

#### J. H. Ostertag Funeral Register

Columbia, Lancaster, Pennsylvania, April 1901-January 1903

J. H. Ostertag kept records of the funerals he handled in this register. His business was located in Columbia, Lancaster County, Pennsylvania, and this register covers the period between April 1901 and February 1903. Each record includes the name of the deceased, date of death, cause of death, and cemetery. There are additional details for most of the deceased in the register.

John Henry Ostertag was born to Andrew and Eva Margaret (Hettinger) Ostertag on 5 January 1857 in West Hempfield Township, Lancaster County, Pennsylvania. Around 1882, he moved to Columbia, Lancaster County, Pennsylvania, where he was in the business of furniture making and undertaking. John married Mary Anna Westerman on 19 January 1882. He died on 2 March 1942 in Columbia and was buried in Laurel Hills Memorial Gardens cemetery.

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# A Few Grave Questions.

#### WHAT IS IT?

A GROOVED AND BOLTED SLATE BURIAL VAULT, manufactured out of six solid pieces of slate, grooved to fit so closely together that with the use of a little cement they can be made perfectly air and water tight.

### WHAT IS IT FOR?

For use in a grave, in place of brick, and does away with the outside case of the coffin or casket and therefore makes it the cheapest as well as the best burial case on the market.

WHO MAKES IT?

# THE BANGOR SLATE MINING CO.,

BANGOR, PA.

### WHAT ARE THE SIZES, WEIGHTS AND PRICES? HERE THEY ARE.

Inside Dimensions.

				100 60 763.	
	Length.	Width.	Depth.	Weight.	Price.
No. 1	4'-0"	1'-8"	1'-4"	500 lbs.	\$-7 40
" 2	5'-0"	1'-10"	1'-6"	650 "	970
" 3	6'-0"	2'-0"	1'-6"		
" 4	6'-4"	2'-1"	1'-7"	800 ''	1170
" 5	6'-6"	2'-2"		900 "	1280
" 51/2		2'-2"	1'-8"	950 ''	13 65
" 6	6'-9"		1'-8"	975 ''	1390
" 6½		2'-3"	<i>t'</i> -8"	1000 "	1450
		2'-3".	1'-10"	1060 "	15 40
" 7	7′-0″	2'-4"	1'-10"	1100 "	16.00
" 7½	7'-1"	2'-5".	2'-0"	1150 "	16 80
" 8.	7'-3"	2'-6"	2'-0"	1200 "	14657
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PLEASE ORDER BY NUMBER.

All our vaults are carefully fitted together at factory, then taken apart and carefully crated ready for shipment. Prices on PLAIN VAULTS quoted on application.

June 11-1901 Jan 4-1902. Interner remins Receive bory of Kure Reiner 14 mis. Evens. in morsine clary for hund -The folling. Ceniety Chayes 8.00 Chargers as follows: -Heure grive CUTARU 600 Heune. Cus Conveying remins from Defeate there 200 Head Berowul cernis - 50 Oceanic series there newspaper notation 11.00 3300 Pain by form former interped in MIT Belle Yaw, 25-1902 Intime still born pure 28-1901 Received remins of Harry Stranner Cute of Peter Stank in Mit Betall from Lucester Pa Papara for Charges Plan Cff 3 m treviel, interes remins in Mt, 1.13 Roop, Physican. Bittel Cerneily June 30 -1901 fundame The following, March 2-1902 Received It body of Edward Heine Heure 6,00 for Newyork already 4,00 Peranul ceries for brinel, delined to Corney renun firm lus fatters herene and 2,50 Depit- a House intended dame in Met Bettel Cemely in 1,50 use y 3 dis chin coo Muren # 11/902 .90 & pain blues O 15 Charges as follows , ७७ hing your Neane 15,40 600 Cerustry Clique 5,00 July 29-1901 depet to Home 450 Interred Still bourchied of ,50 lung quel Danil Folls. 20 Mr Bettal 4.00 Jurul Deweir Doffin & und oney amye 5. 18,00 To B Fruic Hais april 7-1902-mitum nefunt child of Educ Hallow July 30-1901 Inf in Russell Xy/ Comes Churce ge follows. Canber Par 650 to Buill of peo Muning Cernety Curifus 350,00 died at Coleman Houghest.

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Correrer, \$ 6,00

be Wen Les age. and were Externed any. 4-190. Oling. 2-1902 Interned till born child y the dughter g Golin Heinann, in Mit Beitel Centry, 3. vi Jeninge for Roffin 3. vi

### F. RUSSELL GAYLOR'S

## #FUNERAL REGISTER

\* \* No. 3, \* \*

Published by

## T. MILTON TAYLOR,

Publisher of Funeral Registers, Pocket Funeral Order Books, Garriage Lists, Transit

Gards, Pall Bearer Notices, Funeral Invitation Rtc., Ctc., Ctc.

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SELLING AGENTS,

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ORDER BY THE ABOVE NUMBER.

	enter, name of de-		
	number of page future reference. Items of Bill, (cross out printer	d items not	furnished
- N . O O		(1	
Name of Dec'd Icla B. Reen	Door Crape	***************************************	***************************************
Late Residence Columbia de	Draperies Candelabra and Candles.		
Age 36 years months days.	Washing & Laying out Remains, Shaving	***************************************	***************************************
Cause of Death Cousympton	Preservation of Remains		
Certifying Physician & F. Muulel	Note Go. Casket. Satur Rope Trimming.		***********************
Date of Death Ospire 10-1901		70	00
Date of Burial // /3-1901			********
Funeral at House or Church.	No. Handles		***************************************
Place of Burial Gettys Cruy Pa Cemetery.	No. Plate engraved	***************************************	
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	**************************************	**************************
GIATO OF LOCATION	Pl't'	********	***************************************
Location of Grave	NoRobe	***************************************	·
(Draw lines       for Graves in the Plot, and )	Prs, Gloves Linen Scarfs.	***************************************	
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.			
1865	Use of Doz. Chairs	***************************************	
Mrs. Lofa B. Reen	Flówers		
Inscription (\$\frac{190}{}	Hearse Do Rod	9	00
on Plate.	2 Carriages to Deport		
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Measurement. Length to Heel feet in. Width at Shoulder		***************************************	***************************************
Bill Rendered to Rev. Seo. M. Reeu		***************************************	}*************************************
Bill Rendered to			***************************************
	Advertising	***************************************	
When Rendered	Ceme*ery charges		1 13
MEMORANDUM.	Transportation Expenses, &c.		65
	Attendance & Assistants	70	1 1
	Amount of Bill	87	65
	Amount Brought Forward	1725	35
	Amount Carried Forward	1815	00
,	PAYMENTS.		
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ITEMS OF EXPENSE.		***************************************	********************************
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Number of Funeral

Number of Funeral

Number for the Current Year 25

Be careful to enter name of deceased and number of page in index for future reference.

Name of Dec'd Wilson Would	Door Crape		4240044
Late Residence Columbia In	Draperies Candelabra and Candles.		,
Age 39 years months days.	Washing & Laying out Remains, Shaving.	3	00
Cause of Death Typhoris fewer	Preservation of Remains	5	00
Certifying Physician ARevok	No. G.t. Casket. bloth Cusht Frimming.	50	00
Date of Death Off, 11-190/		***************************************	***************************************
Date of Burial // /5-1901			Today consection to the book of the consection o
	No. Handles		*************************
Funeral at House or Church.  Place of Burial Myllowill Cemetery.	NoPlate engravedOutside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	********************************
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.	949974497444444444444444444444444444	**************************************
	Delivering to Cemetery	************************************	
Location of Grave	No. Buc Robe	6	00
(Draw lines       for Graves in the Plot, and ) designate this one with a double Cross ‡. }	PrsGlovesLinen Scarfs	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	***********************
( Show position of monument by )	Use of Doz. Chairs	***************************************	*******************************
	Flowers	***************************************	***************************************
Inscription Miles	Hearse	- 3	00
on Plate. Agra 39 yn	6 Carriages to G K	~2 ×	00
Agra 39 yr	1 Dinge	2	99
(Length to Heel feet in.)	/	***************************************	**************************************
Width at Shoulder	- Landson - Land	^******	A42214.222.22222222222222222222222222222
Bill Rendered to Bessie Wall		***************************************	11.171111111111111111111111111111111111
	Advertising	***************************************	***************************************
When Rendered	Cemetery charges		***************************************
MEMORANDUM.	Transportation Expenses, &c.	1444	en en
	Attendance & Assistants		
	Amount of Bill	48	00
	Amount Brought Forward	1845	00
	Amount Carried Forward	1913	06
	PAYMENTS.		
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ITEMS OF EXPENSE.			************************
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	future reference. Items of Bill, (cross out printe-	d items not f	urnished.
for 1 The last			
Name of Dec'd Flore S. Welster	Door Crape		***************************************
Late Residence Columbia Gu	Draperies Candelabra and Candles.		
Age 28 years months days.	Washing & Laying out Remains, Shaving		
Cause of Death Pubular Extents	Preservation of Remains.	3	00
Certifying Physician alex R. Cornig	No. Casket. Clotte Trimming.	65	00
Date of Death Office 12-1901			***************************************
Date of Burial " 16-1901		***************************************	***************************************
Funeral at House orChurch.	No. Handles	***************************************	***************************************
Place of Burial Mylilla ville Cemetery.	No. Plate engraved	***************************************	
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Glaye of Lot No.	Pl't' H'dl's Corners on Box.	***************************************	***************************************
Location of Grave	Delivering to Cemetery	***************************************	-
(Draw lines       for Graves in the Plot, and )	Prs. Gloves Linen Scarfs.		
( Draw lines         for Graves in the Plot, and ) designate this one with a double Cross ‡. Show position of monument by □.		***************************************	***************************************
	Use of Doz. Chairs		**********************
	Flowers		
Inscription Alexand Manual	Hearse	6	00
on Plate. Slove J. Wetshe Agen 28 Jose,	Carriages to		***************************************
1 20 102		······································	***************************************
Measurement. { Length to Heel feet in. }		***************************************	***************************************
/ Width at Shoulder		***************************************	***************************************
Bill Rendered to See, Webster			***************************************
	Advertising		
When Rendered	Cemetery charges		***************************************
MEMORANDUM.	Transportation Expenses, &c.	***************************************	
FILMOTOTICE	Attendance & Assistants		
•	Amount of Bill	76	00
	Amount Brought Forward	1913	00
	Amount Carried Forward	1989	00
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	PAYMENTS.		
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ITEMS OF EXPENSE.		***************************************	***************************************
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Number of Funeral Be seeful to an	ter name of de-		
ceased and n	umber of page uture reference. Items of Bill, (cross out printed	l items not f	urnished.)
Name of Dec'd Chistin C. Fergusun			
	Door Crape	*,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	······
Late Residence Columbia Och	Draperies Candelabra and Candles.	***************************************	
Age	Washing & Laying out Remains, Shaving	'	
Cause of Death (Inlumonia	Preservation of Remains	2	00
Certifying Physician J. M. Kurngolm	No. Casket. Plush Trimming.	28	00
Date of Death ye, 21-1961	į.		**************************************
Date of Burial " 23 - 190/	NoHandles	***************************************	3 9
Funeral at House or Shurch.	NoPlate engraved		
Place of Burial MAT Bethel Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	***************************************
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.	***************************************	
	Delivering to Cemetery	***************************************	
Location of Grave	No. Robe	***************************************	
( Draw lines ( )   for Graves in the Plot, and )	Prs. Gloves Linen Scarfs	***************************************	
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.		12,700017,920,20,993,150,550,101,101,007,077	*
	Use of Doz. Chairs	***************************************	***************************************
	Flowers		*****************
Inscription 9	Hearse	A	************************
on Plate. Our Live One	Carriages to	***************************************	***************************************
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Measurement. { Length to Heel # feet in. }  Width at Shoulder. }		***************************************	***************************************
Measurement. Width at Shoulder.	-		
Bill Rendered to Ma Enery Levywow			
	Advertising		1525525747474444444444444444444444444444
When Rendered	Cemetery charges	2	00
MEMORANDUM.	Transportation Expenses, &c.	***************************************	***************************************
	Attendance & Assistants		0
	Amount of Bill	88	00
	Amount Brought Forward	989	00
	Amount Carried Forward	022	00
	PAYMENTS.		
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ITEMS OF EXPENSE.		***************************************	
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	nter, name of de-		
Number for the Current Year 28 .ceased and in index or	number of page future reference. Items of Bill, (cross out printe	d items not f	urnished
Go:		1	
Name of Dec'd Elizabeth Meiner	Door Crape	***************************************	***************************************
Late Residence Columbia Ta	DraperiesCandelabra andCandles.	***************************************	******************************
Age 66 years months days.	Washing & Laying out Remains, Shaving	3	00
Cause of Death Oppleyy	Preservation of Remains	5	00
Certifying Physician Lew W Bendheyel	No fine Casket bloth ond nutritionming.	95	00
Date of Death Off 26-19018		***************************************	***************************************
Date of Burial 1 30-190/			********
Funeral at House or St Paul's Ger Luth Church.	No. Handles		***************************************
Out Dall	NoPlate engraved		***************************************
Trace of Buriar	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.		v=====================================
Location of Grave	Delivering to Cemetery	17	00
	No fine Robe Black		
{ Draw lines       for Graves in the Plot, and } designate this one with a double Cross ‡. } Show position of monument by □.	Prs. Gloves Linen Scarfs.	***************************************	***************************************
	Use of Doz. Chairs		
1591	Flowers		0 (1
Inscription Esligabilh Merrier	Hearse	6	00
on Plate.	Carriages to		00
( 790)		***************************************	***************************************
Measurement, Length to Heel feet 7 in.		*************************************	***************************************
Measurement. Width at Shoulder			***************************************
Bill Rendered to John Ofemer	MAY ST. T.		
	Advertising		1::::::::::::::::::::::::::::::::::::::
When Rendered	Ceme+ery charges	3	00
MEMORANDUM.	Transportation Expenses, &c.		***************************************
	Attendance & Assistants		
	Amount of Bill	135	00
	Amount Brought Forward	2022	00
	Amount Carried Forward	2157	00
	PAYMENTS.		
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ITEMS OF EXPENSE.			

Number of Funeral

Number for the Current Year 29

Be careful to enter name of deceased and number of page in index for future reference.

Name of Dec'd Wylliam Mc Cuth	Door Crape		******
Late Residence Columbia Ga	Draperies Candelabra and Candles.		,
Age 46 years months days.	Washing & Laying out Remains, Shaving	5	00
Cause of Death	Preservation of Remains		0
Certifying Physician Scenedy	No Policasket. Muhrgenf Trimming.	125	00
Date of Death Office >9 -190/		***************************************	***************************************
Date of Burial Muy 1 - 190/	No. Handles	***************************************	
Funeral at House or St Celers Cell, Church.	No. Plate engraved		***************************************
Place of Burial Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot No. Section No.	Pl't'H'dl's		******************************
	Delivering to Cemetery		
Location of Grave	NoRobe	***************************************	***************************************
{ Draw lines       for Graves in the Plot, and } designate this one with a double Cross ‡. } Show position of monument by □.	PrsGloves Linen Scarfs	à	*
( Show position of monument by 2.	Use ofDoz. Chairs		************************
	Flowers		
Inscription	Hearse	6	00
on Plate.	3 Carriages to	17	00
		***************************************	
Measurement. { Length to Heelfeetin. }	n	***************************************	***************************************
Width at Shoulder	2 Tolly Cus, 1000		0 />
Bill Rendered to	ay fire collected 375	6	25
	Advertising	***************************************	
When Rendered	Cemetery charges		
MEMORANDUM.	Transportation Expenses, &c.		
Name to the state of the state	Attendance & Assistants	100	
	Amount of Bill	159	20
	Amount Brought Forward	157	00
	Amount Carried Forward	23/6	25
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Number of Funeral

Number for the Current Year 30

Be careful to enter, name of deceased and number of page in index or future reference.

Name of Dec'd Wintel Reese Hook	Door Crape	***************************************	***************************************
Late Residence Columbia Oa	DraperiesCandelabra andCandles.	***************************************	**********************
Age years omonths days.	Washing & Laying out Remains, Shaving	***************************************	***************************************
Cause of Death Overmine	Preservation of Remains	2	OV
Certifying Physician 2-9. Fayler	No	20	00
Date of Death Muy, 1st 1901		*	
Date of Burial " H 1961		***************************************	***************************************
Funeral at House or	No,		***************************************
Place of Burial Murus Bellel Cemetery.	NoPlate engrayed		***************************************
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	**********************	) (white the state of the state
Graye of Lot 190. Section 190.	Pl't' H'dl's Corners on Box.		//************************************
Location of Grave	NoRobe	***************************************	***************************************
( Draw lines       for Graves in the Plot, and )	Prs, Gloves Linen Scarfs.	***************************************	***************************************
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.			***************************************
	Use of		***************************************
	Flowers		
Inscription	Hearse	*******************************	
on Plate.	Carriages to	***************************************	***************************************
		*****************************	***************************************
Measurement. { Length to Heelfeetin. }		***************************************	
Width at Shoulder			***************************************
Bill Rendered to Dank a. Hook			************************
	Advertising		44
When Rendered	Cemetery charges	2	29
MEMORANDUM.	Transportation Expenses, &c.		u o
	Attendance & Assistants	190	
	Amount of Bill		00
The same and the s	Amount Brought Forward	23/6	21
	Amount Carried Forward	2346	25
	PAYMENTS.		
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ITEMS OF EXPENSE.			
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	nter name of de-		4
Number for the Current Year 3/ in index for	number of page future reference. Items of Bill, (cross out printed	items not fo	urnished.
Trecience Freund			
Name of Dec d	Door Crape	•	*******
Late Residence	Draperies Candelabra and Candles.		200
Age byears months days.	Washing & Laying out Remains, Shaving  Preservation of Remains	5	UU
Cause of Death Cyppliculin	Nack Casket. Com Trimming.	65	00
Certifying Physician A Semilary	No. Casket. Casket. Irrimming.		***************************************
Date of Death Muy 4 -1 90/			***************************************
Date of Burial "	NoHandles	*	
Funeral at House or At Johns and Church.	No. Plate engraved		
Place of Burial VIII Sethel Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Grave or Lot No. Section No.	Pl't'H'dl'sCorners on Box.	***************************************	
	Delivering to Cemetery		
Location of Grave	No. Bek Robe	6	00
Oraw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs	,	*
Show position of monument by □.	Use of Doz. Chairs	***************************************	************
	Flowers		***************************************
	Hearse	6	00
Inscription .	Carriages to	***************************************	************************
on Plate.		***************************************	***************************************
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Measurement. Width at Shoulder.		120-141444444444444444444444444444444444	*******************************
Bill Rendered to			
DIII Rendered to	Advertising	•	
	Cemetery charges	5	00
When Rendered	Transportation Expenses, &c.	***************************************	
MEMORANDUM.	Attendance & Assistants	h	
4	Amount of Bill	92	00
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	Amount Brought Forward  Amount Carried Forward	438	2.J
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Number				*********
Numbe	er f	or the	Current	Year 32

Be careful to enter name of deceased and number of page in index or future reference.

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Name of Dec'd Many Miniele	Door Crape		***************************************	
Late Residence Columbu Ola	DraperiesCandelabra andCandles.		***************************************	
Ageyearsmonthsdays.	Washing & Laying out Remains, Shaving			
Cause of Death Acute present olshowing	Preservation of Remains	5	00	
Certifying Physician Ot BRook	No Carling.	25	00	
Date of Death Muy 9-1901		*	***************************************	
Date of Burial // // -/90/		***************************************	***************************************	
Funeral at House orChurch.	No. Hapdles		***************************************	
Place of Burial MT Bethel Cemetery.	No. Plate engraved		***************************************	
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak; Cedar)		*******************************	
	Delivering to Cemetery		***************************************	
Location of Grave	NoRobe			
Draw lines       for Graves in the Plot, and ) designate this one with a double Cross ‡. }	Prs. Gloves Linen Scarfs.		*	
Show position of monument by .	Use of Doz. Chairs			
	Flowers			
	Hearse	6	00	
Inscription	Carriages to	***************************************	***************************************	
on Plate.	Carrages to	***************************************		
(Langeth to Hool foot in )				
Measurement. { Length to Heelin, } Width at Shoulder		***************************************		
Bill Rendered to Munica			***************************************	
Dill Rendered to	Advertising			
W. D. C. I	Cemetery charges		***************************************	
When Rendered	Transportation Expenses, &c.	2	50	
MEMORANDUM.	Attendance & Assistants	***************************************	***************************************	
		38	158	×
	Amount of Bill	2 43 8	25	,
	Amount Brought Forward	:14	83	
	Amount Carried Forward	2476	80	
	PAYMENTS.			
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ITEMS OF EXPENSE.				
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Number of Funeral

Number for the Current Year 33

Be careful to enter name of deceased and number of page in index for future reference.

			8
Name of Dec'd Oyria Buttel	Door Crape		
Late Residence Columbia Oa	Draperies Candelabra and Candles.		,
Age 36 years months days.	Washing & Laying out Remains, Shaving	5	~ 0
Cause of Death Complication	Preservation of Remains	3	00
Certifying Physician Most Suisseleur	North Casket. Bloth Trimming.	50	00
Date of Death May 10-1901		***************************************	******************************
Date of Burial May 13-1901			***************************************
Funeral at House or Church.	No. Handles		***************************************
Place of Burial Mt Bettull Cemetery.	NoPlate engraved		***************************************
Grave or Lot No. Section No.			***************************************
CHARGO IN ECC. INC.	Delivering to Cemetery		***************************************
Location of Grave	No Robe	10	12
(Draw lines       for Graves in the Plot, and )	Prs. Gloves Linen Scarfs		######################################
designate this one with a double Cross ‡. } Show position of monument by □.	Use of Doz, Chairs	***************************************	***************************************
	Flowers		
Journ Bestell	Hearse	15	OU
Inscription also were	Carriages to		
on Plate.	Carriages to	***************************************	***************************************
(Length to Heel 5 feet 1 in.)		***************************************	***************************************
Measurement. Width at Shoulder.			annage to the same and the same
Bill Rendered to Beillie			And the department of the first
- Dill Nendered to	Advertising		40300000000000000000000000000000000000
When Rendered	Cemetery charges		
	Transportation Expenses, &c.		
MEMORANDUM.	Attendance & Assistants		<i></i>
· ·	Amount of Bill	76	00
	Amount Brought Forward	476	83
	Amount Carried Forward	552	83
		***************************************	
	PAYMENTS.		
			1
<u></u>		***************************************	***************************************
THE MC OF EXPENSE			
ITEMS OF EXPENSE.		***************************************	4.00010010101010101010101000
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Number of Funeral Number for the Current Year

Be careful to enter name of deceased and number of page in index or future reference.

Name of Dec'd Quouma Rothar	Door Crape		***********************
Late Residence Coolumba Pa	Draperies Candelabra and Candles.		
Ageyearsdays.	Washing & Laying out Remains, Shaving		*******************************
Cause of Death	Preservation of Remains	2	OV
Certifying Physician 1800/6 Lune	No. Casket. Place Trimming.	15	00
Date of Death May 11-1901			
Date of Burial // 3 -/ 40/			
Funeral at House or Church.	NoHandles		*******************
Place of Burial Sunch Hill Cemetery.	NoPlate engraved	*******************************	
	Outside Box, (Pine, Chestnut, Oak, Cedar)	*	
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.		
Location of Grave	NoRobe	***************************************	***************************************
			TERÉTERFORMATION DE SENTENCIA DE LA CONTRACTOR DE LA CONT
Oraw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.	***************************************	***************************************
	Use of Doz, Chairs	***************************************	***************************************
	Flowers	***************************************	***************************************
Inscription	Hearse		
on Plate.	Carriages to	16	00
	Team's Ourry		
Measurement. { Length to Heelfeetin. }			***************************************
(Width at Shoulder)		***************************************	**************************************
Bill Rendered to Chel Rolling			
	Advertising		**********************
When Rendered	Cemetery charges		******************************
MEMORANDUM.	Transportation Expenses, &c.		\$000350357777777777777777777777777777777
	Attendance & Assistants		
	Amount of Bill	35	00
The same of the sa	Amount Brought Forward	552	83
	Amount Carried Forward	\$87	83
	PAYMENTS.		
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		***************************************	
ITEMS OF EXPENSE.		***************************************	***************************************
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12			
Number of Funeral Be careful to en	ter name of de.		
ceased and n	umber of page umber reference. Items of Bill, (cross out printed	d items not f	urnished.
Name of Dec'd Henry Musler	Door Crape	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************
Late Residence West Hempfield	Draperies Candelabra and Candles.		***************************************
Age 82 years months days.	Washing & Laying out Remains, Shaving	3	20
Cause of Death Garalysis	Preservation of Remains.	. 3	00
Certifying Physician Ilos M. Lawrythi	No. 11. Casket bloth Trimming.	110	de
Date of Death Mary 11-1901	Solvee 4ms 272		***************************************
Date of Burial 14 - 1901	No. Handles	***************************************	***************************************
Funeral at House or Church.	No. Plate engraved		***************************************
Place of Burial Cleuse Stell Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.	***************************************	·
1 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Delivering to Cemetery		
Location of Grave	No. Robe	14	طلا
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡.  Show position of monument by □.	PrsGloves Linen Scarfs	+	***************************************
( Show position of moralment by = ,	Use ofDoz. Chairs		
1819	Flowers		
Inscription Blesser Wester	Hearse	6	00.
on Plate.	Carriages to	44	00
	Bluket	15	UU
Measurement. { Length to Heel 6 feet 6 in. } Width at Shoulder 8			*******************
Bill Rendered to Estuary Accuracy		######################################	
Bill Rendered to	Advertising		***************************************
When Rendered	Cemetery charges	***************************************	***************************************
MEMORANDUM.	Transportation Expenses, &c.	***************************************	29454442300044445453535
MEMOTANDOM.	Attendance & Assistants		
	Amount of Bill	189	00
	Amount Brought Forward	5.87	83
	Amount Carried Forward	2776	83
	PAYMENTS.		
had the state of t			i
			***************************************
ITEMS OF EXPENSE.			***************************************
TIME OF MAIL MITTON.			***************************************

ceased and	enter name of de- number of page future reference. Items of Bill, (cross out printed	items not	furnished.
Name of Dec'd Arthu Mang Late Residence Overnow  Age 60 years months days.  Cause of Death Rhennikis Compliable  Certifying Physician Fruit Officell  Date of Death May 16 1901	Door Crape  Draperies  Candelabra and  Candles.  Washing & Laying out Remains, Shaving  Preservation of Remains  Trimming.	Yo	00
Date of Burial " 19 - 1901  Funeral at House or Place of Burial Wewville Pa, Cemetery.	No. Plate engraved  Outside Box, (Pine, Chestnut, Oak, Cedar)	)	•
Cocation of Grave    Draw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Pl't'	3	80
Inscription on Plate.	Use of Doz. Chairs	, , , , , , , , , , , , , , , , , , ,	
Measurement. { Length to Heelin. } Width at Shoulder}  Bill Rendered to			
When Rendered	Advertising		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
MEMORÁNDUM.	Transportation Expenses, &c.	***************************************	4-4-44-44-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-
	Attendance & Assistants		
	Amount of Bill	43	80
	Amount Brought Forward	7/6	83
	Amount Carried Forward	820	63
	PAYMENTS.		
<b>Section 2</b>			
			***************************************
ITEMS OF EXPENSE.		****************************	
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		**********************************	PAROPALONE, STATEMENT DESCRIPTION

Number of Funeral\_\_\_\_

	ter name of de- umber of page uture reference. Items of Bill, (cross out printed	l items not fu	urnished.)
Name of Dec'd Odward Kennedy	Door Crape		
Late Residence Columbia Sa	Draperies Candelabra and Candles.	-	
Age years months days.	Washing & Laying out Remains, Shaving	5	00
Cause of Death Clostructum & Brusels	Preservation of Remains	5	00
Cause of Death	No.190 Casket. fine Trimming.	125	00
Certifying Physician Dr. Slemsty	Block Clock award Corners,	Terror of the second second second	
Date of Death Muy 24 7 907	BBC Co muche		
Date of Burial "28-1967	No. Sta., Handles	***************************************	
Funeral at House or Of Petters Catt, Church.	No. Plate engraved * Guafe	***************************************	
Place of Burial Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.	**************************	
	Delivering to Cemetery	*************************	
Location of Grave	NoRobe		*************************************
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs		***************************************
	Use of Doz. Chairs	***************************************	***************************************
	Flowers	6	00
Inscription	Hearse		
on Plate. Selvena Nemery  Of Your	Carriages to		***************************************
Measurement. { Length to Heelfeetin. }			berinitari, manydaptantowedy
( Width at Shoulder			
Bill Rendered to	Advertising		***************************************
		***************************************	
When Rendered	Cemetery charges		***************************************
MEMORANDUM.	Transportation Expenses, &c.		
	Attendance & Assistants	141	00
	Amount of Bill	820	63
	Amount Brought Forward	96/	-
	Amount Carried Forward	-/6/	63
	PAYMENTS.		
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-		***************************************	***********************
		***************************************	4922777777777777777
ITEMS OF EXPENSE.	1	***************************************	***************************************
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Number of Funeral Be careful to	enter name of de-		
ceased and	number of page future reference. Items of Bill, (cross out printed iter	ns not f	furnished.,
Jon Mariel			
Name of Dec'd John Throll	Door Crape	************************	***************************************
Late Residence Colimation Ga	Draperies Candelabra and Candles.		**********************
Age years 6 months days.	Washing & Laying out Remains, Shaving	5	00
Cause of Death Influentine of Bowels	Preservation of Remains	9	00
Certifying Physician NB Roofe	No Casket. Trimming.	60	00
Date of Death Muy 26 7901			
Date of Burial 1 29 - 1901			74******
Funeral at House orChurch.	No. Handles		***************************************
Place of Burial 114 Billiel - Cemetery.	No. Plate engraved		
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
	Delivering to Cemetery	ĺ	1.01.01.01.01.01.01.01.01.01.01.01.01.01
Location of Grave	No. BUL Robe	6	<b>0</b> ,
Oraw lines     1 for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs.		
Show position of monument by .	Use of Doz. Chairs		
	Flowers	-	
Inscription	Hearse	6	00
`	Carriages to		
on Plate.			***************************************
(Length to Heel & feet in )	-		
Measurement. { Length to Heelfeetin. } Width at Shoulder		-	
Bill Rendered to	64		
	Advertising		~ (
When Rendered	Advertising  Ceme+ery charges  Transportation Expenses, &c.  Attendance & Assistants		
	Transportation Expenses, &c.	74.	
MEMORANDUM.	Attendance & Assistants		**************************************
	Amount of Bill	12	00
		61	63
-		3 3	63
		***************************************	
`	PAYMENTS.		
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ITEMS OF EXPENSE		*****************	***************************************
ITEMS OF EXPENSE.			***************************************
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Number of Funeral Number for the Current Year 39

Be careful to enter name of deceased and number of page in index for future reference.

Name of Dec'd You - D. anus	Door Crape	+	
Late Residence Bolumbia Pa	DraperiesCandelabra andCandles.	***************************************	
Ageyearsmonthsdays.	Washing & Laying out Remains, Shaving	***************************************	
Cause of Death	Preservation of Remains		00
Certifying Physician MK Linus	No. PK Casket. Trimming.	10	00
Date of Death Muy 27 - 1901		***************************************	***************************************
Date of Burial 199 - 1901	NoHandles	***************************************	*
Funeral at House or Church.	NoPlate engraved	***************************************	***************************************
Place of Burial 444 Belled Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	-  -
Grave or Lot No. Section No.	Pl't'H'dl'sCorners on Box.	***************************************	***************************************
	Delivering to Cemetery	***************************************	***************************************
Location of Grave	NoRobe		***************************************
(Draw lines     for Graves in the Plot, and ) designate this one with a double Cross ‡. }	PrsGloves Linen Scarfs	444444444444444444444444444444444444444	*12000000000000000000000000000000000000
( Show position of monument by )	Use of Doz. Chairs	***************************************	***************************************
	Flowers	********************************	***************************************
Inscription	Hearse		***************************************
· \	Carriages to		
on Plate.		***************************************	***************************************
\( \text{Length to Heel}  \text{feet}  \text{in.} \( \text{)}		***************************************	***************************************
Measurement. Width at Shoulder	03		
Bill Rendered to			
Bill Rendered to	Advertising	***************************************	50
When Rendered	Cemetery charges	G	שע
	Transportation Expenses, &c.	5	00
MEMORANDUM.	Attendance & Assistants		
	Amount of Bill	20	00
*	Amount Brought Forward	8633	63
		053	63
	PAYMENTS.		
			1
		***************************************	***************************************
		***************************************	***************************************
ITEMS OF EXPENSE.		***************************************	***************************************
		***************************************	***************************************
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Association deviated and an accordance to the control of the contr		********	***************************************

Number of Funeral

Number for the Current Year #0

Be careful to enter name of deceased and number of page in index or future reference.

Name of Dec'd Frances B. McCum, Col	Door Crape		***************************************
Late Residence Columbia Ou	DraperiesCandelabra andCandles.	***************************************	122000000000000000000000000000000000000
Agemonthsdays.	Washing & Laying out Remains, Shaving	***************************************	*************************
Course of Dooth	Preservation of Remains	. 2	00
Certifying Physician 67. Municole	No. Carrier Cene Trimming.	30	00
Date of Death June 7- 1901		***************************************	***************************************
Date of Burial 10 - 1901		***************************************	********
Funeral at House or	No. Handles		***************************************
Place of Burial Policyfield Mt Boll Cemetery.	No. Plate engraved		***************************************
Grave or Lot NoSection No	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
	Delivering to Cemetery	***************************************	***************************************
Location of Grave	NoRobe	5-	00
{ Draw lines     for Graves in the Plot, and } designate this one with a double Cross ‡. } Show position of monument by □.	Prs		
Show position of monument by $\square$ .	Use of Doz. Chairs		-
	Flowers	:	
Inscription ( D. 24 & B.	Hearse	6	00
Cruncla 160 Mi Com	Carriages to	-1	-
on Plate. Agu 357.2.	V	**************************************	***************************************
(Length to Heel feet in.)		***************************************	410071047317731774000000000
Measurement. Width at Shoulder.		42222227707509507722577731445140950	*******************************
Bill Rendered to			
	Advertising	***************************************	***************************************
When Rendered	Cemetery charges		*****************
MEMORANDUM.	Transportation Expenses, &c.		
WILMOT(IIIVD G IV.	Attendance & Assistants	4	
1	Amount of Bill	43	00
	Amount Brought Forward	3053	63
	Amount Carried Forward	096	63
	PAYMENTS.		
	THE THE TO.	1	
		***************************************	***************************************
		***************************************	*************************
ITEMS OF EXPENSE.		***************************************	***************************************
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Name of the second seco		***************************************	******************************
		***************************************	******************************
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Number of Funeral\_\_\_\_\_\_\_Number for the Current Year

Be careful to enter name of deceased and number of page in index for future reference.

Name of Dec'd Me Burbara Musray	Door Crape	***************************************	***************************************
Late Residence Bolumbin Va	DraperiesCandelabra andCandles.		,
Age 62 years months days.	Washing & Laying out Remains, Shaving.	***************************************	\$1000000000000000000000000000000000000
Cause of Death Buffecalin	Preservation of Remains	3	00
Certifying Physician C.F. Muscle	No. Casket. Trimming.	65	00
Date of Death June 20 -190			
Date of Burial 4 - 44 - 1901			**************************************
Funeral at House or Holy Truly Church.	No. Handles		
Place of Burial Cemetery.	NoPlate engraved  Outside Box, (Pine, Chestnut, Oak, Cedar)		**************************************
Grave or Lot No. Section No.	Pi't' H'di's Corners on Box.		***************************************
~	Delivering to Cemetery		***************************************
Location of Grave	NoRobe	1	***************************************
Oraw lines     for Graves in the Plot, and designate this one with a double Cross ‡.	PrsGloves Linen Scarfs	2>2010045010010010000000000000000000000000	*******************************
( Show position of monument by □. )	Use of Doz. Chairs		*)****************
	Flowers	************************************	
Inscription	Hearse	6	00
on Plate.	Carriages to		
·		***************************************	
Measurement. { Length to Heelin. }		***************************************	
Measurement. { Length to Heel		442****************************	11041114000770140701701000004
Bill Rendered to			
	Advertising	***************************************	***************************************
When Rendered	Cemetery charges	*******************************	***************************************
MEMORANDUM.	Transportation Expenses, &c.	***************************************	******************
,	Attendance & Assistants	-/	
	Amount of Bilk	16	00
	Amount Brought Forward	096	63
	Amount Carried Forward	172	63
	PAYMENTS.		•
			***************************************
ITEMS OF EXPENSE.		2 350 187012-1-1001010177777777	2014794-17217-1721-0410-0-0600 <sub>1</sub>
TIENIO OI EXIENOE.		*	***************************************
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		*******	***************************************
		*******	2
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Number of Funeral Be careful to enter name of de-Number for the Current Year 42 ceased and number of page in index or future reference. Items of Bill, (cross out printed items not furnished.) Door Crape... Draperies Candelabra and Candles. Late Residence Washing & Laying out Remains, Shaving..... Preservation of Remains Cause of Death Certifying Physician Date of Death... No. Handles Funeral at House or Church. No.\_\_\_\_Plate engraved.... Cemetery. Place of Burial... Outside Box, (Pine, Chestnut, Oak, Cedar) ..... Grave or Lot No... Section No. Pl't' \_\_\_\_\_ H'dl's \_\_\_\_ Corners on Box. Delivering to Cemetery..... Location of Grave No.\_\_\_\_Robe.\_\_ Draw lines | | | for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □. Prs. Gloves Linen Scarfs. Use of \_\_\_\_\_ Doz. Chairs\_\_\_\_\_ Flowers.... Inscription Carriages to on Plate. Advertising Cemetery charges..... When Rendered... Transportation Expenses, &c. ... MEMORANDUM. Attendance & Assistants ..... Amount of Bill\_\_\_\_ Amount Brought Forward... Amount Carried Forward PAYMENTS.

ITEMS OF EXPENSE.

Number of Funeral			
ceased and n	nter name of de- number of page future reference. Items of Bill, (cross out printed ite	ems not fo	urnished.
Name of Dec'd amelia Colemna			1
	Door Crape		***************************************
Late Residence Comment On	DraperiesCandelabra andCandles.	***************************************	·····
Age years months days.	Washing & Laying out Remains, Shaving		
Cause of Death acute Delerum	Preservation of Remains	30	
Certifying Physician Miller of County	No. Caller Trimming.	30	00
Date of Death June 29-1901			
Date of Burial July 2 - 1901	No. Handles	***************************************	***************************************
Funeral at House or	NoPlate engraved		***************************************
Place of Burial 1114 Bellel Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	******************************	***************************************
Grave or Lot No. Section No.	Pl't'	***********************	
	Delivering to Cemetery	**********************	*************************************
Location of Grave	No. Robe	5	00
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs	************	***************************************
( Show position of monument by)	Use of Doz. Chairs	*******************************	***************************************
	Flowers	*************************	***************************************
Inscription (	Hearse	6	00
on Plate.	Carriages to	78770700000000000000000000000000000000	
on Flate.			4++4+2+++44++++444+++444
(Length to Heel feet in )			*******************************
Measurement. { Length to Heelin. } Width at Shoulder			
Bill Rendered to	1		
	Advertising	***************************************	************************
When Rendered	Cemetery charges	***************************************	-4
	Transportation Expenses, &c.	4	00
MEMORANDUM.	Attendance & Assistants	***************************************	4541-55420-55542555-685488
Withe 4 Dvied Coleman	Amount of Bill	50	00
1. 01	Amount Brought Forward	43	63
· -	Amount Carried Forward 32	93	63
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	PAYMENTS.		
		(40000000000000000000000000000000000000	
		***************************************	/43333000000000000000000000000000000000
ITEMS OF EXPENSE.	1	*************	***************************************
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Marie and an application of the control of the cont		47-77-722272244207074442	***************************************

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Name of Dec'd John adam Smith	Door Crape	**************************************	
Late Reside Co Skineler Kevic P.	Draperies Candelabra and Candles.	T0070001010101010101010101010101010101	***************************************
Age 63 years months days.	Washing & Laying out Remains, Shaving	<u> </u>	00
Cause of Death Cruplicum	Preservation of Remains	6	00
Certifying Physician 24. Gay Cer	No. Bucasket. Clothe Trimming.	50	00
Date of Death July 2 -1901	Econ lung 6-6	***************************************	***************************************
Date of Burial 1 5 190/			***************************************
	NoHandles		,
Funeral at House or Church.	NoPlate engraved	***************************	
Place of Burial Concerding (chestus)-/fiel Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	### ##################################	***************************************
Grave or Lot No. Section No.	Pl't'H'dl'sCorners on Box.		***************************************
	Delivering to Cemetery	***************************************	***************************************
Location of Grave	NoRobe	***************************************	***************************************
Draw lines     for Graves in the Plot, and designate this one with a double Cross ‡.	Prs. Gloves Linen Scarfs.	***************************************	***************************************
( Show position of monument by □.	Use of Doz. Chairs		**********
	Flowers		
{	Hearse	6	OU
Inscription		***************************************	4
on Plate.	Carriages to	***************************************	***************************************
		***************************************	
Measurement. { Length to Heel	Lliffen		00
( Width at Shoulder) Bill Rendered to	Wexture & Stuckings	***************************************	150
DIT Nendeled to	Advertising		
		-,	***************************************
When Rendered	Cemetery charges	***************************************	***************************************
MEMORANDUM.	Transportation Expenses, &c.		00101090060099999999988949949
	Attendance & Assistants	6 N	170
,	Amount of Bill	22 (13	13
		3293	13
	Amount Carried Forward	36/	7 0
	PAYMENTS.		
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,		***************************************	******************************
ITEMS OF EXPENSE.		***************************************	
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Number of Funeral Be careful to enceased and no	umber of page 14 F DIII /	1	
Number for the Current Year 40 ceased and no in index for f	uture reference. Items of Bill, (cross out printed	items not t	urnisnea.
Name of Dec'd	Door Crape	***************************************	
Late Residence Columnia da	DraperiesCandelabra andCandles.		
Age	Washing & Laying out Remains, Shaving	9	00
Cause of Death Causes	Preservation of Remains	5	00
Certifying Physician Charles Cha	No. Casket. Trimming.	55	00
Date of Death July 6 -/96/		***************************************	100
Date of Buria	NoHandles	***************************************	***************************************
Funeral at House or Church.	NoPlate engraved		***************************************
Place of Burial Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	
Grave or Lot NoSection No	Pl't' H'dl's Corners on Box.		***************************************
	Delivering to Cemetery	***************************************	***************************************
Location of Grave	No. Robe	6	00
Oraw lines       for Graves in the Plot, and   designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs	***********************	***************************************
( Show position of monument by $\square$ . )	Use of Doz. Chairs	***************************************	
	Flowers	***************************************	***************************************
Inscription	Hearse	6	00
on Plate.	Carriages to	*	************************
			***************************************
\( \text{Length to Heel} \)in. \( \)		***************************************	***************************************
Measurement. Width at Shoulder		************************	+4040-107-007-007-00-00-00-00-00-00-00-00-00-00
Bill Rendered to		***************************************	
	Advertising	4/4440441114141111111111111111111111111	1-11-11-11-11-11-11-11-11-11-11-11-11-1
When Rendered	Cemetery charges	5	-00
MEMORANDUM.	Transportation Expenses, &c.	***********************************	***************************************
	Attendance & Assistants		
	Amount of Bill	82	00
	5	361	13
	Amount Carried Forward 3	44.3	13
	PAYMENTS.		
			1
		***************************************	
		740749444444444444444444444444444444444	***************************************
ITEMS OF EXPENSE.		4	100000000000000000000000000000000000000

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Number of Funeral

Number for the Current Year 46

Be careful to enter name of deceased and number of page in index or future reference.

Name of Dec'd Mrs. Stumbellines	Door Crape		
Late Residence Goldmulin Cha	Draperies Candelabra and Candles.	***************************************	
Age 79 years months days.	Washing & Laying out Remains, Shaving	Nessana	***************************************
Cause of Death Old age	Preservation of Remains	5	00
Certifying Physician F-M. during en	No. Casket. Cottle Trimming.	45	00
Date of Death July 11—1961		***************************************	***************************************
Date of Burial		***************************************	*************************
	No. Handles	***************************************	***************************************
Funeral at House or Market Berkel Cemetery.	No. Plate engraved	***************************************	*******************************
Grave or Lot NoSection No	Outside Box, (Pine, Chestnut, Oak, Cedar)	2.63883035445555545630000000000000000000000000	***************************************
	Delivering to Cemetery Corners on Box.	***************************************	
Location of Grave	No. BUC Robe	ර	60
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.		
Show position of monument by .	Use of Doz. Chairs		***************************************
	Flowers		
nscription (	Hearse	6	00
`	Carriages to	4	00
on Plate.			**************************************
Measurement   Length to Heelfeetin.		***************************************	***************************************
Measurement. Width at Shoulder		*4********************	***************************************
Bill Rendered to			
	Advertising		**************************************
When Rendered	Cemetery charges	5	00
MEMORANDUM.	Transportation Expenses, &c. Phus Cur	5	00
TILITOT(III) DOFT.	Attendance & Assistants		
	Amount of Bill	75	00
	Amount Brought Forward	443	13
	Amount Carried Forward	518	13
	PAYMENTS.	, , , , , , , , , , , , , , , , , , , ,	====
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ITEMS OF EXPENSE.	•	***************************************	************************
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	r future reference. Items of Bill, (cross out printed	l items not f	urnished
Name of Dec'd Mary & Daily	Door Crape		
ate Residence Columbia Pa	Draperies Candelabra and Candles.	***************************************	*******
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ageyears	Preservation of Remains	1	00
	No. Casket. Plusto Trimming.	20	00
Dertifying I hysician	January Landson State of the Control		***************************************
Date of Death July 15-1901		***************************************	
Pate of Burial 18 7901	No. Handles	\$	
uneral at House or	No. Plate engraved	'adfarano_moranamentacoor.com	***************************************
lace of Burial MT Sexuel Cemeter	Outside Box, (Pine, Chestnut, Oak, Cedar)		
rave or Lot NoSection No	Pl't'H'dl'sCorners on Box.	***************************************	
	Delivering to Cemetery	**************************	***************************************
ocation of Grave	NoRobe	A**(**********************************	***************************************
Draw lines       for Graves in the Plot, and   designate this one with a double Cross ‡. } Show position of monument by □.	Prs. Gloves Linen Scarfs	***************************************	***************************************
Show position of monument by □.	Use of Doz. Chairs	***************************************	**************
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Measurement. Width at Shoulder.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
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	Transportation Expenses, &c.	***************************************	
MEMORANDUM.	Attendance & Assistants		00
	Amount of Bill	23	00
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Number of Fune		
Number for the	Current Year 48	

Be careful to enter name of deceased and number of page in index or future reference.

Name of Dec'd Pearl V. Hassin	Door Crape		
Late Residence Bolisman Ca	DraperiesCandelabra andCandles.	***************************************	
Age 2 years 4 months days.	Washing & Laying out Remains, Shaving	***************************************	,
Cause of Death	Preservation of Remains		00
Certifying Physician Dr. 25, Warms	NoCasket. Pluse Trimming.	22	00
Date of Death  Date of Burial July 25-/90/			
	NoHandles	***************************************	
Funeral at House or Church.  Place of Burial Park Separate Cemetery.	NoPlate engraved	***************************************	
	Outside Box, (Pine, Chestnut, Oak, Cedar)		B /444,4444,4444,4444
Grave or Lot No. Section No.	Pl't'H'dl'sCorners on Box.	***************************************	
Location of Grave	Delivering to Cemetery	***************************************	
	NoRobe	***************************************	***************************************
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.	***************************************	······································
Show position of monutinent by	Use of Doz. Chairs	******************************	*********
	Flowers	*******************************	
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on Plate.	Carriages to		ツ
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Bill Rendered to	*		
	Advertising		::::::::::::::::::::::::::::::::::::::
When Rendered	Cemetery charges	***************************************	**********************
MEMORANDUM.	Transportation Expenses, &c.	************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Attendance & Assistants		
	Amount of Bill	25	00
	Allouit blought lotward	3541	13
	Amount Carried Forward	566	13
	PAYMENTS.		
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ITEMS OF EXPENSE.	Indiana.		
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ceased and m	ter name of de- number of page future reference. Items of Bill, (cross out printed	l items not fo	urnished.
Name of Dec'd Mores Lake Colores	Door Crape		******* *******************************
Late Residence Line Juane Cosylina	Draperies Candelabra and Candles.	a	***************************************
Ageyearsmonthsdays.	Washing & Laying out Remains, Shaving	***************************************	***************************************
Cause of Death Musiculy	Preservation of Remains		***************************************
Certifying Physician Müller	No	30	00
Date of Death	in clusing all	***************************************	***************************************
Date of Burial	Services	***************************************	***************************************
Funeral at House orChurch.	No. Handles	***************************************	***************************************
Place of Burial Baltimus Cemetery.	NoPlate engravedOutside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	7/8484444444
Grave or Lot NoSection No	Pl't'H'dl's	***************************************	1
	Delivering to Cemetery	***************************************	
Location of Grave	NoRobe		*10100000000000000000000000000000000000
Oraw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs	***************************************	***************************************
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	Flowers	***************************************	***************************************
Inscription (	Hearse	***************************************	
)	Carriages to		***************************************
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When Rendered	Cemetery charges		
MEMORANDUM.	Transportation Expenses, &c.		**************
	Attendance & Assistants		
13 2.	Amount of Bill	30	00
	Amount Brought Forward	8566	13
	Amount Carried Forward	596	13
	PAYMENTS.		
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Number of Funeral Be careful to	enter name of de-		
ceased and	number of page future reference. Items of Bill, (cross out printe	d items not t	furnished.
61 11 11 -		1	1
Name of Dec'd Oller Henry Hoyulugler	Door Crape	1	***************************************
Late Residence Struesvelles Ou	DraperiesCandelabra andCandles.		
Age 60 years months days.	Washing & Laying out Remains, Shaving	G	00
Cause of Death Scucer & Struck	Preservation of Remains.	6	05
Certifying Physician	No. Casket. Bleek Trimming.	30	00
Date of Death Ung 18 1901			·····
Date of Burial (6 (98)		***************************************	***************************************
Funeral at House or Church.	No. Handles	***************************************	
Place of Burial Www. Cemetery.	NoPlate engravedOutside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	***************************************
Grave or Lot NoSection No	Pl't'H'dl's	>+++++++++++++++++++++++++++++++++++++	***************************************
	Delivering to Cemetery	***************************************	
Location of Grave	No BOK Robe	8	00
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by	PrsGloves Linen Scarfs.		***************************************
Show position of monument by □.	Use of Doz. Chairs	***************************************	***************************************
	Flowers		********************************
Inscription	Hearse	6	0'0
	Carriages to		
on Plate.		***************************************	
Measurement. \{ Length to Heel feet in. \}	Dlewelt-	¥	00
Measurement. Width at Shoulder		***************************************	*************************
Bill Rendered to			
	Advertising	***************************************	
When Rendered	Cemetery charges		
MEMORANDUM.	Transportation Expenses, &c.		***************************************
MEMORANDOM.	Attendance & Assistants		
	Amount of Bill	78	00
	Amount Brought Forward	5-96	13
	Amount Carried Forward	8674	13
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	PAYMENTS.		
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ITEMS OF EXPENSE.			*20000000000000000000000000000000000000
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Number of Funeral	enter name of de-		
ceased an	or future reference. Items of Bill, (cross out printed	items not f	urnished
Name of Dec'd Esteur E. Fishel	Door Crape	C)	
Late Residence Masingha Boro,	Draperies Candelabra and Candles.		***************************************
//	W 11 0 1 1 0 1 1		***************************************
Age	Preservation of Remains.	1	50
Cause of Death		/2	
Certifying Physician	No Casket Trimming.		
Date of Death Aug 18-1901		***************************************	
Date of Burial (190)		***************************************	***************************************
Funeral at House or Bethel Churc	h, Handles	***************************************	
Place of Burial Nachwighn Born, Cemeter	NoPlate engraved		************************
	Outside Box, (1 iiie, Oilestiiat, Oak, Cedai)	***************************************	***************************************
Grave or Lot No. Section No.	and the second s	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	***********************
Location of Grave	Delivering to Cemetery		
	NoRobe	***************************************	***************************************
Draw lines       for Graves in the Plot, and   designate this one with a double Cross ‡.	PrsGlovesLinen Scarfs	***************************************	
( Show position of monument by □. )	Use of Doz. Chairs		*
	Flowers	D4990401409904000101099999900999999	
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rscription .	Carriages to		
on Plate.			***************************************
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(Width at Shoulder		***************************************	********************
Bill Rendered to		***************************************	*****************
	Advertising	********************************	())
When Rendered	Cemetery charges	***************************************	A,040-1440-1444-1444-1444-1444-1444-1444-
MEMORANDUM.	Transportation Expenses, &c		
MEMORANDOM.	Attendance & Assistants		
	Amount of Bill	13	50
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	Amount Brought Forward	103	2 5
	Amount Carried Forward.	60/	80
	PAYMENTS.		=1
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ITEMS OF EXPENSE.		***************************************	00V04200**0+0\\$}***
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ceased and	enter, name of de- number of page future reference. Items of Bill, (cross out printer	d items not f	urnished.
Name of Dec'd  Late Residence  Oblimation  Age  Secretifying Physician  Certifying Physician  Date of Death  Date of Burial	Door Crape  Draperies Candelabra and Candles.  Washing & Laying out Remains, Shaving  Preservation of Remains  No. California Trimming.  Pluble lumber words  No. Handles		00
Funeral at House or Cherch.  Place of Burial Cemetery.  Grave or Lot No. Section No.  Location of Grave  {  Draw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	No	*	
Inscription on Plate.  Measurement. { Length to Heel feet in. } Width at Shoulder }  Bill Rendered to		6	
When Rendered	Advertising  Ceme*ery charges  Transportation Expenses, &c.	U	00
Hene Jans for by M.S. Ellume to Mr Bolseeler,	Attendance & Assistants  Amount of Bill  Amount Brought Forward  Amount Carried Forward	2/ 3687 3708	63 63
	PAYMENTS.		<b>*</b>
ITEMS OF EXPENSE.			

ceased and n	ter name of de- number of page future reference. Items of Bill, (cross out printed	items not fu	urnished.)
Name of Dec'd Elizabeth Mayer Righter	Door Crape	1	
Late Residence Columbia / Pa	Draperies Candelabra and Candles.		***************************************
	Washing & Laying out Remains, Shaving.		***************************************
Age years months days.	Preservation of Remains.	5	00
Cause of Death Mymbie fold age	No. KS Casket. B. D. Q. Q. Trimming.		
Certifying Physician Aly R brug	Ivlied May	125	00
Date of Death Dept. 1-1901	Satir Cining		
Date of Burial 4-190/	Y No. OYOU Handles		
Funeral at House or Chare	NoPlate engraved	***************************************	***************************************
Place of Burial Bellet Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.		
	Delivering to Cemetery		******************************
Location of Grave	No. Bu C Robe Stemeda	18	00
Draw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs	**************************************	*******************************
Show position of monument by □.	Use of Doz. Chairs		***************************************
	Flowers		***************************************
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Inscription	6 Carriages to	24	00
on Plate.	/ RU	2	00
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Measurement. { Length to Heelfeetin. }	to mais	3	00
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Bill Rendered to		0	
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When Rendered	Cemetery charges	0	00
MEMORANDUM.	Transportation Expenses, &c.	***************************************	<
	Attendance & Assistants	10.5	0:14
• ,	Amount of Bill	173	00
	Amount Brought Forward	708	60
	Amount Carried Forward	903	63
	PAYMENTS.		
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ITEMS OF EXPENSE.		******************************	ermberseihedt (radibilit
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Number of Funeral Be careful to	enter name of de-		
Number for the Current Year 54 ceased and in index or	number of page future reference. Items of Bilt, (cross out printe	d items not	furnished
Name of Dec'd April Shurk Late Residence Celumbia Pa	Door CrapeCandelabra andCandles.		
Age years months days.  Cause of Death yblive fever  Certifying Physician by Muncel	Washing & Laying out Remains, Shaving  Preservation of Remains  No	40	00
Date of Death Seff. 8-190/ Date of Burial Sookmun Church. Place of Burial Mount Bethel Cemetery.	No Handles No Plate engraved Outside Box, (Pine, Chestnut, Oak, Cedar)		
Grave or Lot No. Section No.  Location of Grave  { Draw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Pl't'H'dl'sCorners on Box.  Delivering to Cemetery		
Inscription on Plate. Church 32 yrs.	HearseCarriages to	. 6	00
Measurement. { Length to Heel			
When Rendered John Should	Advertising	10	50
MEMORAXIDIIM	Transportation Expenses, &c.	*******************************	

Attendance & Assistants

Amount of Bill Amount Brought Forward..... Amount Carried Forward....

MEMORANDUM.

ITEMS OF EXPENSE.

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Number of Funeral Bo confulto of			
ceased and i	nter name of de- number of page future reference. Items of Bill, (cross out printe	d items not f	urnished.
Name of Dec'd Luisa Movven	Door Crape		
Late Residence Mashinghu Boro,	Draperies Candelabra and Candles.	***************************************	
Age 80 2 years months days.	Washing & Laying out Remains, Shaving.	***************************************	***************************************
- /// /	Preservation of Remains	3	cu
Cause of Death Garulysis	No. Casket Rozewood Trimming.	195	00
Certifying Physician	Jasket Carried Tilling.		***************************************
Date of Death Seff, 10 - 1901		***************************************	
Date of Burial	NoHandles	***************************************	**************************************
Funeral at House or Church.	NoPlate engraved		
Place of Burial Musturghen Bero Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		400000000000000000000000000000000000000
Grave or Lot No. Section No.	Pl't' H'di's Corners on Box,		
	Delivering to Cemetery		******************
- Location of Grave	NoRobe	************************************	***************************************
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs	******************************	***************************************
Show position of monument by .	Use of Doz. Chairs		
	Flowers		44096-0404-000-00000-00000
	Hearse	***************************************	***************************************
Inscription Muller		745467444444444444444444444444444444444	***************************************
on Plate.	Carriages to	***************************************	***************************************
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Measurement. { Length to Heelfeetin. }		01102200000000000000000000000000000000	***************************************
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Bill Rendered to her 4 194		***************************************	
	Advertising	***************************************	***************************************
When Rendered Stull of Remisa Howes		***************************************	***************************************
MEMORANDUM.	Transportation Expenses, &c.	4434187494979999999999999999999999999999999	***************************************
	Attendance & Assistants		
	Amount of Bill	40	00
b	Amount Brought Forward	3965	13
	Amount Carried Forward	4000	13
	PAYMENTS.		
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Number of Funeral Be careful to e	nter, name of de-		
Number for the Current Year 36 ceased and in index or	number of page future reference. Items of Bill, (cross out printe	d items not f	urnished.
5. 10.11		(1	
Name of Dec'd Eligabeth Levra Roully	Door Crape	***************************************	.,
Late Residence Kirrestrille Car	Draperies Candelabra and Candles.	***************************************	***************************************
Ageyearsmonths6_days.	Washing & Laying out Remains, Shaving	/*************************************	***************************************
Cause of Death	Preservation of Remains	***************************************	***************************************
Certifying Physician	No. 1. Casket Trimming.	10	00
Date of Death	-in Cluding all		45-2
Date of Burial "15-190/	Services	***************************************	********
· ·	NoHandles		***************************************
MIXINI Q	NoPlate engraved		
	Outside Box, (Pine, Chestnut, Oak, Cedar)		*,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.	***************************************	***************************************
Location of Grave	Delivering to Cemetery	494944444444444444444444444444444444444	**************************************
	NoRobe		**************************************
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.	***************************************	*10000000000000000000000000000000000000
	Use of Doz. Chairs		*********
	Flowers	***************************************	***************************************
Inscription	Hearse	***************************************	***************************************
on Plate.	Carriages to	***************************************	***************************************
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Measurement. { Length to Heelin. }			47447744444444444444444444444444444444
Width at Shoulder -		***************************************	**************************************
Width at Shoulder  Bill Rendered to Western Revel Sley		*	
	Advertising		
When Rendered	Ceme+ery charges	*************************	*******************
MEMORANDUM.	Transportation Expenses, I.C.	***************************************	
WENTOT(MYD OTT.	Attendance & Assistants		
	Amount of Bill	1.0	00
. itself	Amount Brought Forward	4005	1.3
	Amount Carried Forward	4015	13
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	PAYMENTS.		
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ITEMS OF EXPENSE.		***************************************	***************************************
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Number of Funeral Page 141	· ·		
ceased and	nter name of de- number of page future reference. Items of Bill, (cross out printe	d items not fu	urnished.)
Ilam touth Home			
Name of Decid Sewy Joseffu Homo	Door Crape	**************************************	***************************************
Late Residence Coffeentier Pu	Draperies Candelabra and Candles.	***************************************	***************************************
Age years months days.	Washing & Laying out Remains, Shaving.		***************************************
Cause of Death Mysusymus	Preservation of Remains		00
Certifying Physician J'M' cerupsture		10	
Date of Death	services	***************************************	***************************************
Date of Burial	No. Handles	***************************************	***************************************
Funeral at House or Holy Join, Chapelhurch.	No. Plate engraved		***************************************
Place of BurialCemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot NoSection No	Pl't' H'dl's Corners on Box.		***************************************
	Delivering to Cemetery		
Location of Grave	NoRobe		***************************************
Draw lines       for Graves in the Plot, and )	Prs. Gloves Linen Scarfs		
designate this one with a double Cross ‡. Show position of monument by □.	Use of Doz. Chairs		
	Flowers		
	Hearse		***************************************
Inscription	Carriages to		***************************************
on Plate.	Carrages to	***************************************	***************************************
		***************************************	***************************************
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(dreen through		,45865,0926980000000000000000000000000000000000	
Bill Rendered to	Advotising	Page 147 5471 2411 241 541 541 541 541 541 541 541 541 541 5	***************************************
	Advertising	***************************************	***************************************
When Rendered	Cemetery charges		
MEMORANDUM.	Transportation Expenses, &c.	***************************************	***************************************
The state of the s	Attendance & Assistants	4 .	=
	Amount of Bill	10	00
Name and the same	Amount Brought Forward	10/5	/3
	Amount Carried Forward	7025	13
	PAYMENTS.	***	
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			***************************************
ITEMS OF EXPENSE.		***************************************	************
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Number of Funeral Be careful to e	enter name of de-		
ceased and	number of page future reference. Items of Bill, (cross out printe	d items not	furnished.
- A			
Name of Dec'd Infant Child & Hany Grunn	Door Crape	***************************************	
Late Residence / Morwood Pa	Draperies Candelabra and Candles.	***************************************	***************************************
Ageyearsmonthsdays.	Washing & Laying out Remains, Shaving	***************************************	*******************************
Cause of Death	Preservation of Remains	***************************************	***************************************
	No Trimming.	***************************************	*
Certifying Physician  Date of Death  Dett. 16-1901	Thus Mule Cothin	***************************************	***************************************
	-including temps	0	00
Date of Burial 19	No. Handles	***************************************	***************************************
Funeral at House or Church.	NoPlate engraved		
Place of Burial Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	411000000000000000000000000000000000000	***************************************
Grave or Lot No. Section No.	Pl't'H'dl'sCorners on Box.		***************************************
•	Delivering to Cemetery	***************************************	***************************************
Location of Grave	NoRobe	***************************************	***************************************
Oraw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.	******************************	
( Show position of monument by . )	Use of	***************************************	
	Flowers	***************************************	
(	Hearse		
Inscription	Carriages to		
on Plate.		-	***************************************
Measurement. { Length to Heelin. }		***************************************	***************************************
(Width at Shoulder)		***************************************	***************************************
Bill Rendered to Harry Corvin			***************************************
	Advertising	***************************************	
When Rendered	Cemetery charges		***************************************
MEMORANDUM.	Transportation Expenses, &c.	***************************************	***************************************
	Attendance & Assistants		•
	Amount of Bill	5	00
	Amount Brought Forward	4025	13
	Amount Carried Forward	4030	13
	PAYMENTS.		
	PAIMENIS.		
TERMS OF EXPENSE		***************************************	***************************************
ITEMS OF EXPENSE.		***************************************	************************
		***************************************	***************************************
		**>************************************	E00210-0760040404040404040404040404040404040404
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		404/232222000000000000000000000000000000	************************
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Number of Funeral Be careful to as	nter name of de-		
ceased and r	number of page future reference. Items of Bill, (cross out printed	d items not f	urnished.
Name of Dec'd Chester Melbourse Shuil			}
		***************************************	*******
Late Residence Overhundin Ca	Draperies Candelabra and Candles.	***************************************	
Age years months days.	Washing & Laying out Remains, Shaving		
Cause of Death Duy Po Malana	Preservation of Remains	9	00
Certifying Physician M.G. Taylor	No Mu Casket. Trimming.	45	00
Date of Death 04/19-190/		***************************************	***************************************
Date of Burial 27 - 1901			
Funeral at House or U. 3 - Church.	No. 6 Handles	•	***************************************
Place of Burial MIT Bittlel Cemetery.	No. Plate engraved	***************************************	***************************************
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	ALUMANANANANANANANANANANANANANANANANANANAN	*
Grave of Lot No.	Pl't' H'dl's Corners on Box.	***************************************	***************************************
Location of Grave	Delivering to Cemetery	404444444444444444444444444444444444444	***************************************
	NoRobe		
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by	PrsGloves Linen Scarfs	\$1.5000000 \$1.100000000000000000000000000000	***************************************
	Use of	***************************************	
	Flowers		***************************************
Inscription / _ M. 11 Al.	Hearse	6	00
on Plate. Chester Melborn Ofinition of Plate.	Carriages to	t-Ministra Marian	***************************************
agen 15 for	4	ADPPRESENTATION SAMESANDANICOPHISMOST	***************************************
(Length to Heel 6 feet 6 in.)		***************************************	***************************************
Width at Shoulder		0704547015474747474747474444444444444444	109007-008020000000000000000000000000000000
Bill Rendered to B. St. Olivelar			
•	Advertising	NEWSTRANSMINISTRANSE SEALAND CONTROL OF	***************************************
When Rendered	Cemetery charges	4	0
MEMORANDUM.	Transportation Expenses, &c.	1200000-07000000000000000000000000000000	
	Attendance & Assistants		
	Amount of Bill	60	00
,	Amount Brought Forward	4030	13
	Amount Carried Forward.	4090	13
	PAYMENTS.	-	
			ı
4		EAA1844444444444444444	***************************************
TOTAL OF EXPENSE		410107741-411010101010101010111111111111	***************************************
ITEMS OF EXPENSE.		***************************************	
		***************************************	******* *******************************
		***************************************	***************************************
	11 - 12 - 14 - 14 - 14 - 14 - 14 - 14 -		***************************************

Number of Funeral Be careful to e	enter name of de-		
ceased and	number of page future reference. Items of Bill, (cross out printed	items not f	urnished.
Name of Dec'd Herry Kollenburser	Door Crape	1	1
Late Residence Collemnstru Da	DraperiesCandelabra andCandles.	9 A g (P	***************************************
Age 59 years months days.	Washing & Laying out Remains, Shaving	5	w
Cause of Death Corrupticulin Stowacu	Preservation of Remains	5	-00
Certifying Physician Test Paycort	No. 33 Casket. Doleil Cast Trimming.	85	00
Date of Death Deft 25-1901	13. C. Cu		***************************************
62 - 1901			***************************************
Funeral at House or St Pauls Link Church.	NoHandles	***************************************	***************************************
Funeral at House or Church.	NoPlate engraved	***************************************	
Place of Burial 7011 Settled Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	*****************************	*125***********************************
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.	***************************************	***************************************
Location of Grave	Delivering to Cemetery		
	No. BOK Die Dil		PA
{ Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. } Show position of monument by □.	PrsGloves Linen Scarfs.	***************************************	***************************************
, ( Show position of monument by )	Use of		**********
	Flowers	***************************************	######################################
Inscription // 892	Hearse	6	C14
on Plate. Nemy Kodenshuser	Carriages to	***************************************	******************************
1/901		*****************************	
(Length to Heel 6 feet in.)		*******************************	*******************
Measurement. Width at Shoulder	Dlepher Tours		21-
Bill Rendered to State Josephy			
Roileuluuser	Advertising		
When Rendered	Cemetery charges	5	• 0
MEMORANDUM.	Transportation Expenses, &c.		
MEMORANDOM.	Attendance & Assistants		
·	Amount of Bill	118	25-
4.5	Amount Brought Forward	1090	18
	Amount Carried Forward	208	38
	PAYMENTS.		
4	FAIMENIS.	-	
ITEMS OF EXPENSE.		1	
			10700-00701-0000-0-0-111-00-09
		***************************************	************************
		**************************************	************************

Number of Funeral			
De careful to en ceased and n	iter name of de- number of page future reference. Items of Bill, (cross out printe	d items not f	urnished.
Name of Dec'd Samabus Menelly	Door Crape		***************************************
Late Residence Columbia, Pa	Draperies Candelabra and Candles.	***************************************	
Age 8/ years months days.	Washing & Laying out Remains, Shaving	3	00
Cause of Death Dropsuy	Preservation of Remains	5	00
Certifying Physician J.M. Kirningston	No. 3. Coffin Trimming.	30	00
Date of Death Oct 3 1961		***************************************	
Date of Burial 5 - 1901		***************************************	***************************************
	No. G Handles		
Funeral at House or Church.  Place of Burial Cluer Spring Cemetery.	NoPlate engraved	**************************************	***************************************
/ /	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	***************************************
Grave or Lot No. Section No.	Pl't'H'dl'sCorners on Box.	***************************************	
Location of Grave	Delivering to Cemetery		
	NoRobe	18-	00
Oraw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by	Prs. Gloves Linen Scarfs	#102400400000000000000000000000000000000	***************************************
( Show position of monument by )	Use of		1074×1×1×1×1×1×1×1×1×1×1×1×1×1×1×1×1×1×1×1
	Flowers	<b>4</b>	
Inscription	Hearse	***************************************	***************************************
on Plate.	Carriages to	****************************	***************************************
And a second distribution of the second seco		***************************************	***************************************
Measurement. { Length to Heel 6 feet in. }		***************************************	
Measurement. { Width at Shoulder			***************************************
Bill Rendered to			
	Advertising	***************************************	-01400-00-00-00-00-00-00-00-00-00-00-00-00-
When Rendered	Cemetery charges		
	Transportation Expenses, &c.		
MEMORANDUM.	Attendance & Assistants		1
	Amount of Bill	40-	00
*	Amount Brought Forward	4208	38
and the second s	Amount Carried Forward	4253	38
		1	
	PAYMENTS.		
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Value		***************************************	***************************************
		***************************************	40.000000000000000000000000000000000000
ITEMS OF EXPENSE.		***************************************	agrahas vall take szedlínes
M. Andrewson and			100-00-0-00-00-00-00-00-00-00-00-00-00-0
			***************************************
			***************************************
And the Control of th	of the Committee of the	******* * *******************	

Number	of Fune	ral	
Numb	er for the	Current Year	62

Be careful to enter name of deceased and number of page in index or future reference.

Name of Dec'd Wy St. Mc Cumsey , gr	Door Crape	***************************************	
Late Residence Plul ~ Ow	Draperies Candelabra and Candles.	***************************************	
Age years months days.	Washing & Laying out Remains, Shaving	3	00
Cause of Death RR accident	Preservation of Remains	5	00
Certifying Physician Chultures was Kanny	No Buc Casket Trimming.	60	00
Date of Death gottumellatorer Ou			***************************************
Date of Burial 18 1901		***************************************	******** ******************************
Funeral at House or Presbyteniel (Kannin flace Church.	No Handles	***************************************	***************************************
Place of BurialCemetery.	NoPlate engraved	***************************************	***************************************
Grave or Lot NoSection No	Outside Box, (Pine, Chestnut, Oak, Cedar)	******************************	***************************************
	Delivering to Cemetery	***************************************	***************************************
Location of Grave	No. BUC Robe	12	50
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡.	Prs. Gloves Linen Scarfs.		
Show position of monument by $\square$ .	Use ofDoz. Chairs		
	Flowers		
	Hearse		
Inscription We A- Mcleusey	Carriages to	•	
on Plate. Agel 39 Joz.	V	******************************	***************************************
(Length to Heel 5 feet 9 in)	4/2	***************************************	***************************************
Measurement. Width at Shoulder	Q/J-y	*****************************	
Bill Rendered to Hul, & Keuly K The Cop	· · · · · · · · · · · · · · · · · · ·		
Thurse With St. Williamy-	Advertising	***************************************	***************************************
When Rendered Cat 8-/90/	Ceme+ery charges	*************************************	************************
MEMORANDUM.	Transportation Expenses, &c.		87
WILMOT(MIVD CIT.	Attendance & Assistants		
	Amount of Bill	84	37
	Amount Brought Forward	4253	38
	Amount Carried Forward	4337	75
	PAYMENTS.		
		1	
	•	***************************************	***************************************
		***************************************	***************************************
ITEMS OF EXPENSE.		*************************	
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			**********************
		***************************************	***********************
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Number of Funeral	the same of do		
ceased and r	nter name of de- number of page future reference. Items of Bill, (cross out printer	d items not f	urnished.
Trained to the day of the second seco	ruture reference.		
Name of Dec'd Slevrge Know	P C		1
Late Residence Bellevuliu Ga	Door Crape	***************************************	***************************************
	Draperies Candelabra and Candles.	- 6	100
Age 36 years months days.	Washing & Laying out Remains, Shaving	(5-	00
Cause of Death Buglito deserve	Preservation of Remains Trimming.	***************************************	-1 -1
Certifying Physician Allows	No Casket. Trimming.	45	
Date of Death Oct 23 1901		***************************************	***************************************
Date of Burial 24- 1901		***************************************	*******************************
Funeral at House or Church.	No. 6 Handles		
Place of Burial Mr. Beitel Cemetery.	No. Plate engraved	***************************************	***************************************
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	***************************************
Glaye of Lot No.	Pl't' H'dl's Corners on Box.	***************************************	
Location of Grave	No. Park Robe	3-	00
( Draw lines       for Graves in the Plot. and )			
{ Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. } Show position of monument by □.	PrsGloves Linen Scarfs	***************************************	***************************************
	Use of Doz. Chairs		***************************************
	Flowers	***************************************	* *************************************
Inscription Surge Oliver	Hearse	201103714(0200241004444444444444444444444444444	************************
on Plate.	Carriages to	***************************************	/
		***************************************	***************************************
(Length to Heel feetin.)		***************************************	
Width at Shoulder			41411-07007720444400000
Bill Rendered to Lizzie Scarces	P		
	Advertising		***************************************
When Rendered Oct 25-1901	Cemetery charges	5-	00
			***************************************
MEMORANDUM.	Transportation Expenses, &c.		
	Attendance & Assistants	1.5	00
	Amount of Bill	1227	7
Victoria de la companya del companya de la companya del companya de la companya d	Amount Brought Forward		/J.
	Amount Carried Forward	7702	John
	PAYMENTS.		
*	Paid Oct 2571801	65	100
National Commission of the Com			***************************************
		***************************************	***************************************
ITEMS OF EXPENSE.		*****************************	44+244000000000000000000000000000000000
		***************************************	**
	The same of the sa		***********************
		*******   *****************************	0 A101801410409101110 0-00

Number of Funeral

Number for the Current Year 64

Be careful to enter name of deceased and number of page in index or future reference.

Name of Dec'd Hygue Murphy	Door Crape		100000000000000000000000000000000000000
Late Residence Columbia Pa	Draperies Candelabra and Candles.	~~~~	******
Age 76 years months days.	Washing & Laying out Remains, Shaving	5	00
Cause of Death General debiling	Preservation of Remains	5	00
Certifying Physician Frusk Strukles	No Bek Casket. Colotte Trimming.	65	00
Date of Death Oct 13 - 1901		*	******************************
Date of Burial 4 26 -1 901		***************************************	********
Funeral at House or St Pallero Could Church.	6 No. Handles		***************************************
Place of Burial Cemetery.	No. Plate engraved Prospy	***************************************	***************************************
Grave or Lot NoSection No	Outside Box, (Pine, Chestnut, Oak, Cedar)  Pl't' H'dl's Corners on Box.	***************************************	***************************************
	Delivering to Cemetery		***************************************
Location of Grave	NoRobe	***************************************	
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.		
Show position of monument by $\square$ .	Use of Doz. Chairs		
	Flowers		
Inscription	Hearse	6	04
Murphy Murphy	Carriages to	20	96
on Plate.	·	*	***************************************
(Length to Heel feet in.)	-	***************************************	*************************
Measurement. Width at Shoulder		******************************	*
Bill Rendered to	Slippers & Soule	. /	75
	Advertising	***************************************	***************************************
When Rendered	Cemetery charges	***************************************	**************
MEMORANDUM.	Transportation Expenses, &c.	***************************************	
	Attendance & Assistants		
	Amount of Bill	102	75
	Amount Brought Forward	1402	75
	Amount Carried Forward	1505	50
3	PAYMENTS.		
Seat the seat of t			
		***************************************	*****************************
		***************************************	***************************************
ITEMS OF EXPENSE.		***************************************	
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Number of Funeral Be careful to ea	nter name of de-		
ceased and r	number of page future reference. Items of Bill, (cross out printed	d items not f	urnished
The state of the s	Tatalo foliciones,		
Name of Dec'd Mary Elizabeth Buttel	Door Crape		
Late Residence Bolumbin Pu	Draperies Candelabra and Candles.		***************************************
~	Washing & Laying out Remains, Shaving	*******************************	***************************************
Ageyearsmonthsdays.	Preservation of Remains	***************************************	***************************************
Cause of Death	N. Casket. Trimming.	/ ^	
Certifying Physician Most Linaucous	includy Lenies	15	00
Date of Death		***************************************	**************************************
Date of Burial 26 140/	NoHandles	***************************************	***************************************
Funeral at House or Church.	NoPlate engraved		***************************************
Place of Burial Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot NoSection No	Pl't'H'dl'sCorners on Box.	4-2-24,223-2-2-201-2-3-3-2-2-3-3-3-2-3-3-3-3-3-3-3-3-3-3-	
	Delivering to Cemetery	197921111111111111111111111111111111111	***************************************
Location of Grave	NoRobe	*149718************************************	
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs	4 - 0.0424000000000000000000000000000000000	***************************************
( Show position of monument by □.	Use of Doz. Chairs	***************************************	***************************************
	Flowers		
	Hearse		
Inscription Brake	Carriages to	***************************************	
on Plate.	Carrages to annual annu	490000000000000000000000000000000000000	***************************************
		***************************************	
Measurement. { Length to Heel	1		***************************************
		GF017GE04AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	***************************************
Bill Rendered to	Advadata		***************************************
	Advertising	***************************************	
When Rendered	Cemetery charges		00
MEMORANDUM.	Transportation Expenses, &c.	100000000000000000000000000000000000000	
	Attendance & Assistants		
The state of the s	Amount of Bill	16	00
	Amount Brought Forward	1505	50
	Amount Carried Forward	1521	50
Name of the Control o	PAYMENTS.		
		1	
			* *************************************
	·	yalang mana aranganag aran managana	*
ITEMS OF EXPENSE.	*	J.	
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	and belief of the particular and the territories and the territori	gritarios - In-	****************

Number of Funeral Be careful to e	enter name of de-		
Number for the Current Year 66 ceased and in index or	number of page future reference. Items of Bill, (cross out printer	ed items not	furnished.,
		(1	1
Name of Dec'd Ms Wellusin	Door Crape		***************************************
Late Residence Tolumbia, Ga	Draperies Candelabra and Candles.		***************************************
Agedays.	Washing & Laying out Remains, Shaving	***************************************	***************************************
Cause of Death Caucer	Preservation of Remains		***************************************
Certifying Physician 9. W. Lurugston	No. Casket. Trimming.		,
Date of Death Och 10-1901	No peralog fix	***************************************	
Date of Burial Oct 11 - 1901	N. N	***************************************	
Funeral at House or Church.	NoHandles		,
Funeral at House or Polleno fill HEAR Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	- /5	00
Grave or Lot NoSection No	Pl't' H'dl's Corners on Box.	***************************************	***************************************
	Delivering to Cemetery	***************************************	*************************
Location of Grave	No. Bek Robe	***************************************	***************************************
{ Draw lines       for Graves in the Plot, and } designate this one with a double Cross ‡. } Show position of monument by □.	PrsGloves Linen Scarfs.	***************************************	***************************************
( Show position of monument by $\square$ . )	Use of Doz. Chairs	***************************************	
	Flowers		***************************************
Inscription	Hearse		***************************************
on Plate.	Carriages to	***************************************	***************************************
Measurement. { Length to Heel		***************************************	***************************************
Width at Shoulder		***************************************	***************************************
Bill Rendered to		*	***************************************
	Advertising	***************************************	biqidiyederiye e e e e e e e e e e e e e e e e e e
When Rendered	Cemetery charges		***************************************
MEMORANDUM.	Transportation Expenses, &c.	***************************************	***************************************
	Attendance & Assistants		
	Amount of Bill	/3	00
	Amount Brought Forward	4521	50
	Amount Carried Forward	4537	30
	PAYMENTS.		
*	By Pen 11 Der		
	al, Bentlie Chief	***************************************	***************************************
ITEMS OF EXPENSE.	Burger	9	00
TELLO OF DATE DITTOL.	.0		
		***************************************	***************************************
		***************************************	***************************************

Chlina (// 1h			1
ame of Dec'd Office Luft	Door Crape	***************************************	***************************************
ate Residence Colembia, Fo	Draperies Candelabra and Candles.	***************************************	
geyears 2/2 weaksday			00
ause of Death	Preservation of Remains	10	
ertifying Physician Lew W Bennthengel	N. Casket. Trimming.		00
ate of Death \( \lambda \tau / 9 - 1 9 0 / 0		***************************************	
ate of Burial 11 18-1901		***************************************	***************************************
uneral at House or Churc	h. No. Handles		
lace of Burial Joly rully Cemeter	No. Plate engraved	***************************************	
rave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	***************************************
	Delivering to Cemetery	***************************************	-
ocation of Grave	NoRobe	*****************************	
Draw lines       for Graves in the Plot, and )	Prs. Gloves Linen Scarfs		***************************************
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.			**************************************
<u></u>	Use of Doz. Chairs	V	
	Flowers	***************************************	* *************************************
scription	Hearse		
n Plate.	Carriages to	***************************************	
		***************************************	
easurement. Length to Heel feet in.		***************************************	***************************************
Width at Shoulder	<b>S</b>	**************************************	
ill Rendered to			
	Advertising	***************************************	
/hen Rendered	Cemetery charges	******************************	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
MEMORANDUM.	Transportation Expenses, &c.	-44	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
TEMOTANDOM.	Attendance & Assistants		
	Amount of Bill	14	00
	Amount Brought Forward	15-37	50
•		5-5-0	50
	Talloune outlined to that death of the same of the sam		
	PAYMENTS.		
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***************************************		***************************************	**   **********************************
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TEMS OF EXPENSE.		***************************************	192999222222
			***************************************
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	enter name of de-		
	number of page future reference. Items of Bill, (cross out printe	d items not	furnished.
4 1 0 0		1	
Name of Dec'd Mo Darah a Burg	Door Crape	\$	***************************************
Late Residence Maslington Boffo. Ou	DraperiesCandelabra andCandles.	***************************************	
Age 69 years months days.	Washing & Laying out Remains, Shaving	***************************************	***************************************
Cause of Death Courses	Preservation of Remains	S	00
Certifying Physician W. G. Builly	No Oct Casket. Clith, Trimming.	50	00
Date of Death Chr 12-1901	Ho at		
Date of Burial 247901		***************************************	***************************************
Funeral at House or M. E. Church. Church.	NoHandles		
Funeral at House or M. Co-Church.	NoPlate engraved	454444444444	
Place of Burial Muslington Boro, Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	3290808980861201719973-229747977017	***************************************
Grave or Lot No. Section No.	Pl't'H'dl'sCorners on Box.	***************************************	
	Delivering to Cemetery	442224453246324646464646464326224644	
Location of Grave	NoRobe	***************************************	***************************************
{ Draw lines       for Graves in the Plot, and } designate this one with a double Cross ‡. } Show position of monument by □.	Prs. Gloves Linen Scarfs.		***************************************
( Show position of monument by □. )	Use of Doz. Chairs		***************************************
	Flowers	***************************************	***************************************
Inscription \( \tag{Max}	Hearse	***************************************	
3. Motilon	Carriages to		
on Plate.		200000000000000000000000000000000000000	***************************************
Measurement. { Length to Heel 5 feet 6 in. } Width at Shoulder 5 Bill Rendered to 5 Should Surg			
Measurement.		448331111111111111111111111111111111111	4
PILL OF FORMS (X)		1400012010104460000000000000000000000000	
Bill Rendered to S.		***************************************	***************************************
When Rendered Oct 93/1991	Advertising	***************************************	***************************************
When Rendered	Cemetery charges	***************************************	************************************
MEMORANDUM.	Transportation Expenses, &c.		***************************************
	Attendance & Assistants		
	Amount of Bill	86	00
The second secon	Amount Brought Forward	1550	50
*	Amount Carried Forward	4605	50
,	PAYMENTS.	*** **********************************	
Name of the state	By Och 1/23/01	care	00
		65	
	Bo B. Frank Burg	, *************************************	***************************************
ITEMS OF EXPENSE.		***************************************	***************************************
	-	***************************************	***************************************
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		***************************************	***************************************
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Number of Funeral  Number for the Current Year 69  Be careful to en ceased and n in index for f	ter name of de- umber of page uture reference. Items of Bill, (cross out printed	l items not furnished.
Name of Dec'd Achilland Wolfman Bord. Paral at House of Death Mar Sulla Shalland.  Name of Dec'd Achilland Wolfman Bord. Paral at House of Death Mar Sulla Shalland.	Door Crape  Draperies  Candelabra and  Candles.  Washing & Laying out Remains, Shaving  Preservation of Remains  No. Casket.  Trimming.  No. Handles  No. Plate engraved  Outside Box, (Pine, Chestnut, Oak, Cedar)	S O O O
Grave or Lot No. Section No. S	Pl't' H'dl's Corners on Box.  Delivering to Cemetery Robe Gloves Linen Scarfs  Use of Doz. Chairs	1000
Inscription on Plate.  Measurement. { Length to Heel	Hearse Carriages to Exit	50
Bill Rendered to Eclivia Heelinum  127 June St. Allentinus, F.  When Rendered Nov 26-1901  MEMORANDUM.	Advertising  Cemetery charges  Transportation Expenses, &c.  Attendance & Assistants	50 0-67
-	Amount of Bill  Amount Brought Forward  Amount Carried Forward  PAYMENTS.	71 77 605 50 (677 27
ITEMS OF EXPENSE.		

cased and	enter name of de- number of page		
	future reference. Items of Bill, (cross out printe	d items not t	furnished.
Name of Dec'd Strollegustus Musul	Door Crape	Resource Photographs and Proposition Control	
Late Residence Covendiain, Pa	DraperiesCandelabra andCandles.	***************************************	
Age 36 years months days.	Washing. & Laying out Remains, Shaving	3	00
Cause of Death Raceidust	Preservation of Remains	5	00
Certifying Physician alex R Craig	No	40	00
Date of Death /2/6/0/		***************************************	
Date of Burial 17/9/0/		4-0	********
Funeral at House or Church.	NoHandles	***************************************	
Place of BurialCemetery.	NoPlate engraved		
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	*::::::::::::::::::::::::::::::::::::::
Grave or Lot No	Pl't' H'dl's Corners on Box.	***************************************	***************************************
Location of Grave	No	3	00
(Draw lines     for Graves in the Plot, and)	Prs. Gloves Linen Scarfs.	***************************************	-
{ Draw lines       for Graves in the Plot, and } designate this one with a double Cross ‡. } Show position of monument by □.	Use of Doz. Chairs	***************************************	***************************************
		***************************************	***************************************
	Flowers	6	00
Inscription	Hearse		
on Plate.	Carriages to	***************************************	***************************************
Measurement. { Length to Heelin. } Width at Shoulder	Concernen & Storage		2.1
Measurement. Width at Shoulder.		***************************************	***************************************
Bill Rendered to			
	Advertising	***************************************	***************************************
When Rendered	Cemetery charges	100000000000000000000000000000000000000	*******************************
MEMORANDUM.	Transportation Expenses, &c.		***************************************
MEMORANDOM.	Attendance & Assistants		
	Amount of Bill	62	15-
	Amount Brought Forward	4677	27
	Amount Carried Forward	4739	52
	. PAYMENTS.		
the control of the co			
· ·	*	***************************************	***************************************
ITEMS OF EXPENSE.		P05044500000000000000000000000000000000	-2110P4F20-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1

Number of Funeral  Number for the Current Year  Be careful to enter ceased and number for the Current Year	mber of page   tomo of Bill /	d items not f	urnished.
Name of Dec'd Mus Kale Meisubull	Door Crape		
Late Residence Columbia, Da	Draperies Candelabra and Candles.	***************************************	***************************************
Ageyearsmonthsdays.	Washing & Laying out Remains, Shaving	***************************************	*>*************************************
Cause of Death Tyceman	Preservation of Remains	5	00
Certifying Physician at Of Josephs & Fospilit	No. Casket. Gofe Oluth Trimming.	40	00
Date of Death Dec 024-1901			***************************************
Date of Burial 11 27 - 1901			***************************************
Funeral at House or Avoly Trinly Church.	NoHandles	***************************************	***************************************
Place of Burial Cemetery.	NoPlate engraved	***************************************	
	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	***************************************
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.	***************************************	
Location of Grave	Delivering to Cemetery	<b>3</b>	00
7	NoRobe		***************************************
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGlovesLinen Scarfs	\$24400000000000000000000000000000000000	***************************************
( Show position of moralitonic by = . ,	Use of Doz. Chairs		.,
	Flowers		
Inscription	Hearse	6	00
on Plate.	Carriages to	***************************************	
Measurement. { Length to Heelfeetin. }  Width at Shoulder }			
	Advertising		***************************************
When Rendered	Cemetery charges	535500000000000000000000000000000000000	
	Transportation Expenses, & Livenston	. 2	50
MEMORANDUM.	Attendance & Assistants	SECRETARIAN AND AND AND AND AND AND AND AND AND A	
	Amount of Bill	58	50
		4739	52
	Amount Brought Forward	4798	02
	Amount Carried Forward	7. / 0	
	PAYMENTS.		
		***************************************	MANAGET PROTOCOLOR SERVICE
ITEMS OF EXPENSE.		***************************************	5.00 <b>S</b> 00000000
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	1951 FORCE IN THE SECOND SECON	***************************************	

ceased and	enter, name of de- number of page future reference. Items of Bill, (cross out printe	ed items not f	furnished.,
Name of Dec'd June Copeleme	Door Crape		
Late Residence Musses Lunc & Cola Pisce		69404000 2740220100000000000000000000000000000000	***************************************
	Draperies Candelabra and Candles.		***************************************
Age	Washing & Laying out Remains, Shaving		00
Cause of Death about in Thorneis Ciny	Preservation of Remains		***************************************
Certifying Physician	No. R. Casket. Trimming.	/ 3	00
Date of Death Dec 28 7901		***************************************	***************************************
Date of Burial " 3/-1901	,		*********
Funeral at House or Lannu Babtus Church.	Handles		***************************************
Place of Burial Munutuille Bashist Cemetery.	NoPlate engraved	*****************************	************************
·	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot No	Pl't'H'dl's	********	**************************************
continue of Cross Property	Delivering to Cemetery		***************************************
ocation of Grave	NoRobe	2	טדט
Draw lines       for Graves in the Plot, and   designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.	***************************************	***************************************
Show position of monument by □.	Use ofDoz. Chairs		**********
	Flowers	/	
(	Hearse		
nscription		***************************************	***********************
on Plate.	Carriages to	***************************************	***************************************
	1/2 Feb Eidenchrow	***************************************	
Measurement. { Length to Heelfeetin. }	1/2 yd Eiderdrow )	***************************************	5
Width at Shoulder	2502	***************************************	
Rendered to		***************************************	******************************
	Advertising	***************************************	*******************************
/hen Rendered	Cemetery charges	***************************************	***************************************
	Transportation Expenses, &c.		
MEMORANDUM.	Attendance & Assistants		
,		19	25
	Amount of Bill	11700	02
Annual Control of the	Amount Brought Forward	15 7	17
	Amount Carried Forward	48//	
	ofe 2-1901 PAYMENTS.	)	
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	+ prupuny remis ) -	3.5	
	4:2:	4852	27
TEMS OF EXPENSE.	This clim was omitted	***************************************	***************************************
R. Co To fewer Tyreen	at time of friend;		******************
mes flogram deed at		50	0 U
14 14 19 ( 9 a)	i Regusti	1	***************************************
Bullet o Cure 3500	û Regusti	288	49
Presince volly 100	Day Told 1	1-10 A	51

Number of Funeral\_\_\_\_ 

·			
Name of Dec'd Mo Coleyton Duriti  Late Residence Colevator, Pa  Age years months days.  Cause of Death Certifying Physician  Date of Death	Door Crape  Draperies Candelabra and Candles.  Washing & Laying out Remains, Shaving  Preservation of Remains  No. Casket.  Trimming.	5 65	00
Date of Burial Muy 31 - 1 7 601  Funeral at House or Church.  Place of Burial Cemetery.  Grave or Lot No. Section No.	No. Handles Outside Box, (Pine, Chestnut, Oak, Cedar) H'di's Corners on Box.  Delivering to Cemetery		
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡.   Show position of monument by	NoRobe  PrsGloves Linen Scarfs  Use of Doz. Chairs  Flowers  Hearse	6	00
on Plate.  Measurement. { Length to Heelin. }  Width at Shoulder}  Bill Rendered to	Carriages to	5	
When Rendered  MEMORANDUM.  Vot Extern of true	Cemetery charges  Transportation Expenses, &c.  Attendance & Assistants  Amount of Bill  Amount Brought Forward	87 5790 5277	00 76
	PAYMENTS.		
ITEMS OF EXPENSE.		Therefore Linkshipshipshipshipshipshipshipshipshipship	

Number of Funeral Be careful to	enter name of de-		
ceased and	number of page future reference. Items of Bill, (cross out printe	ed items not	furnished.,
Name of Dec'd Mulsew of Weever	Door Crape		
Late Residence Collegelow Ga	Draperies	•	-
Age 64 years months days.	Washing & Laying out Remains, Shaving	5 5	00
Cause of Death Prights dieluce "Mi Crophiology	Preservation of Remains	5 5	00
Certifying Physician Thuz M Livingslan	No Bla Casket. "Letoka" Trimming.	75	00
Date of Death Jaw 12-1902	Covered with astricus Cloth		***************************************
Date of Burial Caso, 15-1902		***************************************	***********************
	No. Handles	***************************************	***************************************
Funeral at House or Church.  Place of Burial Schurch Cemetery.	NoPlate engraved	******************************	
/	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot No. Section No.	Pl't'H'dl'sCorners on Box.		***************************************
Location of Grave	Delivering to Cemetery	100000000000000000000000000000000000000	***************************************
	NoRobe	***************************************	***************************************
(Draw lines       for Graves in the Plot, and ) designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs.	***************************************	***************************************
client position of monament by =:	Use of Doz. Chairs	•	***************************************
	Flowers	***************************************	***************************************
Inscription	Hearse	***************************************	-4-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-
on Plate.	Carriages to	***************************************	***************************************
			***************************************
Measurement. \ \ Length to Heel feet in. \ \	Trousit Gunt	<b>5</b>	50
Width at Shoulder	fry 18. y Treath,	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	***************************************
Bill Rendered to	Styles & Soule	1:	25
	Advertising		***************************************
When Rendered	Ceme+ery charges		4.55j.404.004.444.444.444.444.444.444.444.44
MEMORANDUM.	Transportation Expenses, &c.	***************************************	4504454545454544444444444
	'Attendance & Assistants		
	Amount of Bill	8.6	75-
	Amount Brought Forward	7	
	Amount Carried Forward	***************************************	`aqpa4a14a1ba12041140+030000000
	PAYMENTS.		-
	-		
		***************************************	***************************************
ITEMS OF EXPENSE.	`	************************************	***************************************
TIENS OF EAPENSE.		Pq(+vq(p)++++++++++++++++++++++++++++++++++++	***************************************
	-	***************************************	***************************************
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U			***************************************
Applications of the contraction of the production of the productio		***************************************	***************************************

Number for the Current Year \_\_\_\_\_

Be careful to enter name of deceased and number of page in index for future reference.

Name of Dec'd Blunche Mc Call	Door Crape		***************************************
Late Residence Columbia, Pu	DraperiesCandelabra andCandles.		
Age	Washing & Laying out Remains, Shaving.	***************************************	***************************************
Cause of Death Jumor at Buse & Brien	Preservation of Remains	5	00
Certifying Physician D- armor	No. 10 6 Casket. Whele Plus Trimming.	9-5-	00
Date of Death Jan 16-1902			
Date of Burial Jan 20-1902		***************************************	**************************************
	No. Handles	***************************************	
Place of Burial Curvel Still Cemetery.	No. Plate engraved Class A Oil Code	***************************************	***************************************
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	43503607000000000000000000000000000000000	***************************************
	Delivering to Cemetery	***************************************	***************************************
Location of Grave	NoRobe	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************
Oraw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs	•	
Show position of monument by .	Use ofDoz. Chairs		
	Flowers		***************************************
	Hearse	6	00
Inscription Blunche Me Call	Carriages to	***************************************	***************************************
on Plate. April 16 you	Oalilages to	***************************************	***************************************
	2 Jula. 1/2 writt Eiderdoren	/	50
Measurement. { Length to Heel			
Bill Rendered to David We Call		######################################	
bill Nendered to	Advertising	***************************************	***************************************
When Rendered	Cemetery charges	**************************************	- 1689-000-00-00-00-00-00-00-00-00-00-00-00-0
	Transportation Expenses, &c.	_	
MEMORANDUM.	Attendance & Assistants	***************************************	************************
	Amount of Bill	12	50
	Amount Brought Forward	86	75
	Amount Carried Forward	1.54	25-
~			
· .	PAYMENTS.		
		200000000000000000000000000000000000000	***************************************
		***************************************	26200601 P201172000000000000000000000000000000000
ITEMS OF EXPENSE.			
		***************************************	424444 42431444034444
		***************************************	***************************************
			***************************************
		***************************************	

Number for the Current Year 3

Be careful to enter, name of deceased and number of page in index or future reference.

Name of Dec'd Reuber & Ferry	Door Crape		1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Late Residence Columbin, Pa	Draperies Candelabra and Candles.	***************************************	***************************************
Age 25 years months days.	Washing & Laying out Remains, Shaving	3	00
Cause of Death levrampties"	Preservation of Remains		00
Certifying Physician D. Comor	Preservation of Remains BBC Co. No. 32 Casket. Alice Drice Trimming.	68	00
Date of Death / Cw 16 - 1902		100000000000000000000000000000000000000	
Date of Burial 6 au 20-1902		***************************************	***************************************
Funeral at House or St Pauls Exichurch.	No. 6 Handles	***************************************	***************************************
Place of Burial Mit Bethel, Cemetery.	No. Plate engraved	***************************************	
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)		<
	Pl't' H'dl's Corners on Box.  Delivering to Cemetery	1	***************************************
Location of Grave	No. Robe	***************************************	***************************************
( Draw lines     for Graves in the Plot, and )	Prs. Gloves Linen Scarfs.		***************************************
{ Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Use of Doz. Chairs		1
	Flowers	0	***************************************
1876	Hearse	6	00
on Plate. Rube & herry	5 Carriages to	20	00
on Plate. 1905	/ Riggle them	2	00
(Length to Heel 6 feet 8 in.)			
Measurement. Width at Shoulder.	,	1 -	
Bill Rendered to Sarah Sturius (Mutter)	1 Pair Shoes	2	90
	Advertising		***************************************
When Rendered	Ceme*ery charges	<u></u>	00
MEMORANDUM.	Transportation Expenses, &c.	***************************************	***************************************
	Attendance & Assistants	1	
The above was a militing formeral	Amount of Bill	113	50
The above was a military during cleaned being a beauty among	Amount Brought Forward	15-4	25
Max beterm	Amount Carried Forward	267	75
	PAYMENTS.		
•	, IIIIIIIII	1 .	
			\$01644444577744444444 <del>4444</del>
		······	**************************************
ITEMS OF EXPENSE.	116	***************************************	~~~~~~
			4 ************************************
			******************************
		}	******************************
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		***********************	·····

Number of Funeral	**********
Number for the Current	Yea

Be careful to enter name of deceased and number of page in index for future reference.

	•		
Name of Dec'd Evgin Welliams	Door Crape	***************************************	
Late Residence Columbia, Fa	Draperies Candelabra and Candles.		***************************************
Age about 40 years months days.	Washing & Laying out Remains, Shaving	10	00
Cause of Death Raceident	Preservation of Remains	***************************************	***************************************
Certifying Physician Alex R, Erruy	No. G. L. Casket. Cource Trimming.	45	00
Date of Death Jan 29-1902		***************************************	***************************************
Date of Burial Jan 30-1902	No. 6 Handles	***************************************	
Funeral at House or St Paul's Ext. Church.	NoPlate engraved	······································	
Place of Burial MT Bettell Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	***************************************
Grave or Lot No. Section No.	Pl't'H'dl'sCorners on Box.	***************************************	
	Delivering to Cemetery	***************************************	
Location of Grave	NoRobe	***************************************	
(Draw lines   )   for Graves in the Plot, and ) designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs		***************************************
( Show position of monument by )	Use of Doz. Chairs	,	**********************
	Flowers		-0161616409000000000000000000000000000000
Inscription & War as '	Hearse	6	00
on Plate. Ou e Jan 17-1902	Carriages to	***************************************	P0000000000000000000000000000000000000
Die Jan 17-1902	21	***************************************	***************************************
Measurement. \ Length to Heelin. \	Thusby Blustet	5	00
/ Width at Shoulder		***************************************	***************************************
Bill Rendered to William Williams		······································	. *************************************
	Advertising	*******************************	72-12-14-14-14-2-2-2-2-2-2-2-2-2-2-2-2-2-
When Rendered	Cemetery charges	5-	40
MEMORANDUM.	Transportation Expenses, &c.	(Sodky divergergys reachast as sections of	**********************
	Attendance & Assistants		
,	Amount of Bill	7/	00
	Amount Brought Forward	267	75
	Amount Carried Forward	338	75
	PAYMENTS.	-	
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•		***************************************	***************************************
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ITEMS OF EXPENSE.		***************************************	+6054664844990 taffvébezzég
		***************************************	******* *******************************
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	To be the second of the second	***************************************	***************************************
		, Cahada ee Sensetti netti netti nen muunna.	PRINTED CO
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Be careful to enter, name of deceased and number of page in index or future reference.

Name of Dec'd Jame Gerry Begler	Door Crape		***************************************
Late Residence Columbia Pa	Draperies Candelabra and Candles.	***************************************	************************
Age SH years months days.	Washing & Laying out Remains, Shaving	~	***************************************
Cause of Death result of fall injury hip,	Preservation of Remains	3	00
Certifying Physician Wy Juy Bor	No/5/ Casket. Eff Trimming.	50	00
Date of Death Jun 30 -1902	/	***************************************	
Date of Burial July 3 - 1902		***************************************	***************************************
Funeral at House or Holy Trining Church.	No Handles		***************************************
Place of BurialCemetery.	No. Plate engraved y Corre	***************************************	***************************************
	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	***************************************
Grave or Lot NoSection No	Pl't' H'dl's Corners on Box.	********	***************************************
Location of Grave	No. Ben Robe	<b>G</b> -	00
(Draw lines       for Graves in the Plot, and )			
designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.	***************************************	***************************************
	Use of Doz. Chairs	***************************************	
	Flowers		1
Inscription Motley	Hearse	6	00
on Plate.	2 Carriages to		00
-	. ,	***************************************	***************************************
		***************************************	
Width at Shoulder		***************************************	***************************************
Bill Rendered to		***************************************	404046000000000000000000000000000000000
	Advertising	***************************************	***************************************
When Rendered	Cemetery charges	*************************	******************************
MEMORANDUM.	Transportation Expenses, &c.		*******************************
	Attendance & Assistants		
	Amount of Bill	74	00
•	Amount Brought Forward	338	75
	Amount Carried Forward	412	75
	PAYMENTS.		Access to the control of the control
	•	***************************************	***************************************
		***************************************	***************************************
ITEMS OF EXPENSE.		***************************************	
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		17/0004000000000000000000000000000000000	***************************************
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Number for the Current Year 6

Be careful to enter name of deceased and number of page in index for future reference,

Name of Dec'd John D. Name  Late Residence Solumbia, Pa  Age years 9 months days.  Cause of Death	Door CrapeCandelabra andCandles.  Washing & Laying out Remains, Shaving  Preservation of Remains  No CasketTrimming.	/5	00
Certifying Physician  Date of Death  Date of Burial  Funeral at House or  Place of Burial  Cemetery.  Grave or Lot No.  Section No.  Location of Grave  {  Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	NoHandles		
Measurement. { Length to Heel feet in. }  Bill Rendered to	HearseCarriages to		
When Rendered  MEMORANDUM.	Advertising  Cemetery charges  Transportation Expenses, &c.  Attendance & Assistants  Amount of Bill  Amount Brought Forward  Amount Carried Forward	16412428	00 75 7J
ITEMS OF EXPENSE.	PAYMENTS.		

Number of Funeral Be careful to	enter name of de-		
ceased and	number of page future reference. Items of Bill, (cross out printe	d items not f	furnished.
- This course is a second of the second of t			,
Name of Dec'd Seo lo Trouturier	Door Crape		741011111111111111111111111111111111111
Late Residence Columnia, Pa	DraperiesCandelabra andCandles.	***************************************	
Age	Washing & Laying out Remains, Shaving	5	00
Cause of Death RR accident	Preservation of Remains	5	00
Certifying Physician Jos Johnson Deff Com	No./57 Casket. Effic Trimming.	60	00
Date of Death Jack 4 1902	Iluse Chite	Paraconomic (100 miles)	*******************************
Date of Burial " 7-1902		***************************************	***************************************
Funeral at House or Luther (Maytonic) Church.	No. 6 Handles		100000000000000000000000000000000000000
Place of Burial Cemetery.	NoPlate engraved	***************************************	
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	-phydyddian a a ddiad	140001201201010101010101000000000000000
diaye of Lot No.	Politication to Country H'dl's Corners on Box.	••••••	***************************************
Location of Grave	No Buc Rose Lui-	10	5-0
(Draw lines     for Graves in the Plot, and)	Prs. Gloves Linen Scarfs.		***************************************
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Use of Doz. Chairs	• • • • • • • • • • • • • • • • • • •	***************************************
		***************************************	***************************************
George la Transtituise	Flowers	- 6	00
Inscription Jurye 6 Menurica			
on Plate. Agent 28 You	Carriages to	***************************************	***************************************
	Shruber Blus Cer	- 55	00
Measurement. { Length to Heel	Zumoci v Jean Co		
(Width at Shoulder)	Sliffers & pullenous	***************************************	
Bill Rendered to	of franchise and the second	2_	65
	Advertising	***************************************	***************************************
When Rendered	Ceme*ery charges	(0101000747424020000000000000000000000000	***************************************
MEMORANDUM.	Transportation Expenses, &c.		200200000000000000000000000000000000000
	Attendance & Assistants		
	Amount of Bill	94	15
The same of the sa	Amount Brought Forward	428	/3
	Amount Carried Forward	522	90
	PAYMENTS.		
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		***************************************	***************************************
		***************************************	***************************************
ITEMS OF EXPENSE.		442040000000000000000000000000000000000	***************************************
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		P#4441/1000100000000000000000000000000000	***************************************

Number of Funeral Be careful to ent	er name of de-		
	umber of page uture reference. Items of Bill, (cross out printer	d items not f	urnished.
Name of Dec'd Volus Leithiser	Door Crape	Value	
Late Residence Colembre Va	Draperies Candelabra and Candles.	***************************************	
Age 79 years months days.	Washing & Laying out Remains, Shaving	5	00
Cause of Death Inferrutive of Old age	Preservation of Remains	5	00
Certifying Physician 6 F. Whurtlel	No. Caffrie (Rocuros) Trimming.	30	OU
Date of Death Sele /3 -/902		***************************************	
Date of Burial Few /1-1902		***************************************	***************************************
	NoHandles	***************************************	***************************************
Place of Burial Mt Betbal Cemetery.	NoPlate engraved	***************************************	***************************************
	Outside Box, (Pine, Chestnut, Oak, Cedar)	ppgggga pranskygaggadal dad ago klobbygg	***************************************
Grave or Lot No. Section No.	Pl't'H'dl'sCornerson Bax.	***************************************	
Location of Grave	Delivering to Cemetery	>*************************************	***************************************
	No. /3UC Robe	9	00
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡.   Show position of monument by □.	PrsGloves Linen Scarfs	-d wingdancepepependenchen zuddahaha	*******************************
( Snow position of monument by )	Use of Doz. Chairs	***************************************	
	Flowers	4941910101010101010101010101010101010101	
Inscription	Hearse	. 6	00
on Plate.	Carriages to	******************************	1 *****************************
			************************
(Length to Heel 5 feet 9 in.)		40441-1141-1141-1141-1141-1141-1141-114	***************************************
Measurement. { Length to Heel			***************************************
Bill Rendered to			
	Advertising	***************************************	***************************************
When Rendered	Cemetery charges	5	00
	Transportation Expenses, &c.		
MEMORANDUM.	Attendance & Assistants		
	Amount of Bill	56	00
	Amount Brought Forward	522	90
	Amount Carried Forward	578	90
	Amount Carried Forward		***************************************
,	PAYMENTS.		
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		***************************************	***************************************
IMENIC OF EXPENCE			***************************************
ITEMS OF EXPENSE.		***************************************	***************************************
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		***************************************	***************************************
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Number of Funeral Be careful to	enter, name of de-		
ceased and	number of page future reference. Items of Bill, (cross out printe	d items not f	urnished.,
Name of Dec'd Ayehow J. Williams Late Residence Columbia, Pa	Door CrapeCandelabra andCandles.		
Age 37 years months days.  Cause of Death neumonia	Washing & Laying out Remains, Shaving  Preservation of Remains	-	***************************************
Certifying Physician Frid. Buder  Date of Death. Felt, 134 1902	No. Caffeir (Rosewood Trimming.	34	80
Place of Burial // /6 - /90 2  Funeral at House or Bublish, Coloreo Church.  Place of Burial My Bublish Cemetery.  Grave or Lot No. Section No.	No. Handles  No. Plate engraved  Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Pl't' H'dl's Corners on Box.  Delivering to Cemetery No. Robe Gloves Linen Scarfs.  Use of Doz, Chairs	1	
nscription on Plate.	Hearse Carriages to	6	00
Measurement. { Length to Heel			200 200 200 200 200 200 200 200 200 200
When Rendered	Advertising Cemetery charges		
MEMORANDUM.	Transportation Expenses, &c.  Attendance & Assistants		
	Amount of Bill  Amount Brought Forward	40	90
• ,	Amount Carried Forward	618	90
Đ	PAYMENTS.		
ITEMS OF EXPENSE.			**************************************
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Number of Funeral\_\_\_\_

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ceased and n	ster name of de- number of page future reference. Items of Bill, (cross out printe		unu tah a d
Number for the Current Year / in index for	future reference. Items of DIII, (cross out printer	a items not t	urnisnea.
Name of Dec'd John Newer	Door Crape	Decree 100000000000000000000000000000000000	
Late Residence Colembia, Pa	Draperies Candelabra and Candles.	***************************************	***************************************
Age 78 years months days.	Washing & Laying out Remains, Shaving.	3	00
Cause of Death Dropsy	Preservation of Remains	3	-00
Certifying Physician Gev W Benutheriel	No. Casket. Maturust Trimming.	95	00
Date of Death Felt 14-1901	Black Cloth, Bull Hold,	***************************************	***************************************
Date of Burial 197-1902	No. Handles	44-14-9-24-4-1-1-2-2-3-1-2-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4	
Funeral at House or Church.  Place of Review Mt Bettell Comptery	NoPlate engraved	***************************************	**********************
Place of Burial PUT / Sellel Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	
Grave or Lot NoSection No	Pl't'H'dl'sCorners on Box.	***************************************	
	Delivering to Cemetery	**************************************	***************************************
Location of Grave	No. Ble Robe	12	00
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs		·
( Show position of monument by $\square$ . )	Use ofDoz. Chairs		******************************
	Flowers	hammararahantavanvarrarahantatatava	***************************************
Inscription	Hearse	6	00
Volla Clever	// Carriages to @ 40°	44	00
on Plate. Agu 18 712,		***************************************	401040>>>>>>
(Length to Heelin.)		***************************************	***************************************
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Bill Rendered to			
-	Advertising	4.66********************************	4
When Rendered	Cemetery charges	5-	00
MEMORANDUM.	Transportation Expenses, &c.	***************************************	********************
1111101(111100111.	Attendance & Assistants		_
	Amount of Bill	172	00
	Amount Brought Forward	618	90
	Amount Carried Forward	790	90
	PAYMENTS		

ITEMS OF EXPENSE.

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Number for the Current Year in index or	number of page future reference. Items of Bill, (cross out printe	d items not f	furnished.
Name of Dec'd Mrz. Saruh Houselast	Door Crape		4
Late Residence Stolls "wear Columbia 1-	DraperiesCandelabra andCandles.	***************************************	
Age	Washing & Laying out Remains, Shaving	3	50
Cause of Death Cause	Preservation of Remains	5	00
Certifying Physician	No Casket Munit Cluth, Trimming.	40	00
Date of Death Feb 16—1902			***************************************
Date of Burial	N- HH	***************************************	*******
Funeral at House or Church.	No. Plate engraved		***************************************
Place of BurialCemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		*>+>+>+
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.		***************************************
	Delivering to Cemetery		-
Location of Grave	No. Triville Robe		00
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.	***************************************	***************************************
( Show position of monument by □.	Use ofDoz. Chairs	**************************************	********
	Flowers	***************************************	***********************
Inscription August Collection	Hearse	6	00
Lumba 2 o fely legs	Carriages to	***************************************	***************************************
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Bill Rendered to			
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When Rendered	Cemetery charges	***************************************	***************************************
MEMORANDUM.	Transportation Expenses, &c.	***************************************	***************************************
TILITOT(TIVE CIT.	Attendance & Assistants		
	Amount of Bill	61	50
·	Amount Brought Forward	790	90
	Amount Carried Forward	851	40
	PAYMENTS.		
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Number of Funeral\_\_\_\_

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N Ceased and I	nter name of de- number of page future reference. Items of Bill, (cross out printe	d items not t	furnished.
Name of Dec'd Cliqubell Ibelleuberger  Late Residence Muylown, Ph  Age Tyears months days.  Cause of Death Infermities follage  Certifying Physician Thurter  Date of Death Feb 18-1902  Date of Burial Two 20-1802  Funeral at House or Bellel (of Columbia) Church.  Place of Burial Thur Ballel Cemetery.  Grave or Lot No. Section No.  Location of Grave (Draw lines)       for Graves in the Plot, and )	Door Crape  Draperies Candelabra and Candles.  Washing & Laying out Remains, Shaving  Preservation of Remains  No. Careful Trimming.  No. Handles  No. Plate engraved  Outside Box, (Pine, Chestnut, Oak, Cedar)  Pl't' H'dl's Corners on Box.  Delivering to Cemetery  No. Robe	5	
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡.   Show position of monument by □.     Inscription   on Plate.     Length to Heel   feet   in.	Prs. Gloves Linen Scarfs Use of Doz. Chairs Flowers Hearse Carriages to	6	00
When Rendered  MEMORANDUM.	Advertising 900 Cemetery charges Transportation Expenses, &c. Attendance & Assistants Amount of Bill	4/	75
	Amount Brought Forward  Amount Carried Forward  PAYMENTS.	893	15
ITEMS OF EXPENSE.			***************************************

	nter name of de-		
Number for the Current Year /3 ceased and in index or	number of page future reference. Items of Bill, (cross out printer	d items not f	urnished.,
Name of Dec'd Engly & Schlottheme	Door Crape	***************************************	***************************************
ate Residence Ovlumen, Pos	Draperies Candelabra and Candles.		***************************************
Ageyearsdays.	Washing & Laying out Remains, Shaving		00
Cause of Death	Preservation of Remains.		00
Cause of Death Certifying Physician J. W. Lury Stir	No. Casket. Trimming.	10	
Date of Death 2/23 - 1802		***************************************	
Date of Burial 426 — 1902			***************************************
Church.	NoPlate engraved		,
Place of Burial With Belliel Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		
Grave or Lot NoSection No.	Pi't' H'di's Corners on Box.		***************************************
	Delivering to Cemetery		
Location of Grave	NoRobe	***************************************	***************************************
( Draw lines       for Graves in the Plot, and )	Prs. Gloves Linen Scarfs.	***************************************	***************************************
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Use of Doz. Chairs	***************************************	**********
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nscription	Carriages to		
on Plate.	- Carriages to	***************************************	***************************************
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Bill Rendered to	Advertising OLULA 1902	***************************************	***************************************
	Cometery charges	***************************************	***************************************
When Rendered	Cemetery charges	***************************************	***************************************
MEMORANDUM.	Transportation Expenses, &c.		***************************************
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	Amount of Bill	893	15
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ceased and r	nter name of de- number of page future reference. Items of Bill, (cross out printe	d items not f	urnished.)
	<i>N</i>		
Name of Dec'd Cirlium J. Hallel	Door Crape		*******
Late Residence Lowlender Pa	Draperies Candelabra and Candles.		
Age 1 years months days.	Washing & Laying out Remains, Shaving	5	00
Cause of Death RR cleciclus	Preservation of Remains	5	00
Certifying Physician aly R Cruing	No/57 Casket. Castle Trimming.	75	00
Date of Death Fiele 44 1902	Bull Murilled (Natt)		
Date of Burial Suc 28 -1 902		***************************************	***************************************
	No. Handles		
Funeral at House or Church.  Place of Burial Myllserlle Cemetery.	No. Plate engraved	***************************************	
	Outside Box, (Ping, Chestnut, Oak, Cedar)	***************************************	***************************************
Grave or Lot No. Section No.	Pl't'H'dl'sCornerson Box.	***************************************	
Location of Grave	Delivering to Cemetery	150-1-127-00-00-00-00-00-00-00-00-00-00-00-00-00	
	No,Robe	***************************************	***************************************
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by	Prs. Gloves Linen Scarfs	***************************************	
	Use of Doz. Chairs		
Attime & Waster	Flowers	11 1	
Inscription Arthur J. Watch	Hearse	6	00
on Plate.	Carriages to	***************************************	***************************************
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When Rendered	Cemetery charges	***************************************	**************
MEMORANDUM.	Transportation Expenses, &c.	\$60:440\$0-44\$0 <b>****************</b>	
Burney Control of the	Attendance & Assistants		
	Amount of Bill	92	50
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	Amount Carried Forward	996	65
	PAYMENTS.		
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ITEMS OF EXPENSE.		***************************************	***************************************
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Number for the Current Year 13 ceased and in index or	number of page future reference. Items of Bill, (cross out printe	d items not	furnished.,
Name of Dec'd Henry Clayton Work	Door Crape	*	
Late Residence Columbia Pa	DraperiesCandelabra andCandles.	***************************************	242221212121212121212121212121212121212
Age '20 years months days.	Washing & Laying out Remains, Shaving	5	د ۲
Cause of Death RR, accident	Preservation of Remains	5	~
Certifying Physician aly R bring	No. Casket. Trimming.	35	00
Date of Death Felb, 25-1902-		***************************************	
Date of Burial Romewis Beret to		9	***************************************
Funeral at House or Sellam York Co, Church.	No. Handles		
Place of Burial for buril Cemetery.	No. Plate engraved	7	***************************************
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
	Delivering to Cemetery	***************************************	
Location of Grave	No. Buc Robe	5	00
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.		
( Show position of monument by $\square$ .	Use ofDoz. Chairs		
11 10 + 31 1	Flowers	***************************************	darin reachade assessmen managings
Inscription Sery Clayton Wolf	Hearse		
on Plate. age 20 yrz,	Carriages to	020454856600000000000000000000000000000000	
on rate.		***************************************	***************************************
Measurement. { Length to Heelin. }	·		
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Bill Rendered to PRCo.		100000000000000000000000000000000000000	
Diff iverigered to	Advertising		
When Rendered	Ceme+ery charges		
	Transportation Expenses, &c.	**************************************	
MEMORANDUM.	Attendance & Assistants		***************************************
	Amount of Bill	50	00
	Amount Brought Forward		65
	Amount Carried Forward.	1046	65
	PAYMENTS.		
N <sub>1</sub>		1	1
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ITEMS OF EXPENSE.		*******************************	
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	nter name of de-		
	number of page future reference. Items of Bill, (cross out printed	items not fu	ırnished.)
Name of Dec'd Volue Farrell	Door Crape	***************************************	******** ******************************
Late Residence Unflower -	DraperiesCandelabra andCandles.		
Age 40 - 452 months days.	Washing & Laying out Remains, Shaving		}
Cause of Death R. Aceidust	Preservation of Remains	2	00
Certifying Physician Aly R. bruig	No. Casherfue Trimming.	2-5	00
Certifying Physician		***************************************	
Date of Death Few 24 1902			
Date of Burial Mar, 3-1902	No. Handles		
Funeral at House or Charch.	NoPlate engraved	***************************************	.,
Place of Burial Mr Bettiel Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	************************************	***************************************
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.		***************************************
Jacobian of Grove The Mentled 1	Delivering to Cemetery	****************************	***************************************
LOCATION OF GRAVE 11-98	NoRobe	· ·	00
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs	A	***************************************
Show position of monument by .	Use ofDoz. Chairs		\$0.00000000000000000000000000000000000
	Flowers		
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Inscription	Carriages to	***************************************	
on Plate.	Carriages to	***************************************	***************************************
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When Rendered	Cemetery charges	U	
MEMORANDUM.	Transportation Expenses, &c.	~*************************************	*******************
	Attendance & Assistants		
Bunice under the Soldier Bunick Love, are order	Amount of Bill	35	00
Burille Love, att order	Amount Brought Forward	1046	65
give by aRHougeadobler	Amount Carried Forward	1081	65
	DAMENING		
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	number of page future reference. Items of Bill, (cross out printe	ed items not	furnished.,
M. 10 711 /		(1	1
Name of Dec'd Muble M Surand	Door Crape	***************************************	***************************************
Late Residence Munur Tup-	Draperies Candelabra and Candles.	***************************************	431010111111111111111111111111111111111
Ageyearsdays.	Washing & Laying out Remains, Shaving		***************************************
Cause of Death	Preservation of Remains		
Certifying Physician	No. P.K. Casket. 43 Trimming.	12	***************************************
Date of Death Mar 7-1902		***************************************	***************************************
Date of Burial 11 9-1212		***************************************	***************************************
Funeral at House orChurch.	NoHandles		***************************************
Place of Burial Mashington - Byo Cemetery.	No. Plate engraved		
Grave or Lot NoSection No	Outside Box, (Pine, Chestnut, Oak, Cedar)  Pl't' H'dl's Corners on Box.		~180-0374144(0)549A407####################################
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ocation of Grave	NoRobe		***************************************
( Draw lines       for Graves in the Plot, and )	Prs. Gloves Linen Scarfs.		,
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Use of Doz. Chairs		***************************************
	Flowers	***************************************	***************************************
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nscription	Hearse	2_	o U
on Plate.	Carriages to		
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	Advertising	***************************************	40/h-0150640400000gpg-rah86864444
When Rendered	Cemetery charges	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************
MEMORANDUM.	Transportation Expenses, &c.		
	Attendance & Assistants		
	Amount of Bill	1081	65
	Amount Brought Forward		
· · · · · · · · · · · · · · · · · · ·	Amount Carried Forward	1096	63
	PAYMENTS.		
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ITEMS OF EXPENSE.		***************************************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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Number of Funeral Be careful to er	nter name of de-		
	future reference. Items of Bill, (cross out printe	d items not f	urnished.
Name of Dec'd Chickrew Osterlag	Door Crape		1
Name of Dec'd Columbia, Ga			***************************************
	Draperies Candelabra and Candles.	######################################	
Age	Washing & Laying out Remains, Shaving	***************************************	
Cause of Death Seast Trouble & liver		z ¥	30
Certifying Physician Storm Benthery	No. 150 Casket. Esp Clute Trimming;	***************************************	***************************************
Date of Death Marcu 10 - 1902		***************************************	
Date of Burial " /2-1902	No. 6 Handles of	4:44:::4::00000000000000000000000000000	***************************************
Funeral at House or Church			***************************************
Place of Burial Concordia Chot Kill Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box,	***************************************	
	Delivering to Cemetery	***************************************	
Location of Grave	No. Robe		***************************************
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs	+	*
Show position of monument by .	Use of Doz. Chairs		
	Flowers		
(:	Hearse	6	00
Inscription	Carriages to	20	00
on Plate.	- Carriages to	VEX.CO.01.0 10 Taxas/102-0020771446411100	***************************************
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Bill Rendered to			
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When Rendered	Cemetery charges		-3-3-34-4-3
MEMORANDUM.	Transportation Expenses, &c.	*******************************	
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	Amount of Bill	7	65
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Number for the Current Year 19 ceased and in index or	number of page future reference. Items of Bill, (cross out printe	d items not	furnished.,
Name of Dec'd Franc Horward		1	1
Name of Dec'd	Door Crape	\$40,00000 T*******************************	
Late Residence Coolembia, Pa	Draperies Candelabra and Candles.	***************************************	
Age	Washing & Laying out Remains, Shaving	6	00
Cause of Death Svusuplui	Preservation of Remains	30	4. 4
Certifying Physician M. Se Munic	No. Carry Trimming.	30	00
Date of Death Muscu LY-1907			
Date of Burial	Al III	***************************************	*******************************
Funeral at House or Church.	No. Plate engraved		***************************************
Place of Burial Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	1	
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.		4
	Delivering to Cemetery		
Location of Grave	No. By Robe		00
{ Draw lines       for Graves in the Plot, and } designate this one with a double Cross ‡. } Show position of monument by □.	PrsGloves Linen Scarfs.		
Show position of monument by .	Use ofDoz, Chairs	•	
	Flowers		
Inscription	Hearse	6	00
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Whon Pandarad	Ceme*ery charges	11	40
When Rendered	Transportation Expenses, &c.		***************************************
MEMORANDUM.	Attendance & Assistants	***************************************	
		50	00
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	Amount Brought Forward	201	30
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	PAYMENTS.		
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ITEMS OF EXPENSE.		***************************************	
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Number of Funeral	the same of the		
New to the County Very Control to e	nter name of de- number of page future reference. Items of Bill, (cross out printe	d items not f	urnished.
Name of Dec'd Clima Westernium	Door Crape		
Late Residence Collegebrie, Pa	Draperies Candelabra and Candles.		***************************************
Age 78 years months days.	Washing & Laying out Remains, Shaving	***************************************	***************************************
Cause of Death Yastric Flever	Preservation of Remains.	5	00
Certifying Physician . Crystor	No 157 Casket. Eya Cloth Trimming.	65	00
Date of Death Murci 28-1902	,	*	***************************************
Date of Burial March 31-1902			*******************
Funeral at House or Dulem Lith, Church.	No. 6 Handles	,	***************************************
Place of Burial Squal Still Cemetery.	No. Plate engraved	***************************************	***************************************
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	400000000000000000000000000000000000000	
	Delivering to Cemetery		
Location of Grave	No. But Robe	10	00
(Draw lines     for Graves in the Plot, and )	Prs. Gloves Linen Scarfs	Typesta takan in	***************************************
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Use of		***************************************
	Flowers	***************************************	***************************************
1873	Hearse	6	00
anna Westernin	B Carriages to 4	c3 2	00
on Plate. Aged 78 for.	1 sende term	2	00
(Length to Heel		this where we want the transcription of the state of the	***************************************
Measurement. Width at Shoulder.			***************************************
Bill Rendered to		***************************************	***************************************
	Advertising	***************************************	***************************************
When Rendered	Cemetery charges	4	00
	Transportation Expenses, &c.		***************************************
MEMORANDUM.	Attendance & Assistants	***************************************	422744444444444444444444444444444444444
	Amount of Bill	124	00
	Amount Brought Forward	1201	30
	Amount Carried Forward	1325	30
tutto to the control of the control	PAYMENTS.	*	
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	enter name of de-		
Number for the Current Year 21 ceased and in index or	number of page future reference. Items of Bill, (cross out printe	d items not	furnished.,
Name of Dec'd Frunk Flecklewith	Door Crape		
Late Residence Colembia, Pa	Draperies Candelabra and Candles.		. 12.00.000.000.0000.0000.0000.0000.0000
Age	Washing & Laying out Remains, Shaving	5	00
Age years months days.  Cause of Death Ocute Conqueting Jung	Preservation of Remains.	15	00
Cause of Death Cut Congress of Death	No Line Casket. Cour Trimming.	15	60
Certifying Physician W. Rvofs	Subject of the subjec		
Date of Death Off, 2 - 1902			
Date of Burial	No. 6 Handles Silve	***************************************	
Funeral at House or Holy Trivily Church.	No Plate engraved \ Course	***************************************	***************************************
Place of Burial Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	
Grave or Lot NoSection No	Pl't'H'dl'sCorners on Box.		015540000000000000000000000000000000000
	Delivering to Cemetery	***************************************	
Location of Grave	NoRobe	***************************************	***************************************
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGlovesLinen Scarfs.	***************************************	***************************************
( Show position of monument by □. )	Use of Doz. Chairs		
	Flowers	***************************************	***************************************
Inscription A A	Hearse	6	00
on Plate.	Carriages to	***************************************	
on Flate. Agul 17 yoz		***************************************	***************************************
(Length to Heelin.)	Dlyper Slist Collin	***************************************	
Measurement. Width at Shoulder	bliffy til & buff butters	2	90
Bill Rendered to	10,		
-	Advertising		111111111111111111111111111111111111111
When Rendered	Cemetery charges		
	Transportation Expenses, &c.	,	
MEMORANDUM.	Attendance & Assistants		***************************************
	Amount of Bill	63	90
	Amount Brought Forward	1325	30
t and subject the	·	1384	20
	Amount Carried Forward		
- *	PAYMENTS.		
		***************************************	010304340444444444444444444444444444444
			***************************************
ITEMS OF EXPENSE.		***************************************	***************************************
		***************************************	***************************************
		***************************************	*
		***************************************	***********************
		***************************************	***************************************

Number of Funeral...

and	nter name of de- number of page	121	
Number for the Current Year 22 ceased and in index for	future reference. Items of Bill, (cross out printed	l items not t	urnished.
Name of Dec'd Volus Brill	Door Crape	-	
Late Residence Columbia, Pa	Draperies Candelabra and Candles.	***************************************	***************************************
Age 96 years months days.	Washing & Laying out Remains, Shaving		***************************************
Cause of Death	Preservation of Remains	**********************************	
Certifying Physician ABROVE	No. Crimming.	25	00
Date of Death Offil 3 -1902		***************************************	
Date of Burial 11 5-1907		*>*************************************	*
uneral at House or 440 focat of Church.	No. Handles	,	***************************************
lace of Burial Mt Betall Cemetery.	NoPlate engraved	***************************************	***************************************
	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
rave or Lot No. Odelies Section No.	Pl't'H'dl'sCorners on Box.	4	
ocation of Grave	Delivering to Cemetery		***************************************
	No. Robe		00
Draw lines       for Graves in the Plot, and ) designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs	4 (4))97749841479495173117144477777077	***************************************
show position of monument by	Use of Doz. Chairs	***************************************	***************************************
	Flowers	***************************************	
scription	Hearse	######################################	***************************************
Plate	Carriages to	41-112-1-26-1-2-1-2-2-2-2-2-2-2-2-2-2-2-2	***************************************
		***************************************	*******************************
( Length to Heelfeetin. )			******************************
Widthat Shoulder		**************************************	410-0-110-1-0-0-0-0-0-0-0-0-0-0-0-0-0-0-
Width at Shoulder Cendered to Coleffer Collision		***************************************	.,
	Advertising.	***************************************	*****************
en Rendered	Cemetery charges	45	00
	Transportation Expenses, &c.	0200000 0004410444450000000000000000000000	poppanhynnavannávéláhai
EMORANDUM.	Attendance & Assistants		
	Amount of Bill	35	00
	Amount Brought Forward	1389	20
	Amount Carried Forward	1424	20
	PAYMENTS.	1 was in a same in a	
	FAIMENIS.	1	
		4*P-(	******************
			******************
TEMS OF EXPENSE.		***************************************	107020200000000000000000000000000000000
		), areates 1111 - 122 -	***************************************
		Danasan	* *************************************
		722222 22222222222222222222222222222222	
		TO PARTY OF THE	
		***************************************	***************************************

	enter name of de-	• -	
Number for the Current Year 23 ceased and in index or	number of page future reference. Items of Bill, (cross out printed	l items not fu	ırnished.,
Name of Dec'd Blunche Hummwall	Door Crape	***************************************	
Late Residence Colemna. Pa	Draperies Candelabra and Candles.		**********************
	Washing & Laying out Remains, Shaving	***************************************	
Age 19 years months days.  Cause of Death Operation for timer	Preservation of Remains	&- l	00
Certifying Physician M.S. Taylor	No. Casket. Mile Eut, Trimming.	55	50
Date of Death Office 5-1902		***************************************	***************************************
Date of Burial // 8 / 902		***************************************	*************
	No 6 Handles		
Funeral at House or Church.  Place of Burial Middletorum Pa, Cemetery.	NoPlate engraved		
	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot No. Section No.	Pl't'H'dl'sCorners on Box.	2000000 32011111111111111111111111111111	
Location of Grave	Delivering to Cemetery	***************************************	00
	No. Will Robe	11	
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsBloyes Linen Scarfs.	******************************	
( Show position of monument by 2.	Use ofDoz. Chairs		***************************************
	Flowers	***************************************	*******************************
Inscription	Hearse		
on Plate.	Garriages to Depot (speint) Glund Bluster	2	50
	Flurnel Blusket	8	00
Measurement. { Length to Heelfeetin. }	Trusit Remit	(Je	7
( Width at Shoulder )	4 Jain Mult Hous		50
Bill Rendered to Cleans Lighty	⊗a.		***************************************
. /	Advertising	*************************************	***************************************
When Rendered	Ceme+ery charges	444784478478478484784847848484848484848	
MEMORANDUM.	Transportation Expenses, &c.	***************************************	
MEMORANDOM.	Attendance & Assistants		
	Amount of Bill	79	60
	Amount Braught Forward	424	20
	Amount Carried Forward	508	80
	PAYMENTS.		
•			
		***************************************	***************
		ADDRESS	
ITEMS OF EXPENSE.		***************************************	
		***************************************	***************************************
			***************************************
	•		

Number of Funeral....

	ter name of de- jumber of page uture reference. Items of Bill, (cross out printer	d items not f	urnished.
Name of Dec'd Roy & Quay	Door Crape		
Late Residence Colemnylin, Ga	Draperies Candelabra and Candles.	***************************************	***************************************
Ageyearsdays.	Washing & Laying out Remains, Shaving.	***************************************	***************************************
Cause of Death Manusings	Preservation of Remains		00
Certifying Physician M. Jaylor	No. P.C. Casket. Trimming.	12	00
Date of Death Cipe 9-1902	**************************************	***************************************	***************************************
Date of Burial	No. Handles	***************************************	***************************************
Funeral at House or Church.	NoPlate engraved		
Place of Burial Munitorall Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot No. Section No.	Pl't' H'di's Corners on Box.	***************************************	>
	Delivering to Cemetery	***************************************	***************************************
Location of Grave	NoRobe		***************************************
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs	******************************	***************************************
( Show position of monument by )	Use of Doz. Chairs	**************************	
	Flowers	***************************************	
Inscription	Hearse	***************************************	*******************
on Plate.	Carriages to		
		***************************************	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Measurement. { Length to Heelin. }		***************************************	* *************************************
Measurement. Width at Shoulder	,	6955505+6+30460601v+8+7***********************************	***************************************
Bill Rendered to			***************************************
	Advertising		***************************************
When Rendered	Cemetery charges		***************************************
MEMORANDUM.	Transportation Expenses, &c.		***************************************
	Attendance & Assistants		
	Amount of Bill	13	00
	Amount Brought Forward	1503	80
	Amount Carried Forward	1516	80
	PAYMENTS.		
1			1
		***************************************	***************************************

Number of Funeral Be careful to e	enter name of de-		
ceased and	number of page future reference. Items of Bill, (cross out printe	d items not	furnished.,
Name of Dec'd Mahn List	Door Crape		l to
Late Residence Columbia, Ca	Draperies Candelabra and Candles.		***************************************
Age 66 years months days.	Washing & Laying out Remains, Shaving	***************************************	***************************************
Cause of Death Volvulur House disease		05	00
Certifying Physician AVB Rurk	No. BUC Casket. blotte Trimming.	7.0	00
Date of Death USE 10- 11902			
Date of Burial 14-1 902		***************************************	***************************************
Funeral at House or Church.	No Handles		***************************************
Place of Burial Met Bettell, Cemetery.	NoPlate engraved		
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)		
Grave or Lot No.	Pl't' H'dl's Corners on Box.	4922224	
Location of Grave	No. Blk Robe Hernettu	14	00
(Draw lines     ] for Graves in the Plot, and)	Prs. Gloves Linen Scarfs.		4-2-12-21-10103-02-02-02-02-02-02-02-02-02-02-02-02-02-
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Use of Doz. Chairs	***************************************	***************************************
		74.41.41.41.41.41.41.41.41.41.41.41.41.41	***************************************
	Flowers	6	00
Inscription			***************************************
on Plate.	Carriages to		**********************
	Blanket	Н	50
Measurement. { Length to Heelin. } Width at Shoulder		-11410-1100-100-100-100-100-100-100-100-	
Bill Rendered to		A2444942674-499974144-44444444444	
Diff rendered to	Advertising	***************************************	**************************************
When Rendered	Cemetery charges	9	00
MEMORANDUM.	Transportation Expenses, &c.		***************************************
	Attendance & Assistants		
	Amount of Bill	104	80
	Amount Brought Forward	316	80
	Amount Carried Forward	62/	30
	PAYMENTS.		
-		. *************************************	***************************************
IMPNO OF EXPENSE		***************************************	***************************************
ITEMS OF EXPENSE.		•	***************************************
3.1		***************************************	***************************************
, p.			***************************************
			***************************************
		+356/328648623348484846464242388884W	

Number of Funeral

Number for the Current Year 26

Be careful to enter name of deceased and number of page in index for future reference.

	,		
Name of Dec'd Refrest Child of	Door Crape	***************************************	******* *******************************
Late Residence Sell Meetin Col, Our	Draperies Candelabra and Candles.		
Ageyearsdays.	Washing & Laying out Remains, Shaving		************************************
Cause of Death Mueresius	Preservation of Remains		00
Certifying Physician Queler	Casket. Please Trimming.	15	70
Date of Death Off, 16-1902		***************************************	***************************************
Date of Burial 11 18-1902			Topsassassassassassassassassassassassassas
Chunch	NoHandles		\$2555-5575222222222222222
Place of Burial Mullersville Cemetery.	NoPlate engraved Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot NoSection No	Pl't' H'di's Corners on Box,		***************************************
	Delivering to Cemetery	***************************************	
Location of Grave	NoRobe		**************************************
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs		***************************************
( Show position of monument by)	Use of Doz. Chairs		
	Flowers		***************************************
Inscription	Hearse		,
on Plate.	Carriages to	2	00
		***************************************	***************************************
Measurement. \ Length to Heelfeetin. \		***************************************	***************************************
Measurement. (Width at Shoulder)		***************************************	\$6157 YEAR PAPE \$000 F0 500 F0 500 F0
Bill Rendered to			***************************************
	Advertising	***************************************	***************************************
When Rendered	Cemetery charges		M4444444444444444444444444444444444444
MEMORANDUM.	Transportation Expenses, &c.	***************************************	
No. of the last of	Attendance & Assistants	. 6	
	Amount of Bill	18	00
	Amount Brought Forward	621	30
+ 7	Amount Carried Forward	1639	00
	PAYMENTS.		
			1
		***************************************	***************************************
	1	***************************************	6.46.3
ITEMS OF EXPENSE.		***************************************	***************************************
		9	\$155000 x-15111-11111-1111-1111-1111-111-111-111
	7		4504651444444555555555555555555555555555
			***************************************
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	enter name of de-		
Number for the Current Year 21 ceased and in index or	number of page future reference. Items of Bill, (cross out printe	ed items not	furnished.,
Muito W		()	1
Name of Dec'd Myrlle Wissler	Door Crape		***************************************
Late Residence Columbia Pu	DraperiesCandelabra andCandles.		
Age	Washing & Laying out Remains, Shaving	4	***************************************
Cause of Death Schoolet fever	Preservation of Remains	***************************************	***************************************
Certifying Physician SMU	N.J.K. Casket. Trimming.	18	00
Date of Death Off 18-1902	and all services		
Date of Burial 20-1902	N. II.		***************************************
Funeral at House or Church.	NoHandles		
Place of Burial Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		
Grave or Lot NoSection No	Pi't' H'dl's Corners on Box.		
	Delivering to Cemetery		
Location of Grave	NoRobe		
Oraw lines       for Graves in the Plot, and ) designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.		*************************************
Show position of monument by $\square$ .	Use ofDoz. Chairs		
	Flowers		
	Hearse		
nscription	Carriages to	***************************************	a the contract of the contract
on Plate.	- Variages to	***************************************	,
Measurement. { Length to Heel 5 feet 9 in. }			
Measurement. Width at Shoulder		b	
Bill Rendered to			***************************************
on Rendered to	Advertising		***************************************
When Rendered	Cemetery charges		***************************************
	Transportation Expenses, &c.	***************************************	400000000000000000000000000000000000000
MEMORANDUM.	Attendance & Assistants	***************************************	***************************************
	Amount of Bill	18	00
		1639	00
	Amount Brought Forward	1657	30
	Amount Carried Forward	7.60./	
	PAYMENTS.		
		***************************************	100011411111111111111111111111111111111
		***************************************	***************************************
ITEMS OF EXPENSE.		***************************************	1/01/01/01/01/01/01/01/01/01/01/01/01/01
		***************************************	***************************************
			***************************************
		4	***************************************
	*	***************************************	**************************************
		11	

Number of Funeral

. (/	nter name of de-	1.5	
Number for the Current Year 28 ceased and rin index for	future reference. Items of Bill, (cross out printed	tems not fu	urnished.
Name of Dec'd Offiction Mugrey	Door Crape		
Late Residence Washington Boro, Pa	Draperies Candelabra and Candles.	***************************************	
Age #9 years months days.	Washing & Laying out Remains, Shaving		***************************************
Cause of Death Censustin	Preservation of Remains	9	- 00
Contifuing Physician	No.: Casket. Grefe Trimming.	40	00
Date of Death Upve 21-1902		***************************************	*******************************
Date of Burial " 24-1902		***************************************	***************************************
Funeral at House or Shurch.	NoHandles		***************************************
Place of Burial Mushington Buro, Cemetery.	NoPlate engraved		
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	***************************************
Grave or Lot No. Section No.	Pi't' H'di's Corners on Box.		
Location of Grave	No. Robe	6	50
( Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs	a( ************************************	
	Use of Doz. Chairs	gentarion (1980)	******************************
	Flowers		
Inscription	Hearse	***************************************	***************************************
on Plate.	Carriages to	***************************************	
		***************************************	**********************
Measurement. { Length to Heelin. } Width at Shoulder			***************************************
(Width at Shoulder)		***************************************	
Bill Rendered to		***************************************	-
	Advertising		(**************************************
When Rendered	Cemetery charges		4944241347444444
MEMORANDUM.	Transportation Expenses, &c.	1040101010101010101	***************************************
	Attendance & Assistants		
•	Amount of Bill	51	50
	Amount Brought Forward	1657	30
	Amount Carried Forward	1708	80
	PAYMENTS.		
1		1	1
		***************************************	
		/	*************************
ITEMS OF EXPENSE.	-		
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Number of Funeral Be careful to	enter, name of de-		
by a ceased and	number of page future reference. Items of Bill, (cross out printe	d items not f	furnished.,
Name of Dec'd Levi D. Wood	Door Crape.	-	
Late Residence Mightsville, Pu	Draperies Candelabra and Candles.	***************************************	
Age 29 years months days.	Washing & Laying out Remains, Shaving	g~	00
Cause of Death Typloric	Preservation of Remains	5	00
Certifying Physician Fred C. Bueller	No. Colasket. Swell Corner Trimming.	50	00
Date of Death Muy 4 1902			***************************************
Date of Burial May 6-1902	No. Handles	***************************************	***************************************
Funeral at House or Church.	NoPlate engraved		***************************************
Place of Burial Wrightsville Cemetery.			***************************************
Grave or Lot No. Section No.	Pl't'	***************************************	***************************************
Location of Grave	Delivering to Cemetery	~	00
	No. Robe		
(Draw lines       for Graves in the Plot, and ) designate this one with a double Cross ‡. Show position of monument by □.	Prs, Gloves Linen Scarfs.		***************************************
	Use of Doz. Chairs	***************************************	***************************************
1892	Flowers		***************************************
Inscription Levi S. Woods	Hearse	6	00
on Plate.	Carriages to	***************************************	***************************************
		***************************************	***************************************
Measurement. { Length to Heel			***************************************
(Width at Shoulder)		***************************************	47414447-24447-24447-2444
Bill Rendered to			***************************************
	Advertising		725272747777777777777777777777777777
When Rendered	Cemetery charges		
MEMORANDUM.	Transportation Expenses, &c.		***************************************
	Attendance & Assistants		
	Amount of Bill	73	00
Administration of the second o	Amount Brought Forward	1708	80
<b>*************************************</b>	Amount Carried Forward	1781	80
	PAYMENTS.		
			***************************************
	*		************************************
ITEMS OF EXPENSE.			***************************************
			<
· ·			************************
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	*	***************************************	>>>>>>>>

Number of Funeral\_\_\_ Be careful to enter name of de-ceased and number of page in index for future reference. Number for the Current Year 30 Items of Bill, (cross out printed items not furnished.) Door Crape .... Draperies Candelabra and Candles. Late Residence Washing & Laying out Remains, Shaving. Age HH days. Preservation of Remains. Cause of Death No 137 Casket. Bouck Clock Trimming. Date of Death Date of Burial 6 Handles Funeral at House or Church. No. Plate engraved & / Cruefy Place of Burial Coaldwile .Cemetery Outside Box, (Pine, Chestnut, Oak, Cedar)... Section No Grave or Lot No. Pl't' \_\_\_\_H'dl's \_\_\_\_Corners on Box. Delivering to Cemetery. Location of Grave No. .....Robe :... Draw lines | | | for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □. Prs. Gloves Linen Scarfs Use of ...... Doz. Chairs .... Flowers..... Hearse .... Inscription Carriages to \_\_\_\_ on Plate. Bill Rendered to Advertising.... Cemetery charges..... When Rendered Transportation Expenses, &c ..... MEMORANDUM. Attendance & Assistants ... 00 Amount of Bill.... Amount Brought Forward Amount Carried Forward PAYMENTS.

	enter, name of de-		
Number for the Current Year 3/	number of page future reference. Items of Bill, (cross out printed)	d items not f	furnished.,
A LA		/1	
Name of Dec'd Budget toley	Door Crape	***************************************	
Late Residence Collandrin, On	Draperies Candelabra and Candles.	***************************************	***************************************
Age 86 years, 7 months 18 days.	Washing & Laying out Remains, Shaving	***************************************	
Cause of Death Several Debility	Preservation of Remains	3	00
Certifying Physician Scenedy	No Effic Casket. Coth Trimming.	62	50
		************************************	***************************************
Date of Burial " 5-1902		***************************************	***************************************
Funeral at House or St Peters Church.	NoNo	***************************************	***************************************
	NoPlate engraved + / Cruss	***************************************	***********************
Place of Burial Of Gettus Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		*
Grave or Lot NoSection No	Pl't'H'dl'sCorners on Box.	***************************************	***************************************
	Delivering to Cemetery		***************************************
Location of Grave	NoRobe	\*************************************	11.00.000000000000000000000000000000000
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.	***************************************	***************************************
( Show position of monument by $\square$ .	Use ofDoz. Chairs	***************************************	
	Flowers	***************************************	***************************************
nscription B	Hearse	6	00
on Plate. One det Soley	# Carriages to @ Y	16	00
Agric 86 Jos	1 Ringle Tem		00
Measurement. { Length to Heel			***************************************
Measurement. Width at Shoulder			
Bill Rendered to			
	Advertising	***************************************	***************************************
When Rendered	Cemetery charges	***************************************	***************************************
		***************************************	***************************************
MEMORANDUM.	Transportation Expenses, &c.	4,-77-77424-24-00-1120-122-70-122-70-70-70-70-70-70-70-70-70-70-70-70-70-	***************************************
	Attendance & Assistants	91	50
	Amount of Bill	1872	60
	Amount Brought Forward	1012	2.6
	Amount Carried Forward	1963	30
	PAYMENTS.		
	,		
		***************************************	***************************************
		***************************************	***************************************
ITEMS OF EXPENSE.			
		******** >*****************************	***************************************
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Number of Funeral...

	future reference. Items of Bill, (cross out printed		
Name of Dec'd Hurwork Brumer	Door Crape		*******
ate Residence Columbia Ca	Draperies Candelabra and Candles.	***************************************	
Age 70 years months days.	Washing & Laying out Remains, Shaving		
Age TO years months days.  Cause of Death Lund Durling	Preservation of Remains	3	00
Certifying Physician DMMaur	No Ot Cateful Trimming.	30	00
Date of Death June / 3 - 1902		***************************************	
Date of Burial 11 15 -1902			***************************************
uneral at House or Shurch.	No. 6 Handles Widter		***************************************
Place of Burial 11 11 13 16 16 Cemetery.	NoPlate engraved	***************************************	
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
irave or Lot No.	Delivering to Cemetery Corners on Box.	***************************************	*
ocation of Grave	No. Robe		***************************************
(Draw lines       for Graves in the Plot, and )	Prs. Gloves Linen Scarfs		
Draw lines       for Graves in the Plot, and   designate this one with a double Cross ‡.   Show position of monument by □.	Use of Doz. Chairs		
	Flowers	***************************************	
(	Hearse	6	00
ascription Motley			***************************************
on Plate.	Carriages to	*******************************	
		***************************************	
Measurement. { Length to Heelin. } Width at Shoulder			***************************************
			***************************************
Bill Rendered to Clock Bremur			***************************************
*	Advertising	***************************************	
When Rendered	Cemetery charges	***************************************	,
MEMORANDUM.	Transportation Expenses, &c.	***************************************	***************************************
and of the state o	Attendance & Assistants	111	00
*	Amount of Bill	1963	30
	Amount Brought Forward	2004	
	Amount Carried Forward	1007	00
	PAYMENTS.		
<b>Santa</b>			1 -
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ITEMS OF EXPENSE.			***************************************
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	number of page future reference. Items of Bill, (cross out printe	d items not	furnished.
1 ( P. a) . d		(1	1
Name of Dec'd John Bilpin Steech	Door Crape	***************************************	***************************************
Late Residence Colembia. Pu	DraperiesCandelabra andCandles.	***************************************	
Age 32 years months days.	Washing & Laying out Remains, Shaving		
Cause of Death Jusculy	Preservation of Remains.	0	ad
Certifying Physician	No. Casket. Western Och Trimming.	40	00
Date of Death July 2 - 1902		***************************************	***************************************
Date of Burial " 5 1902			***************************************
Funeral at House or It Jolius Zulle Church.	No. Handles	***************************************	
Place of Burial MIT Bellel, Cemetery.	No		*******************
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.		*
	Delivering to Cemetery		
Location of Grave	NoRobe		
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡.	Prs. Gloves Linen Scarfs.	***************************************	*
( Show position of monument by □.	Use ofDoz. Chairs	***************************************	
	Flowers		
Inscription ( Yola Silyin Mealle	Hearse	6	00
. }	Carriages to		
on Plate. Agua & Type,	- January 10		
(Length to Heel G feet 15 in )	Bruiging books for		
Measurement. { Length to Heelin. } Width at Shoulder	Luceste	5	00
Bill Rendered to	1 Pair Deiffen	/	00
	Advertising		
When Rendered	Cemetery charges	9	00
	Transportation Expenses, &c.		
MEMORANDUM.	Attendance & Assistants		
	Amount of Bill	67	00
	Amount Brought Forward	2004	30
· ·	Amount Carried Forward	2071	30
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	PAYMENTS.		
Nava and the state of the state			
		1244-1244-1244-1244-1244-1244-1244-1244	***************************************
ITEMS OF EVDENSE			***************************************
ITEMS OF EXPENSE.		***************************************	************************

Number of		
Number	for the Current	Year 34

Name of Dec'd Mrs Elizabeth Stiebl	Door Crape	***************************************	***************************************
Late Residence Chertun-Hill, Sa	Draperies Candelabra and Candles.		
Age 66 years months days.	Washing & Laying out Remains, Shaving	*	***************************************
Cause of Death	Preservation of Remains	3	00
Certifying Physician	No Back Casket. Cloth Trimming.	65	00
Date of Death July 4 1902		***************************************	***************************************
Date of Burial 7 - 1902.		***************************************	·
Funeral at House or Pencerdia Lata Church.	No. Handles		**********
Place of Burial Cemetery.	No. Plate engraved	***************************************	***************************************
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)		F0,000,000,000,000,000,000,000,000,000,
Clare of Lot 140.	Delivering to Cemetery Corners on Box.	*************************************	***************************************
Location of Grave	No. Robe	8	50
( Draw lines       for Graves in the Plot, and )	Prs. Gloves Linen Scarfs	400000000000000000000000000000000000000	***************************************
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Use of Doz. Chairs	***************************************	***************************************
			***************************************
1836	Flowers	6	00
Inscription Elizable Acidle	Hearse	**************************************	
on Plate. 1902	Carriages to	**************************************	***************************************
	Blushet		0.0
Measurement. { Length to Heelin. }			
(Width at Shoulder)		*******************************	***************************************
Bill Rendered to		***************************************	101110700707771777100770000000000000000
	Advertising	5478400000000000000000000000000000000000	***************************************
When Rendered	Cemetery charges		4
MEMORANDUM.	Transportation Expenses, &c.	***************************************	***************************************
	Attendance & Assistants	G.C.	150
	Amount of Bill	87.	30
	Amount Brought Forward		
	Amount Carried Forward		***************************************
	PAYMENTS.		
Control Section (Control Control Contr		····	***************************************
		***************************************	************************
ITEMS OF EXPENSE.	,	**************************************	***************************************
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		######################################	750700075007777889788888888888
	C C V No. 11 100 CONTROL OF THE PROPERTY OF TH		ydraethavanus/efsedsis/estric
		41-14-1	*************
		***************************************	1106440181117A*****************

Number of Funeral Be careful to	enter name of de-		
ceased and	number of page future reference. Items of Bill, (cross out printed	d items not	furnished.
1910			1
Name of Dec'd Sev Edward Greenens	Door Crape	4	***************************************
Late Residence Schieleshort Oa	Draperies Candelabra and Candles.		
Age 2 years 7 months 4 days.	Washing & Laying out Remains, Shaving	***************************************	***************************************
Cause of Death Pholesse Infuntion	Preservation of Remains.	2	00
Certifying Physician Benthuzel	No Casket. 2/3 Trimming.	/5	00
Data of Dooth July 10-1902		***************************************	***************************************
Date of Burial July 13-1902		***************************************	***************************************
Funeral at House or Murulle — Church.	NoHandles	***************************************	***************************************
Place of Burial Cemetery.	NoPlate engraved		***************************************
Grave or Lot No. Section No.	Pl't'	4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************
	Delivering to Cemetery	\$	150015555555555555555555555555555555555
Location of Grave	NoRobe		
{ Draw lines       for Graves in the Plot, and } designate this one with a double Cross ‡. } Show position of monument by □.	PrsGloves Linen Scarfs.	***************************************	***************************************
( Show position of monument by □.	Use of Doz. Chairs	***************************************	1220550000 72100023330300000
	Flowers	***************************************	***************************************
Inscription	Hearse	***************************************	***************************************
on Plate.	Carriages to		00.
		***************************************	***************************************
( Length to Heelfeetin. )			
Measurement. { Length to Heelin. } Width at Shoulder		***************************************	***************************************
Bill Rendered to		***************************************	
	Advertising	***************************************	121222011111111111111111111111111111111
When Rendered	Cemetery charges	***************************************	***************************************
MEMORANDUM.	Transportation Expenses, &c.	***************************************	***************************************
	Attendance & Assistants		
-	Amount of Bill	18	00
	Amount Brought Forward		
	Amount Carried Forward	***************************************	***************************************
P	PAYMENTS.		
<b>-</b>	F CONTROL OF THE PARTY OF THE P		
		***************************************	***************************************
		***************************************	***************************************
ITEMS OF EXPENSE.		······································	***************************************
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		***************************************	***************************************
		**************************************	***************************************

Number	of	Fune	eral	**************
Numb	er f	or the	e Current	Year 36

Name of Dec'd Catherina I Dugherly	Door Crape	
Late Residence Column Line, Pal	Draperies Candelabra and Candles.	
Age	Washing & Laying out Remains, Shaving	***************************************
Cause of Death Chrise Diarles	Preservation of Remains.	500
Certifying Physician & K. Zniewew	No BOK Casket. 6 Cotte Trimming.	50 00
Date of Death July 14-1902		
Date of Burial July 17-1902		***************************************
Funeral at House or Gofs. Prestyteric Church.	No. Handles	
Place of BurialCemetery.	NoPlate engraved	***************************************
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	
Glave of Lot No.	Pl't' H'dl's Corners on Box.	
Location of Grave	NoRobe	***************************************
(Draw lines     for Graves in the Plot, and)	Prs. Gloves Linen Scarfs	
Draw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.		
	Use of Doz. Chairs	***************************************
(	Flowers	***************************************
Inscription	Hearse	4,0,4,0,4,0,4,0,0,0,0,0,0,0,0,0,0,0,0,0
on Plate.	Carriages to Persial	150
	Shel-Curseives	130
Measurement. { Length to Heelin. }		
Width at Shoulder		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Bill Rendered to St. Dougherly		
	Advertising	
When Rendered	Cemetery charges & charge Charact	000
MEMORANDUM.	Transportation Expenses, &c.	7 90
	Attendance & Assistants John 484	4 00
	Amount of Bill	69 20
	Amount Brought Forward	
	Amount Carried Forward	-
	PAYMENTS.	
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ITEMS OF EXPENSE.		42-20-4-20-4-20-4-20-4-20-4-20-4-20-4-2
	17 17 18 18 18 18 18 18 18 18 18 18 18 18 18	
		***************************************
		**************************************

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ceased and	enter name of de- number of page future reference. Items of Bill, (cross out printe	d items not	furnished
Name of Dec'd Calerine Colura	Door Crape		
Late Residence Columbia Pa	DraperiesCandelabra andCandles.	Assessed Agentinosticosticosticosticosticosticosticostic	,
Age 79 years months days.	Washing & Laying out Remains, Shaving	***************************************	***************************************
Cause of Death Olel age	Preservation of Remains	5	00
Certifying Physician 27 5 Tayler	No. Casket. Trimming.	45	00
Date of Death July 25-1902		***************************************	*****************************
Date of Burial 1/ 28 - 1902		***************************************	***************************************
Funeral at House or Afore Church	No. Handles	***************************************	***************************************
Place of Burial Merrilla, Pa Cemetery.	No. Plate engraved	***************************************	•
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Graye of Lot 110.	Delivering to Cemetery	**************************************	***************************************
Location of Grave	No. Polic Robe	0 -00	00
( Draw lines     for Graves in the Plot, and )	Prs. Gloves Linen Scarfs.		***************************************
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Use of Doz. Chairs		***************************************
	Flowers		***************************************
	Hearse	P2400180400000000000000000000000000000000	
Inscription	Carriages to	***************************************	***************************************
on Plate.	Variages to		
( Length to Heelfeetin. )			***************************************
Measurement. Width at Shoulder		***************************************	
Bill Rendered to		0.001.00.000.000.000.000.000.000.000.00	***************************************
DIT Notice to	Advertising	***************************************	***************************************
When Rendered	Ceme+ery charges	***************************************	***************************************
	Transportation Expenses, &c.	Ø	***************************************
MEMORANDUM.	Attendance & Assistants	***************************************	***************************************
	Amount of Bill	150	00
	Amount Brought Forward		***************************************
	Amount Carried Forward		
•			
	PAYMENTS.		
		*******************************	***************************************
ITEMS OF EXPENSE			***************************************

Number of Funeral	_
Number for the Current Year 38	5

Name of Dec'd Josephum Mc Mariana	Door Crape		······
Late Residence Columbia - Ca	Draperies Candelabra and Candles.		
Age 69 years months days.	Washing & Laying out Remains, Shaving	***************************************	****************************
Cause of Death	Preservation of Remains & Porpury body	10	00
Certifying Physician J. M. Linnigshi	No Bel Casket. Ball Mendel Trimming.	85	00
Date of Death July 25-/1902		***************************************	
Date of Burial (1 78-1902		***************************************	******************
Funeral at House of Peters Church.	No. Handles		***************************************
Place of BurialCemetery.	No. Plate engraved Och Code		***************************************
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	L-(-(-(-)-)-(-(-(-(-(-(-(-(-(-(-(-(-(-(-	***************************************
	Delivering to Cemetery		***************************************
Location of Grave	NoRobe	***************************************	
(Draw lines       for Graves in the Plot, and ) designate this one with a double Cross ‡. }	PrsGloves Linen Scarfs		***************************************
Show position of monument by $\square$ .	Use of Doz. Chairs		
	Flowers		
	Hearse	6	00
Johnna Mc Mariano	Carriages to	and a second of a chellen Till alone discollent that a	***************************************
on Plate. Ayer 69 yrs,	Carriages to		***************************************
Measurement. { Length to Heelin. } Width at Shoulder		***************************************	***************************************
Bill Rendered to		\v6468631012000077474600077	
Bill Kendered to	Advertising		***************************************
W. D. L. I	Cemetery charges	***************************************	***************************************
When Rendered	Transportation Expenses, &c.		***************************************
MEMORANDUM.	Attendance & Assistants	***************************************	***************************************
		101	00
	Amount of Bill		
	Amount Brought Forward		
	Amount Carried Forward		
	PAYMENTS.		
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		***************************************	***************************************
		120000000000000000000000000000000000000	PR-040-60-61-61-61-61-61-61-61-61-61-61-61-61-61-
ITEMS OF EXPENSE.		***************************************	***************************************
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	5 to 4 m) in a management of the second	-2421014 1412414141414141414141414	************************
	11 NO 1 2 1 NOTE THE RESIDENCE OF THE PROPERTY	**************************************	***************
		***************************************	***************************************

Number of Funeral Be careful to enter name of deceased and number of page in index or future reference. Number for the Current Year 39 Items of Bill, (cross out printed items not furnished.) Name of Dec'd Chunu Murtin Roch Door Crape.... Late Residence Muriella Pulke Draperies Candelabra and Candles. Washing & Laying out Remains, Shaving... Preservation of Remains. M Casket. Pluste Trimming. Certifying Physician Date of Death. Blunket Date of Buria Church. Funeral at House or No.\_\_\_\_Plate engraved\_\_\_\_ Place of Burial. Cemetery Outside Box, (Pine, Chestnut, Oak, Cedar) Grave or Lot No .... Section No .. \_\_\_ Pl't'......H'dl's ...... Corners on Box. Delivering to Cemetery ..... Location of Grave No.....Robe... Draw lines | | | for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □. Prs. \_\_\_\_Gloves \_\_\_\_Linen Scarfs. Use of \_\_\_\_\_ Doz. Chairs\_\_\_\_\_ Flowers..... Hearse ..... Inscription Carriages to ... on Plate. Advertising.... 00 Cemetery charges..... When Rendered. Transportation Expenses, &c... MEMORANDUM. Attendance & Assistants 50 Amount of Bill... Amount Brought Forward. Amount Carried Forward PAYMENTS.

Number	of I	une	ral	20FETTOP+66EE
Numb	er fo	r the	Current	Year 40

Name of Dec'd Cohristian Stroft	Door Crape	
Late Residence Columbia, Par	Draperies Candelabra and Candles.	
Age 66 years months days.	Washing & Laying out Remains, Shaving	5 00
Cause of Death Analysis	Preservation of Remains	500
Certifying Physician Whatayler	No BOKCasket. Ball wold Trimming.	8250
Date of Death Cluquet, 14 1902		
Date of Burial 1902		
Funeral at House or Arthurs Gen Luft Church.	No. Handles	
Place of Burial Menut Bethely Cemetery.	No. Plate engraved	
	Outside Box, (Pine, Chestnut, Oak, Cedar)	
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.	***************************************
Location of Grave	Delivering to Cemetery	
	No.	
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs	***************************************
	Use of Doz. Chairs	
1545	Flowers	
Inscription 1000		***************************************
on Plate.	Carriages to	***************************************
(	1101 10-11-1-1-0-1	
Measurement. \ Length to Heel feet in. \	Steffen Shiel Secta Colon	200
Width at Shoulder		
Bill Rendered to		
Marking and the second	Advertising	
When Rendered	Cemetery charges	5 00
MEMORANDUM.	Transportation Expenses, &c.	
Annual Control of Cont	Attendance & Assistants	
	Amount of Bill	100,00
	Amount Brought Forward	
	Amount Carried Forward	
	PAYMENTS.	
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Management of the control of the con		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ITEMS OF EXPENSE.		**************************************
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	Hallester, and the second seco	

and and	enter name of de- number of page		
Number for the Current Year 4 in index or	future reference. Items of Bill, (cross out printe	ed items not	furnished.,
Name of Dec'd Wein Lesage (esticate)	Door Crape		
Late Residence Philadelphia. Pa	Draperies Candelabra and Candles.	***************************************	
Age	Washing & Laying out Remains, Shaving	***************************************	
Cause of Death R. Acudeus	Preservation of Remains	***************************************	
Certifying Physician aly R Cowing	No. Casket on Ook Trimming.	H	
Date of Death Villy 26-1902	July services	50	00
Date of Doutin			
Date of Burial Clug 8 1902	No. 6 Handles	•	***************************************
Funeral at House or Church	No. Plate engraved AT Rus	3000101000170000070707070707070	
Place of Burial M Clay of Marie Cemetery.	Outside Box (Pine Chestnut Oak Cedar)	***************************************	***************************************
Grave or Lot No. Nume Section No. West Kull	Pl't'H'dl'sCornerson Box.		
	Delivering to Cemetery.	*}9,,,\$f(**********************************	
Location of Grave	No. Buk Robe	'4+44**********************************	***************************************
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs.		
( Show position of monument by )	Use ofDoz. Chairs		**********
	Flowers	***************************************	***************************************
Inscription	Hearse	***************************************	
on Plate.	Carriages to	***************************************	*****************
		AADOLINGOODOOOOOOOOOO	***************************************
(Length to Heel 5 feet 9 in.)		8	4040/40/477447444444444
Measurement. Width at Shoulder		***************************************	-**************************************
Bill Rendered to Way A. Sie			
Constitutes Plines	Advertising		*******************************
When Rendered Cury 7-1902	Cemetery charges		******************************
MEMORANDUM.	Transportation Expenses, &c.		
The above was a men who	Attendance & Assistants		
was injused on the P. R. R. at	Amount of Bill	50	00
Muntalle Pa July 26-1902	Amount Brought Forward	what beautiful Hydratham and the second	
brought to Coleration Housfield	Amount Carried Forward		
and died there Denne clay -		***************************************	
busied in Pollers field, as	PAYMENTS.		
Low Striken on Yay 241	0 2		
Exhimed any, 9 1802 cm		***************************************	***************************************
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ITEMS OF EXPENSE.		***************************************	***************************************
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Willia Losage,	*		***************************************
by his futten Tolk Le suce			**************************************
and lelso by his brother		***************************************	**************************************
The same of the sa	ubuel, 12.704		
We falle carried a gog tra	o clepticala		/

Number of Funeral.....

2			
ceased and n	nter name of de- number of page future reference. Items of Bill, (cross out printed	d items not	furnished.
Name of Dec'd Mip Poplica M Craules  Late Residence O Hunthu, Pa.  Age Syears months days.  Cause of Death Old Age,  Certifying Physician Me Amawhur  Date of Death 12-1907  Funeral at House or Place of Burial 24-1907  Grave or Lot No. Section No.  Location of Grave   Oraw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by	Door Crape  Draperies Candelabra and Candles.  Washing & Laying out Remains, Shaving  Preservation of Remains  No. Trimming.  No. Handles  No. Plate engraved  Outside Box, (Pine, Chestnut, Oak, Cedar)  Pl't' H'dl's Corners on Box.  Delivering to Cemetery  No. Robe  Prs. Gloves Linen Scarfs  Use of Doz. Chairs	30	00
Inscription on Plate.  Measurement. { Length to Heel 5 feet 6 in. }	Hearse Carriages to	6	00
Bill Rendered to When Rendered	Advertising Cemetery charges		
MEMORANDUM.	Amount Brought Forward	4/	00
	Amount Carried Forward PAYMENTS.		
ITEMS OF EXPENSE.			***************************************

Number of Funeral Be careful to	enter name of de-	75
Number for the Current Year 48 ceased and in index or	number of page future reference. Items of Bill, (cross out printe	ed items not furnished.,
Name of Dec'd John Gets	Door Crape	
Late Residence Next Kurffield	Draperies Candelabra and Candles.	
Age	Washing & Laying out Remains, Shaving	1
	Preservation of Remains	
Cause of Death  Certifying Physician Afflew M. A.	NoCasket,Trimming.	
Date of Death Cuy, 12-190V		
Date of Burial	NoNoHandles	
Funeral at House or Church.	NoPlate engraved	
Place of BurialCemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	
Grave or Lot NoSection No	Pl't'H'dl'sCorners on Box.	***************************************
	Delivering to Cemetery	
Location of Grave	NoRobe	
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.	***************************************
( Show position of monument by )	Use ofDoz. Chairs	
	Flowers	
Inscription	Hearse	
on Plate.	Carriages to	
		***************************************
( Length to Heelfeetin. )	•	
Measurement. Width at Shoulder		
Bill Rendered to		
	Advertising	0
When Rendered	Ceme+ery charges	***************************************
	Transportation Expenses, &c.	
MEMORANDUM.	Attendance & Assistants	-
•	Amount of Bill	1-
	Amount Brought Forward	
-	Amount Carried Forward	
	PAYMENTS.	
ITEMO OF EVERYOR		
ITEMS OF EXPENSE.		***************************************
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Number of Funeral

4		
Number of Funeral Be careful to ent	ar same of do	: minus
Number for the Current Year 444  Be careful to enticeased and number for the Current Year 444	imber of page Items of Rill (cross out printed	l items not furnished.)
Trumper for the Outlone Foundation		
Name of Dec'd Dus au Belett	Door Crape	
Late Residence Colembia Pa	DraperiesCandelabra andCandles.	
Age	Washing & Laying out Remains, Shaving	
Cause of Death Myrain of age	Preservation of Remains	
Certifying Physician At BRup	No Casket Trimming.	*
Date of Death Query 19-1402		
Date of Burial		
Church.	NoHandles	
Place of Burial Princeto, Pa, Cemetery.	No. Plate engraved Chartest Oct Codes	
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)  Pl't' H'dl's Corners on Box.	
Grave of Lot No.	Delivering to Cemetery	
Location of Grave	NoRobe	
(Draw lines     for Graves in the Plot, and)	Prs. Gloves Linen Scarfs	
(Draw lines       for Graves in the Plot, and ) designate this one with a double Cross ‡. Show position of monument by □.	Use of Doz. Chairs	
	Flowers	
	Hearse	
Inscription	Carriages to	
on Plate.		
Measurement. { Length to Heelin. }		
Measurement. Width at Shoulder		
Bill Rendered to		
6.	Advertising	
When Rendered	Cemetery charges	
MEMORANDUM.	Transportation Expenses, &c.	
MIDNOT(III)	Attendance & Assistants	
	Amount of Bill	
	Amount Brought Forward	
	Amount Carried Forward	
	PAYMENTS.	
		1
ITEMS OF EXPENSE.		

Number	of	Fı	uner	al	**********
Numbe	er f	for	the	Current	Year 45

Name of Dec'd Me Letilin Hereller	Door Grape	7 /
Late Residence Columbia Pa	DraperiesCandelabra andCandles.	*: 50
Age by years 9 months days.	Washing & Laying out Remains, Shaving	
Course of Doroth	Preservation of Remains	
Certifying Physician J. W. Livrugshire	NoCasketTrimming	1
Date of Death Clug 19-1140V	The state of	
	, 'V	4 4 4
Date of Burial	NoHandles	
Funeral at House or Church.  Place of Burial Mt Boulul Cemetery.	NoPlate engraved	
	Outside Box, (Pine, Chestnut, Oak, Carry	
Grave or Lot No. Section No.	Pl't'H'dl'sCorners on Box.	
	Delivering to Cemetery	
Location of Grave	NoRobe	
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.	***************************************
( Show position of monument by □.	Use ofDoz. Chairs	
	Flowers	
Inscription	Hearse	
on Plate.	Carriages to	
on riate.		***************************************
( Length to Heelfeetin. )		
Bill Rendered to		
	Advertising	
When Rendered	Cemetery charges	
MEMORANDUM.	Transportation Expenses, &c.	
	Attendance & Assistants	
	Amount of Bill	
	Amount Brought Forward	-
	Amount Carried Forward	
	PAYMENTS.	. ,
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ITEMS OF EXPENSE.		
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Number for the Current Year 46 ceased and rin index for	future reference. Items of Bill; (cross out printe	d items not fu	urnished.
Name of Dec'd bynis Bluly	Door Crape		**************************************
Late Residence Muslington 13000.  Age 69 years months days.	Draperies Candelabra and Candles.	,	
Area 6 9 was a markle days	Washing & Laying out Remains, Shaving		
Age years months uays.	Preservation of Remains	***************************************	***************************************
Cause of Death Double	NoCasketTrimming.		t
Certifying Physician  Date of Death   9	***************************************	***************************************	
7		*******************************	
Date of Burial	No. Handles		***************************************
Funeral at House orChurch.	NoPlate engraved	***************************************	***************************************
Place of BurialCemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.	***************************************	
	Delivering to Cemetery		~1+2:(22220+2222+2224 <del>+2000</del>
Location of Grave	NoRobe	v. ************************************	***************************************
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs	*******************************	*600*********************
( Show position of monument by )	Use of Doz. Chairs		*******************************
	Flowers	***************************************	100000000000000000000000000000000000000
Inscription	Hearse	***************************************	******************************
on Plate.	Carriages to	***************************************	dawateunevaraneya epanah Philli
on rate.		***************************************	***************************************
(Length to Heelfeetin.)			***************************************
Measurement. { Length to Heelfeetin. }			*************
Bill Rendered to			
	Advertising	***************************************	Y2000000000000000000000000000000000000
When Rendered	Cemetery charges		Trade to the total and the tot
	Transportation Expenses, &c.		
MEMORANDUM.	Attendance & Assistants		
	Amount of Bill		the Table Steel Co.
• - 14	Amount Brought Forward		120200000000000000000000000000000000000
	Amount Carried Forward		
	PAYMENTS.		•
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Late Residence Colembia Pa	DraperiesCandelabra andCandles.		
Age / years months days.	Washing & Laying out Remains, Shaving		
	Preservation of Remains	***	***************************************
Cause of Death  Certifying Physician Muxeuryslu	NoTrimming.		
Date of Death Deft 16-1902		***************************************	*
Date of Burial		***************************************	****** **************
Funeral at House or Church.	No. Handles		
	NoPlate engraved	***************************************	*************************
Place of Burial Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot No. Section No.	Pl't'H'dl'sCorners on Box.	***************************************	********************
Location of Grave	Delivering to Cemetery	***************************************	***************************************
	NoRobe		***************************************
( Draw lines       for Graves in the Plot, and ) designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs.	***************************************	***************************************
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Bill Rendered to		***************************************	Z020f4920494794dd2944494
	Advertising	***************************************	***************************************
When Rendered	Ceme+ery charges	***************************************	***************************************
MEMORANDUM.	Transportation Expenses, &c.		***************************************
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Name of Dec'd Machuelly, Foly	Door Crape	1	
Late Residence Oblinibu. Po	DraperiesCandelabra andCandles.	,	Ma Tourne Tourne Tourne
Age 28 years months days.	Washing & Laying out Remains, Shaving		***************************************
Cause of Death Orange	Preservation of Remains		
Certifying Physician Rusp	NoCasketTrimming.		* *********************
Date of Death 19-140V		***************************************	
Date of Burial		****************	* *************************************
Funeral at House or Church.	NoHandles		**
Place of Burial At Petus Cemetery.	NoPlate engraved		
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Graye or Lot No. Section No.	Pl't' H'dl's Corners on Box.		** ************************************
Location of Grave	NoRobe		
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When Rendered	Cemetery charges		4.
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Name of Dec'd Alyes & Brumun	Door Crape	6. A	***************************************
Late Residence Columbia. Po	DraperiesCandelabra andCandles.		***************************************
Age 32 years // months / days.	Washing & Laying out Remains, Shaving		***************************************
Cause of Death	Preservation of Remains	-	***************************************
Cause of Death  Certifying Physician full Linuwewer	No	***************************************	***************************************
Date of Death		***************************************	
Date of Burial			
Funeral at House orChurch.	NoHandles		
Place of BurialCemetery.	No. Plate engraved	li l	1
Grave or Lot NoSection No	Outside Box, (Pine, Chestnut, Oak, Cedar)		
	Delivering to Cemetery		
Location of Grave	NoRobe		
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	Prs. Gloves Linen Scarfs.		
Show position of monument by $\square$ .	Use ofDoz. Chairs		
	Flowers		
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Inscription	Carriages to		
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Measurement. Width at Shoulder.			
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When Rendered	Cemetery charges		
MEMORANDUM.	Transportation Expenses, &c.	6	
MEMORANDOM.	Attendance & Assistants	*	
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Number of Funeral

Number for the Current Year 30

Name of Dec'd

Late Residence

Be careful to enter name of deceased and number of page in index for future reference.

Name of Dec'd Wyb Muuw Late Residence bolumba Da Age years months days. Cause of Death Certifying Physician Da Muulle	Door CrapeCandelabra andCandles.  Washing & Laying out Remains, Shaving  Preservation of Remains  NoCasketTrimming.	***************************************	
Date of Death  Date of Burial  Funeral at House or Church.  Place of Burial  Grave or Lot No.  Cemetery.  Cocation of Grave  (Draw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	No. Handles Outside Box, (Pine, Chestnut, Oak, Cedar) H'dl's Corners on Box.  Delivering to Cemetery No. Robe Gloves Linen Scarfs  Use of Doz. Chairs		
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When Rendered  MEMORANDUM.	Advertising  Cemetery charges  Transportation Expenses, &c.		
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Number of Funeral Be careful to e	enter'name of de-	
Number for the Current Year 5 ceased and in index or	number of page future reference. Items of Bill, (cross out printe	ed items not furnished.,
( . / Al . / 0,	:	
Name of Dec'd Joseph Atrialle	Door Crape	***************************************
Late Residence Columbia For	Draperies Candelabra and Candles.	
Ageyearsmonthsdays.	Washing & Laying out Remains, Shaving	
Cause of Death	Preservation of Remains	
Certifying Physician 2 armor	No	
Date of Death Oct, 11-1902		***************************************
Date of Burial		
Funeral at House or Church.	No. Handles	
Place of Burial Cemetery.	NoPlate engraved	
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	
Grave or Lot No	Pl't' H'dl's Corners on Box.	
Location of Grave	NoRobe	
(Draw lines       for Graves in the Plot, and )		
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Inscription	Hearse	
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Number for the Current Year 2 ceased and rin index for	number of page future reference. Items of Bill, (cross out printe	d items not furnished.
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Name of Dec'd Olley In Raceslung		1,000
Late Residence Med Humpfield	Draperies Candelabra and Candles.	***************************************
Age years months days.	Washing & Laying out Remains, Shaving	
Cause of Death Typherell fever	Preservation of Remains.	***************************************
Certifying Physician	No Casket Trimming.	
Date of Death Oct, 21 190	-	
Date of Burial	No. Handles	
Funeral at House or Church.	NoPlate engraved	
Place of Burial Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.	
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Name of Dec'd Step M Harman	Door Crape		
Late Residence Colemnation. Par	Draperies Candelabra and Candles.		
Age 66 years months days.	Washing & Laying out Remains, Shaving		***************************************
Cause of Death Since al	Preservation of Remains		
Certifying Physician	No	***************************************	***************************************
Date of Death Out 31-1902		***************************************	***************************************
Date of Burial hu 4-1903		***************************************	
	No. Handles		
Funeral at House or Church.  Place of Burial Cemetery.	NoPlate engraved	****	
	Outside Box, (Pine, Chestnut, Oak, Cedar)	-	***************************************
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Location of Grave	Delivering to Cemetery		*******************************
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Number of Funeral Be careful to er	iter name of de-		
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Name of Dec'd James Hawtler	Door Crape		
Late Residence Outumber. Va,	Draperies Candelabra and Candles.		
A DATE days	Washing & Laying out Remains, Shaving		
Cause of Death Cause of Death	Preservation of Remains	***************************************	***************************************
Certifying Physician	No Casket Trimming		
Date of Death	,		
Date of Burial	AL LI		
Funeral at House or Church.	NoPlate engraved		
Place of BurialCemetery.	Outside_Box, (Pine, Chestnut, Oak, Cedar)		
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	Delivering to Cemetery		***************************************
Location of Grave	NoRobe		
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Name of Dec'd Caterini Suyther		
Name of Dec'd Confession Surgeria	Door Crape	
Late Residence Columbia, Pag	Draperies Candelabra and Candles.	
Age // years / days.	Washing & Laying out Remains, Shaving	
Cause of Death Dropsy	Preservation of Remains	
Certifying Physician Mes Chuwewer	No Casket, Trimming,	
Date of Death Chron 8-1902		
Date of Burial		
Funeral at House orChurch.	No. Handles	
Place of BurialCemetery.	NoPlate engraved	1
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	
	Pl't' H'dl's Corners on Box.  Delivering to Cemetery	
Location of Grave	NoRobe	
( Draw lines       for Graves in the Plot, and )	Prs. Gloves Linen Scarfs.	
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When Rendered	Cemetery charges	***************************************
MEMORANDUM.	Transportation Expenses, &c.	
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Name of Dec'd Colum Cultur	Door Crape	***************************************
Late Residence Munifiella Ca	Draperies Candelabra and Candles.	
ge	Washing & Laying out Remains, Shaving	***************************************
ause of Death	Preservation of Remains	
ertifying Physician	NoCasketTrimming.	***************************************
ate of Death Mv=19-1907		
ate of Burial	N. H. H.	
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Draw lines       for Graves in the Plot, and ) designate this one with a double Cross ‡. }	Prs. Gloves Linen Scarfs	
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Number of Funeral Be careful to	enter, name of de-	
Number for the Current Year 57 ceased and in index or	number of page future reference. Items of Bill, (cross out print	ed items not furnished.,
Name of Dec'd Jacob Comoster	Door Crape	
Late Residence Bellembin, Pa,	Draperies Candelabra and Candles.	
Age 80 years // months days.	Washing & Laying out Remains, Shaving	
Cause of Death Purulate Stuffe	Preservation of Remains	
Certifying Physician Lev. W. Berutteegel	NoCasket,Trimming.	
Date of Death Dee 4 1902		
Date of Burial		
Funeral at House orChurch.	No. Handles	
Place of BurialCemetery.	NoPlate engraved	
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)	
	Delivering to Cemetery	
Location of Grave	NoRobe	
(Draw lines       for Graves in the Plot, and)	Prs. Gloves Linen Scarfs.	
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on Plate.	Carriages to	
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Bill Rendered to		
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When Rendered	Cemetery charges	
MEMORANDUM.	Transportation Expenses, &c.	***************************************
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Name of Dec'd John Jaley	Door Crape	
Late Residence / Malyny lw - Doro,	Draperies Candelabra and Candles.	
Age	Washing & Laying out Remains, Shaving	
Cause of Death		
Certifying Physician	No Casket Trimming	***************************************
Date of Death Kles 15-190V		***************************************
Date of Burial		***************************************
Funeral at House orChurch.	No. Handles	
Place of BurialCemetery.	NoPlate engraved	
Grave or Lot No. Section No.		
	Delivering to Cemetery	
ocation of Grave	NoRobe	
Draw lines       for Graves in the Plot, and ) designate this one with a double Cross ‡. }	Prs. Gloves Linen Scarfs	
Show position of monument by $\square$ .	Use of Doz. Chairs	
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When Rendered	Cemetery charges	***************************************
	Transportation Expenses, &c.	
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ceased and	number of page future reference. Items of Bill, (cross out printe	ed items not furnished.
Name of Dec'd Affice Aller Segles  Late Residence Occurrent for Many Age years months days.  Cause of Death Cuffernitus follogy  Certifying Physician Certifying Certifying Physician Certifying Physi	Door Crape  Draperies Candelabra and Candles.  Washing & Laying out Remains, Shaving  Preservation of Remains  No. Casket. Trimming.	
Place of Burial Cemetery.  Grave or Lot No Section No	NoPlate engraved	
Location of Grave  {   Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.    Inscription   On Plate.	Delivering to Cemetery  No	
Measurement. { Length to Heel	Advertising	
When Rendered	Cemetery charges	***************************************
MEMORANDUM.	Amount Brought Forward  Amount Carried Forward	
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ITEMS OF EXPENSE.		

Number of Funeral  Number for the Current Year  Be careful to entroceased and number for the Current Year	mber of page Itama of Dill (	d items not f	urnished.
Name of Dec'd Adam R Mass	Door Crape		
Late Residence Oblimbie Do	Draperies Candelabra and Candles.		***************************************
Age years months days.	Washing & Laying out Remains, Shaving		***************************************
	Preservation of Remains	***************************************	***************************************
Cause of Death	No. Casket. Trimming.	***************************************	
Date of Death / LW. 20-1903	Starter Starter		***************************************
		Personagenesessassassassassassassassassassassassas	***************************************
Date of Burial / CM 73-1903	No. Handles		***************************************
Funeral at House or Church.	NoPlate engraved		
Place of Burial Cometery. Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	1	
Grave or Lot No. Section No.	Pl't' H'dl's Corners on Box.		
	Delivering to Cemetery		***************************************
Location of Grave	NoRobe		400000000000000000000000000000000000000
( Draw lines       for Graves in the Plot, and ) designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs	***************************************	*
Show position of monument by □.	Use of Doz. Chairs		
	Flowers		444444444444444444444444444444444444444
	Hearse		***************************************
Inscription	Carriages to	***************************************	***************************
on Plate.	Carriages to	**************************************	***************************************
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Bill Rendered to			
	Advertising	***************************************	**************************************
When Rendered	Cemetery charges		***************************************
MEMORANDUM.	Transportation Expenses, &c.	***************************************	***************************************
	Attendance & Assistants		
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	number of page future reference. Items of Bill, (cross out printe	ed items not f	urnished.
Name of Dec'd Jus. W. Steinen	Door Crape		
Late Residence Overwhie Pas	Draperies Candelabra and Candles.		***************************************
1//	Washing & Laying out Remains, Shaving		***********************
Age Hogyears months days.	Preservation of Remains.	***************************************	***************************************
Cause of Death RR accident	No	***************************************	a
Certifying Physician Clut R Smy			***************************************
Date of Death // / 3 - 1903			
Date of Burial	NoHandles	***************************************	4 74066868*** 027547575757575887887
Funeral at House or Church.			0480-0000000000000000000000000000000000
Place of Burial Mt Betall Cemetery.	NoPlate engraved Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Grave or Lot No. Section No.	Dutside Box, (Fine, Chestnut, Oak, Cedar)		***************************************
	Delivering to Cemetery		1441
Location of Grave	NoRobe		***************************************
(Draw lines       for Graves in the Plot, and )	Prs. Gloves Linen Scarfs.		***************************************
Oraw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.		***************************************	***************************************
<u></u>	Use of Doz. Chairs	***************************************	***************************************
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Number of Funeral\_\_\_\_

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Number for the Current Year 3 in index for	future reference. Items of Bill, (cross out printe	d items not fu	urnished.)
Name of Dec'd Negal H. Muel	Door Crape		
Late Residence Columbia. Pa			***************************************
	Draperies Candelabra and Candles.  Washing & Laying out Remains, Shaving		***************************************
Age HO years months days.	Preservation of Remains		***************************************
Cause of Death Susuptime.			***************************************
Certifying Physician J-M. Zurueplu	No Casket Trimming.	**************************************	**************************************
Date of Death Jan, 44 1903		***************************************	***************************************
Date of Burial	No. Handles	***************************************	***************************************
Funeral at House or At Return, Church.	NoPlate engraved		************************
Place of Burial A Pettus, Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		7
Grave or Lot NoSection No	Pl't' H'dl's Corners on Box.		***************************************
	Delivering to Cemetery		***************************************
Location of Grave	NoRobe		***************************************
(Draw lines       for Graves in the Plot, and )	Prs. Gloves Linen Scarfs		
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Name of Dec'd / 400 & Serfin	Door Crape	Augustin Personal Material Control of Contro	*****************************
Late Residence Columbing. Ou,	Draperies Candelabra and Candles:		***************************************
Age Bloyears months days.	Washing & Laying out Remains, Shaving	***************************************	***************************************
Cause of Death RR accedent	Preservation of Remains	***************************************	
Certifying Physician alex R Draig	No Casket Trimming.	/	***************************************
Date of Death Jan 99-1903		***************************************	***************************************
Date of Burial / 4 cm 36 - 1903			
Funeral at House or At Johns Leith, Church.	No. Handles		
Place of Burial Mutualle — Cemetery.	NoPlate engraved		***************************************
Grave or Lot No. Section No.	Outside Box, (Pine, Chestnut, Oak, Cedar)		
Grave or Lot NoSection No	Pl't'		***************************************
Location of Grave	Delivering to Cemetery		•
	NoRobe		***************************************
Oraw lines     for Graves in the Plot, and designate this one with a double Cross ‡. Show position of monument by □.	PrsGloves Linen Scarfs.		***************************************
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Name of Dec'd Sarah Yaley			
Name of Dec'd William Paro.	Door Crape		******* *****************
	Draperies Candelabra and Candles.		***************************************
Age 95 years 10 months 28 days.	Washing & Laying out Remains, Shaving		***************************************
Cause of Death Mismoties y old ago	Preservation of Remains		***************************************
Certifying Physician /	No Casket Trimming.	*###**********************************	***************************************
Date of Death #16. 3 -1403		Providence 1000000000000000000000000000000000000	***************************************
Date of Burial Bull 6-1903	No. Handles	***************************************	***************************************
Funeral at House or Beilel — Church.	NoPlate engraved		***************************************
Place of Burial Washington Born Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)		***************************************
Place of Burial Washington Bora Cemetery.  Grave or Lot No. Section No.	Pi't' H'di's Corners on Box.		*4 \$4400********************************
	Delivering to Cemetery		***************************************
Location of Grave	NoRobe		
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Name of Dec'd Glyrge G. Slive	Door Crape	
Late Residence Coffeendin. Pa	Draperies Candelabra and Candles.	
Age 69 years months days.	Washing & Laying out Remains, Shaving	
Cause of Death fall from by of Three quarry	Preservation of Remains.	4
Cause of Death July Certifying Physician Brang	No Casket Trimming.	4
Certifying Physician Page		
Date of Death 14 1903		
Date of Burial Sel 16 -1403  Nu & number Bors.	No. Handles	-
Funeral at House or M. E. naswighi Boro. Church.	NoPlate engraved	
Place of Burial ( Washington Bore Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	
Grave or Lot NoSection No	Pl't'H'dl's	
	Delivering to Cemetery	
Location of Grave	NoRobe	
Oraw lines       for Graves in the Plot, and designate this one with a double Cross ‡.	Prs. Gloves Linen Scarfs.	***************************************
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Name of Dec'd Affances / 64	Door Crape		
Late Residence Collinelin Va.	Draperies Candelabra and Candles.	079000111111111111111111111111111111111	
1.	Washing & Laying out Remains, Shaving	5	00
Age 10, years months days.	Preservation of Remains	5	00
Cause of Death Mervous mornalin	No/50 Casket. Rettle Trimming.	60	00
Certifying Physician & Cennelly	No. Jasket. Manual Manu		
Date of Death Job, 18 7 90.3			
Date of Burial u 2/-/903,	No. 6 Handles	***************************************	***************************************
Funeral at House or Hellich Church.	No. / Plate engraved Poncesty		***************************************
Place of Burial Pelew Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	***************************************
Grave or Lot NoSection No	Pl't' H'dl's Corners on Box.		1,000,000
	Delivering to Cemetery	***************************************	
_ocation of Grave	NoRobe		
Draw lines       for Graves in the Plot, and designate this one with a double Cross ‡.	PrsGloves Linen Scarfs		
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Name of Dec'd Retex Bartel	Door Crape		1
Late Residence Columbia Pa	DraperiesCandelabra andCandles.	***************************************	•
Age 65 years 9 months 6 days.	Washing & Laying out Remains, Shaving	.5-	00
	Preservation of Remains.	5	00
Cause of Death Central Atemirage	No. Casket. M. Male 5/g Trimming.	***************************************	
Certifying Physician J. M. Livingslu  Date of Death 19-1903	Oushot. // Landson Lan	35	00
Date of Burial #66, 23-1403	No. Handles	***************************************	***************************************
Funeral at House or Church.	No	***************************************	***************************************
Place of Burial Wer Sorus, Cemetery.	Outside Box, (Pine, Chestnut, Oak, Cedar)	***************************************	
Grave or Lot NoSection No	Pl't' H'dl's Corners on Box.	***************************************	***************************************
	Delivering to Cemetery	#\$1505.00 p###################################	***************************************
Location of Grave	NoRobe	***************************************	
( Draw lines       for Graves in the Plot, and )	PrsGloves Linen Scarfs.	_	
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Name of Dec'd	Door Crape	
Late Residence	Draperies Candelabra and Candles.	
Ageyearsmonthsdays.		
Cause of Death	Preservation of Remains	***************************************
Certifying Physician	No Casket Trimming.	***************************************
Date of Death.		
Date of Burial		
Funeral at House or Church.	No. Handles	
Place of Burial Cemetery.	NoPlate engraved	
Grave or Lot No. Section No.	Outside Box, (Fine, Chesthut, Oak, Cedar)	
Grave or Lot No. Section No.	The state of the s	
Location of Grave	No. Robe	
Draw lines       for Graves in the Plot, and   designate this one with a double Cross ‡.   Show position of monument by □.	Prs Gloves Linen Scarfs	
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