

Account No. 1624Funeral of Mrs. Maggie CorbherdDate of Funeral 12-21-42 Where From W. S. Chapel Hour 1 P. M.

		CASH EXPENDITURES	
Removing Remains	5 00		
Embalming	25 00	Door Dressing	
Laying Out		Use of Palms	
Shaving		Flowers	
Dressing			
Reposing Couch		Porters	
Candelabra		Gloves	
Candles		Funeral Notices	
Dozen Chairs	15 00		
Casket Bier or Pedestals	8 50	Clergymen	
1 Car	12 50	Church Charges	
Casket No.		Sexton	
Size		Quartette or Soloist	
		Organist	
Metal Inner Casket		Honorary Pallbearers	
Bronze		1 One Paper	1 00
Copper		Cement Box	15 00
Zinc		Cemetery Charges	30 00
Casket Interior		New Grave	46 00
Material		Opening Grave	
Color		Location of Grave	
Name Plate		Sec. 16	
Engraved		Row 2	
Outside Case, Pine, Chestnut, Oak, Cypress, Mahogany			
Metal Inner Box			
Metal Corners			
Handles			
Plate			
Burial Vault			
Style			
Box or Vault Delivered to			
Cremation Urn			
Burial Garment	19 00		
Foot Wear			
Hosiery			
Slumber Blanket			
Professional Service	40 00	Grave or Lot No.	13.083
Use of Chapel	37 50	Use of Lowering Device	
Background Drapery		Forevergreen Grass	
Use of Rugs	194 00	Tent	
		Receiving Vault Charges	
		Crematory Charges	
		Auto Hearse	
		Funeral Cars	
		Telegrams	
		Telephone Charges	
		Transportation Expenses	194 00
		Transcript of Death	240 00

258

Impure check  
\$169.67

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Residence <u>1008 1/2 N. West St</u>		Ordered by <u>Hardesten Buckner</u>	
If Non Resident		Address <u>215 W 25 St</u>	
Give City, Town & State		Charged to	
Hospital or Institution		When rendered	
Give Name of Hospital <u>Residence</u>		RECEIVED ON ACCOUNT	
Sex <u>Male</u> Color or Race <u>White</u> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input checked="" type="checkbox"/>			
Wife, Husband of <u>Geo. Buckner</u>		TO TOTAL FUNERAL CHARGES <u>240.00</u>	
Age of Husband, Wife if Alive			
Age <u>44</u> Years <u>1894</u> Months <u>Feb</u> Days <u>10</u>		<u>12/23/42</u> Cash in notes & check <u>200.00</u> <u>12/18/42</u> Cash in check <u>40.00</u>	
Usual Occupation <u>Domestic</u>		<p>PAID</p>	
Industry or Business			
Social Security No.			
If U. S. War Veteran Specify War			
Birth Place <u>Pa</u> City <u>Pa</u> State <u>Pa</u> Country <u>Pa</u>			
Mother's Maiden Name <u>Armanda Cowan</u> City <u>Pa</u> State <u>Pa</u> Country <u>Pa</u>			
Mother's Birthplace <u>Pa</u>			
Informant <u>Wm. Cowherd</u> } Relation if Any			
Address <u>515 W 26 St</u>			
Date of Death <u>Dec</u> <u>17</u> <u>1942</u>			
Physician <u>Francis Hummons</u>			
Address			
Cause of Death			
Clergyman			