

Account No. 4899

Funeral of.

Date of Funeral

Hour

2 P.M.

From

Castroville Chapel

Removal From			CASH EXPENDITURES		
Embalming			Door Dressing		
Professional Services	144	50	Palms		
Use of Chapel			Flowers		
Use of _____ Doz. Chairs _____ Rug _____					
Drapery _____ Candelabra _____			Pall Bearers		
Candles _____ Prayer Rail _____			Funeral Notices		
Crucifix _____ Bier _____					
<i>Bof</i>	12	00			
Casket No. <i>04200</i> Mfr. <i>Helm</i>	105	00			
Style _____			Motocycle Escort	6	50
Finish _____			Lady Attendant	3	00
Interior No. _____ Color _____			Clergyman <i>Rev. P.H. Jacobs</i>	5	00
			Sexton		
Outside Case _____			Organist <i>3-00</i> Soloist <i>3-00</i>	6	00
Mountings _____			Church Charges	60	00
Vault Style _____			New Grave _____ Opening _____		
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	80	50
			Total Services & Merchandise	261	50
Total of Services & Merchandise	261	50	Total Amount of Invoice	342	00

Refunded check 15050
Mrs. Susie Bowens 5.00

Deceased <u>Mr. Albert Bowens</u>		Ordered By _____	
Date of Death <u>February 28, 1954 - 7:06 pm</u>		Address _____	
Place of Death <u>Residence</u>		Charged To <u>Mrs. Susie Bowens</u>	
Last Place of Residence <u>2413 Wheeler Street</u> <u>In 8700</u>		Address <u>2413 Wheeler Street 18</u>	
Birth Place <u>Georgia</u>		Invoice Date <u>In 8700 - next door</u>	
Date of Birth <u>December 5, 1884</u>		Estate Atty. <u>2018 Highland Pl.</u>	
Age <u>69</u> Years <u>2</u> Months <u>23</u> Days _____ Hours _____		Address <u>Ta 2004</u>	
Sex <u>Male</u> Color or Race <u>Negro</u>			
Single _____ Married <u>Married</u>			
Widowed _____ Divorced _____			
Length of Residence U. S. <u>Life</u>		CUSTOMER'S PAYMENT RECORD <u>342.00</u>	
State _____ City <u>10 years</u>			
Usual Occupation <u>Labor</u>		DATE	
Industry or Business <u>Silly Paint Products Co.</u>		AMOUNT PAID	
Husband's Name _____ Age _____		BALANCE DUE	
Wife's Maiden Name <u>Susie Bowens</u> Age _____		3-3 54 Cash 147 00 195 00	
Father's Name <u>Peter Bowens</u>		3-10 54 Bankers Health Ins. 195 00	
Birth Place _____		PAID	
Mother's Maiden Name <u>Unknown</u>			
Birth Place _____			
Social Security No. _____			
If Veteran, what War <u>No</u>			
Cause of Death <u>Progressive C.V.D. - Essential Hypertension</u>			
Physician _____ Address _____			
Informant <u>Mrs. Susie Bowens</u>			
Address <u>2413 Wheeler St</u>			
Date of Interment <u>March 3, 1954</u>			
Cemetery <u>New Crown</u>			
Location <u>Sec 19 Row 2</u>			
Lot or Grave No. <u>20.716</u>			