

RECORD OF FUNERAL.

No. 2 Date Jan 16 1915

Name of Deceased Unnamed Baby of Elmer Eley

Charge to Elmer Eley

Order Given by "

How Secured _____

Date of Funeral 1-17

Place of Death Wardell

Funeral Services at Spring Hill

Time of Funeral Service 2 P.M.

Clergyman Carr

Certifying Physician Dr. Smith

His Residence Wardell

Number of Burial Certificate _____

Cause of Death Pneumonia

Date of Death 1-16

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 _____

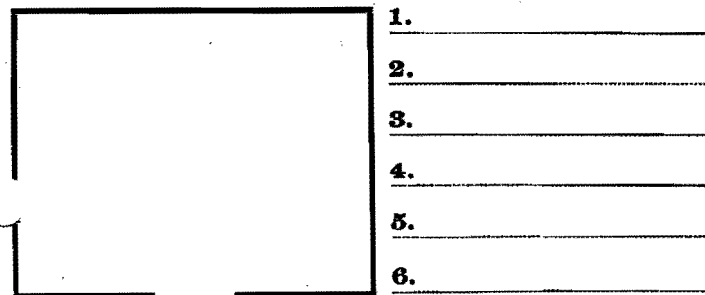
Metallic Lining _____

Outside Box _____

Number of Handles _____

Interment at _____ Cemetery.

Lot or Grave No. _____ Section No. _____



(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 (■).