

**Funeral of** Little Ruby Mae Emerson

**Date of Funeral** February 22, 1944 **Hour** 1 P.M. **From** Westside Chapel

<b>Removal From</b>		<b>CASH EXPENDITURES</b>	
<b>Embalming</b>		<b>Door Dressing</b>	
<b>Professional Services</b>		<b>Palms</b>	
<b>Use of Chapel</b>		<b>Flowers</b>	
<b>Use of _____ Doz. Chairs _____ Rug _____</b>		<b>Pall Bearers</b>	
<b>Drapery _____ Candelabra _____</b>		<b>Funeral Notices</b>	
<b>Candles _____ Prayer Rail _____</b>			
<b>Crucifix _____ Bier _____</b>			
<b>Casket No.</b> <i>A Service</i> <b>Mfr.</b> <i>5000</i>			
<b>Style</b>			
<b>Finish</b>			
<b>Interior No.</b> _____ <b>Color</b> _____		<b>Clergyman</b> <i>Rev. G. D. Jacobs</i>	
		<b>Sexton</b>	
<b>Outside Case</b>		<b>Organist</b> _____ <b>Soloist</b> _____	
<b>Mountings</b>		<b>Church Charges</b>	
<b>Vault Style</b>		<b>New Grave</b> <i>New Crown</i> <b>Opening</b> <i>15.00</i>	
<b>Delivery To</b>		<b>Grass &amp; Device</b> _____ <b>Tent</b> _____	
<b>Burial Garment</b>		<b>Vault Charges</b>	
<b>Slippers</b> _____ <b>Hosiery</b> _____		<b>Crematory Charges</b>	
<b>Slumber Blanket</b>		<b>Gratuities</b>	
<b>Gloves</b>		<b>Telephone</b> _____ <b>Telegrams</b> _____	
<b>Cremation Urn</b>		<b>Transportation</b>	
<b>Acknowledgement Cards</b>		<b>Casket Coach</b>	
		_____ <b>Limousines</b> _____ <b>Flower Cars</b>	
		<b>Transcript of Death</b>	
<b>Total of Services &amp; Merchandise</b>		<b>Total Cash Expenditures</b>	<i>15.00</i>
		<b>Total Services &amp; Merchandise</b>	<i>50.00</i>
		<b>Total Amount of Invoice</b>	<i>65.00</i>

Letter sent 10/30/44 Statement 1-25-45

Statement sent 6/8/44 11-6-45

Khare Card sent 5/9/45 Card sent 3/20/44

Deceased Little Ruby Mae Emerson  
Date of Death 2-17-44  
Place of Death City Hospital  
Last Place of Residence 750 North Elder St.  
Birth Place Humbolt, Tennessee  
Date of Birth \_\_\_\_\_  
Age 5 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours \_\_\_\_\_  
Sex Female Color or Race Colored  
Single ☒ Married \_\_\_\_\_  
Widowed \_\_\_\_\_ Divorced \_\_\_\_\_  
Length of Residence U. S. Life  
State \_\_\_\_\_ City \_\_\_\_\_  
Usual Occupation Child  
Industry or Business \_\_\_\_\_  
Husband's Name \_\_\_\_\_ Age \_\_\_\_\_  
Wife's Maiden Name \_\_\_\_\_ Age \_\_\_\_\_  
Father's Name Howard Emerson  
Birth Place Tennessee  
Mother's Maiden Name Inez Pock  
Birth Place Tennessee  
Social Security No. \_\_\_\_\_  
If Veteran, what War \_\_\_\_\_  
Cause of Death Acute Rheumatic Heart Disease  
Physician Norman R. Cook Address City Hospital  
Informant Mr. Howard Emerson  
Address 750 North Elder St.  
Date of Interment 2-22-44  
Cemetery New Crown  
Location Sec. 12.  
Row 32.  
Lot or Grave No. 13.775

Ordered By \_\_\_\_\_

Address \_\_\_\_\_

Charged To \_\_\_\_\_

Address \_\_\_\_\_

Invoice Date \_\_\_\_\_

Estate Atty. \_\_\_\_\_

Address \_\_\_\_\_

### CUSTOMER'S PAYMENT RECORD

65.00

DATE		AMOUNT PAID	BALANCE DUE
2-18-44	By Cash	34 00	31.00
2-21-44	" "	6.00	25.00
6-9-44	" "	10 00	15.00
3-17-45	" "	3 00	12.00

Considered Paid because of  
apparent error

PAID