

RECORD OF FUNERAL.

No. 39 Date 10-2 1913

Name of Deceased Habegger

Charge to Ben "

Order Given by Abraham "

How Secured _____

Date of Funeral _____

Place of Death Monroe Pps

Funeral Services at _____

Time of Funeral Service _____

Clergyman _____

Certifying Physician Dr. Frank

His Residence Berne

Number of Burial Certificate 40

Cause of Death Premature death

Date of Death 10-2

Occupation of the Deceased _____

Single or Married _____ Religion _____

Aged _____ Years, _____ Months, _____ Days.

Body to be shipped to _____

Size and Style of Casket or Coffin 2-6

B. C. Co. - Plush

Manufactured by B. C. Co.

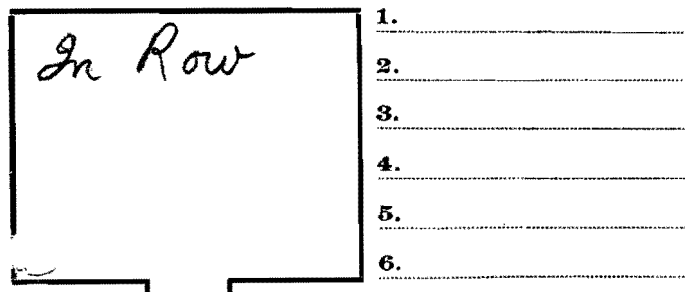
Metallc Lining _____

Outside Box Wood

Number of Handles _____

Interment at _____ Cemetery.

Lot or Grave No. _____ Section No. _____



(Diagram of Lot.)

Designate all Graves in Lot with Numbers (1, 2, 3, 4, etc.), and mark space for this Funeral with a cross (X).
 Designate place for Monument with a small square (□).
 Use space to the right of Diagram for the names of those buried