

Account No. 1257Funeral of Mr. Anderson Albert L.Date of Funeral 10/20/41 Where From Bethel A.M.E. Hour 2 P M.

		CASH EXPENDITURES	
Removing Remains	5 00		
Embalming Fluid Used	20 00	Door Dressing	
Laying Out Shaving Dressing		Use of Palms	
Reposing Couch Candelabra Candles		Flowers	
Dozen Chairs			
Casket Bier or Pedestals		Porters Gloves	
Casket No. <u>Hearse</u>	199 50 12 00	Funeral Notices	
Metal Inner Casket Bronze Copper Zinc		Clergymen	
Casket Interior Material Color		Church Charges Sexton	
Name Plate Engraved		Quartette or Soloist Organist	
Outside Case, <u>Pine</u> , Chestnut, Oak, Cypress, Mahogany	10 00	Honorary Pallbearers	
Metal Inner Box			
Metal Corners Handles Plate		Cemetery Charges <u>Floral Pack</u>	48 00
Burial Vault Style		New Grave Opening Grave	
Box or Vault Delivered to		Location of Grave	
Cremation Urn		<u>Sec. K7</u>	
Burial Garment		<u>Row 9</u>	
Foot Wear Hosiery		Grave or Lot No. <u>9-21</u>	
Slumber Blanket		Use of Lowering Device	
Professional Service		Forevergreen Grass Tent	
Use of Chapel		Receiving Vault Charges	
Background Drapery		Crematory Charges	
Use of Rugs		Auto Hearse Funeral Cars	
<u>2 Cars</u>	16 00	Telegrams Telephone Charges	48 00
<u>Total amt. mtdae. + services</u>	<u>252 50</u>	Transportation Expenses	252 50
		Transcript of Death	<u>Total amt. Invoice</u> 300 50

143

Residence 549 N. Senate Ave. #27  
If Non Resident  
Give City, Town & State \_\_\_\_\_ Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_  
Hospital or Institution \_\_\_\_\_  
Give Name of Hospital \_\_\_\_\_  
Sex M Color or Race Negro Single ☐ Married ☒  
Widowed ☐ Divorced ☐  
Wife, Husband of Mrs. Ada Anderson  
Age of Husband, Wife if Alive 35 yrs.  
Age 38 Years \_\_\_\_\_ Months 1 Days 9  
Usual Occupation Social Worker  
Industry or Business Flanner House  
Social Security No. \_\_\_\_\_  
If U. S. War Veteran Specify War \_\_\_\_\_  
Birth Place Mt. Vernon, Ind. City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_  
Mother's Maiden Name Ada Foster City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_  
Mother's Birthplace \_\_\_\_\_  
Informant Mrs. Ada Anderson Relation if Any Wife  
Address 549 N. Senate Ave. #27 Month \_\_\_\_\_ Day \_\_\_\_\_ Year 1941  
Date of Death \_\_\_\_\_  
Physician Dr. L. R. Young Sr.  
Address \_\_\_\_\_  
Cause of Death Lobar Pneumonia  
Clergyman Rev. Alexander

Ordered by Mrs. Ada Anderson  
Address 549 N. Senate Ave. #27  
Charged to \_\_\_\_\_  
When rendered \_\_\_\_\_

RECEIVED ON ACCOUNT

TO TOTAL FUNERAL CHARGES

1941 10/30 Cr. Cash 300.50

300.50

300.50

PAID