Account No. 5537

Funeral of Mr. Percy Cole

Date of Funeral September 8, 1956 Hour 1 P.M. From Westside Chapel

Removal From		
Embalming		
Professional Services	193	25
Use of Chapel		
Use of R Doz. Chairs Rug		
Drapery Candelabra		
Candles Prayer Rail		
Crucifix Bier		
Casket No. 86850 Mfr.	171	25
Style		
Finish		
Interior No. Color		
Outside Case		
Mountings		
Vault Style		
Delivery To		
Burial Garment		
Slippers Hosiery		
Slumber Blanket		
Gloves		
Cremation Urn		
Acknowledgement Cards		
Total of Services & Merchandise	364	50

CASH EXPENDITURES		
Door Dressing		
Palms		
Flowers		
Pall Bearers		
Funeral Notices		
Lady attendant	3	00
Motorcycle Escort	6	50
Clergyman	5	00
Sexton		
Organist 3.00 Soloist 3.00	6	00
Church Charges		
New Grave Floral Park Opening	100	00
Grass & Device Tent		
Vault Charges		
Crematory Charges		
Gratuities		
Telephone Telegrams		
Transportation		
Casket Coach		
Limousines Flower Cars		
Transcript of Death 3	3	00
Total Cash Expenditures	123	50
Total Services & Merchandise	364	50
Total Amount of Invoice	488	00

Deceased Mr. Percy Cole

Date of Death September 5, 1956 1 PM

Place of Death General Hospital

Last Place of Residence 1029 N. Miley

Birth Place Portland, Tennessee

Date of Birth March 2 1885

Age 71 Years 6 Months 3 Days ____ Hours ____

Sex Male Color or Race Negro

Single ____ Married ✓

Widowed ____ Divorced ____

Length of Residence U. S. Life

State ____ City 40 years

Usual Occupation Porter

Industry or Business Hooks Drug Store

Husband's Name ____ Age ____

Wife's Maiden Name Eva Age 69

Father's Name Joe Cole

Birth Place ____

Mother's Maiden Name Delphia Britton

Birth Place ____

Social Security No. 315-07-0072

If Veteran, what War No

Cause of Death Gastrointi Hemorrhage

Physician A. J. May Address General Hospital

Informant Mrs. Eva Cole

Address 1029 N. Miley

Date of Interment September 8, 1956

Cemetery Floral Park

Location Sec. K 8

Row 6 Lot 4

~~Lot or~~ Grave No. 34

Ordered By ____

Address ____

Charged To Mrs. Eva Cole

Address 1029 North Miley (32)

Invoice Date ____ Me 1-8855

Estate Atty. ____

Address ____

Metro, Empire Rep Ins

CUSTOMER'S PAYMENT RECORD

488.00

DATE			AMOUNT PAID		BALANCE DUE	
9-24-	56	Rep Ins check	155	75	332	25
		Empire " "	194	07	138	18
		Metro " " 210.60	138	18	—	
		PAID				
		Refunded to Mrs. Cole		72	42	