

127711
4800
Account No. 1587

Funeral of Mr. Adams Mrs. Quincy

Date of Funeral 10-31-42 Where From Residence Hour 1:30 p M.

		CASH EXPENDITURES	
Removing Remains	3 00		
Embalming	15 00	Door Dressing	
Laying Out		Use of Palms	
Shaving		Flowers	
Dressing			
Reposing Couch			
Candelabra			
Candles			
Dozen Chairs			
Casket Bier or Pedestals		Porters	Gloves
Casket No.	48 00	Funeral Notices	
Size	15 00		
Hearse			
Metal Inner Casket		Clergymen	
Bronze		Church Charges	Sexton
Copper		Quartette or Soloist	Organist
Zinc		Honorary Pallbearers	
Casket Interior			
Material			
Color			
Name Plate			
Engraved			
Outside Case, Pine, Chestnut, Oak, Cypress, Mahogany			
Metal Inner Box			
Metal Corners			
Handles			
Plate			
Burial Vault		Cemetery Charges	Floral Park 33 00
Style		New Grave	Cement Vault 15 00
Box or Vault Delivered to		Opening Grave	
Cremation Urn		Location of Grave	
Burial Garment		Sec. 17	
Foot Wear		Row 5	
Hosiery			
Slumber Blanket			
Professional Service	10 00	Grave or Lot No.	9-28
Use of Chapel		Use of Lowering Device	
Background Drapery		Forevergreen Grass	Tent
Use of Rugs		Receiving Vault Charges	
4 Cars	34 00	Crematory Charges	
		Auto Hearse	Funeral Cars
		Telegrams	Telephone Charges
		Transportation Expenses	48 00
		Transcript of Death	125 00
			173 00
Total	125 00		

721

Grace Card sent 5/8/45.

Residence <u>1941 Bellefontaine</u>		Ordered by <u>Ms. Jessie Adams</u>	
If Non Resident		Address <u>1941 Bellefontaine</u>	
Give City, Town & State		Charged to	
Hospital or Institution		When rendered	
Give Name of Hospital <u>City Hospital</u>		RECEIVED ON ACCOUNT	
Sex <u>male</u>	Color or Race <u>negro</u>	TO TOTAL FUNERAL CHARGES	
Single <input type="checkbox"/>	Married <input checked="" type="checkbox"/>	<u>173.00</u>	
Widowed <input type="checkbox"/>	Divorced <input type="checkbox"/>		
Wife, Husband of <u>Mrs. Jessie Adams</u>			
Age of Husband, Wife if Alive <u>60 yrs</u>			
Age <u>62</u> Years <u>7</u> Months <u>20</u> Days <u>20</u>			
Usual Occupation <u>Labrer</u>			
Industry or Business <u>San Wert Coal Co.</u>			
Social Security No.			
If U. S. War Veteran Specify War			
City	State		
Country			
Birth Place			
Mother's Maiden Name			
City	State		
Country			
Mother's Birthplace			
Informant <u>Mrs. Jessie Adams</u>			
Relation if Any <u>wife</u>			
Address <u>1941 Bellefontaine</u>			
Date of Death			
Month <u>10</u>	Day <u>29</u>		
Year <u>42</u>			
Physician <u>Dr. Wm. Thompson</u>			
Address <u>City Hospital</u>			
Cause of Death <u>Hypertension</u>			
Clergyman			