160

Account No. 2153

Funeral of Miss Gladys Fingers

Date of Funeral July 13, 1944 Hour 2 PM From Westside Chapel

Removal From		5.00		CASH EXPENDITURES	
Embalming		25.00		Door Dressing	
Professional Services	Hearse	15.00		Palms	
Use of Chapel	7 passanger Car	8.50		Flowers	
Use of ____ Doz. Chairs ____ Rug					
Drapery ____ Candelabra					
Candles ____ Prayer Rail				____ Pall Bearers	
Crucifix ____ Bier				Funeral Notices	
Casket No. ____ Mfr.					
Style		110 00			
Finish					
Interior No. ____ Color				Clergyman Rev. J. R. Muff	
				Sexton	
Outside Case		10.00		Organist ____ Soloist	
Mountings				Church Charges	
Vault Style				New Grave New Crown Opening	27.00
Delivery To				Grass & Device ____ Tent	
Burial Garment				Vault Charges	
Slippers ____ Hosiery				Crematory Charges	
Slumber Blanket				Gratuities	
Gloves					
Cremation Urn				Telephone ____ Telegrams	
				Transportation	
Acknowledgement Cards				Casket Coach	
				____ Limousines ____ Flower Cars	
				Transcript of Death	
				Total Cash Expenditures	27 00
				Total Services & Merchandise	173 50
Total of Services & Merchandise		173.50		Total Amount of Invoice	200 50

Deceased Miss Gladys Fingers

Date of Death July 10, 1944

Place of Death Residence

Last Place of Residence 330 N. Missouri St.

Birth Place Mt Vernon, Indiana

Date of Birth 1904

Age 40 Years ____ Months ____ Days ____ Hours ____

Sex ~~Female~~ Color or Race Colored

Single ✓ Married ____

Widowed ____ Divorced ____

Length of Residence U. S. Life

State Life City 15 years

Usual Occupation Domestics

Industry or Business ____

Husband's Name ____ Age ____

Wife's Maiden Name ____ Age ____

Father's Name Unknown

Birth Place "

Mother's Maiden Name "

Birth Place "

Social Security No. ____

If Veteran, what War ____

Cause of Death Pulmonary Tuberculosis

Physician ____ Address ____

Informant Mrs. Laura Hall

Address ~~334 N. Missouri St~~ moved

Date of Interment 7-13-44

Cemetery New Crown

Location Sec. 15.
Row 17.

~~Lot or~~ Grave No. 13.997

Ordered By ____

Address ____

Charged To Mrs. Laura Hall

Address ~~334 N. Missouri St.~~ moved

Invoice Date ____

Estate Atty. ____

Address ____

CUSTOMER'S PAYMENT RECORD

200.00

DATE		AMOUNT PAID	BALANCE DUE
7-11-44	Paid in full	200.00	

PAID