

# RECORD OF FUNERAL.

No. 16

Date April 1 191

Name of Deceased Leo Fredie Huseby

Charge to David Biberstine

Order Given by " "

How Secured \_\_\_\_\_

Date of Funeral 4/5

Place of Death Home TP

Funeral Services at Home

Time of Funeral Service 9 am

Clergyman Lambert

Certifying Physician Thayer

His Residence Berne

Number of Burial Certificate \_\_\_\_\_

Cause of Death \_\_\_\_\_

Date of Death 4/2

Occupation of the Deceased \_\_\_\_\_

Single or Married \_\_\_\_\_ Religion \_\_\_\_\_

Aged \_\_\_\_\_ Years, \_\_\_\_\_ Months, \_\_\_\_\_ Day

Body to be shipped to \_\_\_\_\_

Size and Style of Casket or Coffin \_\_\_\_\_

Manufactured by \_\_\_\_\_

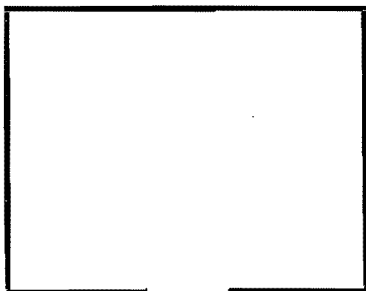
Metallic Lining \_\_\_\_\_

Outside Box \_\_\_\_\_

Number of Handles \_\_\_\_\_

Interment at \_\_\_\_\_ Cemetery

Lot or Grave No. \_\_\_\_\_ Section No. \_\_\_\_\_



- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_

(Diagram of Lot.)

Designate all Graves in Lot with Numbers (1, 2, 3, 4, etc.), mark space for this Funeral with a cross (X). Designate place for Monument with a small square (□).