

**Funeral of** Mrs. Janne Andrews

Date of Funeral September 2, 1944 Hour 1:30 PM From New Liberty Baptist Ch.

Removal From			CASH EXPENDITURES		
Embalming		5.00	Door Dressing		
Professional Services	Hearse	25.00	Palms		
Use of Chapel	1-7 passenger Car	15.00	Flowers		
Use of _____ Doz. Chairs	Rug	8.50			
Drapery	Candelabra				
Candles	Prayer Rail		Pall Bearers		
Crucifix	Bier		Funeral Notices		
Casket No.	Mfr.	250.00			
Style					
Finish					
Interior No.	Color		Clergyman	Rev. C. H. Bell	
			Sexton		
Outside Case			Organist		Soloist
Mountings			Church Charges		
Vault Style			New Grave	New Crown Opening	30.00
Delivery To			Grass & Device	Tent	
Burial Garment		15.00	Vault Charges		15.00
Slippers	Hosiery		Crematory Charges		
Slumber Blanket			Gratuities		
Gloves			Telephone		Telegrams
Cremation Urn			Transportation		
Acknowledgement Cards			Casket Coach		
			Limousines		Flower Cars
			Transcript of Death		
Total of Services & Merchandise		318.50	Total Cash Expenditures		45.00
			Total Services & Merchandise		318.50
			Total Amount of Invoice		363.50

Deceased Mrs. Jennie Andrews

Date of Death August 30 1944

Place of Death City Hospital

Last Place of Residence 819 Lock St # 528

Birth Place Murfreesboro Tennessee

Date of Birth March 1887

Age 57 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours \_\_\_\_\_

Sex Female Color or Race Colored

Single \_\_\_\_\_ Married ✓

Widowed \_\_\_\_\_ Divorced \_\_\_\_\_

Length of Residence U. S. Life

State 19 years City 19 years

Usual Occupation Housewife

Industry or Business \_\_\_\_\_

Husband's Name Godfrey Andrews Age 59

Wife's Maiden Name 00 Age 0

Father's Name Louis Leath

Birth Place Tennessee

Mother's Maiden Name Unknown

Birth Place \_\_\_\_\_

Social Security No.

If Veteran, what War Due to - Diabetes mellitus

Cause of Death Coronary occlusion

Physician J Address City Hospital

Informant Rev. Godfrey Andrews

Address 819 Loc 10 St #528 no such no.

Date of Interment 9-2-44

Cemetery New Crown

Location See 16.

Row 9.

~~Lot~~ Grave No. 14.062

**Ordered By.**

**Address**

Charged To Rev. Godfrey Andrews

Address 918 Lock St #528

Invoice Date no such number (r)

*Estate Atty.*

*Address*

### CUSTOMER'S PAYMENT RECORD

363.50

[illegible]