

**Funeral of** Mr Charles Ellis

Date of Funeral April 1, 1949.

Hour

From Westside Chapel

Removal From _____		5 00	CASH EXPENDITURES		
Embalming _____		35 00	Door Dressing _____		
Professional Services _____ <i>Hearse</i>		15 00	Palms _____		
Use of Chapel _____ <i>B-7 pass. Cars</i>		17 00	Flowers _____		
Use of _____ Doz. Chairs _____ Rug _____					
Drapery _____ Candelabra _____					
Candles _____ Prayer Rail _____			Pall Bearers _____		
Crucifix _____ Bier _____			Funeral Notices _____		
Casket No. _____ Mfr. _____		475 00			
Style _____					
Finish _____					
Interior No. _____ Color _____			Clergyman <i>Rev. R.H. Peoples.</i>		
			Sexton _____		
Outside Case _____			Organist _____ Soloist _____		
Mountings _____			Church Charges _____		
Vault Style _____			New Grave <i>New Crown</i> Opening _____	57 00	
Delivery To _____			Grass & Device _____ Tent _____		
Burial Garment _____			Vault Charges _____		
Slippers _____ Hosiery _____			Crematory Charges _____		
Slumber Blanket _____			Gratuities _____		
Gloves _____					
Cremation Urn _____			Telephone _____ Telegrams _____		
Acknowledgement Cards _____			Transportation _____		
			Casket Coach _____		
			Limousines _____ Flower Cars _____		
			Transcript of Death <i>Inspapers 3-1 certified</i>	3 50	
			Total Cash Expenditures	60 50	
			Total Services & Merchandise	547 00	
Total of Services & Merchandise		547 00	Total Amount of Invoice	607 50	

Deceased Mr Charles Ellis  
Date of Death March 28, 1949  
Place of Death Residence  
Last Place of Residence 953 Eldell

Birth Place Big Rock Tennessee  
Date of Birth August 19, 1890  
Age 58 Years 7 Months 9 Days \_\_\_\_\_ Hours \_\_\_\_\_  
Sex male Color or Race negro  
Single \_\_\_\_\_ Married ✓

Widowed \_\_\_\_\_ Divorced \_\_\_\_\_  
Length of Residence U. S. Life  
State \_\_\_\_\_ City 23 years.

Usual Occupation Truck Carrier  
Industry or Business \_\_\_\_\_

Husband's Name \_\_\_\_\_ Age \_\_\_\_\_

Wife's Maiden Name Alice Ellis Age \_\_\_\_\_

Father's Name Joe Ellis

Birth Place 1 Tenn.

Mother's Maiden Name Lucy King

Birth Place Tenn

Social Security No.

*If Veteran, what War*

### Cause of Death

Physician \_\_\_\_\_ Address \_\_\_\_\_

Informant Mrs Alice Ellis

Address 953 Udell St.

Date of Interment April 1, 1949

Cemetery New Crown

Location Sec 17

Row 2

~~Lot~~ or Grave No. 17054

Ordered By.

*Address*

Charged To Mrs Alice Ellis

Address 953 N dell

Invoice Date Wa 4977

*Estate Atty.*

*Address*

metro Empire & Hod Carrier's Union

## CUSTOMER'S PAYMENT RECORD

607.50

DATE			AMOUNT PAID		BALANCE DUE	
4-9-	49	Empire Ins. Co.	285	15	322	35
4-9-	49	" " "	96	40	225	95
4-12-	49	Ref Ins. check	10	50	215	45
—		metro " " (237 <sup>54</sup> )	215	45	—	—
PAID						