

Account No. 200 1832

Funeral of *Mrs. Mollie Cooper*

Date of Funeral August 4, 1943 Hour 2 P.m. From Metropolitan Bpts Ch.

Removal From			CASH EXPENDITURES		
Embalming		5 00	Door Dressing		
Professional Services	2-7 passenger Cars	17 00	Palms		
Use of Chapel	1-5 " Car	5 00	Flowers		
Use of _____ Doz. Chairs _____ Rug _____					
Drapery _____ Candelabra _____ Horse _____	15 00		Pall Bearers		
Candles _____ Prayer Rail _____			Funeral Notices		
Crucifix _____ Bier _____					
Casket No. _____ Mfr. _____	166 50				
Style _____					
Finish _____					
Interior No. _____ Color _____			Clergyman _____		
			Sexton _____		
Outside Case _____			Organist _____ Soloist _____		
Mountings _____			Church Charges _____		
Vault Style _____			New Grave New Crown Opening	45 00	
Delivery To _____			Grass & Device _____ Tent _____		
Burial Garment _____	19 00		Vault Charges _____		
Slippers _____ Hosiery _____			Crematory Charges _____		
Slumber Blanket _____			Gratuities _____		
Gloves _____			Telephone _____ Telegrams _____		
Cremation Urn _____			Transportation _____		
Acknowledgement Cards _____			Casket Coach _____		
			Limousines _____ Flower Cars _____		
			Transcript of Death _____		
			Total Cash Expenditures	45 00	
			Total Services & Merchandise	252 50	
Total of Services & Merchandise	252 50		Total Amount of Invoice	297 50	

Deceased Mrs. Mollie Cooper
Date of Death July 30, 1943
Place of Death City Hospital
Last Place of Residence 1710 Bend Pl. (Rear)
Birth Place Christain County Ky.
Date of Birth _____
Age _____ Years _____ Months _____ Days _____ Hours _____
Sex Female Color or Race negro
Single _____ Married _____
Widowed ✓ Divorced _____
Length of Residence U. S. Life
State 34 year City 34 years
Usual Occupation Domestic
Industry or Business _____
Husband's Name _____ Age _____
Wife's Maiden Name _____ Age _____
Father's Name Beauford Woolridge
Birth Place Kentucky
Mother's Maiden Name unknown
Birth Place _____
Social Security No. _____
If Veteran, what War _____
Cause of Death _____
Physician City Hospital Address _____
Informant Mrs. Hattie M. Cooper
Address 1710 Bend. Place (Rear)
Date of Interment 8-4-43
Cemetery New Crown
Location Section 16.
Row 4.
Lot or Grave No. 13.418

Ordered By Miss Bobby Cooper
Address 1532 Dyrain Place
Charged To Mrs. Jewel Cooper
Address 621 Edgemont St.
Invoice Date _____
Estate Atty. _____
Address _____

CUSTOMER'S PAYMENT RECORD 297.50

DATE		AMOUNT PAID	BALANCE DUE
8-2-43	Cash & Check	250.00	47.50
9-14-43	Bilbally Ins Check	87.50	
9-15-43	Amount paid	47.50	

PAID