

RECORD OF FUNERAL.

No. 15 Date 4-9 1915

Name of Deceased Henry Roth

Charge to Peter "

Order Given by " "

How Secured _____

Date of Funeral 4-9

Place of Death French Township

Funeral Services at _____

Time of Funeral Service 9 A.M. 4

Clergyman Rev. Lantz

Certifying Physician Dr. Krusser

His Residence Berne

Number of Burial Certificate _____

Cause of Death Accidental in Buzz saw

Date of Death 4-6

Occupation of the Deceased Laborer

~~Single~~ or ~~Married~~ Religion Def. Mem.

Aged 33 Years, _____ Months, _____ Days.

Body to be shipped to _____

Size and Style of Casket or Coffin 6-3 Oak

Yager Couch

Manufactured by B. C. Co.

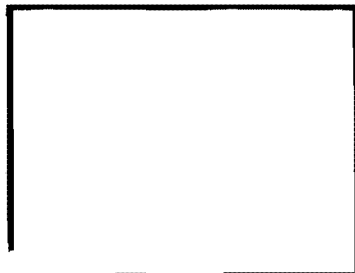
Metallic Lining _____

Outside Box wood

Number of Handles East

Interment at Def. Me - 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.), 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 in Lot.