

Account No. 1274

Funeral of Mr. Branner Jno. W.

Date of Funeral 11-13-47 Hour 2 Pm From W. Side Chapel

		CASH EXPENDITURES	
Removal From _____	<u>5 00</u>	Door Dressing _____	
Embalming _____	<u>20 00</u>	Palms _____	
Professional Services _____		Flowers _____	
Use of Chapel _____			
Use of _____ Doz. Chairs _____ Rug _____		Pall Bearers _____	
Drapery _____ Candelabra _____		Funeral Notices _____	
Candles _____ Prayer Rail _____			
Crucifix _____ Bier _____			
Casket No. _____ Mfr. _____	<u>House 12 00</u>		
Style _____	<u>132 00</u>		
Finish _____			
Interior No. _____ Color _____		Clergyman _____	
		Sexton _____	
Outside Case _____	<u>10 00</u>	Organist _____ Soloist _____	
Mountings _____		Church Charges _____	
Vault Style _____		New Grave <u>Wood Handling</u> Opening _____	<u>18 00</u>
Delivery To _____		Grass & Device _____ Tent _____	
Burial Garment _____		Vault Charges _____	
Slippers _____ Hosiery _____		Crematory Charges _____	
Slumber Blanket _____		Gratuities _____	
Gloves _____		Telephone _____ Telegrams <u>.66 pd</u>	
Cremation Urn _____		Transportation _____	
Acknowledgement Cards _____	<u>2 Cars 16 00</u>	Casket Coach _____	
		Limousines _____ Flower Cars _____	
		Transcript of Death _____	
Total of Services & Merchandise	<u>195 00</u>	Total Cash Expenditures	<u>18 66</u>
		Total Services & Merchandise	<u>195 00</u>
		Total Amount of Invoice	<u>213 66</u>

200
Deceased Mr. Jay. W. Branner
Date of Death 11-10-'41 6:00 am
Place of Death Residence
Last Place of Residence 1061 N. Belmont

Birth Place Genn.
Date of Birth _____
Age 80 Years 1861 Months 8 Days 5 Hours
Sex male Color or Race negro
Single _____ Married _____

Widowed ☒ Divorced _____
Length of Residence U. S. Life
State _____ City 31 yrs

Usual Occupation Labourer
Industry or Business _____

Husband's Name _____ Age _____
Wife's Maiden Name _____ Age _____

Father's Name Mose Branner
Birth Place Genn.

Mother's Maiden Name Charlto ?
Birth Place Genn.

Social Security No. _____

If Veteran, what War _____

Cause of Death Coronary occlusion, hyper-
tensive heart disease
Physician Dr. H. B. Anderson Address City Hospital

Informant Mrs. Kate Dunson
Address 1017 S. Kenwood

Date of Interment 11-13-'41

Cemetery Wood Haven

Location Sec. E

Lot or Grave No. 476-8

Ordered By Mrs. Kate Dunson
Address 1017 S. Kenwood Ave
Charged To Marion Co. Welfare Bd
Address _____

Invoice Date _____

Estate Atty. _____

Address _____

CUSTOMER'S PAYMENT RECORD 2/3 66

DATE		AMOUNT PAID	BALANCE DUE
1941	cr.		
Nov 10	On Telegram	66	213 00
" 12	Mrs. T. Dunson	10 00	203 00
" 17	" " "	3 00	200 00
1942	cr.		
Jan. 7	Marion Co.	200 00	0

PAID