

Twins

Date of ~~Funeral~~ ^{Burial}

Hour

From

Removal From _____				CASH EXPENDITURES			
Embalming _____				Door Dressing _____			
Professional Services _____		10 00		Palms _____			
Use of Chapel _____				Flowers _____			
Use of _____ Doz. Chairs _____ Rug _____							
Drapery _____ Candelabra _____							
Candles _____ Prayer Rail _____				_____ Pall Bearers _____			
Crucifix _____ Bier _____				Funeral Notices _____			
Casket No. _____ Mfr. _____		10 00					
Style _____							
Finish _____							
Interior No. _____ Color _____				Clergyman _____			
				Sexton _____			
Outside Case _____				Organist _____ Soloist _____			
Mountings _____				Church Charges _____			
Vault Style _____				New Grave <u>New Crown</u> Opening _____		15 00	
Delivery To _____				Grass & Device _____ Tent _____			
Burial Garment _____				Vault Charges _____			
Slippers _____ Hosiery _____				Crematory Charges _____			
Slumber Blanket _____				Gratuities _____			
Gloves _____				Telephone _____ Telegrams _____			
Cremation Urn _____				Transportation _____			
Acknowledgement Cards _____				Casket Coach _____			
				_____ Limousines _____ Flower Cars _____			
				Transcript of Death _____			
				Total Cash Expenditures		15 00	
				Total Services & Merchandise		20 00	
Total of Services & Merchandise		20 00		Total Amount of Invoice		35 00	

