

Funeral of Mrs. Clara Foster

Date of Funeral September 3, 1949 Hour 11 A M From Westside Chapel

Removal From	500	CASH EXPENDITURES		
Embalming	2500	Door Dressing		
Professional Services <i>Horse</i>	1000	Palms		
Use of Chapel		Flowers		
Use of _____ Doz. Chairs _____ Rug _____				
Drapery _____ Candelabra _____				
Candles _____ Prayer Rail _____		Pall Bearers _____		
Crucifix _____ Bier _____		Funeral Notices _____		
Casket No. _____ Mfr. _____	4000			
Style _____				
Finish _____				
Interior No. _____ Color _____		Clergyman <i>Rev. John Short</i>		
		Sexton _____		
Outside Case _____		Organist _____ Soloist _____		
Mountings _____		Church Charges _____		
Vault Style _____		New Grave <i>New Crown</i> Opening _____		
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 of Services & Merchandise	8000	Total Cash Expenditures		
		Total Services & Merchandise		
		Total Amount of Invoice		

Recd from Redfoot (Serrano) 40.00 9-2-49

Claimed filed 9-6-49

Deceased <u>Mrs Clara Foster</u>		Ordered By <u>Mr. Red Sloan</u> ^{moved} Li 66 49 neighbor	
Date of Death <u>August 30, 1949</u> <u>11 AM</u>		Address <u>312 Douglas Street</u>	
Place of Death <u>General Hospital</u>		Charged To <u>Center Township Trustee</u>	
Last Place of Residence <u>624 E Miami</u>		Address <u>926 North Capitol ave.</u>	
Birth Place <u>Houston, Texas</u>		Invoice Date _____	
Date of Birth <u>September 14, 1895</u>		Estate Atty. _____	
Age <u>56</u> Years <u>11</u> Months <u>16</u> Days _____ Hours _____		Address _____	
Sex <u>Female</u> Color or Race <u>negro</u>			
Single _____ Married <input checked="" type="checkbox"/>			
Widowed _____ Divorced _____			
Length of Residence U. S. <u>Life</u>		CUSTOMER'S PAYMENT RECORD <u>80.00</u>	
State _____ City <u>10 years</u>			
Usual Occupation <u>Housewife</u>		DATE	
Industry or Business _____		10-14-49	
Husband's Name <u>John Foster</u> Age _____		Marion Co Ins Check	
Wife's Maiden Name _____ Age _____		80 00	
Father's Name <u>James Monroe</u>		PAID	
Birth Place _____			
Mother's Maiden Name <u>Unknown</u>			
Birth Place _____			
Social Security No. ?			
If Veteran, what War <u>no</u> <u>Exert Disease</u>			
Cause of Death <u>Cerebro Vascular Hemorrhage Hypertensive</u>			
Physician _____ Address <u>General Hospital</u>			
Informant <u>Mr. John Foster</u>			
Address <u>624 Miami Street</u>			
Date of Interment <u>September 3, 1949</u>			
Cemetery <u>New Crown</u>			
Location <u>See 17</u>			
<u>Row 17</u>			
Lot or Grave No. <u>17389</u>			