

Account No.

Funeral of *Rev. John Ford*

Date of Funeral August 3rd 1943 Hour 1:30 P.M. From Metropolitan Bpts. Church

Removal From _____		5 00	CASH EXPENDITURES		
Embalming _____		25 00	Door Dressing _____		
Professional Services _____	1 Cor	8 50	Palms _____		
Use of Chapel _____	Horse	15 00	Flowers _____		
Use of _____ Doz. Chairs _____ Rug _____					
Drapery _____ Candelabra _____			Pall Bearers _____		
Candles _____ Prayer Rail _____			Funeral Notices _____		
Crucifix _____ Bier _____					
Casket No. _____ Mfr. _____		160. 00			
Style _____					
Finish _____					
Interior No. _____ Color _____			Clergyman _____		
			Sexton _____		
Outside Case _____			Organist _____ Soloist _____		
Mountings _____			Church Charges _____		
Vault Style _____			New Grave <u>New Crown</u> Opening _____		45 00
Delivery To _____			Grass & Device _____ Tent _____		
Burial Garment _____		14 00	Vault Charges _____		
Slippers _____ Hosiery _____			Crematory Charges _____		
Slumber Blanket _____			Gratuities _____		
Gloves _____			Telephone _____ Telegrams _____		
Cremation Urn _____			Transportation _____		
Acknowledgement Cards _____			Casket Coach _____		
			Limousines _____ Flower Cars _____		
			Transcript of Death _____		
			Total Cash Expenditures		45 00
			Total Services & Merchandise		227 50
Total of Services & Merchandise		227 50	Total Amount of Invoice		272 50

Deceased Rev. John Ford
Date of Death July 31st 1943
Place of Death Residence
Last Place of Residence 368 West 14th Street

Birth Place Warren County Ky.
Date of Birth 1874
Age 69 Years _____ Months _____ Days _____ Hours _____
Sex male Color or Race negro
Single _____ Married ☒

Widowed _____ Divorced _____

Length of Residence U. S. Life

State 30 years City 30 years

Usual Occupation Minister

Industry or Business _____

Husband's Name _____ Age _____

Wife's Maiden Name Nellie Ford Age 69

Father's Name John Ford

Birth Place Kentucky

Mother's Maiden Name unknown

Birth Place "

Social Security No. _____

If Veteran, what War _____

Cause of Death _____

Physician Dr. Lewis Address _____

Informant Mrs. Nellie Ford

Address 368 W. 14th Street

Date of Interment 8-3-43

Cemetery New Crown

Location Section 16.

Row 5

Lot or Grave No. 13.417

Ordered By _____

Address _____

Charged To Mrs. Nellie Ford

Address 368 W. 14th Street (2)

Invoice Date _____

Estate Atty. _____

Address _____

CUSTOMER'S PAYMENT RECORD

272.50

DATE		AMOUNT PAID	BALANCE DUE
9-23-43	meter Check & Cash	225.00	47.50
11-2-43	Cash	10.00	37.50
12-12-43	Cash	8.00	29.50
3-3-44	"	5.00	24.50
5-11-44	"	5.00	19.50
4-11-44	"	5.00	14.50
6-1-44	"	7.50	7.00
7-11-44	"	7.00	—

PAID