

Account No. 1146Funeral of Mr. Burnley Walter,Date of Funeral 4/21/41 Where From W. Side Chapel Hour 2 P. M.

		CASH EXPENDITURES	
Removing Remains	3 00		
Embalming Fluid Used	15 00	Door Dressing	
Laying Out Shaving Dressing		Use of Palms	
Reposing Couch Candelabra Candles		Flowers <u>Family</u>	14 00
Dozen Chairs			
Casket Bier or Pedestals		Porters Gloves	
Casket No. <u>Hause</u> Size	57 00	Funeral Notices	
	12 00		
Metal Inner Casket Bronze Copper Zinc		Clergymen	
Casket Interior Material Color		Church Charges Sexton	
Name Plate Engraved		Quartette or Soloist Organist	
Outside Case, Pine, Chestnut, Oak, Cypress, Mahogany	8 00	Honorary Pallbearers	
Metal Inner Box			
Metal Corners Handles Plate			
Burial Vault Style		Cemetery Charges <u>New Crown</u>	20 00
Box or Vault Delivered to		New Grave <u>/</u> Opening Grave	
Cremation Urn		Location of Grave	
Burial Garment			
Foot Wear Hosiery		<u>Sec. 15</u>	
Slumber Blanket		<u>Row. 17</u>	
Professional Service		Grave or Lot No. <u>12.129</u>	
Use of Chapel		Use of Lowering Device	
Background Drapery		Forevergreen Grass Tent	
Use of Rugs <u>1 car</u>	5 00	Receiving Vault Charges	
		Crematory Charges	
		Auto Hearse Funeral Cars	
		Telegrams Telephone Charges	34 00
<u>Total amt. mchse. &amp; services</u>	<u>100 00</u>	Transportation Expenses	100 00
		Transcript of Death <u>Total amt. Invoice</u>	<u>134 00</u>

71

Residence 220 1/2 W. 21st St #3  
 If Non Resident  
 Give City, Town & State \_\_\_\_\_ Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_  
 Hospital or Institution \_\_\_\_\_  
 Give Name of Hospital City Hospital  
 Sex M Color or Race negro Single ☒ Married ☐  
 Widowed ☐ Divorced ☐  
 Wife, Husband of \_\_\_\_\_  
 Age of Husband, Wife if Alive \_\_\_\_\_  
 Age 19 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_  
 Usual Occupation N.Y. A  
 Industry or Business \_\_\_\_\_  
 Social Security No. \_\_\_\_\_  
 If U. S. War Veteran Specify War \_\_\_\_\_  
 Birth Place Vincennes, Ind. City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_  
 Mother's Maiden Name Birdie M. Anderson  
 Mother's Birthplace Clarksville, Tenn. City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_  
 Informant Birdie Mae Bunnley Relation if Any mother  
 Address 220 1/2 W. 21st St. #3  
 Date of Death Month 4 Day 16 Year 1908  
 Physician Dr. Phonyas  
 Address City Hospital  
 Cause of Death \_\_\_\_\_  
 Clergyman Rev. S. S. Reed

*not at address*

Ordered by Mrs. Birdie Mae Bunnley  
 Address 220 1/2 W. 21st. #3  
 Charged to \_\_\_\_\_  
 When rendered \_\_\_\_\_

RECEIVED ON ACCOUNT

TO TOTAL FUNERAL CHARGES

134 00

1941				
April 25		C. G. Galt, Inc.	100.00	
May 14		Mrs. Bunnley	34.00	
				<u>134 00</u>

**PAID**  
 by City Hospital