

Funeral of Mrs Rosa L. Beauford

**Date of Funeral** 5-14-43 **Hour** 1 P.m. **From**

		CASH EXPENDITURES		
Removal From _____	5 00			
Embalming _____	25 00	Door Dressing _____		
Professional Services <i>Hearse</i>	15 00	Palms _____		
Use of Chapel <i>Car</i>	8 50	Flowers _____		
Use of _____ Doz. Chairs _____ Rug _____				
Drapery _____ Candelabra _____				
Candles _____ Prayer Rail _____		Pall Bearers _____		
Crucifix _____ Bier _____		Funeral Notices _____		
Casket No. _____ Mfr. _____	275 00			
Style _____		<i>Insurance Certificates</i>	1	00
Finish _____				
Interior No. _____ Color _____		Clergyman _____		
		Sexton _____		
Outside Case _____		Organist _____ Soloist _____		
Mountings _____		Church Charges _____		
Vault Style _____		New Grave <i>Crown Hill</i> Opening _____	63	00
Delivery To _____		Grass & Device _____ Tent _____		
Burial Garment _____		Vault Charges _____		
Slippers _____ Hosiery _____		Crematory Charges _____		
Slumber Blanket _____		Gratuities _____		
Gloves _____				
Cremation Urn _____		Telephone _____ Telegrams _____		
		Transportation _____		
Acknowledgement Cards _____		Casket Coach _____		
		_____ Limousines _____ Flower Cars _____		
		Transcript of Death _____		
		Total Cash Expenditures	64	00
		Total Services & Merchandise	328	00
Total of Services & Merchandise	392 50	Total Amount of Invoice	392	50



Deceased Mrs. Rosa S. Beauford  
 Date of Death 5-10-43  
 Place of Death \_\_\_\_\_  
 Last Place of Residence 2143 N. Capital  
 Birth Place Mississippi  
 Date of Birth 2-13-1898  
 Age 45 Years 2 Months 7 Days \_\_\_\_\_ Hours  
 Sex Female Color or Race \_\_\_\_\_  
 Single \_\_\_\_\_ Married yes  
 Widowed \_\_\_\_\_ Divorced \_\_\_\_\_  
 Length of Residence U. S. Life  
 State 10 years City 10 years in City  
 Usual Occupation Housewife  
 Industry or Business \_\_\_\_\_  
 Husband's Name Bennie Beauford Age 46  
 Wife's Maiden Name \_\_\_\_\_ Age \_\_\_\_\_  
 Father's Name Anthony Waten Snyres  
 Birth Place Mississippi  
 Mother's Maiden Name Ida Carpenter (Snyres)  
 Birth Place \_\_\_\_\_  
 Social Security No. \_\_\_\_\_  
 If Veteran, what War \_\_\_\_\_  
 Cause of Death J. W. Friede  
 Physician J. W. Friede Address \_\_\_\_\_  
 Informant Mrs. Gertrude Snyres  
 Address 2118 Swiners Road  
 Date of Interment 5-14-43  
 Cemetery Crown Hill  
 Location 99  
 Lot or Grave No. 1022

Ordered By Mr. Bennie Beauford  
 Address 221 W. 2nd St.  
 Charged To Mr. Bennie Beauford  
 Address 221 W. 2nd St.  
 Invoice Date \_\_\_\_\_  
 Estate Atty. \_\_\_\_\_  
 Address \_\_\_\_\_

# CUSTOMER'S PAYMENT RECORD

392.50

DATE		AMOUNT PAID	BALANCE DUE
6-15-43	Spate Buial	75 00	317 50
5-14-43	Insurance	220.50	97 00
" "	Cash	97 50	
	Paid in full		
	Mrs. Gertrude Snyres		
	owed for 2 Cops		
	\$ 13.56		
	This was in part.		
	Paid 12-28-43		