

Account No. 1199Funeral of Infant Durham, Claude HenryDate of Funeral 7/29/41 Where From W. Side Chapel Hour 10 a. M.
no funeral

		CASH EXPENDITURES	
Removing Remains <u>& Services</u>	<u>10 00</u>		
Embalming _____ Fluid Used _____		Door Dressing _____	
Laying Out _____ Shaving _____ Dressing _____		Use of Palms _____	
Reposing Couch _____ Candelabra _____ Candles _____		Flowers _____	
_____ Dozen Chairs _____			
Casket Bier or Pedestals _____		Porters _____ Gloves _____	
Casket No. <u>✓</u> _____ Size _____		Funeral Notices _____	
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 _____		Honorary Pallbearers _____	
Metal Inner Box _____			
Metal Corners _____ Handles _____ Plate _____			
Burial Vault _____ Style _____		Cemetery Charges <u>New Crown</u>	<u>10 00</u>
Box or Vault Delivered to _____		New Grave <u>✓</u> _____ Opening Grave _____	
Cremation Urn _____		Location of Grave <div style="border: 1px solid black; width: 100px; height: 80px; display: flex; align-items: center; justify-content: center;"> <u>Sec. 12</u> <u>Row 11</u> </div>	
Burial Garment _____		Grave or Lot No. <u>12.283</u>	
Foot Wear _____ Hosiery _____		Use of Lowering Device _____	
Slumber Blanket _____		Forevergreen Grass _____ Tent _____	
Professional Service _____		Receiving Vault Charges _____	
Use of Chapel _____		Crematory Charges _____	
Background Drapery _____		Auto Hearse _____ Funeral Cars _____	
Use of Rugs _____		Telegrams _____ Telephone Charges <u>10 00</u>	
<u>1 car ✓</u>		Transportation Expenses <u>10 00</u>	
<u>Total amt. incl. & Services</u>	<u>10 00</u>	Transcript of Death <u>Total amt. Invoice</u>	<u>20 00</u>

134

Residence 29 S. Catherwood St.
If Non Resident
Give City, Town & State _____
Years _____ Months _____ Days _____
Hospital or Institution _____
Give Name of Hospital _____
Sex M Color or Race negro Single ☐ Married ☐
Widowed ☐ Divorced ☐
Wife, Husband of _____
Age of Husband, Wife if Alive _____
Age _____ Years _____ Months _____ Days _____
Usual Occupation _____
Industry or Business _____
Social Security No. _____
If U. S. War Veteran Specify War _____
City _____ State _____ Country _____
Birth Place _____
Mother's Maiden Name Marie Bass
City _____ State Pa. Country _____
Mother's Birthplace _____
Informant Mr. Velma Durham Relation if Any Father
Address 29 S. Catherwood St.
Month _____ Day _____ Year 41
Date of Death 7 J.P. 27
Physician _____
Address City Hospital
Cause of Death Premature
Clergyman no funeral

Ordered by Mr. Velma Durham
Address 29 S. Catherwood St.
Charged to moved. Lys no address
When rendered _____

RECEIVED ON ACCOUNT

TO TOTAL FUNERAL CHARGES

20 00

1941
July 28 Cr. Mrs. Durham 20 00

PAID