

RECORD OF FUNERAL.

No. 44

Date Oct 23 191

Name of Deceased unnamed

Charge to Jal Peel

Order Given by " "

How Secured _____

Date of Funeral _____

Place of Death Woburn 710

Funeral Services at _____

Time of Funeral Service _____

Clergyman _____

Certifying Physician _____

His Residence _____

Number of Burial Certificate 42

Cause of Death _____

Date of Death _____

Occupation of the Deceased _____

Single or Married _____ Religion _____

Aged _____ Years, _____ Months, _____ Days.

Body to be shipped to _____

Size and Style of Casket or Coffin _____

Manufactured by _____

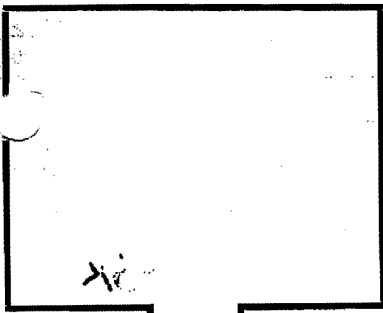
Metallic Lining _____

Outside Box _____

Number of Handles _____

Interment at _____ Cemetery.

Lot or Grave No. _____ Section No. _____



- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____