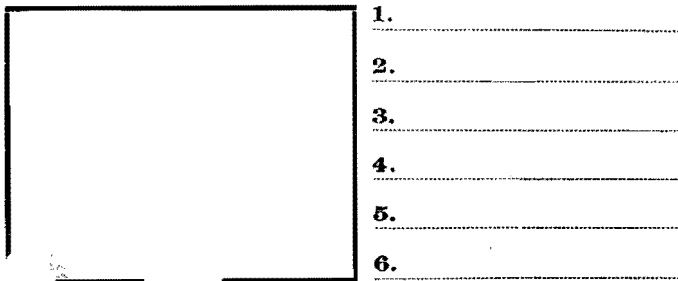


RECORD OF FUNERAL.

No. 46 Date 12-11 1935
 Name of Deceased Philip Steen
 Charge to Mrs " "
 Order Given by " " "
 How Secured _____
 Date of Funeral 12-13
 Place of Death Berne
 Funeral Services at Mission Church
 Time of Funeral Service 9:30 & 10:00
 Clergyman Rev. Grubill
 Certifying Physician Jones
 His Residence Berne
 Number of Burial Certificate 47
 Cause of Death Pneumonia
 Date of Death 12-10
 Occupation of the Deceased Laborer
 Single or Married _____ Religion Mission
 Aged 44 Years, _____ Months, _____ Days.
 Body to be shipped to _____
 Size and Style of Casket or Coffin 6-3
B. B. Blotch
 Manufactured by B. B. Blotch
 Metallic Lining _____
 Outside Box Vault
 Number of Handles 6
 Interment at Mt. Hope 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 in Lot.