.00
Metallic Lining..... <small>(State Kind)</small>	
Outside Box..... <small>(State Kind)</small>	1x
Grave Vault..... <small>(State Kind)</small>	
Burial Suit or Dress.....	
Burial Slippers and Hose.....	2.75
Engraving Plate.....	
Embalming Body (with..... Fluid)	25.00
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
" " Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	10.00
Auto Limousines to Cemetery.. @ \$.....	
Autos to R. R. Station..... @ \$.....	xx
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers..... <small>(Names of Newspapers)</small>	
Flowers, \$..... Rental of Plants, \$.....	5.00
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	1x
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
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Total Footing of Bill.....	\$.....
By Amount Paid in Advance.....	\$.....
Balance.....	\$.....
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	To Funeral Charges..... Total, \$		By Cash..... \$
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Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1261 Yearly No. 38 Date. Nov. 20, 1926
 Name of Deceased. Wm. Lee Slaughter White Decatur Co., Iowa.
 Husband---
 Wife---Widow } A. Leona Slaughter
 X Son---Daughter of }
 (What Race) (Where Born)

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral Nov. 20, 1926
 Residence Myrtle Twp., Decatur Co., Iowa.
 Place of Death
 Funeral Services at
 Time of Funeral Service 2:30 P. M.
 Clergyman J. Keightley Gray
 Certifying Physician C. E. Sigbury
 His Residence Lamoni
 Number of Burial Certificate
 Cause of Death Branchio Pneumonia
 (Primary) (Secondary)
 Date of Death Nov. 17, 1926
 Occupation of the Deceased none
 Single or Married none Religion none
 Date of Birth March 24, 1926
 Age 0 Years 7 Months 25 Days
 Name of Father Wm. Leona Slaughter
 His Birthplace Burrill Twp., Decatur Co., Ia.
 Name of Mother Anna Spitznagel
 (Maiden Name)
 Her Birthplace Myrtle Twp., Decatur Co., Ia.
 Body to be Shipped to
 Size and Style of Casket or Coffin #155 1/2
 Manufactured by
 Interment at Lamoni Ross Hill Cemetery

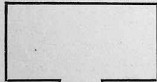


Diagram of Lot or Vault

Lot No. 518
 Grave No. 3
 Section No.

Casket or Coffin	\$ 30.00
Metallic Lining	
Outside Box (State Kind)	XX
Grave Vault (State Kind)	
Burial Suit or Dress (State Kind)	
Burial Slippers and Hose	88
Engraving Plate	
Embalming Body (with Fluid)	XX
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	XX
Auto Limousines to Cemetery @ \$	XX
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	3.50
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$	Minister, \$ X
Telegrams and Telephone Charges	5.00
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1262 Yearly No. 39 Date Nov. 30 1926

Name of Deceased Lyrus Jerome Foster (What Race) White (Where Born) Ill.

Relationship: Husband, Wife, Widower, Son, Daughter of

Charge to L. O. Foster
 Address North Park
 Order Given by North Park
 How Secured Nov. 30, 1926
 Date of Funeral Nov. 30, 1926
 Residence 40 S. Chestnut, Laramie, Wyo.
 Place of Death Wyo.
 Funeral Services at Wyo.
 Time of Funeral Service 2:30 P.M.
 Clergyman J. J. Bell; J. M. Bell, asst.
 Certifying Physician L. R. Dimmy
 His Residence Laramie
 Number of Burial Certificate 1
 Cause of Death Chronic Intestinal Nephritis
 (Primary) (Secondary)
 Date of Death Nov. 28, 1926
 Occupation of the Deceased Drayman
 Single or Married Married Religion P.D.
 Date of Birth July 10, 1853
 Age 73 Years 2 Months 18 Days
 Name of Father James Foster
 His Birthplace New York
 Name of Mother Bertha Sarah Crandall
 (Maiden Name)
 Her Birthplace Ill.
 Body to be Shipped to Ill.
 Size and Style of Casket or Coffin #1400 Bilt.

Manufactured by Ill.
 Interment at Laramie - Oak Hill Cemetery

Diagram of Lot or Vault

Lot No. 187
 Grave No. 1
 Section No. Ill.

Casket or Coffin	\$ 150.00
Metallic Lining	(State Kind)
Outside Box	(State Kind) xx
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	50
Engraving Plate	
Embalming Body (with Fluid)	35.00
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	xx
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	15.00
Auto Limousines to Cemetery, @ \$	2.50
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in	Newspapers
Flowers, \$	Rent of Plants, \$ 12.00
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	8.00
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	xx
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Paul Anderson, Sam Bishop, Geo. Fisher, John Martin, Dave Weaver, Sam Weaver
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1263 Yearly No. 70 Date Dec. 8, 1926
 Name of Deceased Alice Elizabeth Brackebury, White, Council Bluffs, Ia.
 Husband Wm. B. Brackebury, Dec. (What Place) (Where Born)

Charge to Wallace & Judy Brackebury
 Address _____

Order Given by _____
 How Secured _____

Date of Funeral Dec. 8, 1926
 Place of Death Residence

Funeral Services at St. W. Church
 Time of Funeral Service 2:30 P.M.

Clergyman Kutschera, St. W. Church, rect.
 Certifying Physician Dr. G. G. Sweeney
 His Residence Laman, Ia.

Number of Burial Certificate _____
 Cause of Death Acute Myocarditis
 (Primary) (Secondary)

Date of Death Dec. 6, 1926
 Occupation of the Deceased Ed. Home

Single or Married Married Religion R.C.
 Date of Birth Jan. 7, 1873

Age 53 Years 10 Months 29 Days
 Name of Father Frederick Hanna

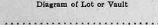
His Birthplace Germany
 Name of Mother Elizabeth Savath
 (Maiden Name) Wales

Her Birthplace _____
 Body to be Shipped to _____

Size and Style of Casket or Coffin _____
 Manufactured by _____

Interment at Laman - Rose Hill Cemetery
 Lot No. 489

Grave No. 2
 Section No. _____



Casket or Coffin	\$ 16.50
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault (State Kind)	
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	2.50
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	1.50
Auto Limousines to Cemetery 1. @ \$	2.00
Autos to R. R. Station. @ \$	1.00
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$ Rental of Plants, \$	
Other Decorations	
Outlay for Lot	
Opening Grave or Vault <u>with vault</u>	7.50
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page _____ or below	

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers A. W. Hub, W. Unsworth, G. J. Smith, J. B. Duvall, S. Dewey, White, Don Anderson

Names of Lodgers F. J. B. - 6 1/2 ft. Hall, John White, Charles Francis, Mass. Street
 S. I. R. E. S. A. Capital, Charles, Leo, Arthur, etc. - Contractor - Hotel, Omaha, Ia. - Service

Lodge Insurance, \$ _____ Other Insurance, \$ _____

Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1264 Yearly No. 47 Date Dec. 9 1926

Name of Deceased Frank Josephine Blair (What Race) White (Where Born) Missouri

Husband---
 Wife---Widow
 Son---Daughter of Blair

Charge to Walter Blair
 Address Lamar

Order Given by Harry Noyes
 How Secured U.S. - 1st Cl. - Div. Missouri

Date of Funeral Dec. 9, 1926
 Residence Lamar, Mo.

Place of Death Blair
 Funeral Services at S. O. S. Church

Time of Funeral Service 9:30 P.M.
 Clergyman W. C. Craft, A. H. Hays, asst.

Certifying Physician W. C. Smith
 His Residence Lamar

Number of Burial Certificate 1
 Cause of Death Chronic Interstitial Nephritis

Date of Death Dec. 8, 1926
 Occupation of the Deceased at home

Single or Married Single Religion S. O. S.
 Date of Birth March 3, 1862

Age 64 Years 9 Months 5 Days
 Name of Father Anthony D. Blair

His Birthplace St. Louis, Mo.
 Name of Mother Desiree Blair

Her Birthplace Grandview, Mo. (Maiden Name)
 Body to be Shipped to Blair

Size and Style of Casket or Coffin
 Manufactured by

Interment at Lamar, Mo. Pros. Hill Cemetery

Lot No. 441
 Grave No. 2
 Section No.

Diagram of Lot or Vault

Casket or Coffin.....	\$ 15.00
Metallic Lining.....	(State Kind)
Outside Box.....	(State Kind)
Grave Vault.....	(State Kind)
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	2.50
Dressing Body, \$.....	Shaving, \$.....
Hair Dressing.....	
Use of Folding Chairs.....	
“ “ Candelabrum, \$.....	Candles, \$.....
Door Badge, \$.....	Gloves, \$.....
Hearse.....	1.50
Auto Limousines to Cemetery...@ \$.....	
Autos to R. R. Station.....@ \$.....	
Other Vehicle Service.....	
Acroplane Service.....	
Death Notices in..... Newspapers.....	
(Names of Newspapers)	
Flowers, \$.....	Rent of Plants, \$.....
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	9.50
Lining Grave with Evergreen or Muslin.....	
Matting, \$.....	Tent Rental, \$.....
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$.....	Minister, \$.....
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill.....	\$.....
By Amount Paid in Advance.....	\$.....
Balance.....	\$.....
Entered into Ledger, page.....	or below.....

	Total, \$		By Cash.....	\$

Names of Pall Bearers Oliver Hays, E. Hays, L. W. Johnson, Dan Robinson, A. H. Spangler, C. J. Sherman

Names of Lodges Lodge - Helen Anthony, Lucy Johnson, Ray Jones, J. R. Wells, Lena Paul

Lodge Insurance, \$..... Other Insurance, \$.....

Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1266 Yearly No. 43 Date Dec. 27, 1924

Name of Deceased Mary E. Sawyer (What Race) White (Where Born) Illinois

Husband---
 Wife---Widow
 Son---Daughter of }

Charge to Wm. Dean

Address North Bend, Neb.

Order Given by Frank Payne

How Secured

Date of Funeral Dec. 27, 1924

Residence North Bend, Neb.

Place of Death Ill.

Funeral Services at Cemetery only

Time of Funeral Service 3 P.M.

Clergyman J. H. Gray

Certifying Physician Dr. Deane

His Residence North Bend, Neb.

Number of Burial Certificate

Cause of Death Senary, pneumonia
(Primary) (Secondary)

Date of Death Dec. 23, 1924

Occupation of the Deceased Housewife

Single or Married Single Religion

Date of Birth

Age 75 Years Months Days

Name of Father

His Birthplace

Name of Mother

(Maiden Name)

Her Birthplace

Body to be Shipped to

Size and Style of Casket or Coffin

Manufactured by Rice Hill

Interment at Cemetery

Diagram of Lot or Vault

Lot No. 592

Grave No. 2-3

Section No.

Casket or Coffin	\$			
Metallic Lining	<small>(State Kind)</small>			
Outside Box	<small>(State Kind)</small>			
Grave Vault	<small>(State Kind)</small>			
Burial Suit or Dress				
Burial Slippers and Hose				
Engraving Plate				
Embalming Body (with	<small>Fluid</small>			
Dressing Body, \$	Shaving, \$			
Hair Dressing				
Use of Folding Chairs				
“ “ Candelabrum, \$	Candles, \$			
Door Badge, \$	Gloves, \$			
Hearse <u>& Professional</u>		<u>2.00</u>		
Auto Limousines to Cemetery, @ \$				
Autos to R. R. Station, @ \$				
Other Vehicle Service				
Aeroplane Service				
Death Notices in	Newspapers			
	<small>(Names of Newspapers)</small>			
Flowers, \$	Rental of Plants, \$			
Other Decorations				
Outlay for Lot				
Opening Grave or Vault		<u>8.00</u>		
Lining Grave with Evergreen or Muslin				
Matting, \$	Tent Rental, \$			
Use of Lowering Device				
Rental of Vault				
Outlay for Shipping Charges				
Removal Charges				
Incineration				
Personal Services				
Singers				
Church Charges, \$	Minister, \$ <u>X</u>	<u>2.50</u>		
Telegrams and Telephone Charges				
Pall Bearer Service				
Total Footing of Bill			\$	
By Amount Paid in Advance			\$	
Balance			\$	
Entered into Ledger, page				or below

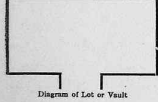
To Funeral Charges	Total, \$	By Cash	\$
<u>Shipping ductor - P. E. Gray</u>			
<u>North Bend, Neb.</u>			
Names of Pall Bearers <u>Carl Bards, Labe, G. H. Johnson, Isaac Hunter, Marion Smith, J. Otis Hill</u>			
Names of Lodges			
Lodge Insurance, \$			
Other Insurance, \$			
Names of Near Relatives			

RECORD OF FUNERAL

Total No. 1268 Yearly No. 2 Date January 13, 1927

Name of Deceased John Jervis (What Race) White (Where Born) England

Charge to Mr. Laura Jervis
 Address
 Order Given by Margaret Dehn
 How Secured
 Date of Funeral Jan. 13, '27
 Residence 633 N. 2 St., Hannu
 Place of Death Eng.
 Funeral Services at St. M.
 Time of Funeral Services 2:00 P.M.
 Clergyman J. M. Dutton, J. M. Hill, Aid.
 Certifying Physician Dr. E. J. Murphy
 His Residence Hannu
 Number of Burial Certificate
 Cause of Death United States Requiem (Primary) (Secondary)
 Date of Death Jan. 13, 1927
 Occupation of the Deceased General Coal Miner
 Single or Married Married Religion R. O. N.
 Date of Birth July 28, 1856
 Age 70 Years 9 Months 14 Days
 Name of Father John Jervis
 His Birthplace England
 Name of Mother (Maiden Name)
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at J. M. Denton Cemetery



Lot No.
 Grave No.
 Section No.

Casket or Coffin	<u>131 Exp. Large</u>	\$ <u>75.00</u>
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress	<u>Paragon</u> (State Kind)	<u>1.50</u>
Burial Slippers and Hose	<u>White & Tan</u>	<u>2.60</u>
Engraving Plate		
Embalming Body (with Fluid)		<u>2.50</u>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse	<u>Exp. (2 seats)</u>	<u>10.00</u>
Auto Limousines to Cemetery	@ \$	
Autos to R. R. Station	@ \$	
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
Flowers, \$	Rental of Plants, \$	<u>6.00</u>
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		<u>3.72</u>
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page	or below	

To Funeral Charges	Total, \$	By Cash	\$
<u>Body shipped to Denton</u>	<u>1/3.77</u>		
<u>on 8:20 P.M. train</u>			

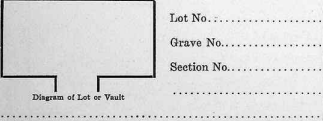
Names of Pall Bearers J. M. Hill, Geo. Johnson, Marion Smith, Otis White
 Names of Lodges Logans
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1269 Yearly No. 3 Date Jan. 14, 1927
 Name of Deceased Mary E. Van Boren (What Race) _____ (Where Born) _____
 Husband _____
 Wife - Widow _____
 Son - Daughter of Edna Boren, Dec.

Charge to Maria Boren
 Address _____
 Order Given by _____
 How Secured _____
 Date of Funeral Jan. 14, 1927
 Residence New Park Sup. Decatur Co. Ga.
 Place of Death Swain
 Funeral Services at Swain
 Time of Funeral Service 2 P.M.
 Clergyman Father Meyer
 Certifying Physician J. H. Reed
 His Residence Swain Co. Ga.
 Number of Burial Certificate _____
 Cause of Death Multiple Sclerosis
 (Primary) _____ (Secondary) _____
 Date of Death Jan. 12, 1927
 Occupation of the Deceased Ch. Wm.
 Single or Married Divorced Religion Catholic
 Date of Birth Aug. 2, 1858
 Age 68 Years 3 Months 10 Days
 Name of Father John Boren
 His Birthplace Ireland
 Name of Mother Athene Spear
 (Maiden Name) _____
 Her Birthplace Ireland
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by _____
 Interment at Andover, Mo. Cemetery _____

Casket or Coffin	<u>920 B. G.</u>	<u>400 00</u>
Metallic Lining	(State Kind) _____	
Outside Box	(State Kind) _____	
Grave Vault	<u>Lava</u>	<u>110 00</u>
Burial Suit or Dress	(State Kind) _____	<u>32 00</u>
Burial Slippers and Hose	(State Kind) _____	<u>3 50</u>
Engraving Plate	(State Kind) _____	
Embalming Body (with _____ Fluid)		<u>2 50</u>
Dressing Body, \$ _____ Shaving, \$ _____		
Hair Dressing		
Use of Folding Chairs		<u>XX</u>
" " Candelabrum, \$ _____ Candles, \$ _____		
Door Badge, \$ _____ Gloves, \$ _____		
Hearse		<u>15 00</u>
Auto Limousines to Cemetery @ \$ _____		<u>XX</u>
Autos to R. R. Station @ \$ _____		
Other Vehicle Service		
Acroplane Service		
Death Notices in _____ Newspapers		
(Names of Newspapers) _____		
Flowers, \$ _____ Rental of Plants, \$ _____		<u>7 50</u>
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<u>15 00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$ _____ Tent Rental, \$ _____		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<u>XX</u>
Singers		
Church Charges, \$ _____ Minister, \$ _____		
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$ _____
By Amount Paid in Advance		\$ _____
Balance		\$ _____
Entered into Ledger, page _____		or below _____



To Funeral Charges	By Cash
Total, \$ _____	\$ _____

Names of Pall Bearers Hubert Burtch, Levi Snader, Ed. North, John Jones, Ora Switzer, Lawrence Taylor
 Names of Lodges _____
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1270 Yearly No. 7 Date Jan. 19, 1927
 Name of Deceased Peter J. Sikler, White, Sumner Dist. 4th
 (Husband - A) (What Race) (Where Born)
 (Wife - Widow) (Where Born)
 (Son - Daughter of)

Charge to.....
 Address.....
 Order Given by.....
 How Secured.....
 Date of Funeral Jan. 19, 1927
 Residence St. Louis, Mo.
 Place of Death St. Louis, Mo.
 Funeral Services at Saints Church, Lamson
 Time of Funeral Service 8 P.M.
 Clergyman Fr. T. J. Hussey, Fr. H. Conway, Coad.
 Certifying Physician Dr. H. Saylor
 His Residence N. W. 13th
 Number of Burial Certificate.....
 Cause of Death Arteriosclerosis
 (Primary) (Secondary)
 Date of Death Jan. 18, 1927
 Occupation of the Deceased Medical Retail Dispensary
 Single or Married Married Religion C. O. S.
 Date of Birth.....
 Age 72 Years..... Months..... Days.....
 Name of Father.....
 His Birthplace.....
 Name of Mother..... (Maiden Name)
 Her Birthplace.....
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Lamson, St. Louis Nat. Hill Cemetery
 Lot No. 135
 Grave No. 213
 Section No.....
 Diagram of Lot or Vault

Casket or Coffin.....	\$	
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$.....	Shaving, \$.....	
Hair Dressing.....		
Use of Folding Chairs.....		
" Candelabrum, \$.....	Candles, \$.....	
Door Badge, \$.....	Gloves, \$.....	
Hearse.....		15.00
Auto Limousines to Cemetery, @ \$.....		2.50
Autos to R. R. Station.....		
Other Vehicle Service.....		2.50
Aeroplane Service.....		
Death Notices in.....	Newspapers.....	
(Names of Newspapers)		
Flowers, \$.....	Rental of Plants, \$.....	
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		9.50
Lining Grave with Evergreen or Muslin.....		
Matting, \$.....	Tent Rental, \$.....	
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	
By Amount Paid in Advance.....	\$	
Balance.....	\$	
Entered into Ledger, page.....	or below.....	

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Paul Lange, E. J. White, John Anderson, John Smith, Art Long, A. M. Hall
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1271 Yearly No. 5 Date Jan 23, 1927 1927
 Name of Deceased A. Thomas Leidy Thompson (What Race) White (Where Born) Boston Co, Mass
 Husband - Wife - Widow
 Son - Daughter of Francis T. Thompson

Charge to F. L. Thompson
 Address Lamar, La
 Order Given by F. L. Thompson
 How Secured _____
 Date of Funeral Jan 23, 1927
 Residence Lamar, La (212 So. State St.)
 Place of Death Wag. S. Church
 Funeral Services at W. D. S. Church
 Date of Funeral Service Jan 23, 1927
 Clergyman W. C. Taylor; J. J. Jones, asst.
 Certifying Physician Dr. C. S. Smith
 His Residence Lamar

Casket or Coffin	<u>1200</u>	\$ <u>100.00</u>
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	<u>xx</u>
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		<u>2.00</u>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<u>12.50</u>
Auto Limousines to Cemetery 1 @ \$		<u>2.50</u>
Autos to R. R. Station @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in _____ Newspapers	(Names of Newspapers)	<u>8.00</u>
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<u>9.50</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$ _____
By Amount Paid in Advance		\$ _____
Balance		\$ _____
Entered into Ledger, page _____ or below _____		

Number of Burial Certificate _____
 Cause of Death Consumption of Alveoli
 (Primary) (Secondary)
 Date of Death Jan 20, 1927
 Occupation of the Deceased Asst. Eng.
 Single or Married Married Religion R.O.
 Date of Birth June 19, 1855
 Age 71 Years 7 Months 1 Days
 Name of Father Geo. Mundy jr.
 His Birthplace New York
 Name of Mother Charis Anderson
 (Maiden Name)
 Her Birthplace Tenn.
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by Rose Hill
 Interment at _____ Cemetery

Lot No. 14A
 Grave No. 3
 Section No. _____
 Diagram of Lot or Vault _____

To Funeral Charges	Total, \$	By Cash	\$
Names of Pall Bearers	<u>Wesley Deltombe, Dave DeLombard, John Lane, Art Lane, Earl Lewis, Carl DeLombard</u>		
Names of Lodges	<u>F. B. Club, Sandy, Jennie Lewis, Mary Lewis, Masella DeLombard</u>		
Lodge Insurance, \$		Other Insurance, \$	
Names of Near Relatives			

RECORD OF FUNERAL

Total No. *1272* Yearly No. *J* Date *January 16, 1927*
 Name of Deceased *Victoria Alice Brown* (What Race) *White* (Where Born) *Ohio, Ohio*
 Husband *Wm. J. Brown*
 Wife *Widow*
 Son *Daughter* of *John J. Brown*

Charge to *Samson*
 Address *Samson, Ia.*
 Order Given by *Geo. J. Brown*
 How Secured *5*
 Date of Funeral *Feb. 14, 27*
 Residence *Samson, Ia.*
 Place of Death *La. State Hosp, Des Moines*
 Funeral Services at *W. S. Church, Samson*
 Time of Funeral Service *2:30 P.M.*
 Clergyman *W. S. Church, D. G. Washington*
 Certifying Physician *Hugh H. Taylor*
 His Residence *Des Moines, Ia.*
 Number of Burial Certificate *1*
 Cause of Death *Acute Viral Intra-cerebral Myelitis*
 (Primary) (Secondary)
 Date of Death *Feb. 7, 1927*
 Occupation of the Deceased *at home*
 Single or Married *Married* Religion *D. S.*
 Date of Birth *Aug. 2, 1858*
 Age *68* Years *9* Months *1* Days
 Name of Father *John Buckingham*
 His Birthplace *England*
 Name of Mother *Jean Buckland*
 (maiden Name)
 Her Birthplace *England*
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by _____
 Interment at *Samson, Des Moines* Cemetery

Lot No. *457*
 Grave No. *4*
 Section No. _____
 Diagram of Lot or Vault

Casket or Coffin	\$	
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with _____ Fluid)		
Dressing Body, \$ _____ Shaving, \$ _____		
Hair Dressing		
Use of Folding Chairs		
“ “ Candelabrum, \$ _____ Candles, \$ _____		
Door Badge, \$ _____ Gloves, \$ _____		
Hearse		<i>15.00</i>
Auto Limousines to Cemetery @ \$ <i>2.50</i>		<i>10.00</i>
Autos to R. R. Station @ \$ _____		
Other Vehicle Service		
Acroplane Service		
Death Notices in _____ Newspapers		
(Names of Newspapers)		
Flowers, \$ _____ Rental of Plants, \$ _____		<i>12.00</i>
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<i>9.50</i>
Lining Grave with Evergreen or Muslin		
Matting, \$ _____ Tent Rental, \$ _____		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<i>10.00</i>
Singers		
Church Charges, \$ _____ Minister, \$ _____		
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page _____ or below		

To Funeral Charges	Total, \$	By Cash	\$

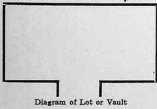
Names of Pall Bearers *Oracy White, Fred Knack, Geo. Allen, Fred Pyper, W. P. Hoffman, Oscar Anderson*
 Names of Lodges *Samson, Franklyn, Wills, Geo. Linway, Isaac, Mrs. Nathaniel*
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1273 Yearly No. 7 Date Feb. 11, 1927
 Name of Deceased Mary Jane Hedger White Harrison, Mo.
Husband--- (What Race) (Where Born)
Wife---Widow
Son---Daughter of M. C. Hedger

Charge to.....
 Address.....
 Order Given by.....
 How Secured.....
 Date of Funeral Feb. 11, 1927
 Residence Harrison, Mo.
 Place of Death Mo.
 Funeral Services at Mo.
 Time of Funeral Service 11:45 a.m.
 Clergyman J. C. Blake
 Certifying Physician S. G. Yeers
 His Residence Lamar, Mo.
 Number of Burial Certificate.....
 Cause of Death Organic Heart
(Primary) (Secondary)
 Date of Death Feb. 10, 27
 Occupation of the Deceased ah. Lays
 Single or Married Married Religion Baptist
 Date of Birth Aug. 19, 1851
 Age 76 Years 6 Months 0 Days
 Name of Father Volentine Alford
 His Birthplace North Carolina
 Name of Mother Nancy Anderson
(Maiden Name)
 Her Birthplace North Carolina
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Pro. Hill Cemetery
 Lot No. 687 Single
 Grave No.....
 Section No.....

Casket or Coffin.....	<u>100.00</u>	\$ <u>150.00</u>
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	
Grave Vault.....	<u>Low</u>	<u>110.00</u>
Burial Suit or Dress.....	(State Kind)	<u>22.50</u>
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		<u>2.50</u>
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		<u>12.00</u>
Auto Limousines to Cemetery, @ \$.....		
Autos to R. R. Station, @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....	(Names of Newspapers)	
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations.....		
Outlay for Lot.....		<u>500.00</u>
Opening Grave or Vault.....		<u>11.50</u>
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....		\$.....
By Amount Paid in Advance.....		\$.....
Balance.....		\$.....
Entered into Ledger, page..... or below		



To Funeral Charges.....	Total, \$	By Cash.....	\$

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1314 Yearly No. 8 Date Feb. 19, 1927

Name of Deceased Currey, Henry (What Race) White (Where Born) Mich. Co., Kentucky

Husband...
 Wife...Widow May Susan May Currey
 Son...Daughter of

Charge to Edgar J. Adams, Secretary

Address

Order Given by

How Secured

Date of Funeral Feb. 19, 1927

Residence Birmingham, Ala., Decatur, Ga.

Place of Death Alb. Hosp., Decatur

Funeral Services at St. Charles Church

Time of Funeral Service 7:30 P.M.

Clergyman W. C. Caldwell

Certifying Physician H. M. Wolfe

His Residence Lamar, Ga.

Number of Burial Certificate

Cause of Death Heart Disease
(Primary) (Secondary)

Date of Death Feb. 17, 1927

Occupation of the Deceased Ret. Farmer

Single or Married Married Religion

Date of Birth March 29, 1835

Age 91 Years 10 Months 18 Days

Name of Father Thomas Henry

His Birthplace Kentucky

Name of Mother Elizabeth Miller
(Maiden Name)

Her Birthplace

Body to be Shipped to

Size and Style of Casket or Coffin

Manufactured by E. D. Chapel

Interment at _____ Cemetery

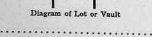


Diagram of Lot or Vault

Lot No.

Grave No.

Section No.

Casket or Coffin	<u>1400</u>	\$ <u>16.50</u>
Metallic Lining		
Outside Box		
Grave Vault		<u>11.00</u>
Burial Suit or Dress		<u>2.50</u>
Burial Slippers and Hose		<u>3.50</u>
Engraving Plate		
Embalming Body (with _____ Fluid)		<u>2.50</u>
Dressing Body, \$ _____ Shaving, \$ _____		
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$ _____ Candles, \$ _____		
Door Badge, \$ _____ Gloves, \$ _____		
Hearse		<u>1.50</u>
Auto Limousines to Cemetery @ \$ _____		
Autos to R. R. Station @ \$ _____		
Other Vehicle Service		
Aeroplane Service		
Death Notices in _____ Newspapers		
	<small>(Names of Newspapers)</small>	
Flowers, \$ _____ Rental of Plants, \$ _____		<u>6.00</u>
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Mustin		
Matting, \$ _____ Tent Rental, \$ _____		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$ _____ Minister, \$ _____		
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$ _____
By Amount Paid in Advance		\$ _____
Balance		\$ _____
Entered into Ledger, page _____ or below		

To Funeral Charges	Total, \$				By Cash		

Names of Pall Bearers Arch Smith, John Haskins, Ray Johnson, Everett Bell, Fred Rauch, R. M. Russell

Names of Lodges

Lodge Insurance, \$ _____ Other Insurance, \$ _____

Names of Near Relatives

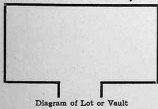
RECORD OF FUNERAL

Total No. 1275 Yearly No. 9 Date Feb. 27 1927
 Name of Deceased Stella Bohm White Jawa
Husband-- (What Race) (Where Born)
Wife--Widow
Son--Daughter of J. F. Bohm

Charge to _____
 Address _____
 Order Given by Marcella Schuch
 How Secured _____
 Date of Funeral Feb. 27, 1927
 Residence Lamoni, Iowa
 Place of Death Jawa City, Iowa
 Funeral Services at W. S. Koluner, Lamoni
 Time of Funeral Service 2:30 P.M.
 Clergyman D. S. Williams, A. G. Spanglin
 Certifying Physician P. O. Parker
 His Residence Jawa City
 Number of Burial Certificates _____
 Cause of Death Ch. Intestinal Myelitis
(Primary) (Secondary)
 Date of Death Feb. 25, 1927
 Occupation of the Deceased at home
 Single or Married Married Religion W. S.
 Date of Birth _____
 Age 27 Years 2 Months 21 Days
 Name of Father Theo. Schuch
 His Birthplace Ia.
 Name of Mother Laura Davis
(Maiden Name)
 Her Birthplace Ia.
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by _____
 Interment at Lamoni, Iowa Hill Cemetery

Casket or Coffin	\$	
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with _____ Fluid)		
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15 00
Auto Limousines to Cemetery @ \$		2 25
Autos to R. R. Station @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in _____ Newspapers		
<small>(Names of Newspapers)</small>		
Flowers, \$	Rental of Plants, \$	5 00
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		7 50
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		10 00
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
<u>Attendants</u>		2 00
Total Footing of Bill	\$	71 50
By Amount Paid in Advance <u>By Discount</u>	\$	11 50
Balance	\$	30 00
Entered into Ledger, page _____ or below _____		

Lot No. 122
 Grave No. 4
 Section No. _____



To Funeral Charges	Total, \$				By Cash	\$

Names of Pall Bearers Earl Lewis, Geo. Lewis, Roy Mathews, Lugo, Jones, Dewey, White, Vaughn, Seely
 Names of Lodges St. Vincent, White, Owen, Johnson, Grand, United, etc.
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____

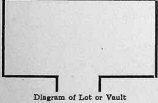
RECORD OF FUNERAL

Total No. 1277 Yearly No. 46 Date March 4 1927
 Name of Deceased Anna Delfine Smith Albert Edwards Idaho
 Husband Wife Son Daughter D. L. Albert (What Race) (Where Born)

Charge to Sammy
 Address Sammy
 Order Given by C. Dewey White
 How Secured
 Date of Funeral March 4, 1927
 Residence Sammy
 Place of Death See O. S. Church
 Funeral Services at O. S. Church
 Time of Funeral Service 3:30 P. M.
 Clergyman Ruben Case; W. Paul, asst.
 Certifying Physician C. C. Siskuy
 His Residence Sammy, Ala.
 Number of Burial Certificate
 Cause of Death Bright's disease
 (Primary) (Secondary)
 Date of Death March 1, 1927
 Occupation of the Deceased farmer
 Single or Married Married Religion O. S.
 Date of Birth Feb. 14, 1860
 Age 67 Years 9 Months 15 Days
 Name of Father Matthew Brewer
 His Birthplace Sammy
 Name of Mother Margaret Ann McNeal
 (Maiden Name)
 Her Birthplace Washington Co., Tenn.
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by Ross Hill
 Interment at Ross Hill Cemetery

Casket or Coffin	#1400 Spruce	\$ 16.50
Metallic Lining		
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress	<u>Pruning</u>	1.50
Burial Slippers and Hose		3.50
Engraving Plate		
Embalming Body (with	Fluid)	3.50
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15.00
Auto Limousines to Cemetery? @ \$		25.00
Autos to R. R. Station @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		7.50
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pal Bearer Service		
Total Footing of Bill		\$ 87.50
By Amount Paid in Advance	<u>B. Devent</u>	\$ 60.00
Balance		\$ 27.50
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Lot No. 158
 Grave No. 1
 Section No.



To Funeral Charges	Total, \$	By Cash	\$

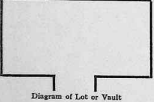
Names of Pall Bearers J. M. Blair, John N. ...
 Names of Lodges F. O. ...
 Singers Mrs. ...
 Life Insurance, \$... Other Insurance, \$...
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1278 Yearly No. 12 Date March 5, 1937 19-37
 Name of Deceased Peter Costello *White* (What Race) South Hill, Ind. (Where Born)
 Husband---
 Wife---Widow
 Son---Daughter

Charge to Santa Hill
 Address
 Order Given by Mrs. J. P. Mitchell, Nelson, Ia.
 How Secured
 Date of Funeral March 5, 1937
 Residence Nemours, Ia., Santa Hill
 Place of Death Ind.
 Funeral Services at Ind.
 Time of Funeral Service 2:30 P.M.
 Clergyman Rev. Francis Joseph Duffy, Ind.
 Certifying Physician Dr. Geller
 His Residence Nemours
 Number of Burial Certificate
 Cause of Death Cerebral Hemorrhage *Stroke* (Primary) Brainlets (Secondary)
 Date of Death March 2, 1937
 Occupation of the Deceased Ret. Soldier
 Single or Married Single Religion S. O. S.
 Date of Birth Aug. 27, 1861
 Age 65 Years 6 Months 7 Days
 Name of Father John R. Costello
 His Birthplace Mo. Ia.
 Name of Mother Emma J. Costello (Maiden Name)
 Her Birthplace Spring Hill, Ia.
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by Boon Hill
 Interment at Boon Hill Cemetery

Lot No. 916
 Grave No. 2-3
 Section No.



Casket or Coffin.....	\$ <u>85.00</u>
Metallic Lining.....	.....
..... (State Kind)	.....
Outside Box.....	.....
..... (State Kind)	.....
Grave Vault.....	.....
..... (State Kind)	.....
Burial Suit or Dress.....	.....
Burial Slippers and Hose.....	.....
Engraving Plate.....	.....
Embalming Body (with..... Fluid)	.....
Dressing Body, \$..... Shaving, \$.....	<u>25.00</u>
Hair Dressing.....	.....
Use of Folding Chairs.....	.....
“ “ Candelabrum, \$..... Candles, \$.....	.....
Door Badge, \$..... Gloves, \$.....	.....
Hearse.....	<u>15.00</u>
Auto Limousines to Cemetery..@ \$.....	<u>5.00</u>
Autos to R. R. Station.....@ \$.....	.....
Other Vehicle Service.....	.....
Aeroplane Service.....	.....
Death Notices in..... Newspapers.....	.....
..... (Names of Newspapers)	.....
Flowers, \$..... Rental of Plants, \$.....	.....
Other Decorations.....	.....
Outlay for Lot.....	.....
Opening Grave or Vault.....	<u>9.50</u>
Lining Grave with Evergreen or Muslin.....	.....
Matting, \$..... Tent Rental, \$.....	.....
Use of Lowering Device.....	.....
Rental of Vault.....	.....
Outlay for Shipping Charges.....	.....
Removal Charges.....	.....
Incineration.....	.....
Personal Services.....	.....
Singers.....	.....
Church Charges, \$..... Minister, \$.....	.....
Telegrams and Telephone Charges.....	.....
Pall Bearer Service.....
Total Footing of Bill.....	\$
By Amount Paid in Advance.....	\$
Balance.....	\$
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To Funeral Charges.....	Total, \$	By Cash..... \$
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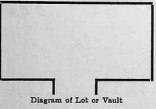
Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1319 Yearly No. 13 Date March 30 1927
 Name of Deceased Margaret Etta Graham White Ohio
Husband--Wife--Widow (What Race) (Where Born)
Son--Daughter of Eustace Graham, Dec.

Charge to.....
 Address.....
 Order Given by Frank & Beal Graham
 How Secured.....
 Date of Funeral March 30, '27
 Residence Hamilton Imp. Decatur Co., Ia.
 Place of Death Hamilton, Ia.
 Funeral Services at Christian Church, Hamilton
 Time of Funeral Service 3:30 P.M.
 Clergyman Wm. Wales
 Certifying Physician S. P. Neal
 His Residence Waverly, Ia.
 Number of Burial Certificate.....
 Cause of Death Arterial Sclerosis
(Primary) (Secondary)
 Date of Death March 28, 1927
 Occupation of the Deceased at home
 Single or Married Widow Religion.....
 Date of Birth Dec 11
 Age 79 Years 3 Months 11 Days
 Name of Father Walter B. Weston
 His Birthplace.....
 Name of Mother.....
(Maiden Name)
 Her Birthplace.....
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Hamilton Cemetery

Casket or Coffin	<u>1500 I.D.</u>	\$ <u>175.00</u>
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	<u>Lava</u>	<u>11.00</u>
Burial Suit or Dress	(State Kind)	
Burial Slippers and Hose		<u>20.00</u>
Engraving Plate		
Embalming Body (with..... Fluid)		<u>xx</u>
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse		<u>15.00</u>
Auto Limousines to Cemetery @ \$.....		<u>xx</u>
Autos to R. R. Station @ \$.....		
Other Vehicle Service		
Acroplane Service		
Death Notices in..... Newspapers		
<small>(Names of Newspapers)</small>		
Flowers, \$..... Rental of Plants, \$.....		<u>19.00</u>
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges		
Pal Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page..... or below.....		



Lot No.....
 Grave No.....
 Section No.....

	To Funeral Charges		Total,		By Cash	
			\$			\$

Names of Pall Bearers Same
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

*Compiled by F. J. FRINKMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1280 Yearly No. 17 Date April 5, 1927
 Name of Deceased Jacob Mader (What Race) White Basel, Canton of Bern, Switzerland (Where Born)
 Husband Wife--Widow Son--Daughter of Mary Ann Mader

Charge to Ed.
 Address Jacob Mader
 Order Given by Jacob Mader
 How Secured Apr. 5, '27
 Date of Funeral Apr. 3, '27
 Residence 224 N. 3rd St., Linn, Iowa
 Place of Death Spec.
 Funeral Services at D. S. Church
 Time of Funeral Service 3 P. M.
 Clergyman E. H. Smith & J. P. Nolle, M.D.
 Certifying Physician C. G. Harvey
 His Residence Linn, Iowa
 Number of Burial Certificate
 Cause of Death Chronic Interstitial Nephritis
(Primary) (Secondary)
 Date of Death Apr. 3, '27
 Occupation of the Deceased Wm. Farmer
 Single or Married Married Religion R. O. S.
 Date of Birth Aug. 15, 1840
 Age 86 Years 18 Months 18 Days
 Name of Father Christian Mader
 His Birthplace Mullerbach, C. of B., Switzerland
 Name of Mother Anna Mader Huber
(Maiden Name)
 Her Birthplace Basel, C. of B., Switzerland
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by Robt. Hill
 Interment at Robt. Hill Cemetery
 Lot No. 773
 Grave No. 4
 Section No.

Casket or Coffin	\$ 2.00	00
Metallic Lining		
Outside Box	X	X
Grave Vault		
Burial Suit or Dress	1.50	50
Burial Slippers and Hose	2.50	50
Engraving Plate		
Embalming Body (with Fluid)	2.50	00
Dressing Body, Shaving		
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, Candles		
Door Badge, Gloves	1.50	00
Hearse	2.50	50
Auto Limousines to Cemetery @ \$		
Autos to R. R. Station @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in Newspapers		
Flowers, Rental of Plants	2.40	00
Other Decorations		
Outlay for Lot		
Opening Grave or Vault	9.50	50
Lining Grave with Evergreen or Muslin		
Matting, Tent Rental		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, Minister		
Telegrams and Telephone Charges		
Pall Bearer Service		
<u>Funeral repeated</u>	5.00	00
Total Footing of Bill		
By Amount Paid in Advance		
Balance		
Entered into Ledger, page		

To Funeral Charges	Total,	\$			By Cash	\$
<u>25</u>						

Names of Pall Bearers American Legion
 Names of Lodges Logan, 6 Union Butte, Byron Needle, Davis Station, Grand Middle
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

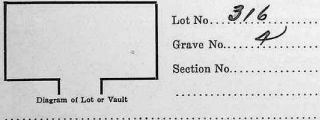
Total No. *1281* Yearly No. *15* Date *April 17, 1937*

Name of Deceased *Samuel Edward Spencer* (What Race) *White* (Where Born) *Burlington, Ill.*

Husband—
Wife—Widow } *Sarah Ann*
Son—Daughter of }

Charge to.....
Address.....
Order Given by.....
How Secured.....
Date of Funeral *Apr. 17, '37*
Residence *Camden, Iowa*
Place of Death *Des Moines, Iowa*
Funeral Services at *W. S. Church*
Time of Funeral Service *2, P.M.*
Clergyman *J. T. Dill, C. L. Fayer, Ass.*
Certifying Physician *L. P. West*
His Residence *Waverly City, Iowa*
Number of Burial Certificate.....
Cause of Death *Peritonitis - carcinoma of liver*
(Primary) (Secondary)
Date of Death *Apr. 15, '37*
Occupation of the Deceased *Farmer*
Single or Married *Married* Religion.....
Date of Birth *March 30, 1851*
Age *76* Years *0* Months *15* Days
Name of Father *John Henry*
His Birthplace *Philadelphia, Penn.*
Name of Mother *May Ann Thony*
(Maiden Name)
Her Birthplace *Ohio*
Body to be Shipped to.....
Size and Style of Casket or Coffin.....
Manufactured by.....
Interment at *Rose Hill* Cemetery

Casket or Coffin.....	\$	<i>150.00</i>
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	<i>25.</i>
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		<i>25.00</i>
Dressing Body, \$.....	Shaving, \$.....	
Hair Dressing.....		
Use of Folding Chairs.....		
" " " Candelabrum, \$.....	Candles, \$.....	
Door Badge, \$.....	Gloves, \$.....	
Hearse.....		<i>15.00</i>
Auto Limousines to Cemetery <i>2</i> @ \$.....		<i>25.</i>
Autos to R. R. Station..... @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		
(Names of Newspapers)		
Flowers, \$.....	Rental of Plants, \$.....	
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		<i>8.50</i>
Lining Grave with Evergreen or Muslin.....		
Matting, \$.....	Tent Rental, \$.....	
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill..... \$.....		
By Amount Paid in Advance..... \$.....		
Balance..... \$.....		
Entered into Ledger, page..... or below.....		



To Funeral Charges..... Total, \$.....	By Cash..... \$.....

Names of Pall Bearers *R. A. Beltzman, H. A. Stull, C. H. Worn, O. L. Child, Herbert Rand, Leo Kelly*

Names of Lodges.....

Lodge Insurance, \$..... Other Insurance, \$.....

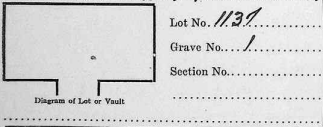
Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1383 Yearly No. 16 Date April 24, 1927
 Name of Deceased E. Lora Dutton Waddell (What Race) White (Where Born) Porter, Va. Va.
 Husband...
 Wife...
 Son... Daughter of } E. Lora Waddell

Charge to...
 Address...
 Order Given by...
 How Secured...
 Date of Funeral Apr. 24, '27
 Residence Stant, Iowa
 Place of Death Iowa City, Iowa
 Funeral Services at St. Wm. Church
 Time of Funeral Service 2:30 P. M.
 Clergyman Rev. W. S. Brown, Wm. Va.
 Certifying Physician D. W. Peterson
 His Residence Iowa City, Iowa
 Number of Burial Certificate...
 Cause of Death Brain Tumor, Chronic Otitis Media
 (Primary) (Secondary)
 Date of Death April 21, '27
 Occupation of the Deceased Student
 Single or Married Single Religion R. O. S.
 Date of Birth March 1, 1911
 Age 16 Years 1 Months 21 Days
 Name of Father E. Lora W. Waddell
 His Birthplace...
 Name of Mother Willa Waddell
 (Maiden Name)
 Her Birthplace...
 Body to be Shipped to from Iowa City
 Size and Style of Casket or Coffin...
 Manufactured by Brox Hill
 Interment at... Cemetery

Casket or Coffin.....	\$.....
Metallic Lining.....	(State Kind)
Outside Box.....	(State Kind)
Grave Vault.....	(State Kind)
Burial Suit or Dress.....	.....
Burial Slippers and Hose.....	.....
Engraving Plate.....	.....
Embalming Body (with..... Fluid)	.....
Dressing Body, \$.....	Shaving, \$.....
Hair Dressing.....	.....
Use of Folding Chairs.....	.....
“ “ Candelabrum, \$.....	Candles, \$.....
Door Badge, \$.....	Gloves, \$.....
Hearse.....	<u>2 trips</u> 25.00
Auto Limousines to Cemetery @ \$.....	.....
Autos to R. R. Station..... @ \$.....	.....
Other Vehicle Service.....	.....
Aeroplane Service.....	.....
Death Notices in..... Newspapers.....	.....
(Names of Newspapers)	
Flowers, \$.....	Rental of Plants, \$.....
Other Decorations.....	.....
Outlay for Lot.....	<u>20.00</u>
Opening Grave or Vault.....	<u>8.50</u>
Lining Grave with Evergreen or Muslin.....	.....
Matting, \$.....	Tent Rental, \$.....
Use of Lowering Device.....	.....
Rental of Vault.....	.....
Outlay for Shipping Charges.....	.....
Removal Charges.....	.....
Incineration.....	.....
Personal Services.....	<u>2.2</u>
Singers.....	.....
Church Charges, \$.....	Minister, \$.....
Telegrams and Telephone Charges.....	.....
Pall Bearer Service.....	.....
Total Footing of Bill.....	\$.....
By Amount Paid in Advance.....	\$.....
Balance.....	\$.....
Entered into Ledger, page.....	or below.....



To Funeral Charges.....	Total, \$.....	By Cash.....	\$.....

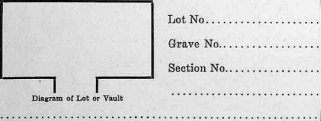
Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1383 Yearly No. 17 Date April 26, 1927
 Name of Deceased Richard Clark M. Kelly (What Race) White (Where Born) Indiana
 Husband--
 Wife--Widow
 Son--Daughter of

Charge to Will M. Kelly
 Address
 Order Given by
 How Secured
 Date of Funeral Apr. 26, 27
 Residence Post Box 657, Hamilton Co., Mo.
 Place of Death Res.
 Funeral Services at Res.
 Time of Funeral Service 2:30 P.M.
 Clergyman Will Thompson; J. E. Nelson
 Certifying Physician A. G. Brasler
 His Residence Highville, Mo.
 Number of Burial Certificate
 Cause of Death Chronic Myocarditis
 (Primary) (Secondary)
 Date of Death April 24, 27
 Occupation of the Deceased Farmer
 Single or Married Married Religion None
 Date of Birth July 10, 1894
 Age 32 Years 7 Months 10 Days
 Name of Father John M. Kelly
 His Birthplace
 Name of Mother Jane Thompson
 (Maiden Name)
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Anderson, Mo. Cemetery

Casket or Coffin	\$ 400.00
Metallic Lining	
(State Kind)	
Outside Box	
(State Kind)	
Grave Vault	110.00
(State Kind)	
Burial Suit or Dress	30.00
Burial Slippers and Hose	7.85
Engraving Plate	
Embalming Body (with Fluid)	2.50
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	15.00
Auto Limousines to Cemetery @ \$	XX
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in	Newspapers
(Name of Newspaper)	
Flowers, \$	Rental of Plants, \$
Other Decorations	12.00
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	XX
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	36
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below



Lot No.
 Grave No.
 Section No.

To Funeral Charges	Total, \$	By Cash	\$
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Names of Pall Bearers Everett Stealy, Vernon Stealy, Albert Dale, John Dale, Beas Latham W. Ben
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1292 Yearly No. 18 Date May 5, 1927

Name of Deceased Louisa M. Seward (White) (What Race)
 Wife or Widow of George Seward, Dec. (White Horn)

Charge to State Home
 Address

Order Given by Wm. J. Williams, N. York
 How Secured

Date of Funeral May 5, 1927
 Residence State Home, Camden, S. Car.

Place of Death W. Va.
 Funeral Services at W. Va.

Time of Funeral Service 2:30 P.M.
 Clergyman Chas. F. King - Catholic, Wash. D.C.

Certifying Physician Dr. R. J. Miller
 His Residence Camden, S. Car.

Number of Burial Certificate

Cause of Death Heart trouble, chronic Rheumatism
 (Primary) (Secondary)

Date of Death May 3, 1927
 Occupation of the Deceased None

Single or Married Married Religion P. O. S.

Date of Birth July 18, 1848
 Age 78 Years 9 Months 15 Days

Name of Father Samuel Seward
 His Birthplace Marquette, West Virginia

Name of Mother 7. J.
 (Maiden Name)

Her Birthplace

Body to be Shipped to

Size and Style of Casket or Coffin

Manufactured by Wm. H. Hill
 Interment at Wm. H. Hill Cemetery

Lot No. 916
 Grave No. 1

Section No.

Diagram of Lot or Vault

Casket or Coffin # <u>1292</u>	\$ <u>55.00</u>
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault (State Kind)	
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	<u>5.00</u>
Dressing Body, \$	
Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	
Candles, \$	
Door Badge, \$	
Gloves, \$	
Hearse	<u>1.00</u>
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$	
Rental of Plants, \$	
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	<u>5.00</u>
Lining Grave with Evergreen or Muslin	
Matting, \$	
Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$	
Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

To Funeral Charges	Total, \$				By Cash	\$

Names of Pall Bearers

Names of Lodges

Lodge Insurance, \$

Other Insurance, \$

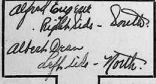
Names of Near Relatives

RECORD OF FUNERAL

Total No. 1285, Yearly No. 19, Date May 13 1927, Name of Deceased Albert Dean Hall, Wife (What Race) White, (Where Born) Lamoni, Iowa, Son/daughter of Donald Cecil Hall and Alfred Eugene Hall

Charge to, Address, Order Given by, How Secured, Date of Funeral May 12 1927, Residence Lamoni, Iowa, Place of Death, Funeral Services at, Time of Funeral Service 2 P.M., Clergyman E. Dwyer, Certifying Physician O. K. Sinyard, His Residence Lamoni, Number of Burial Certificates, Cause of Death (Alcohol Intoxication), (Alfred (Natural)), Date of Death May 12 1927, Occupation of the Deceased, Single or Married Single, Religion, Date of Birth May 12 1927, Age 0-0 Years, 0-0 Months, 0-1 Days, Name of Father Donald Cecil Hall, His Birthplace, Name of Mother Lydia C. Hall, Her Birthplace, Body to be Shipped to, Size and Style of Casket or Coffin, Manufactured by, Interment at

Table with 3 columns: Description, Amount, Total. Items include Casket or Coffin (\$40.00), Outside Box, Grave Vault, Burial Suit or Dress, etc. Total Footing of Bill is \$40.00.



Lot No. 665 S, Grave No., Section No.

Table with columns for 'To Funeral Charges', 'Total', and 'By Cash'.

Names of Pall Bearers, Names of Lodges, Lodge Insurance, Other Insurance, Names of Near Relatives

RECORD OF FUNERAL

Total No. 1286 Yearly No. 20 Date. May 22, 1927

Name of Deceased. Julia Thomson
 Husband... Samuel Thomson, Dec
 Wife...
 Son...
 Daughter of...

Charge to Chas. L. Hayes
 Address La. St. Hayes
 Order Given by Mr. Chas. L. Hayes
 How Secured
 Date of Funeral May 23, 1927
 Residence Ransom, La
 Place of Death Res. 225 N. 3rd St.
 Funeral Services at Chas. L. Hayes, Nec.
 Time of Funeral Service 11:30 P.M.
 Clergyman W. H. Wells
 Certifying Physician Dr. B. A. Gills
 His Residence Sammi
 Number of Burial Certificate
 Cause of Death Paralysis
 Date of Death May 20, 1927
 Occupation of the Deceased Widow
 Single or Married Widow Religion R. O. S.
 Date of Birth April 22, 1839
 Age 90 Years 0 Months 22 Days
 Name of Father Thomas A. Queltman
 His Birthplace Howay
 Name of Mother Chas. L. Hayes
 Her Birthplace Howay
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Sammi Rose Hill Cemetery

Casket or Coffin	<u>1.600.00</u>	\$	<u>200.00</u>
Metallic Lining	(State Kind)		
Outside Box	(State Kind)		
Grave Vault	(State Kind)		
Burial Suit or Dress			
Burial Slippers and Hose			
Engraving Plate			
Embalming Body (with)	Fluid		<u>2.50</u>
Dressing Body, \$	Shaving, \$		
Hair Dressing			
Use of Folding Chairs			
“ “ Candelabrum, \$	Candles, \$		
Door Badge, \$	Gloves, \$		<u>15.00</u>
Hearse			<u>7.50</u>
Auto Limousines to Cemetery	@ \$	<u>2.50</u>	
Autos to R. R. Station	@ \$		
Other Vehicle Service			
Acroplane Service			
Death Notices in	Newspapers		
Flowers, \$	Rental of Plants, \$		<u>19.00</u>
Other Decorations			
Outlay for Lot			
Opening Grave or Vault			<u>8.50</u>
Lining Grave with Evergreen or Muslin			
Matting, \$	Tent Rental, \$		
Use of Lowering Device			
Rental of Vault			
Outlay for Shipping Charges			
Removal Charges			
Incineration			
Personal Services			
Singers			
Church Charges, \$	Minister, \$		
Telegrams and Telephone Charges			
Pall Bearer Service			
Total Footing of Bill			
By Amount Paid in Advance			
Balance			
Entered into Ledger, page			

Lot No. 455
 Grave No. 3
 Section No.

Diagram of Lot or Vault

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Oliver Hayes, Chas. L. Rollins, Wm. Thomson, J. O. Thomson, Chas. L. Hayes, Ed. Hayes
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1387 Yearly No. 21

Date June 3, 1937

Name of Deceased L. Sumner Scott
Husband Wife Son Daughter
Address Flora & Della Scott

White Flora & Della Scott
(What Race) (Where Born)

Charge to Flora & Della Scott

Address Flora & Della Scott

Order Given by Flora Scott

How Secured _____

Date of Funeral June 3, 1937

Residence 626 W. 4 St., Lammie, Ia.

Place of Death Flora & Della Scott

Funeral Services at W. D. S. Church

Time of Funeral Service 2:30 P.M.

Clergyman W. E. P. Kelly, J. F. Sunstody, Bill

Certifying Physician L. A. S. Sura

His Residence Lammie

Number of Burial Certificate _____

Cause of Death Tuberculosis

Date of Death May 31, 1937

Occupation of the Deceased Minister, W. D. S.

Single or Married Married Religion W. D. S.

Date of Birth Aug 2, 1880

Age 56 Year 9 Months 2 Days 9

Name of Father John Scott

His Birthplace Sentville, Floyd Co., Ind.

Name of Mother Miriam Gagerly

Her Birthplace Kelley, Va.

Body to be Shipped to _____

Size and Style of Casket or Coffin _____

Manufactured by _____

Interment at Lammie - Res of W Cemetery

Lot No. 416

Grave No. 293

Section No. _____

Diagram of Lot or Vault _____

Casket or Coffin	<u>\$ 1400</u>	\$ <u>150 00</u>
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		<u>7 50</u>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<u>15 00</u>
Auto Limousines to Cemetery @ \$		<u>2 50</u>
Autos to R. R. Station @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<u>8 50</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pal Bearer Service		
Total Footing of Bill		\$ _____
By Amount Paid in Advance		\$ _____
Balance		\$ _____
Entered into Ledger, page _____		or below _____

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Geo. Brown, J. M. Stettin, J. O. Shead, S. E. Fowler, J. M. Will, E. E. Taylor

Names of Lodges Sigmas - Maggie Anthony, Lucy Hyman, Stella Lee, Grace Lee, Pauline Hill

Lodge Insurance, \$ _____ Other Insurance, \$ _____

Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1288 Yearly No. 22 Date June 17, 1927

Name of Deceased Thomas H. Ireland (What Race) White (Where Born) Ireland

Husband of Lena Irene Ireland
Wife of John J. Ireland
Son of John J. Ireland
Daughter of Lena Irene Ireland

Charge to Saints Home

Address Mr. J. S. Williams, Moton

Order Given by Mr. J. S. Williams, Moton

How Secured

Date of Funeral June 17, 1927

Residence Santa Rosa, Lamon, Iowa

Place of Death Santa Rosa, Iowa

Funeral Services at Wm. J. Bell

Time of Funeral Service 9:30 P.M.

Clergyman Wm. J. Bell

Certifying Physician W. C. Lindsey

His Residence Lamon

Number of Burial Certificate

Cause of Death Hyperemia of Prostate
(Primary) (Secondary)

Date of Death June 8, 1927

Occupation of the Deceased Gen. Murchison

Single or Married Married Religion M.

Date of Birth Mar 16, 1839

Age 86 Years 0 Months 39 Days

Name of Father David Ireland

His Birthplace Wm. J. Bell, Ireland

Name of Mother Mary Blackley
(Maiden Name)

Her Birthplace Wm. J. Bell, Ireland

Body to be Shipped to

Size and Style of Casket or Coffin

Manufactured by Wm. J. Bell & Lamon

Interment at Wm. J. Bell & Lamon Cemetery

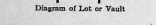


Diagram of Lot or Vault

Lot No. 368

Grave No. 4

Section No.

Casket or Coffin	\$	55.00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		12.50
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		5.00
Auto Limousines to Cemetery, @ \$		
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		8.50
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page		or below

To Funeral Charges..... Total, \$			By Cash..... \$		

Names of Pall Bearers J. M. Stettin, Fred Stetson, A. J. Springfield, J. W. Johnson, Frank Owen, Wm. J. Bell

Names of Lodges

Lodge Insurance, \$

Names of Near Relatives

RECORD OF FUNERAL

Total No. 1929 Yearly No. 33 Date June 21 1927

Name of Deceased Hannah C. Stevens Stewart (What Race) White (Where Born) Norway

Husband of Thomas Stewart (Peter Johnson)
Charge to
Address
Order Given by John B. Johnson
How Secured
Date of Funeral June 21, '27
Residence Linn, Iowa

Funeral Services at First Lutheran Church, Linn, Iowa
Time of Funeral Service 12:30 P.M.
Clergyman Eli Hayes, Day, Wm, A. L.
Certifying Physician J. S. G. Miles
His Residence Linn

Number of Burial Certificate
Cause of Death The (Primary) (Secondary)
Date of Death June 19, 1927
Occupation of the Deceased Linn
Single or Married Widowed Religion A. D. S.
Date of Birth May 29, 1845
Age 82 Years 9 Months 27 Days
Name of Father Jacob Hanson
His Birthplace Norway
Name of Mother N/K (Maiden Name) Norway
Her Birthplace
Body to be Shipped to
Size and Style of Casket or Coffin

Manufactured by
Interment at Fayette Twp. Home View Cem.
Lot No. So. Central
Grave No. H. S. S.
Section No.

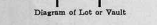


Table with columns for items and prices. Items include Casket or Coffin (\$100.00), Metallic Lining, Outside Box, Grave Vault, Burial Suit or Dress, Burial Slippers and Hose, Engraving Plate, Embalming Body (with Fluid) \$3.50, Dressing Body, Shaving, Hair Dressing, Use of Folding Chairs, Candelabrum, Candles, Door Badge, Gloves, Hearse \$12.00, Auto Limousines to Cemetery @ \$2.00, Autos to R. R. Station @ \$, Other Vehicle Service, Aeroplane Service, Death Notices in Newspapers, Flowers, Rental of Plants, Other Decorations, Outlay for Lot, Opening Grave or Vault, Lining Grave with Evergreen or Muslin, Matting, Tent Rental, Use of Lowering Device, Rental of Vault, Outlay for Shipping Charges, Removal Charges, Incineration, Personal Services, Singers, Church Charges, Minister, Telegrams and Telephone Charges, Pall Bearer Service. Total Footing of Bill, By Amount Paid in Advance, Balance, Entered into Ledger.

Table with columns for To Funeral Charges Total, \$ and By Cash \$

Names of Pall Bearers Oliver J. ... H. I. Hayes, J. M. ... C. D. ... L. J. ...
Names of Lodges

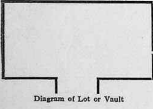
Lodge Insurance, \$ Other Insurance, \$
Names of Near Relatives

Compiled by P. J. FEENEYMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1290 Yearly No. 24 Date June 26 1927
 Name of Deceased Ernest Roger M. Peck, White & Oak, Perry Co., Ind.
 (What Race) (Where Born)
 Husband---
 Wife---Widow } Aquilla M. Peck

Charge to.....
 Address.....
 Order Given by.....
 How Secured.....
 Date of Funeral June 26, 27
 Residence Logansville, Indiana
 Place of Death Logansville, Indiana, Perry Co., Mo.
 Funeral Services at W.D. & Church, Hamon, La.
 Time of Funeral Service 2 P.M.
 Clergyman W.C. Pratt
 Certifying Physician.....
 His Residence.....
 Number of Burial Certificate.....
 Cause of Death Auto Accident
 (Primary) (Secondary)
 Date of Death June 24, 1927
 Occupation of the Deceased Retail Salesman
 Single or Married Single Religion W.D.S.
 Date of Birth March 5, 1903
 Age 24 Years 3 Months 19 Days
 Name of Father Aquilla M. Peck
 His Birthplace Perry Co., Ind.
 Name of Mother Stacy Jones
 (Maiden Name)
 Her Birthplace Perry Co., Ind.
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Hamon, La. Rose Hill Cemetery
 Lot No. 602 S
 Grave No.....
 Section No.....



Casket or Coffin <u>#700</u>	\$	<u>85.00</u>
Metallic Lining..... (State Kind)		
Outside Box..... (State Kind)		
Grave Vault..... (State Kind)		
Burial Suit or Dress.....		
Burial Slippers and Hose.....		<u>85</u>
Engraving Plate.....		
Embalming Body (with..... Fluid)		<u>1.00</u>
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		<u>15.00</u>
Auto Limousines to Cemetery @ \$.....		<u>2.50</u>
Autos to R. R. Station @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		
(Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations.....		
Outlay for Lot.....		<u>5.00</u>
Opening Grave or Vault.....		<u>8.50</u>
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
<u>W.C. Pratt & Co.</u>		<u>3.00</u>
<u>Savannah trip</u>		<u>2.50</u>
Total Footing of Bill.....	\$	<u>187.85</u>
By Amount Paid in Advance (Paid).....	\$	<u>17.35</u>
Balance.....	\$	<u>167.50</u>
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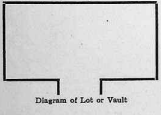
To Funeral Charges..... Total, \$							
<u>Interment at Savannah</u>							
<u>W.C. Pratt</u>							
By Cash..... \$							

Names of Pall Bearers Walter Lyndon, Max White, Charles Anderson, Fred Peck, Ed Spritzer, Wilby Anderson
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1291 Yearly No. 25 Date June 9, 1927 1927
 Name of Deceased Virian Marie Woodard (What Race) White (Where Born) Occatur City, La.
 Husband--
 Wife--Widow } Geo. H. Woodard
 Son-- }
 Daughter of }

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral June 9, 1927
 Residence Chickasaw, Harrison Co., Mo.
 Place of Death St. Ann's Church
 Funeral Services at St. Ann's Church
 Time of Funeral Service 2 P. M.
 Clergyman
 Certifying Physician H. C. Surrency
 His Residence
 Number of Burial Certificate
 Cause of Death Cardiac Decompensation
 (Primary) (Secondary)
 Date of Death June 6, 1927
 Occupation of the Deceased Student
 Single or Married Single Religion
 Date of Birth May 21, 1911
 Age 16 Years 0 Months 15 Days
 Name of Father Geo. H. Woodard
 His Birthplace Occatur Co., La.
 Name of Mother Pearl May Hill
 (Maiden Name)
 Her Birthplace Suffalo Co., Febr.
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Occatur City, La. Cemetery



Lot No.
 Grave No.
 Section No.

Casket or Coffin	#600	\$100 00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	75
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		25 00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15 00
Auto Limousines to Cemetery, @ \$		5 00
Autos to R. R. Station	@ \$	
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	5 50
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		775 00
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page		or below

To Funeral Charges	Total, \$	By Cash	\$
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Names of Pall Bearers Neighbors
 Names of Lodges Logan
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1292 Yearly No. 262 Date July 3, 1927
 Name of Deceased Seth Marion Bass White Wadswille, Ohio No. 1, 1927
(What Race) (Where Born)
 Husband Sarah C. Bass, Dec.
 Wife S. M. Bass, W.
 Son S. M. Bass, W.
 Daughter

Charge to S. M. Bass, W.
 Address Amey Place
 Order Given by Amey Place
 How Secured July 2, 1927
 Date of Funeral July 2, 1927
 Residence 424 1/2 St. Lemois, Iowa
 Place of Death Res.
 Funeral Services at L. D. S. Church
 Time of Funeral Service 2 P. M.
 Clergyman Mc Neal; S. J. Bell, Asst.
 Certifying Physician Dr. C. L. Stecher
 His Residence Lemois, Iowa
 Number of Burial Certificate 1
 Cause of Death Organic Fresh, Heart
(Primary) (Secondary)
 Date of Death July 1, 1927
 Occupation of the Deceased Hardware
 Single or Married Married Religion L. D. S.
 Date of Birth Oct. 10, 1874
 Age 52 Years 8 Months 21 Days
 Name of Father Seth Pitt Bass
 His Birthplace Wyauda Mo., 7. 27
 Name of Mother Laura Ann Lawrence
(Maiden Name)
 Her Birthplace Vermont
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by Rob. Hill
 Interment at _____ Cemetery

Casket or Coffin.....	\$ 150.00
Metallic Lining.....	(State Kind)
Outside Box.....	xx
Grave Vault.....	(State Kind)
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	25.00
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
“ “ Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	15.00
Auto Limousines to Cemetery.. @ \$.....	
Autos to R. R. Station..... @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
<small>(Names of Newspapers)</small>	
Flowers, \$..... Rental of Plants, \$.....	5.00
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	8.50
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	xx
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill..... \$	
By Amount Paid in Advance..... \$	
Balance..... \$	
Entered into Ledger, page..... or below	

Lot No. 187
 Grave No. 3
 Section No. _____
 Diagram of Lot or Vault

To Funeral Charges..... Total, \$		By Cash..... \$	

Names of Pall Bearers Oliver Taylor, Dan Anderson, Gus Johnson, Andrew Anderson, Eli Taylor, L. M. Stahl
 Names of Lodges _____
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1293 Yearly No. 37 Date July 10, 1927

Name of Deceased Charles Hall Dorelon, White (What Race) Harrison Co. Mo. (Where Born)

Husband Wife Son Daughter
 of Minnie Melissa Abair

Charge to Chas. Dorelon, Est.

Address St. Louis, Mo.

Order Given by Arthur Dorelon

How Secured July 10, 1927

Date of Funeral July 10, 1927

Residence Madison, Iowa

Place of Death St. Joseph, Mo.

Funeral Services at St. P.D. Church, Lamanu

Time of Funeral Service 2:30 P.M.

Clergyman Rev. Fred G. Hall, Advt.

Certifying Physician

His Residence

Number of Burial Certificate Arthur Schreis

Cause of Death Septic and Death
(Primary) (Secondary)

Date of Death July 8, 1927

Occupation of the Deceased Police Officer

Single or Married Married Religion

Date of Birth Feb 24, 1867

Age 60 Years 4 Months 14 Days

Name of Father Arthur Dorelon

His Birthplace Spain

Name of Mother Margaret Hall
(Maternal Name)

Her Birthplace Iowa

Body to be Shipped to

Size and Style of Casket or Coffin

Manufactured by Lamanu, Ia.

Interment at Rose Hill Cemetery

Lot No. 1417

Grave No. 2

Section No.

Casket or Coffin <u>#F</u>	\$ <u>385.00</u>
Metallic Lining	
(State Kind)	
Outside Box	
(State Kind)	
Grave Vault <u>(Iowa this kind)</u>	\$ <u>115.00</u>
(State Kind)	
Burial Suit or Dress <u>(Iowa this kind)</u>	\$ <u>50</u>
(State Kind)	
Burial Slippers and Hose <u>(Slippers)</u>	\$ <u>3.50</u>
Engraving Plate	
Embalming Body <u>(with S. S. Solution Fluid)</u>	\$ <u>2.50</u>
Dressing Body, \$	
Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
"Candelabrum, \$	
Candles, \$	
Door Badge, \$	
Gloves, \$	
Hearse	\$ <u>1.50</u>
Auto Limousines to Cemetery, @ \$	
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in <u> </u> Newspapers	
(Name of Newspaper)	
Flowers, \$	\$ <u>32.50</u>
Rent of Plants, \$	
Other Decorations	
Outlay for Lot	\$ <u>80.00</u>
Opening Grave or Vault	\$ <u>11.50</u>
Lining Grave with Evergreen or Muslin	
Matting, \$	
Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges <u>Hampden Co. Ia.</u>	\$ <u>25.00</u>
Incineration	
Personal Services	\$ <u>22</u>
Singers	
Church Charges, \$	
Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
<u>Loeff Brothers</u>	\$ <u>50</u>
Total Footing of Bill	\$ <u> </u>
By Amount Paid in Advance	\$ <u> </u>
Balance	\$ <u> </u>
Entered into Ledger, page <u> </u> or below <u> </u>	

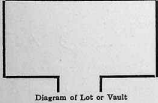


Diagram of Lot or Vault

To Funeral Charges	Total	\$	By Cash	\$

Names of Pall Bearers C. H. White, Loeff Brothers, Wm. Hayes, Adair Anderson, Dan Anderson, A. H. Beck

Names of Lodges S. N. E. F. S., L. O. O. F., Elks Lodge, C. O. F. S., G. A. O. U. E. F., M. E. C. W. M., M. A. M., M. W. A., M. W. B., M. W. L., M. W. S., M. W. T., M. W. U., M. W. V., M. W. W., M. W. X., M. W. Y., M. W. Z.

Lodge Insurance, \$ Other Insurance \$

Names of Near Relatives

RECORD OF FUNERAL

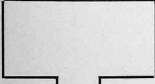
Total No. 1295 Yearly No. 39 Date July 26 1927
 Name of Deceased Eunice D. Lilla Cole, White, Bagin, Kans.
 Husband---
 Wife---Widow Jacob C. Sarah Cole (What Race) (Where Born)
 Son---Daughter or

Charge to Jacob Cole
 Address
 Order Given by
 How Secured Op. 72
 Date of Funeral July 26, 1927
 Residence (Mad.) Lamoni, Iowa
 Place of Death Iowa
 Funeral Services at Iowa
 Time of Funeral Service 2:30 P.M.
 Clergyman James Pounce
 Certifying Physician H. W. Miller
 His Residence Lamoni

Casket or Coffin	#1400	\$150.00
Metallic Lining	(State Kind)	
Outside Box		KY
Grave Vault	(State Kind)	
Burial Suit or Dress	(State Kind)	
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with... Fluid)		25.00
Dressing Body, \$... Shaving, \$...		
Hair Dressing		
Use of Folding Chairs		KY
" " Candelabrum, \$... Candles, \$...		
Door Badge, \$... Gloves, \$...		15.00
Hearse		KY
Auto Limousines to Cemetery @ \$...		
Autos to R. R. Station @ \$...		
Other Vehicle Service		
Aeroplane Service		
Death Notices in... Newspapers	(Names of Newspapers)	
Flowers, \$... Rental of Plants, \$...		7.00
Other Decorations		
Outlay for Lot		40.00
Opening Grave or Vault		8.50
Lining Grave with Evergreen or Muslin		
Matting, \$... Tent Rental, \$...		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$... Minister, \$...		
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page... or below		

Number of Burial Certificate
 Cause of Death D. L. of Lungs (Primary) (Secondary)
 Date of Death July 24, 1927 3:20 P.M.
 Occupation of the Deceased at home
 Single or Married Single Religion L.W.S.
 Date of Birth June 3, 1899
 Age 28 Years 1 Months 21 Days
 Name of Father Jacob Alexander Cole
 His Birthplace Warrenton, Virginia
 Name of Mother Sarah Adeline Wood (Maiden Name)
 Her Birthplace Amite, Iowa
 Body to be Shipped to
 Size and Style of Casket or Coffin

Manufactured by
 Interment at Lamoni - Rose Hill Cemetery



Lot No. 1567
 Grave No. 4
 Section No.

Diagram of Lot or Vault

To Funeral Charges	Total	By Cash
	\$	\$

Names of Pall Bearers Dewey White, Ed. Denny, Harold Hill, Shedd Jones, Campbell, Roberts
 Names of Lodges

Lodge Insurance, \$... Other Insurance, \$...

Names of Near Relatives

RECORD OF FUNERAL

Total No. 1296 Yearly No. 30 Date July 27, 1927

Name of Deceased Myrtle Mitchell Mitchell White Stone Point, Decatur Co., Iowa
(What Race) (Where Born)

Husband 2
 Wife 1
 Son 1 Daughter of Ed. Mitchell

Charge to Ed. Mitchell

Address

Order Given by

How Secured

Date of Funeral July 27, 1927

Residence Stone Point, Decatur Co., Iowa

Place of Death Iowa

Funeral Services at Iowa

Time of Funeral Service 2 P.M.

Clergyman F. J. Sell, Nepe, Iowa, Cal.

Certifying Physician Ed. Mitchell

His Residence Iowa

Number of Burial Certificate

Cause of Death Concussion & Swollen
(Primary) (Secondary)

Date of Death July 27, 1927 6 P.M.

Occupation of the Deceased at Home

Single or Married Married Religion

Date of Birth Oct. 23, 1875

Age 51 Years 9 Months 1 Days

Name of Father William West

His Birthplace Iowa

Name of Mother Vivian Jane Challice
(Maiden Name)

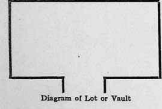
Her Birthplace Iowa

Body to be Shipped to

Size and Style of Casket or Coffin

Manufactured by

Interment Samson W. A. Hill Cemetery



Lot No. 1127

Grave No. 7

Section No.

Casket or Coffin	<u>6.00</u>	\$ <u>100.00</u>
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	<u>X X</u>
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with	Fluid)	<u>25.00</u>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		<u>X</u>
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<u>1.50</u>
Auto Limousines to Cemetery, @ \$		<u>X X</u>
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		<u>20.00</u>
Opening Grave or Vault		<u>8.00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$ <u>172.50</u>
By Amount Paid in Advance		\$
Balance		\$
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To Funeral Charges	Total, \$								
By Cash		\$							

Names of Pall Bearers

Names of Lodges

Lodge Insurance, \$

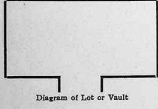
Other Insurance, \$

Names of Near Relatives

RECORD OF FUNERAL

Total No. 1397 Yearly No. 31 Date July 29 1937
 Name of Deceased Sarah Ann Greeland, White Admogh, Ireland
 Husband--- Wife--- Widow (What Race) (Where Born)
 Son--- Daughter of Thomas Greeland, Dec.

Charge to Santa Home
 Address _____
 Order Given by Mr. J. D. Williams, M.D.
 How Secured _____
 Date of Funeral July 29, 1937
 Residence Santa Home, Kansas, Ia.
 Place of Death Ia.
 Funeral Services at Ia.
 Time of Funeral Service 2:30 P.M.
 Clergyman J. J. Bell, C. L. Myers, Chh.
 Certifying Physician Dr. R. G. West
 His Residence Kansas, Ia.
 Number of Burial Certificate _____
 Cause of Death _____
 Date of Death July 28, 1937 (Primary) (Secondary)
 Occupation of the Deceased none
 Single or Married Widow Religion LD S.
 Date of Birth 1852
 Age _____ Years _____ Months _____ Days
 Name of Father Robert Wickes
 His Birthplace Admogh, Ireland
 Name of Mother Sally Kay
 Her Birthplace Admogh, Ireland (Maiden Name)
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by Pine Hill
 Interment at _____ Cemetery



Lot No. 665
 Grave No. 3
 Section No. _____

Casket or Coffin.....	\$	5.00
Metallic Lining.....		
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		2.00
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		3.00
Auto Limousines to Cemetery..@ \$.....		
Autos to R. R. Station.....@ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		
(Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations.....		
Outlay for Lot.....		5.00
Opening Grave or Vault.....		
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	
By Amount Paid in Advance.....	\$	
Balance.....	\$	
Entered into Ledger, page..... or below.....		

	To Funeral Charges.....	Total, \$			By Cash.....	\$

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1299 Yearly No. 32 Date August 7 1927
 Name of Deceased Caroline Smith Wilson (What Race) White (Where Born) Ohio
 Husband Arthur Wilson
 Wife & Widow
 Son & Daughter of

Charge to
 Address
 Order Given by Mr. E. M. W.
 How Secured
 Date of Funeral Aug. 7 '27
 Residence Leggett Ave., Decatur Co., Iowa
 Place of Death Iowa
 Funeral Services at Iowa
 Time of Funeral Service 2:30 P.M.
 Clergyman M. G. Prall
 Certifying Physician A. M. Hill
 His Residence Lamoni, Iowa
 Number of Burial Certificate
 Cause of Death Tuberculosis
 (Primary) (Secondary)
 Date of Death Aug. 7, '27
 Occupation of the Deceased at home
 Single or Married Married Religion R. O. S.
 Date of Birth Apr. 15, 1859
 Age 68 Years 3 Months 19 Days
 Name of Father Charles Smith
 His Birthplace Iowa
 Name of Mother Barbara G. Smith
 (Maiden Name)
 Her Birthplace Germany
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Lamoni - Mrs. Hill Cemetery

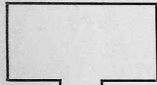


Diagram of Lot or Vault

Lot No. 156344
 Grave No. 1 on 4
 Section No.

Casket or Coffin	<u>1400 D. S.</u>	\$	<u>120.00</u>
Metallic Lining	(State Kind)		
Outside Box	(State Kind)		
Grave Vault	<u>Iowa</u>	(State Kind)	<u>11.50</u>
Burial Suit or Dress			
Burial Slippers and Hose			
Engraving Plate			
Embalming Body (with	Fluid)		<u>2.50</u>
Dressing Body, \$	Shaving, \$		
Hair Dressing			
Use of Folding Chairs			<u>xx</u>
" " Candelabrum, \$	Candles, \$		
Door Badge, \$	Gloves, \$		
Hearse			<u>1.50</u>
Auto Limousines to Cemetery, @ \$			<u>xx</u>
Autos to R. R. Station	@ \$		
Other Vehicle Service			
Aeroplane Service			
Death Notices in	Newspapers		
(Names of Newspapers)			
Flowers, \$	Rental of Plants, \$		<u>9.00</u>
Other Decorations			
Outlay for Lot			<u>8.00</u>
Opening Grave or Vault			<u>1.00</u>
Lining Grave with Evergreen or Muslin			
Matting, \$	Tent Rental, \$		
Use of Lowering Device			
Rental of Vault			
Outlay for Shipping Charges			
Removal Charges			
Incineration			
Personal Services			
Singers			
Church Charges, \$	Minister, \$		
Telegrams and Telephone Charges			
Pall Bearer Service			
Total Footing of Bill		\$	<u>107.00</u>
By Amount Paid in Advance		\$	
Balance		\$	
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To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Joe Anthony, Sam Anthony, John Lane, Wm. Lane, Fred Spang, Carl Lewis
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1399 Yearly No. 33 Date August 24 - 1927
 Name of Deceased Maria Ann Preston White London, England.
(What Race) (What Born)
 Husband-- John S. Preston, Dec.
 Wife--
 Son--Daughter of

Charge to Berk Murray
 Address

Casket or Coffin	<u># 800</u>	\$ <u>200.00</u>
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with	Fluid)	<u>2.00</u>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		<u>25</u>
“ “ Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		
Auto Limousines to Cemetery..@ \$.		<u>25</u>
Autos to R. R. Station ..@ \$.		
Other Vehicle Service		
Acroplane Service		
Death Notices in	Newspapers	

Order Given by

How Secured

Date of Funeral Aug. 24, 27

Residence Dunwoody, Ga.

Place of Death Dec.

Funeral Services at Res. of Berk Murray's

Time of Funeral Service 9 A.M.

Clergyman Rev. LaSalle

Certifying Physician W. C. Sibbey

His Residence Demora, Ala.

Number of Burial Certificate

Cause of Death Consumption of Stomach
(Primary) (Secondary)

Date of Death Aug 22, 27

Occupation of the Deceased at Home

Single or Married Widow Religion

Date of Birth March 25, 1840

Age 27 Years 4 Months 27 Days

Name of Father Joseph Savage

His Birthplace London, England

Name of Mother Ann Smith
(Maiden Name)

Her Birthplace London, England

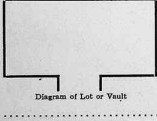
Body to be Shipped to

Flowers, \$	Rental of Plants, \$	<u>24.00</u>
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page.....or below		

Size and Style of Casket or Coffin

Manufactured by W. H. Linton, Ga.

Interment at Dunwoody, Ga. Cemetery



Lot No.

Grave No.

Section No.

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers

Names of Lodges

Lodge Insurance, \$..... Other Insurance, \$.....

Names of Near Relatives

Compiled by F. J. FREDMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1300 Yearly No. 34 Date. August 27 1927

Name of Deceased... Margaret Winn
 Husband--- } Fredrick Winn, Dec.
 Wife---Widow }
 Son---Daughter of }
 Charge to... Isabel Winn

White (What Race) Indiana (Where Born)

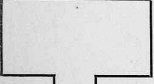
Address
 Order Given by
 How Secured
 Date of Funeral Aug. 27, '27
 Residence Bloomington, Ind., Decatur Co., Ia.
 Place of Death Ind.
 Funeral Services at Ind.
 Time of Funeral Service 2 P.M.
 Clergyman L. E. Briggs
 Certifying Physician A. M. Gill
 His Residence Indiana
 Number of Burial Certificate 1
 Cause of Death Stroke
 (Primary) (Secondary)
 Date of Death Aug. 25, '27 - 7 A.M.
 Occupation of the Deceased Farmer
 Single or Married Married Religion
 Date of Birth Nov. 24, 1845
 Age 81 Years 9 Months 1 Days
 Name of Father John Jones
 His Birthplace Ohio
 Name of Mother Marcy Leavelle
 (Maiden name)
 Her Birthplace Ohio
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Decatur, Ia. Cemetery

Casket or Coffin	\$ 200 00
Metallic Lining.....	(State Kind)
Outside Box.....	(State Kind)
Grave Vault.....	(State Kind)
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with Fluid).....	20 00
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	50
" " Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	15 00
Auto Limousines to Cemetery...@ \$.....	
Autos to R. R. Station.....@ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
(Names of Newspapers)	
Flowers, \$..... Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
.....	
.....	
Total Footing of Bill.....	\$
By Amount Paid in Advance.....	\$
Balance.....	\$
Entered into Ledger, page.....	or below

Lot No.

Grave No.

Section No.


Diagram of Lot or Vault

To Funeral Charges Total, \$	By Cash..... \$	
------------------------------------	-----------------	--

Names of Pall Bearers.....

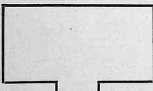
Names of Lodges.....

Lodge Insurance, \$..... Other Insurance, \$.....

Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1301 Yearly No. 35 Date Sept. 7, 1927
 Name of Deceased Mary Ann Allen White England
(What Race) (Where Born)
 Husband---
 Wife---Widow James Allen, Dec.
 Son---Daughter of }

Charge to
 Address
 Order Given by S. J. Williams
 How Secured
 Date of Funeral Sept. 7, 1927
 Residence Lanani, Ia. - Santa Home
 Place of Death Res. Ia.
 Funeral Services at Ia.
 Time of Funeral Service 2 P.M.
 Clergyman John Lewis; S. J. Sell, succ.
 Certifying Physician Dr. S. A. Miller
 His Residence Lanani, Ia.
 Number of Burial Certificate
 Cause of Death Organic Heart Disease
(Primary) (Secondary)
 Date of Death Sept. 1, 1927
 Occupation of the Deceased None
 Single or Married Widow Religion R.D.S.
 Date of Birth Dec. 31, 1838
 Age 88 Years 8 Months _____ Days
 Name of Father Thomas Mills
 His Birthplace Ia.
 Name of Mother
(Maiden Name)
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Lanani - Rose Hill Cemetery
 Lot No. 19
 Grave No. 3
 Section No.

Diagram of Lot or Vault

Casket or Coffin.....	<u>14.00</u>	\$ <u>150.00</u>
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		<u>2.50</u>
Dressing Body, \$.....	Shaving, \$.....	
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$.....	Candles, \$.....	
Door Badge, \$.....	Gloves, \$.....	
Hearse.....		<u>15.00</u>
Auto Limousines to Cemetery..@ \$.....		<u>3.25</u>
Autos to R. R. Station.....@ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in.....	Newspapers.....	
<small>(Names of Newspapers)</small>		
Flowers, \$.....	Rental of Plants, \$.....	
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		<u>8.50</u>
Lining Grave with Evergreen or Muslin.....		
Matting, \$.....	Tent Rental, \$.....	
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges.....		<u>1.25</u>
Pall Bearer Service.....		
Total Footing of Bill.....		\$.....
By Amount Paid in Advance.....		\$.....
Balance.....		\$.....
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	To Funeral Charges.....	Total, \$.....	By Cash.....	\$.....

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1302 Yearly No. 36 Date Sept. 4, 1927

Name of Deceased Lewis P. Hoden (What Race) White (Where Born) Nippenit Co., Ohio

Husband---
Wife---Widow
Son---Daughter of

Charge to Lewis P. Hoden, Est.
 Address
 Order Given by Lester S. Hoden
 How Secured
 Date of Funeral Sept. 4, 1927
 Residence Harrisburg, Pa., Decatur Co., Ga.
 Place of Death Dec. (Chas. Hoden)
 Funeral Services at
 Time of Funeral Service 3 P.M.
 Clergyman Rev. Kolack
 Certifying Physician D. F. M. Willis
 His Residence Lawson, Ga.
 Number of Burial Certificate
 Cause of Death Spinal Paralysis
 (Primary) (Secondary)
 Date of Death Sept. 2, 1927
 Occupation of the Deceased Retired Farmer
 Single or Married Single Religion
 Date of Birth Aug. 28, 1843
 Age 84 Years 0 Months 4 Days
 Name of Father Samuel Hoden
 His Birthplace Delaware
 Name of Mother Catherine Trump
 (Maiden Name)
 Her Birthplace Virginia
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Decatur Co., Ga. Lily Cemetery

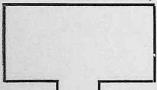


Diagram of Lot or Vault

Lot No.
 Grave No.
 Section No.

Casket or Coffin <u>Oak</u>	\$ <u>2.50</u> 00
Metallic Lining	(State Kind)
Outside Box	(State Kind)
Grave Vault <u>(Iron)</u>	11.50 00
Burial Suit or Dress	7.50 00
Burial Slippers and Hose	.50 00
Engraving Plate	.50 00
Embalming Body (with Fluid)	2.50 00
Dressing Body, \$	Shaving, \$
Hair Dressing	.50 00
Use of Folding Chairs	.50 00
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	1.00 00
Auto Limousines to Cemetery @ \$	2.50 00
Autos to R. R. Station @ \$	.50 00
Other Vehicle Service	
Acroplane Service	
Death Notices in	Newspapers
	(Names of Newspapers)
Flowers, \$	Rental of Plants, \$
Other Decorations	Rental of Plants, \$
Outlay for Lot	10.00
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
<hr/>	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

To Funeral Charges	Total, \$	By Cash	\$	

Names of Pall Bearers Chas. Hoden, Raymond W. Eloy, Ralph Fisher, W. H. Taylor, Geo. L. Sawyer, Chas. K. Howell

Names of Lodges

Lodge Insurance, \$ Other Insurance, \$

Names of Near Relatives

RECORD OF FUNERAL

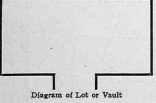
Total No. 1303 Yearly No. 37 Date Sept. 9, 1927

Name of Deceased Jennie Saleman White
(What Race) (Where Born)

Husband-- Phil Saleman
 Wife--
 Son--Daughter of

Charge to _____
 Address _____
 Order Given by _____
 How Secured _____
 Date of Funeral Sept 9, 1927
 Residence London, Iowa
 Place of Death St. Joseph, Mo.
 Funeral Services at St. Vincent Church
 Time of Funeral Service 2:30 P.M.
 Clergyman R. L. Nelson, Doremy, Mo.
 Certifying Physician Garth C. Carter
 His Residence St. Joseph, Mo.
 Number of Burial Certificate _____
 Cause of Death Multiple Myeloma Uteri
(Primary) (Secondary)
 Date of Death Sept 5, 1927
 Occupation of the Deceased at home
 Single or Married Married Religion _____
 Date of Birth _____
 Age 44 Years Months Days _____
 Name of Father D. S. Soper, etc.
 His Birthplace _____
 Name of Mother _____
(Maiden Name)
 Her Birthplace _____
 Body to be Shipped to Wm. H. O. Sider, Jaden Funeral Home, St. Joe.
 Size and Style of Casket or Coffin _____
 Manufactured by _____
 Interment at Lamoni - Oak Hill Cemetery

Lot No. 1576
 Grave No. 4
 Section No. _____



Casket or Coffin				
Metallic Lining	(State Kind)			
Outside Box	(State Kind)			
Grave Vault	(State Kind)			
Burial Suit or Dress				
Burial Slippers and Hose				
Engraving Plate				
Embalming Body (with _____ Fluid)				
Dressing Body, \$	Shaving, \$			
Hair Dressing				
Use of Folding Chairs				
“ “ Candelabrum, \$	Candles, \$			
Door Badge, \$	Gloves, \$			
Hearse				
Auto Limousines to Cemetery. @ \$				
Autos to R. R. Station. @ \$				
Other Vehicle Service				
Acroplane Service				
Death Notices in _____ Newspapers				
<small>(Names of Newspapers)</small>				
Flowers, \$	Rental of Plants, \$			23 50
Other Decorations				
Outlay for Lot				40 00
Opening Grave or Vault				11 00
Lining Grave with Evergreen or Muslin				
Matting, \$	Tent Rental, \$			
Use of Lowering Device				
Rental of Vault				
Outlay for Shipping Charges				
Removal Charges				
Incineration				
Personal Services				25 00
Singers				
Church Charges, \$	Minister, \$			
Telegrams and Telephone Charges				
Pall Bearer Service				
Total Footing of Bill				-----
By Amount Paid in Advance				-----
Balance				-----
Entered into Ledger, page _____ or below _____				

To Funeral Charges..... Total, \$	By Cash..... \$

Names of Pall Bearers John Jones, Walter Hayes, Fred Hyreiger, Jim Carter, John Graves, Geo. Evans.
 Names of Lodges WINGS - Mrs. W. Clay, M. Hayes, Carl and Alice Burgess, Fred Hyreiger
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1304 Yearly No. 37 Date Sept. 13, 1927
 Name of Deceased Bett A. Hoffmyer (What Race) White (Where Born) Mich.
 Husband---
 Wife---Widow John A. Hoffmyer
 Son---Daughter of

Charge to.....
 Address.....
 Order Given by.....
 How Secured.....
 Date of Funeral Sept. 13, 1927
 Residence Hammi, Mich.
 Place of Death Hammi, Mich.
 Funeral Services at Santa Church
 Time of Funeral Service 2:30 P.M.
 Clergyman Rev. W. H. Smith
 Certifying Physician D. J. Gorman
 His Residence Hammi, Mich.
 Number of Burial Certificate.....
 Cause of Death Leukemia
 (Primary) (Secondary)
 Date of Death Sept. 10, 1927
 Occupation of the Deceased M. E. Charlie
 Single or Married Single Religion S.D.S.
 Date of Birth.....
 Age 18 Years 10 Months 17 Days
 Name of Father John A. Hoffmyer
 His Birthplace.....
 Name of Mother.....
 (Maiden Name)

Her Birthplace.....
 Body to be Shipped to Hammi, Mich.
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Hammi, Mich. Hill Cemetery

Lot No. 1368
 Grave No. 4
 Section No.

Diagram of Lot or Vault

Casket or Coffin.....	\$	
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
“ “ Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		
Auto Limousines to Cemetery..@ \$.....		
Autos to R. R. Station.....@ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		
(Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations.....		
Outlay for Lot.....		40.00
Opening Grave or Vault.....		8.50
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		2.00
Personal Services.....		
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill..... \$		
By Amount Paid in Advance..... \$		
Balance..... \$		
Entered into Ledger, page..... or below.....		

	To Funeral Charges..... Total, \$		By Cash..... \$

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1305 Yearly No. 39 Date Sept. 14 1927

Name of Deceased E. Lee Johnson (What Race) White
Husband of Martha Johnson, Dec. (Where Born) Sweden
Wife---Widow
Son---Daughter of

Charge to Shant's Home

Address Wm. H. Johnson

Order Given by Wm. H. Johnson

How Secured See

Date of Funeral Sept. 13, 1927

Residence St. Home, Samois, Ia.

Place of Death See

Funeral Services at See

Time of Funeral Service 2:30 P.M.

Clergyman A. W. Miller, J. M. Stubbins, Wm. C. Bishop

Certifying Physician See

His Residence Samois

Number of Burial Certificate See

Cause of Death Cardiac Remel.
(Primary) (Secondary)

Date of Death Sept. 12, 1927

Occupation of the Deceased See

Single or Married Married Religion See

Date of Birth Nov. 3, 1849

Age 82 Years 10 Months 9 Days

Name of Father NK.

His Birthplace NK.

Name of Mother NK.
(Maiden Name)

Her Birthplace NK.

Body to be Shipped to NK.

Size and Style of Casket or Coffin NK.

Manufactured by See

Interment at Samois, Ia. Rose Hill Cemetery

Diagram of Lot or Vault
Lot No. 541
Grave No. 7
Section No. See

Casket or Coffin	\$	100.00
Metallic Lining		
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress	(State Kind)	12.50
Burial Slippers and Hose		1.50
Engraving Plate		
Embalming Body (with Fluid)		25.00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15.00
Auto Limousines to Cemetery, @ \$		15.00
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	3.00
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		5.50
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page		or below

To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1306 Yearly No. 40 Date Sept. 15, 1927
 Name of Deceased A. King Emma Walden (Where Born)
 Husband of Matthe Walden (What Race)
 Wife of Matthe Walden

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral Sept. 15, 1927
 Residence Frank, Mich.
 Place of Death Lansing, La. (E. H. Walden (Co.))
 Funeral Services at Lansing, La. (E. H. Walden (Co.))
 Time of Funeral Service 7:30 P.M. - Saint Charles
 Clergyman Mr. J. J. Hall, Holy Trinity, Cath.
 Certifying Physician Dr. Henry Cook
 His Residence Frank, Mich.
 Number of Burial Certificate
 Cause of Death Acute Dilation Heart
 (Primary) (Secondary)
 Date of Death Sept. 12, 1927
 Occupation of the Deceased Ch. House
 Single or Married Married Religion F.O.S.
 Date of Birth
 Age 26 Years 2 Months 29 Days
 Name of Father Charles Smedley
 His Birthplace
 Name of Mother Allie Hansen
 (Maiden Name)
 Her Birthplace
 Body to be Shipped to from
Wm. Burkholder, (H. Graves & Co.) Frank, Mich.
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Lansing, La. Rose Hill Cemetery

Casket or Coffin.....	\$	
Metallic Lining.....		(State Kind)
Outside Box.....		(State Kind)
Grave Vault.....		(State Kind)
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		(2)
Auto Limousines to Cemetery @ \$.....		
Autos to R. R. Station @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		(Names of Newspapers)
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		8.50
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		2.50
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	
By Amount Paid in Advance.....	\$	
Balance.....	\$	
Entered into Ledger, page.....		or below

Lot No. 489
 Grave No. 1
 Section No.
 Diagram of Lot or Vault

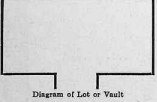
To Funeral Charges..... Total, \$		By Cash.....	\$

Names of Pall Bearers Dwight White, Harold White, Homer Stuck, Fred Sundb, Tom Pearce, Ed Downey
 Names of Lodges Sons of F.R.S. - A. Campbell Chapter
G. B. - Warren Stuck, Marie Stuck, May Diller, Lena Mills, Chas. White, Esther Pearce
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1307 Yearly No. 71 Date Sept. 19, 1927
 Name of Deceased Robert Alden Tote White Washington, Maine
 Husband--
 Wife--Widow
 Son--Daughter of } R. C. Tote (Where Born)

Charge to Canton, Maine
 Address Canton, Maine
 Order Given by W. Ray Carmichael
 How Secured Express Collected
 Date of Funeral No Service
 Residence Canton, Me. No. 20. S. Railroad College
 Place of Death Me.
 Funeral Services at
 Time of Funeral Service
 Clergyman
 Certifying Physician L. M. King
 His Residence Canton, Me.
 Number of Burial Certificate
 Cause of Death Schizophrenia
 Date of Death Sept. 18, 1927 4 P.M.
 Occupation of the Deceased Student
 Single or Married Single Religion P.O.S.
 Date of Birth March 11, 1906
 Age 21 Years 6 Months 7 Days
 Name of Father R. C. Tote
 His Birthplace Me.
 Name of Mother N.K.
 Her Birthplace
 Body to be Shipped to R. C. Tote, Canton, Maine
by (Prepaid Express)
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Cemetery



Lot No.
 Grave No.
 Section No.

Casket or Coffin <u>Metallic</u>	\$ 325 00
Metallic Lining	
Outside Box <u>Shipping Case</u>	xx
Grave Vault	
Burial Suit or Dress	
Burial Slippers and Hose	1 50
Engraving Plate	
Embalming Body (with Fluid)	25 00
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse <u>Ambulance</u>	8 50
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
Flowers, \$ Rental of Plants, \$	
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	1 50 25
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ 790 25
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page or below	

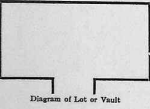
To Funeral Charges Total, \$		By Cash	\$

Names of Pall Bearers
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. *1308* Yearly No. *42* Date *Sept. 26, 1927*
 Name of Deceased. *Marjatta Puyra White* (What Race) *Sumner, Va.* (Where Born)
 Husband...
 Wife... Widower
 Son... Daughter of *Frederic Puyra*

Charge to
 Address
 Order Given by *Emma Hagen*
 How Secured
 Date of Funeral *Sept. 24, 1927*
 Residence *Santa Rosa, Sumner, Va.*
 Place of Death *Va.*
 Funeral Services at *Va.*
 Time of Funeral Service *2 P.M.*
 Clergyman *W. J. Bell, Lake Hayes, Va.*
 Certifying Physician *Dr. B. A. Gunn*
 His Residence *Sumner, Va.*
 Number of Burial Certificate
 Cause of Death *Septicemia*
 (Primary) (Secondary)
 Date of Death *Sept. 24, 1926*
 Occupation of the Deceased *Janitor*
 Single or Married *Widowed* Religion *F.O.S.*
 Date of Birth *Sept. 7, 1894*
 Age *33* Years Months *18* Days
 Name of Father *John Pickett*
 His Birthplace *W.K.*
 Name of Mother (Maiden Name)
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at *Davis City, Iowa* Cemetery



Lot No.
 Grave No.
 Section No.

Casket or Coffin	<i>157</i>	\$ <i>85</i> 00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	<i>12</i>
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with..... Fluid)		<i>10</i> 00
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse		<i>15</i> 00
Auto Limousines to Cemetery.. @ \$.....		
Autos to R. R. Station..... @ \$.....		
Other Vehicle Service		
Aeroplane Service		
Death Notices in..... Newspapers		
(Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations		
Outlay for Lot.....		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill..... \$		
By Amount Paid in Advance..... \$		
Balance..... \$		
Entered into Ledger, page..... or below		

To Funeral Charges..... Total, \$		By Cash..... \$	

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1309 Yearly No. 43 Date Sept. 30, 1927

Name of Deceased Mary S. Mather White Le Moyne, Iowa
(What Race) (Where Born)

Husband --- J. H. Mather, Dec.
 Wife ---
 Son --- Daughter of

Charge to Volunta. Bur.
 Address _____
 Order Given by _____

How Secured Ed.
 Date of Funeral Sept. 30, 1927

Residence S. W. N. E. 1, Pomona, Kans.
 Place of Death St. J. Church, Lemons

Funeral Services at _____
 Time of Funeral Service 3 P. M.

Clergyman James Thomas, J. J. Sell, etc.
 Certifying Physician W. S. Johnson

His Residence Pomona, Kans.

Number of Burial Certificate _____
 Cause of Death Leucemia Myocarditis
(Primary) (Secondary)

Date of Death Sept. 27, '27
 Occupation of the Deceased at home

Single or Married Widow Religion A. D. S.

Date of Birth Dec. 11, 1848

Age 78 Years _____ Months _____ Days _____
 Name of Father Peter D. M.

His Birthplace Frank, Europe
 Name of Mother Catharine, Miss
(Maiden Name)

Her Birthplace Ohio
 Body to be Shipped to from Pomona, Kans.

Size and Style of Casket or Coffin _____

Manufactured by _____
 Interment at Lemons, Ia. - Rose Hill Cemetery

Diagram of Lot or Vault

Lot No. 819
 Grave No. 3 ft. 2
 Section No. _____

Casket or Coffin	_____	\$	_____
Metallic Lining	_____ (State Kind)	_____	_____
Outside Box	_____ (State Kind)	_____	_____
Grave Vault	_____ (State Kind)	_____	_____
Burial Suit or Dress	_____ (State Kind)	_____	_____
Burial Slippers and Hose	_____	_____	_____
Engraving Plate	_____	_____	_____
Embalming Body (with _____ Fluid)	_____	_____	_____
Dressing Body, \$ _____ Shaving, \$ _____	_____	_____	_____
Hair Dressing	_____	_____	_____
Use of Folding Chairs	_____	_____	_____
“ “ Candelabrum, \$ _____ Candles, \$ _____	_____	_____	_____
Door Badge, \$ _____ Gloves, \$ _____	_____	_____	_____
Hearse <u>1 truck</u>	_____	_____	2.00
Auto Limousines to Cemetery @ \$ _____	_____	_____	1.00
Autos to R. R. Station @ \$ _____	_____	_____	_____
Other Vehicle Service	_____	_____	_____
Aeroplane Service	_____	_____	_____
Death Notices in _____ Newspapers	_____	_____	_____
<small>(Names of Newspapers)</small>			
Flowers, \$ _____ Rental of Plants, \$ _____	_____	_____	_____
Other Decorations	_____	_____	_____
Outlay for Lot	_____	_____	_____
Opening Grave or Vault	_____	_____	2.00
Lining Grave with Evergreen or Muslin	_____	_____	_____
Matting, \$ _____ Tent Rental, \$ _____	_____	_____	_____
Use of Lowering Device	_____	_____	_____
Rental of Vault	_____	_____	_____
Outlay for Shipping Charges	_____	_____	_____
Removal Charges	_____	_____	_____
Incineration	_____	_____	_____
Personal Services	_____	_____	_____
Singers	_____	_____	_____
Church Charges, \$ _____ Minister, \$ _____	_____	_____	_____
Telegrams and Telephone Charges	_____	_____	_____
Pall Bearer Service	_____	_____	_____
Total Footing of Bill	_____	\$	_____
By Amount Paid in Advance	_____	\$	_____
Balance	_____	\$	_____
Entered into Ledger, page _____ or below	_____	_____	_____

_____	To Funeral Charges	Total, \$	_____	By Cash	\$	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Names of Pall Bearers _____
 Names of Lodges _____
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____

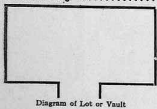
RECORD OF FUNERAL

Total No. 1310 Yearly No. 24 Date October 5, 1937
 Name of Deceased Jo Anna Breeding White Decatur Co., Iowa
Husband - X (What Race) (Where Born)
Wife - Widow
Son - Daughter of La E. Breeding

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral Oct. 5, 1937
 Residence Thos. Sub. Sup. - Iowa Linn Co., Ia.
 Place of Death Res.
 Funeral Services at Res.
 Time of Funeral Service 2 P.M.
 Clergyman A. L. Slick
 Certifying Physician Dr. B. A. Ames
 His Residence Linn Co., Iowa
 Number of Burial Certificate
 Cause of Death Hemorrhage of Brain
(Primary) (Secondary)
 Date of Death Oct. 3, 1937 - 12:30 P.M.
 Occupation of the Deceased at home
 Single or Married Married Religion none
 Date of Birth Aug. 12, 1869
 Age 68 Years 1 Months 21 Days
 Name of Father Benjamin Dumber
 His Birthplace Ohio
 Name of Mother Elizabeth Johnson
(Maiden Name)
 Her Birthplace Ohio
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at 12 Mi. East Linn Co., Iowa Cemetery

Casket or Coffin	14.00	\$ 150.00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	1.00 00
Burial Suit or Dress	(State Kind)	
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with..... Fluid)		2.50 00
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing		
Use of Folding Chairs		x x
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse		1.50 00
Auto Limousines to Cemetery..@ \$.....		x x
Autos to R. R. Station.....@ \$.....		
Other Vehicle Service		
Aeroplane Service		
Death Notices in..... Newspapers		
<small>(Names of Newspapers)</small>		
Flowers, \$..... Rental of Plants, \$.....		8 50
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		11 50
Lining Grave with Evergreen or Muslin		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page..... or below		

Lot No.
 Grave No.
 Section No.



To Funeral Charges	Total, \$					
					By Cash	\$

Names of Pall Bearers Leslie Probst, Clara Kyle, John Duerksen, Henry Mills, Tom Allen, O. C. Linneman
 Names of Lodges
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1312 Yearly No. 76 Date Nov. 6, 1927

Name of Deceased Lorenzo Mayer (What Race) White (Where Born) La. Salt Loo., Ill.

Relationship Wife--Widow of Portia Ann Mayer, Dec.

Charge to Lorenzo Mayer, Est.

Address J. D. Larrea

Order Given by J. D. Larrea

How Secured Nov. 6, '27

Date of Funeral Nov. 3, '27

Residence 248 d. Clark St., St. Louis, Mo.

Place of Death Ill.

Funeral Services at W. D. S. Church, St. Louis

Time of Funeral Service 3:30 P.M.

Clergyman J. Koenigschlag, Mt. Paul, Ill.

Certifying Physician L. C. Schuy

His Residence St. Louis

Number of Burial Certificate 1

Cause of Death Paralysis, Digestion

Date of Death Nov. 3, '27 8 AM

Occupation of the Deceased Patrolman

Single or Married Married Religion W.D.S.

Date of Birth July 14, 1853

Age 74 Year 3 Months 19 Days

Name of Father Hans Mayer

His Birthplace Norway

Name of Mother Sarah Mayer

Her Birthplace Norway

Body to be Shipped to

Size and Style of Casket or Coffin

Manufactured by

Interment at St. Louis La. Rose Hill Cemetery

Lot No. 807

Grave No. 3

Section No.

Diagram of Lot or Vault

Casket or Coffin	<u>800 BCE</u>	\$ <u>25.00</u>
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	<u>xx</u>
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		<u>25.00</u>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		<u>xx</u>
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<u>15.00</u>
Auto Limousines to Cemetery, @ \$		<u>xx</u>
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Acroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<u>8.50</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<u>xx</u>
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page	or below	

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers A. H. Smith, A. A. Hoffman, J. W. Burr, Dean Anderson, J. W. Winkler, Carl Lane
 Names of Lodges F. B. Ruth, Deagon, Ruth Deagon, Grace Lane, Dorseth, Paul
 S. H. R. F. A. D. - Wentworth, Winton, Helen Leithroy, Carl Paul, Gardner Meddel - Mrs. M. E. Ervey, Sara
 Lodge Insurance, \$ Other Insurance, \$

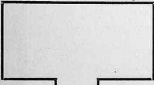
RECORD OF FUNERAL

Total No. 1313. Yearly No. 47 Date Nov. 14 1927

Name of Deceased Maudie Hartman White (What Race) (Where Born)
Husband—
Wife—Widow } Wed. Hartman

Charge to.....
Address.....
Order Given by.....
How Secured.....
Date of Funeral Nov. 17, '27
Residence Lamon, Mo. 6.10 #
Place of Death K. C. Mo.
Funeral Services at Rev.
Time of Funeral Service 2:30 P. M.
Clergyman James Thomas, St. Paul, Mo.
Certifying Physician Dr. Elna Gentry
His Residence K. C. Mo.
Number of Burial Certificate.....
Cause of Death Concussion of Brain
Date of Death Nov. 11, '27
Occupation of the Deceased g. Lark
Single or Married Married Religion.....
Date of Birth.....
Age 47 Years..... Months..... Days.....
Name of Father.....
His Birthplace.....
Name of Mother..... (Maiden Name)
Her Birthplace.....
Body to be Shipped to John W. & Co. K. C. Mo.
Size and Style of Casket or Coffin.....
Manufactured by.....
Interment at Lamon, Ia. - Racine Hill Cemetery

Casket or Coffin.....	\$.....
Metallic Lining..... (State Kind).....	
Outside Box..... (State Kind).....	
Grave Vault..... (State Kind).....	
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid).....	
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	x x
“ Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	15.00
Hearse.....	
Auto Limousine to Cemetery.. @ \$.....	
Autos to R. R. Station..... @ \$.....	x x
Other Vehicle Service.....	
Acroplane Service.....	
Death Notices in..... Newspapers.....	
Flowers, \$..... Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault..... 10.00	00
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	x x
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill..... \$.....	
By Amount Paid in Advance..... \$.....	
Balance..... \$.....	
Entered into Ledger, page..... or below.....	



Lot No. 110
Grave No. 3
Section No.

Diagram of Lot or Vault

To Funeral Charges.....	Total, \$	By Cash.....	\$	\$	\$	\$	\$

Names of Pall Bearers W. E. Postman, Tom Currier, Fred Hysinger, Al Rash, Joe L. France, Jim Kinney

Names of Lodges.....
Lodge Insurance, \$..... Other Insurance, \$.....
Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1314 Yearly No. 48 Date Nov. 21, 1927
 Name of Deceased Nancy Jane Norman White Indiana
(What Race) (Where Born)
 Husband Wife Son Daughter
Jessie Norman

Charge to _____
 Address _____
 Order Given by Emma Nixon
 How Secured _____
 Date of Funeral Nov. 21, 1927
 Residence Bumell, Ind., Decatur Co., Ind.
 Place of Death Ind.
 Funeral Services at Christian Church, Bethany Mo.
 Time of Funeral Service 2:30 P.M.
 Clergyman Rev. Spurgeon
 Certifying Physician C. E. Sisson
 His Residence Lamon
 Number of Burial Certificate _____
 Cause of Death Anterior tubercles with typhoid infection
(Primary) (Secondary)
 Date of Death Nov. 18, 1927
 Occupation of the Deceased Lab. Home
 Single or Married Married Religion Christian
 Date of Birth Nov. 17, 1850
 Age 77 Years 0 Months 1 Days
 Name of Father Nicholas Norman
 His Birthplace N.K.
 Name of Mother Willa Musgrave
(Maiden Name)
 Her Birthplace N.K.
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by Bethany, Mo.
 Interment at _____ Cemetery

Casket or Coffin	\$ <u>100</u>	<u>00</u>
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress	(State Kind)	
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with _____ Fluid)		<u>2</u> <u>00</u>
Dressing Body, \$ _____ Shaving, \$ _____		
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$ _____ Candles, \$ _____		
Door Badge, \$ _____ Gloves, \$ _____		
Hearses	<u>to Bethany</u>	<u>15</u> <u>00</u>
Auto Limousines to Cemetery, @ \$ _____		
Autos to R. R. Station, @ \$ _____		
Other Vehicle Service		
Acroplane Service		
Death Notices in _____ Newspapers		
(Names of Newspapers)		
Flowers, \$ _____ Rental of Plants, \$ _____		
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$ _____ Tent Rental, \$ _____		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$ _____ Minister, \$ _____		
Telegrams and Telephone Charges		
Pall Bearer Service		

Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page _____ or below		

Lot No. _____
 Grave No. _____
 Section No. _____

Diagram of Lot or Vault

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers _____
 Names of Lodges _____
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____

RECORD OF FUNERAL

26

Total No. 1315 Yearly No. 49

Name of Deceased Alaska Townsend
 Husband--
 Wife--Widow
 Son--Daughter of

Date. Nov. 21, 1926

White Milwaukee, Wis.
 (What Race) (Where Born)

Charge to Sanito Home, Lamoni, Ia.

Address Lamoni, Ia.

Order Given by Alice P. Dancy, Mather

How Secured 26

Date of Funeral Nov. 21, 1926

Residence Sanito Home, Lamoni, Ia.

Place of Death Res.

Funeral Services at Res.

Time of Funeral Service 2:30 P.M.

Clergyman D. S. McIlwain & E. Dancy White

Certifying Physician C. C. Luby

His Residence Lamoni

Number of Burial Certificate

Cause of Death Bright Disease
 (Primary) (Secondary)

Date of Death Nov. 20, 1926

Occupation of the Deceased

Single or Married Married Religion A.S.

Date of Birth Jan. 7, 1852

Age 74 Years 10 Months 13 Days

Name of Father

His Birthplace

Name of Mother (Maiden Name)

Her Birthplace

Body to be Shipped to

Size and Style of Casket or Coffin

Manufactured by

Interment at Lamoni, Ia. Rose Hill Cemetery

Casket or Coffin		\$ 55.00
Metallic Lining (State Kind)		
Outside Box (State Kind)		
Grave Vault (State Kind)		
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		2.00
Dressing Body, \$ Shaving, \$		
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$ Candles, \$		
Door Badge, \$ Gloves, \$		
Hearse		5.00
Auto Limousines to Cemetery, @ \$		
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in Newspapers		
(Names of Newspapers)		
Flowers, \$ Rental of Plants, \$		
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		8.00
Lining Grave with Evergreen or Muslin		
Matting, \$ Tent Rental, \$		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$ Minister, \$		
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page		or below

Diagram of Lot or Vault

Lot No. 916

Grave No. 4

Section No.

To Funeral Charges	Total, \$				By Cash	\$

Names of Pall Bearers

Names of Lodges

Lodge Insurance, \$ Other Insurance, \$

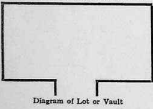
Names of Near Relatives

RECORD OF FUNERAL

Total No. 1316 Yearly No. 30 Date Nov. 26, 1927
White (What Race) North Co., Ohio (Where Born)

Name of Deceased Susan Gray
 Husband Newton Gray
 Wife X Widower
 Son X Daughter of

Charge to
 Address
 Order Given by Mrs. L. A. Warner
 How Secured
 Date of Funeral Nov. 26, '27
 Residence Bloomington, Ind., Decatur Co., Ind.
 Place of Death Ind.
 Funeral Services at Ind.
 Time of Funeral Service 2:30
 Clergyman Earl Allen
 Certifying Physician J. C. Lusk
 His Residence Lamoni, Ind.
 Number of Burial Certificate
 Cause of Death Carcinoma of Ovary
 (Primary) (Secondary)
 Date of Death Nov. 24, '27
 Occupation of the Deceased Ch. Housewife
 Single or Married Married Religion Baptist
 Date of Birth Jan. 9, 1859
 Age 68 Years 10 Months 15 Days
 Name of Father Israel Lambert
 His Birthplace Ohio
 Name of Mother Esther Carson
 (Maiden Name)
 Her Birthplace NK.
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Lamoni - Riverside Cemetery
 Lot No. 636
 Grave No.
 Section No.



Casket or Coffin	\$ 85 00
Metallic Lining <small>(State Kind)</small>	
Outside Box <small>(State Kind)</small>	
Grave Vault <small>(State Kind)</small>	
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	25 00
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	XX
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	3 50
Hearse	15 00
Auto Limousines to Cemetery @ \$	XX
Autos to R. R. Station @ \$	XX
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers <small>(Names of Newspapers)</small>	
Flowers, \$ Rental of Plants, \$	
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	10 00
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill \$	
By Amount Paid in Advance \$	
Balance \$	
Entered into Ledger, page or below	

To Funeral Charges..... Total, \$	By Cash..... \$

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives.....

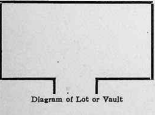
RECORD OF FUNERAL

Total No. 1317 Yearly No. 57 Date Dec. 3, 1927
 Name of Deceased Mary Jane Blake White Jo Davis Co., Ill.
 Husband---Wife---Widow Alfred J. Blake, Dec. (What Race) (Where Born)
 Son---Daughter of Mark Blake

Charge to.....
 Address.....
 Order Given by.....
 How Secured.....
 Date of Funeral Dec. 3, 1927
 Residence Hamilton Super. Hamilton Co., Mo.
 Place of Death Lawrence, Mo.
 Funeral Services at Lawrence Church
 Time of Funeral Service 2:30
 Clergyman Mrs. Noah M. Oiler
 Certifying Physician Dr. F. W. King
 His Residence Lamoni
 Number of Burial Certificate.....
 Cause of Death Artistic Solution
 (Primary) (Secondary)
 Date of Death Dec. 1, 1927
 Occupation of the Deceased at home
 Single or Married Married Religion none
 Date of Birth Feb. 16, 1848
 Age 79 Years 9 Months 15 Days
 Name of Father John Love
 His Birthplace Pear
 Name of Mother Sarah Love
 (Maiden Name)
 Her Birthplace Ill.
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Hamilton Co., Mo., Lawrence Cemetery

Casket or Coffin.....	\$ <u>100.00</u>
Metallic Lining..... (State Kind)	
Outside Box..... (State Kind)	
Grave Vault..... (State Kind)	
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	<u>2.50</u>
Embalming Body (with..... Fluid)	
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
" " Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	<u>12.00</u>
Auto Limousines to Cemetery @ \$.....	
Autos to R. R. Station @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
Flowers, \$..... Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill..... \$.....	
By Amount Paid in Advance..... \$.....	
Balance..... \$.....	
Entered into Ledger, page..... or below.....	

Lot No.....
 Grave No.....
 Section No.....



.....	To Funeral Charges..... Total, \$.....	By Cash..... \$.....
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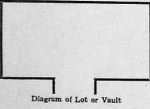
Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....
 Compiled by F. J. FEINREMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1318 Yearly No. 52 Date Dec. 11, 1927
 Name of Deceased Virna Marie Allen White Lamoni, Iowa
Husband---
 Wife---Widow
 Son---Daughter of Arthur and Mildred Allen
(What Race) (Where Born)

Charge to Arthur Allen
 Address
 Order Given by
 How Secured
 Date of Funeral Dec. 11, 1927
 Residence 409 Cr. 4 St., Lamoni, Ia.
 Place of Death See
 Funeral Services at See
 Time of Funeral Service 3:30
 Clergyman W. E. Paul, R. F. Rogers, Cash.
 Certifying Physician B. A. Kern
 His Residence Lamoni
 Number of Burial Certificate
 Cause of Death Pneumonia and Endocarditis
(Primary) (Secondary)
 Date of Death Dec. 8, 1927, 11 P.M.
 Occupation of the Deceased Student
 Single or Married Single Religion
 Date of Birth Apr. 30, 1918
 Age 9 Years 2 Months 30 Days
 Name of Father Arthur Ireland Allen
 His Birthplace Andover, Ma.
 Name of Mother Mildred Frances Judson
(Maiden Name)
 Her Birthplace Lamoni, Iowa
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Rose Hill Cemetery

Lot No. 709
 Grave No. 2
 Section No.



Casket or Coffin.....	<u>150.00</u>	\$ <u>6.00</u>
Metallic Lining.....		
(State Kind)		
Outside Box.....		
(State Kind)		
Grave Vault.....		
(State Kind)		
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		\$ <u>25.00</u>
Dressing Body, \$.....	Shaving, \$.....	
Hair Dressing.....		
Use of Folding Chairs.....		
“ “ Candelabrum, \$.....	Candles, \$.....	
Door Badge, \$.....	Gloves, \$.....	
Hearse.....		\$ <u>1.00</u>
Auto Limousine to Cemetery.. @ \$.....		
Autos to R. R. Station..... @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in.....	Newspapers.....	
(Names of Newspapers)		
Flowers, \$.....	Rental of Plants, \$.....	
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		\$ <u>5.00</u>
Lining Grave with Evergreen or Muslin.....		
Matting, \$.....	Tent Rental, \$.....	
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill..... \$		
By Amount Paid in Advance..... \$		
Balance..... \$		
Entered into Ledger, page..... or below.....		

	To Funeral Charges..... Total, \$				By Cash..... \$
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Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1319 Yearly No. 1 Date January 8, 1928
 Name of Deceased Leora Ethel Thomas, White (What Race) Ohio (Where Born)
 Husband---
 Wife---Widow } Geo. F. Thomas
 Son---Daughter of }

Charge to.....
 Address.....
 Order Given by.....
 How Secured.....
 Date of Funeral Jan. 8, '28
 Residence Lamoni, Iowa
 Place of Death Lincoln, Linn Co., Ia.
 Funeral Services at Santa Church - Lamoni
 Time of Funeral Service 2:30 P.M.
 Clergyman Rev. Mueser, C.E. Kaspe, Asst.
 Certifying Physician J.O. Muenchy
 His Residence Nichols, Ia.
 Number of Burial Certificate.....
 Cause of Death Chronic Myocarditis
 (Primary) (Secondary)
 Date of Death Jan. 7, '28
 Occupation of the Deceased at home
 Single or Married Married Religion P.O.S.
 Date of Birth Feb. 19, 1866
 Age 61 Years 10 Months 6 Days
 Name of Father William B. Thomas
 His Birthplace Ohio
 Name of Mother Annie Squiter
 (Maiden Name)
 Her Birthplace Ia.
 Body to be Shipped to Nichols, Ia.
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Lamoni - Rose Hill Cemetery

Casket or Coffin.....	\$
Metallic Lining.....	(State Kind)
Outside Box.....	(State Kind)
Grave Vault.....	(State Kind)
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
" " Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... (Gloves, \$.....)	
Hearse <u>Personal services</u>	<u>25.00</u>
Auto Limousines to Cemetery..@ \$.....	<u>2.00</u>
Autos to R. R. Station..... @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
Flowers, \$..... Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	<u>8.50</u>
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill.....	\$
By Amount Paid in Advance.....	\$
Balance.....	\$
Entered into Ledger, page..... or below.....	

Lot No. 860
 Grave No. 3
 Section No.
 Diagram of Lot or Vault

To Funeral Charges..... Total, \$	
<u>Shipping Undertaker:</u>	
<u>W. R. B. Mowbray</u>	
<u>Lock Hill - Ia.</u>	
By Cash..... \$	

Names of Pall Bearers D. P. Stechel, Wm. Hill, Ed. Hyde, Arthur Hyde, Chas. Hill, Clarence Test
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1320 Yearly No. 2 Date, January 31, 1928
 Name of Deceased Benjamin Murray Russell, White (What Race) Ohio (Where Born)
 Husband,
 Wife--Widow
 Son--Daughter of Eva Russell

Charge to.....
 Address.....
 Order Given by.....
 How Secured.....
 Date of Funeral Jan. 31, '28
 Residence 385 E. Main St., Summi, Ia.
 Place of Death Summi, Ia.
 Funeral Services at Santa Church
 Time of Funeral Service 2 P.M.
 Clergyman H. W. Duggan; H. L. Slick
 Certifying Physician J. H. M. White
 His Residence Summi, Ia.
 Number of Burial Certificate.....
 Cause of Death Bright's Disease
 (Primary) (Secondary)
 Date of Death Jan. 28, '28 - 2 P.M.
 Occupation of the Deceased Lawyer
 Single or Married Married Religion.....
 Date of Birth March 20, 1865
 Age 62 Years 9 Months 28 Days
 Name of Father Geo. Russell
 His Birthplace.....
 Name of Mother Julia Willis
 (Maiden Name)
 Her Birthplace.....
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Summi - Rose Hill Cemetery
 Lot No. 504
 Grave No. 3
 Section No.
 Diagram of Lot or Vault

Casket or Coffin	<u>Metzger H.C.</u>	\$ <u>285.00</u>
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	<u>42</u>
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with..... Fluid)		<u>25.00</u>
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse		<u>15.00</u>
Auto Limousines to Cemetery @ \$.....		<u>42</u>
Autos to R. R. Station @ \$.....		
Other Vehicle Service		
Aeroplane Service		
Death Notices in..... Newspapers		
(Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		<u>8.00</u>
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<u>10.00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$.....
By Amount Paid in Advance		\$.....
Balance		\$.....
Entered into Ledger, page..... or below		

To Funeral Charges	Total, \$	By Cash	\$
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Names of Pall Bearers H. A. Davis, Frank White, W. H. Cobden, Ed. Rauh, Tom Lauer, M. Nelson, Herb.
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1321 Yearly No. 5 Date February 7, 1928
 Name of Deceased Araron Truman Allen, White, Canton, Mich.
(What Race) (Where Born)
 Husband Wife-Widow Son-Daughter of Mattie Allen

Charge to
 Address Rolland Allen
 Order Given by Rolland Allen
 How Secured
 Date of Funeral Feb. 7, '28
 Residence 115 W. Main - Hamon, Ia.
 Place of Death Res.
 Funeral Services at Res.
 Time of Funeral Service 2:30 P.M.
 Clergyman W.C. Hall, James Thomas
 Certifying Physician L. G. Summy
 His Residence Hamon
 Number of Burial Certificate 1
 Cause of Death Amputation of Right Leg
(Primary) (Secondary)
 Date of Death Feb. 7, 1928
 Occupation of the Deceased Jan. O'Connell
 Single or Married Married Religion P.D.S.
 Date of Birth Jan. 8, 1861
 Age 67 Years 0 Months 26 Days
 Name of Father Truman Henry Allen
 His Birthplace New York
 Name of Mother Adeline Rebecca Homer
(Maiden Name)
 Her Birthplace Ohio
 Body to be Shipped to
 Size and Style of Casket or Coffin

Casket or Coffin	100	\$ 150 00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	xx
Grave Vault	(State Kind)	
Burial Suit or Dress		30 00
Burial Slippers and Hose		4 00
Engraving Plate	<u>Wood & Dist.</u>	4 00
Embalming Body (with Fluid)		25 00
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		15 00
Auto Limousines to Cemetery @ \$.....		
Autos to R. R. Station @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....	(Names of Newspapers)	
Flowers, \$..... Rental of Plants, \$.....		25 00
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		10 00
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....		\$
By Amount Paid in Advance.....		\$
Balance.....		\$
Entered into Ledger, page..... or below.....		

Manufactured by Rose Hill
 Interment at Hamon - Rose Hill Cemetery
 Lot No. 217
 Grave No. 1
 Section No.
 Diagram of Lot or Vault

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers A. H. White, Art. Gray, Alon Lapscott, Dr. Simpson, Leon DeLoboy, Fred Lewis
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1322 Yearly No. 4 Date Feb. 9 1928
 Name of Deceased Emma Maneta John (What Race) White (Where Born) Riley Twp., Wiggold Co., Ia.
 Husband---Widow } John + Emma John
 Sen---Daughter of }

Charge to John John
 Address John John
 Order Given by
 How Secured
 Date of Funeral Feb. 9, 1928
 Residence Riley Twp., Wiggold Co., Ia.
 Place of Death Wash
 Funeral Services at Rev.
 Time of Funeral Service 1:30 P.M.
 Clergyman James Thomas
 Certifying Physician L. E. Smith
 His Residence London
 Number of Burial Certificate
 Cause of Death Autolysis
 Date of Death Feb. 7, 28
 Occupation of the Deceased None
 Single or Married Single Religion
 Date of Birth Jan. 20, '28
 Age 0 Years 0 Months 18 Days
 Name of Father John Daniel John
 His Birthplace W. Va.
 Name of Mother Emma Lydia Williams
 Her Birthplace Wiggold Co., Ia.
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Rest Hill Cemetery

Lot No. 1117
 Grave No. 1
 Section No.

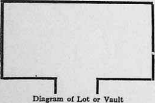


Diagram of Lot or Vault

Casket or Coffin	\$	<u>50.00</u>
Metallic Lining		
Outside Box	(State Kind)	<u>xx</u>
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		<u>xx</u>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<u>xx</u>
Auto Limousines to Cemetery	@ \$	<u>xx</u>
Autos to R. R. Station	@ \$	
Other Vehicle Service		
Acroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	<u>5.00</u>
Other Decorations		
Outlay for Lot		<u>20.00</u>
Opening Grave or Vault		<u>5.00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<u>xx</u>
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
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To Funeral Charges	Total	\$							

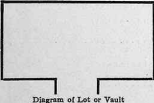
Names of Pall Bearers
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1323 Yearly No. 5 Date Feb. 15, 1928
 Name of Deceased Sarah Caroline Orickell, White, Colfax, Ind., Harrison Co., Mo.
 Husband - A. S. Orickell (What Race) (Where Born)

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral Feb. 12, 1928
 Residence Colfax, Harrison Co., Mo.
 Place of Death St. Louis, Mo.
 Funeral Services at W. S. Church, Audover, Mo.
 Time of Funeral Service 2:30
 Clergyman (Catholic)
 Certifying Physician D. P. Ford
 His Residence David City, Mo.
 Number of Burial Certificate
 Cause of Death Amnesia & Brain & Sclerosis
 Date of Death Feb. 11, 1928 - 6:45 A.M.
 Occupation of the Deceased St. Louis
 Single or Married Married Religion
 Date of Birth Feb. 13, 1861
 Age 66 Years 11 Months 28 Days
 Name of Father Henry Faust
 His Birthplace Germany
 Name of Mother Pauline Smith
 Her Birthplace Germany
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Audover, Mo. Cemetery

Casket or Coffin	#600	\$ 100.00
Metallic Lining		
Outside Box		
Grave Vault	<u>Shelton</u>	100.00
Burial Suit or Dress		25.00
Burial Slippers and Hose		4.00
Engraving Plate		
Embalming Body (with Fluid)		25.00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15.00
Auto Limousines to Cemetery, @ \$		
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	8.00
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		
By Amount Paid in Advance		
Balance		
Entered into Ledger, page or below		



Lot No.
 Grave No.
 Section No.

To Funeral Charges	Total, \$			By Cash	\$

Names of Pall Bearers
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1324 Yearly No. 6 Date February 14, 1928
 Name of Deceased Mrs. Emma Lasky (What Race) White (Where Born) Jackson Co., Mo.
 Husband---
 Wife---Widow } Geo. W. Lasky
 Son---Daughter of }

Charge to.....
 Address.....
 Order Given by.....
 How Secured.....
 Date of Funeral Feb. 16, '28
 Residence Lamar, Mo. (S. Linden)
 Place of Death Res.
 Funeral Services at.....
 Time of Funeral Service 2:30
 Clergyman W. Deary White; W. O. Ball
 Certifying Physician W. C. Hillway
 His Residence Lamar
 Number of Burial Certificate.....
 Cause of Death Diabetes Mellitus
 Date of Death Feb. 14, '28
 Occupation of the Deceased Ch. Mrs.
 Single or Married Married Religion.....
 Date of Birth Apr. 9, 1860
 Age 57 Years 10 Months 5 Days
 Name of Father Geo. George
 His Birthplace.....
 Name of Mother Nancy Lawrence
 Her Birthplace.....
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Lamar - Rose Hill Cemetery

Casket or Coffin.....	\$ <u>160.00</u>
Metallic Lining..... <small>(State Kind)</small>	
Outside Box..... <small>(State Kind)</small>	<u>2.00</u>
Grave Vault..... <small>(State Kind)</small>	
Burial Suit or Dress.....	
Burial Slippers and Hose.....	<u>5.00</u>
Engraving Plate.....	
Embalming Body (with..... Fluid)	<u>25.00</u>
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
" " Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	<u>15.00</u>
Auto Limousines to Cemetery..@ \$.....	
Autos to R. R. Station.....@ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers..... <small>(Names of Newspapers)</small>	<u>6.00</u>
Flowers, \$..... Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	<u>10.00</u>
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill..... \$	
By Amount Paid in Advance..... \$	
Balance..... \$	
Entered into Ledger, page..... or below	

Lot No. 362
 Grave No. 2
 Section No.....

	To Funeral Charges.....	Total, \$				By Cash.....	\$

Names of Pall Bearers Al Hayes, Ralph Selma, Art. Lantz, Clarence Fisher, Art. W. Otter, Jim Cantel
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

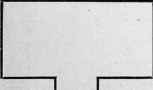
RECORD OF FUNERAL

Total No. 1320 Yearly No. 7 Date Feb. 28, 1928 78
 Name of Deceased Jacob Calvin Lasky White (What Race) (Where Born)
 Husband---
 Wife---Widow
 Son---Daughter of

Charge to Lloyd Lasky
 Address
 Order Given by
 How Secured
 Date of Funeral Feb. 28, '28
 Residence St. Joseph, Mo.
 Place of Death St. Joseph, Mo.
 Funeral Services at St. Joseph, Mo., St. Louis, Mo.
 Time of Funeral Service 2:30 P.M.
 Clergyman James Thomas, Peter Mueller
 Certifying Physician Dr. C. Keenhub
 His Residence St. Joseph, Mo.
 Number of Burial Certificate
 Cause of Death Arteria
 Date of Death Feb. 26, 1928 (Primary) (Secondary)
 Occupation of the Deceased

Casket or Coffin.....	\$	
Metallic Lining.....		
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....	(State Kind)	
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse <u>& Personal Services</u>		<u>2.50 00</u>
Auto Limousines to Cemetery @ \$.....		<u>5.00</u>
Autos to R. R. Station..... @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		
(Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		<u>1.00</u>
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	
By Amount Paid in Advance.....	\$	
Balance.....	\$	
Entered into Ledger, page..... or below.....		

Single or Married..... Religion.....
 Date of Birth.....
 Age 61 Years..... Months..... Days.....
 Name of Father.....
 His Birthplace.....
 Name of Mother..... (Maiden Name)
 Her Birthplace.....
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at St. Joseph, - Pres. Hill Cemetery

Lot No. 233
 Grave No. 172
 Section No.

 Diagram of Lot or Vault

To Funeral Charges.....	Total, \$	By Cash.....	\$
<u>Body Shipped from St. Joseph, Mo.</u> <u>Rec'd at St. Joseph, Mo. - Feb. 28 - 2:30 P.M.</u>			

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1326 Yearly No. 8 Date Feb. 29 1928
 Name of Deceased Louis T. Stephens White (What Race) (Where Born)
 Husband--- Loren Stephens
 Wife---
 Son---
 Daughter of

Charge to.....
 Address.....
 Order Given by.....
 How Secured.....
 Date of Funeral Funeral Service at Cem. 7:21:28
 Residence Amory, La.
 Place of Death Mississippi, Mo.
 Funeral Services at Loren Stephens Co.
 Time of Funeral Service 2:30
 Clergyman J. V. Gray
 Certifying Physician Carroll Hunt
 His Residence.....
 Number of Burial Certificate.....
 Cause of Death Chronic Valvular Heart Disease
 (Primary) (Secondary)
 Date of Death Feb. 26, 1928
 Occupation of the Deceased Retired Farmer
 Single or Married Married Religion.....
 Date of Birth.....
 Age 62 Years..... Months..... Days.....
 Name of Father.....
 His Birthplace.....
 Name of Mother..... (Maiden Name)
 Her Birthplace.....
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Elk Chapel Cemetery
 Lot No.....
 Grave No.....
 Section No.....
 Diagram of Lot or Vault

Casket or Coffin.....	\$
Metallic Lining..... (State Kind)	
Outside Box..... (State Kind)	
Grave Vault..... (State Kind)	
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
" " Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse <u>4 Personal Services</u> <u>20.00</u>	
Auto Limousines to Cemetery..@ \$.....	
Autos to R. R. Station.....@ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
(Names of Newspapers)	
Flowers, \$..... Rental of Plants, \$.....	<u>3.50</u>
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill.....	\$
By Amount Paid in Advance.....	\$
Balance.....	\$
Entered into Ledger, page..... or below.....	

To Funeral Charges..... Total, \$	By Cash..... \$
<u>Body Received 7/28-28 from Seltzer (Undertaker) Springfield, Mo.</u>	

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1327 Yearly No. 9 Date March 14, 1928

Name of Deceased James William God, White Virginia
(What Race) (Where Born)

Husband Kalarinka S. God
 Wife--Widow
 Son--Daughter of

Charge to J. H. God Est.
 Address A. H. Bell
 Order Given by A. H. Bell
 How Secured

Date of Funeral March 14, '28
 Residence Ch. 10 St., Danville, Va.
 Place of Death Res.

Funeral Services at Res.
 Time of Funeral Service 2:30
 Clergyman S. R. Jelle
 Certifying Physician D. H. King

His Residence Danville
 Number of Burial Certificate

Cause of Death Cancer of liver
(Primary) (Secondary)

Date of Death March 11, '28 - 10:30 A.M.
 Occupation of the Deceased Retired Farmer

Single or Married Married Religion M.E.

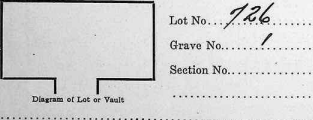
Date of Birth Aug. 6, 1836
 Age 91 Years 7 Months 5 Days

Name of Father John God
 His Birthplace Virginia

Name of Mother Sarah Alkender
(Maiden Name)
 Her Birthplace Virginia

Body to be Shipped to
 Size and Style of Casket or Coffin

Manufactured by
 Interment at Danville - Rose Hill Cemetery



Casket or Coffin	<u>100 Spec.</u>	\$ <u>150.00</u>
Metallic Lining		
Outside Box	<small>(State Kind)</small>	xx
Grave Vault	<small>(State Kind)</small>	
Burial Suit or Dress	<small>(State Kind)</small>	
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		<u>25.00</u>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		xx
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<u>15.00</u>
Auto Limousines to Cemetery, @ \$		xx
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	<small>(Names of Newspapers)</small>	
Flowers, \$	Rental of Plants, \$	<u>25.00</u>
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<u>7.50</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$ <u>227.50</u>
By Amount Paid in Advance		\$
Balance		\$
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To Funeral Charges Total, \$	By Cash \$

Names of Pall Bearers Dave Dancer, Howard Nelson, Ralph Stahl, Art Moran, Clarence Lohan, Ralph Lohan
 Names of Lodges

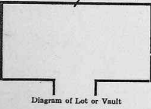
Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1322 Yearly No. 19 Date March 26, 1928
 Name of Deceased George Washington Paul, White (What Race) Afton, Iowa (Where Born)
 Husband--
 Wife--Widow } Mary Paul
 Son--Daughter of }

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral March 26, '28
 Residence Lamus, Iowa (1 mi. W. 1/2 mi. S.)
 Place of Death Id.
 Funeral Services at W. Church - Lamus, Ia.
 Time of Funeral Service 2 P.M.
 Clergyman H. S. Shick
 Certifying Physician T. M. King
 His Residence Lamus
 Number of Burial Certificate
 Cause of Death Heart trouble (Primary) (Secondary)
 Date of Death Mar. 23, '28
 Occupation of the Deceased Farmer
 Single or Married Married Religion
 Date of Birth Jan. 11, 1865
 Age 63 Years 2 Months 15 Days
 Name of Father Sam J. Paul
 His Birthplace Gen.
 Name of Mother Matilla Samuels
 Her Birthplace Clearwater, Minn.
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Amos, Mo. Cemetery

Casket or Coffin	<u>2/00 Spec.</u>	\$ <u>200</u> 00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	<u>Natural</u> (State Kind)	100 00
Burial Suit or Dress		
Burial Slippers and Hose		3 50
Engraving Plate		
Embalming Body (with Fluid)		25 00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	15 60
Hearse		5 00
Auto Limousines to Cemetery, @ \$	<u>Truck</u>	5 00
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Acroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	5 00
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		11 50
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		3 36
Pall Bearer Service		
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page		or below



Lot No.
 Grave No.
 Section No.

	To Funeral Charges	Total, \$					By Cash	\$

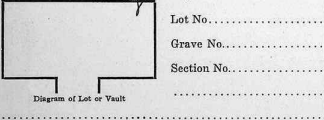
Names of Pall Bearers Oliver Craig, Wm. Howard, Chas. Mason, Walter Mason, Ed. Jackson, J. C. Anderson
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 15229 Yearly No. 11 Date. April 12, 1928
 Name of Deceased F. Ira Bell De Loria White Lincoln Co., Mo.
Husband
Wife Charles De Loria (What Race) (Where Born)
Son Daughter of

Charge to De Loria City, Ia.
 Address De Loria City, Ia.
 Order Given by ..
 How Secured ..
 Date of Funeral Apr 12, '28
 Residence De Loria City, Iowa.
 Place of Death De Loria
 Funeral Services at De Loria
 Time of Funeral Service 10 A.M.
 Clergyman Rev. Lebewitz
 Certifying Physician S. A. Geyer
 His Residence De Loria, Iowa
 Number of Burial Certificate ..
 Cause of Death Infarctus; Altimia Myocarditis
(Primary) (Secondary)
 Date of Death Apr 10, '28 - 10 A.M.
 Occupation of the Deceased at home
 Single or Married Married Religion ..
 Date of Birth March 20, 1873
 Age 55 Years 0 Months 20 Days
 Name of Father Father De Loria
 His Birthplace ..
 Name of Mother Spillman
(Maiden Name)
 Her Birthplace Ia.
 Body to be Shipped to Brunswick, Mo.
 Size and Style of Casket or Coffin ..
 Manufactured by ..
 Interment at Brunswick, Mo. Cemetery

Casket or Coffin	<u>27.00</u>	\$ <u>2700 00</u>
Metallic Lining		
Outside Box	<u>Shipping</u> (State Kind)	<u>00</u>
Grave Vault	(State Kind)	
Burial Suit or Dress	(State Kind)	
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		<u>25 00</u>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<u>18 00</u>
Auto Limousines to Cemetery @ \$		
Autos to R. R. Station @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
<small>(Names of Newspapers)</small>		
Flowers, \$	Rental of Plants, \$	
Other Decorations	Rental of Plants, \$	
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		<u>27 66</u>
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$ <u>2.50</u>	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page .. or below		



To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers ..

Names of Lodges ..

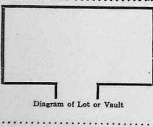
Lodge Insurance, \$.. Other Insurance, \$..

Names of Near Relatives ..

RECORD OF FUNERAL

Total No. 1330 Yearly No. 12 Date May 14, 1928
 Name of Deceased William Taylor (What Race) White (Where Born) East London, England
 Husband - X Lucinda Taylor, Dec.
 Wife - Widow
 Son - Daughter of

Charge to Santa Home
 Address Mo. Jr. Bldg. Mation
 Order Given by Mo. Jr. Bldg. Mation
 How Secured None
 Date of Funeral May 14 : 2 P.
 Residence Santa Home - Lamoni, Iowa
 Place of Death Res.
 Funeral Services at Res.
 Time of Funeral Service 2:30
 Clergyman H. R. Kelle
 Certifying Physician B. A. Green
 His Residence Lamoni
 Number of Burial Certificate None
 Cause of Death Infarction (Primary) (Secondary)
 Date of Death May 13, 1928 - 1 P.M.
 Occupation of the Deceased Quarman
 Single or Married Widowed Religion A.O.S.
 Date of Birth July 17, 1840
 Age 87 Years 9 Months 24 Days
 Name of Father George Taylor
 His Birthplace England
 Name of Mother Emma Johnson (Maiden Name)
 Her Birthplace England
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by Wm. Hill
 Interment at _____ Cemetery
 Lot No. 572
 Grave No. 4
 Section No. _____



Casket or Coffin	\$ 55.00
Metallic Lining	(State Kind)
Outside Box	(State Kind)
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalsming Body (with _____ Fluid)	5.00
Dressing Body, \$ _____ Shaving, \$ _____	
Hair Dressing	
Use of Folding Chairs	
" Candelabrum, \$ _____ Candles, \$ _____	
Door Badge, \$ _____ Gloves, \$ _____	
Hearse	5.00
Auto Limousines to Cemetery, @ \$ _____	
Autos to R. R. Station, @ \$ _____	
Other Vehicle Service	
Aeroplane Service	
Death Notices in _____ Newspapers	
(Names of Newspapers)	
Flowers, \$ _____ Rental of Plants, \$ _____	
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	8.00
Lining Grave with Evergreen or Muslin	
Matting, \$ _____ Tent Rental, \$ _____	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$ _____ Minister, \$ _____	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ _____
By Amount Paid in Advance	\$ _____
Balance	\$ _____
Entered into Ledger, page _____ or below	

To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearers _____
 Names of Lodges _____
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1331 Yearly No. 13 Date May 18, 1928
 Name of Deceased James Arthur Ballentine, Sr. (What Race) White (Where Born) Lama, Iowa
 Husband—Wife—Widow
 Son—Daughter of J. C. Ballentine, Jr.

Charge to.....
 Address.....
 Order Given by.....
 How Secured.....
 Date of Funeral May 18, 1928
 Residence Amoy, Iowa
 Place of Death Iowa
 Funeral Services at Amoy, Iowa
 Time of Funeral Service 3 P.M.
 Clergyman W. C. Pfall
 Certifying Physician T. M. King
 His Residence Lama, Iowa
 Number of Burial Certificate.....
 Cause of Death Thrombosis Labor
 (Primary) (Secondary)
 Date of Death May 17, 1928
 Occupation of the Deceased none
 Single or Married ? Religion none
 Date of Birth May 17, 1928
 Age..... Years..... Months..... Days.....
 Name of Father James Chad Ballentine
 His Birthplace Macon, Co., Iowa
 Name of Mother Mrs. May Adams
 (Maiden Name)
 Her Birthplace Manick, Co., Iowa
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Rose Hill Cemetery
 Lot No. 673
 Grave No. 8
 Section No.....

Casket or Coffin.....	\$ <u>12.50</u>
Metallic Lining..... (State Kind)	
Outside Box..... (State Kind)	
Grave Vault..... (State Kind)	
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
“ “ Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	
Auto Limousines to Cemetery. @ \$.....	
Autos to R. R. Station..... @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
(Names of Newspapers)	
Flowers, \$..... Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	
Lining Grave with Evergreen or Muslin <u>MAKED</u>	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill.....	\$ <u>12.50</u>
By Amount Paid in Advance.....	\$ <u>0.00</u>
Balance.....	\$ <u>12.50</u>
Entered into Ledger, page..... or below.....	

	Total, \$		By Cash.....	
To Funeral Charges.....				
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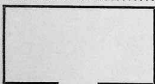
Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1332 Yearly No. 14 Date June 6, 1928
 Name of Deceased Johanna Mary Johnson, (What Race) White, (Where Born) Med. Station, Island, Sweden
 Husband August Johnson
 Wife August Johnson
 Son August Johnson

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral June 6, 1928
 Residence Coffin Supply, Hamilton Co., Mo.
 Place of Death Res.
 Funeral Services at S. D. S. Church, Ladover, Mo.
 Time of Funeral Service 2 P.M.
 Clergyman W. J. Bell, act. June 6, 1928
 Certifying Physician R. A. Green
 His Residence Ladover
 Number of Burial Certificate
 Cause of Death Domie Cancer; Diphtheria Melitica
 Date of Death June 4, 1928 (Primary) June 5, 1928 (Secondary)
 Occupation of the Deceased at home
 Single or Married married Religion S. D. S.
 Date of Birth Sept. 17, 1860
 Age 67 Years 6 Months 17 Days
 Name of Father John Swenson, Sweden
 His Birthplace Sweden
 Name of Mother Christina Bergeson (Maiden Name)
 Her Birthplace Sweden
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Ladover - R. No. Hill Cemetery

Casket or Coffin.....	\$ 1.50 00
Metallic Lining..... (State Kind)	
Outside Box..... (State Kind)	X.X.
Grave Vault..... (State Kind)	
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	25 00
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
“ “ Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	10 00
Hearse.....	X.X.
Auto Limousines to Cemetery..@ \$.....	
Autos to R. R. Station.....@ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
(Names of Newspapers)	
Flowers, \$..... Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	40 00
Opening Grave or Vault.....	8 00
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill.....	\$ 228 00
By Amount Paid in Advance.....	\$
Balance.....	\$
Entered into Ledger, page..... or below.....	

Lot No. 1558
 Grave No. 1
 Section No.

 Diagram of Lot or Vault

To Funeral Charges.....	Total, \$.....	By Cash.....	\$.....
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Names of Pall Bearers A. Wahl, Bert De Long, Tom Hill, Will Carpenter, Edw. Stantley, Wm. Stoll
 Names of Lodges S. D. S. - Mrs. Paul, Mattie, Seward, Dan, Laura, James, Geneva, Mrs. Bert De Long
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1333 Yearly No. 15 Date June 13, 1928Name of Deceased Frank O'Neil (What Race) White (Where Born) IowaHusband of _____
Wife—Widow _____
Son—Daughter of _____Charge to James O'Neil
Address _____Order Given by _____
How Secured _____Date of Funeral June 13, 1928
Residence Kellitor, IowaPlace of Death Carl O'Neil, IowaFuneral Services at Mt. Church, Kellitor, Ia.Time of Funeral Service 3 P.M.Clergyman J. E. LelandCertifying Physician E. A. TaylorHis Residence Carl O'Neil, Ia.

Number of Burial Certificate _____

Cause of Death Tuberculosis Suke-culosis
(Primary) (Secondary)Date of Death June 9, 1928Occupation of the Deceased FarmerSingle or Married Married Religion _____

Date of Birth _____

Age 34 Years 1 Months 0 DaysName of Father James O'NeilHis Birthplace IowaName of Mother Sadie O. Noz
(Maiden Name)Her Birthplace IowaBody to be Shipped to Carl O'Neil, Iowa
Homesick Hospital # 6408

Size and Style of Casket or Coffin _____

Manufactured by _____

Interment at Kellitor, Iowa CemeteryLot No. _____
Grave No. _____
Section No. _____

Diagram of Lot or Vault

Casket or Coffin	
Metallic Lining	(State Kind)
Outside Box	(State Kind)
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	\$ <u>Perman</u>
Auto Limousines to Cemetery, @ \$	
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in	Newspapers
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$ <u>5.00</u>
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Ineineration	
Personal Services	
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page _____	or below _____

To Funeral Charges Total, \$

By Cash \$

Names of Pall Bearers

Names of Lodges

Lodge Insurance, \$ Other Insurance, \$

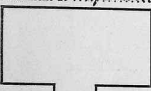
Names of Near Relatives

RECORD OF FUNERAL

Total No. 1334 Yearly No. 16 Date June 14, 1928
 Name of Deceased Sarah Ann State White Salem Green, Kentucky
Husband (What Race) (Where Born)
Wife Wm State, Dec.

Charge to S. A. State, Cal.
 Address Haywood State
 Order Given by Haywood State
 How Secured _____
 Date of Funeral June 14, '28
 Residence Harrison Co., Mo. - To you.
 Place of Death Res.
 Funeral Services at Res.
 Time of Funeral Service 2:30
 Clergyman W. A. Slick
 Certifying Physician W. H. King
 His Residence 9. ammi
 Number of Burial Certificate _____
 Cause of Death Diphtheria Pneumonia
(Primary) (Secondary)
 Date of Death June 12, '28
 Occupation of the Deceased at home
 Single or Married Married, Religion _____
 Date of Birth Dec. 8, 1839
 Age 88 Years 6 Months 4 Days
 Name of Father Wm State
 His Birthplace NK
 Name of Mother NK
(Maiden Name)
 Her Birthplace NK
 Body to be Shipped to _____

Casket or Coffin	\$ 400	00
Metallic Lining		
Outside Box	(State Kind)	
Grave Vault	<u>Lava</u>	110 00
Burial Suit or Dress	(State Kind)	32 00
Burial Slippers and Hose		7 50
Engraving Plate		
Embalming Body (with _____ Fluid)	2 00	00
Dressing Body, \$ _____ Shaving, \$ _____		
Hair Dressing		
Use of Folding Chairs		1x
" " Candelabrum, \$ _____ Candles, \$ _____		
Door Badge, \$ _____ Gloves, \$ _____		
Hearse	1 00	00
Auto Limousines to Cemetery @ \$ _____		1x
Autos to R. R. Station @ \$ _____		
Other Vehicle Service		
Aeroplane Service		
Death Notices in _____ Newspapers		
<small>(Names of Newspapers)</small>		
Flowers, \$ _____ Rental of Plants, \$ _____		5 00
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$ _____ Tent Rental, \$ _____		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$ _____ Minister, \$ _____		
Telegrams and Telephone Charges		
Pall Bearer Service		
<u>Care of Missions Charities</u>		5 00
Total Footing of Bill	\$ 592 00	
By Amount Paid in Advance <u>By Cash</u>	\$ 10	
Balance	\$ 582 00	
Entered into Ledger, page _____ or below _____		



Lot No. _____
 Grave No. _____
 Section No. _____

	To Funeral Charges	Total, \$				By Cash	\$

Names of Pall Bearers O. Nelson, Tom Hill, Wood Hunter, Ed Steady, Wm Carpenter, Will Hunter
 Names of Lodges _____
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1325 Yearly No. 17

Date June 15, 1928

Name of Deceased Elizabeth Martin
 Husband--
 Wife--Widow
 Son--Daughter of } Mrs. Martin, Dec.

White (What Race) Ladonia (Where Born)

Charge to A. T. Shinn
 Address Woodbine, Iowa

Order Given by H.H.
 How Secured H.H.

Date of Funeral June 15, 1928
 Residence Sanita Home, Lammie, Ia.

Place of Death Res.
 Funeral Services at Res.

Time of Funeral Service 2 P.M.
 Clergyman Ed. Hayes

Certifying Physician W.H. Hess
 His Residence Lammie

Number of Burial Certificate 1
 Cause of Death Colossal Flu

Date of Death June 14, 1928
 Occupation of the Deceased Lammie

Single or Married Widow Religion W.D.
 Date of Birth June 25, 1831

Age 96 Years 11 Months 19 Days
 Name of Father Samuel Elliott

His Birthplace W.K.
 Name of Mother Jessie Hill

Her Birthplace W.K.
 Body to be Shipped to Woodbine, Iowa

Size and Style of Casket or Coffin Woodbine, Iowa

Manufactured by Woodbine, Iowa
 Interment at Woodbine, Iowa Cemetery



Lot No. _____
 Grave No. _____
 Section No. _____

Casket or Coffin	<u>1500</u>	\$	<u>170</u>	<u>00</u>
Metallic Lining				
Outside Box				<u>25</u>
Grave Vault				
Burial Suit or Dress			<u>15</u>	<u>00</u>
Burial Slippers and Hose			<u>4</u>	<u>00</u>
Engraving Plate				
Embalming Body (with Fluid)			<u>20</u>	<u>00</u>
Dressing Body, \$		Shaving, \$		
Hair Dressing				
Use of Folding Chairs				
" " Candelabrum, \$		Candles, \$		
Door Badge, \$		Gloves, \$		
Hearse			<u>10</u>	<u>00</u>
Auto Limousines to Cemetery @ \$				
Autos to R. R. Station @ \$				
Other Vehicle Service				
Aeroplane Service				
Death Notices in Newspapers				
Flowers, \$		Rental of Plants, \$		
Other Decorations				
Outlay for Lot				
Opening Grave or Vault				
Lining Grave with Evergreen or Muslin				
Matting, \$		Tent Rental, \$		
Use of Lowering Device				
Rental of Vault				
Outlay for Shipping Charges				
Removal Charges				
Incineration				
Personal Services				
Singers				
Church Charges, \$		Minister, \$		
Telegrams and Telephone Charges				
Pall Bearer Service				
Total Footing of Bill		\$	<u>270</u>	<u>00</u>
By Amount Paid in Advance		\$		
Balance		\$		
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To Funeral Charges	Total	\$				By Cash	\$

Names of Pall Bearers _____
 Names of Lodges _____
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1336 Yearly No. 18 Date June 28, 1928

Name of Deceased Le Mills Ray (What Race) White
 Residence London, England (What Born) England
 Husband...
 Wife...
 Son...
 Daughter of Mr. R. Ray, Dec.

Charge to Santo Home
 Address London, England
 Order Given by Mrs. Joseph Bury, Matron
 How Secured _____
 Date of Funeral July 2, 1928
 Residence Santo Home, London, Eng.
 Place of Death See
 Funeral Services at See
 Time of Funeral Service 9:30
 Clergyman J. M. Stubbins, Paris, Missouri
 Certifying Physician L. H. Green
 His Residence London
 Number of Burial Certificate _____
 Cause of Death Dropsy, Organic Heart Disease
 Date of Death July 27, 1928; 2:30 P.M.
 Occupation of the Deceased Annuitant
 Single or Married Widow Religion A. O. S.
 Date of Birth May 1, 1839
 Age 29 Years 1 Months 26 Days
 Name of Father Joseph
 His Birthplace UK
 Name of Mother UK
 Her Birthplace _____
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by _____
 Interment at London - Ross Hill Cemetery

Casket or Coffin				\$ <u>50.00</u>
Metallic Lining	(State Kind)			
Outside Box	(State Kind)			
Grave Vault	(State Kind)			
Burial Suit or Dress				
Burial Slippers and Hose				
Engraving Plate				
Embalming Body (with Fluid)				\$ <u>5.00</u>
Dressing Body, \$	Shaving, \$			
Hair Dressing				
Use of Folding Chairs				
" " Candelabrum, \$	Candles, \$			
Door Badge, \$	Gloves, \$			
Hearse				\$ <u>5.00</u>
Auto Limousines to Cemetery <u>2</u> @ \$				\$ <u>4.00</u>
Autos to R. R. Station	@ \$			
Other Vehicle Service				
Aeroplane Service				
Death Notices in _____	Newspapers			
(Names of Newspapers)				
Flowers, \$	Rental of Plants, \$			
Other Decorations				
Outlay for Lot				
Opening Grave or Vault				\$ <u>8.00</u>
Lining Grave with Evergreen or Muslin				
Matting, \$	Tent Rental, \$			
Use of Lowering Device				
Rental of Vault				
Outlay for Shipping Charges				
Removal Charges				
Incineration				
Personal Services				
Singers				
Church Charges, \$	Minister, \$			
Telegrams and Telephone Charges				
Pall Bearer Service				
Total Footing of Bill				\$ _____
By Amount Paid in Advance				\$ _____
Balance				\$ _____
Entered into Ledger, page _____				or below _____

Diagram of Lot or Vault

Lot No. 433
 Grave No. 1-2
 Section No. _____

To Funeral Charges Total, \$	By Cash \$

Names of Pall Bearers _____
 Names of Lodges _____
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1337 Yearly No. 19 Date July 3, 1928

Name of Deceased Louise Kramer (What Race) White (Where Born) _____

Husband---
Wife---Widow
Son---Daughter of _____

Charge to Frank Kramer

Address Eastville, Mo.

Order Given by _____

How Secured _____

Date of Funeral July 3, '28

Residence Eastville, Mo.

Place of Death Eastville, Mo.

Funeral Services at Eastville, Mo.

Time of Funeral Service 7:30

Clergyman _____

Certifying Physician _____

His Residence _____

Number of Burial Certificate _____

Cause of Death _____ (Primary) _____ (Secondary)

Date of Death July 3, '28

Occupation of the Deceased _____

Single or Married _____ Religion _____

Date of Birth _____

Age _____ Years _____ Months _____ Days

Name of Father _____

His Birthplace _____

Name of Mother _____ (Maiden Name)

Her Birthplace _____

Body to be Shipped to _____

Size and Style of Casket or Coffin _____

Manufactured by _____

Interment at Eastville, Mo. Cemetery _____

Lot No. _____

Grave No. _____

Section No. _____

Diagram of Lot or Vault _____

Casket or Coffin	\$	
Metallic Lining		(State Kind)
Outside Box		(State Kind)
Grave Vault		(State Kind)
Burial Suit or Dress		(State Kind)
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with _____ Fluid)		<u>2.00</u>
Dressing Body, \$ _____ Shaving, \$ _____		
Hair Dressing		
Use of Folding Chair		
“ “ Candelabrum, \$ _____ Candles, \$ _____		
Door Badge, \$ _____ Gloves, \$ _____		
Hearse		
Auto Limousines to Cemetery, @ \$ _____		<u>1.00</u>
Autos to R. R. Station, @ \$ _____		
Other Vehicle Service		
Aeroplane Service		
Death Notices in _____ Newspapers		
(Names of Newspapers)		
Flowers, \$ _____ Rental of Plants, \$ _____		
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$ _____ Tent Rental, \$ _____		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<u>1.00</u>
Singers		
Church Charges, \$ _____ Minister, \$ _____		
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page _____ or below _____		

To Funeral Charges	Total, \$	By Cash	\$
<u>Funeral conducted for Frank Kramer</u>			

Names of Pall Bearers _____

Names of Lodges _____

Lodge Insurance, \$ _____ Other Insurance, \$ _____

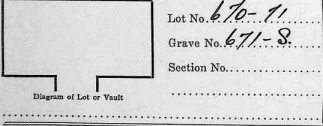
Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1338 Yearly No. 20 Date July 31, 1928

Name of Deceased William J. Saker
Husband, Wife, Daughter of Almira Tida Saker
Residence St. Louis, Mo. (Where Born)

Charge to.....
Address.....
Order Given by.....
How Secured.....
Date of Funeral July 21, '28
Residence Linn, Iowa
Place of Death Reg.
Funeral Services at Santa Church - Linn
Time of Funeral Service 2:30
Clergyman J. B. Bell; J. R. Stead
Certifying Physician W. Mitchell, M.D.
His Residence Linn, Iowa
Number of Burial Certificate.....
Cause of Death Suicide; gunshot wound in head
(Primary) (Secondary)
Date of Death July 17, '28
Occupation of the Deceased Restaurant Proprietor
Single or Married Married Religion.....
Date of Birth July 23, 1876
Age 51 Yrs. 11 Months 19 Days
Name of Father Francis Marion Saker
His Birthplace Iowa
Name of Mother Jane C. Neal
(Maiden Name) Linn, Iowa
Her Birthplace.....
Body to be Shipped to.....
Size and Style of Casket or Coffin.....
Manufactured by.....
Interment at Linn Was Hill Cemetery



Casket or Coffin	\$ <u>125.00</u>
Metallic Lining	(State Kind)
Outside Box	(State Kind)
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	<u>2.60</u>
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	<u>15.00</u>
Auto Limousines to Cemetery, @ \$	<u>2.50</u>
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	<u>10.00</u>
Opening Grave or Vault	<u>9.50</u>
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill \$	
By Amount Paid in Advance \$	
Balance, \$	
Entered into Ledger, page or below	

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers John Mitchell, Ray New, W. E. Lindler, W. J. Hollander, John Evans, Jake Lovvick
Names of Lodges.....
Lodge Insurance, \$..... Other Insurance, \$.....
Names of Near Relatives.....

Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1339 Yearly No. 21 Date July 27 1928
 Name of Deceased Mary Sophia Layton, White (What Race) White (Where Born)
 Husband--
 Wife--Elizabeth S. Layton, Dec.
 Son--
 Daughter of

Charge to H. J. Mathis
 Address
 Order Given by

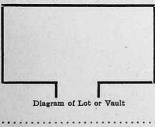
How Secured
 Date of Funeral July 27, '28
 Residence Ramoni, Iowa
 Place of Death Des Moines, Iowa
 Funeral Services at Ramoni, Ia.
 Time of Funeral Service 2 P.M.

Clergyman W. E. Hall
 Certifying Physician Co. S. Samp.
 His Residence Des Moines, Ia.
 Number of Burial Certificate
 Cause of Death Stroke (Primary) Coronary artery (Secondary)
 Date of Death July 24, '28

Occupation of the Deceased at home
 Single or Married Widow Religion Ch. Ep.
 Date of Birth Aug. 27, 1846
 Age 81 Years 19 Months 28 Days

Name of Father Charles Suffitt
 His Birthplace N.Y.
 Name of Mother Letitia Radfield (Maiden Name)
 Her Birthplace New York
 Body to be Shipped to

Size and Style of Casket or Coffin
 Manufactured by
 Interment at Lamoni - Ros. Hill Cemetery



Lot No. 497
 Grave No. 273
 Section No.

Casket or Coffin	# 200	\$ 200.00
Metallic Lining		
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress	(State Kind)	
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		2.50
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	15.00
Hearse		
Auto Limousines to Cemetery.. @ \$		x
Autos to R. R. Station .. @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in .. Newspapers		
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		9.50
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		x
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Trip to Des. Mo. for body		W.
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page		or below

To Funeral Charges	Total, \$				
				By Cash	\$

Names of Pall Bearers Oscar Anderson, Andrew Anderson, Dan Anderson, Frank Wells
 Names of Lodges Dan. Danica, J. L. Danica
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1340 Yearly No. 22 Date July 29, 1928
 Name of Deceased Emma May Loop White Dallas, D. U.
(What Race) (Where Born)
 Husband--
 Wife--Widow
 Son--Daughter of } P. M. Loop

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral July 29, 22
 Residence Dallas, D. U.
 Place of Death Home
 Funeral Services at Sam's Church
 Time of Funeral Service 2:30 P.M.
 Clergyman W. Bell
 Certifying Physician B. A. Hous
 His Residence Samson
 Number of Burial Certificate
 Cause of Death July 27, 28 9 (Primary) (Secondary)
 Date of Death
 Occupation of the Deceased at home
 Single or Married Married Religion L. O. S.
 Date of Birth July 7, 1850
 Age 78 Years 0 Months 20 Days
 Name of Father N.K.
 His Birthplace
 Name of Mother
(Maiden Name)
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at Samson Rest Hill Cemetery

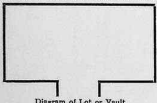


Diagram of Lot or Vault

Lot No. 912
 Grave No. S
 Section No.

Casket or Coffin	<u>#600 Oak</u>	\$ <u>100 00</u>
Metallic Lining		
Outside Box	<small>(State Kind)</small>	<u>N.Y.</u>
Grave Vault	<small>(State Kind)</small>	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		<u>25 00</u>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	<u>15 00</u>
Hearse		
Auto Limousines to Cemetery, @ \$		<u>N.Y.</u>
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
<small>(Names of Newspapers)</small>		
Flowers, \$	Rental of Plants, \$	<u>5 00</u>
Other Decorations		
Outlay for Lot		<u>25 00</u>
Opening Grave or Vault		<u>50 00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<u>N.Y.</u>
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		<u>\$ 759 50</u>
By Amount Paid in Advance		
Balance		
Entered into Ledger, page		or below

	To Funeral Charges	Total, \$			By Cash		\$

Names of Pall Bearers
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1341 Yearly No. 23 Date August 2, 1928
Name of Deceased Lila Geraldine Lane
Husband-- N. Howard Lane
(What Race) (Where Born)
Wife--Widow
Son--Daughter etc.

Charge to
Address
Order Given by
How Secured
Date of Funeral Aug 2, 1928
Residence Hamilton Co., Mo.
Place of Death Res.
Funeral Services at Res.
Time of Funeral Service 2 P.M.
Clergyman James Thomas
Certifying Physician Broyles, W.A.
His Residence Capeville, Mo.
Number of Burial Certificate
Cause of Death Complications, embolism of pulmonary artery
Date of Death July 31, 1928 - 2 P.M.
Occupation of the Deceased none
Single or Married Single Religion
Date of Birth Oct 1, '29
Age 0 Years 8 Months 27 Days
Name of Father Harvey Howard Lane
His Birthplace Hamilton Co., Mo.
Name of Mother Aelia Wood Smith
(Maiden Name)
Her Birthplace Ridgeway, Mo.
Body to be Shipped to
Size and Style of Casket or Coffin
Manufactured by
Interment at Leman - Rose Hill Cemetery

Table with 2 columns: Description and Amount. Items include Casket or Coffin (1209 1/2 - 100), Metallic Lining, Outside Box, Grave Vault, Burial Suit or Dress, Burial Slippers and Hose, Engraving Plate, Embalming Body, Dressing Body, Hair Dressing, Use of Folding Chairs, Candelabrum, Candles, Door Badge, Gloves, Hearse, Auto Limousines to Cemetery, Autos to R. R. Station, Other Vehicle Service, Aeroplane Service, Death Notices in Newspapers, Flowers, Rental of Plants, Other Decorations, Outlay for Lot, Opening Grave or Vault, Lining Grave with Evergreen or Muslin, Matting, Tent Rental, Use of Lowering Device, Rental of Vault, Outlay for Shipping Charges, Removal Charges, Incineration, Personal Services, Singers, Church Charges, Minister, Telegrams and Telephone Charges, Pall Bearer Service. Total Footing of Bill \$65.00.

Lot No 69
Grave No. 4
Section No.
Diagram of Lot or Vault

Table with 2 main columns: To Funeral Charges and By Cash. Includes rows for Total, Balance, and Entered into Ledger.

Names of Pall Bearers
Names of Lodges
Lodge Insurance, \$
Other Insurance, \$
Names of Near Relatives

RECORD OF FUNERAL

Total No. *1342* Yearly No. *28* Date *Sept. 16* 19*28*
 Name of Deceased *Ann Martha Smivoly* *White* *Leicester, Ontario, Canada*
(What Race) (Where Born)

Husband--
 Wife--Widow
 Son--Daughter of *Joseph S. Smivoly, Dec.*

Charge to *Ann M. Smivoly, Est.*

Address *9*

Order Given by *Maud Smivoly*

How Secured *9*

Date of Funeral *Sept. 16, '28*

Residence *Lamoni, Iowa*

Place of Death *Leicester, Ont.*

Funeral Services at *Leicester*

Time of Funeral Service *3 P.M.*

Clergyman *Rev. F. J. White*

Certifying Physician *Dr. Lindsay*

His Residence *Lamoni*

Number of Burial Certificates *1*

Cause of Death *Diabetes Mellitus*
(Primary) (Secondary)

Date of Death *Sept. 14, '28*

Occupation of the Deceased *at home*

Single or Married *widow* Religion *L. O. S.*

Date of Birth *Oct. 2, 1854*

Age *73* Years *10* Months *6* Days

Name of Father *John & Mrs. Strayer*

His Birthplace *Canada*

Name of Mother *Esther*
(Maiden Name)

Her Birthplace *Canada*

Body to be Shipped to

Size and Style of Casket or Coffin

Manufactured by

Interment at *Lamoni - Rose Hill* Cemetery

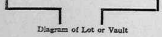


Diagram of Lot or Vault

Lot No. *730*

Grave No. *3*

Section No.

Casket or Coffin <i>710 100</i>	\$	100	00
Metallic Lining (State Kind)			
Outside Box (State Kind)			
Grave Vault (State Kind)			
Burial Suit or Dress		30	00
Burial Slippers and Hose			
Engraving Plate			
Embalming Body (with Fluid)		20	00
Dressing Body, \$ Shaving, \$			
Hair Dressing			
Use of Folding Chairs		xx	
" " Candelabrum, \$ Candles, \$			
Door Badge, \$ Gloves, \$			
Hearse		15	00
Auto Limousines to Cemetery @ \$		3	50
Autos to R. R. Station @ \$			
Other Vehicle Service			
Acroplane Service			
Death Notices in Newspapers			
<small>(Names of Newspapers)</small>			
Flowers, \$ Rental of Plants, \$		6	00
Other Decorations			
Outlay for Lot			
Opening Grave or Vault		10	00
Lining Grave with Evergreen or Muslin			
Matting, \$ Tent Rental, \$			
Use of Lowering Device			
Rental of Vault			
Outlay for Shipping Charges			
Removal Charges			
Incineration			
Personal Services		1	00
Singers			
Church Charges, \$ Minister, \$			
Telegrams and Telephone Charges			
Pall Bearer Service			
Total Footing of Bill	\$	187	50
By Amount Paid in Advance	\$		
Balance	\$		
Entered into Ledger, page			or below

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers *Dewey White, Dr. Lindsay, John Lane, Dan McLandry, Louis Hoffinger, W. B. Shultz*

Names of Lodges *F. B. - Higgins, Guthrie, Isaac Lane, Fred. Howland, A. O. White*

Lodge Insurance, \$ *Shady Side, Iron Hill, New York Society, Mrs. Lindsay* Other Insurance, \$

Names of Near Relatives

RECORD OF FUNERAL

Total No. 1343 Yearly No. 25 Date: Sept. 17, 1928

Name of Deceased: John Zimmerman White (What Race) Montgomery Co., Ohio (Where Born)

Husband-Wife-Son-Daughter of: Ely Pitt, John, Dec. Charge to: Clara Study

Address: Order Given by: How Secured:

Date of Funeral: Sept. 17, 1928 Residence: Granville, L.P., Decatur Co., Ia.

Place of Death: Res. Funeral Services at: E.L. Chapel, Granville.

Time of Funeral Service: 2 P.M. Clergyman: C. G. Biddle, Kelliston

Certifying Physician: W. A. Zillo His Residence: Lammie

Number of Burial Certificate: Cause of Death: General Debility (Primary) (Secondary)

Date of Death: Sept. 15, 1928 Occupation of the Deceased: Gen Farmer

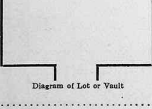
Single or Married: Married Religion: Date of Birth: Dec. 3, 1837

Age: 90 Years 9 Months 12 Days Name of Father: Jacob Zimmerman

His Birthplace: Ohio Name of Mother: Battelle Nes (Maiden Name) Virginia

Her Birthplace: Her Birthplace: Body to be Shipped to:

Size and Style of Casket or Coffin: Manufactured by: Interment at: E.L. Chapel Cemetery



Lot No. Grave No. Section No.

Table with 3 columns: Item, Price, Total. Items include Casket or Coffin (#200), Metallic Lining, Outside Box, Grave Vault, Burial Suit or Dress, Burial Slippers and Hose, Engraving Plate, Embalming Body (with Fluid), Dressing Body, Shaving, Hair Dressing, Use of Folding Chairs, Candelabrum, Candles, Door Badge, Gloves, Hearse, Auto Limousines to Cemetery, Autos to R. R. Station, Other Vehicle Service, Aeroplane Service, Death Notices, Newspapers, Flowers, Rental of Plants, Other Decorations, Outlay for Lot, Opening Grave or Vault, Lining Grave with Evergreen or Muslin, Matting, Tent Rental, Use of Lowering Device, Rental of Vault, Outlay for Shipping Charges, Removal Charges, Incineration, Personal Services, Singers, Church Charges, Minister, Telegrams and Telephone Charges, Pall Bearer Service.

Table with 2 main columns: To Funeral Charges and By Cash. Includes sub-totals for Total, Balance, and Entered into Ledger page.

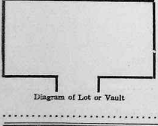
Names of Pall Bearers: Names of Lodges: Lodge Insurance, \$: Other Insurance, \$: Names of Near Relatives:

RECORD OF FUNERAL

Total No. **1344** Yearly No. **26** Date **October 17, 1928**
 Name of Deceased **Stear Donald Gray** (White) **Leffitt, Iowa, Decatur Co., Ia.**
 Husband---Wife---Widow (What Race) (Where Born)
 Son---Daughter of **John J. Gray**

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral **Oct. 17, '28**
 Residence **Decatur City, Iowa**
 Place of Death **Res.?**
 Funeral Services at **M.E. Church, Decatur City**
 Time of Funeral Service **2:30**
 Clergyman **Charles J. Attentio**
 Certifying Physician **J. H. White, Decatur City**
 His Residence
 Number of Burial Certificate
 Cause of Death **Cholera Infantum** (Primary)
 Date of Death **Oct 13, '28 - 11 P.M.** (Secondary)
 Occupation of the Deceased **none**
 Single or Married **Single** Religion **none**
 Date of Birth **Oct. 7, '26**
 Age **2** Years **0** Months **8** Days
 Name of Father **John J. Gray**
 His Birthplace **Russell Co., Ia.**
 Name of Mother **Mrs. C. Wiley** (Maiden Name)
 Her Birthplace **Decatur Co., Ia.**
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at **Decatur City** Cemetery

Casket or Coffin	15 1/2	\$ 40.00
Metallic Lining	(State Kind)	
Outside Box		X
Grave Vault	(State Kind)	
Burial Suit or Dress	(State Kind)	
Burial Slippers and Hose		
Engraving Plate		
Embalsming Body (with _____ Fluid)		XX
Dressing Body, \$ _____ Shaving, \$ _____		
Hair Dressing		
Use of Folding Chairs		
“ “ Candelabrum, \$ _____ Candles, \$ _____		
Door Badge, \$ _____ Gloves, \$ _____		
Hearse		
Auto Limousines to Cemetery @ \$ _____		XX
Autos to R. R. Station @ \$ _____		
Other Vehicle Service		
Aeroplane Service		
Death Notices in _____ Newspapers		
(Names of Newspapers)		
Flowers, \$ _____ Rental of Plants, \$ _____		
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		XX
Lining Grave with Evergreen or Muslin		
Matting, \$ _____ Tent Rental, \$ _____		
Use of Lowering Device		XX
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		XX
Singers		
Church Charges, \$ _____ Minister, \$ _____		
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$ _____
By Amount Paid in Advance		\$ _____
Balance		\$ _____
Entered into Ledger, page _____ or below		



Lot No.
 Grave No.
 Section No.

To Funeral Charges	Total, \$	By Cash	\$
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		

Names of Pall Bearers
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1345 Yearly No. 27 Date October 28, 1928
 Name of Deceased. Albert Austin Bell White Lisleur Co., Miss.
(What Race) (Where Born)

Husband---
 Wife---Widow
 Son---Daughter of

Charge to A. J. Bell, Est.
 Address Grand Bell
 Order Given by Grand Bell

How Secured
 Date of Funeral Oct. 28, '28
 Residence W. 10 St. Lisleur, Iowa
 Place of Death Res.
 Funeral Services at Res

Time of Funeral Service 2:30
 Clergyman H. N. Halls
 Certifying Physician F. A. Bowman, Cornea
 His Residence Leon, Ia

Number of Burial Certificate
 Cause of Death Found Dead in Bed
 Date of Death Oct 25 '28 (Primary) - 11:00 (Secondary)
 Occupation of the Deceased Steno

Single or Married Single Religion L. O. S.
 Date of Birth Aug. 6, 1859
 Age 69 Years 2 Months 19 Days

Name of Father Shuba Bell
 His Birthplace Ohio
 Name of Mother Mary Kilbey
(Maiden Name)
 Her Birthplace Ohio
 Body to be Shipped to

Size and Style of Casket or Coffin
 Manufactured by
 Interment at Summit Ros. Hill Cemetery

Lot No. 734
 Grave No. 3
 Section No.

Diagram of Lot or Vault

Casket or Coffin	\$ 2.00 00
Metallic Lining	
Outside Box	X X
Grave Vault	
Burial Suit or Dress	
Burial Slippers and Hose	4.25
Embalming Plate	
Embalming Body (with Fluid)	25.00
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	X X
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	15.00
Auto Limousines to Cemetery, @ \$	X X
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$ Rental of Plants, \$	25.00
Other Decorations	
Outlay for Lot	7.95
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	X X
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

To Funeral Charges	Total, \$
By Cash	\$
Names of Pall Bearers <u>Wm. Carbeck, Frank Wise, John De Long, S. K. Sawney, Leo Bauer, Leo Gandy</u>	
Names of Lodgers <u>F. B. Rex, Mary, Louisa, Adeline, Hattie, Helen, Humphrey, Leo, Webster</u>	
S. O. F. O. S. <u>Della Jones, Elva Jones, Fred, Gordon, Helen, Winters</u>	
Lodge Insurance, \$	Other Insurance, \$
Names of Near Relatives	

RECORD OF FUNERAL

Total No. 1346 Yearly No. 28 Date November 1, 1928

Name of Deceased Christian F. Hayer (What Race) White (Where Born) St. Louis, Mo.
 Husband Wife Son Daughter Lillian S. Hayer

Charge to C. F. Hayer, Inc.
 Address West Haven, Conn.
 Order Given by Wm Hayer Redbank
 How Secured
 Date of Funeral Nov. 1, '28
 Residence Lamoni, Ia.
 Place of Death Red Bank, Ia.
 Funeral Services at Santa Church
 Time of Funeral Services 2:30
 Clergyman A. B. Phillips; Wm. Prall
 Certifying Physician D. A. Linn
 His Residence Lamoni
 Number of Burial Certificate
 Cause of Death Bugchle Disease
 Date of Death Oct 30, 1928 (Primary) (Secondary)
 Occupation of the Deceased Ret. Farmer
 Single or Married Married Religion P. O. S.
 Date of Birth Oct 29, 1848
 Age 80 Years 0 Months 1 Days
 Name of Father Olav Hayer
 His Birthplace Norway
 Name of Mother Juba Clifton (Maider Name)
 Her Birthplace Norway
 Body to be Shipped to

Casket or Coffin		\$	275.00
Metallic Lining	(State Kind)		
Outside Box	(State Kind)		X X
Grave Vault	(State Kind)		
Burial Suit or Dress			
Burial Slippers and Hose			
Engraving Plate			
Embalming Body (with Fluid)			25.00
Dressing Body, \$	Shaving, \$		
Hair Dressing			
Use of Folding Chairs			
" " Candelabrum, \$	Candles, \$		
Door Badge, \$	Gloves, \$		
Hearse			10.00
Auto Limousines to Cemetery @ \$		2.50	1.00
Autos to R. R. Station @ \$			
Other Vehicle Service			
Aeroplane Service			
Death Notices in	Newspapers		
(Names of Newspapers)			
Flowers, \$	Rental of Plants, \$		8.50
Other Decorations	Rental of Plants, \$		
Outlay for Lot			
Opening Grave or Vault			10.00
Lining Grave with Evergreen or Muslin			
Matting, \$	Tent Rental, \$		
Use of Lowering Device			
Rental of Vault			
Outlay for Shipping Charges			
Removal Charges			
Incineration			
Personal Services			75c
Singers			
Church Charges, \$	Minister, \$		
Telegrams and Telephone Charges			
Pall Bearer Service			
<u>Reporting Service</u>			5.00
Total Footing of Bill		\$	
By Amount Paid in Advance		\$	
Balance		\$	
Entered into Ledger, page			or below

Size and Style of Casket or Coffin
 Manufactured by Ross Hill
 Interment at Lamoni Cemetery
 Lot No. 159
 Grave No. 1
 Section No.
 Diagram of Lot or Vault

To Funeral Charges	Total	By Cash
	\$	\$

Names of Pall Bearers Wm Hayer, Wm Hayer, Olo Ljungqvist, Jusa Ljungqvist, And Ljungqvist, Olo Hansen
 Names of Lodges

Lodge Insurance, \$ Other Insurance, \$

Names of Near Relatives

RECORD OF FUNERAL

Total No. *1347* Yearly No. *29* Date. *November 10, 1928*
 Name of Deceased *Alvin Eli Hershey* *White* *Mercer Co., Penn.*
(What Race) (Where Born)

Husband---
 Wife---Widow
 Son---Daughter of
 Charge to *Santa Church*
 Address
 Order Given by *Mrs. Carrie Goode*
 How Secured
 Date of Funeral *Nov. 10, '28*
 Residence *Santa Home, Landon, Ia.*
 Place of Death *Res*
 Funeral Services at *Res*
 Time of Funeral Service *2:30*
 Clergyman *Eli Hayes*
 Certifying Physician *H. G. Green*
 His Residence *Landon*

Casket or Coffin	\$ 55.00
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault (State Kind)	
Burial Suit or Dress	15.00
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	25.00
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	5.00
Hearse	
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
Flowers, \$ Rental of Plants, \$	3.00
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	\$136.27
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	75
Pall Bearer Service	
Total Footing of Bill \$	
By Amount Paid in Advance \$	
Balance \$	
Entered into Ledger, page or below	

Number of Burial Certificate
 Cause of Death *Cystitis & Hemorrhage of Bladder*
(Primary) (Secondary)
 Date of Death *Nov. 9, '28 - 11:30 A.M.*
 Occupation of the Deceased *Tanner*
 Single or Married *Single* Religion *L.D.S.*
 Date of Birth *Feb. 28, 1842*
 Age *86* Years *8* Months *11* Days
 Name of Father *Henry Hershey*
 His Birthplace *Canada*
 Name of Mother *Cassius Goode*
Maiden Name
 Her Birthplace *Leli, Ia., Feys*
 Body to be Shipped to *Glennwood, Ia.*
 Size and Style of Casket or Coffin
 Manufactured by
 Interment at *Glennwood, Ia.* Cemetery

Lot No.
 Grave No.
 Section No.

Diagram of Lot or Vault

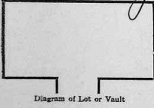
To Funeral Charges.....Total, \$	By Cash.....\$

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. 1348 Yearly No. 30 Date December 7, 1918
 Name of Deceased John Wesley Jewell (What Race) White (Where Born) Wiley Twp., Suggs Co., Ia.
 Husband—
 Wife—
 Son—Daughter of

Charge to...
 Address...
 Order Given by...
 How Secured...
 Date of Funeral Dec 7, 1918
 Residence Suggs Co., Ia.
 Place of Death Ia.
 Funeral Services at Mt. Zion Chur.
 Time of Funeral Service 2 P.M.
 Clergyman Mrs. Nash Moore
 Certifying Physician W. M. Walker
 His Residence Keokuk, Iowa
 Number of Burial Certificate...
 Cause of Death Carcinoma of Tongue
 Date of Death Dec 5, 1918
 Occupation of the Deceased Farmer
 Single or Married Single Religion None
 Date of Birth Jan 18, 1894
 Age 24 Years 10 Months 17 Days
 Name of Father James Jefferson Jewell
 His Birthplace Keokuk, Ia.
 Name of Mother May Jane Smith
 Her Birthplace Ia.
 Body to be Shipped to...
 Size and Style of Casket or Coffin...
 Manufactured by...
 Interment at Mt. Zion Cemetery



Lot No.
 Grave No.
 Section No.

Casket or Coffin	\$ 175 00
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault (State Kind)	
Burial Suit or Dress	
Burial Slippers and Hose	2 00
Engraving Plate	
Embalming Body (with Fluid)	X X
Dressing Body, Shaving, Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, Candles	
Door Badge, Gloves	
Hearse	15 00
Auto Limousines to Cemetery @ \$	4 00
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers (Names of Newspapers)	
Flowers, Rental of Plants	10 00
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, Tent Rental	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	X X
Singers	
Church Charges, Minister	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page or below	

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers...
 Names of Lodges...
 Lodge Insurance, \$... Other Insurance, \$...
 Names of Near Relatives...
 Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1923.

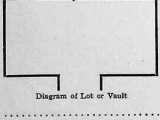
RECORD OF FUNERAL

Total No. 1349 Yearly No. 31 Date December 26, 1928
 Name of Deceased Pauline Alberta Anthony, White Lemoine, Iowa
(What Race) (Where Born)
 Husband --- Joseph A. Margauk Anthony
 Wife --- Widow
 Son --- Daughter of J. A. Anthony

Charge to...
 Address...
 Order Given by...
 How Secured...
 Date of Funeral December 26, '28
 Residence Lemoine, Iowa
 Place of Death Iowa
 Funeral Services at W. D. S. School, Lemoine
 Time of Funeral Service 2:30
 Clergyman H. De Lapp; W. Rall; J. F. Hawes
 Certifying Physician G. C. Simey
 His Residence Lemoine
 Number of Burial Certificate...
 Cause of Death Laryngitis, Pneumonia
(Primary) (Secondary)
 Date of Death Dec 24, '28 - 8:30 P.M.
 Occupation of the Deceased Student
 Single or Married Single Religion P.O.S.
 Date of Birth Jan 4, 1920
 Age... 8 Years... 11 Months... 20 Days
 Name of Father Joseph Herman Anthony
 His Birthplace Chilly, N. Y.
 Name of Mother Mary Ann White
(Maiden Name)
 Her Birthplace Clinton, Mo.
 Body to be Shipped to...
 Size and Style of Casket or Coffin...
 Manufactured by...
 Interment at Lemoine, Roe Hill Cemetery

Casket or Coffin	<u>111-70</u>	<u>75.00</u>
Metalline Lining		
Outside Box	<small>(State Kind)</small>	<u>XX</u>
Grave Vault	<small>(State Kind)</small>	
Burial Suit or Dress		
Burial Slippers and Hose		<u>3.10</u>
Engraving Plate		
Embalming Body (with Fluid)		<u>15.00</u>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<u>10.00</u>
Auto Limousines to Cemetery, @ \$		<u>XX</u>
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
	<small>(Names of Newspapers)</small>	
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<u>5.00</u>
Lining Grave with Evergreen or Muslim		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<u>XX</u>
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page		or below

Lot No. 758
 Grave No. 2
 Section No.



To Funeral Charges	Total, \$	By Cash	\$

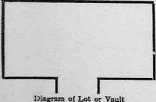
Names of Pall Bearers Richard Anderson, Carl Rall, Carl White, Don Samson
 Names of Lodgers W. E. P. S., Mrs. E. R. M., E. W. L., E. W. S., E. W. T., E. W. V., E. W. W., E. W. X., E. W. Y., E. W. Z., E. W. A., E. W. B., E. W. C., E. W. D., E. W. E., E. W. F., E. W. G., E. W. H., E. W. I., E. W. J., E. W. K., E. W. L., E. W. M., E. W. N., E. W. O., E. W. P., E. W. Q., E. W. R., E. W. S., E. W. T., E. W. U., E. W. V., E. W. W., E. W. X., E. W. Y., E. W. Z.
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives
 Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1922.

RECORD OF FUNERAL

Total No. 1350 Yearly No. 1 Date January 13 1929
 Name of Deceased. James Louis Barton (What Race) White (Where Born) Pikeville, Ky.
 Husband Wife Widow Son Daughter of J. Leah Ellen Biggs Barton

Charge to L. Barton, Esq.
 Address _____
 Order Given by Mary Kniski
 How Secured _____
 Date of Funeral Jan. 13, '29
 Residence Ramona, Iowa
 Place of Death _____
 Funeral Services at St. A.S. Church, Ramona
 Time of Funeral Service 2:30
 Clergyman W.C. Paul James Tarnow
 Certifying Physician T. H. King
 His Residence Ramona
 Number of Burial Certificate _____
 Cause of Death Cancer of Liver
 (Primary) (Secondary)

Date of Death Jan. 11, '29 - 3 A.M.
 Occupation of the Deceased Ret. Farmer
 Single or Married Married Religion P. O. S.
 Date of Birth Dec. 25, 1842
 Age 86 Years 0 Months 16 Days
 Name of Father J. C. Hill, Denton
 His Birthplace _____
 Name of Mother Hannah Lamb Hill
 (Maiden Name) Hill
 Her Birthplace _____
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by _____
 Interment at Sumner - Lone Hill Cemetery



Lot No. 11 29
 Grave No. 4
 Section No. _____

Casket or Coffin	3000	\$ 135.00
Metallic Lining		
<small>(State Kind)</small>		
Outside Box		
<small>(State Kind)</small>		
Grave Vault		
<small>(State Kind)</small>		
Burial Suit or Dress		
Burial Slippers and Hose		1.00
Engraving Plate		
Embalming Body (with _____ Fluid)		25.00
Dressing Body, \$ _____ Shaving, \$ _____		
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$ _____ Candles, \$ _____		
Door Badge, \$ _____ Gloves, \$ _____		
Hearse		15.00
Auto Limousines to Cemetery... @ \$ _____		2.00
Autos to R. R. Station... @ \$ _____		
Other Vehicle Service		
Aeroplane Service		
Death Notices in _____ Newspapers		
<small>(Names of Newspapers)</small>		
Flowers, \$ _____ Rental of Plants, \$ _____		4.50
Other Decorations		
Outlay for Lot		20.00
Opening Grave or Vault		10.00
Lining Grave with Evergreen or Muslin		
Matting, \$ _____ Tent Rental, \$ _____		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		.00
Singers		
Church Charges, \$ _____ Minister, \$ _____		
Telegrams and Telephone Charges		
Pall Bearer Service		
<u>Shack Meiser</u>		100.
Total Footing of Bill		\$ 377.50
By Amount Paid in Advance		\$ _____
Balance		\$ _____
Entered into Ledger, page _____ or below _____		

To Funeral Charges	Total	\$	By Cash	\$

Names of Pall Bearers Charles Mason, Eli Hayes, Sam. Wood, Oscar Bell, J. M. Stults, John Wickel
 Names of Lodges _____

Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1351 Yearly No. 2 Date January 29, 1929
 Name of Deceased Josephine Adeline Bell, White, Lamon, Iowa
Husband-- (What Race) (Where Born)
Wife--Widow
Son--Daughter of
Mark Bell

Charge to _____
 Address _____
 Order Given by Le. Verett Bell
 How Secured _____
 Date of Funeral Jan. 29, '29
 Residence Lamon, Iowa
 Place of Death St. O. S. Church
 Funeral Services at St. O. S. Church
 Time of Funeral Service 2 P.M.
 Clergyman Rev. Hall, James James
 Certifying Physician R. G. Siskup
 His Residence Lamon, Iowa
 Number of Burial Certificate _____
 Cause of Death Leukemia - B. - Carcinoma
(Primary) (Secondary)
 Date of Death Jan. 27, '29 - 5:40 A.M.
 Occupation of the Deceased at home
 Single or Married Married Religion St. O. S.
 Date of Birth Sept. 4, 1874
 Age 54 Years 1 Months 23 Days
 Name of Father Walter Cannon
 His Birthplace Nebraska
 Name of Mother Josephine Galt
(Maiden Name)
 Her Birthplace _____
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by _____
 Internment at Lamon, Iowa Hill Cemetery

Casket or Coffin	\$200 00
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault <u>Lama</u> (State Kind)	115 00
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	25 00
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	15 00
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
<small>(Names of Newspapers)</small>	
Flowers, \$ Rental of Plants, \$	12 50
Other Decorations	
Outlay for Lot	40 00
Opening Grave or Vault	11 50
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	xx
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page _____ or below _____	

Diagram of Lot or Vault

Lot No. 1497
 Grave No. A
 Section No. _____

To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearers E. Decker, White, C. E. Larson, Tom. Hanson, Art. Thayer, Art. Lane, Ed. Johnson
 Names of Lodge SINGERS - Iowa Lamon, N.Y. Danville, Ill. Woodland, Indiana
F. B. - Walnut, Ind. David Nelson, Ill. Wm. Nelson, Ill.
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives _____
Compiled by F. J. FEINERMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1352 Yearly No. 3 Date February 3, 1929

Name of Deceased Orna Trenawalt (What Race) White (Where Born) Ill.

Husband Ada Trenawalt
 Wife--Widow
 Son--Daughter of

Charge to W. A. Trenawalt

Address

Order Given by

How Secured

Date of Funeral Feb. 3, 1929

Residence Chicago - Ill.

Place of Death Cook County Hospital, Chicago

Funeral Services at M. Taylor Co. - Lakmoie

Time of Funeral Service 2 P.M.

Clergyman Rev. J. J. James

Certifying Physician A. B. Anderson, Coroner

His Residence Chicago

Number of Burial Certificate

Cause of Death Inquest Pending

Date of Death Jan. 20, 1929

Occupation of the Deceased Salvage

Single or Married

Religion

Date of Birth

Age 43 Years 7 Months 16 Days

Name of Father John Trenawalt

His Birthplace

Name of Mother Helen

(Maiden Name)

Her Birthplace

Body to be Shipped to

Size and Style of Casket or Coffin

Manufactured by

Interment at Lakmoie - Park Hill Cemetery

Lot No. 990

Grave No. S.

Section No.

Diagram of Lot or Vault

Casket or Coffin	\$	
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with	Fluid)	
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse	<u>& Prof. Services</u>	<u>2.00</u>
Auto Limousines to Cemetery	@ \$	
Autos to R. R. Station	@ \$	
Other Vehicle Service		
Acroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		<u>10.00</u>
Opening Grave or Vault		<u>9.50</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page		or below

To Funeral Charges	Total, \$		By Cash	\$	
<u>Shipping Auditor</u>					
<u>Thomas M. J. Jerney's Sons</u>					
<u>4635 Chalmers St.</u>					
<u>St. Louis, Mo.</u>					

Names of Pall Bearers John H. Taylor, Cliff Merrill, Paul Roberts, Earl Neuhoff, Fred L. Simpson, Carl H. Hill

Names of Lodges S. V. R. B. B. - Alice Hall, Leo Bitter, Paul Starbuck, Delmar Hill

Lodge Insurance, \$

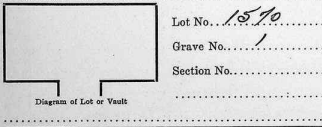
Other Insurance, \$

Names of Near Relatives

RECORD OF FUNERAL

Total No. 1353 Yearly No. 4 Date. February 15, 1929
 Name of Deceased William Saltott (What Race) White (Where Born) _____
 Husband---
 Wife---Widow
 Son---Daughter of

Charge to J. M. Saltott
 Address _____
 Order Given by _____
 How Secured _____
 Date of Funeral Feb. 15, '29
 Residence Quess, Iowa
 Place of Death _____
 Funeral Services at Lamoni, Ia. - Cemetery
 Time of Funeral Service Quess Service - 10:20 A.M.
 Clergyman W. C. Paul
 Certifying Physician _____
 His Residence _____
 Number of Burial Certificate _____
 Cause of Death Acute Venous Thrombosis
 (Primary) (Secondary)
 Date of Death _____
 Occupation of the Deceased _____
 Single or Married Married Religion P.O.S.
 Date of Birth _____
 Age, 29 Years _____ Months _____ Days _____
 Name of Father _____
 His Birthplace _____
 Name of Mother _____
 (Maiden Name)
 Her Birthplace _____
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by _____
 Interment at Lamoni - Paul Cemetery



Lot No. 1510
 Grave No. 1
 Section No. _____

Casket or Coffin	\$	
Metallie Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress	(State Kind)	
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with _____ Fluid)		
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse <u>F. P. G. Services</u>		10.00
Auto Limousines to Cemetery @ \$		
Autos to R. R. Station @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in _____ Newspapers		
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		8.00
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page _____	or below	

To Funeral Charges	Total, \$	By Cash	\$
<u>Shipping Undertaker</u>			
<u>Sam Beardsley</u>			
<u>Quess, Iowa</u>			
Names of Pall Bearers <u>W. C. Paul, A. C. Saltott, Wm. Anderson, Arthur W. Hays</u>			
Names of Lodges			
Lodge Insurance, \$		Other Insurance, \$	
Names of Near Relatives			

RECORD OF FUNERAL

Total No. 1354 Yearly No. 5 Date. February 17, 1929
 Name of Deceased. Mrs. Anna Peterson White (What Race) Denmark (Where Born)
 Husband - 1 Wife - Widow Son - Daughter of Chris. H. Peterson

Charge to.....
 Address.....
 Order Given by.....
 How Secured.....
 Date of Funeral Feb. 17, '29
 Place of Funeral Birmingham, Ala. Co. La.
 Residence of Deceased.....
 Date of Death Feb. 17, '29 (Primary) 10:30 A.M. (Secondary)
 Occupation of the Deceased ph. home
 Single or Married Married Religion A. O. S.
 Date of Birth July 29, 1874
 Age 54 Years 6 Months 15 Days
 Name of Father Chris. Hanson
 His Birthplace Denmark
 Name of Mother Anna Peterson (Maiden Name)
 Her Birthplace Denmark
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Denmark - Rose Hill Cemetery

Lot No. 375
 Grave No. 2
 Section No.

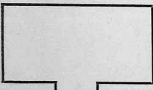


Diagram of Lot or Vault

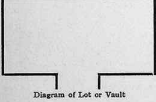
Casket or Coffin	<u>300 Hi. Pet.</u>	<u>250.00</u>
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		<u>3.00</u>
Engraving Plate		
Embalming Body (with Fluid)		<u>25.00</u>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<u>10.00</u>
Auto Limousines to Cemetery, @ \$		<u>30.00</u>
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	<u>12.00</u>
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<u>8.00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		
By Amount Paid in Advance		
Balance		
Entered into Ledger, page		or below

To Funeral Charges	Total, \$				By Cash	\$
Names of Pall Bearers			<u>Fred Bellington, Art. Mann, Geo. Jackson, E. R. Outness, Ann. Bellington</u>			
Names of Lodges			<u>Grand Lodge</u>			
Lodge Insurance, \$			Other Insurance, \$			
Names of Near Relatives						

RECORD OF FUNERAL

Total No. 1355 Yearly No. 6 Date. February 23, 1929
 Name of Deceased Louisa Jane Tull, White Oscott Co., Iowa
(What Race) (Where Born)
 Husband--- John Tull, Dec.
 Wife---Widow of John Tull, Dec.
 Son---Daughter of

Charge to Mrs. Drill Mattie
 Address
 Order Given by " " "
 How Secured
 Date of Funeral Feb. 23, '29
 Residence Harrison Twp., Harrison Co., Mo.
 Place of Death Mo.
 Funeral Services at Lone Rock Church
 Time of Funeral Service 7 P.M.
 Clergyman Mr. Moses
 Certifying Physician Dr. M. A. Beryl
 His Residence Coalville, Mo.
 Number of Burial Certificate
 Cause of Death Chronic Nephritis
(Primary) (Secondary)
 Date of Death Feb. 20, '29 - 6:05 P.M.
 Occupation of the Deceased at home
 Single or Married Widow Religion
 Date of Birth Aug. 24, 1854
 Age 74 Year 3 Months 26 Days
 Name of Father Samuel Tull
 His Birthplace
 Name of Mother Sarah Ann (Maiden Name) (Tull)
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin
 Manufactured by Lone Rock
 Interment at Lone Rock Cemetery



Lot No.
 Grave No.
 Section No.

Casket or Coffin # <u>7050 State Chm.</u>	\$ <u>200 00</u>
Metallic Lining (State Kind)	
Outside Box (State Kind)	<u>Xr</u>
Grave Vault (State Kind)	
Burial Suit or Dress (State Kind)	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	<u>2.50</u>
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse <u>5.00</u>	<u>10 00</u>
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
Flowers, \$ Rental of Plants, \$	
Other Decorations	<u>5 00</u>
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page or below	

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Nephew
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1326 Yearly No. 7 Date March 3, 1929
 Name of Deceased Christatell Anderson White Dorsetshire, England
(What Race) (When Born)
 Husband--- } Mrs Anderson Dec.
 Wife---Widow }
 Son---Daughter of }

Charge to Christatell Anderson, E.C.
 Address
 Order Given by Mrs. Robert Anderson
 How Secured
 Date of Funeral March 3, '29
 Residence Sanroy, Iowa
 Place of Death Iowa
 Funeral Services at Dr. B. H. Greenlee, Linn, Iowa
 Time of Funeral Service 2:30
 Clergyman S. A. Sawyer; D. G. White
 Certifying Physician T. G. E. Siskin
 His Residence daman
 Number of Burial Certificate
 Cause of Death cardio-renal disease
(Primary) (Secondary)
 Date of Death March 2, '29
 Occupation of the Deceased at home
 Single or Married Widow Religion R.C.
 Date of Birth Jan 13, 1842
 Age 87 Years 1 Months 21 Days
 Name of Father L. Lee Knight
 His Birthplace England
 Name of Mother N.K.
(Maiden Name)
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin #F Metal, NK, Sta.
 Manufactured by D. White Casket Co., Linn, Iowa
 Interment at Linn, Iowa Hill Cemetery

Casket or Coffin	#F Metal, NK	\$ 385 00
Metallic Lining		
Outside Box	<u>None</u>	xx
Grave Vault		
Burial Suit or Dress		
Burial Slippers and Hose		3 50
Engraving Plate		
Embalming Body (with Fluid)		25 00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs	8 op.	xx
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15 00
Auto Limousines to Cemetery @ \$		11 00
Autos to R. R. Station @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		12 00
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		xx
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page		or below

Lot No. 780
 Grave No. 3
 Section No.
 Diagram of Lot or Vault

To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearers John Rice, Mary Smith, Owen Moore, Ralph Gray, Bruce Lambert, Roberts
 Names of Lodges F. B. - near Harbor, Linn, Iowa, Cherry, Miller, Anderson, Mrs. C. D. White
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives

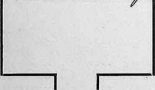
RECORD OF FUNERAL

Total No. 1357 Yearly No. 8 Date March 16, 1929
 Name of Deceased Willis Jerry Robinson White Footville, Miss.
 Husband of Beatrice Robinson, Dec. (What Race) (Where Born)

Charge to Randall Robinson
 Address
 Order Given by
 How Secured
 Date of Funeral March 16, '29
 Residence S. State St., Tamou, La.
 Place of Death Res.
 Funeral Services at Res.
 Time of Funeral Service 2:30
 Clergyman E. B. Woodstick; L. M. Hill
 Certifying Physician W. S. Debuy
 His Residence Tamou

Number of Burial Certificate
 Cause of Death Botulistic Infection
 Date of Death March 14, '29 - 1 P.M.
 Occupation of the Deceased Minister
 Single or Married Widow, Religion P. O. S.
 Date of Birth Jan. 22, 1859
 Age 70 Years 1 Months 32 Days
 Name of Father John Bates Robinson
 His Birthplace Ark.
 Name of Mother XXX
 (Maiden Name)

Her Birthplace
 Body to be Shipped to Independence, Mo.
 Size and Style of Casket or Coffin # 3450 XX
Dark Stain, Heavy Cap.
 Manufactured by Wm. C. Coffey Co.
 Interment at Independence, Mo. Cemetery



Lot No.
 Grave No.
 Section No.

Casket or Coffin		\$ 140 00
Metallic Lining		
Outside Box	<u>Shipping Case</u>	
Grave Vault		
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		25 00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs	<u>600</u>	xx
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		10 00
Auto Limousines to Cemetery, @ \$		
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	8 50
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		xx
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pal Bearer Service		
Total Footing of Bill		\$ 185 50
By Amount Paid in Advance	<u>By Disc.</u>	\$ 10
Balance		\$ 195 50
Entered into Ledger, page		or below

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers B. T. Church, J. H. Swanson, J. J. Bell, Wm. Anderson, Geo. Parks, Andy, Bert
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$

Printed by F. J. FREDERMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1359 Yearly No. 9 Date March 29, 1929
 Name of Deceased Thomas Cole White Tooleburn, Louisiana, La.
Husband (What Race) (Where Born)
Mary E. Elizabeth Cole
Wife (Maiden Name)

Charge to Thomas Cole Estate
 Address Lamoni, Ia.
 Order Given by Ed Cole, Cora Martin
 How Secured As per will
 Date of Funeral March 29, 1929
 Residence 111 So. Maple Lamoni, Ia.
 Place of Death Residence Lamoni
 Funeral Services at Residence
 Time of Funeral Service 2:30 P.M.
 Clergyman F. J. Roth, O. G. White
 Certifying Physician H. M. Hilly
 His Residence Lamoni, Ia.
 Number of Burial Certificate _____
 Cause of Death Apoplexy - General Senility
(Primary) (Secondary)
 Date of Death March 28, 1929, 12:45 P.M.
 Occupation of the Deceased Ret. farmer
 Single or Married Married Religion L.O.S.
 Date of Birth January 25, 1845
 Age 84 Years 2 Months 0 Days
 Name of Father N.I.K.
 His Birthplace N.I.K.
 Name of Mother N.I.K.
(Maiden Name)
 Her Birthplace N.I.K.
 Body to be Shipped to _____
 Size and Style of Casket or Coffin 9450 Emb. dor
Drop face cap
 Manufactured by Woot Casket Co.
 Interment at Lamoni, Ia. Rose Hill Cemetery

Casket or Coffin	\$ 12.50
Metallic Lining	(State Kind)
Outside Box	(State Kind)
Grave Vault	(State Kind)
Burial Suit or Dress	(State Kind)
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with <u>Supernatural</u> Fluid)	2.50
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	1.50
Auto Limousines to Cemetery @ \$	1
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in	Newspapers
<small>(Names of Newspapers)</small>	
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	4.90
Opening Grave or Vault	8
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
<u>Funeral</u>	6 85
Total Footing of Bill	\$ 219 85
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

Lot No. 159 1
 Grave No. 97
 Section No. _____
 Diagram of Lot or Vault
Large W. S. Lang

To Funeral Charges	Total, \$				By Cash	\$

Names of Pall Bearers Ralph Wilson, Ed. Myers, Harry Shepkins, Howard Wilson, C. E. Wilson, Geo. Morgan
 Names of Lodges SINCEK, L. O. S., L. O. S., L. O. S.
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives Ed Cole - Cora Martin

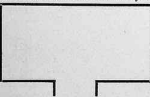
RECORD OF FUNERAL

Total No. 1359 Yearly No. 10 Date April 7, 1929
 Name of Deceased George Arthur Donelson, (White) Hatfield, Harrison Co., Mo.
 Husband Wife Widowed Son Daughter of Dena Donelson
 (What Race) (Where Born)

Charge to Dena Donelson
 Address to Mr. Bell
 Order Given by to Mr. Bell
 How Secured _____
 Date of Funeral April 7, 1929
 Residence 7 Linden St., Tampa, Fla.
 Place of Death Tampa, Fla.
 Funeral Services at Santa Church, Tampa
 Time of Funeral Service 2 P.M.
 Clergyman Alx. Ford, Mt. Pail, Ark.
 Certifying Physician J. W. Ford
 His Residence Tampa, Fla.
 Number of Burial Certificate _____
 Cause of Death Saunonia, Influenza
 (Primary) (Secondary)
 Date of Death April 2, 1929
 Occupation of the Deceased Retired Auto Dealer
 Single or Married Married Religion Am.
 Date of Birth Jan. 18, 1888
 Age 40 Years 4 Months 16 Days
 Name of Father Geo. W. Donelson
 His Birthplace Washington, Pa., Venimbo, Mo.
 Name of Mother Minnie M. Adams
 (Maiden Name)
 Her Birthplace Hatfield, Mo.
 Body to be Shipped to _____

Casket or Coffin. # <u>F Metal</u>	\$ <u>385.00</u>
Metallic Lining _____	(State Kind)
Outside Box _____	(State Kind)
Grave Vault. <u>Southern</u>	115.00
Burial Suit or Dress _____	(State Kind)
Burial Slippers and Hose _____	3.50
Engraving Plate _____	2.50
Embalming Body (with _____ Fluid)	2.50
Dressing Body, \$ _____ Shaving, \$ _____	
Hair Dressing _____	
Use of Folding Chairs _____	
" " Candelabrum, \$ _____ Candles, \$ _____	
Door Badge, \$ _____ Gloves, \$ _____	1.00
Hearse _____	xx
Auto Limousines to Cemetery @ \$ _____	xx
Autos to R. R. Station @ \$ _____	
Other Vehicle Service _____	
Aeroplane Service _____	
Death Notices in _____ Newspapers _____	
(Names of Newspapers)	
Flowers, \$ _____ Rental of Plants, \$ _____	25.00
Other Decorations _____	
Outlay for Lot _____	
Opening Grave or Vault _____	10.00
Lining Grave with Evergreen or Muslin _____	
Matting, \$ _____ Tent Rental, \$ _____	
Use of Lowering Device _____	
Rental of Vault _____	
Outlay for Shipping Charges _____	
Removal Charges _____	
Incineration _____	
Personal Services _____	xx
Singers _____	
Church Charges, \$ _____ Minister, \$ _____	
Telegrams and Telephone Charges _____	
Pall Bearer Service _____	
Total Footing of Bill _____	\$ <u>378.50</u>
By Amount Paid in Advance _____	\$ _____
Balance _____	\$ _____
Entered into Ledger, page _____ or below _____	

Size and Style of Casket or Coffin Metallic Half Case
 Manufactured by S. L. ...
 Interment at ... Cemetery



Lot No. 1430
 Grave No. 2
 Section No. _____

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Al. Hay, Carl Nelson, H. O. Prall, Gerald Middleton, W. H. ...
 Names of Judges P. B. ...
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives Geor. Donelson

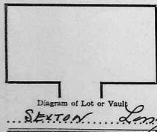
RECORD OF FUNERAL

Total No. 1360 Yearly No. 11 Date April 13 1929
 Name of Deceased Marna Jean Rew WHITE Fayette Twp. Decatur Co
(What Race) (Where Born)
 Residence Archie Herald and Eva Adeline Rew
Daughter of

Charge to Charles Huffman
 Address Lanmon, Ia
 Order Given by Chas Huffman & Pats Rew
 How Secured cf
 Date of Funeral April 13 1929
 Residence Fayette Twp
 Place of Death Fayette Twp
 Funeral Services at Residence
 Time of Funeral Service 2 P.M.
 Clergyman W. S. Shakespeare
 Certifying Physician N. M. Hills
 His Residence Lanmon Ia
 Number of Burial Certificate
 Cause of Death not normal
(Primary) (Secondary)
 Date of Death April 12 1929 8 AM
 Occupation of the Deceased none
 Single or Married Single Religion none
 Date of Birth April 6 1929
 Age X Years X Months 6 Days
 Name of Father Archie Herald R. Rew
 His Birthplace Davis City Iowa
 Name of Mother Eva Adeline Huffman
(Maiden Name)
 Her Birthplace Harrison Co Mo
 Body to be Shipped to
 Size and Style of Casket or Coffin 1/9
White Emb. Qua
 Manufactured by Ross Casket Co
 Interment at Rose Hill Cemetery

Casket or Coffin.....	\$ 15 00
Metallic Lining.....	
(State Kind)	
Outside Box.....	X X
(State Kind)	
Grave Vault.....	
(State Kind)	
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
" Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	
Auto Limousines to Cemetery..... @ \$.....	X X
Autos to R. R. Station..... @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers	
(Names of Newspapers)	
Flowers, \$..... Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	5 00
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pal Bearer Service.....	
<hr/>	
Total Footing of Bill.....	\$.....
By Amount Paid in Advance.....	\$.....
Balance.....	\$.....
Entered into Ledger, page..... or below.....	

Lot No. 372
 Grave No. 1
 Section No.



To Funeral Charges..... Total, \$	
.....	By Cash..... \$
.....	
.....	
.....	
.....	
.....	

Names of Pall Bearers.....
 Names of Lodges SIX O'Clock - Wm. T. M. The Society
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives.....

RECORD OF FUNERAL

Total No. *1361* Yearly No. *12* Date *April 24* 1929

Name of Deceased *Dece Newton Perkins* *White*
Husband--- (What Race) (Where Born)
Wife---Widow
Son---Daughter of

Charge to *St. Home*
Address *Lamoni*

Order Given by *A. J. Harrington*
How Secured *City*

Date of Funeral *April 24* 1929
Residence *St. Home, Lamoni, Ia.*

Place of Death *St. Home, Lamoni, Ia.*
Funeral Services at *St. Home, Lamoni, Ia.*

Time of Funeral Service *2:30 P.M.*
Clergymen *James Thomas, Frank Sawley*

Certifying Physician *Bernice G. Greer*
His Residence *Lamoni*

Number of Burial Certificate
Cause of Death *Bright's disease*
(Primary) (Secondary)

Date of Death *April 21, 1929 6 AM.*
Occupation of the Deceased

Single or Married
Religion *A.P.S.*
Date of Birth *Dec 6* 1883

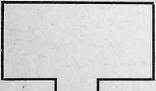
Age *45* Years *7* Months *15* Days
Name of Father
His Birthplace

Name of Mother
(Maiden Name)

Her Birthplace
Body to be Shipped to

Size and Style of Casket or Coffin *Emb crepe*

Manufactured by *Mo Kan*
Interment at *Lamoni, Ia.* Cemetery



Lot No. *972*
Grave No. *4*
Section No.

Diagram of Lot or Vault
Longo De Long

Casket or Coffin		\$	<i>50</i>
Metallic Lining	(State Kind)		
Outside Box	(State Kind)		
Grave Vault	(State Kind)		
Burial Suit or Dress			
Burial Slippers and Hose			<i>85</i>
Engraving Plate			
Embalming Body (with Fluid)			<i>1500</i>
Dressing Body, \$	Shaving, \$		
Hair Dressing			
Use of Folding Chairs			
" " Candelabrum, \$	Candles, \$		
Door Badge, \$	Gloves, \$		
Hearse			<i>500</i>
Auto Limousines to Cemetery @ \$			
Autos to R. R. Station @ \$			
Other Vehicle Service			
Aeroplane Service			
Death Notices in	Newspapers		
	(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$		
Other Decorations			
Outlay for Lot			
Opening Grave or Vault			<i>800</i>
Lining Grave with Evergreen or Muslin			
Matting, \$	Tent Rental, \$		
Use of Lowering Device			
Rental of Vault			
Outlay for Shipping Charges			
Removal Charges			
Incineration			
Personal Services			
Singers			
Church Charges, \$	Minister, \$		
Telegrams and Telephone Charges			
Pall Bearer Service			
Total Footing of Bill		\$	
By Amount Paid in Advance		\$	
Balance		\$	
Entered into Ledger, page		or below	

	To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearers *J. B. Brady, J. B. Bell, E. L. Hayer, C. E. Rostrom, A. J. Harrington, J. Chastelt*
Names of Undertakers *MRS. J. B. BRYAN, Miss Beaman, Miss Weddle*
Miss Lois Prall, Pruss

Lodge Insurance, \$ Other Insurance, \$
Names of Near Relatives *F. Chastelt*

RECORD OF FUNERAL

Total No. 1362 Yearly No. 13 Date April 30 1929
 Name of Deceased Millard Filmore Hedger W.H. Marion Co. Ohio
Husband - (What Race) (Where Born)
 Son - Mary Jane Hedger deceased deceased
Widow - (Where Born) Daughter of

Charge to Estate
 Address Lamora
 Order Given by Oscar Hedger
 How Secured ch
 Date of Funeral April 30 1929
 Residence Paley Twp. Pringl Co. Ia.
 Place of Death Res.
 Funeral Services at Residence
 Time of Funeral Service 2 P.M.
 Clergyman E. Clarke Hedger
 Certifying Physician Dr. D. B. Green
 His Residence Lamora Ia.
 Number of Burial Certificate
 Cause of Death Organic disease
(Primary) (Secondary)
 Date of Death April 28-29 2:20 A.M.
 Occupation of the Deceased Farmer
 Single or Married Widow Religion None
 Date of Birth Sept. 14 1851
 Age 77 Years 7 Months 17 Days
 Name of Father Robert Wesley Hedger
 His Birthplace Ohio
 Name of Mother Marial Carr
(Maiden Name)
 Her Birthplace Ohio
 Body to be Shipped to
 Size and Style of Casket or Coffin 70x100
Special Silver Gray Euc. Plum
 Manufactured by Port. Casket Co.
 Interment at Holland (Fayette Twp.) Cemetery
(Cemetery)
 Lot No.
 Grave No.
 Section No.
 Diagram of Lot or Vault
First grave so. of yard -
SEXTON. LON-DE-LONG -

Casket or Coffin	\$ 15.00
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault (State Kind)	11.00
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	2.50
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs <u>22</u>	xx
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	15.00
Auto Limousines to Cemetery... @ SINGERS	3.50
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
<small>(Names of Newspapers)</small>	
Flowers, \$ Rental of Plants, \$	
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	xx
Matting, \$ Tent Rental, \$	xx
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page or below	

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Hubert, Somml, Everett, Blawick, Jr., Rowell, Arthur, Rowell, Robt. Somml
 Names of Lodges Chris. Highlow
 SINGERS: Mrs. Raymond, M. E. Gray, Isaac E. Johnson, Homer, Catty, F. O. White
 Undertaker ORDERED BY OSCAR HEDGER Other Insurance UNIFORMITY - LOUIS & DAVIS
 Names of Near Relatives A. O. White
 Funeral Director

RECORD OF FUNERAL

Total No. 1363 Yearly No. 14 Date May 8, 1929

Name of Deceased Seymour Oriskill White Ohio
Husband of Malana (Sample) Oriskill (Where Born)

Charge to John Bucey Co. A. S. Oriskill Basket or Coffin \$ 8.50

Address Tuskegee and Davis City Metallic Lining (State Kind)

Order Given by Bucey and Oriskill Outside Box (State Kind) ✓

How Secured Grave Vault (State Kind)

Date of Funeral May 8, 1929 Burial Suit or Dress \$ 22.50

Residence Tuskegee, Ia. Burial Slippers and Hose Under \$ 1.05

Place of Death Tuskegee, Ia. Engraving Plate

Funeral Services at Baptist Church Tuskegee Embalming Body (with Fluid) \$ 1.00

Time of Funeral Service 2 P.M. Dressing Body, \$ Shaving, \$ ✓

Clergyman Carl E. Miller Hair Dressing

Certifying Physician M. W. Rogers, Corner Use of Folding Chairs

His Residence Levon, Ia. " " Candelabrum, \$ Candles, \$

Number of Burial Certificate Auto Limousines to Cemetery @ \$ 15.00

Cause of Death Chronic Intestinal Neoplasia Autos to R. R. Station @ \$

Date of Death May 7, 1929, 11 A.M. Other Vehicle Service

Occupation of the Deceased Farmer Aeroplane Service

Single or Married Married Religion Death Notices in Newspapers

Date of Birth April 24, 1879 Flowers, \$ Rental of Plants, \$

Age 80 Years 0 Months 13 Days Other Decorations

Name of Father Ebinger Oriskill Outlay for Lot

His Birthplace I. Maryland Opening Grave or Vault

Name of Mother Rachel Frances Lining Grave with Evergreen or Muslin \$ ✓

Her Birthplace North Carolina Matting, \$ Tent Rental, \$ ✓

Body to be Shipped to North Carolina Use of Lowering Device

Size and Style of Casket or Coffin #701 St. G. Crisp Rental of Vault

Manufactured by Mo. Kern Outlay for Shipping Charges

Interment Lili - Bloomington Imp. Cemetery Removal Charges

Diagram of Lot or Vault

Lot No. #701 St. G. Crisp Incineration

Grave No. SW corner Personal Services

Section No. SW corner Singers

Diagram of Lot or Vault George O. Long Church Charges, \$ Minister, \$

Names of Pall Bearers E. D. Smith, Best Murray, W. W. Rhodes, Mark Neffinger, Harry Deamport

Names of Lodges Exp. No. 1 - F. E. Oriskill Telegrams and Telephone Charges

Lodge Insurance, \$ Other Insurance, \$ F. W. White

Names of Near Relatives

Total Footing of Bill \$ 123.50

By Amount Paid in Advance \$

Balance \$

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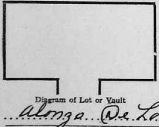
To Funeral Charges Total, \$ By Cash \$

Funeral Director F. W. White

RECORD OF FUNERAL

Total No. 1364 Yearly No. 15 Date May 9 1929
 Name of Deceased Sarah, Maria, Ellen Fowler Indian
(What Race) (Where Born)
 Wife - Widow William Lewis Fowler deceased
 Son - Deceased of

Charge to Estate
 Address Delphidale, Mo.
 Order Given by Mrs. Tom Cruise Cluett Fowler
 How Secured
 Date of Funeral May 9 1929 2 P.M.
 Residence Coxs Fork, Harrison Co., Mo.
 Place of Death Residence
 Funeral Services at McPheasant Baptist Church
 Time of Funeral Service 2 P.M.
 Clergyman T. P. Wilson - Camouville, Mo.
 Certifying Physician W. D. Broyles
 His Residence Camouville, Mo.
 Number of Burial Certificate
 Cause of Death Chromic Myocarditis
(Primary) (Secondary)
 Date of Death May 6 1929 9:20 P.M.
 Occupation of the Deceased At Home
 Single or Married Widow Religion
 Date of Birth April 12 1860
 Age 67 Years 0 Months 24 Days
 Name of Father Joseph J. Foster
 His Birthplace N/K
 Name of Mother Mary Replinger
(maiden Name)
 Her Birthplace N/K
 Body to be Shipped to
 Size and Style of Casket or Coffin 1/2 c. E/P L.
Del. L. No. 100
 Manufactured by Best's Casket Co.
 Interment McPheasant Coxs. Fork Cemetery



Casket or Coffin.....	\$ 150.00
Metallic Lining.....	
(State Kind)	
Outside Box.....	✓
(State Kind)	
Grave Vault.....	
(State Kind)	
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with <u>Sup.</u>).....	25.00
Fluid	
Dressing Body, \$.....	
Shaving, \$.....	✓
Hair Dressing.....	✓
Use of Folding Chairs.....	
" Candelabrum, \$.....	
Candles, \$.....	
Door Badge, \$.....	
Gloves, \$.....	
Hearse.....	1.50 00
Auto Limousines to Cemetery @ \$.....	
Autos to R. R. Station @ \$.....	
Other Vehicle Service.....	
Acroplane Service.....	
Death Notices in.....	
Newspapers	
(Rental of Newspapers)	
Flowers, \$.....	
Rental of Plants, \$.....	
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	
Lining Grave with Evergreen or Muslin.....	✓
Matting, \$.....	
Tent Rental, \$.....	✓
Use of Lowering Device.....	✓
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$.....	
Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill.....	\$ 19.00 00
By Amount Paid in Advance.....	
Balance.....	
Entered into Ledger, page.....	or below.....

To Funeral Charges..... Total, \$	By Cash..... \$

Names of Pall Bearers Relatives
 Names of Lodges SUNBERS - Mrs. Richardson t. ...
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives
 Funeral Director A. L. DeLong

RECORD OF FUNERAL

Total No. 1265 Yearly No. 16 Date May 15 1929

Name of Deceased Howard Charles Patrick WHITE CO. RINGOLD TWP. RILEY
Husband--- (What Race) (Where Born)
Wife--- I.D.W.B.
Son--- Charles and E. Va. Patrick

Charge to Charles Patrick
Address Lanoni
Order Given by Charles Patrick
How Secured C. Ly.
Date of Funeral May 15 1929
Residence Riley Twp. Ringgold Co. Ia.
Place of Death Riley
Funeral Services at Residence
Time of Funeral Service 2 P.M.
Clergyman H. S. Slichter
Certifying Physician A. G. Wynn
His Residence Kullerton Ia.
Number of Burial Certificate

Casket or Coffin	.....	\$ 385.00
Metallie Lining	.....
(State Kind)	.....
Outside Box	.....
(State Kind)	.....
Grave Vault	.....	1150.00
(State Kind)	.....
Burial Suit or Dress	.....
Burial Slippers and Hose	<u>✓ Under</u>	
Engraving Plate	.....
Embalming Body (with	..... Fluid)	2500
Dressing Body, \$	..... Shaving, \$	
Hair Dressing	.....
Use of Folding Chairs	.....
" Candelabrum, \$	..... Candles, \$	
Door Badge, \$	..... Gloves, \$	
Hearse	.....	1500
Auto Limousines to Cemetery @ \$	.....
Autos to R. R. Station @ \$	.....	3.50
Other Vehicle Service	.....
Aeroplane Service	.....
Death Notices in	..... Newspapers	
(Names of Newspapers)	.....
Flowers, \$	..... Rental of Plants, \$	10.00
Other Decorations	.....
Outlay for Lot	.....
Opening Grave or Vault	.....	X
Lining Grave with Evergreen or Muslin	.....	X
Matting, \$	..... Tent Rental, \$	
Use of Lowering Device	.....
Rental of Vault	.....
Outlay for Shipping Charges	.....
Removal Charges	.....
Incineration	.....
Personal Services	.....
Singers	.....
Church Charges, \$	..... Minister, \$	
Telegrams and Telephone Charges	.....
Pall Bearer Service	.....
Total Footing of Bill	.....
By Amount Paid in Advance	.....
Balance	.....
Entered into Ledger, page	..... or below	

Cause of Death Tox!e. Swelling of throat
 (PPrimary) (Secondary)
Date of Death May 14 1929 9 P.M.
Occupation of the Deceased Farmer
Single or Married Single Religion NONE
Date of Birth Oct. 8 1919
Age 19 Years 5 Months 6 Days
Name of Father Charles Patrick
His Birthplace Riley Twp. Ringgold Co. Ia.
Name of Mother E. Va. Langsner
 (Maiden Name)
Her Birthplace Riley Twp. Ringgold Co. Ia.
Body to be Shipped to

Size and Style of Casket or Coffin Metal. Silver
Manufactured by Ross Casket Co.
Interment at Patrick Cemetery Cemetery
Riley Twp. Ringgold Co.

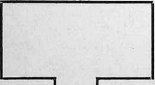


Diagram of Lot or Vault
Pete Knuder - Ralph Thomas

To Funeral Charges	Total, \$		By Cash	\$
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Names of Pall Bearers H. S. Slichter, Geo. Slichter, Fred Slichter, Will. D. C. M. Jan, Tuller, A. G. Wynn
Names of ~~Funeral~~ Singers Rev. May, Carl. D. Ball, Rev. C. Crawford Handwritten

INFORMANT Charles Patrick
Lodge Insurance, \$
Names of Near Relatives F. Otto White Other Insurance, \$
Funeral Director

RECORD OF FUNERAL

Total No. 1266 Yearly No. 17 Date May 26, 1929
 Name of Deceased Sarah Jane Collins White EMMETT TWP
Husband... Wife.../Widow Son.../Daughter of (What Race) (Where Born)

Charge to Wm C Collins
 Address Lamar
 Order Given by Wm Collins
 How Secured Chg
 Date of Funeral May 26 1929
 Residence Frank Cherry, Lamar, Ia
 Place of Death Des
 Funeral Services at M E Church
 Time of Funeral Service 7:30
 Clergyman J T Sleet
 Certifying Physician C E Sixbury, Ia
 His Residence Lamar, Ia
 Number of Burial Certificate
 Cause of Death Cerebral Hemorrhage
(Primary) (Secondary)
 Date of Death May 23-29 9 PM
 Occupation of the Deceased at Home

Casket or Coffin \$ 100 00
 Metallic Lining
(State Kind)
 Outside Box X X
(State Kind)
 Grave Vault
(State Kind)
 Burial Suit or Dress
 Burial Slippers and Hose
 Engraving Plate
 Embalming Body (with Fluid) 25 00
 Dressing Body, \$ Shaving, \$ X
 Hair Dressing X
 Use of Folding Chairs
 " " Candelabrum, \$ Candles, \$
 Door Badge, \$ Gloves, \$
 Hearse 15 00
 Auto Limousines to Cemetery.. @ \$ X X
 Autos to R. R. Station @ \$
 Other Vehicle Service
 Aeroplane Service
 Death Notices in Newspapers

Single or Married Married Religion
 Date of Birth Aug 18 1857
 Age 71 Years 9 Months 5 Days
 Name of Father W T Black
 His Birthplace Ohio
 Name of Mother Thema Ballard
(Maiden Name)
 Her Birthplace not known
 Body to be Shipped to
 Size and Style of Casket or Coffin 1/2 # 600 00
Emb. doz Silver
 Manufactured by The Root Casket Co
 Interment Bloomington Twp City Cemetery

(Names of Newspapers)
 Flowers, \$ Rental of Plants, \$
 Other Decorations
 Outlay for Lot
 Opening Grave or Vault
 Lining Grave with Evergreen or Muslin
 Matting, \$ Tent Rental, \$ X X
 Use of Lowering Device X X
 Rental of Vault
 Outlay for Shipping Charges
 Removal Charges
 Incineration
 Personal Services X X
 Singers
 Church Charges, \$ Minister, \$
 Telegrams and Telephone Charges. F.P 47
 Pall Bearer Service

Lot No.
 Grave No.
 Section No.
Diagram of Lot or Vault
SEXTON Pete Hendrick

Total Footing of Bill \$
 By Amount Paid in Advance \$
 Balance \$
 Entered into Ledger, page or below

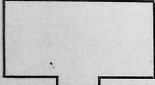
	Total,		By Cash	
.....	To Funeral Charges	Total, \$	\$	
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Names of Pall Bearer RUDE WOLF, IRA WADLEY, IRVIN, DATH, JOHNS, SLY, JOHN, GRAY, TOM, ALLEN
 Names of Lodge MEMBERS - MRS. U. GREENWALT, EVA LAWRENCE, E. R. CHENEY, N. HEIZER
INFIRMARY - W. S. COLLINS
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives A. O. White, P. S. White
Compiled by F. J. WEINEMAN, St. Louis, Mo., in the year 1929.

RECORD OF FUNERAL

Total No. 1368 Yearly No. 19 Date June 5 1929
 Name of Deceased Emily A. Anthony (What Race) white (Where Born) Louisiana, England
 Husband--- Robert Jefferson Anthony Deceased
 Wife---Widow
 Son---Daughter of

Charge to Estate
 Address Lanoni
 Order Given by John W. J. Anthony
 How Secured Chg.
 Date of Funeral June 5, 1929
 Residence Lanoni Ia.
 Place of Death Lanoni Ia.
 Funeral Services at W.H. Hall Rev. Lanoni
 Time of Funeral Service 2:30 P.M.
 Clergyman F.A. Smith - W.C. Prall
 Certifying Physician C.E. Siskburg
 His Residence Lanoni Ia.
 Number of Burial Certificate
 Cause of Death Carcinoma of the Pancreas
 (Primary) (Secondary)
 Date of Death June 3, 1929 9:40 P.M.
 Occupation of the Deceased At Home
 Single or Married Widow Religion S.P.S.
 Date of Birth Aug 14, 1842
 Age 86 Years 9 Months 19 Days
 Name of Father Thomas Goddard
 His Birthplace England
 Name of Mother Catherine Gibson
 (Maiden Name)
 Her Birthplace England
 Body to be Shipped to
 Size and Style of Casket or Coffin 3/8 No 100 open
 Manufactured by Roots Casket Co.
 Interment at Rose Hill Cemetery Cemetery



Lot No. 213
 Grave No. 2 pt 3
 Section No.

Diagram of Lot or Vault
 Section Along Old Long

Casket or Coffin	\$ 15.00
Metallic Lining	(State Kind)
Outside Box	(State Kind) X
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	25.00
Dressing Body, \$	Shaving, \$ 1
Hair Dressing	
Use of Folding Chairs	74 X
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	15.00
Auto Limousines to Cemetery, @ \$	1 X
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	

(Names of Newspapers)
 Flowers, \$ Rental of Plants, \$
 Other Decorations
 Outlay for Lot
 Opening Grave or Vault 8.00
 Lining Grave with Evergreen or Muslin
 Matting, \$ Tent Rental, \$ X
 Use of Lowering Device X
 Rental of Vault
 Outlay for Shipping Charges
 Removal Charges
 Incineration
 Personal Services X
 Singers
 Church Charges, \$ Minister, \$
 Telegrams and Telephone Charges
 Pall Bearer Service

Total Footing of Bill \$
 By Amount Paid in Advance \$
 Balance \$
 Entered into Ledger, page or below 198 00

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearer Quayle, Ed Conway, Walton Hays, Roy Derry, Lee Buckley, John Lane,
 Names of Singers SINCELL, Lena Jones, Lucy Leysinger, M. West, Conway, Roy, Overholt,
Thelma Lane, organist
 Lodge Insurance, \$ INDEPENDENT Pauline Life Insurance, \$
 Names of Near Relatives Fundus Director H. W. White, Pauline S. White

RECORD OF FUNERAL

Total No. 1369 Yearly No. 20 Date June 10 1929

Name of Deceased E. Eldon Landon Midgarden (What Race) White (Where Born) Lansoni, Ia.
 Husband---
 Wife---Widow
 Son---Daughter of } M. M. and Ethel Midgarden

Charge to M. M. Midgarden
 Address Lansoni, Ia.
 Order Given by M. M. Midgarden
 How Secured
 Date of Funeral June 9th 1929
 Residence Lansoni, Ia.
 Place of Death Lansoni, Ia.
 Funeral Services at Residence
 Time of Funeral Service 2 P.M.
 Clergyman W. E. Sprall - P. S. DeLoeff
 Certifying Physician C. E. Sixburg
 His Residence Lansoni, Ia.
 Number of Burial Certificate
 Cause of Death Influenza
 (Primary) (Secondary)
 Date of Death June 8, 1929 7 A.M.
 Occupation of the Deceased None
 Single or Married Single Religion None
 Date of Birth June 6, 1927
 Age 2 Years 0 Months 2 Days
 Name of Father Melvin Marion Midgarden
 His Birthplace Rock Co. Ia.
 Name of Mother Ethel May Landon
 (Maiden Name)
 Her Birthplace Des Moines, Ia.
 Body to be Shipped to
 Size and Style of Casket or Coffin 3/0 #1033
A. J. G. P.
 Manufactured by R. O. Casket Co.
 Interment at Rose Hill Cemetery

Casket or Coffin	\$ 50.00
Metallic Lining	(State Kind)
Outside Box	X
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Shaving, Fluid)	15.00
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	75 X
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	
Auto Limousines to Cemetery @ \$	X
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	4.00
Opening Grave or Vault	3.50
Lining Grave with Evergreen or Mustin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	X
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
<hr/>	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

Diagram of Lot or Vault
 SECTION Along Ol Long
 Lot No. 1556
 Grave No. 4
 Section No.

	Total, \$	By Cash
To Funeral Charges		
<hr/>		
<u>113.50</u>		

Names of Pall Bearers Flornce Carlson - Anna Lane - Mildred Thomas - Helton Kelly
 Names of Ladies F. B. - Beulah - Helen - Frances - Midgarden - and Lois Roberts
 INFORMANT M. M. Midgarden
 Lodge Insurance, \$
 Funeral Director A. Otis White Other Insurance, \$
 Names of Near Relatives P. S. White
Compiled by F. J. FEINERMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1370 Yearly No. 21 Date June 27, 1929

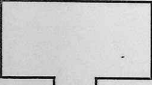
Name of Deceased George Robert Freunault (What Race) White (Where Born) Hampton Co. Mo.
 Wife---Widow { May "Athensian" Freunault

Charge to May Freunault
 Address 217 No. 35 St. Omaha, Neb.
 Order Given by Wm. J. Kelley
 How Secured Chap.
 Date of Funeral Sunday, June 23rd 1929
 Residence 212 No. 35 St. Omaha, Neb.
 Place of Death 2530 Cassport St. Omaha, Neb.
 Funeral Services at L.O.S. Church, Lamoni, Ia.
 Time of Funeral Service 2 P.M.
 Clergyman W.E. Paul Ed. Polan
 Certifying Physician A.P. Condon, Omaha, Neb.
 His Residence Omaha, Neb.

Number of Burial Certificate
 Cause of Death Angina Pectoris
(Primary) (Secondary)
 Date of Death June 20, 1929 6 P.M.
 Occupation of the Deceased Salesman

Single or Married Single Religion L.O.S.
 Date of Birth June 28, 1875
 Age 53 Years 11 Months 22 Days
 Name of Father John Freunault
 His Birthplace Kentucky
 Name of Mother Fannie Robertson
(Maiden Name)

Her Birthplace Kentucky
 Body to be Shipped from Omaha
June 24, 1929 to July 1, 1929
 Size and Style of Casket or Coffin Slit Top, Cloud
 Manufactured by Rose Hill (Lamoni) Cemetery
 Interment at Rose Hill (Lamoni) Cemetery



Lot No. 875
 Grave No.
 Section No. 2

EXTENT Along Ol. Log

Casket or Coffin	\$	
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with	Fluid)	
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	15 00
Hearse		
Auto Limousines to Cemetery	@ \$	
Autos to R. R. Station	@ \$	
Other Vehicle Service		
Acroplane Service		
Death Notices in	Newspapers	
<small>(Names of Newspapers)</small>		
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		10 00
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		10 00
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page		or below

To Funeral Charges	Total, \$					By Cash	\$

Names of Pall Bearers E. Dawson W.E. Hager Neph. L. L. ... Young Stecker W. L. ... Fred Lyman
 Names of Judges F. B. ... Wayne Derry Raymond Dyer May Linton Paul Walker
 S. I. N. E. R. S. Waggie Anthony Edwily Anthony Dora Lamm Alis Lamm
 Lodge Insurance, \$
 Other Insurance, \$
 Names of Near Relatives Funeral Director H. Otter W. ... O. S. White
 Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1922.

RECORD OF FUNERAL

Total No. 1371 Yearly No. 22 Date July 20 1929

Name of Deceased Mrs. Della Kiddle White Deer Lake, D. Dak.
Husband---
Wife---Widow (What Race) (Where Born)
Son---Daughter of Elmer E. Kiddle

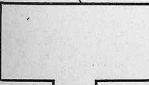
Charge to Elmer E. Kiddle
Address Lamoni, Ia.
Order Given by Franklin Kiddle
How Secured 24
Date of Funeral July 20th 1929
Residence Lamoni, Ia.
Place of Death Iowa City, Iowa
Funeral Services at P.S. Church, Lamoni, Ia.
Time of Funeral Service 2 P.M.
Clergyman W.E. Prill, James Thomas
Certifying Physician C.P. Carter
His Residence Iowa City, Ia.

Casket or Coffin \$
Metallic Lining (State Kind)
Outside Box (State Kind)
Grave Vault (State Kind)
Burial Suit or Dress
Burial Slippers and Hose
Engraving Plate
Embalming Body (with Fluid)
Dressing Body, \$ Shaving, \$
Hair Dressing
Use of Folding Chairs
" " Candelabrum, \$ Candles, \$
Door Badge, \$ Gloves, \$
Hearse 15.00
Auto Limousines to Cemetery, @ \$
Autos to R. R. Station, @ \$
Other Vehicle Service
Aeroplane Service
Death Notices in Newspapers

Number of Burial Certificate
Cause of Death Septicemia
(Primary) (Secondary)
Date of Death July 17, 1929, 1:40 P.M.
Occupation of the Deceased A.F. Homes
Single or Married Married Religion L.O.S.
Date of Birth June 3, 1886
Age 43 Years 8 Months 14 Days
Name of Father Wm. Stowell
His Birthplace Mich.
Name of Mother Anna Burgess
(Maiden Name)
Her Birthplace
Body to be Shipped from Iowa City, Ia.
Shipping Undertaker, F.R. Dinkhorts
Size and Style of Casket or Coffin

(Names of Newspapers)
Flowers, \$ Rental of Plants, \$
Other Decorations
Outlay for Lot
Opening Grave or Vault 8.00
Lining Grave with Evergreen or Muslin
Matting, \$ Tent Rental, \$
Use of Lowering Device
Rental of Vault
Outlay for Shipping Charges
Removal Charges
Incineration
Personal Services 10.00
Singers
Church Charges, \$ Minister, \$
Telegrams and Telephone Charges
Pall Bearer Service

Manufactured by
Interment at Lamoni, Deer Hill Cemetery



Lot No. 1127
Grave No. 2
Section No.

Total Footing of Bill \$
By Amount Paid in Advance \$
Balance \$
Entered into Ledger, page or below

SEXTON = Alonzo De Long

To Funeral Charges	Total	By Cash

Names of Pall Bearers Phil Deaver, Virgil Sperry, Jr., Ludwig, Ralph H. Jensen, J.C. Bergman
Names of Lodges M. E. Mortuore
F.B. Edna Wood & Ruth Lamoni, Ferns, Roberson, Helen Has Beck
Local Insurance Mable Castile Other Insurance Paul Press, E. Dewey White
Names of Near Relatives H. O. White, R. L. J. White
Funeral Director

RECORD OF FUNERAL

Total No. *1373* Yearly No. *24* Date *July 29* 19*29*

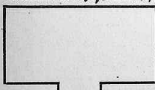
Name of Deceased *Maria Helen Carter* (What Race) *White* (Where Born) *Paris, Ind.*
 Husband---
 Wife---Widow
 Son---Daughter of } *Bilas Carter deceased*

Charge to *Mrs. Geo. Evans*
 Address *Lammori, Ind.*
 Order Given by *Mrs. Geo. Evans*
 How Secured *by*
 Date of Funeral *July 29, 1929*
 Residence *Geo. Evans, 34 N. W. Lammori*
 Place of Death *Geo. Evans, Ind.*
 Funeral Services at *Geo. Evans, Ind.*
 Time of Funeral Service *3 P.M.*
 Clergyman *W. Gray*
 Certifying Physician *C. E. Sixbury Lammori*
 His Residence *Lammori, Ind.*

Casket or Coffin	\$ 150.00 ✓
Metallic Lining	(State Kind)
Outside Box	(State Kind)
Grave Vault	(State Kind) 115.00
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	25.00 ✓
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	x x
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	15.00
Auto Limousines to Cemetery, @ \$	
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in	Newspapers
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot # <i>1553</i>	<i>40</i>
Opening Grave or Vault	<i>10</i>
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	x x
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	x x
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pal Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

Number of Burial Certificate
 Cause of Death *Cardiac renal disease*
 (Primary) (Secondary)
 Date of Death *July 28, 1929 11 AM*
 Occupation of the Deceased *at home*
 Single or Married *Widow* Religion
 Date of Birth *April 29 1851*
 Age *78* Years *2* Months *29* Days
 Name of Father *Robert Todd*
 His Birthplace *NK*
 Name of Mother *NK*
 (Maiden Name)
 Her Birthplace *NK*
 Body to be Shipped to

Size and Style of Casket or Coffin *1/2 c.*
3000. Emb. Pl. - St. Gr.
 Manufactured by *W. H. St. Casket Co.*
 Interment at *Rock Hill* Cemetery

Diagram of Lot or Vault

 Lot No. *1553*
 Grave No. *4*
 Section No.
 STONEX - *Alvorge O. Long*

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers *Walter Teub, Will Salmons, Oscar Bringer, Opal Reudert, Simon Borth, Jess Jackson*
 Names of Lodges
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives *H. O. White*

RECORD OF FUNERAL

Total No. 1274 Yearly No. 25 Date August 1st 1929
 Name of Deceased Riley Alfred Warner White Kelleston, Iowa
 (Husband-- (What Race) (Where Born)
 Wife--Widow
 Son--Daughter of

Charge to Quatern Co.
 Address
 Order Given by J.P. Haas
 How Secured
 Date of Funeral August 1st 1929
 Residence Lamoni, Iowa
 Place of Death Lamoni Co. Mo. So. of P.
 Funeral Services at Residence, Lamoni
 Time of Funeral Service. 2:30 P.M.
 Clergyman James Thomas
 Certifying Physician Removal Permitted
 His Residence
 Number of Burial Certificate. 334
 Cause of Death Struck by lightning
 (Primary) (Secondary)
 Date of Death July 30 1929 6:30 AM
 Occupation of the Deceased. labor
 Single or Married Single Religion
 Date of Birth July 2 1911
 Age. 18 Years. 9 Months. 28 Days
 Name of Father L.A. Warner
 His Birthplace. Shelburne, Mo.
 Name of Mother Susie Tracy
 (Maiden Name)
 Her Birthplace Kelleston, Ia
 Body to be Shipped to
 Size and Style of Casket or Coffin. 70x11x11 Sil
Gray, Bronze, crepe
 Manufactured by M.C. Ward
 Interment at Rose Hill, Lamoni, Cemetery

Casket or Coffin. <u>County bill</u>	\$	<u>60.00</u>
Metallic Lining.		
Outside Box.	(State Kind)	
Grave Vault.	(State Kind)	
Burial Suit or Dress.	(State Kind)	
Burial Slippers and Hose.		
Engraving Plate.		
Embalming Body (with Fluid)		
Dressing Body, \$.....	Shaving, \$.....	
Hair Dressing.		
Use of Folding Chairs.		
" Candelabrum, \$.....	Candles, \$.....	
Door Badge, \$.....	Gloves, \$.....	
Hearse		
Auto Limousines to Cemetery..@ \$.....		
Autos to R. R. Station.@ \$.....		
Other Vehicle Service.		
Aeroplane Service.		
Death Notices in.	Newspapers.	
.....	(Names of Newspapers)	
Flowers, \$.....	Rental of Plants, \$.....	
Other Decorations.		
Outlay for Lot.		
Opening Grave or Vault.		
Lining Grave with Evergreen or Muslin.		
Matting, \$.....	Tent Rental, \$.....	
Use of Lowering Device.		
Rental of Vault.		
Outlay for Shipping Charges.		
Removal Charges.		
Incineration		
Personal Services.		
Singers		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges.		
Pall Bearer Service.		
Total Footing of Bill.	\$	
By Amount Paid in Advance.	\$	
Balance.	\$	
Entered into Ledger, page.	or below	

Lot No. 635 S
 Grave No.
 Section No.
 Diagram of Lot or Vault
SE. 1/4 - 11 - 14 - 29

To Funeral Charges.	Total, \$							
By Cash.	\$							
<p>Body brought to Lamoni <u>July 30 - 29 5 P.M.</u></p>								

Names of Pall Bearers.
 Names of Lodges.
 SINGER - Lois Dawson Alice Lane Lois Press Lois Larson
 Lodge Insurance, \$.....
 Names of Near Relatives.
 Funeral Director John White Pollin S. White
 Other Insurance, \$.....
 Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1928.

RECORD OF FUNERAL

Total No. 1376... Yearly No. 27... Date Aug. 25, 1929

Name of Deceased... George Baudy... (What Race) White... (Where Born) Harrison, La. Mo. -
Husband---
Wife---Widow
Son---Daughter of } Laura Ellen Baudy

Charge to... George Baudy Ex. Address... Lamoni, Ia.
Order Given by... Ethel & Stella Baudy

How Secured... Key
Date of Funeral... August 25, 1929
Residence... North Maple, Lamoni

Place of Death... Residence
Funeral Services at... L.O.S. Church, Lamoni
Time of Funeral Service... 2.30

Clergyman... W.B. Paul - S.D. Paul
Certifying Physician... J.M. Hells
His Residence... Lamoni, Ia.

Number of Burial Certificate...
Cause of Death... Inorganic heart lesion
(Primary) (Secondary) 2300

Date of Death... August 22, 1929
Occupation of the Deceased... clerk
Single or Married... Married, Religion... L.O.S.

Date of Birth... October 13, 1929
Age... 65 Years, 10 Months, 9 Days
Name of Father... Pascal Baudy

His Birthplace... Louisville, Kentucky
Name of Mother... Lovie Hilland
(Maiden Name)

Her Birthplace... Salisbury, Illinois
Body to be Shipped to...

Size and Style of Casket or Coffin... A050 1/2 x
State... Dist. L. Emb. plus
Manufactured by... Post Casket Co.
Interment at... Rose Hill Cemetery

Diagram of Lot or Vault
To Funeral Charges... Total, \$
Informant... Estella Baudy

Diagram of Lot or Vault (cont.)

To Funeral Charges... Total, \$

By Cash... \$

Diagram of Lot or Vault (cont.)

Diagram of Lot or Vault (cont.)

Diagram of Lot or Vault (cont.)

Diagram of Lot or Vault (cont.)

Names of Pall Bearer... H.W. Teal, C. Dickson, J. W. O'Leary, A.W. Fleck, Fred Long, J.A. Hancock
Names of Lodges... L.O.S. #18, L.O.S. #19, L.O.S. #20, L.O.S. #21, L.O.S. #22, L.O.S. #23, L.O.S. #24, L.O.S. #25, L.O.S. #26, L.O.S. #27, L.O.S. #28, L.O.S. #29, L.O.S. #30, L.O.S. #31, L.O.S. #32, L.O.S. #33, L.O.S. #34, L.O.S. #35, L.O.S. #36, L.O.S. #37, L.O.S. #38, L.O.S. #39, L.O.S. #40, L.O.S. #41, L.O.S. #42, L.O.S. #43, L.O.S. #44, L.O.S. #45, L.O.S. #46, L.O.S. #47, L.O.S. #48, L.O.S. #49, L.O.S. #50, L.O.S. #51, L.O.S. #52, L.O.S. #53, L.O.S. #54, L.O.S. #55, L.O.S. #56, L.O.S. #57, L.O.S. #58, L.O.S. #59, L.O.S. #60, L.O.S. #61, L.O.S. #62, L.O.S. #63, L.O.S. #64, L.O.S. #65, L.O.S. #66, L.O.S. #67, L.O.S. #68, L.O.S. #69, L.O.S. #70, L.O.S. #71, L.O.S. #72, L.O.S. #73, L.O.S. #74, L.O.S. #75, L.O.S. #76, L.O.S. #77, L.O.S. #78, L.O.S. #79, L.O.S. #80, L.O.S. #81, L.O.S. #82, L.O.S. #83, L.O.S. #84, L.O.S. #85, L.O.S. #86, L.O.S. #87, L.O.S. #88, L.O.S. #89, L.O.S. #90, L.O.S. #91, L.O.S. #92, L.O.S. #93, L.O.S. #94, L.O.S. #95, L.O.S. #96, L.O.S. #97, L.O.S. #98, L.O.S. #99, L.O.S. #100

Lodge Insurance, \$... Other Insurance, \$...
Names of Near Relatives... Funeral Director... A. Otto White, R.S. White
Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1377 Yearly No. 28 Date Aug 30th 1929

Name of Deceased Edward Curtis Bell White St. Louis, Mo.
Husband---
Wife---Widow (What Race)
Son---Daughter of { Son of Elderred N. & Mary Ruth Bell (Where Born)

Charge to Edward C. Bell Sr.
Address 3508 Lucas & Hunt Road, St. Louis

Order Given by Elderred N. Bell 56157
Robert St. St. Louis
How Secured

Date of Funeral

Residence

Place of Death Lantern, Ia. J. Bell, Mo

Funeral Services at

Time of Funeral Service

Clergyman

Certifying Physician H.M. Hills

His Residence Lantern, Ia.

Number of Burial Certificate

Cause of Death Diphtheria
(Primary) (Secondary)

Date of Death August 29-29

Occupation of the Deceased none

Single or Married Single, Religion

Date of Birth February 27th 1927

Age 2 Years 6 Months 2 Days

Name of Father Elderred Norris Bell

His Birthplace Saint Louis, Mo.

Name of Mother Mary Ruth (Olson)
(Maiden Name)

Her Birthplace Mercedia, Illinois

Body to be Shipped to Craig Under taking
Parlor, 4468 Washington Ave, St. Louis

Size and Style of Casket or Coffin #108 3/6
Luiga Lid Comb. W.H. J. Under

Manufactured by Roots Caskets Co.

Interment at _____ Cemetery

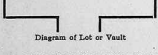


Diagram of Lot or Vault

Lot No. _____

Grave No. _____

Section No. _____

Casket or Coffin #105 \$ 50.00

Metallic Lining _____

Outside Box metal lined herm. sealed \$ 20.00
(State Kind)

Grave Vault _____

Burial Suit or Dress _____

Burial Slippers and Hose _____

Engraving Plate _____

Embalming Body (with _____ Fluid) \$ 25.00

Dressing Body, \$ _____ Shaving, \$ _____

Hair Dressing _____

Use of Folding Chairs _____

" " Candelabrum, \$ _____ Candles, \$ _____

Door Badge, \$ _____ Gloves, \$ _____

Hearse _____ \$ xx

Auto Limousines to Cemetery, @ \$ _____

Autos to R. R. Station, @ \$ _____

Other Vehicle Service _____

Aeroplane Service _____

Death Notices in _____ Newspapers _____

Flowers, \$ _____ Rental of Plants, \$ _____

Other Decorations _____

Outlay for Lot _____

Opening Grave or Vault _____

Lining Grave with Evergreen or Muslin _____

Matting, \$ _____ Tent Rental, \$ _____

Use of Lowering Device _____

Rental of Vault _____

Outlay for Shipping Charges Express \$ 14.47

Removal Charges _____

Incineration _____

Personal Services _____ \$ xx

Singers _____

Church Charges, \$ _____ Minister, \$ _____

Telegrams and Telephone Charges _____ \$ 56.57

Pall Bearer Service _____ \$ 7.4

Total Footing of Bill _____ \$

By Amount Paid in Advance _____ \$

Balance _____ \$

Entered into Ledger, page _____ or below _____

To Funeral Charges, Total, \$ _____

Consigned to Craig Under taking Parlor
4468 Washington Ave St. Louis, Mo.

Telephone St. Louis 121-

11 201-

7 135-

Names of Pall Bearers _____ Telegram 110 7.4

Names of Lodges _____ 637

Lodge Insurance, \$ _____ Other Insurance, \$ _____

Names of Near _____ Funeral Director A. Otto White Rollin S. White
Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1378 Yearly No. 29 Date Sept. 9 1929
 Name of Deceased John Marion Ormer White New Ruda Twp Decatur Co. Ia.
Husband
Wife--Widow
Daughter of daughter (What Race) (Where Born)

Charge to Joe W. Ormer
 Address Paris City, Ia.
 Order Given by Joe W. Ormer
 How Secured
 Date of Funeral Sept. 8, 1929
 Residence New Ruda Twp Decatur Co.
 Place of Death New Ruda Twp
 Funeral Services at Lamon L.O.S. Church
 Time of Funeral Service 2 P.M.
 Clergyman Ray Childe - Wm. Messersmith
 Certifying Physician C. G. Dix Barry
 His Residence Lamoni, Ia.
 Number of Burial Certificate
 Cause of Death Shot by Automobile
(Primary) (Secondary)
 Date of Death Sept. 5, 1929 4:30 PM
 Occupation of the Deceased Scholar
 Single or Married Single Religion
 Date of Birth August 19, 1921
 Age 8 Years 1 Months 10 Days
 Name of Father Joe Wilson Ormer
 His Birthplace Farmington, Co. Iowa
 Name of Mother Hattie Fogle
(maiden Name)
 Her Birthplace Yale, Iowa
 Body to be Shipped to
 Size and Style of Casket or Coffin 7/6 - No. 150
White Plus 4
 Manufactured by The Root Caskets Co.
 Interment at Rose Hill Cemetery

Casket or Coffin	No. 150 - 7/6	\$ 65.00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress	<u>Lundon wear</u>	12.00
Burial Slippers and Hose		35
Engraving Plate		
Embalming Body (with Fluid)		25.00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chair		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15.00
Auto Limousines to Cemetery @ \$		
Autos to R. R. Station @ \$		
Other Vehicle Service	<u>own auto</u>	2.10
Aeroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	6.50
Other Decorations		
Outlay for Lot # <u>1554</u>		40.00
Opening Grave or Vault		50.00
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	5.00
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page	or below	

Lot No. 1554
 Grave No. 4
 Section No.
 Diagram of Lot or Vault
SECT. 4 - Along Old Long

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Chas. M. Cay - Roger M. Cay - Grand Laver - Harold Ordway
 Names of Urdges SINGERS = J. Lois Carron - Iris Butts - Neil Deaver - Culmer Lord

Lodge Insurance, \$
 Names of Near Relatives Funeral Director A. O. White - Paulin S. White
 Other Insurance, \$
 Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1928.

RECORD OF FUNERAL

Total No. 1322 Yearly No. 30 Date September 9, 1929

Name of Deceased Mary Ellen Dancer White Lamoni, Iowa
Husband---Widow (What Race) (Where Born)
Sun---Daughter of } daughter

Charge to David A. Dancer
Address Lamoni, Ia.
Order Given by David A. Dancer
How Secured cash

Date of Funeral September 9, 1929
Residence St. Pauli St. Lamoni, Ia.

Place of Death Residence
Funeral Services at Residence
Time of Funeral Service 2:30 P.M.
Clergyman Rev. Cherville
Certifying Physician C. E. DeBury
His Residence Lamoni, Ia.

Number of Burial Certificates
Cause of Death Acute Polymyositis (Bulbar type)
(Primary) (Secondary)

Date of Death September 7, 1929, 7:30 AM
Occupation of the Deceased School

Single or Married Single Religion
Date of Birth January 11, 1924

Age 5 Years 8 Months 6 Days
Name of Father David Anderson Ogden
His Birthplace Lamoni, Ia.

Name of Mother Florence M. Messerle
(Maiden Name)
Her Birthplace West Union, Ia.

Body to be Shipped to
Size and Style of Casket or Coffin 4 1/2 # 804
White, plush, 1/2 dresden

Manufactured by The Pease Casket Co.
Interment at Brown Hill Cemetery

Diagram of Lot or Vault
SIXTON Alonzo De Long

Lot No. 275
Grave No.
Section No. 1

Casket or Coffin		\$ 72.00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	85.00
Burial Suit or Dress	<u>White Union, Iowa</u>	5.00
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		25.00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse	(State Kind)	15.00
Auto Limousines to Cemetery, @ \$		2.50
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	15.00
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		6.00
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page		or book

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Richard Hudson, James Smith, Ralph L. Smith, Kenneth Scott
Names of Ladies SINGER S. Magg. Guibony, Wanda Perry
FLORAT. DEBRER S. Mary Smith, Anna Campbell
Lodge Insurance, \$
Names of Near Relatives A. Otis White - Gullin S. White
Other Insurance, \$

RECORD OF FUNERAL

Total No. 1380 Yearly No. 31 Date Sept. 11, 1929

Name of Deceased Max LeRoy Lamb White Lamoni, Ia.
(What Race) (Where Born)

Charge to J. Lamb
 Address Lamoni, Ia.
 Order Given by Jay E. Lamb
 How Secured _____

Date of Funeral September 11, 1929
 Residence Lamoni, Iowa
 Place of Death Des Moines, Ia. Lutheran Hosp.

Funeral Services at Residence, West. Station
 Time of Funeral Service 2:30
 Clergyman G. P. Olshapp
 Certifying Physician Dr. Edw. O. Walston
 His Residence Des Moines, Iowa

Number of Burial Certificate _____
 Cause of Death Traumatic rupture of left lung
(Primary) (Secondary)
 Date of Death Sept. 8, 1929, 10 P.M.
 Occupation of the Deceased Scholar

Single or Married Single Religion none
 Date of Birth June 15, 1914
 Age 15 Years 2 Months 23 Days
 Name of Father Jay Edgington Lamb
 His Birthplace DeKalb, Mo.

Name of Mother Carrie Louise Tallman
(Maiden Name)
 Her Birthplace Lynnville, Iowa
 Body to be Shipped to _____

Size and Style of Casket or Coffin 6/3
Light Eng. Maple
 Manufactured by M.B. Kass
 Interment at Lamoni, Rose Hill Cemetery

Lot No. 878
 Grave No. _____
 Section No. 1 and 2

Diagram of Lot or Vault
EXTON, Largo, De Long

Casket or Coffin <u>o/s burial case</u>	\$ <u>80.00</u>
Metallic Lining _____ <small>(State Kind)</small>	
Outside Box _____ <small>(State Kind)</small>	
Grave Vault _____ <small>(State Kind)</small>	
Burial Suit or Dress _____	15.00
Burial Slippers and Hose <u>Underwear</u>	15.00
Embalming Plate _____	
Embalming Body (with _____ Fluid)	250.00
Dressing Body, \$ _____ Shaving, \$ _____	
Hair Dressing _____	
Use of Folding Chairs _____	
“ “ Candelabrum, \$ _____ Candles, \$ _____	
Door Badge, \$ _____ Gloves, \$ _____	
Hearse _____	150.00
Auto Limousines to Cemetery, @ \$ _____	
Autos to R. R. Station, @ \$ _____	
Other Vehicle Service _____	
Acroplane Service _____	
Death Notices in _____ Newspapers _____ <small>(Names of Newspapers)</small>	
Flowers, \$ _____ Rental of Plants, \$ _____	
Other Decorations _____	
Outlay for Lot _____	
Opening Grave or Vault _____	80.00
Lining Grave with Evergreen or Muslin _____	
Matting, \$ _____ Tent Rental, \$ _____	
Use of Lowering Device _____	
Rental of Vault _____	
Outlay for Shipping Charges _____	
Removal Charges _____	
Incineration _____	
Personal Services _____	
Singers _____	
Church Charges, \$ _____ Minister, \$ _____	
Telegrams and Telephone Charges _____	
Pall Bearer Service _____	
<u>Candelabrum</u>	<u>38.50</u>
Total Footing of Bill _____ \$	
By Amount Paid in Advance _____ \$	
Balanced _____ \$	
Entered into Ledger, page _____ or below _____	

To Funeral Charges _____ Total, \$ _____	By Cash _____ \$ _____
<u>Regular Robert L. Mc Lane Des Moines Ia</u> <u>Proph. body from Des Moines Sept. 9, A.M.</u>	

Names of Pall Bearers Mark Conway, Bob Kelley, Monna Hall, Bert King, Jim Walker, Juan Moore
 Names of Lodges SINERS, Family Auxiliary, Helen Auxiliary, Carl Paul, Preston, Hynden

Lodge Insurance, Funeral Director _____ Other Insurance, \$ _____
 Names of Near Relatives J. Otis White - Paul S. White

RECORD OF FUNERAL

Total No. 1381 Yearly No. 32 Date Sept 28, 1929
 Name of Deceased William Hugh Hall (White) (Where Born) England
 Husband--
 Wife--Ruby Ann Hall
 Son--Daughter of

Charge to Wm H. Hall, Est.
 Address _____
 Order Given by Rosen Hall
 How Secured _____
 Date of Funeral Sept. 28, 1929
 Residence Decatur Co., Iowa
 Place of Death Iowa City, Iowa
 Funeral Services at Residence
 Time of Funeral Service 2:30 P.M.
 Clergyman Rev. C. Lash - Kelletta
 Certifying Physician _____
 His Residence Iowa City
 Number of Burial Certificate _____
 Cause of Death Carcinoma of Prostate
 (Primary) (Secondary)
 Date of Death Sept. 26, 1929
 Occupation of the Deceased Farmy
 Single or Married Married Religion Churchy Cong.
 Date of Birth May 21, 1858
 Age 71 Years 4 Months 5 Days
 Name of Father H. K.
 His Birthplace _____
 Name of Mother _____
 (Maiden Name)
 Her Birthplace _____
 Body to be Shipped to _____
Returned from Ia. City via Tunnel Coach
 Size and Style of Casket or Coffin
#132 - Silver Oak - Face Cap
 Manufactured by Wm. Cassin Co.
 Interment at Rose Hill Cemetery

Casket or Coffin	\$ 100 00
Metallic Lining	
Outside Box (State Kind)	
Grave Vault <u>Black Oak</u>	100 00
Burial Suit or Dress <u>Suit</u>	15
Burial Slippers and Hose	3 50
Engraving Plate	
Embalming Body (with _____ Fluid)	2 50
Dressing Body, \$ _____ Shaving, \$ _____	
Hair Dressing	
Use of Folding Chairs <u>Req. to Res.</u>	x x
" " Candelabrum, \$ _____ Candles, \$ _____	
Door Badge, \$ _____ Gloves, \$ _____	
Hearse	12 00
Auto Limousines to Cemetery @ \$ _____	
Autos to R. R. Station @ \$ _____	
Other Vehicle Service	
Acroplane Service	
Death Notices in _____ Newspapers	
(Names of Newspapers)	
Flowers, \$ _____ Rental of Plants, \$ _____	4 50
Other Decorations	
Outlay for Lot <u>#1875</u>	10 00
Opening Grave or Vault	10 00
Lining Grave with Evergreen or Muslin	
Matting, \$ _____ Tent Rental, \$ _____	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges <u>from Ia. City by Auto</u>	
Incineration	
Personal Services	x x
Singers	x x
Church Charges, \$ _____ Minister, \$ _____	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ _____
By Amount Paid in Advance	\$ _____
Balance	\$ _____
Entered into Ledger, page _____ or below _____	

Lot No. 1575
 Grave No. 4
 Section No. _____
 Diagram of Lot or Vault
SEXTON - Alvaro O. Hoy

To Funeral Charges Form 1
Body Prepared by - H. Oberhelik Mortuary, Iowa City, Ia
Drive to Iowa City for Body
Returned Sept. 27, 1929

Names of Pall Bearers Acem Bringer, I. Win. Batts, Chas. Rhodes, Bert Mummy, Ed Smith, Mark A. Hogan
 Names of Lodges P. O. G. S. - Mrs. J. H. Taiting, Mrs. Heizer, Mr. ? Murray, Miss Sam Johnson
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives James D. Wisceter - W. O. S. White

RECORD OF FUNERAL

Total No. 1312 Yearly No. 33

Date. Oct. 23 1929

Name of Deceased. Eli Hayer White Norway, La Salle Co., Ill.
(What Race) (Where Born)
 Husband- Wife- Son- Daughter of Isabelle Hayer

Charge to Anna Dora
 Address Anna Dora
 Order Given by Isabelle Hayer
 How Secured
 Date of Funeral Oct. 23, 1929
 Residence Norway, Ill.
 Place of Death Headstone
 Funeral Services at Saints Church
 Time of Funeral Service 7:30 P.M.
 Clergyman Wm. Paul, Wm. Lantz, C.A.S.
 Certifying Physician Dr. G. Bowman
 His Residence Dear Grove
 Number of Burial Certificate 16
 Cause of Death Heart Disease of Brain, Arteriosclerosis
(Primary) (Secondary)
 Date of Death Oct. 20, 1929
 Occupation of the Deceased Minister
 Single or Married Married, Religion P.D.S.
 Date of Birth March 1, 1854
 Age 75 Years 7 Months 19 Days
 Name of Father Olav Hayer
 His Birthplace Norway
 Name of Mother Julia Leppan
(Maiden Name)
 Her Birthplace Norway
 Body to be Shipped to
 Size and Style of Casket or Coffin #900. Oak
West Church, Fair
 Manufactured by Wm. Casket Co.
 Interment at N. Sts. Hill Cemetery

Casket or Coffin #900	\$	195.00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	X
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with <u>Formal</u> Fluid)		25.00
Dressing Body, \$ Shaving, \$		
Hair Dressing		
Use of Folding Chairs		
“ Candelabrum, \$ Candles, \$		
Door Badge, \$ Gloves, \$		
Hearse		15.00
Auto Limousines to Cemetery. @ \$		X
Autos to R. R. Station. @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in Newspapers	(Names of Newspapers)	
Flowers, \$ Rental of Plants, \$		5.00
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		8.00
Lining Grave with Evergreen or Muslin		
Matting, \$ Tent Rental, \$		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		X
Singers		
Church Charges, \$ Minister, \$		
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page		or below

Lot No. 463
 Grave No. 3
 Section No.
 Diagram of Lot or Vault
S.E. X.T.O.N. - Alago De Long

	To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearers John Mitzel, David Kerner, Geo. Blasi, Robt. Rodolfs, Wm. D. Sanders, J.W. Schultz
 Names of Lodgers W.R.E.S. - Dorothy Cull, Lyla Burt, Arthur Gabbman, Cecilia Kunkel, Helburgers in Camp
F. H. - Maurer, Y. Arntsen, Jansen, Rents, Sauer, Mitterer Kelly, Lewis Sampson, John C. Ort
 Lodge Insurance, \$
 Other Insurance, \$
 Names of Near Relatives Luana Ovieta - J. O. H. Mite, & Rollen S. Mite

RECORD OF FUNERAL

Total No. 1323 Yearly No. 34 Date October 24, 1929

Name of Deceased Martha E. Elizabeth Cumura, White, London, Co. W. Va.
Husband - William Henry Cumura, Deceased. (White Race) (White Born)

Charge to Estate
Address
Order Given by S. A. Cumura
How Secured
Date of Funeral Oct. 24, 1929
Residence 302 W. Jordan - Landon, La.
Place of Death
Funeral Services at L. O. S. Lathrop
Time of Funeral Service 2:30 P.M.
Clergyman Mc. Guff, S. L. Dr. Hoff, and
Certifying Physician Dr. S. A. Meier
His Residence Landon, La.
Number of Burial Certificate 27
Cause of Death Chronic Bronchitis
Date of Death Oct. 22, 1929
Occupation of the Deceased at Home
Single or Married Married Religion 2.0 S.
Date of Birth July 18, 1836
Age 93 Years 3 Months 4 Days
Name of Father William Pitt
His Birthplace Landon, England
Name of Mother Martha J. Wiley
Her Birthplace England
Body to be Shipped to

Casket or Coffin # 3000 H. Plush	\$ 150.00
Metallic Lining (State Kind)	
Outside Box	
Grave Vault # 4 B Iowa Pl. Seal	115.00
Burial Suit or Dress	15.00
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Stimul. Fluid)	2.50
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	15.00
Auto Limousines to Cemetery, @ \$	X X
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$ Rental of Plants, \$	
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	10.00
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	X X
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

Size and Style of Casket or Coffin # 3000 H. Pl. P.
Ocheym.
Manufactured by Rich. Cashin Co.
Interment at Rose Hill Cemetery
Diagram of Lot or Vault
F X T O H Along D. D. Long

Lot No. 267
Grave No. 172
Section No.

To Funeral Charges Total, \$	By Cash \$

Names of Pall Bearers John Smith, Ed. W. Rogers, H. H. Seal, Prof. W. Jackson, J. A. Fother, H. J. Garsington
Names of Lodgers J. B. - With Steward, Robert Thomas, Edna Beatt, Harold Jordan
S. I. N. G. E. R. S. - Fred May, Mack Lowrey, James Jackson, Ann Morgan, A. Gust
Lodge Insurance, \$ Other Insurance, \$ Charles Dwyer & Co.
Names of Near Relatives Maggie Anthony

RECORD OF FUNERAL

Total No. 1384 Yearly No. 35 Date Nov. 9 1929

Name of Deceased John Feist White (What Race) Cassville, Mo. (Where Born)
Husband...
Wife...
Son... Daughter of Jeanet A. Feist, divorced

Charge to A. J. Feist
Address Coggon, Ia. Phone Troy Mills
Order Given by A. J. Feist
How Secured Paid

Date of Funeral
Residence Coggon, Ia.
Place of Death Bloomington Sup. Decatur Co. Ia. Feist Res.
Funeral Services at Nov. 11 - 2-9

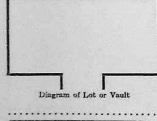
Time of Funeral Service
Clergyman
Certifying Physician C. M. Walker
His Residence Kellerton, Ia.

Number of Burial Certificate
Cause of Death Premia Poison - Bright's disease
(Primary) (Secondary)
Date of Death Nov. 8 - 1929 10 AM
Occupation of the Deceased Farmer

Single or Married Married Religion
Date of Birth January 15 1857
Age 72 Years 9 Months 23 Days
Name of Father Charles Feist

His Birthplace Stearley, Germany
Name of Mother Louisa Hotz
(Maiden Name)
Her Birthplace Wartensburg, Germany
Body to be Shipped to Independence, Mo.

Size and Style of Casket or Coffin 40.50. Slute
Emb. Alum.
Manufactured by The First Casket Co.
Interment at Buckbaum Co. Cemetery



Lot No.
Grave No.
Section No.

Casket or Coffin	\$ 200
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault (State Kind)	
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	25 00
Dressing Body, Shaving, Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, Candles	
Door Badge, Gloves	10 00
Hearse	
Auto Limousines to Cemetery @ \$	
Autos to R-R Station @ \$	5 00
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers (Names of Newspapers)	
Flowers, Rental of Plants	
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, Tent Rental	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, Minister, Telegrams and Telephone Charges	
Pall Bearer Service	
TOTAL PAID	16 66
Total Footing of Bill	256 66
By Amount Paid in Advance	
Balance	
Entered into Ledger, page or below	

To Funeral Charges	Total, \$	By Cash, \$
A. J. Feist (son) address Coggon, Ia. Res. - Newton Sup. Buchanan Co. Phone Troy Mills		
body shipped from Davis City, Mo. vs. Des Moines Waterloo - Independence		
shipped Nov. 9 - 2-9 2.11 P.M. Mrs Ed Feist in charge		

Names of Pall Bearers
Names of Lodges
Lodge Insurance, \$ Other Insurance, \$
Names of Near Relatives

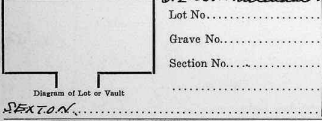
RECORD OF FUNERAL

Total No. 1385 Yearly No. 36 Date November 20, 1929
 Name of Deceased Katharin Barbara Hauber White Bathiger, Baden, Germany
 Husband--- (What Race) (Where Born) German
 Wife---Widow }
 Son---Daughter of } John Jacob Hauber, deceased

Charge to Estate
 Address F. W. Hauber, Worth, Mo.
 Order Given by F. W. Hauber - Mrs Sam Biesler
 How Secured
 Date of Funeral November 20, 1929
 Residence Allemdale, Mo.
 Place of Death Bierlein, R. O., Lammertown
 Funeral Services at 3 1/2 S. W. Allemdale Mo
 Time of Funeral Service 11 P.M.
 Clergyman C. E. Willey, Lammertown
 Certifying Physician Betha A. Green
 His Residence Lammertown, Ia.
 Number of Burial Certificate
 Cause of Death Intestinal flu, Catarrh
 Date of Death November 17, 1929, 2 P.M.
 Occupation of the Deceased At Home
 Single or Married Widow Religion
 Date of Birth August 26, 1845
 Age 84 Years 7 Months 21 Days
 Name of Father A. Adler
 His Birthplace Germany
 Name of Mother Danna M. Krey
 (Maiden Name)
 Her Birthplace Germany
 Body to be Shipped to Allemdale, Mo.
V.O. Funeral Coach
 Size and Style of Casket or Coffin No. 4200
St. Mary R/O, State
 Manufactured by Post Casket Co.
 Interment at Fairland Cemetery Cemetery
3 1/2 S. W. Allemdale Mo.

Casket or Coffin.....	\$ 2.50
Metallic Lining..... (State Kind)	
Outside Box..... (State Kind)	X X
Grave Vault..... (State Kind)	
Burial Suit or Dress.....	27.50
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	25.00
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	
" " Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	20.00
Auto Limousines to Cemetery..@ \$.....	
Autos to R. R. Station.....@ \$.....	
Other Vehicle Service.....	
Death Notices in..... Newspapers.....	
(Names of Newspapers)	
Flowers, \$..... Rental of Plants, \$.....	13.00
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	
Lining Grave with Evergreen or Muslin.....	X X
Matting, \$..... Tent Rental, \$.....	X X
Use of Lowering Device.....	X X
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	X X
Personal Services.....	
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill.....	\$
By Amount Paid in Advance.....	\$
Balance.....	\$
Entered into Ledger, page..... or below.....	

336.50



To Funeral Charges..... Total, \$		By Cash..... \$	
Prayer by <u>C. E. Willey at Mrs. Sam Biesler residence</u>			
<u>Nov. 20, 8:30 P.M. Rev. to Fairland Church</u>			
<u>3 1/2 S. W. Allemdale Mo. Leave 11 P.M.</u>			

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Funeral Directors H. O. White 817 Polli S. White 2418
 Names of Non-Funeral Directors.....
 Implied by F. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1396 Yearly No. 37 Date Nov. 26, 1929

Name of Deceased David L. Condit
Husband---
 Wife---Widow
 Son---Daughter of White Lamoni Iowa
(What Race) (Where Born)

Charge to Fred L. Condit

Address

Order Given by

How Secured

Date of Funeral Nov 26, 1929

Residence Lamoni Iowa

Place of Death Iowa

Funeral Services at Cemetery

Time of Funeral Service

Clergyman S. L. De Lapp

Certifying Physician C. E. Ludwig

His Residence Lamoni, Ia

Number of Burial Certificate

Cause of Death ix. Myocard Infarctus
(Primary) (Secondary)

Date of Death Nov. 25, 1929

Occupation of the Deceased none

Single or Married single Religion

Date of Birth Nov. 25, 1929

Age 0 Years 0 Months 0 Days

Name of Father Fred Leonard Condit

His Birthplace M. Ia

Name of Mother Bessie Gella White
(Maiden Name)

Her Birthplace Blairtown, Mo

Body to be Shipped to

Size and Style of Casket or Coffin

Manufactured by W. P. ...

Interment at Rock Hill Cem Cemetery

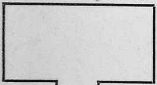


Diagram of Lot or Vault

Lot No. 758

Grave No. 4

Section No.

Casket or Coffin <u>1/2 spec</u>	\$ <u>15 00</u>
Metallic Lining	(State Kind)
Outside Box	(State Kind) <u>XX</u>
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with	Fluid) <u>XX</u>
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	
Auto Limousines to Cemetery, @ \$	<u>XX</u>
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in	Newspapers
<small>(Names of Newspapers)</small>	
Flowers, \$	Rent of Plants, \$
Other Decorations	
Outlay for Lot	<u>XX</u>
Opening Grave or Vault	<u>3 50</u>
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	<u>XX</u>
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges, \$	
Pall Bearer Service	
Total Footing of Bill	<u>71 50</u>
By Amount Paid in Advance <u>B. D. Condit</u>	\$ <u>8 50</u>
Balance	\$ <u>10 00</u>
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To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers

Names of Lodges

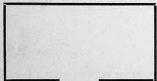
Lodge Insurance, \$

Names of Relatives Rollin S. Condit Other Insurance, \$

RECORD OF FUNERAL

Total No. 1387 Yearly No. 38 Date Nov. 30, 1929
 Name of Deceased Rodwick David Anthony, White, Lamoni Iowa.
Husband---Widow
Wife---Widow
Son---Daughter of Herman and Ethel Anthony
(What Race) White (Where Born) Iowa

Charge to Herman Anthony
 Address 11
 Order Given by 11
 How Secured 11
 Date of Funeral Nov. 30, 1929
 Residence 710 S. 2nd St., Lamoni
 Place of Death At Home
 Funeral Services at Re.
 Time of Funeral Service 3 P.M.
 Clergyman W. E. Prall
 Certifying Physician C. E. Sweeney
 His Residence Lamoni, Ia.
 Number of Burial Certificate 1
 Cause of Death Congenital Heart Disease
(Primary) 1 (Secondary) 0
 Date of Death Nov. 29, 1929
 Occupation of the Deceased none
 Single or Married Married Religion 11
 Date of Birth Nov. 26, 1929
 Age 0 Years 0 Months 4 Days
 Name of Father David Herman Anthony
 His Birthplace Lamoni, Iowa
 Name of Mother Esther M. Anthony
(Maiden Name)
 Her Birthplace Waukegan, Ill.
 Body to be Shipped to 11
 Size and Style of Casket or Coffin No. 1
 Manufactured by 11
 Interment at 11 Cemetery 11



Lot No. 1552
 Grave No. 4
 Section No. 11

Casket or Coffin.....	\$ 25.00
Metallic Lining.....	(State Kind)
Outside Box.....	(State Kind)
Grave Vault.....	(State Kind)
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	
Dressing Body, \$.....	Shaving, \$.....
Hair Dressing.....	
Use of Folding Chairs.....	
" " Candelabrum, \$.....	Candles, \$.....
Door Badge, \$.....	Gloves, \$.....
Hearse.....	
Auto Limousines to Cemetery.. @ \$.....	
Autos to R. R. Station..... @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
<small>(Names of Newspapers)</small>	
Flowers, \$.....	Rental of Plants, \$.....
Other Decorations.....	
Outlay for Lot.....	40.00
Opening Grave or Vault.....	3.00
Lining Grave with Evergreen or Muslin.....	
Matting, \$.....	Tent Rental, \$.....
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	
Singers.....	
Church Charges, \$.....	Minister, \$.....
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill..... \$	
By Amount Paid in Advance..... \$	
Balance..... \$	
Entered into Ledger, page..... or below.....	

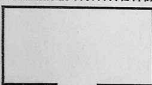
	To Funeral Charges.....	Total, \$.....	
			By Cash..... \$.....

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives John White
Funeral Director
 Implied by F. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1288 Yearly No. 39 Date December 12, 1929
 Name of Deceased Mary Elizabeth Williams White London, England
(What Race) (Where Born)
 Headed by George Washington Williams
Wife---Widow (What Race)
Daughter of

Charge to <u>Winnie Park</u>	Casket or Coffin.....	\$ <u>17.00</u>
Address <u>915 N. Norton St. R.C. Mo.</u>	Metallic Lining.....	
Order Given by <u>Winnie Park - Fannie Post</u>	Outside Box.....	X
How Secured <u>Chg.</u>	Grave Vault.....	(State Kind) (State Kind)
Date of Funeral <u>December 12, 1929</u>	Burial Suit or Dress.....	
Residence <u>Kansas City, Mo. 914 Norton</u>	Burial Slippers and Hose.....	
Place of Death <u>Paris, Mo.</u>	Engraving Plate.....	
Funeral Services at <u>Paris, Mo.</u>	Embalming Body (with..... Fluid)	<u>2.50</u>
Time of Funeral Service <u>3 P.M.</u>	Dressing Body, \$..... Shaving, \$.....	X
Clergyman <u>W.C. Prall - J. P. Lane</u>	Hair Dressing.....	
Certifying Physician <u>Dr. G. P. Reed</u>	Use of Folding Chairs.....	
His Residence <u>Paris, Mo.</u>	" " Candelabrum, \$..... Candles, \$.....	
Number of Burial Certificate.....	Door Badge, \$..... Gloves, \$.....	
Cause of Death <u>Amorose Stage of Brain</u>	Hearse.....	<u>1.50</u>
<small>(Primary) (Secondary)</small>	Auto Limousines to Cemetery @ \$.....	X
Date of Death <u>December 10, 1929 11 AM</u>	Autos to R. R. Station @ \$.....	
Occupation of the Deceased <u>at Home</u>	Other Vehicle Service.....	
Single or Married <u>Widow</u> Religion <u>L.O.S.</u>	Aeroplane Service.....	
Date of Birth <u>August 3, 1848</u>	Death Notices in..... Newspapers.....	
Age <u>81</u> Years <u>4</u> Months <u>7</u> Days	Flowers, \$..... Rental of Plants, \$.....	
Name of Father <u>Moses M. Harness</u>	Other Decorations.....	
His Birthplace <u>England</u>	Outlay for Lot.....	
Name of Mother <u>Susana F. Tolman</u>	Opening Grave or Vault.....	<u>1.00</u>
<small>(Maiden Name)</small>	Lining Grave with Evergreen or Muslin.....	X
Her Birthplace <u>England</u>	Matting, \$..... Tent Rental, \$.....	
Body to be Shipped to.....	Use of Lowering Device.....	X
Size and Style of Casket or Coffin <u>1500 Silver</u>	Rental of Vault.....	
<u>Gray Plus 3 4/3</u>	Outlay for Shipping Charges.....	
Manufactured by <u>The Post-Casket Co.</u>	Removal Charges.....	
Interment at <u>Rose Hill, Lamoni Cemetery</u>	Incineration.....	
	Personal Services.....	
	Singers.....	
	Church Charges, \$..... Minister, \$.....	
	Telegrams and Telephone Charges.....	
	Pall Bearer Service.....	
	<u>Matthew</u>	<u>1.00</u>
	Total Footing of Bill.....	\$ <u>235.00</u>
	By Amount Paid in Advance.....	\$.....
	Balance.....	\$.....
	Entered into Ledger, page..... or below	



Lot No. 88
 Grave No. 2
 Section No.

Diagram of Lot or Vault
SECTION 10, Alamo, De Long

To Funeral Charges..... Total, \$		By Cash.....	\$

Names of Pall Bearers Harry Post, Frank Williams, Geo. Cook, Vera Breuniger, Mrs. Park
 Names of Lodges with Israel Post
F. B. - Mrs. Teale - Miss Breuniger
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives F. O. White - Rollie S. White

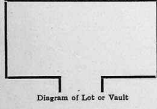
RECORD OF FUNERAL

Total No. 1389 Yearly No. 40 Date Dec. 21st 1929

Name of Deceased Grace Chamberlin WIFE State Co. Ill.
(What Race) (Where Born)
 Husband ---
 Wife --- Widow
 Son --- Daughter of } Ellen T. Chamberlin

Charge to Elite
 Address Lamoni, Ia.
 Order Given by Ellen T. Chamberlin
 How Secured _____
 Date of Funeral Dec. 21 - 1929
 Residence Lamoni, Ia. 224 E. 10th
 Place of Death Residence
 Funeral Services at Residence
 Time of Funeral Service 2:30 P.M.
 Clergyman L. E. Willey
 Certifying Physician J. W. Knapp
 His Residence Lamoni, Ia.
 Number of Burial Certificate _____
 Cause of Death Endocarditis (Aortic)
(Primary) (Secondary)
 Date of Death Dec. 20 - 29 2 A.M.
 Occupation of the Deceased Ret. Farm
 Single or Married Married Religion none
 Date of Birth July 30 1848
 Age 81 Years 4 Months 20 Days
 Name of Father Nathan Chamberlin
 His Birthplace Vermont
 Name of Mother Mauda Lane
(Maiden Name)
 Her Birthplace N.Y.
 Body to be Shipped to Duquap, Iowa
 Size and Style of Casket or Coffin 6 1/2 No. 9450
Emb. doz. Steel Tray
 Manufactured by Port Casket Co.
 Interment at _____ Cemetery

Casket or Coffin	\$	125.00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with _____ Fluid)		25.00
Dressing Body, \$ _____	Shaving, \$ _____	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$ _____	Candles, \$ _____	
Door Badge, \$ _____	Gloves, \$ _____	
Hearse		100.00
Auto Limousines to Cemetery.. @ \$ _____		
Autos to R. R. Station	@ \$ _____	
Other Vehicle Service		
Aeroplane Service		
Death Notices in _____ Newspapers		
<u>Underwear, Pressing, sub.</u>		3.00
<small>(Names of Newspapers)</small>		
Flowers, \$ _____	Rental of Plants, \$ _____	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$ _____	Tent Rental, \$ _____	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$ _____	Minister, \$ _____	
Telegrams and Telephone Charges		14.00
Pall Bearer Service		18.56
<u>express</u>		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page _____	or below	



Lot No. _____
 Grave No. _____
 Section No. _____

To Funeral Charges	Total \$	By Cash	\$
<u>Body shipped to Duquap</u>	<u>11.50</u>	<u>Chariton</u>	<u>Quail Bluffs</u>
<u>Dec 21</u>	<u>on 8.14 P.M.</u>	<u>Express</u>	<u>to Funeral Director</u>
<u>Peter F. Barrett #1372</u>			
<u>Next relatives - Mrs. Vera Jones</u>	<u>Fred Jones</u>	<u>Mrs. Will Ferguson</u>	<u>all of Duquap</u>
Names of Pall Bearers	<u>C. E. Bushman, Ray Ford, Harry Bass, Mar. White</u>		
Names of Lodges	<u>SINGERS - Maria Wells, Henna, Letaan, Lois Barron, Reavis</u>		
Funeral Insurance, \$	Other Insurance, \$		
Funeral Director	<u>H. C. White</u>		
Names of Near Relatives			

RECORD OF FUNERAL

Total No. 1390 Yearly No. 41 Date Dec. 23 1929
 Name of Deceased William Harvey White White Whiteside Co. Mo.
(What Race) (Where Born)

Husband
 Wife Widower
 Son Daughter of

Charge William Harvey Est.
 Address Lamar, Ia.
 Order Given by Chas. Kopp
 How Secured Chg.
 Date of Funeral Dec. 23, 1929
 Residence Am. Exp. Lamar, Ia.
 Place of Death Methodist Hospital, Des Moines
 Funeral Services at Audover, Mo.
 Time of Funeral Service 1:30 P.M.
 Clergyman Beth DeLong
 Certifying Physician Charles G. Gray
 His Residence Des Moines, Ia.
 Number of Burial Certificate
 Cause of Death Cerebral Embolus
(Primary) (Secondary)
 Date of Death Dec. 21 - 29 5:30 P.M.
 Occupation of the Deceased Farmer
 Single or Married Single Religion
 Date of Birth January 27, 1854
 Age 75 Years 10 Months 7 Days
 Name of Father William White
 His Birthplace Denton, Ohio
 Name of Mother Elizabeth White
(Maiden Name)
 Her Birthplace Elkhart, Ind.
 Body to be Shipped to from Des Moines
 Size and Style of Casket or Coffin 1/4 O.K. Slats
 Manufactured by
 Interment at Audover, Mo. Cemetery
 Lot No.
 Grave No.
 Section No.
 Diagram of Lot or Vault SEXTON - Chas. Kopp
 Casket or Coffin \$
 Metallic Lining (State Kind)
 Outside Box (State Kind)
 Grave Vault (State Kind)
 Burial Suit or Dress
 Burial Slippers and Hose
 Engraving Plate
 Embalming Body (with Fluid)
 Dressing Body, \$ Shaving, \$
 Hair Dressing
 Use of Folding Chairs
 " " Candelabrum, \$ Candles, \$
 Door Badge, \$ Gloves, \$
 Hearse 15.00
 Auto Limousines to Cemetery @ \$
 Autos to R. R. Station @ \$
 Other Vehicle Service
 Aeroplane Service
 Death Notices in Newspapers
(Names of Newspapers)
 Flowers, \$ Rental of Plants, \$
 Other Decorations
 Outlay for Lot
 Opening Grave or Vault
 Lining Grave with Evergreen or Muslin
 Matting, \$ Tent Rental, \$
 Use of Lowering Device
 Rental of Vault
 Outlay for Shipping Charges
 Removal Charges
 Incineration
 Personal Services
 Singers
 Church Charges, \$ Minister, \$
 Telegrams and Telephone Charges
 Pall Bearer Service
Cemetery Chgs. - drag 5.00
 Total Footing of Bill \$
 By Amount Paid in Advance \$
 Balance \$
 Entered into Ledger, page or below

To Funeral Charges	Total, \$	By Cash	\$
Shipping, Undertaking			
H. Bach Funeral Home, Des Moines, Ia.			

Names of Pall Bearers
 Names of Lodges SINGERS - Mrs. Ruth DeLong - Mrs. Len Hill, John Bergmann, H. Otto White
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives H. Otto White
Funeral Director

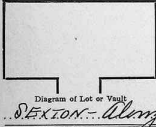
RECORD OF FUNERAL

Total No. 1391..... Yearly No. 1..... Date January 4, 1930

Name of Deceased Jahon Frederick Bright..... White (What Race)
 Husband of..... (Where Born) Linn, Iowa
 Wife---Widow
 Son---Daughter of Sam. Ray & Dale Bright

Charge to Bright, Alley, Thomas
 Address O. O. Thomas
 Order Given by O. O. Thomas
 How Secured Key
 Date of Funeral January 4th 1930
 Residence Linn, Ia No Walnut
 Place of Death Linn, Ia
 Funeral Services Linn, Ia
 Time of Funeral Service 11. A.M.
 Clergyman James Thomas
 Certifying Physician C. E. Seabers
 His Residence Linn, Ia
 Number of Burial Certificate.....
 Cause of Death Influenza, Vent. & Pleu Med. Pneumonia
 Date of Death January 2nd 1930. 11 AM
 Occupation of the Deceased none
 Single or Married..... Religion.....
 Date of Birth Sept. 3, 1927
 Age 2 Years 3 Months 29 Days
 Name of Father Ray Burgess Bright
 His Birthplace Linn, Ia
 Name of Mother Florence Dale Alley
 (Maiden Name)
 Her Birthplace Decorah, Ia
 Body to be Shipped to.....
 Size and Style of Casket or Coffin 3/6 15 5 1/2
W. Enab Don full lid
 Manufactured by The Post Casket Co.
 Interment at Terre Haute Cemetery

Casket or Coffin.....	\$	350.00
Metallic Lining..... (State Kind)		
Outside Box..... (State Kind)		
Grave Vault..... (State Kind)		
Burial Suit or Dress <u>underwear</u>		.50
Burial Slippers and Hose.....		.20
Engraving Plate.....		
Embalming Body (with..... Fluid)		10.00
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
“ “ Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		150.00
Auto Limousine to Cemetery... @ \$.....		
Autos to R. R. Station... @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers..... (Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	620.00
By Amount Paid in Advance.....	\$	
Balance.....	\$	
Entered into Ledger, page..... or below.....		



Lot No.
 Grave No.
 Section No. West Central

To Funeral Charges..... Total, \$		By Cash..... \$

Names of Pall Bearers.....
 Names of Lodges.....
SURVERS - Olin Martinson - James Thomas
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Funeral Director A. Oberkatt
Near Relatives
Compiled by F. J. PEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1392 Yearly No. 4 Date January 20, 1930
 Name of Deceased Daisy Odessa Creveling White Garden Grove, Ia.
 Husband-- (What Race) (Where Born)
 Wife--
 Son--
 Daughter of } Oswell Perry Creveling

Charge to O.P. Creveling
 Address Davis City, Ia.
 Order Given by Oswell Creveling
 How Secured etc.
 Date of Funeral January 20, 1930
 Residence Davis City, Iowa
 Place of Death 1/2 mile So. Davis City
 Funeral Services at M.E. Church, Leominer
 Time of Funeral Service 2:30 P.M.
 Clergyman W.E. Prall E. R. Chamell
 Certifying Physician Jed. Wacker
 His Residence Davis City, Iowa
 Number of Burial Certificate
 Cause of Death Tuber. Pneumonia
 (Primary) (Secondary)
 Date of Death January 18, 1930 1 P.M.
 Occupation of the Deceased Home wife
 Single or Married Married Religion
 Date of Birth Jan. 31, 1883
 Age 35 Years 11 Months 17 Days
 Name of Father Adam G. Gika
 His Birthplace Decatur Co. Iowa
 Name of Mother Ida May Hunter
 (Maiden Name)
 Her Birthplace Decatur Co. Iowa
 Body to be Shipped to
 Size and Style of Casket or Coffin #3002 Silver
Long P. Case
 Manufactured by The P. F. Casket Co.
 Interment at Leominer Pine Hill Cemetery

Casket or Coffin	\$	150.00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		25.00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15.00
Auto Limousines to Cemetery @ \$		
Autos to R. R. Station @ \$		
Other Vehicle Service		
Acroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	50.00
Other Decorations		
Outlay for Lot		29.00
Opening Grave or Vault		80.00
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	243.00
By Amount Paid in Advance	\$	1.00
Balance	\$	242.00
Entered into Ledger, page	or below	

Lot No. 1138
 Grave No. A
 Section No.
 Diagram of Lot or Vault
SECTION Along De Long

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Levi Bonbo, Ches. Lyle, John Bonbo, Lee Percy, John Hartlett, Alona, Lovell
 Names of Lodge SONGERS Mrs. Leamin, John Anthony, Neta, Heger, Mrs. Chauncy
Peasant, Mrs. E. F. Bader
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives W. Otis White
 Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1272 Yearly No. 3 Date January 21 1930

Name of Deceased Nona Addarum Stanley White Audover Mo.
Husband
Wife--Widow (What Race) (Where Born)
Son--Daughter of daughter of Ed & Hazel Stanley

Charge to Edwin Stanley
 Address Audover Mo.
 Order Given by Edw. Stanley
 How Secured _____
 Date of Funeral Jan 21 1930 2:30
 Residence Audover
 Place of Death Audover Mo.
 Funeral Services at L.D.S. Church Audover
 Time of Funeral Service 2:30
 Clergyman W.E. Prall
 Certifying Physician L.P. Reed
 His Residence Davis City, Ia.
 Number of Burial Certificate _____
 Cause of Death Pneumonia
(Primary) (Secondary)
 Date of Death January 19 1930
 Occupation of the Deceased none
 Single or Married Single Religion none
 Date of Birth Feb 16 1927
 Age 2 Years 1 Months 3 Days
 Name of Father Edwin Stanley
 His Birthplace Kewanee, Ill
 Name of Mother Hazel Mae Lewin
(Maiden Name)
 Her Birthplace Griffin, Iowa
 Body to be Shipped to _____
 Size and Style of Casket or Coffin 3/6 No. 150
Wk. Emb. Lambskin
 Manufactured by The Potz Casket Co.
 Interment at Audover Mo. Cemetery

Casket or Coffin	\$ <u>45.00</u>
Metallic Lining	(State Kind)
Outside Box	(State Kind)
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	<u>4/2</u>
Engraving Plate	
Embalming Body (with _____ Fluid)	<u>1/2</u>
Dressing Body, \$ _____ Shaving, \$ _____	
Hair Dressing	
Use of Folding Chairs	
“ “ Candelabrum, \$ _____ Candles, \$ _____	
Door Badge, \$ _____ Gloves, \$ _____	
Hearse	<u>1.0</u>
Auto Limousines to Cemetery. @ \$ _____	
Autos to R. R. Station. @ \$ _____	
Other Vehicle Service	
Aeroplane Service	
Death Notices in _____ Newspapers	
(Names of Newspapers)	
Flowers, \$ _____ Rental of Plants, \$ _____	<u>5.00</u>
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	<u>4/2</u>
Matting, \$ _____ Tent Rental, \$ _____	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$ _____ Minister, \$ _____	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	
\$ <u>65.00</u>	
By Amount Paid in Advance \$ _____	
Balance \$ _____	
Entered into Ledger, page _____ or below	

Lot No. _____
 Grave No. _____
 Section No. _____
 Diagram of Lot or Vault
SEXTON W.E. Fordick

To Funeral Charges Total, \$	By Cash \$

Names of Pall Bearers A. G. Galt
 Names of Lodges SINGERS - Mr. Lewis Hill - Mr. Bert Q. Long - John Berganone - F. Otis White
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Near Relatives F. Otis White
Funeral Director
Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1394 Yearly No. 4 Date January 27 1930
 Name of Deceased Josephine Billing Hall (What Race) White (Where Born) Crossville, Iowa
 Husband... Robert Hall
 Wife...
 Son...
 Daughter...

Charge to Robert Hall
 Address W. Hillston, Iowa
 Order Given by Mr. E. W. Beck
 How Secured city
 Date of Funeral January 27, 1930
 Residence W. Hillston, Ringgold Co., Ia.
 Place of Death Residence
 Funeral Services at M. E. Church, Lamona
 Time of Funeral Service 2:30 P.M.
 Clergyman J. E. Clark
 Certifying Physician C. M. Walker
 His Residence Hillston, Ia.
 Number of Burial Certificate...
 Cause of Death Acute Dehydration heart
 (Primary) (Secondary)
 Date of Death January 24, 1930 5 P.M.
 Occupation of the Deceased at home
 Single or Married Married Religion L.D.S.
 Date of Birth January 29, 1864
 Age 65 Years 11 Months 25 Days
 Name of Father Joseph Billing
 His Birthplace N.Y.
 Name of Mother Mary Ann Hutchcroft
 (Maiden Name)
 Her Birthplace England
 Body to be Shipped to...
 Size and Style of Casket or Coffin 1/3 Sil. Emb.
Plus L. Act. # 300.0
 Manufactured by The Pot. Casket Co.
 Interment at Lamona, Rose Hill, Cemetery

Lot No. 1574
 Grave No. 1
 Section No. 1
 Diagram of Lot or Vault
SIXTON Alma (De Long)

Casket or Coffin	\$ 150
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault <u>Clark</u> (State Kind)	100
Burial Suit or Dress	12 50
Burial Slippers and Hose	2 50
Engraving Plate	
Embalming Body (with Fluid)	20
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	15
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Acroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$ Rental of Plants, \$	7 50
Other Decorations	
Outlay for Lot <u>1574</u>	40
Opening Grave or Vault	10
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ 367 50
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page or below	

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Ed Scott Perry Scott, Rev. Murray, John Smith, Irvin Danks, N. Heister
 Names of Lodges SUPERS - Arthur Okerman, Gertrude Walden Helen Anthony, Directors
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives (H. Otis White, Rollin S. White, Directors)
 Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1395 Yearly No. 5 Date Feb. 7 1930

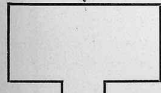
Name of Deceased Margaret Ackersley White Chicago Ill.
(What Race) (Where Born)
 Husband James E. Thelma Ackersley
Wife
Son Daughter of

Charge to Albert L. Ackersley
 Address Des. Moines, Ia.
 Order Given by 609 Franklin St.
 How Secured Paid
 Date of Funeral Feb. 7 1930 1:30 P.M.
 Residence Chicago Ill.
 Place of Death Chicago Ill.
 Funeral Services M. & M. of Des Moines Res.
 Time of Funeral Service 1:30 P.M.
 Clergyman Rev. D. T. Williams
 Certifying Physician.

His Residence.
 Number of Burial Certificate.
 Cause of Death.
(Primary) (Secondary)
 Date of Death January 29 - 1930
 Occupation of the Deceased.

Single or Married Single Religion -
 Date of Birth January 27 - 1930
 Age Years Months 7 Days
 Name of Father James Ackersley
 His Birthplace.
 Name of Mother Thelma
(Maiden Name)

Her Birthplace.
 Body to be Shipped to from Chicago to Des Moines, Ia. by Auto to Danmon
 Size and Style of Casket or Coffin.
 Manufactured by.
 Interment at Lamar, Ia. Rose Hill Cemetery



Lot No. 723
 Grave No.
 Section No. 1
 Diagram of Lot or Vault
SEXTON = Alvaro De Long

Casket or Coffin.....	\$	
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with Fluid).....		
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		
Auto Limousines to Cemetery @ \$.....		2.50
Autos to R. R. Station @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		
<small>(Names of Newspapers)</small>		
Flowers, \$..... Rental of Plants, \$.....		
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		
Lining Grave with Evergreen or Muslin.....		3.50
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		6.50
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....		
By Amount Paid in Advance.....		3.50
Balanced.....		9.00
Entered into Ledger, page..... or below.....		

To Funeral Charges..... Total, \$							By Cash..... \$	

Names of Pall Bearers.....
 Names of Lodges SINGERS - Helan Anthony - Emory Anthony - Maria Wells
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives A. Otto White - Rollin S. White - Directors
Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1397 Yearly No. 7 Date March 5 1930

Name of Deceased William La Seur Onida Co. New York
(What Race) (Where Born)

Husband---
Wife---Widow
Son---Daughter of } Sarah Jane La Seur Deceased 1928

Charge to Mrs. Charles Balautyne
Address Lamoni, Ia.

Order Given by Mrs. Charles Balautyne
How Secured Chg.

Date of Funeral March 4th 1930
Residence Lamoni, Iowa

Place of Death Lamoni, Iowa
Funeral Services at Lamoni and Moorhead

Time of Funeral Service 3:30-10:30 AM 3:4-2 PM
Clergyman Carl Balautyne

Certifying Physician J. W. King
His Residence Lamoni, Ia.

Number of Burial Certificate
Cause of Death Diabetic Mellitus
(Primary) (Secondary)

Date of Death March 1st 1930 10 AM
Occupation of the Deceased RET. FARMER

Single or Married Widow Religion LDS

Date of Birth January 16 1856
Age 74 Years 1 Months 16 Days

Name of Father Amosa La Seur
His Birthplace France

Name of Mother Ardama
(Maiden Name)

Her Birthplace France
Body to be Shipped to Moorhead Ia.

Size and Style of Casket or Coffin 6/3 Slate
Steel Tray No. 4200 C. Rubens Int.

Manufactured by The Patent Casket Co
Interment at Moorhead Ia. Cemetery

Lot No. _____
Grave No. _____
Section No. _____

Flowers, \$ _____ Rental of Plants, \$ 1.50
Other Decorations _____
Outlay for Lot _____
Opening Grave or Vault _____ 6.00
Lining Grave with Evergreen or Muslin _____
Matting, \$ _____ Tent Rental, \$ _____
Use of Lowering Device _____
Rental of Vault _____
Outlay for Shipping Charges _____
Removal Charges _____
Incineration _____
Personal Services _____
Singers _____
Church Charges, \$ _____ Minister, \$ _____
Telegrams and Telephone Charges _____
Pall Bearer Service _____ flag 1.25

Total Footing of Bill \$ 447.15
By Amount Paid in Advance \$ _____
Balance \$ 447.15

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To Funeral Charges Total, \$ _____
Informant Mrs. Charles Balautyne

By Cash \$ _____

Body taken to Moorhead Ia. March 3rd 12:05 PM by Funeral

Names of Pall Bearers LAMONI - Alvin Balautyne for Huffman Fred Balautyne - Orin Balautyne
Alma Almonson - Robert Balautyne

Names of Lodges MOORHEAD - American Legion, No. 5
SILVERS - MOXIS, WELLS - EMILY ANTHONY - MONROE HILLS - VREDEBURG

Lodge Insurance, \$ _____ Other Insurance, \$ Grant - Loss Paid

Names of Near Relatives DIRECTOR - A. Otis White

Diagram of Lot or Vault

SEXTON C. M. Dutcher

Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1929.

RECORD OF FUNERAL

Total No. 1398 Yearly No. 8 Date March 6, 1930
 Name of Deceased William Mitchell Slauter, (White) Gene Slauter, Indiana
 (What Race) (Where Born)

Husband...
 Wife...Widow
 Son...Daughter
Married
 Charge to Deed & Edward Slauter

Address Edward T. Brat Slauter

Order Given by Edward T. Brat Slauter

How Secured

Date of Funeral March 6, 1930

Residence Decatur Co. Iowa

Place of Death Edward Slauter, Decatur Co.

Funeral Services at M. E. Church - Lamoni, Iowa

Time of Funeral Service 2 P.M.

Clergyman Rev. E. R. Blumell

Certifying Physician D. A. Dr. King

His Residence Lamoni, Iowa

Number of Burial Certificate

Cause of Death Leucostoma of Liver
 (Primary) (Secondary)

Date of Death March 4, 1930

Occupation of the Deceased Farmer

Single or Married Married Religion

Date of Birth May 11, 1852

Age 77 Years 9 Months 23 Days

Name of Father William Slauter

His Birthplace N.K.

Name of Mother Eleanor Murgrave
 (maiden Name)

Her Birthplace N.K.

Body to be Shipped to

Size and Style of Casket or Coffin 3000 - 1/2 C.

Manufactured by Rob. Casket Co.

Interment at Lamoni - Rose Hill Cemetery

Diagram of Lot or Vault
 Lot No. 973 S.
 Grave No.
 Section No.
S.E. 1/4 - Lou De Long

Casket or Coffin.....	\$	150.00
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	xx
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		77.50
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with <u>Supernat.</u> Fluid)		25.00
Dressing Body, \$.....	Shaving, \$.....	
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$.....	Candles, \$.....	
Door Badge, \$.....	Gloves, \$.....	
Hearse.....		16.00
Auto Limousines to Cemetery..@ \$.....		1x
Autos to R. R. Station.....@ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in.....	Newspapers.....	
(Names of Newspapers)		
Flowers, \$.....	Rental of Plants, \$.....	4.00
Other Decorations.....		
Outlay for Lot..# <u>973 S. & 977 S.</u>		29.00
Opening Grave or Vault.....		8.00
Lining Grave with Evergreen or Muslin.....		
Matting, \$.....	Tent Rental, \$.....	
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		7x
Singers.....		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	274.50
By Amount Paid in Advance.....	\$	78
Balance.....	\$	196.50
Entered into Ledger, page.....	or below.....	

To Funeral Charges.....	Total, \$.....	By Cash.....	\$.....

Names of Pall Bearers E. O. Jay, John Norman, Wiley Miller, Cassac Norman Sr., Cassac Norman Jr., Gene Slauter
 Names of Lodges W.M.A.E.A. - Edward Slauter, Margaret Slauter, Arthur Norman, M. D. Smith
 Lodge Insurance \$..... Other Insurance, \$..... W.M.A.E.A. - Slauter
 Names of Near Relatives A. W. Slauter

RECORD OF FUNERAL

Total No. 1399 Yearly No. 9 Date April 8, 1930
 Name of Deceased Amelia Josephine E. Elyson, White, Lebanon, Ill.
(What Race) (Where Born)
 Husband - O. Elyson, O. E.
 Wife - Widow
 Son - Daughter -

Charge to Amelia E. Elyson, Estate
 Address
 Order Given by Daughters
 How Secured
 Date of Funeral April 8, 1930
 Residence Raymond, Iowa
 Place of Death St. Ann's, Leavenworth, Ia.
 Funeral Services at Mrs. E. M. Hayes residence
 Time of Funeral Service 2:30 P.M.
 Clergyman W. E. H. Kelly; Dave Keown, Asst.
 Certifying Physician D. Q. Neer
 His Residence Leavenworth, Iowa
 Number of Burial Certificate
 Cause of Death Acute Myocardial Infarction
(Primary) (Secondary)
 Date of Death April 8, 1930
 Occupation of the Deceased At home
 Single or Married Married Religion W. M.
 Date of Birth February 4, 1862
 Age 68 Years 2 Months 1 Days
 Name of Father Thomas Anderson
 His Birthplace Norway
 Name of Mother N.K.
(Maiden Name)
 Her Birthplace Norway
 Body to be Shipped to

Casket or Coffin # <u>40 So State</u>	\$ <u>200 00</u>
Metallic Lining.....	
Outside Box.....	XX
Grave Vault.....	
Burial Suit or Dress.....	
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	\$ <u>25 00</u>
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	XX
“ “ Candelabrum, \$..... Candles, \$.....	
Door Badge, \$..... Gloves, \$.....	
Hearse.....	\$ <u>15 00</u>
Auto Limousines to Cemetery @ \$.....	XX
Autos to R. R. Station @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
<small>(Names of Newspapers)</small>	
Flowers, \$..... Rental of Plants, \$.....	\$ <u>65 00</u>
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	\$ <u>8 00</u>
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	XX
Singers.....	XX
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	\$ <u>1 00</u>
Pall Bearer Service.....	
<u>Special tax</u>	\$ <u>1 0</u>
Total Footing of Bill.....	\$ <u>262 00</u>
By Amount Paid in Advance.....	\$.....
Balance.....	\$ <u>15 70</u>
Entered into Ledger, page..... or below.....	

Size and Style of Casket or Coffin
#40 So State - Blue
 Manufactured by Reich Cracker Co.
 Interment at Box Hill Cemetery
 Diagram of Lot or Vault:
 Lot No. 460
 Grave No. 3
 Section No.
SEXTON - LOUZE PELONR.

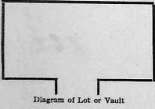
	To Funeral Charges..... Total, \$		By Cash..... \$

Names of Pall Bearers Paul Lyinger, Alvin Milgarden, Walter Hayes, Dave Hansen, Orville Milgarden, Lewis Kelsburgh
 Names of Lodgers S. C. DEARS - WANDA DEARY, THERESA STEMA, - Priest: Leona Hopkins
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near-Relatives A. Oke White - Rollen J. White

RECORD OF FUNERAL

Total No. 1400 Yearly No. 10 Date April 9, 1930
 Name of Deceased Ray Edward Mactin (What Race) White (Where Born) Goldfield, Iowa
 Residence Decatur, Iowa
 Charge to Floyd Ed Co. Mactin

Address Samoa, Iowa
 Order Given by Floyd Mactin
 How Secured _____
 Date of Funeral April 9, 1930
 Residence Decatur, Iowa
 Place of Death Res.
 Funeral Services at Res.
 Time of Funeral Service 2:30 P.M.
 Clergyman A. Cahanekian
 Certifying Physician D. M. King
 Residence Samoa, Iowa
 Number of Burial Certificate _____
 Cause of Death Cholera Poisoning (Rob. Paste)
 (Primary) (Secondary)
 Date of Death April 5, 1930
 Occupation of the Deceased _____
 Single or Married Single Religion _____
 Date of Birth Sept 14, 1926
 Age 3 Years _____ Months 31 Days _____
 Name of Father Ernest T. Lloyd Mactin
 His Birthplace Samoa, Iowa
 Name of Mother Eva Ray S. White
 (Maiden Name)
 Her Birthplace Goldfield, Iowa
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
105 - 40
 Manufactured by _____
 Interment at Rock Hill Cemetery
 Lot No. 209
 Grave No. 4
 Section No. _____



Casket or Coffin	<u>40</u>	\$ <u>45.00</u>
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	<u>XX</u>
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		<u>25.00</u>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		<u>XX</u>
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<u>5.00</u>
Auto Limousines to Cemetery @ \$		
Autos to R. R. Station @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	<u>3.50</u>
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<u>5.00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<u>XX</u>
Singers		<u>XX</u>
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pal Bearer Service		
Total Footing of Bill		\$ <u>63.50</u>
By Amount Paid in Advance		\$ <u>5</u>
Balance		\$ <u>18.50</u>
Entered into Ledger, page		_____ or below _____

To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearers _____
 Names of Lodges _____
SIDEBERS - Mrs. Jess Semler, Mrs. G. H. Selton
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Funeral Directors A. Otis White, R. J. White

RECORD OF FUNERAL

Total No. 1401 Yearly No. 11 Date April 11, 1930
 Name of Deceased Lula Ann Carr White Davis City, Iowa
 (What Race) (Where Born)
 Husband---Wife---Widow } Geo Carr
 Son---Daughter of }

Charge to Mrs. Alfred Lovel
 Address Lammie, Iowa
 Order Given by John Jones
 How Secured
 Date of Funeral April 11, 1930
 Residence Ord Monks, Iowa
 Place of Death Meigs Hospital, Ord Monks
 Funeral Services at Lammie, Iowa (C.O.S. Church)
 Time of Funeral Service 2:20 P.M.
 Clergyman W. C. Jeffrey; Sam Bell, asst.
 Certifying Physician J. W. O'Neil
 His Residence Ord Monks, Iowa
 Number of Burial Certificate
 Cause of Death Arteriosclerosis - Bright Disease
 (Primary) (Secondary)
 Date of Death April 8, 1930
 Occupation of the Deceased at home
 Single or Married Married Religion F. O. S.
 Date of Birth Oct 28, 1885
 Age 44 Years 5 Months 10 Days
 Name of Father Alfred Lovel
 His Birthplace England
 Name of Mother Sarah Menick
 (Maiden Name)
 Her Birthplace Burlington, Iowa
 Body to be Shipped to F. O. S.
at last White funeral home Ord Monks, Ia.
 Size and Style of Casket or Coffin
 Manufactured by Lammie - Ross Hill
 Interment at Lammie - Ross Hill Cemetery

Casket or Coffin.....	\$	
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$.....	Shaving, \$.....	
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$.....	Candles, \$.....	
Door Badge, \$.....	Gloves, \$.....	
Hearse.....	<u>2 tubes</u>	<u>15.00</u>
Auto Limousines to Cemetery @ \$.....		<u>XX</u>
Autos to R. R. Station..... @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		
(Names of Newspapers)		
Flowers, \$.....	Rental of Plants, \$.....	
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		<u>8.00</u>
Lining Grave with Evergreen or Muslin.....		
Matting, \$.....	Tent Rental, \$.....	
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		<u>XX</u>
Singers.....		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges.....		
Pal Bearer Service.....		
Total Footing of Bill.....	\$	<u>22.00</u>
By Amount Paid in Advance.....	\$	
Balance.....	\$	<u>22.00</u>
Entered into Ledger, page.....	or below	

Lot No. 369
 Grave No. 3
 Section No.
 Diagram of 160 or Vault
F. O. S. - Largo Dr. Long

To Funeral Charges.....	Total, \$										
By Cash.....	\$										

Names of Pall Bearers Sam Hill, Ted Hill, Fred Rauch, James Schaffell, Mack Bell, Leo Seaker
 Names of Lodges P. I. O. O. F. S. - Lerma Silenlyne, Dr. A. W. Brown, Brandon Deby +
 Lodge Insurance, \$..... Other Insurance, \$.....
 Funeral Director A. O. White and R. D. White
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1402 Yearly No. 12 Date April 17 1930
 Name of Deceased Marietta Walker White Wilkesboro, N.C.
Husband (What Race) (Where Born)
Wife Widow Samuel Faye Walker sec.
Son Daughter of

Charge to A. L. Berkeley
 Address Des Moines, Ia.
 Order Given by Walker Davis
 How Secured City
 Date of Funeral April 17, 1930
 Residence Lebanon, Ia.
 Place of Death Brea, Orange Co., Calif.
 Funeral Services at Lamar, Santa C. Tabern
 Time of Funeral Service 11:30 P.M.
 Clergyman James H. Davis, F. A. Smith
 Certifying Physician C. E. Elson, Currier
 His Residence Brea, Calif.
 Number of Burial Certificate
 Cause of Death Apoplexy - Myocarditis
(Primary) (Secondary)
 Date of Death April 12, 11:40 P.M. 1930
 Occupation of the Deceased At Home
 Single or Married Widow, Religion L.O.S.
 Date of Birth April 10 - 1884
 Age 46 Years 0 Months 2 Days
 Name of Father Currier Hodges
 His Birthplace Ohio
 Name of Mother Lucy Clark
(Maiden Name)
 Her Birthplace Herrnont
 Body to be Shipped from Brea, Calif.
Sept. 13, 1930
 Size and Style of Casket or Coffin Winged cap
Dark stain med. tray
 Manufactured by
 Interment at Lamar, Ia. Rose Hill Cemetery

Casket or Coffin	.....	\$
Metallic Lining	.....
<small>(State Kind)</small>		
Outside Box	.....
<small>(State Kind)</small>		
Grave Vault	.....
<small>(State Kind)</small>		
Burial Suit or Dress	.....
Burial Slippers and Hose	.....
Engraving Plate	.....
Embalming Body (with	.....	Fluid)
Dressing Body, \$	.....	Shaving, \$
Hair Dressing	.....
Use of Folding Chairs	.....
" " Candelabrum, \$	.....	Candles, \$
Door Badge, \$	.....	Gloves, \$
Hearse	.....
Auto Limousines to Cemetery.. @ \$	.....
Autos to R. R. Station @ \$	
Other Vehicle Service	.....
Aeroplane Service	.....
Death Notices in	.....	Newspapers
<small>(Name of Newspapers)</small>		
Flowers, \$	.....	Rental of Plants, \$
Other Decorations	.....
Outlay for Lot	.....
Opening Grave or Vault	.....
Lining Grave with Evergreen or Muslin	.....
Matting, \$	.....	Tent Rental, \$
Use of Lowering Device	.....
Rental of Vault	.....
Outlay for Shipping Charges	.....
Removal Charges	.....
Incineration	.....
Personal Services	.....
Singers	.....
Church Charges, \$	.....	Minister, \$
Telegrams and Telephone Charges	.....
Pall Bearer Service	.....
Total Footing of Bill	.....	\$
By Amount Paid in Advance	.....	\$
Balance	.....	\$
Entered into Ledger, page	.....	or below

Lot No. 310-314
 Grave No. 4 on east
 Section No.
 Diagram of Lot or Vault
SEXTON - Chicago, Old Long

To Funeral Charges	Total, \$	By Cash	\$
Shipping Undertaker		Mrs. Aulay G. Suters	
		411 N. Spadra	
		Fullerton, California	

Names of Pall Bearers W. A. Hopkins, Geo. H. Davis, Will. Francis, F. M. Webb, Paul Anderson
 Names of Lodges SINGERS - F. Cappella, E. Horn, U. E. Hayer
 FLORAL BEARERS Jennie Harrison, A. S. Anderson
 Lodge Insurance, \$
 Other Insurance, \$
 Names of Funeral Director H. Otis White - J. D. White
Best Undertaker
 Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1922.

RECORD OF FUNERAL

Total No. 1403 Yearly No. 13 Date April 28 1930

Name of Deceased Paut. E. Bergensen White
Husband--
Wife--Widow
Son--Daughter of { Widow (What Race) (Where Born)

Charge Mrs. Clarence Forman
Address Independence, Mo.
Order Given by Mrs. Clarence Forman
How Secured
Date of Funeral April 27 1930
Residence Independence, Mo.
Place of Death Independence, Mo. Southern
Funeral Services at W.S. Church, Laman, Ia.
Time of Funeral Service 2:30
Clergyman L. S. Hallaway, J. P. De Loaf
Certifying Physician John P. Green
His Residence Independence, Mo.

Number of Burial Certificate
Cause of Death Semiple Debility
(Primary) (Secondary)
Date of Death Apr. 24 1930 10:30 AM
Occupation of the Deceased
Single or Married Widow Religion L. O. S.

Date of Birth
Age 74 Years Months Days
Name of Father
His Birthplace
Name of Mother (Maiden Name)

Her Birthplace
Body to be Shipped from Independence, Mo.
Apr. 26 10:00 a.m.
Size and Style of Casket or Coffin

Manufactured by
Interment at Rose Hill Cemetery

Diagram of Lot or Vault
SEXTON along De Long
Lot No. 513
Grave No. 4
Section No.

Casket or Coffin	\$	
Metallic Lining (State Kind)		
Outside Box (State Kind)		
Grave Vault (State Kind)		
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		25.00
Auto Limousines to Cemetery, @ \$		x x
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Acroplane Service		
Death Notices in Newspapers (Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		10.00
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page	or below	35.00

To Funeral Charges	Total, \$	By Cash	Net \$ 25.00
Mrs. Hilda Forman 701 Indiana av. F.C.M.O. Shipping Undertaker - J. J. Latta 701 2022 v. Mo. Independence Mo.			

Names of Pall Bearers E. Oving White, Fred Condit, J. C. Lumberg, Walter Meyer, J. M. Linsinger, Fred Linsinger
Names of Lodge SINCERS Lionel Pratt, Linn Damm, Bertha Larre, Nathan Keller
FLORA, DEARERS E. Louise White, Ada Linsinger
Lodge Insurance, \$
Names of Near Relatives F. Oving White Other Insurance, \$
General Director
Names of Near Relatives
*implied by P. J. FEINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1404 Yearly No. 14 Date May 5 1930
Name of Deceased Nancy Examinias Adkins White Monticello Indiana
Husband James Buchanan Adkins (What Race) (Where Born)

Charge to
Address Lillian K. Keith
Order Given by
How Secured
Date of Funeral May 5, 1930
Residence Davie City Iowa
Place of Death Davie
Funeral Services at Church of Christ Davie City
Time of Funeral Service 2:30 P.M.
Clergyman A. O. Hoar
Certifying Physician L. P. Reed
His Residence Davie City Iowa
Number of Burial Certificate
Cause of Death Cancer of rectum, liver & stomach
Date of Death May 2, 1930
Occupation of the Deceased Ah. Lumber
Single or Married Widowed Religion
Date of Birth Jan 18, 1853
Age 77 Years 3 Months 19 Days
Name of Father Joshua Gilpin
His Birthplace
Name of Mother Martha Day (Maiden Name)
Her Birthplace Morgan Co. Indiana
Body to be Shipped to
Size and Style of Casket or Coffin 4100 State B.C.
Manufactured by Lohr, English Co.
Interment at Davie City Iowa Cemetery

Table with columns for item names, prices, and totals. Items include Casket or Coffin (\$3.50), Burial Suit or Dress (1.00), and various other services totaling \$9.29.50.

Diagram of Lot or Vault S.E.X. to 4 - H. B. Davis

Summary table with columns for To Funeral Charges, Total, and By Cash.

Names of Pall Bearers Earl Dent, Avid Hancock, Floyd Thompson, Vermin Marchetta, Leslie Cummings, Alf. Mandelke
Lodge Insurance \$ Other Insurance \$
Names of Near Relatives R. O. S. White

RECORD OF FUNERAL

Total No. 1405 Yearly No. 15 Date May 6 1930

Name of Deceased Francis Ellen Brand - White (What Race) Atlanta Mich (Where Born)
Husband--- Ruby L. Brand
Wife---Widow
Son---Daughter of

Charge to Ruby Brand
Address Lamoni
Order Given by Ruby Brand
How Secured
Date of Funeral May 6, 1930
Residence 203 N. Gordon St., Lamoni
Place of Death Iowa
Funeral Services at Rev.
Time of Funeral Service 7:30 P.M.
Clergyman W. E. Prall; A. J. Young
Certifying Physician H. M. Gille
His Residence Lamoni, Iowa
Number of Burial Certificate
Cause of Death Flu - High St. Pressure (Primary) (Secondary)
Date of Death May 4, 1930
Occupation of the Deceased Milliner
Single or Married Widow Religion
Date of Birth August 5, 1853
Age 76 Years 6 Months 29 Days
Name of Father Samuel Bailey
His Birthplace Virginia
Name of Mother Helena Bark (Maiden Name)
Her Birthplace Vermont
Body to be Shipped to
Size and Style of Casket or Coffin 1360 Sh. Pluch - State
Manufactured by Mo-Kan Mortician Supply Co.
Interment at Rae Hill Cemetery

Casket or Coffin	<u>1360 Sh. Pl. state</u>	\$ <u>750.00</u>
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	<u>Lona Ma Hill</u>	<u>115.00</u>
Burial Suit or Dress	(State Kind)	
Burial Slippers and Hose		<u>3.50</u>
Engraving Plate		
Embalming Body (with..... Fluid)		<u>25.00</u>
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing		
Use of Folding Chairs		<u>1.50</u>
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		<u>5.00</u>
Hearse		<u>1.00</u>
Auto Limousines to Cemetery @ \$.....		<u>5.00</u>
Autos to R. R. Station @ \$.....		
Other Vehicle Service		
Aeroplane Service		
Death Notices in..... Newspapers	(Names of Newspapers)	
Flowers, \$..... Rental of Plants, \$.....		<u>26.00</u>
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<u>10.00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<u>1.00</u>
Singers		<u>1.00</u>
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges		
Pall Bearer Service		

Total Footing of Bill \$ 1017.50
By Amount Paid in Advance \$ 10
Balance \$ 1007.50
Entered into Ledger, page..... or below

Diagram of Lot or Vault
[]
Sexton HONZO DEHONG

Lot No. 104
Grave No. 4
Section No.

To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearers My Johnson, Art Lane, Art Barnwell, Otis Spurgeon, Shelta Hager, Harold Drake
Names of Lodges SINCERS - Luluie Walden, Maggie Anthony, Roy Leavelle, Orestis Kunkle
Lodge Insurance, \$..... Other Insurance, \$.....
Funeral Director Ruben S. Smith
Names of News-Relatives

RECORD OF FUNERAL

Total No. *1406* Yearly No. *16* Date *May 8, 1930*

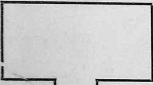
Name of Deceased *John E. Hedlund* (What Race) *White* (Where Born) *Shaping, Sweden*
Husband Wife Son Daughter
J. Minnie Hansen Hedlund

Charge to *Santa Home*
Address
Order Given by
How Secured

Date of Funeral *May 8, 1930*
Residence *Lamar, Iowa*
Place of Death *Iowa*
Funeral Services at *Santa Home*
Time of Funeral Service *2:30 P.M.*
Clergyman *J. O. Strat*
Certifying Physician *E. G. Dunning*
His Residence *Lamar, Iowa*
Number of Burial Certificate
Cause of Death *Acute Myocardial Infarction*
(Primary) (Secondary)

Date of Death *May 7, 1930*
Occupation of the Deceased *Ministry*
Single or Married Religion *R. C.*
Date of Birth *Aug 21, 1841*
Age *88* Years *9* Months *16* Days
Name of Father *August Hedlund*
His Birthplace *Sweden*
Name of Mother *Bridget Hammell*
(Maiden Name)
Her Birthplace *Sweden*
Body to be Shipped to

Size and Style of Casket or Coffin *Tol. Sh. Crepe*
Manufactured by *M. K. Co.*
Interment at *R.R. Hill* Cemetery



Lot No. *541*
Grave No. *3*
Section No.

Diagram of Lot or Vault
SEXTON - LOUZO DE LOUZO

Casket or Coffin	<i>Tol. Sh. Crepe</i>	\$ <i>55.00</i>
Metallic Lining	(State Kind)	<i>X</i>
Outside Box	(State Kind)	<i>X</i>
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		<i>5.00</i>
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<i>5.00</i>
Auto Limousines to Cemetery @ \$		
Autos to R. R. Station @ \$		
Other Vehicle Service		
Acroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<i>1.00</i>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<i>X</i>
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill \$ <i>75.00</i>		
By Amount Paid in Advance \$ <i>0</i>		
Balance \$ <i>75.00</i>		
Entered into Ledger, page or below		

To Funeral Charges	Total, \$	By Cash	\$
.....			
.....			
.....			
.....			
.....			
.....			
.....			
.....			

Names of Pall Bearers *James Thomas, J. M. Sullivan, Frank Kott, Dave Kover, Joe Bush, Nephil Larson*
Names of Lodges *S. M. S. L. - Lois Dornos, Lois Prall, Lois Garner, Gertrude Kelly, Lucy Ruppinger*
Lodge Insurance, \$ Funeral Director *H. H. H. H.* Other Insurance, \$
Names of Near Relatives: *H. H. H. H.*

RECORD OF FUNERAL

Total No. 1410 Yearly No. 20 Date July 20, 1930
 Name of Deceased. Roscoe C. Willey (What Race) White (Where Born) Lova
 Husband--
 Wife--Widow
 Son--Daughter of { Lillie L. Ann Willey

Charge to.....
 Address M. Central Iowa
 Order Given by Lillie L. Willey
 How Secured.....
 Date of Funeral July 20, 1930
 Residence Mohrland Iowa
 Place of Death Deering Hosp., Omaha, La.
 Funeral Services at Lemoor, La.; Saints Church
 Time of Funeral Service 2:30 P. M.
 Clergyman J. B. Davis; Ark. Lane, Asst.
 Certifying Physician J. S. Deering
 His Residence Omaha, La.
 Number of Burial Certificate.....
 Cause of Death C. Arney, C. m. l. l. i. v. a.
 Date of Death July 17, 1930
 Date of the Deceased L. Ann
 Single or Married Married Religion.....
 Date of Birth Aug. 1, 1881
 Age 48 Years 16 Months 16 Days
 Name of Father L. E. Willey
 His Birthplace W. Va.
 Name of Mother.....
 Her Birthplace.....
 Body to be Shipped to.....
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Lemoor, Rock Hill Cemetery

Casket or Coffin.....	\$	
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$.....	Shaving, \$.....	
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$.....	Candles, \$.....	
Door Badge, \$.....	Gloves, \$.....	
Hearse.....		<u>15 00</u>
Auto Limousines to Cemetery @ \$.....		
Autos to R. R. Station @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers	(Names of Newspapers)	
Flowers, \$.....	Rental of Plants, \$.....	
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		<u>8 00</u>
Lining Grave with Evergreen or Muslin.....		
Matting, \$.....	Tent Rental, \$.....	
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		<u>10 00</u>
Singers.....		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
<hr/>		
Total Footing of Bill.....	\$	<u>73 98</u>
By Amount Paid in Advance.....	\$	<u>8</u>
Balance.....	\$	<u>75 00</u>
Entered into Ledger, page.....	or below	

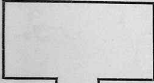


Diagram of Lot or Vault

Lot No. 715
 Grave No. 2
 Section No.....

To Funeral Charges.....	Total, \$				
				By Cash.....	\$

Names of Pall Bearers Walter Gray, Jr., J. A.uffman, Phil Roberts, Carl Ballentine, James Schofield, Russ Vandeykate
 Names of Lodges F. O. Moss, J. W. Ballentine, J. W. Smith, J. W. Williams
SINGERS - Lina Battle, Roy Christie, Lavin S. Cold, Jennie Ballentine
 Lodge Insurance \$..... Director Max White
 Names of Near Relatives J. S. Stewards, Asst.
 Other Insurance, \$.....

RECORD OF FUNERAL

Total No. 1411 Yearly No. 21 Date July 23 1930

Name of Deceased Adeline D. Holt (Neuf.) White Decatur Co., Iowa
Wife--Widow (What Race) (Where Born)
Husband-- Calvin D. Holt
Son--Daughter of Calvin & Fannie D. Holt

Charge to Calvin D. Holt
Address Hammer, Ia.
Order Given by Calvin D. Holt
How Secured _____
Date of Funeral No Service, Interment 7/23
Residence Wainwright Exp. Decatur Co., Ia.
Place of Death Boon Dead.
Funeral Services at none
Time of Funeral Service _____

Clergyman _____
Certifying Physician D. W. G. Sibbey
His Residence Jammie, Iowa
Number of Burial Certificate _____
Cause of Death Acute cephalue
Date of Death Boon Dead - July 23, 1930
Occupation of the Deceased none

Single or Married single Religion _____
Date of Birth July 23, 1930
Age 0 Years 0 Months 0 Days
Name of Father Calvin D. Holt, D. Holt
His Birthplace West Ny, Ia.
Name of Mother Fannie D. Holt
Her Birthplace Iowa - Mo. Lynn, Iowa
Body to be Shipped to _____

Size and Style of Casket or Coffin 19
Manufactured by Mo. Han
Interment at Lilly Cemetery

Lot No. _____
Grave No. _____
Section No. _____
Diagram of Lot or Vault
SE 4th - Long D & Long

Casket or Coffin	\$ <u>15</u> 00
Metallic Lining	(State Kind)
Outside Box	(State Kind) <u>xx</u>
Grave Vault	(State Kind)
Burial Suit or Dress	(State Kind)
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	<u>1.50</u>
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in _____ Newspapers	
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	<u>3.50</u>
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
<u>Star Marker</u>	<u>1.00</u>
Total Footing of Bill <u>27.00</u>	
By Amount Paid in Advance	<u>3.50</u>
Balance	<u>18.50</u>
Entered into Ledger, page _____ or below _____	

To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearers _____
Names of Lodges _____
Lodge Insurance, \$ _____ Other Insurance, \$ _____
Funeral Director A. J. White
Names of "Near Relatives" _____

RECORD OF FUNERAL

Total No. 1412 Yearly No. 22 Date July 30, 1930
 Name of Deceased Lena Maude Stall (What Race) White (Where Born) Laura, Iowa
 Husband Willie E. Stall
 Widow Willie E. Stall
 Daughter of

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral July 30, 1930
 Residence 118 N. River St., Laramie
 Place of Death Res.
 Funeral Services at St. D. S. Church
 Time of Funeral Service 2:30 P.M.
 Clergyman W. J. Doyle, John Sauer
 Certifying Physician Dr. H. M. Hills
 His Residence Laramie
 Number of Burial Certificate
 Cause of Death Blue Sclerotic, heart exhaustion
(Primary) (Secondary)
 Date of Death July 28, 1930
 Occupation of the Deceased Frank moly
 Single or Married Married, Religion P. O. C.
 Date of Birth Feb. 8, 1894
 Age 36 Years 8 Months 20 Days
 Name of Father Wm. J. Church
 His Birthplace W. Va.
 Name of Mother Laura A. Smith
(Maiden Name)
 Her Birthplace Hopkins, W. Va.
 Body to be Shipped to
 Size and Style of Casket or Coffin 332 S. P. I.
 Manufactured by Rob. Cash Co.
 Interment at Wes. Hill Cemetery
 Lot No. 857
 Grave No. 4
 Section No.
 Diagram of Lay or Vault
 SEXTON Large D. & Long

Casket or Coffin # <u>232 S. P. I.</u>	\$ <u>165.00</u>
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault <u>Laura Maude</u>	\$ <u>115.00</u>
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	\$ <u>1.00</u>
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	\$ <u>15.00</u>
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Acroplane Service	
Death Notices in Newspapers	
Flowers, \$ Rental of Plants, \$	\$ <u>6.00</u>
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	\$ <u>10.00</u>
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	\$ <u>XX</u>
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ <u>336.00</u>
By Amount Paid in Advance	\$ <u>1.00</u>
Balance	\$ <u>336.00</u>
Entered into Ledger, page or below	

To Funeral Charges	Total, \$	By Cash	\$
Body prepared by <u>Frank Moly</u>			

Names of Pall Bearers Wm. Lane, Geo. Lane, Ed. Doney, J. H. Anthony, Walter Mayer, Roy Cameron
 Names of Lodges M. W. Masons, W. M. I. Order, M. E. C. O. S. S., M. E. C. O. S. S., M. E. C. O. S. S., W. M. I. Order, W. M. I. Order, W. M. I. Order
 Lodge Insurance, \$ Other Insurance \$
 Names of Bear Relatives Willie E. Stall, Mrs. Willie E. Stall

RECORD OF FUNERAL

Total No. 1413 Yearly No. 33 Date August 3, 1930

Name of Deceased Harriett Ann Lambert (What Race) White Ward, Iowa (Where Born)
Husband--
Wife--Widow
Son--Daughter of Daniel F. Lambert, Dec.

Charge to Fena J. Graham
Address 403 So. 2d, Laman, Ia.
Order Given by Fena J. Graham
How Secured

Date of Funeral August 3, 1930
Residence Laman, Iowa
Place of Death Res.

Funeral Services at Res.
Time of Funeral Services 2:30 P.M.
Clergyman Rev. G. J. Sawyer
Certifying Physician J. W. Lindsey
His Residence Laman

Number of Burial Certificate
Cause of Death Cardio. and Pulm. Failure
Date of Death Aug 1, 1930 - 3 A.M.?
Occupation of the Deceased Dr. Rmc.

Single or Married Married Religion L.D.S.
Date of Birth June 25, 1857
Age 76 Years Months 6 Days
Name of Father F. McDonald Sawyer

His Birthplace Eng.
Name of Mother E. Liza H. H. H.
Her Birthplace Eng. I.
Body to be Shipped to

Size and Style of Casket or Coffin 4200 B.C.H.
Manufactured by Rich. Cash Co.
Interment at R.R. Hill Cemetery

Lot No. 833
Grave No. 3
Section No.
Diagram of Lot or Vault
See to N - Longo De Lay

Casket or Coffin	<u>Wax</u>	\$ <u>265.00</u>
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	<u>Lead</u>	\$ <u>100.00</u>
Burial Slippers and Hose	(State Kind)	
Engraving Plate		
Embalming Body (with Fluid)		\$ <u>25.00</u>
Dressing Body, Shaving, \$		
Hair Dressing		
Use of Folding Chairs		<u>xx</u>
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		\$ <u>15.00</u>
Auto Limousines to Cemetery, @ \$		
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in Newspapers	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	\$ <u>8.00</u>
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		\$ <u>10.00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<u>xx</u>
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$ <u>423.00</u>
By Amount Paid in Advance		\$ <u>1.00</u>
Balance		\$ <u>412.00</u>
Entered into Ledger, page	or below	

To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearer Charles Johnson, W.A. Johnson, W. M. Williams, Fred Johnson, A.N. Hill, Stella May
Names of Stella May, Rebecca Wilson, Mrs. A. M. Johnson, Mrs. M. G. Hill
S. I. N. E. R. P. Mrs. Arthur Deay, Mrs. F. Wild, James, Roy Cheville, Tom J. Hill
Lodge Insurance, \$
Funeral Directors A. J. Hollis, J. White
Names of Near Relatives

RECORD OF FUNERAL

Total No. 1414 Yearly No. 74 Date August 12, 1930
 Name of Deceased Roy E. Johnson Race White (What Race)
 Husband or Son P. Earl Johnson (Where Born) Idaho
 Wife or Daughter of

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral Aug. 10, 1930
 Residence J. Adams, S. Idaho
 Place of Death Des Moines, Iowa, M.E. Hsp.
 Funeral Services at S. W. S. Church
 Time of Funeral Service 2:30
 Clergyman James Thomas; John Lawrence
 Certifying Physician A. B. Stanley
 His Residence Des Moines, Ia.
 Number of Burial Certificate.....
 Cause of Death Appendicitis (Primary) Peritonitis (Secondary)
 Date of Death Aug. 1, 1930
 Occupation of the Deceased Stamper
 Single or Married Married Religion S.D.S.
 Date of Birth Oct. 20, 1884
 Age 45 Years 9 Months 18 Days
 Name of Father Geo. W. Johnson
 His Birthplace Idaho
 Name of Mother Lola Flynn (Maiden Name)
 Her Birthplace Idaho
 Body to be Shipped to Fun. - Lilly Bur. Des Moines
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at Sammis, Ia. Cemetery

Casket or Coffin.....	\$	
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$.....	Shaving, \$.....	
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$.....	Candles, \$.....	
Door Badge, \$.....	Gloves, \$.....	
Hearse.....		15.00
Auto Limousines to Cemetery... @ \$.....		
Autos to R. R. Station... @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....	(Names of Newspapers)	
Flowers, \$.....	Rental of Plants, \$.....	
Other Decorations.....		
Outlay for Lot.....		40.00
Opening Grave or Vault.....		8.00
Lining Grave with Evergreen or Muslin.....		
Matting, \$.....	Tent Rental, \$.....	
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		10.00
Singers.....		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	73.48
By Amount Paid in Advance.....	\$	48.00
Balance.....	\$	25.00
Entered into Ledger, page.....	or below.....	

Lot No. 1562
 Grave No. 1
 Section No.
 Disposition of Lot or Vault D. F. X. To N. - Long D. & Long

To Funeral Charges.....	Total, \$	By Cash.....	\$
.....
.....
.....
.....
.....
.....

Names of Pall Bearers Dave Dittland, Geo. Chamberlain, John Brown, Everett G. Newick, John Davis, Rudy Harrison
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives..... Max White E. Frank Cook
 Funeral Director.....
 Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1928.

RECORD OF FUNERAL

Total No. 1415 Yearly No. 25 Date Sept. 1 1930
 Name of Deceased Ammon O. White White Newton, Iowa
 Husband - White (What Race)
 Wife - Widow
 Son - Daughter of } E. Liza Louise White (Where Born)

Charge to
 Address R. O. S. White
 Order Given by R. O. S. White
 How Secured
 Date of Funeral September 1, 1930
 Residence Jambi, Iowa
 Place of Death Independence, Mo.
 Funeral Services at W. O. S. Church
 Time of Funeral Services 7:30 P. M.
 Clergyman Rev. M. Smith; H. E. Gall, M. D.
 Certifying Physician E. S. Smith
 His Residence Independence, Mo.
 Number of Burial Certificate
 Cause of Death Malignant Endocarditis
 (Primary) (Secondary)
 Date of Death August 29, 1930
 Occupation of the Deceased Furniture & Undertaking
 Single or Married Married Religion W. O. S.
 Date of Birth May 23, 1877
 Age 53 Years 3 Months 6 Days
 Name of Father David & Maria White
 His Birthplace
 Name of Mother Mrs. Delphin Brown
 (Maiden Name)
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin #910 'A'
Drad. Cloth Case
 Manufactured by Robt. C. Cook, Company
 Interment at Jambi, Iowa Cemetery Rose Hill
 Lot No. 757
 Grave No. 3 (47)
 Section No.
 Diagram of Lot or Vault
SEXTON - Largo De Long

Casket or Coffin # <u>910</u>	\$ <u>119.00</u>
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault <u>Iowa Air Seal</u>	\$ <u>47.06</u>
Burial Suit or Dress (State Kind)	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with <u>No. Clg. Mide. Fluid</u>)	\$ <u>h.c.</u>
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	\$ <u>h.c.</u>
Auto Limousines to Cemetery.. @ \$	
Autos to R. R. Station	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
Flowers, \$ Rental of Plants, \$	
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	\$ <u>10.00</u>
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page or below	

To Funeral Charges Total, \$ <u>Body Prepared by Stahl Funeral Home, Independence, Mo.</u> <u>Returned by Special Coach, accompanied by Ralph Darg & R. S. White</u> <u>No charge made by Stahl for Preparation</u>	By Cash \$ _____ \$ _____ \$ _____ \$
--	--

Names of Pall Bearers Ray Carmichael, Oscar Johnson, John Lewis, Walter Hoyer, Geo. Davis, Robt. Perry
 Names of Hedges J. B. O. Gal, Frank, Loren, Frank, E. J. Abel, Robert, R. L. Perry
 SINGERS: Mabel Cahill, Irene Hill, Myrtle, Myrtle, Myrtle, Myrtle
 Lodge Insurance, \$ Other Insurance #
 Names of Near Relatives J. Stewart, D. Marion Smith, D. Marshall Haller

RECORD OF FUNERAL

Total No. 1416 Yearly No. 26 Date Sept. 3, 1930

Name of Deceased Mrs. Isabelle Hayer, White, near Leland, Ill.
(What Race) (Where Born)

Husband--
Wife--Widow
Son--Daughter of
E. Hayer, Dec.

Charge to E. Hayer

Address J. L. De Lapp

Order Given by J. L. De Lapp

How Secured Sept. 3, 1930

Date of Funeral Sept. 3, 1930

Residence Sammis, Iowa

Place of Death near S. O. S. Church

Funeral Services at S. O. S. Church

Time of Funeral Service 7:30 P.M.

Clergyman Miss Kapstam, J. L. De Lapp

Certifying Physician C. G. Anthony

His Residence Sammis, Iowa

Number of Burial Certificate

Cause of Death Carcinoma of Stomach
(Primary) (Secondary)

Date of Death Aug. 31, 1930

Occupation of the Deceased at home

Single or Married Single Religion S. O. S.

Date of Birth Sept. 12, 1858

Age 71 Years 11 Months 19 Days

Name of Father Olaf Dorsett

His Birthplace Norway

Name of Mother Susan Samson
(Maiden Name)

Her Birthplace Norway

Body to be Shipped to

Size and Style of Casket or Coffin

1115 B. W. Co. Dec.

Manufactured by Central State Casket Co.

Interment Sammis, East Hill Cemetery

Diagram of Lot or Vault
S. E. X. 101 - Long & Long

Lot No. 463
Grave No. 3
Section No.

Casket or Coffin #1115	\$ 175 00
Metallic Lining (State Kind)	
Outside Box (State Kind)	X X
Grave Vault (State Kind)	
Burial Suit or Dress	15 00
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	25 00
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	15 00
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers (Names of Newspapers)	
Flowers, \$ Rental of Plants, \$	5 00
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	8 00
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	X X
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	243 79
By Amount Paid in Advance	\$
Balance	13 5 79
Entered into Ledger, page or below	

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers J. M. Fred, O. H. Hager, W. H. Hager, D. W. Hager, D. W. Hager

Names of Lodges

Lodge Insurance, \$ Funeral Director Other Insurance, \$

Names of Near Relatives A. J. White, J. J. White

RECORD OF FUNERAL

Total No. 1417 Yearly No. 37 Date Sept. 8, 1930
 Name of Deceased Carrie Belf Jones White Harrison County, Mo.
 Husband-- (What Race) (Where Born)
 Wife--Widow
 Son--Daughter of Carl A. Jones

Charge to
 Address
 Order Given by
 How Secured
 Date of Funeral Sept. 8, 1930
 Residence Lamoni, Iowa
 Place of Death Mo.
 Funeral Services at Residence - Lone Rock Church
 Time of Funeral Service 1:30 - 3 P.M.
 Clergyman J. J. Sawyer, James Thomas
 Certifying Physician G. C. Suggs
 His Residence Lamoni, Ia.
 Number of Burial Certificate
 Cause of Death carcinoma of Rectum
 (Primary) (Secondary)
 Date of Death Sept. 7, 1930
 Occupation of the Deceased Housewife
 Single or Married Married Religion
 Date of Birth July 21, 1886
 Age 44 Years 1 Month 16 Days
 Name of Father Price M. Peef
 His Birthplace Cincinnati, Ohio
 Name of Mother Sarah Jane Black
 (Maiden Name)
 Her Birthplace Ohio
 Body to be Shipped to Funeral Coach To
Lone Rock Church & Cemetery
 Size and Style of Casket or Coffin 3000 - 2nd Pl. - Oct.
 Manufactured by Robt. Caskey Co.
 Interment at Harrison Co., Mo. Cemetery

Casket or Coffin	<u>2000</u>	\$	<u>15.000</u>
Metallic Lining			
Outside Box	(State Kind)		<u>xx</u>
Grave Vault	(State Kind)		
Burial Suit or Dress			
Burial Slippers and Hose	<u>+ Blossoms</u>		<u>1.54</u>
Engraving Plate			
Embalming Body (with Fluid)			<u>25.00</u>
Dressing Body, \$	Shaving, \$		
Hair Dressing			
Use of Folding Chairs			<u>xx</u>
" " Candelabrum, \$	Candles, \$		
Door Badge, \$	Gloves, \$		
Hearse			<u>1.500</u>
Auto Limousines to Cemetery.. @ \$			
Autos to R. R. Station @ \$			
Other Vehicle Service			
Aeroplane Service			
Death Notices in	Newspapers		
	(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$		
Other Decorations			
Outlay for Lot			
Opening Grave or Vault			
Lining Grave with Evergreen or Muslin			
Matting, \$	Tent Rental, \$		
Use of Lowering Device			
Rental of Vault			
Outlay for Shipping Charges			
Removal Charges			
Incineration			
Personal Services			<u>xx</u>
Singers			
Church Charges, \$	Minister, \$		
Telegrams and Telephone Charges			
Pal Bearer Service			
Total Footing of Bill		\$	<u>197.54</u>
By Amount Paid in Advance		\$	
Balance		\$	<u>197.54</u>
Entered into Ledger, page			or below

Diagram of Lot or Vault
 S. E. x. T. O. N. - Neighbors

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers James & Mark Bell, Wade Sautage, Neph. Deaver, James Thomas, Rob. Lane
 Names of Lodges S.I.N.C.E.R.S. - Gus Butts, James Salley, etc. - Primus - Louis Lewis
 Lodge Insurance, \$ Other Insurance, \$
 Funeral Directors Rollin S. White - J. L. Lock, Wallace
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1412 Yearly No. 28 Date Sept. 11, 1930
 Name of Deceased Frances Lavinia Mabry, White - Fargo, N. Dak.
Husband - (What Race) (Where Born)
Wife - (Where Born)
Son - Daughter of L. H. Mabry

Charge to.....
 Address.....
 Order Given by.....
 How Secured.....
 Date of Funeral Sept. 13, 1930
 Residence Jambou, Iowa
 Place of Death St. Mary's Hosp., Iowa City, Iowa
 Funeral Services at St. Luke Church
 Time of Funeral Service 2:20 P.M.
 Clergyman Rev. W. E. Long, St. Paul, Neb.
 Certifying Physician W. H. P. P. Galt
 His Residence St. H. P. Hwy., Iowa City, Iowa
 Number of Burial Certificate.....
 Cause of Death Cancer of sigmoid
(Primary) (Secondary)
 Date of Death Sept. 7, 1930
 Occupation of the Deceased Housewife
 Single or Married Married Religion.....
 Date of Birth Oct. 12, 1890
 Age 39 Years 11 Months 28 Days
 Name of Father H. S. Tullis
 His Birthplace Illinois
 Name of Mother Mabeline Burgess
(maiden Name)
 Her Birthplace Macom, Illinois
 Body to be Shipped by U.S. Railway
Cathart, Grand Rapids, Ia. City, Ia.
 Size and Style of Casket or Coffin.....
 Manufactured by.....
 Interment at St. Mary's - Rose Hill Cemetery

Casket or Coffin.....	\$	
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$.....	Shaving, \$.....	
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$.....	Candles, \$.....	
Door Badge, \$.....	Gloves, \$.....	
Hearse <u>3 trips</u>		1.50
Auto Limousines to Cemetery @ \$.....		
Autos to R. R. Station @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in.....	Newspapers	
<small>(Names of Newspapers)</small>		
Flowers, \$.....	Rental of Plants, \$.....	
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		8.00
Lining Grave with Evergreen or Muslin.....		
Matting, \$.....	Tent Rental, \$.....	
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		10.00
Singers.....		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....		33.00
By Amount Paid in Advance.....		8
Balance.....		25.00
Entered into Ledger, page.....	or below.....	

Lot No. 1597
 Grave No. 3
 Section No.....
 Diagram of Lot or Vault
S.F. Eaton - Long, W. E. Long

To Funeral Charges.....	Total, \$.....	By Cash.....	\$.....

Names of Pall Bearers Mr. Anthony, Mrs. Lewis, Mr. & John, Mrs. Jordan, Ed. Wray, E. A. Baker
 Names of Lodges.....
 Lodge Insurance, \$.....
 Names of Near Relatives Robert J. White Other Insurance, \$.....
Edward Miller

RECORD OF FUNERAL

Total No. 1419 Yearly No. 29 Date Sept 20, 1930

Name of Deceased Austin Olsen, White, La Salle, Co., Ill.
(Where Race) (Where Born)

Husband-
 Wife--Widow
 Son--Daughter of } Dolly Olsen, Divorced

Charge to Austin Olsen, Estate

Address A. P. Olsen (Amos)

Order Given by A. P. Olsen (Amos)

How Secured Sunday, Sept 21, 1930

Date of Funeral Lamoni, Iowa

Residence Laurel, Ia

Place of Death Ia

Funeral Services at Ia

Time of Funeral Service 7:30 P.M.

Clergyman Edw. W. Long

Certifying Physician D. H. H. Hills

His Residence Lamoni, Iowa

Number of Burial Certificates 1

Cause of Death Found Dead; Heart Block
(Primary) (Secondary)

Date of Death Sept 17, 1930

Occupation of the Deceased Retail Retail Merchant

Single or Married Divorced Religion C.S.

Date of Birth Dec 10, 1861

Age 69 Years 7 Months 7 Days

Name of Father O. A. Olsen

His Birthplace Norway

Name of Mother Mabel O. Olson
(Maiden Name)

Her Birthplace Norway

Body to be Shipped to _____

Size and Style of Casket or Coffin 232

Set Pt. Oak

Manufactured by Robt. Casket Co.

Interment at Lamoni - Rice Hill Cemetery

Diagram of Lot of Vault SECTION C Longo De Long

Lot No. 738
 Grave No. 4
 Section No. _____

Casket or Coffin # <u>232</u>	\$ <u>175.00</u>
Metallic Lining (State Kind) _____	
Outside Box (State Kind) _____	
Grave Vault <u>Iowa Air Seal</u>	<u>118.00</u>
Burial Suit or Dress _____	
Burial Slippers and Hose _____	
Engraving Plate _____	
Embalming Body (with _____ Fluid)	<u>25.00</u>
Dressing Body, \$ _____ Shaving, \$ _____	
Hair Dressing _____	
Use of Folding Chairs _____	<u>Xx</u>
“ “ Candelabrum, \$ _____ Candles, \$ _____	
Door Badge, \$ _____ Gloves, \$ _____	
Hearse _____	<u>15.00</u>
Auto Limousines to Cemetery @ \$ _____	
Autos to R. R. Station @ \$ _____	
Other Vehicle Service _____	
Aeroplane Service _____	
Death Notices in _____ Newspapers _____	
(Names of Newspapers) _____	
Flowers, \$ _____ Rental of Plants, \$ _____	<u>12.50</u>
Other Decorations _____	
Outlay for Lot _____	
Opening Grave or Vault _____	<u>10.00</u>
Lining Grave with Evergreen or Muslin _____	
Matting, \$ _____ Tent Rental, \$ _____	
Use of Lowering Device _____	
Rental of Vault _____	
Outlay for Shipping Charges _____	
Removal Charges _____	
Incineration _____	
Personal Services _____	<u>Xx</u>
Singers _____	
Church Charges, \$ _____ Minister, \$ _____	
Telegrams and Telephone Charges _____	
Pall Bearer Service _____	
Total Footing of Bill _____	<u>352.50</u>
By Amount Paid in Advance _____	<u>1.00</u>
Balance _____	<u>347.50</u>
Entered into Ledger, page _____ or below _____	

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Arthur & Alvin Taylor, Lem M. Bergman, A. D. Lantier, Dave Hansen, Ed Long

Names of Lodges A. P. Music

Lodge Insurance, \$ _____ Other Insurance, \$ _____

Funeral Director Rollin S. White, Louise Wallace

RECORD OF FUNERAL

Total No. 1420 Yearly No. 30 Date Sept 25 1930

Name of Deceased Dale Maxwell Gillaspay White Lamoni Iowa

Charge to Dale Gillaspay

Address

Order Given by

How Secured

Date of Funeral Sept 25 1930

Residence Ladonia Iowa

Place of Death M. E. Hosp. Des Moines Ia

Funeral Services at L. O. S. Church

Time of Funeral Service 2:30 P.M.

Clergyman W. E. Crall; L. S. Williams

Certifying Physician

His Residence Des Moines Ia

Number of Burial Certificate

Cause of Death Lobar Pneumonia

Date of Death Sept 23 1930

Occupation of the Deceased none

Single or Married Single Religion

Date of Birth

Age 0 Years 10 Months 16 Days

Name of Father Dale Gillaspay

His Birthplace Mt. Pleasant Iowa

Name of Mother Lora Deal

Her Birthplace Waterloo Iowa

Body to be Shipped to Returned from Des Moines Ia

Size and Style of Casket or Coffin 602 - 70

Manufactured by Geo. W. Mortenson Supply Co.

Interment at Lamoni Rose Hill Cemetery

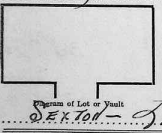
Lot No. 114D

Grave No. 1

Section No.

Funeral Director Lingo De Long

Table with 3 columns: Description, Amount, and Total. Includes items like Casket, Burial Slippers, and Flowers.



Speman of Lot or Vault DEK.T.O.L.

To Funeral Charges Total \$

By Cash \$

Names of Pall Bearers Mrs. J. L. Shigalt; Mrs. Etta Verbeeking

Names of Lodges L. O. S. - has. Duomo; Jackson Kelly; Manna Hills; Duquesne Verbeeking

Lodge Insurance \$

Names of Other Insurance \$

RECORD OF FUNERAL

Total No. 1421 Yearly No. 31 Date Oct. 2, 1930
 Name of Deceased John Frank Feldhahn White - near Berlin, Germany
 (What Race) (Where Born)
 Husband - Anna William Feldhahn
 Wife - Anna William Feldhahn
 Son - Anna William Feldhahn
 Daughter of

Charge to Mo.
 Address
 Order Given by
 How Secured
 Date of Funeral Oct. 2, 1930
 Residence Lamar, La.
 Place of Death Lamar, La.
 Funeral Services at L. D. S. Church
 Time of Funeral Service 2:30 P.M.
 Clergyman Wm. Paul, N. L. Dr. Sapp, Assh.
 Certifying Physician Dr. C. G. Lindsey
 His Residence Lamar, Iowa
 Number of Burial Certificate
 Cause of Death Cerebral Hemorrhage
 (Primary) (Secondary)
 Date of Death Sept. 29, 1930
 Occupation of the Deceased Retired Farmer
 Single or Married Married Religion L. D. S.
 Date of Birth Feb. 28, 1861
 Age 69 Years 7 Months 1 Days
 Name of Father John F. Feldhahn
 His Birthplace Bismarck
 Name of Mother Bartha
 (Mother Name)
 Her Birthplace Germany
 Body to be Shipped to
 Size and Style of Casket or Coffin # 3450 Oak
Lead. Oak - N. lid
 Manufactured by Rob. Carter Co.
 Interment at Lamar, - Oak Hill Cemetery

Casket or Coffin # <u>3450</u>	\$ <u>125.00</u>
Metallie Lining (State Kind)	
Outside Box (State Kind)	<u>xx</u>
Grave Vault (State Kind)	
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	<u>25.00</u>
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	<u>15.00</u>
Auto Limousines to Cemetery, @ \$	
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$ Rental of Plants, \$	<u>47.5</u>
Other Decorations	
Outlay for Lot	<u>20.00</u>
Opening Grave or Vault	<u>8.00</u>
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	<u>xx</u>
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ <u>197.75</u>
By Amount Paid in Advance	\$ <u>2.00</u>
Balance	\$ <u>195.75</u>
Entered into Ledger, page or below	

Lot No. 1118
 Grave No. 4
 Section No.

Diagram of Lot or Vault
S. E. X. T. W. - Largo Oak Long

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers A. J. Harrington, Geo. Willinger, Mr. Borty, Sandy Platt, John E. Anderson, James Moore
 Names of Ladies F. B. Mrs. T. S. Harrington, Mrs. Th. Robinson, Mrs. J. B. Ashler, Mrs. Geo. Sney
 SINGERS Ray, Dube, Beard, Salmen, Francis, Hesterton
 Lodge Insurance, \$ Other Insurance, \$
 Names of Funeral Directors Wm. S. White, Leonard Wallace

RECORD OF FUNERAL

Total No. 1422 Yearly No. 33 Date October 25, 1930

Name of Deceased Hannah G. Lark Race White
(What Race)
(Where Born)

Husband— John G. Lark, Deceased
 Wife—Widow
 Son—Daughter of

Charge to Mrs. Edna Black
 Address Chicago

Order Given by " "
 How Secured Cash
 Date of Funeral Oct 30, 1930

Residence Chicago
 Place of Death Chicago

Funeral Services at St. Francis Par.; Lamoni
 Time of Funeral Service 2:30 P. M.
 Clergyman James James; Rev. Colville

Certifying Physician J. P. Cruise
 His Residence Chicago; Ill.

Number of Burial Certificate
 Cause of Death Pneumonia
(Primary) (Secondary)

Date of Death Oct 3, 1930
 Occupation of the Deceased
 Single or Married Single Religion

Date of Birth
 Age 22 Years 2 Months 4 Days

Name of Father
 His Birthplace
 Name of Mother (Maiden Name)

Her Birthplace
 Body to be Shipped to Iowa
Walter R. Swan (Ambulance) Chicago

Size and Style of Casket or Coffin
 Manufactured by Lamoni - Rose Hill
 Interment at Lamoni - Rose Hill Cemetery

Lot No. 235
 Grave No. 2
 Section No.

Diagram of Lot or Vault
Long De Long

Names of Pall Bearers Wm. Melgare, Harry Lanzer, Walter Hoover, James Selchfield, Jim Lewis, A. J. Gearing, Jr.

Names of Lodges St. Francis, Mo. Lodges, Providence, Wash. White, D. W. White
F. P., No. Ed. Kirby, Mo. Co. March, Mo. E. N. Rauch, Mrs. R. S. White

Lodge Insurance \$
 Funeral Director W. J. White, Max. White
 Names of Near Relatives

Casket or Coffin	\$	
Metallic Lining	<small>(State Kind)</small>	
Outside Box	<small>(State Kind)</small>	
Grave Vault	<small>(State Kind)</small>	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with	Fluid)	
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	<u>1.8</u>
Door Badge, \$	Gloves, \$	
Hearse		<u>15.00</u>
Auto Limousines to Cemetery, @ \$		
Autos to R. R. Station	@ \$	
Other Vehicle Service		
Acroplane Service		
Death Notices in	Newspapers	
	<small>(Names of Newspapers)</small>	
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<u>8.00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration	@ \$	
Personal Services		<u>10.00</u>
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	<u>33.00</u>
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page		or below

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Wm. Melgare, Harry Lanzer, Walter Hoover, James Selchfield, Jim Lewis, A. J. Gearing, Jr.
 Names of Lodges St. Francis, Mo. Lodges, Providence, Wash. White, D. W. White
F. P., No. Ed. Kirby, Mo. Co. March, Mo. E. N. Rauch, Mrs. R. S. White

RECORD OF FUNERAL

Total No. 1417 Yearly No. 33 Date Oct. 6, 1930

Name of Deceased Mary Jane Pascoe
 Husband-- White (What Race)
 Wife--Widow Cornwall, England (Where Born)
 Son--Daughter of E. Edward Pascoe

Charge to Santo Home
 Address _____
 Order Given by H. T. De Lapp
 How Secured _____
 Date of Funeral Oct. 6, 1930
 Residence Santo Home - Laramie, Wyo.
 Place of Death " " " " "
 Funeral Services at " " " " "
 Time of Funeral Service 2:30 P. M.
 Clergyman Mrs. Irving J. D. Williams
 Certifying Physician C. C. Ludwig
 His Residence Laramie, Wyo.
 Number of Burial Certificate _____
 Cause of Death Cerebral Hemorrhage
 (Primary) (Secondary)
 Date of Death Oct. 4, 1930
 Occupation of the Deceased Home wife
 Single or Married Married Religion P. O. S.
 Date of Birth Dec. 19, 1852
 Age 77 Years 9 Months 15 Days
 Name of Father Johan Cox
 His Birthplace Nor. Kansas
 Name of Mother " "
 (Maiden Name)
 Her Birthplace " "
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
Top. In. Craps
 Manufactured by M. O. Van
 Interment at Laramie Cemetery

Casket or Coffin	\$ <u>65.00</u>
Metallic Lining	(State Kind)
Outside Box	<u>X</u> (State Kind)
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	<u>25.00</u>
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	<u>5.00</u>
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehiele Service	
Aeroplane Service	
Death Notices in	Newspapers
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	<u>8.00</u>
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	<u>X</u>
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ <u>193.00</u>
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page _____	or below _____

Diagram of Lot or Vault
 Lot No. 971 S.
 Grave No. _____
 Section No. _____

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Joe Dudy, Art Lane, Jim Dumas, H. P. Brown, Don Anderson, Earl Lewis
 Names of Lodges S.M.E.S. - Grand Wagon, Fann Hyaden, Collin Fennel, Roy Dewey
 Lodge Insurance, \$ _____
 Names of Funeral Directors A. W. D. White, F. S. H. Wallace

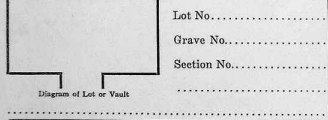
RECORD OF FUNERAL

Total No. 1424 Yearly No. 34 Date Oct. 21, 1930

Name of Deceased Richard Lloyd Parker, White, Ames, Iowa
Husband of Floyle S. and Gladys Parker (Where Born)

Charge to Lloyd S. Parker
 Address Samaria, Iowa
 Order Given by Lloyd S. Parker
 How Secured Ok. 4.
 Date of Funeral Oct. 21, 1930
 Residence Samaria, Iowa
 Place of Death Res.
 Funeral Services at Backward, Iowa
 Time of Funeral 2 P.M.
 Clergyman J. F. W. Japp
 Certifying Physician C. C. Highway
 His Residence Samaria, Iowa
 Number of Burial Certificate
 Cause of Death Laryngeal Diphtheria
(Primary) (Secondary)
 Date of Death Oct. 20, 1930
 Occupation of the Deceased Student
 Single or Married Single Religion Methodist
 Date of Birth March 30, 1924
 Age 6 Years 6 Months 30 Days
 Name of Father Lloyd S. Parker
 His Birthplace West Des Moines, Iowa
 Name of Mother S. L. Heald
(Maiden Name)
 Her Birthplace Backward, Iowa
 Body to be Shipped to Motor Coach Co. Backward, Ia.
 Size and Style of Casket or Coffin 150 - 40
Samkin, Full Couch
 Manufactured by Woot Casket Co.
 Interment at Backward, Iowa Cemetery

Casket or Coffin #150 - 40	\$ 45.00
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault #4. Lark Oak Seal (State Kind)	85.00
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	25.00
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ (Gloves, \$)	
Hearse 210 M.S. 210 P.	31.00
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$ Day Rental of Plants, \$	13.50
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	XX
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Lot No.	
Grave No.	
Section No.	
Total Footing of Bill	\$ 799.50
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below



To Funeral Charges	Total, \$	By Cash	\$
<u>Body taken by R. S. White via Motor Coach to Backward, Iowa</u>			
<u>Accompanied by J. F. W. Japp, Minister</u>			
<u>Services at Residence of J. C. Heald</u>			

Names of Pall Bearers J. C. Heald, S. M. Parker, Heald, Parker
Names of Lodges

Lodge Insurance, \$
Names of Near Relatives R. L. White Other Insurance, \$
Body Prepared by Forest Haller #611

RECORD OF FUNERAL

Total No. 1425 Yearly No. 35 Date Oct. 27, 1930

Name of Deceased Winston Maxwell Mortimer, White, Lamoni, Iowa
Husband---Widow }
Son---Daughter, or } Roy H. and Suzanne Mortimer
(What Race) (Where Born)

Charge to Roy H. Mortimer
Address Lamoni, Iowa
Order Given by Roy Mortimer
How Secured
Date of Funeral Oct. 27, 1930
Residence Lamoni, Iowa
Place of Death Res.
Funeral Services at Roa (Lawn)
Time of Funeral Service 2 P.M.
Clergyman H. D. Dr. Trapp, James Thomas
Certifying Physician J. C. Anthony
His Residence Lamoni, Iowa

Number of Burial Certificate
Cause of Death Acute Polio myelitis (Under type)
(Primary) (Secondary)
Date of Death Oct. 26, 1930
Occupation of the Deceased Student
Single or Married Single Religion
Date of Birth Dec. 26, 1924
Age 5 Years 10 Months 3 Days
Name of Father Roy J. Mortimer
His Birthplace Hamburg, Iowa
Name of Mother Suzanne Maxwell
(Maiden Name)
Her Birthplace West Chester, Iowa
Body to be Shipped to

Size and Style of Casket or Coffin 1209 1/2 - 46
Slush
Manufactured by North Casket Co.
Interment at Lamoni - Oak Hill Cemetery

Diagram of Lot or Vault
S.E. 10th - Largo De Long
Lot No. 1442
Grave No. A
Section No.

To Funeral Charges	Total, \$	By Cash	\$

Casket or Coffin # <u>1209 1/2 - 46</u>	\$ <u>85.00</u>
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault # <u>A. C. Lusk</u>	\$ <u>85.00</u>
Burial Suit or Dress (State Kind)	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	\$ <u>25.00</u>
Dressing Body, Shaving, Hair Dressing	
Use of Folding Chairs	\$ <u>XX</u>
" " Candelabrum, Candles	
Door Badge, Gloves	\$ <u>15.00</u>
Hearse	
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers (Names of Newspapers)	
Flowers, Rental of Plants	\$ <u>8.00</u>
Other Decorations	
Outlay for Lot	\$ <u>50.00</u>
Opening Grave or Vault	\$ <u>7.00</u>
Lining Grave with Evergreen or Muslin	
Matting, Tent Rental	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	\$ <u>XX</u>
Singers	
Church Charges, Minister	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ <u>275.00</u>
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page or below	

Names of Pall Bearers H. H. Rogers, W. E. Prall, H. Roy Cummings, Lloyd D. Parks
Name of ~~Interment~~ F. B. Blosser, Simpson, Lisa Morgan, Franka White, Edith E. Jones
Singer A. Coffey, Chaves
Lodge Insurance, Funeral Director K. Allen S. White, Edward Ambrose
Names of Near Relatives
Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1932.

RECORD OF FUNERAL

Total No. 1426 Yearly No. 36 Date. Oct. 20 1930

Name of Deceased. Richard Infant Albie Des Moines, Ia.
Husband---
Wife---Widow (Where Born)
Son---Daughter of { Francis P. and Esteyna Richard

Charge to Fun.
Address
Order Given by Albie E. Pouch
How Secured
Date of Funeral Oct. 20, 1930
Residence Des Moines, Ia.
Place of Death Des Moines, Ia.
Funeral Services at Church
Time of Funeral Service
Clergyman E. Drury White
Certifying Physician Carl W. Casper
His Residence Des Moines, Ia.
Number of Burial Certificate
Cause of Death Stillborn - Cause unknown
(Primary) (Secondary)
Date of Death Oct. 19, 1930
Occupation of the Deceased none
Single or Married Single Religion
Date of Birth Oct. 19, 1930
Age Years Months Days
Name of Father Francis P. H. Hord
His Birthplace 6. daughter, Mich.
Name of Mother Esteyna Smith
(Maiden Name)
Her Birthplace Lemoine, Iowa
Body to be Shipped to
Size and Style of Casket or Coffin 1 1/2 Spec.
Manufactured by Loth Casket
Interment at Wes. Hill Cemetery Cemetery

Diagram of Lot or Vault
SEXTON Largo De Long
Lot No. 852
Grave No. 1
Section No.

Casket or Coffin	\$	15.00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with	Fluid)	
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		
Auto Limousines to Cemetery @ \$		
Autos to R. R. Station @ \$		
Other Vehicle Service		
Acroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		2.50
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page		or below

To Funeral Charges	Total, \$		By Cash	\$	
<u>Infant returned from Des Moines by Albie Pouch</u>					
<u>Prayer Service at Church, Des Moines</u>					

Names of Pall Bearers
Names of Lodges
Lodge Insurance, \$ Other Insurance, \$
Names of Funeral Directors James Walker
Names of Bear Relatives

RECORD OF FUNERAL

Total No. 1227 Yearly No. 37 Date Nov. 1, 1930

Name of Deceased Sarah Jane Hunstman, White, Albia, Indians
Husband--
Wife--Widow } George Hunstman
Son--Daughter of } (What Race) (Where Born)

Charge to J. L. Hicks

Address

Order Given by

How Secured

Date of Funeral Nov. 1, 1930

Residence Lama, Iowa

Place of Death Home

Funeral Services at A. O. S. Church

Time of Funeral Service 2:30 P. M.

Clergyman Wm. Chas. King

Certifying Physician J. W. King

His Residence Lama, Iowa

Number of Burial Certificate

Cause of Death Acute Myocarditis
(Primary) (Secondary)

Date of Death Oct. 30, 1930

Occupation of the Deceased Housewife

Single or Married Married Religion

Date of Birth April 13, 1858

Age 72 Years 6 Months 17 Days

Name of Father John B. Wright

His Birthplace unknown

Name of Mother Nancy Hinshman
(Maiden Name)

Her Birthplace unknown

Body to be Shipped to

Size and Style of Casket or Coffin 34.5 x 60 x 10

Manufactured by Roach Casket Co

Interment at Ross Hill Cemetery

Lot No. 1139

Grave No. 1

Section No.

Diagram of Lot or Vault
S. E. X. T. O. N. Long O. E. Long

Casket or Coffin	# 3450	\$ 125 00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with..... Fluid)		25 00
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing		
Use of Folding Chairs		
“ “ Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		15 00
Hearse		
Auto Limousines to Cemetery @ \$.....		
Autos to R. R. Station @ \$.....		
Other Vehicle Service		
Aeroplane Service		
Death Notices in..... Newspapers		
(Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		3 00
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		8 00
Lining Grave with Evergreen or Muslin		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		4 X
Singers		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$ 176 00
By Amount Paid in Advance		\$.....
Balance		\$.....
Entered into Ledger, page..... or below.....		

Names of Pall Bearers Math Sandage, J. B. De Hoff, Henry & Wilson Kershner, Dave Sandage, Lee Kelly

Names of Lodgers

Lodge Insurance, \$..... Other Insurance, \$.....
Funeral Director T. Forest Wallace
Names of Near-Relatives Mrs. White
Compiled by F. J. FEINERMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1228 Yearly No. 38 Date November 4, 1930
 Name of Deceased Laura S. E. Land O. Lapp, White, Lake Geneva, Wis.
 Husband Boris E. Lippett O. Lapp (Where Born)

Charge to L. S. O. Lapp
 Address L. S. O. Lapp
 Order Given by L. S. O. Lapp
 How Secured
 Date of Funeral (No. Invoice Inv.)
 Residence Lamar, Iowa
 Place of Death
 Funeral Services at Minneapolis, Minn.
 Time of Funeral Service
 Clergyman
 Certifying Physician M. H. Rogers, Corone
 His Residence Keon, Iowa
 Number of Burial Certificate
 Cause of Death Acute Dilatation of Heart
 (Primary) (Secondary)
 Date of Death Nov. 3, 1930
 Occupation of the Deceased Cash Controller
 Single or Married Married Religion R. D. S.
 Date of Birth March 15, 1857
 Age 73 Years 7 Months 18 Days
 Name of Father Arthur Albert O. Lapp
 His Birthplace Whitewater, Wis.
 Name of Mother Hester Sherman
 (Maiden Name)
 Her Birthplace Arkansas
 Body to be Shipped to Minneapolis, Minn.
 Size and Style of Casket or Coffin 360 Mon Pl.
Oct.
 Manufactured by Rob. Carter Co.
 Interment at Minnetonka, Wis. Cemetery

Casket or Coffin # <u>360 Mon Pl.</u>	\$ <u>175.00</u>
Metallic Lining	
Outside Box <u>Shipping to ad.</u>	<u>XX</u>
Grave Vault	
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with <u>Fluid</u>)	<u>2.50</u>
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	<u>15.00</u>
Auto Limousines to Cemetery @	
Autos to R. R. Station @	\$
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	<u>XX</u>
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ <u>215.00</u>
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

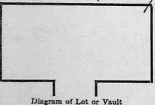


Diagram of Lot or Vault

Lot No.
 Grave No.
 Section No.

To Funeral Charges Total \$
Body prepared and shipped by express via Great Western Ry. from
Des Moines, Iowa 9:30 P.M. Nov. 4, 1930.
Via Motor Coach to Des Moines.
Shipped to Lippett O. Lapp, 457 S. 8th St., South, Minneapolis.

Names of Pall Bearers Ray Cummings, D. S. Parks, Willard Mason, James Hanson
 Names of Lodges
 Lodge Insurance, \$
 Funeral Director H. J. White Other Insurance, \$
 Names of Near Relatives

RECORD OF FUNERAL

Total No. 1429 Yearly No. 39 Date Nov. 23 1930

Name of Deceased Corthland F. Babcock State
Husband-- (What Race) (Where Born)
Wife--Widow
Son--Daughter of }

Charge to Mrs. Addie Newcomer
Address ..
Order Given by ..
How Secured ..
Date of Funeral Nov. 23, 1930
Residence A. Hurton, Mo.
Place of Death Raymond, Mo.
Funeral Services at Samoa, Ia., Newcomer Rd.
Time of Funeral Service 7:30 P.M.
Clergyman G. J. Bull, Joseph Lane, Ia.
Certifying Physician James Sealock
His Residence Independence, Mo.
Number of Burial Certificate ..
Cause of Death Pneumonia
(Primary) (Secondary)
Date of Death Nov. 21, 1930
Occupation of the Deceased ..
Single or Married Married Religion W.D.S.
Date of Birth ..
Age 79 Years .. Months .. Days
Name of Father ..
His Birthplace ..
Name of Mother ..
(Maiden Name)
Her Birthplace ..
Body to be Shipped to Sam
Canton, Kansas Home - Independence
Size and Style of Casket or Coffin ..
Crypt. Chgo. P. Ch. - Lupa. Inf.
Manufactured by ..
Interment Samoa - Rose Hill Cemetery

Casket or Coffin	\$	
Metallic Lining (State Kind)		
Outside Box (State Kind)		
Grave Vault (State Kind)		
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		<u>X7</u>
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<u>15.00</u>
Auto Limousines to Cemetery, @ \$		
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in Newspapers		
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	<u>5.00</u>
Other Decorations		
Outlay for Lot # <u>1128</u>		<u>20.00</u>
Opening Grave or Vault		<u>8.00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<u>10.00</u>
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	<u>57.00</u>
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page		or below

Lot No. 1128
Grave No. 4
Section No.
Diagram of Lot or Vault
See to. d. - Longo O. E. Long

To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearers J. H. Anthony, Tom Lewis, James Seaford, John Lane, Fred Cook, Evan Weidner
Names of Lodges ..

Lodge Insurance, \$ Other Insurance, \$
Funeral Director
Names of Near Relatives ..

RECORD OF FUNERAL

Total No. 1430..... Yearly No. 40..... Date Nov. 24..... 1930
 Name of Deceased. George Washington Eleton - White - Bradford, Illinois
Husband -
Wife - Widow
Son - Daughter of Mary & Elizabeth Eleton
(What Race) White (Where Born) Bradford, Illinois

Charge to Wm. R. New
 Address Lamar, Ia.
 Order Given by Wm. R. New
 How Secured Note
 Date of Funeral Nov. 24, 1930
 Residence Lamar, Ia.
 Place of Death Res.
 Funeral Services at Res.
 Time of Funeral Service 2:30 P.M.
 Clergyman T. J. Bell, Joe Law, etc.
 Certifying Physician T. H. King
 His Residence Lamar, Ia.
 Number of Burial Certificate
 Cause of Death McPhail's Crime
(Primary) (Secondary)
 Date of Death Nov. 22, 1930
 Occupation of the Deceased Carphaton
 Single or Married Widow Religion none
 Date of Birth Feb. 24, 1858
 Age 72 Years 8 Months 28 Days
 Name of Father Geo. W. Eleton
 His Birthplace Unknown
 Name of Mother Mary Sears
(Maiden Name)
 Her Birthplace Unknown
 Body to be Shipped to
 Size and Style of Casket or Coffin 3000 Oct. Pl.
 Manufactured by Rob. Carter Co.
 Interment at Davis, Ia. (C.O.V.) Cemetery

Casket or Coffin #3000	\$ 150.00
Metallic Lining (State Kind)	
Outside Box (State Kind)	XX
Grave Vault (State Kind)	
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	25.00
Embalming Body (with Fluid)	
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	XX
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	1.50.00
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
<small>(Names of Newspapers)</small>	
Flowers, \$ Rental of Plants, \$	5.00
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	AK
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ 195.00
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

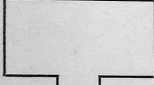


Diagram of Lot or Vault

Lot No. Y
 Grave No. X
 Section No. Y

To Funeral Charges	Total, \$		By Cash	\$

Names of Pall Bearers Dr. Hoffner, John Gray, Chas New, Fred New, Harold Weible, Ark. Schofield
 Names of Lodges

Lodge Insurance, \$
 Funeral Director William S. White
 Names of Near Relatives Geo. W. Eleton Other Insurance, \$

RECORD OF FUNERAL

Total No. 1431 Yearly No. 11 Date Nov. 27 1930
 Name of Deceased John S. Roth White Union County, Pa.
 Husband---Widow
 Son---Daughter of Mary Roth (What Race) (Where Born)

Charge to J. S. Roth Estate
 Address J. S. & Leah Roth
 Order Given by J. S. & Leah Roth
 How Secured
 Date of Funeral Nov. 27, 1930
 Residence Zenonia, Pa.
 Place of Death do.
 Funeral Services at L. D. S. Church
 Time of Funeral Service 2:30 P.M.
 Clergyman D. J. Bell, Lutheran Church, Wash.
 Certifying Physician T. M. Spring
 His Residence Zenonia, Pa.
 Number of Burial Certificate
 Cause of Death Parmia from Chronic Nephritis
 (Primary) (Secondary)
 Date of Death Nov. 25, 1930
 Occupation of the Deceased Retired Minister
 Single or Married Married Religion P. O. S.
 Date of Birth Sept. 8, 1842
 Age 88 Years 3 Months 17 Days
 Name of Father Geo. H. Roth
 His Birthplace Germany
 Name of Mother unknown
 (Maiden Name) do.
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin # 4050 Stat.
Plush
 Manufactured by Robt. Cashel Co.
 Interment at Rose Hill Cemetery

Casket or Coffin <u># 4050</u>	\$ <u>200.00</u>
Metallic Lining (State Kind)	
Outside Box (State Kind)	<u>1.75</u>
Grave Vault (State Kind)	
Burial Suit or Dress	<u>2.50</u>
Burial Slippers and Hose <u>Underwear</u>	<u>.75</u>
Engraving Plate	
Embalming Body (with Fluid)	<u>3.50</u>
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	<u>15.00</u>
Auto Limousines to Cemetery... @ \$	
Autos to R. R. Station... @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
Flowers, \$ Rental of Plants, \$	<u>5.50</u>
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	<u>8.00</u>
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	<u>xx</u>
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ <u>277.75</u>
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page or below	

Lot No. 400
 Grave No. 3-4
 Section No.
 Diagram of Lot or Vault
S.E. 1/4 of N. Long Dr. Long

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Wm. Midgett, Owen Hanson, Wm. Ketch, Wm. Brown, A. M. Beck, Lewis Corbett
 Names of Lodges F. F. B., Mrs. Geo. Midgett, Mrs. Dawson, Mrs. W. S. Beck, Mrs. J. S. Hanson
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives H. O. Roth, S. Roth, Geo. Midgett
 Funeral Director

RECORD OF FUNERAL

Total No. 1438 Yearly No. 2 Date January 16, 1931

Name of Deceased E. Litta O. Lang Mit. Kentucky
 Husband... (What Race) (Where Born)
 Wife...
 Son... Daughter... Lease Newton O. Lang, Dec.

Charge to Lease O. Lang,
 Address

Order Given by

How Secured Contract
 Date of Funeral Jan. 16, 1931

Residence Lamar, Iowa
 Place of Death Iowa

Funeral Services at Santa Church
 Time of Funeral Service 2 P.M.

Clergyman D. J. Bell, W. A. Francis
 Certifying Physician E. E. Luby

His Residence Lamar
 Number of Burial Certificate

Cause of Death Myocarditis
 (Primary) (Secondary)

Date of Death Jan. 14, 1931
 Occupation of the Deceased Home maker

Single or Married Married Religion

Date of Birth Dec. 7, 1849
 Age 81 Years 1 Months 7 Days

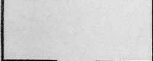
Name of Father J. Victoria Quirk
 His Birthplace Unknown

Name of Mother M. Ella Bradford
 (Maiden Name) Her Birthplace Unknown

Body to be Shipped to

Size and Style of Casket or Coffin 70x12
Bu. pattern Davis, Hard lid, Emb. Ore.

Manufactured by A. C. Smith & Son, Co.
 Interment at Lamar, Ross Hill Cemetery



Lot No. 871
 Grave No. 1
 Section No.

Diagram of Lot or Vault
SEXTON - Child Plot

Casket or Coffin <u>907012</u>	\$ <u>125.00</u>
Metallic Lining (State Kind)	
Outside Box (State Kind)	<u>25</u>
Grave Vault (State Kind)	
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	<u>25.00</u>
Dressing Body, \$ Shaving, \$	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	<u>15.00</u>
Auto Limousines to Cemetery..@ \$	
Autos to R. R. Station.....@ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in..... Newspapers	
(Names of Newspapers)	
Flowers, \$ Rental of Plants, \$	<u>10.00</u>
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	<u>8.00</u> #
Lining Grave with Evergreen or Muslin	
Matting, \$ Tent Rental, \$	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	<u>XX</u>
Singers	
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ <u>175.00</u>
By Amount Paid in Advance	\$ <u>8.00</u> #
Balance	\$ <u>183.00</u>
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.....	To Funeral Charges.....	Total, \$	By Cash.....	\$
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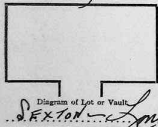
Names of Pall Bearers Byron Roberts, Hale Denton, Clarence Rody, David Webb, Mack Hays and Manthous
 Names of Lodges

Lodge Insurance \$ Other Insurance, \$
 Names of Near Relatives Rollin J. White - Bro. Mason

RECORD OF FUNERAL

Total No. 1440 Yearly No. 4 Date Feb. 2, 1931
 Name of Deceased Sylvia Bea Derry White Omaha, Neb.
 Husband---
 Wife---Widow
 Son---Daughter of } Arthur & Mauda Derry (What Race) (Where Born)

Charge to..... y..... ".....
 Address.....
 Order Given by Louise & Ruth Derry
 How Secured.....
 Date of Funeral Feb. 7, 1931
 Residence Lamoni, Ia.
 Place of Death Laurelton Hosp., Omaha, Neb.
 Funeral Services at. Cemetery, Lamoni
 Time of Funeral Service. 2 P.M.
 Clergyman W. W. Caswell
 Certifying Physician A. A. Luchbach
 His Residence Omaha, Neb.
 Number of Burial Certificate.....
 Cause of Death Renalure Stiltton
(Primary) (Secondary)
 Date of Death Feb. 1, 1931
 Occupation of the Deceased none
 Single or Married 8 Religion none
 Date of Birth 21-31
 Age..... Years 9 Months 0 Days.....
 Name of Father Arthur Derry
 His Birthplace.....
 Name of Mother Mauda Hammer
(Maiden Name)
 Her Birthplace.....
 Body to be Shipped to.....
 Size and Style of Casket or Coffin 150-1/0
Reber's Rose Slush
 Manufactured by Rob. Cassel Co.
 Interment at Lamoni, Ia. Cemetery



Lot No. 154
 Grave No. 1
 Section No.....

Casket or Coffin.....	\$	<u>30.00</u>
Metallic Lining.....		
Outside Box.....	(State Kind)	<u>xx</u>
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....	(State Kind)	
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$.....	Shaving, \$.....	
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$.....	Candles, \$.....	
Door Badge, \$.....	Gloves, \$.....	
Hearse.....		
Auto Limousines to Cemetery...@ \$.....		
Autos to R. R. Station.....@ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		
<small>(Names of Newspapers)</small>		
Flowers, \$.....	Rental of Plants, \$.....	
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		<u>3.50</u>
Lining Grave with Evergreen or Muslin.....		
Matting, \$.....	Tent Rental, \$.....	
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		<u>5.00</u>
Singers.....		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	<u>38.50</u>
By Amount Paid in Advance.....	\$	
Balance.....	\$	
Entered into Ledger, page.....	or below.....	

To Funeral Charges.....	Total, \$	By Cash.....	\$
<u>Services. Consulted only of Derry & Co. Cemetery</u>			

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$..... Other Insurance, \$.....
 Funeral Director A. D. White
 Names of Bearers.....

RECORD OF FUNERAL

Total No. 144 Yearly No. 5

Date Feb 5 1931

Name of Deceased Joseph W. Willis White Oxfordshire England
Husband of Mrs. J. W. Willis, Dec. (What Race) (Where Born)
Wife--Widow Son--Daughter of

Charge to Mrs. John Gray
Address Laramie

Order Given by J. W. Willis
How Secured Special Contract

Date of Funeral Feb 5 1931

Residence Laramie, Wyo.

Place of Death New

Funeral Services at New

Time of Funeral Service 3 P.M.

Clergyman Roy Crowell, J. S. Williams

Certifying Physician Dr. C. S. ...

His Residence Laramie, Wyo.

Number of Burial Certificate

Cause of Death Myocardial degeneration - arteriosclerosis (Primary) (Secondary)

Date of Death Feb 3 1931

Occupation of the Deceased Laramie (Retail)

Single or Married Widowed Religion

Date of Birth Aug 26 1884

Age 46 Years 5 Months 7 Days

Name of Father Unknown

His Birthplace

Name of Mother (Maiden Name)

Her Birthplace

Body to be Shipped to

Size and Style of Casket or Coffin 1270 B.B.C.

Manufactured by W. B. Co. - Root

Interment at Laramie, Wyo. Cemetery

Lot No. 242

Grave No. 4

Section No.

Diagram of Lot or Vault

S. E. X. T. O. N. Longo De Long

Casket or Coffin	# 1270	\$ 135.00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	XX
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		25.00
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		XX
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15.00
Auto Limousines to Cemetery @ \$		
Autos to R. R. Station @ \$		
Other Vehicle Service		
Acroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	5.00
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		8.00
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		XX
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$ 188.00
By Amount Paid in Advance		
Balance		
Entered into Ledger, page		or below

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Cliff Meunier, Roy Lewis, Henry Allen, Mark D. Heston, Hal Foye, Roy Johnson

Names of Lodges Sons of America, Elks

Lodge Insurance, \$

Funeral Director W. H. S. White, Geo. T. Madson

RECORD OF FUNERAL

Total No. 1442 Yearly No. 6 Date February 9, 1931
 Name of Deceased Eunice Vanuitt Feltz White Missouri
(What Race) (Where Born)

Husband...
 Wife...
 Son...
 Daughter of

Charge to Joe Feltz
 Address Greensfield, Ia.
 Order Given by Joe Feltz
 How Secured
 Date of Funeral Feb. 9, 1931
 Residence Sluwood, Iowa
 Place of Death Edgumden Hospital, Ia.
 Funeral Services at Baptist Church - mo.
 Time of Funeral Service
 Clergyman
 Certifying Physician W. Mc. Hanchett
 His Residence Council Bluffs, Iowa
 Number of Burial Certificate
 Cause of Death cerebral hemorrhage
(Primary) (Secondary)
 Date of Death 2/7/31
 Occupation of the Deceased Housewife
 Single or Married Married Religion
 Date of Birth
 Age 49 Years 11 Months 7 Days
 Name of Father Wm. Feltz
 His Birthplace Mo.
 Name of Mother Josa Stokes
(Maiden Name) Mo.
 Her Birthplace
 Body to be Shipped Yes
From
Sluwood, Ia.
 Size and Style of Casket or Coffin
Deep Hospital Casket
 Manufactured by
 Interment at Baptist Church Cemetery

Casket or Coffin	\$	
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		15.00
Auto Limousines to Cemetery, @ \$		
Autos to R. R. Station, @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
<small>(Names of Newspapers)</small>		
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	
By Amount Paid in Advance	\$	15.00
Balance	\$	0.
Entered into Ledger, page		or below

Diagram of Lot or Vault
 Lot No.
 Grave No.
 Section No.
 Sexton Neighon
Albert Richardson in ch.

To Funeral Charges	Total, \$	By Cash	\$
<u>Body shipped from Sluwood, Iowa by T. N. Rogers, & Co.</u>			
<u>Mo. train at Andover, Mo. 2/9/31 & took body to</u>			
<u>Baptist Church, R. S. O., Hanson Co. Mo. for service & interment.</u>			

Names of Pall Bearers
 Names of Lodges
 Lodge Insurance, \$
 Other Insurance, \$
 Names of Near Relatives Rollin S. White Geo. J. Madson
Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1928.

RECORD OF FUNERAL

Total No. 1444 Yearly No. 8

Date February 19, 1931

Name of Deceased Hugh H. Smith, Sr.

White (What Race) Pike County, Mo. (Where Born)

Charge to Martha Smith

Casket or Coffin \$300.00 \$160.00

Address Lammie, Mo.

Metallic Lining (State Kind) Outside Box (State Kind) Grave Vault (State Kind)

Order Given by How Secured

Burial Suit or Dress Burial Slippers and Hose Engraving Plate

Date of Funeral Feb. 19, 1931

Embalming Body (with Fluid) Dressing Body, \$ Shaving, \$ Hair Dressing

Residence Quincy, Mo. State Mo.

Use of Folding Chairs " Candelabrum, \$ Candles, \$

Place of Death Home

Door Badge, \$ Gloves, \$ Hearse \$15.00

Funeral Services at Home

Auto Limousines to Cemetery, @ \$ Autos to R. R. Station, @ \$

Time of Funeral Service 2:30 P.M.

Other Vehicle Service Aeroplane Service Death Notices in Newspapers

Clergyman W. E. Hall

(Names of Newspapers) Flowers, \$ Rental of Plants, \$

Certifying Physician C. E. Sappington

Other Decorations Outlay for Lot

His Residence Quincy

Opening Grave or Vault Lining Grave with Evergreen or Muslin

Number of Burial Certificates Cause of Death Radio (Primary) Arteria (Secondary)

Matting, \$ Tent Rental, \$ Use of Lowering Device

Date of Death Feb. 17, 1931

Rental of Vault Outlay for Shipping Charges Removal Charges

Occupation of the Deceased Lammie - retired

Incineration Personal Services Singers

Single or Married Widowed Religion

Church Charges, \$ Minister, \$ Telegrams and Telephone Charges

Date of Birth April 9, 1845

Pall Bearer Service

Age 85 Years 10 Months 8 Days

Total Footing of Bill \$273.00

Name of Father Hugh Smith

By Amount Paid in Advance Balance

His Birthplace Unknown

Entered into Ledger, page or below

Name of Mother E. Lewis (Maiden Name)

Her Birthplace

Body to be Shipped to

Size and Style of Casket or Coffin 3000 Lt. Sp.

Oct. Manufactured by W. H. Cash

Interment at Lammie Rose Hill Cemetery

Lot No. 391

Grave No. 2

Section No.

Diagram of Lot or Vault

Table with columns for To Funeral Charges (Total), and By Cash

Names of Pall Bearers J. B. Batey, J. W. Brown, C. C. ... Names of Lodges S. A. G. E. S. ... Lodge Insurance, \$... Names of Near Relatives ...

RECORD OF FUNERAL

Total No. 1446 Yearly No. 109 Date March 23 1931
 Name of Deceased Walter Eugene Smith White, Bloomington Twp., Decatur Co.
(What Race) (Where Born)
 Husband---Wife---Widow---Son---Daughter of } Nelson and Maggie Smith

Charge to Nelson Smith
 Address Zamoni Iowa
 Order Given by Nelson Smith
 How Secured _____
 Date of Funeral Mon. 3/23-31
 Residence Bloomington Twp., Decatur Co., Iowa
 Place of Death Iowa
 Funeral Services at Elk Chapel Church
 Time of Funeral Service 2 P.M.
 Clergyman _____
 Certifying Physician G. M. Walker
 His Residence Milledale, Iowa
 Number of Burial Certificate _____
 Cause of Death Pneumonia; Influenza
(Primary) (Secondary)
 Date of Death 3/21-31
 Occupation of the Deceased None
 Single or Married _____ Religion _____
 Date of Birth Feb. 10, 1931
 Age 0 Years 1 Month 11 Days
 Name of Father Nelson Smith
 His Birthplace Jefferson Co., Wis.
 Name of Mother Maggie Corll
(Maiden Name)
 Her Birthplace Putnam Co., Mo.
 Body to be Shipped to _____
 Size and Style of Casket or Coffin 150-40
W. Lundberg
 Manufactured by Robt. Custer Co.
 Interment at Elk Chapel Cemetery

Casket or Coffin		\$ <u>25</u> 00
Metallic Lining	<small>(State Kind)</small>	
Outside Box	<small>(State Kind)</small>	XX
Grave Vault	<small>(State Kind)</small>	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with _____ Fluid)		5 00
Dressing Body, \$ _____	Shaving, \$ _____	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$ _____	Candles, \$ _____	
Door Badge, \$ _____	Gloves, \$ _____	
Hearse		
Auto Limousines to Cemetery <u>2</u> @ \$ _____		XX
Autos to R. R. Station	@ \$ _____	
Other Vehicle Service		
Acroplane Service		
Death Notices in _____ Newspapers		
<small>(Names of Newspapers)</small>		
Flowers, \$ _____	Rental of Plants, \$ _____	6 00
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$ _____	Tent Rental, \$ _____	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		5 00
Singers		
Church Charges, \$ _____	Minister, \$ _____	
Telegrams and Telephone Charges		
Pal Bearer Service		
Total Footing of Bill		\$ <u>41</u> 00
By Amount Paid in Advance		\$ _____
Balance		\$ _____
Entered into Ledger, page _____		or below _____

Diagram of Lot or Vault

Lot No. _____
 Grave No. _____
 Section No. _____

	Total, \$	
To Funeral Charges	\$	By Cash
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$

Names of Pall Bearers _____
 Names of Lodges _____
 Lodge Insurance, \$ _____
 Names of Near Relatives _____
Funeral Director
William S. White Other Insurance, \$ _____
 Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1931.

RECORD OF FUNERAL

Total No. 1447 Yearly No. 11 Date March 26, 1931

Name of Deceased Berttha (Squidhanson) Johnson White, Lorden Buge, Norway
(What Race) (Where Born)

Husband---
 Wife---Widow
 Son---Daughter of
Niels Johnson

Charge to Santa Home

Address S. L. O. Lapp

Order Given by S. L. O. Lapp

How Secured

Date of Funeral 3/26/31

Residence W. H. Thomas, Fayette, Decatur Co., Ia

Place of Death Res.

Funeral Services at E. Norwegian Church

Time of Funeral Service 12:30 P. M.

Clergyman T. J. Ball

Certifying Physician Dr. E. S. Smith

His Residence Fammi, Iowa

Number of Burial Certificates

Cause of Death Embryal Hemorrhage; Anterior
(Primary) (Secondary)

Date of Death 3/25/31

Occupation of the Deceased At home

Single or Married Single Religion S. D. S.

Date of Birth Feb. 18/50

Age 81 Years 3 Months _____ Days

Name of Father Unknown

His Birthplace

Name of Mother

Her Birthplace

Body to be Shipped to

Size and Style of Casket or Coffin 701 - 6/3

Manufactured by Cong. Cope

Interment at West Hill Cemetery

Diagram of Lot or Vault

S. E. x 7.11 - Long O. De Long

Lot No. 149

Grave No. 2

Section No.

Casket or Coffin	\$ 75.00
Metallic Lining (State Kind)	
Outside Box (State Kind)	XX
Grave Vault (State Kind)	
Burial Suit or Dress	5.00
Burial Slippers and Hose	5.00
Engraving Plate	
Embalming Body (with Fluid)	25.00
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	10.00
Auto Limousines to Cemetery! @ \$	XX
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
<small>(Names of Newspapers)</small>	
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	8.00
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	XX
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill \$ 122.50	
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers Prof. Dilla, Frank Karstun, Billie Harris, Mattie Sweeney, Jr. & Alma Sweeney

Names of Lodgers S. E. S. S. S. Will Sweeney, Geo. Sweeney, Mrs. Albert Marshall

Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Funeral Director G. S. White; Geo. J. Madson

RECORD OF FUNERAL

Total No. 1448 Yearly No. 12 Date March 29 1931
 Name of Deceased Martin Miller Turpen (What Race) White (Where Born)

Husband...
 Wife---Widow
 Son---Daughter of

Charge to Mrs. M. M. Turpen
 Address Independence, Mo.

Order Given by
 How Secured

Date of Funeral 3/29-31
 Residence Independence, Mo.
 Place of Death Independence, Mo.

Funeral Services at Pleasanton, Iowa
 Time of Funeral Service 3:30 P.M.
 Clergyman N. A. Powell, Derry, White

Certifying Physician Dr. L. S. Cook, Nye, Iowa
 His Residence

Number of Burial Certificate
 Cause of Death St. Mary's Cancer Hospital
 (Primary) (Secondary)

Date of Death
 Occupation of the Deceased Minister
 Single or Married Married Religion S. O. S.

Date of Birth
 Age 77 Years Months Days
 Name of Father

His Birthplace
 Name of Mother (Maiden Name)

Her Birthplace
 Body to be Shipped to Iowa - J. L. Latta
Independence, Mo.

Size and Style of Casket or Coffin
 Manufactured by

Interment at Pleasanton, Iowa Cemetery

Diagram of Lot or Vault
 Lot No.
 Grave No.
 Section No.

Casket or Coffin \$	
Metallic Lining	..... (State Kind)	
Outside Box	..... (State Kind)	
Grave Vault	..... (State Kind)	
Burial Suit or Dress	.....
Burial Slippers and Hose	.....
Engraving Plate	.....
Embalming Body (with Fluid)	.....
Dressing Body, \$	Shaving, \$	
Hair Dressing	.....
Use of Folding Chairs	.....
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse	.....	15.00
Auto Limousines to Cemetery @ \$	.....	10.00
Autos to R. R. Station @ \$	.....
Other Vehicle Service	.....
Aeroplane Service	.....
Death Notices in Newspapers	..... (Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	
Other Decorations	.....
Outlay for Lot	.....
Opening Grave or Vault	.....
Lining Grave with Evergreen or Muslin	.....
Matting, \$	Tent Rental, \$	
Use of Lowering Device	.....
Rental of Vault	.....
Outlay for Shipping Charges	.....
Removal Charges	.....
Incineration	.....
Personal Services	.....	15.00
Singers	.....
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges	.....
Full Bearer Service	.....
Total Footing of Bill	.....	40.00
By Amount Paid in Advance	.....
Balance	.....
Entered into Ledger, page	.....	or below

To Funeral Charges Total, \$
 Body Prepared and Shipped to us by J. L. Latta, Independence, Mo.
 Received at Davis City on 2:11 P.M. train March 29, 1931
 Taken via funeral coach direct to Pleasanton, Iowa for service
 at Church and interment

Names of Pall Bearers
 Names of Lodges
 Lodge Insurance \$
 Funeral Director Rollin J. White Other Insurance \$
 Names of Near Relatives Rev. G. Madson

RECORD OF FUNERAL

Total No. 425 Yearly No. 14 Date May 7 1931

Name of Deceased Vernon L. Cole (What Race) _____ (Where Born) _____
 Husband---
 Wife---Widow
 Son---Daughter of M. & Mrs. Gilbert Cole

Charge to Gilbert Cole
 Address 20th. Ave., Law.
 Order Given by _____

How Secured _____
 Date of Funeral May 7, 1931
 Residence 20th. Ave., Ga.
 Place of Death _____
 Funeral Services at Alma Dietrich, Mrs. Lawman
 Time of Funeral Service 3 P.M.
 Clergyman John Rawns, John Lane
 Certifying Physician _____

His Residence 20th. Ave.
 Number of Burial Certificate _____
 Cause of Death Poison (took Pills)
 (Primary) (Secondary)
 Date of Death May 6, 1931
 Occupation of the Deceased _____

Single or Married _____ Religion _____
 Date of Birth _____
 Age 1 Years 6 Months _____ Days
 Name of Father Gilbert Cole
 His Birthplace _____
 Name of Mother _____
 (Maiden Name)

Her Birthplace _____
 Body to be Shipped to _____
 Size and Style of Casket or Coffin _____
 Manufactured by _____
 Interment at Lamoni - Rose Hill Cemetery

Lot No. 597
 Grave No. A
 Section No. _____
 Diagram of Lot or Vault
SECTION - Longo De Long

Casket or Coffin.....	\$	
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
" " Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		5 00
Auto Limousines to Cemetery... @ \$.....		
Autos to R. R. Station... @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		
(Names of Newspapers)		
Flowers, \$..... Rental of Plants, \$.....		2 00
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		5 00
Lining Grave with Evergreen or Muslin.....		
Matting, \$..... Tent Rental, \$.....		
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		12 00
Singers.....		
Church Charges, \$..... Minister, \$.....		
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
Total Footing of Bill.....	\$	27 00
By Amount Paid in Advance.....	\$	
Balance.....	\$	
Entered into Ledger, page..... or below		

To Funeral Charges.....	Total, \$	By Cash.....	\$
.....
.....
.....
.....

Names of Pall Bearers Margaret A. Steyer, Doris Watt, Ethel Anthony, Vera Kline
 Names of Lodges _____
 SINGERS: - Lois Barrows, Beatrice Lawson, Ella White
 Lodge Insurance, \$..... Other Insurance, \$.....
 Names of Near Relatives Rollin D. White, Leo W. Maddox

RECORD OF FUNERAL

Total No. 1451 Yearly No. 15 Date May 27, 1931
 Name of Deceased Rose May Edgington White Union County, Iowa
 Husband--
 Wife--Widow
 Son--Daughter of } Clyde Edward Edgington (Where Born)

Charge to Mrs. D. T. Grump
 Address ..
 Order Given by ..
 How Secured Contract
 Date of Funeral May 27, 1931
 Residence Jama, Iowa
 Place of Death Res.
 Funeral Services at Res.
 Time of Funeral Service 2 P.M.
 Clergyman J. J. Bell
 Certifying Physician E. G. Jure
 His Residence Jama, Iowa
 Number of Burial Certificate ..
 Cause of Death Parasitosis - Child Birth
 (Primary) (Secondary)
 Date of Death May 25, 1931
 Occupation of the Deceased at home
 Single or Married Married Religion ..
 Date of Birth Feb. 8, 1889
 Age 42 Years 2 Months 7 Days
 Name of Father Drewell Perry
 His Birthplace Unknown
 Name of Mother .. (Maiden Name)
 Her Birthplace ..
 Body to be Shipped to ..
 Size and Style of Casket or Coffin #3450
Inspection Home - 217 North P.
 Manufactured by W. H. Casket Co.
 Interment at W. H. Hill Cemetery

Casket or Coffin.....	\$ 196 00
Metallic Lining.....	(State Kind)
Outside Box.....	(State Kind) xx
Grave Vault.....	(State Kind)
Burial Suit or Dress.....	3 00
Burial Slippers and Hose.....	
Engraving Plate.....	
Embalming Body (with..... Fluid)	25 00
Dressing Body, \$..... Shaving, \$.....	
Hair Dressing.....	
Use of Folding Chairs.....	6 00
" " Candelabrum, \$..... Candles, \$.....	11 00
Door Badge, \$..... Gloves, \$.....	
Hearse.....	15 00
Auto Limousines to Cemetery.. @ \$.....	
Autos to R. R. Station..... @ \$.....	
Other Vehicle Service.....	
Aeroplane Service.....	
Death Notices in..... Newspapers.....	
(Names of Newspapers)	
Flowers, \$..... Rental of Plants, \$.....	5 00
Other Decorations.....	
Outlay for Lot.....	
Opening Grave or Vault.....	8 00
Lining Grave with Evergreen or Muslin.....	
Matting, \$..... Tent Rental, \$.....	
Use of Lowering Device.....	
Rental of Vault.....	
Outlay for Shipping Charges.....	
Removal Charges.....	
Incineration.....	
Personal Services.....	xx
Singers.....	
Church Charges, \$..... Minister, \$.....	
Telegrams and Telephone Charges.....	
Pall Bearer Service.....	
Total Footing of Bill.....	\$ 196 00
By Amount Paid in Advance.....	\$.....
Balance.....	\$.....
Entered into Ledger, page..... or below.....	

Lot No. 119
 Grave No. 4
 Section No.

Diagram of Lot or Vault
52 x 10 ft - Large W. C. Long

To Funeral Charges..... Total, \$.....	By Cash..... \$.....
.....
.....
.....
.....
.....
.....
.....
.....

Names of Pall Bearers Ray Johnson, Henry Allen, Carl Roberts, Evan W. Debraugh, Wm. Stuck, Jack Bowling
 Names of Lodges S. I. N. G. E. S. - 1st. May - Hickman - Emily Hawthorn
 Lodge Insurance \$.....
 Funeral Director A. J. White Other Insurance \$.....
 Names of Near Relatives Geo. H. Madson

RECORD OF FUNERAL

Total No. 1452 Yearly No. 16 Date June 24, 1931

Name of Deceased. Clara E. Blair (What Race) White (Where Born) Mo.

Charge to Mrs. Clara E. Blair

Address Geo. M. Blair

Order Given by Geo. M. Blair

How Secured _____

Date of Funeral June 24, 1931

Residence Independence, Mo.

Place of Death _____

Funeral Services at Lamon - Co. Station

Time of Funeral Service 2:30 P.M.

Clergyman Blair, James H. Y. Biggs

Certifying Physician Chas. S. Sutsch

His Residence Independence, Mo.

Number of Burial Certificate _____

Cause of Death M. y.ocarditis (Primary) (Secondary) _____

Date of Death June 21, 1931

Occupation of the Deceased _____

Single or Married Married Religion _____

Date of Birth _____

Age 80 Years _____ Months _____ Days _____

Name of Father _____

His Birthplace _____

Name of Mother _____ (Maiden Name) _____

Her Birthplace _____

Body to be Shipped to _____

Size and Style of Casket or Coffin _____

Manufactured by _____

Interment at Lamon - Rest Hill Cemetery

Lot No. 426

Grave No. 4

Section No. _____

Diagram of Lot or Vault _____

S. E. X. Tab - Lanzo D. E. Long

Casket or Coffin	\$	
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with _____ Fluid)		
Dressing Body, \$ _____ Shaving, \$ _____		
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$ _____ Candles, \$ _____		
Door Badge, \$ _____ Gloves, \$ _____		
Hearse		15.00
Auto Limousine to Cemetery, @ \$ _____		
Autos to R. R. Station, @ \$ _____		
Other Vehicle Service		
Aeroplane Service		
Death Notices in _____ Newspapers		
(Names of Newspapers)		
Flowers, \$ _____ Rental of Plants, \$ _____		
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		8.00
Lining Grave with Evergreen or Muslin		
Matting, \$ _____ Tent Rental, \$ _____		
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		10.00
Singers		
Church Charges, \$ _____ Minister, \$ _____		
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill	\$	33.00
By Amount Paid in Advance	\$	
Balance	\$	
Entered into Ledger, page _____ or below _____		

To Funeral Charges Total, \$ _____ By Cash \$ _____

Body Prepared & Shipped from Independence, Mo
via R. R. arrive Lamon 6:45 P.M. 6/23-31

Names of Pall Bearers W. D. Hopkins, W. A. Sennawath, C. J. Church, Oliver Taylor, Andrew Anderson

Names of Lodges S. N. G. E. S. Roy Chevilly, Colton Lewis, Fern Hayden, Great Callington, L. S. D. Lewis

Lodge Insurance, \$ _____ Other Insurance, \$ _____

Names of Near Relatives R. Allen J. White, Max White

RECORD OF FUNERAL

Total No. 1453 Yearly No. 17 Date Aug. 13, 1931
 Name of Deceased Thomas White Chassey (White) Long Beach, New Jersey
 Husband of Ottumma Chassey (What Race) (Where Born)
 Wife—Widow
 Son—Daughter of

Charge to DeCATUR County
 Address N. A. Tappert
 Order Given by N. A. Tappert
 How Secured
 Date of Funeral 8/12-31
 Residence Lamoni, Iowa
 Place of Death " "
 Funeral Services at Residence
 Time of Funeral Service 2 P. M.
 Clergyman B. Linn Jansen
 Certifying Physician H. M. Hill
 His Residence Lamoni, Iowa
 Number of Burial Certificate
 Cause of Death Heart failure of Brain
 (Primary) (Secondary)
 Date of Death Aug 11, 1931
 Occupation of the Deceased Station Attendant
 Single or Married Married Religion None
 Date of Birth July 24, 1848
 Age 83 Years 0 Months 17 Days
 Name of Father Unknown
 His Birthplace
 Name of Mother
 (Maiden Name)
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin #701
Sh. Tang. Crepe
 Manufactured by Ms. Van
 Interment at Lamoni - Ros. Hill Cemetery

Casket or Coffin	\$ <u>60.00</u>
Metallic Lining	(State Kind)
Outside Box	(State Kind) <u>XX</u>
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	<u>XX</u>
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	<u>XX</u>
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	<u>XX</u>
Auto Limousines to Cemetery, @ \$	
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in	Newspapers
	(Names of Newspapers)
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	<u>XX</u>
Personal Services	
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ <u>60.00</u>
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

Lot No. 598 S
 Grave No. 700 1/2
 Section No.
 Diagram of Lot or Vault
S. E. X 700 - Long Beach

To Funeral Charges	Total, \$				
<u>Paid as Follows:</u>		<u>1931</u>			
		<u>Aug 12</u>	<u>Ch. by N. A. Tappert</u>	<u>30.00</u>	
		<u>13</u>	<u>Ch. by J. C. F. Long</u>	<u>30.00</u>	
			<u>of DeCATUR Co.</u>		

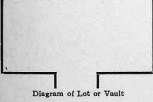
Names of Pall Bearers J. C. F. Lodge
 Names of Lodges
 Lodge Insurance, \$
 Funeral Director John S. White Geo. A. Madison
 Names of Next of Kin

RECORD OF FUNERAL

Total No. 1555 Yearly No. 19 Date Sept. 8 1931
 Name of Deceased Betty Louise Coulson White Harrison Co., Mo.
Husband--- (What Race) (Where Born)
 Son---Daughter of Lewis & Maude Coulson

Charge to... Lewis Coulson
 Address... Hartford, Mo.
 Order Given by Lewis Coulson
 How Secured Contract
 Date of Funeral Sept. 8 1931
 Residence Hamilton Exp., Harrison Co., Mo.
 Place of Death Res.
 Funeral Services at Low Rock Cemetery
 Time of Funeral Service 2:29 P.M.
 Clergyman
 Certifying Physician W.D. Bryley
 His Residence Coagville, Mo.
 Number of Burial Certificate
 Cause of Death Impetigo Neonatorum
(Primary) (Secondary)
 Date of Death 9-7-31
 Occupation of the Deceased
 Single or Married Single Religion
 Date of Birth 8-27-31
 Age... 0 Years... 0 Months... 11 Days
 Name of Father Lewis Coulson
 His Birthplace Harrison Co., Mo.
 Name of Mother Maude Hutton
(Maiden Name)
 Her Birthplace Harrison Co., Mo.
 Body to be Shipped to
 Size and Style of Casket or Coffin 150-70
Lampkin
 Manufactured by Rogers Casket Co.
 Interment at Low Rock Cemetery

Casket or Coffin		\$ 25.00
Metallic Lining		
Outside Box	(State Kind)	X X
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		X X
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		X X
Auto Limousines to Cemetery.. @ \$		X X
Autos to R. R. Station .. @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		5.00
Personal Services		
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$ 30.00
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page		or below



Lot No.
 Grave No.
 Section No.

To Funeral Charges..... Total, \$	By Cash..... \$

Names of Pall Bearers
 Names of Lodges
 Lodge Insurance, \$
General Director
 Names of Near Relatives
 Other Insurance, \$
 Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1922.

RECORD OF FUNERAL

Total No. 1559 Yearly No. 22 Date Oct. 21, 1931

Name of Deceased Mrs. Lura Spaulding (What Race) White (Where Born) Wisconsin
Husband Martin J. Spaulding
Wife Widow
Son Daughter of

Charge to Lada, "N. Dak."
Address Lada, "N. Dak."
Order Given by Gen. Spaulding
How Secured _____
Date of Funeral Oct. 21, 1931
Residence Lada, So. Dak.
Place of Death "Laramie" - White Horse
Funeral Services at Laramie - White Horse
Time of Funeral Service 2 P. M.
Clergyman W. G. Snell, G. E. Fayer, and
Certifying Physician A. B. Lund
His Residence Lada, N. Dakota
Number of Burial Certificate _____
Cause of Death Contaminated Cataract
Date of Death Oct. 16, 1931
Occupation of the Deceased Housewife
Single or Married Married Religion S. O. S.
Date of Birth June 6, 1863
Age 68 Years 4 Months 10 Days
Name of Father Mrs. Fawcett
His Birthplace Wisconsin
Name of Mother Mrs. M. A. Stevens
Her Birthplace England
Body to be Shipped to Laramie - N. Dak.
Size and Style of Casket or Coffin _____

Casket or Coffin		
Metallic Lining <u>Black - See Box Allowance</u>		<u>90 00</u>
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with _____ Fluid)		
Dressing Body, \$ _____	Shaving, \$ _____	
Hair Dressing		
Use of Folding Chairs		<u>XX</u>
" " Candelabrum, \$ _____	Candles, \$ _____	
Door Badge, \$ _____	Gloves, \$ _____	
Hearse		<u>15 00</u>
Auto Limousines to Cemetery... @ \$ _____		<u>XX</u>
Autos to R. R. Station... @ \$ _____		<u>XX</u>
Other Vehicle Service		
Aeroplane Service		
Death Notices in _____ Newspapers		
(Names of Newspapers)		
Flowers, \$ _____	Rental of Plants, \$ _____	
Other Decorations		
Outlay for Lot		<u>35 00</u>
Opening Grave or Vault		<u>10 00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$ _____	Tent Rental, \$ _____	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<u>10 00</u>
Singers		
Church Charges, \$ _____	Minister, \$ _____	
Telegrams and Telephone Charges		
Pall Bearer Service		
Express <u>Ch. Oak, N. Dak.</u>	<u>from Independence, Mo.</u>	<u>48</u>
Total Footing of Bill		<u>\$76 00 48</u>
By Amount Paid in Advance		\$ _____
Balance		\$ _____
Entered into Ledger, page _____	or below _____	

Interment at Laramie, So. Dak. - Rose Hill Cemetery
Lot No. 465
Grave No. 4
Section No. _____
Diagram of Lot or Vault See Text - Long O & Long

To Funeral Charges	Total, \$	By Cash	\$
<u>Body Shipped from Lada, N. Dak., Oct. 18, 2 P. M.</u>		<u>2 P. M.</u>	
<u>Arrive Laramie, Oct. 20, 2 P. M.</u>		<u>2 P. M.</u>	

Names of Pall Bearers A. A. Hopkins, K. A. Dwyer, Fred L. Springer, Walter Hayes, O. E. Grubb, L. H. Walla
Names of Lodges S. I. A. & E. S. - Lada, Dak. - Mrs. Lane, Mrs. Arthur Lane, Prusich
Lodge Insurance, \$ _____ Other Insurance, \$ _____
Names of Near Relatives William S. White, Mrs. M. Nelson, Mrs. J. O. White

RECORD OF FUNERAL

Total No. 1561 Yearly No. 25 Date Feb. 16, 1931
 Name of Deceased Mary E. Ellen Messerli White West Union, Iowa
 (What Race) (Where Born)
 Husband--
 Wife--Widow John Messerli
 Son--Daughter of Wm. - La. Rose, Ohio

Charge to.....
 Address West Union, Iowa
 Order Given by Mrs. D. A. Dancer
 How Secured.....
 Date of Funeral Feb. 17, 1931
 Residence West Union, Iowa
 Place of Death Famou, Iowa
 Funeral Services at West Union, Ia.
 Time of Funeral Service.....
 Clergyman.....
 Certifying Physician C. E. Sweeney
 His Residence Famou, Iowa
 Number of Burial Certificate.....
 Cause of Death Myocardia Infarct
 (Primary) (Secondary)
 Date of Death Feb. 13, 1931
 Occupation of the Deceased Housewife
 Single or Married Married Religion.....
 Date of Birth Jan. 12, 1869
 Age 62 Years 10 Months 1 Days
 Name of Father David H. Hall
 His Birthplace Benton, N. York, Wisconsin
 Name of Mother Mary Kuehn
 Her Birthplace Wesfeld, Prussia
 Body to be Shipped to West Union, Ia.
 Size and Style of Casket or Coffin #3100 Oct.
St. Alban
 Manufactured by East Casdel Co.
 Interment at West Union, Ia. Cemetery

Casket or Coffin <u>#3100</u>	Services Exp. \$	<u>300.00</u>
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	
Grave Vault.....	<u>Iowa</u> (State Kind)	<u>1.00 00</u>
Burial Suit or Dress.....		
Burial Slippers and Hose.....		<u>3.00</u>
Engraving Plate.....		
Embalming Body (with..... Fluid)		<u>XX</u>
Dressing Body, \$..... Shaving, \$.....		
Hair Dressing.....		
Use of Folding Chairs.....		
“ “ Candelabrum, \$..... Candles, \$.....		
Door Badge, \$..... Gloves, \$.....		
Hearse.....		
Auto Limousines to Cemetery...@ \$.....		
Autos to R. R. Station.....@ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....		
(Names of Newspapers)		
Flowers, \$.....	Rental of Plants, \$.....	
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		
Lining Grave with Evergreen or Muslin.....		
Matting, \$.....	Tent Rental, \$.....	
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		<u>XX</u>
Singers.....		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
<u>Limited Credit to West Union</u>		
<u>526 Mrs. Q. Co.</u>		
<u>Personal Traveling Exp. \$</u>		
Total Footing of Bill.....		<u>\$ 761.10</u>
By Amount Paid in Advance.....		\$.....
Balance.....		\$.....
Entered into Ledger, page.....		or below.....

To Funeral Charges..... Total, \$.....
Body prepared & transferred via auto coach to West Union Ia.
on Feb. 14. Case turned over to Wallace Buchanan, West Union
Funeral Director for services to be held 2/17.
Burial charged \$5.00 for conducting services \$25.00 Paid by ad.

Names of Pall Bearers.....
 Names of Lodges.....
 Lodge Insurance, \$.....
 Funeral Director Rollin J. White
 Names of Near Relatives.....
 Implied by F. J. PHINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1562 Yearly No. 26 Date Dec. 21 1931

Name of Deceased E. Irene Holloway White (What Race) Utah (Where Born)
Husband... L. H. Holloway
Wife...
Son... Daughter of

Charge to "
Address Lamm, Swa
Order Given by L. H. Holloway
How Secured
Date of Funeral 12/21/31
Residence Colorado Springs, Colo.
Place of Death
Funeral Services at Lamm - Colorado
Time of Funeral 2 P.M.
Clergyman J. L. Lewis, Wm. Paul, Asst.
Certifying Physician H. B. Helmer, Brown
His Residence Colo. Spgs, Colo.
Number of Burial Certificate
Cause of Death Carbolic Acid Poisoning Possible
(Primary) (Secondary)
Date of Death Dec. 17, 1931
Occupation of the Deceased Stenographer
Single or Married Single Religion R. D. S.
Date of Birth March 21, 1910
Age 21 Years 8 Months 26 Days
Name of Father L. H. Holloway
His Birthplace Unknown
Name of Mother
(Maiden Name)

Her Birthplace
Body to be Shipped to Lamm
Durston Lumber Home, Colo. Spgs.
Size and Style of Casket or Coffin
Manufactured by
Interment at Lamm, La. Rose Hill Cemetery

Lot No. 1537
Grave No. 4
Section No.
Diagram of Lot or Vault
Extended - Longa De Long

Casket or Coffin	\$	
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with	Fluid)	
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<u>1.00</u>
Auto Limousines to Cemetery @ \$		<u>xx</u>
Autos to R. R. Station @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
(Names of Newspapers)		
Flowers, \$	Rental of Plants, \$	<u>7.00</u>
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		<u>8.00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	
Use of Lowering Device		
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<u>1.00</u>
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		<u>7.00</u>
By Amount Paid in Advance		
Balance		
Entered into Ledger, page		or below

To Funeral Charges	Total, \$	By Cash	\$
<u>Body arrived Durston City 12/20/31 - 8 A.M. With team with Lumber Home</u>			
<u>Shipped by Express from Durston Lumber Home, Colo. Spgs, Colo.</u>			
<u>Informant - Dr. E. E. Conway, Colo. Spgs, Colo.</u>			

Names of Pall Bearers Bob Kelly, Dick Anderson, Sam Smith, Kenneth White, Max White, Richard Spang
 Names of Ushers J. P. B. S. C. Emily Anthony, Carl Paul, Juanita Moran, Dwight McPherson
J. P. B. S. C. - Vernon Carr, Eric Hansen, Ben Laing, Wilson Anderson, Elmer Kane
 Lodge Insurance, \$ 100.00 Funeral Director John S. White Other Insurance, \$ 100.00 James Ballantyne
 Names of Near Relatives See A. Madison

RECORD OF FUNERAL

Total No. 1564 Yearly No. 2 Date January 11 1932

Name of Deceased Mary Ann May Willey, White, Adams, Iowa
Husband - Reuben Willey (What Race) (Where Born)

Charge to Burlington Iowa
Address Burlington Iowa
Order Given by Burlington Iowa
How Secured
Date of Funeral 1/11/32
Residence Burlington Iowa
Place of Death Detroit Mich
Funeral Services at White Home
Time of Funeral Service 2 P.M.
Clergyman Chas. Paul and S.D. Williams
Certifying Physician J. H. Stone
His Residence Detroit Mich
Number of Burial Certificate 1
Cause of Death Carcinoma Metastatic to Sp. Cord
Date of Death 1/9/32
Occupation of the Deceased Housewife
Single or Married Married Religion
Date of Birth 11/22/93
Age 39 Years 2 Months 17 Days
Name of Father Wm. Stumm
His Birthplace Ia
Name of Mother Martha J. Swanger
(Maiden Name)
Her Birthplace
Beds to be Shipped to Sam
Mrs. E. Anderson, Detroit, Mich
Size and Style of Casket or Coffin Metallie H.C.
Manufactured by
Interment at Lamar - Rose Hill Cemetery

Casket or Coffin	\$	
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	
Grave Vault	<u>Iowa</u> (State Kind)	<u>100.00</u>
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with Fluid)		
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		
" " Candelabrum, \$	Candles, \$	
Door Badge, \$	Gloves, \$	
Hearse		<u>15.00</u>
Auto Limousines to Cemetery! @ \$		<u>xx</u>
Autos to R. R. Station @ \$		
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
	(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$	<u>13.00</u>
Other Decorations		
Outlay for Lot		<u>40.00</u>
Opening Grave or Vault		<u>10.00</u>
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	<u>xx</u>
Use of Lowering Device		<u>xx</u>
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		
Incineration		
Personal Services		<u>10.00</u>
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		<u>1.15</u>
Pall Bearer Service		
Total Footing of Bill		<u>189.15</u>
By Amount Paid in Advance		
Balance		
Entered into Ledger, page		or below

Lot No. 1557
Grave No. 2
Section No.

To Funeral Charges	Total, \$			

By Cash	\$	

Names of Pall Bearers Earl Young, Earl Olson, Roy M. Stumas, A.R. Lebeck, Walter Hayes, Neple Kruse
Names of Lodges S. I. N. BEAS - Maggie Anthony, Jean Bellamy, Alice Lane, Marva Mills
Lodge Insurance, \$
Other Insurance, \$
Names of Near Relatives Robin D. White, Geo. N. Modson

RECORD OF FUNERAL

Total No. 1565 Yearly No. 3 Date March 9, 1932
 Name of Deceased Helen Turner White Anderson
Husband (What Race) (Where Born)
 Wife--Widow Robert Turner
 Son--Daughter of {

Charge to _____
 Address _____
 Order Given by Cliff Anderson
 How Secured cash
 Date of Funeral March 7, 1932
 Residence Zamoni Iowa
 Place of Death See Home
 Funeral Services at White Home
 Time of Funeral Service 1:30 P.M.
 Clergyman J. J. Gray
 Certifying Physician J. H. King
 His Residence Zamoni, Iowa
 Number of Burial Certificate _____
 Cause of Death Pneumonia embolism
(Primary) (Secondary)
 Date of Death March 7, 1932
 Occupation of the Deceased Homemaker
 Single or Married Married Religion _____
 Date of Birth Apr. 13, 1847
 Age 84 Years 4 Months 19 Days
 Name of Father Anderson
 His Birthplace _____
 Name of Mother _____
(Maiden Name)
 Her Birthplace _____
 Body to be Shipped to _____
 Size and Style of Casket or Coffin #3500 2 1/2
 Manufactured by Robt. Cash Co.
 Interment at Zamoni, Iowa Cemetery _____
 Lot No. _____
 Grave No. _____
 Section No. _____
 Diagram of Lot or Vault

Casket or Coffin #3500	\$ 220.00
Metallic Lining (State Kind)	
Outside Box (State Kind)	
Grave Vault <u>Low</u> (State Kind)	100.00
Burial Suit or Dress	10.00
Burial Slippers and Hose	2.50
Engraving Plate	
Embalming Body (with _____ Fluid)	xx
Dressing Body, \$ _____ Shaving, \$ _____	
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$ _____ Candles, \$ _____	
Door Badge, \$ _____ Gloves, \$ _____	xx
Hearse	xx
Auto Limousines to Cemetery @ \$ _____	
Autos to R. R. Station @ \$ _____	
Other Vehicle Service	
Acroplane Service	
Death Notices in _____ Newspapers	
<small>(Names of Newspapers)</small>	
Flowers, \$ _____ Rental of Plants, \$ _____	11.00
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$ _____ Tent Rental, \$ _____	
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	
Incineration	
Personal Services	xx
Singers	
Church Charges, \$ _____ Minister, \$ _____	
Telegrams and Telephone Charges	2.10
Pall Bearer Service	
Total Footing of Bill	\$ 346.60
By Amount Paid in Advance	\$ _____
Balance	\$ _____
Entered into Ledger, page _____ or below	

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers A. C. Hub, Nept. Grewer, Walter Hoyer, Raymond Smith, J. H. Smith, W. Turner
 Names of Lodges S. N. G. A. S., Grand Army, Sons of Liberty, Masonic Temple, Alice Lane
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Names of Funeral Director Walter S. White Deaf-Mutes Deaf-Mutes
Impplied by F. J. PHINEMAN, St. Louis, Mo., in the year 1923.

RECORD OF FUNERAL

Total No. 1569 Yearly No. 7 Date April 25 1932
 Name of Deceased Ira Albert Chamberlain (What Race) White (Where Born) Northampton, Indiana
 Husband---
 Wife---Widow
 Son---Daughter of Carroll Chamberlain

Charge to Lamar
 Address Lamar
 Order Given by ---
 How Secured Contract
 Date of Funeral April 24, 1932
 Residence Springfield, Co., Mo.
 Place of Death ---, Mo.
 Funeral Services at Imperial Rural Church
 Time of Funeral Service 9 A.M.
 Clergyman J. J. Bell
 Certifying Physician A. J. Byers
 His Residence Ballston, Va.
 Number of Burial Certificate ---
 Cause of Death Septicemic Prostatic Gland
 Date of Death April 24, 1932
 Occupation of the Deceased Farmer
 Single or Married Married Religion P.O.D.
 Date of Birth Feb. 22, 1877
 Age 55 Years 2 Months 2 Days
 Name of Father James Chamberlain
 His Birthplace ---, Pennsylvania
 Name of Mother ---
 Her Birthplace Lattin, Iowa
 Body to be Shipped to Waverport, Iowa
 Size and Style of Casket or Coffin # 3002
Half Couch, 2nd St.
 Manufactured by Gen. Caswell Co.
 Interment at --- Cemetery

Casket or Coffin	\$ 195.00
Metallic Lining	(State Kind)
Outside Box	Shipping Case (State Kind) XX
Grave Vault	(State Kind)
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	XX
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	F. Wife XX
Auto Limousines to Cemetery @ \$	
Autos to R. R. Station @ \$	
Other Vehicle Service	
Acroplane Service	
Death Notices in	Newspapers
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	17.12
Removal Charges	
Incineration	
Personal Services	XX
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ 211.12
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

Lot No. ---
 Grave No. ---
 Section No. ---

To Funeral Charges	Total, \$	By Cash	\$
Body Shipped via Express 6:40 A.M. Apr. 25 to of Mr. W. L. Linderick, Lumber, Waverport, Iowa			

Names of Pall Bearers Chas. Burchett, Carroll Elwick, Dave Hilliard, Edna Lewis, John Baker, Birdy Johnson
 Names of Lodges S. D. O. E. S. - Amanda Dwyer, Emma Ballantyne, Mrs. J. Alice Lane
 Lodge Insurance, \$ ---
 Names of Other Insurance ---
 Names of Near Relatives Rollin D. White, Lamar, Mo.

RECORD OF FUNERAL

Total No. 1570 Yearly No. 8 Date April 27, 1932

Name of Deceased Atta Viola M. Fickel (What Race) White (Where Born) 2670 Blain Place, Chicago
Husband Lloyd M. M. Fickel
Wife Widow
Son Daughter of

Charge to Chicago
Address Chicago
Order Given by Guid
How Secured Guid
Date of Funeral 4/27/32
Residence 2670 Blain Place, Chicago
Place of Death Res.
Funeral Services at Lamoni White Home
Time of Funeral Service 2 P.M.
Clergyman J. J. Sauer; J. H. Blain
Certifying Physician A. H. Jones
His Residence Chicago
Number of Burial Certificate 1
Cause of Death When Subnormal
(Primary) (Secondary)
Date of Death 4/27/32
Occupation of the Deceased Housewife
Single or Married Married Religion Methodist
Date of Birth _____
Age 27 Years 5 Months 28 Days
Name of Father _____
His Birthplace _____
Name of Mother _____
(Maiden Name)
Her Birthplace _____
Body to be Shipped to _____
Size and Style of Casket or Coffin _____
Manufactured by _____
Interment at Lamoni Ross Hill Cemetery
Lot No. 1538
Grave No. 213
Section No. _____
Diagram of Lot or Vault

1	2	3	4
	(S)		

S.K.F. & N. Long O. Long

Casket or Coffin	.....	\$
Metallic Lining	.....		(State Kind)
Outside Box	.....		(State Kind)
Grave Vault	.....		(State Kind)
Burial Suit or Dress	.....	
Burial Slippers and Hose	.....	
Engraving Plate	.....	
Embalming Body (with	.....		Fluid)
Dressing Body, \$	.....		Shaving, \$
Hair Dressing	.....	
Use of Folding Chairs	.....	
" " Candelabrum, \$	.....		Candles, \$
Door Badge, \$	.....		Gloves, \$
Hearse	.....		XX
Auto Limousines to Cemetery @ \$	.....	
Autos to R. R. Station @ \$	.....	
Other Vehicle Service @ \$	.....	
Aeroplane Service	.....	
Death Notices in	.....		Newspapers
(Names of Newspapers)			
Flowers, \$	.....		Rental of Plants, \$
Other Decorations	.....	
Outlay for Lot	.....		#1538 <u>12.00</u>
Opening Grave or Vault	.....		<u>2.00</u>
Lining Grave with Evergreen or Muslin	.....	
Mattng, \$	.....		Tent Rental, \$
Use of Lowering Device	.....		XX
Rental of Vault	.....	
Outlay for Shipping Charges	.....	
Removal Charges	.....	
Incineration	.....	
Personal Services	.....		<u>2.00</u>
Singers	.....	
Church Charges, \$	.....		Minister, \$
Telegrams and Telephone Charges	.....	
Pall Bearer Service	.....	
Total Footing of Bill	.....	\$
By Amount Paid in Advance	.....	\$
Balance	.....	\$
Entered into Ledger, page	.....		or below

To Funeral Charges Total \$ _____ By Cash \$ _____
Body Received 8:45 A.M. April 27, 1932 C.B.L.
Funeral - N. O. Ulmer - Funeral Director, Chicago

Names of Pall Bearers Frank Condit, Dewey White, Merton Hyden, Ray Johnson, Art Patton, Stanton Lyden
Names of Lodges _____
S.I.O.F.E.R.S.: Maggie Anthony, Sam Ballentine, Alice Lane, Marcella
Lodge Insurance, \$ _____ Other Insurance, \$ _____
Names of Near Relatives Wm. S. White, Mrs. N. Madson

RECORD OF FUNERAL

Total No. 1571 Yearly No. 9 Date May 13 1932

Name of Deceased William Stoll White (What Race) (Where Born)

Charge to E. D. Stoll
Address
Order Given by
How Secured cash
Date of Funeral May 13, 1932
Residence Independence, Mo.
Place of Death City
Funeral Services at White Home, L. L. Linn
Time of Funeral Service 2 P. M.
Clergyman W. E. Pratt, Ark. Linn, Ark.
Certifying Physician
His Residence Indep. Mo.
Number of Burial Certificate
Cause of Death
(Primary) (Secondary)

Date of Death
Occupation of the Deceased
Single or Married Married Religion R.O.S.
Date of Birth
Age Years Months Days
Name of Father
His Birthplace
Name of Mother
(Maiden Name)
Her Birthplace
Body to be Shipped to
Size and Style of Casket or Coffin

Manufactured by
Interment at L. L. Linn - Rose Hill Cemetery
Lot No. 383
Grave No. 3
Section No.

Diagram of Lot or Vault
5 ft x 10 ft - Long & Long

Casket or Coffin.....	\$	
Metallic Lining.....	(State Kind)	
Outside Box.....	(State Kind)	<u>7.00</u>
Grave Vault.....	(State Kind)	
Burial Suit or Dress.....		
Burial Slippers and Hose.....		
Engraving Plate.....		
Embalming Body (with..... Fluid)		
Dressing Body, \$.....	Shaving, \$.....	
Hair Dressing.....		
Use of Folding Chairs.....		<u>x x</u>
" " Candelabrum, \$.....	Candles, \$.....	
Door Badge, \$.....	Gloves, \$.....	
Hearse.....		
Auto Limousines to Cemetery / @ \$.....		<u>x x</u>
Autos to R. R. Station..... @ \$.....		
Other Vehicle Service.....		
Aeroplane Service.....		
Death Notices in..... Newspapers.....	(Names of Newspapers)	
Flowers, \$.....	Rental of Plants, \$.....	
Other Decorations.....		
Outlay for Lot.....		
Opening Grave or Vault.....		<u>8.00</u>
Lining Grave with Evergreen or Muslin.....		<u>x x</u>
Matting, \$.....	Tent Rental, \$.....	<u>x x</u>
Use of Lowering Device.....		
Rental of Vault.....		
Outlay for Shipping Charges.....		
Removal Charges.....		
Incineration.....		
Personal Services.....		<u>x</u>
Singers.....		
Church Charges, \$.....	Minister, \$.....	
Telegrams and Telephone Charges.....		
Pall Bearer Service.....		
<u>Use of General Home & all equipment</u>		
<u>Use of Casket & equipment</u>		
<u>Use of 1st class car</u>		
<u>Use of 1st class car</u>		
Total Footing of Bill.....		<u>20.00</u>
By Amount Paid in Advance.....		<u>35.00</u>
Balance.....		
Entered into Ledger, page.....	or below.....	

Funeral Charges.....	Total, \$.....	By Cash.....	\$.....
<u>Body prepared & service held in Independence Mo.</u>		<u>by Carson & Son</u>	
<u>Body brought to Linn via funeral coach</u>		<u>by Carson & Son</u>	

Names of Pall Bearers Ray Dinger, Frank Heston, Chas. Mann, R. A. Callaway, T. G. Kelley, Clarence Heide
Names of Lodges
Lodge Insurance, \$..... Other Insurance, \$.....
Names of Honor Bearers William S. White

RECORD OF FUNERAL

Total No. 1573 Yearly No. 4 Date May 23, 1932
 Name of Deceased Mark H. Stanley (What Race) White (Where Born) Mo.

Husband---
 Wife---Widow
 Son---Daughter of

Charge to E. Everett Stanley
 Address
 Order Given by
 How Secured Cash
 Date of Funeral May 23, 1932
 Residence Zachary, Iowa
 Place of Death Iowa City Hospital
 Funeral Services at Andrews' Church
 Time of Funeral Service 2 P.M.
 Clergyman Rev. De Long; Mr. Hilley
 Certifying Physician John C. Schlegler
 His Residence Iowa City, Iowa
 Number of Burial Certificate
 Cause of Death Diabetes Mellitus
 (Primary) (Secondary)
 Date of Death May 21, 1932
 Occupation of the Deceased
 Single or Married Unmarried Religion
 Date of Birth
 Age 57 Years Months Days
 Name of Father
 His Birthplace
 Name of Mother
 (Maiden Name)
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin #137 Or
 Manufactured by Frank C. Calkins Co.
 Interment at Andrews, Mo. Cemetery

Lot No.
 Grave No.
 Section No.

Diagram of Lot or Vault
SECTION Long & De Long

Casket or Coffin <u>#222</u>	\$ <u>150.00</u>
Metallic Lining (State Kind) <u>.....</u>	
Outside Box (State Kind) <u>.....</u>	<u>Xr.</u>
Grave Vault (State Kind) <u>.....</u>	
Burial Suit or Dress <u>.....</u>	<u>10.00</u>
Burial Slippers and Hose <u>.....</u>	
Engraving Plate <u>.....</u>	
Embalming Body (with Fluid) <u>.....</u>	<u>Xr.</u>
Dressing Body, \$ Shaving, \$ <u>.....</u>	
Hair Dressing <u>.....</u>	
Use of Folding Chairs <u>.....</u>	
" " Candelabrum, \$ Candles, \$ <u>.....</u>	
Door Badge, \$ Gloves, \$ <u>.....</u>	
Hearse <u>to Iowa City for Body</u>	<u>Xr.</u>
Auto Limousines to Cemetery @ \$ <u>.....</u>	<u>Xr.</u>
Autos to R. R. Station @ \$ <u>.....</u>	
Other Vehicle Service <u>.....</u>	
Aeroplane Service <u>.....</u>	
Death Notices in Newspapers <u>.....</u>	
Flowers, \$ Rental of Plants, \$ <u>.....</u>	<u>3.50</u>
Other Decorations <u>.....</u>	
Outlay for Lot <u>.....</u>	
Opening Grave or Vault <u>.....</u>	
Lining Grave with Evergreen or Muslin <u>.....</u>	<u>Xr.</u>
Matting, \$ Tent Rental, \$ <u>.....</u>	<u>Xr.</u>
Use of Lowering Device <u>.....</u>	<u>Xr.</u>
Rental of Vault <u>.....</u>	
Outlay for Shipping Charges <u>.....</u>	
Removal Charges <u>.....</u>	
Incineration <u>.....</u>	
Personal Services <u>.....</u>	<u>Xr.</u>
Singers <u>.....</u>	<u>Xr.</u>
Church Charges, \$ Minister, \$ <u>.....</u>	
Telegrams and Telephone Charges <u>.....</u>	
Pall Bearer Service <u>.....</u>	
Total Footing of Bill	\$ <u>165.50</u>
By Amount Paid in Advance	\$ <u>.....</u>
Balance	\$ <u>.....</u>
Entered into Ledger, page <u>.....</u> or below <u>.....</u>	

To Funeral Charges Total, \$	By Cash \$
<u>Body returned from Iowa City via Funeral Coach of \$2</u>	
<u>by Rev. De Long & Mrs. Madison</u>	
<u>Body Embalmed by Andrews' Church Mortuary</u>	

Names of Pall Bearers G. N. Phillips
 Names of Lodges
 DIRECTORS: Abraham, Jeanette, Burston, Ann Morgan, M. W. Elliott
 Lodge Insurance, \$ Other Insurance, \$
 Names of Near Relatives John J. White; Mrs. T. Madison

RECORD OF FUNERAL

Total No. 1574 Yearly No. 12 Date May 25 1934
 Name of Deceased Mary Elizabeth Smith, White, P. O. Box 60, Iowa
 (What Race) (Where Born)
 Husband...
 Wife...
 Son... Daughter of Thomas E. Smith

Charge to...
 Address...
 Order Given by...
 How Secured Not Contract Agreement
 Date of Funeral May 25, 1934
 Residence 2. Gibson Co., Mo.
 Place of Death Lawrence, Iowa
 Funeral Services at White House, Lawrence
 Time of Funeral Service 2:30 P.M.
 Clergyman Rev. M. J. Lee, Legn.
 Certifying Physician S. C. Rens
 His Residence Lawrence, Iowa
 Number of Burial Certificate...
 Cause of Death Heart Insufficiency
 (Primary) (Secondary)
 Date of Death May 23, 1934
 Occupation of the Deceased Housewife
 Single or Married Married Religion...
 Date of Birth Apr. 16, 1855
 Age 77 Years 7 Months 7 Days
 Name of Father Joseph Patrick
 His Birthplace Iowa
 Name of Mother Catharine Riley
 (Surname)
 Her Birthplace Iowa
 Body to be Shipped to...
 Size and Style of Casket or Coffin #3450
 Manufactured by Dea. B. C. Cook Co.
 Interment at Lawrence Cemetery

Casket or Coffin #3450	\$ 175.00
Metallic Lining (State Kind)	
Outside Box (State Kind)	XX
Grave Vault (State Kind)	
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	XX
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	XX
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	XX
Auto Limousines to Cemetery, @ \$	
Autos to R. R. Station, @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	XX
Rental of Vault	XX
Outlay for Shipping Charges	
Removal Charges	XX
Incineration	
Personal Services	XX
Singers	XX
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ 175.00
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

Lot No. 5
 Grave No. 5
 Section No. 5
 Diagram of Lot or Vault
 S. Ex. 161 - G. Claude Drummond

To Funeral Charges	Total, \$	By Cash	\$

Names of Pall Bearers G. Howard Jones
 Names of Lodges SINCEBES - Lewis Callaway, Juanita Mann, 2 College Boys
 Lodge Insurance, \$
 Funeral Director W. H. White
 Names of Near Relatives W. H. White, Mrs. S. M. White
 Other Insurance, \$

RECORD OF FUNERAL

Total No. 1575 Yearly No. 13 Date May 27, 1931

Name of Deceased Robert Lee Marshall (What Race) White (Where Born) Davis City, Iowa
Husband--Wife--Widow
Son--Daughter of Israel & Blaudine Marshall

Charge to Israel Marshall
Address Jamaica, Iowa
Order Given by Israel Marshall
How Secured Cash
Date of Funeral May 31, 1931
Residence Jamaica, Iowa
Place of Death St. Anthony Hosp., Des. Mo.
Funeral Services at Davis City, M. E. Church
Time of Funeral Service 2:30 P. M.
Clergyman W. E. Gural
Certifying Physician Dr. M. A. ...
His Residence Wes. Morris, Ia.

Number of Burial Certificate
Cause of Death Acrobryum (Primary) (Secondary)
Date of Death May 25, 1931
Occupation of the Deceased
Single or Married Single Religion
Date of Birth Aug. 9, 1931
Age 0 Years 9 Months 19 Days
Name of Father Israel A. Marshall
His Birthplace Jamaica, Co., Mo.
Name of Mother Blaudine Marshall (Maiden Name)
Her Birthplace Davis City, Iowa
Body to be Shipped to
Size and Style of Casket or Coffin 322-3/0
Old Church, Des. Mo.
Manufactured by Purdum, King, Crispen, Co.
Interment at Jamaica - Rose Hill Cemetery

Lot No. 6275
Grave No.
Section No.

Diagram of Lot or Vault
P. R. 1011 - Long Oak Lawn

Casket or Coffin. # <u>322-3/0</u>	\$ <u>30.00</u>
Metallic Lining	
Outside Box	<u>xx</u>
Grave Vault	
Burial Suit or Dress	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Fluid)	<u>15.00</u>
Dressing Body, \$	Shaving, \$
Hair Dressing	
Use of Folding Chairs	
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse <u> sedan</u>	<u>16 Chg.</u>
Auto Limousine to Cemetery <u>1 @ \$ 1.00</u>	<u>10 Chg.</u>
Auto to R. R. Station	@ \$
Other Vehicle Service	
Aeroplane Service	
Death Notices in	Newspapers
Flowers, \$	Rental of Plants, \$
Other Decorations	
Outlay for Lot	
Opening Grave or Vault	<u>3.50</u>
Lining Grave with Evergreen or Muslin	
Matting, \$	Tent Rental, \$
Use of Lowering Device	
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges <u>from Des. Mo.</u>	<u>10 Chg.</u>
Incineration	
Personal Services	<u>xx</u>
Singers	
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ <u>48.50</u>
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page	or below

To Funeral Charges	Total \$	By Cash	\$
<u>Body Returned from Des. Mo. via Iowa Institution Hospital</u>			
<u>Whe. Sedan Ambulance by Geo. M. ...</u>			

Names of Pall Bearers
Names of Lodges S. N. G. E. S. Vanda Deary, Dick Harmon, P. Smith, Alice Dickey
Lodge Insurance, \$
Funeral Director Robert H. Mitty, Geo. J. Madden
Names of Near Relatives

RECORD OF FUNERAL

Total No. 1579 Yearly No. 17 Date July 31, 1932

Name of Deceased Owille H. Raymond Hunter, White, J. Jefferson, Iowa
(What Race) (Where Born)

Charge to C. E. & Bernice Sixbury
Address _____

Order Given by _____
How Secured Contract

Date of Funeral July 31, 1932

Residence Lamoni, Wash. Co., Iowa

Place of Death Lamoni, Ia.

Funeral Services at Jefferson, Ia.

Time of Funeral Service 2 P.M. - M. E. Church

Clergyman Rev. Durick J.

Certifying Physician C. E. Sixbury

His Residence Lamoni, Iowa

Number of Burial Certificate _____

Cause of Death Impass of Communica; Peritonitis
(Primary) (Secondary)

Date of Death July 28, 1932

Occupation of the Deceased Farmer Laborer

Single or Married Single Religion _____

Date of Birth Sept. 11, 1909

Age 22 Years 19 Months 17 Days

Name of Father Lloyd Hunter

His Birthplace Iowa, U.S.

Name of Mother Martha Derry
(Maiden Name)

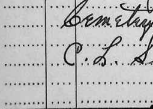
Her Birthplace Iowa, U.S.

Body to be Shipped to Jefferson, Ia.
Tip funeral coach

Size and Style of Casket or Coffin #3450 - 1/2

Manufactured by John Casper Co.

Interment at Jefferson Ia. Cemetery _____



Lot No. _____

Grave No. _____

Section No. _____

Casket or Coffin <u>Swiss</u>	\$ 175.00
Metallic Lining _____ <small>(State Kind)</small>	
Outside Box _____ <small>(State Kind)</small>	
Grave Vault <u>Helion Cryptarium</u>	100.00
Burial Suit or Dress _____ <small>(State Kind)</small>	
Burial Slippers and Hose _____	
Engraving Plate _____	
Embalming Body (with _____ Fluid)	Included
Dressing Body, \$ _____ Shaving, \$ _____	
Hair Dressing _____	
Use of Folding Chairs _____	
" " Candelabrum, \$ _____ Candles, \$ _____	
Door Badge, \$ _____ Gloves, \$ _____	
Hearse <u>200 Mi. @ 1.05</u>	20.00
Auto Limousines to Cemetery @ \$ _____	
Autos to R. R. Station @ \$ _____	
Other Vehicle Service _____	
Acroplane Service _____	
Death Notices in _____ Newspapers _____ <small>(Names of Newspapers)</small>	
Flowers, \$ _____ Rental of Plants, \$ _____	
Other Decorations _____	
Outlay for Lot _____	
Opening Grave or Vault _____	12.00 Paid
Lining Grave with Evergreen or Muslin _____	
Matting, \$ _____ Tent Rental, \$ _____	
Use of Lowering Device _____	
Rental of Vault _____	
Outlay for Shipping Charges _____	
Removal Charges _____	
Incineration _____	
Personal Services _____	Included
Singers _____	
Church Charges, \$ _____ Minister, \$ 5.00	Paid
Telegrams and Telephone Charges <u>Jefferson</u>	1.60
Pall Bearer Service _____	
Total Footing of Bill	\$ 306.60
By Amount Paid in Advance _____	\$ _____
Balance _____	\$ _____
Entered into Ledger, page _____ or below _____	

To Funeral Charges	Total, \$	By Cash	\$
<u>Drone to Jefferson Sunday 7/31 with body for services</u>			
<u>burial tray & equipment of C.B. Car. furnished by</u>			
<u>C.S. Shingler Funeral Home at no charge</u>			

Names of Pall Bearers Fred Ray, Walter, Hwy, & Marshall Derry, & Jack Bradley

Names of Lodges _____

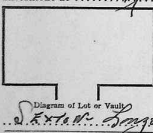
Lodge Insurance, \$ _____
Funeral Director Walter S. White; Geo. T. Madson
Names of Near Relatives _____

RECORD OF FUNERAL

Total No. 1857 Yearly No. 22 Date Sept. 28 1937
 Name of Deceased, Joseph Smith Traxler, White, Lansville, Ontario, Canada
(What Race) (Where Born)
 Husband...
 Wife...-Widow
 Son...-Daughter of

Charge to John Smivly
 Address
 Order Given by
 How Secured
 Date of Funeral 9-28-37
 Residence Lansville, Iowa
 Place of Death
 Funeral Services at Manoir Traxler Res.
 Time of Funeral Service 2 P.M.
 Clergyman M. G. Pugh, Chgo. Traxler
 Certifying Physician C. E. Sixbury
 His Residence Lansville, Ia
 Number of Burial Certificate
 Cause of Death
(Primary) (Secondary)
 Date of Death 9-26-37
 Occupation of the Deceased Laborn
 Single or Married Single Religion
 Date of Birth March 16, 1870
 Age 67 Years 6 Months 10 Days
 Name of Father John Traxler
 His Birthplace Canada
 Name of Mother Esther Best
(Maiden Name)
 Her Birthplace
 Body to be Shipped to
 Size and Style of Casket or Coffin 31. Htd. Case
3 Panel Oct.
 Manufactured by Foot Casket Co.
 Interment at Gate Hill Cemetery

Casket or Coffin	<u>Imp. Complete</u>	\$ <u>130</u> 00
Metallic Lining	(State Kind)	
Outside Box	(State Kind)	XX
Grave Vault	(State Kind)	
Burial Suit or Dress		
Burial Slippers and Hose		
Engraving Plate		
Embalming Body (with	Fluid)	XX
Dressing Body, \$	Shaving, \$	
Hair Dressing		
Use of Folding Chairs		XX
" " Candelabrum, \$	Candles, \$	XX
Door Badge, \$	Gloves, \$	
Hearse		XX
Auto Limousines to Cemetery	@ \$	
Autos to R. R. Station	@ \$	
Other Vehicle Service		
Aeroplane Service		
Death Notices in	Newspapers	
<small>(Names of Newspapers)</small>		
Flowers, \$	Rental of Plants, \$	
Other Decorations		
Outlay for Lot		
Opening Grave or Vault		8 00
Lining Grave with Evergreen or Muslin		
Matting, \$	Tent Rental, \$	XX
Use of Lowering Device		XX
Rental of Vault		
Outlay for Shipping Charges		
Removal Charges		XX
Incineration		
Personal Services		XX
Singers		
Church Charges, \$	Minister, \$	
Telegrams and Telephone Charges		
Pall Bearer Service		
Total Footing of Bill		\$ <u>128</u> 00
By Amount Paid in Advance		\$
Balance		\$
Entered into Ledger, page		or below

Diagram of Lot or Vault

 Lot No. 419
 Grave No. 1
 Section No.
Sexton George De Long

To Funeral Charges	Total, \$	By Cash	\$
		<u>Ed. in full by John Smivly</u>	

Names of Pall Bearers B. J. Thurston, Mamm M. Ernst, John Michalsen, Willard Mason, John K. Jones, Earl Lewis
 Names of Lodges D. I. N. R. S. - Grand Camp, Alice Lane
 Lodge Insurance, \$ Other Insurance, \$
 Names of Bear Relatives
 Funeral Director John S. White
Compiled by F. J. FEINEMAN, St. Louis, Mo., in the year 1933.

RECORD OF FUNERAL

Total No. 1256 Yearly No. 24 Date October 13, 1937

Name of Deceased Rayana E. Anderson, White Tabor, Ia.
(What Race) (Where Born)
Husband of David Anderson
Wife of David Anderson
Sister of David Anderson

Charge to David Anderson
Address 2 Bradley, So. O. S.
Order Given by David Anderson
How Secured None
Date of Funeral Oct. 13, 1937
Residence Madison So. Dakota
Place of Death Des Moines, Ia.
Funeral Services at White Service - Hannum
Time of Funeral Service 10:30 A.M.
Clergyman W. C. Paul, Dr. Curtis, W. J. Jensen
Certifying Physician Ernest A. H. Paul
His Residence Des Moines, Ia.
Number of Burial Certificate
Cause of Death Cerebral Hemorrhage, Hypertension
(Primary) (Secondary)
Date of Death Oct. 11, 1937
Occupation of the Deceased Farmer
Single or Married Married Religion Ep.
Date of Birth
Age 57 Years Months Days
Name of Father
His Birthplace
Name of Mother
(Maiden Name)
Her Birthplace
Body to be Shipped to
Size and Style of Casket or Coffin #4 x 50 Crown, Bohemian
Silk plush, wood end, state rose mattress
Manufactured by Port Cash Co.
Interment at Hannum - Rose Hill Cemetery

Casket or Coffin <u>Services</u>	\$ <u>375.00</u>
Metallic Lining (State Kind)	
Outside Box	
Grave Vault <u>Yellow Cryptostomum (Wood)</u>	<u>1.00.00</u>
Burial Suit or Dress (State Kind)	
Burial Slippers and Hose	
Engraving Plate	
Embalming Body (with Flushing Fluid)	<u>xx</u>
Dressing Body, \$ Shaving, \$	
Hair Dressing <u>Miss Craig 1.50</u>	<u>68</u>
Use of Folding Chairs	
" " Candelabrum, \$ Candles, \$	
Door Badge, \$ Gloves, \$	
Hearse	<u>xx</u>
Auto Limousines to Cemetery @ \$	<u>xx</u>
Autos to R. R. Station @ \$	
Other Vehicle Service	
Aeroplane Service	
Death Notices in Newspapers	
(Names of Newspapers)	
Flowers, \$ Rental of Plants, \$	
Other Decorations	
Outlay for Lot	<u>4.00.00</u>
Opening Grave or Vault	<u>1.00.00</u>
Lining Grave with Evergreen or Muslin	<u>✓</u>
Matting, \$ Tent Rental, \$	<u>✓</u>
Use of Lowering Device	<u>✓</u>
Rental of Vault	
Outlay for Shipping Charges	
Removal Charges	<u>70.00</u>
Incineration	
Personal Services	<u>xx</u>
Singers	<u>xx</u>
Church Charges, \$ Minister, \$	
Telegrams and Telephone Charges	
Pall Bearer Service	
Total Footing of Bill	\$ <u>525.00</u>
By Amount Paid in Advance	\$
Balance	\$
Entered into Ledger, page or below	

Lot No. 1550
Grave No. 1
Section No.
Diagram of Lot or Vault
See next page - Large Diagram

To Funeral Charges	Total, \$	By Cash	\$
<u>Our trip to Hills Retreat Hosp. at Des Moines</u>			
<u>For Body - 70.00 Chgs.</u>			
SONGS -			
<u>1. Come ye Disconsolate</u>		<u>4. Beautiful Valley of Eden - (New)</u>	
<u>2. Jesus, Savior Pilot Me - Solo</u>			
<u>3. Softly and Tenderly Jesus is Calling</u>			

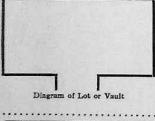
Names of Pall Bearers D. A. Duncan, North Anderson, Joe Anthony, H. L. Hammer, Karl Hansen, Mr. Campbell
Names of Lodges Downside Lodge, Mrs. Geo. Mason, Mrs. May Johnson, Mrs. E. A. Smith, Mrs. Roberts
SINGERS Handa Perry, Joyce Mueens, Walter Chandler, Collie, Desmit
Lodge Insurance, \$ Other Insurance, \$
Names of Bearers A. J. White; Des Moines; Mrs. A. C. White; Mrs. B. White

RECORD OF FUNERAL

Total No. 1062 Yearly No. 30 Date December 8 1932
 Name of Deceased Alexander M^cLean White Anderson
(What Race) (Where Born)
 Husband of Theresa M^cLean
 Son - Daughter of Theresa & Bob M^cLean

Charge to Theresa & Bob M^cLean
 Address Bob M^cLean
 Order Given by Bob M^cLean
 How Secured Content Note
 Date of Funeral Dec 8, 1932
 Residence Lamoni, Ia.
 Place of Death Res. Lamoni, Ia.
 Funeral Services at White Home
 Time of Funeral Service 1 P.M.
 Clergyman J. J. Bell, Ia. Lamoni
 Certifying Physician E. C. H. 7, Ia.
 His Residence Lamoni, Ia.
 Number of Burial Certificate 1
 Cause of Death Stroke of Heart Disease
(Primary) (Secondary)
 Date of Death Dec 6, 1932
 Occupation of the Deceased Gen. Lamoni
 Single or Married Married Religion Pres.
 Date of Birth Jan. 1894
 Age 38 Years 11 Months 1 Days
 Name of Father Anderson
 His Birthplace Ia.
 Name of Mother Anderson
(Maiden Name)
 Her Birthplace Ia.
 Body to be Shipped to Ia.
 Size and Style of Casket or Coffin 34 1/2
Real Union, Steel P.
 Manufactured by Gen. Casket Co.
 Interment at Lamoni, Ia. Cemetery

Casket or Coffin <u>& Service Complete</u>	\$ <u>175.00</u>
Metallie Lining	(State Kind)
Outside Box	XX
Grave Vault	(State Kind)
Burial Suit or Dress	(State Kind)
Burial Slippers and Hose	XX
Engraving Plate	XX
Embalming Body (with Fluid)	XX
Dressing Body, \$	Shaving, \$
Hair Dressing	XX
Use of Folding Chair	XX
" " Candelabrum, \$	Candles, \$
Door Badge, \$	Gloves, \$
Hearse	XX
Auto Limousines to Cemetery ! @ \$	<u>Quincy</u> <u>5.50</u>
Autos to R. R. Station	@ \$
Other Vehicle Service	XX
Acroplane Service	XX
Death Notices in	Newspapers
<small>(Names of Newspapers)</small>	
Flowers, \$	Rent of Plants, \$ <u>5.00</u>
Other Decorations	XX
Outlay for Lot	XX
Opening Grave or Vault	10.00
Lining Grave with Evergreen or Muslin	XX
Matting, \$	Tent Rental, \$ <u>2.00</u>
Use of Lowering Device	XX
Rental of Vault	XX
Outlay for Shipping Charges	XX
Removal Charges	XX
Incineration	XX
Personal Services	XX
Singers	XX
Church Charges, \$	Minister, \$
Telegrams and Telephone Charges	XX
Pall Bearer Service	XX
Total Footing of Bill <u>197.50</u>	
By Amount Paid in Advance	\$ <u>92.50</u>
Balance	\$ <u>115.00</u>
Entered into Ledger, page	or below



Lot No. _____
 Grave No. _____
 Section No. _____

To Funeral Charges..... Total, \$	\$ <u>197.50</u>
	By Cash..... \$ <u>82.50</u>
	By County Order..... \$ <u>40.00</u>
	<u>177.50</u>
	<u>122.50</u>
	<u>57.50</u>

Names of Pall Bearers Chas. Bellamy, Sam Curtis, John Smith, Paul Ross, Paul Quincy
 Names of Lodges Sed. 4885 - Card. Hall, Chas. Bellamy Jr., Marist Hall, Mrs. Mitch. Cantio - Chas. Ross, Gemet.
 Lodge Insurance, \$ _____ Other Insurance, \$ _____
 Funeral Director A. White
 Names of Near Relatives Gen. M. Madson, Mrs. A. O. White

