

Account No. 1639Funeral of Ira Lee BuchananDate of Funeral 1-11-43 Where From W.S. Chapel Hour _____ M.

		CASH EXPENDITURES	
Removing Remains	5 00		
Embalming _____ Fluid Used _____	25 00	Door Dressing _____	
Laying Out _____ Shaving _____ Dressing _____		Use of Palms _____	
Reposing Couch _____ Candelabra _____ Candles _____		Flowers _____	3 50
Dozen Chairs _____		<i>Dr. Mrs. Rogers (7)</i>	2 00
Casket Bier or Pedestals _____		Porters _____ Gloves _____	
Casket No. _____ Size _____	250 00	Funeral Notices _____	
Metal Inner Casket _____ Bronze _____ Copper _____ Zinc _____		Clergymen <i>Rev. E. H. Bull</i>	5 00
Casket Interior _____ Material _____ Color _____		Church Charges _____ Sexton _____	
Name Plate _____ Engraved _____		Quartette or Soloist _____ Organist _____	
Outside Case, Pine, Chestnut, Oak, Cypress, Mahogany _____		Honorary Pallbearers _____	
Metal Inner Box _____			
Metal Corners _____ Handles _____ Plate _____			
Burial Vault _____ Style _____		Cemetery Charges <i>Rev. Aaron</i>	30 00
Box or Vault Delivered to _____		New Grave _____ Opening Grave _____	
Cremation Urn _____		Location of Grave <div style="border: 1px solid black; width: 100px; height: 100px; display: inline-block; vertical-align: middle;"></div>	
Burial Garment _____		<i>See 16</i>	
Foot Wear _____ Hosiery _____		<i>Rule 4</i>	
Slumber Blanket _____		Grave or Lot No. <i>13, 110</i>	
Professional Service _____		Use of Lowering Device _____	
Use of Chapel _____		Forevergreen Grass _____ Tent _____	
Background Drapery _____		Receiving Vault Charges _____	15 00
Use of Rugs <i>Kease</i>	15 00	Crematory Charges _____	
<i>1 Car</i>	8 50	Auto Hearse _____ Funeral Cars _____	56 50
	303 50	Telegrams _____ Telephone Charges _____	303 50
		Transportation Expenses _____	
		Transcript of Death _____	359 00

5
Grave marker ordered 2/19/43 \$45.00

Grave marker paid

Hotel Linn. Des. Equitable Life

Residence <u>497 W. Main St.</u>	Ordered by <u>Mrs. Lurinda Buchanan</u>
If Non Resident	Address <u>Forest City, Ark</u>
Give City, Town & State <u>12</u> Years <u>12</u> Months <u>3</u> Days	Charged to <u>Mrs. Willard Rooks</u>
Hospital or Institution <u>City Hosp</u>	When rendered
Give Name of Hospital	<u>Mrs. Lurinda Buchanan</u>
Color or <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/>	<u>Mrs. Lurinda Buchanan</u>
Sex <u>Female</u> Race <u>White</u> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/>	<u>Mrs. Lurinda Buchanan</u>
Wife, Husband of	<u>Mrs. Lurinda Buchanan</u>
Age of Husband, Wife if Alive	<u>Mrs. Lurinda Buchanan</u>
Age <u>39</u> Years <u>9</u> Months <u>3</u> Days	<u>Mrs. Lurinda Buchanan</u>
Usual Occupation <u>Fry Cook</u>	<u>Mrs. Lurinda Buchanan</u>
Industry or Business <u>Hotel Linn.</u>	<u>Mrs. Lurinda Buchanan</u>
Social Security No. <u>no</u>	<u>Mrs. Lurinda Buchanan</u>
If U. S. War Veteran Specify War	<u>Mrs. Lurinda Buchanan</u>
Birth Place <u>OKlaoma, Miss.</u> City <u>OKlaoma</u> State <u>Miss.</u> Country <u>U.S.</u>	<u>Mrs. Lurinda Buchanan</u>
Mother's Maiden Name <u>Lurinda Tubbs</u> City <u>OKlaoma</u> State <u>Miss.</u> Country <u>U.S.</u>	<u>Mrs. Lurinda Buchanan</u>
Mother's Birthplace <u>OKlaoma, Miss.</u> City <u>OKlaoma</u> State <u>Miss.</u> Country <u>U.S.</u>	<u>Mrs. Lurinda Buchanan</u>
Informant <u>Lurinda Tubbs</u> Relation <u>Mother</u>	<u>Mrs. Lurinda Buchanan</u>
Address <u>Forest City, Ark</u> Month <u>12</u> Day <u>12</u> Year <u>43</u>	<u>Mrs. Lurinda Buchanan</u>
Date of Death	<u>Mrs. Lurinda Buchanan</u>
Physician <u>James L. Pierce</u>	<u>Mrs. Lurinda Buchanan</u>
Address <u>City Hosp</u>	<u>Mrs. Lurinda Buchanan</u>
Cause of Death <u>T.B. & Lung</u>	<u>Mrs. Lurinda Buchanan</u>
Clergyman <u>Rev. C. H. Bell</u>	<u>Mrs. Lurinda Buchanan</u>

TO TOTAL FUNERAL CHARGES

359.00

1/28/43

Equitable Linn. 359.00

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Paid
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