

RECORD OF FUNERAL.

No. 3 Date Jan 22 1916

Name of Deceased Sarah Passon

Charge to Dan Boze

Order Given by _____

How Secured _____

Date of Funeral Jan 22

Place of Death Ch. Lunch

Funeral Services at Empire Hall

Time of Funeral Service 2 P.M.

Clergyman Johanson W. Peley

Certifying Physician _____

His Residence _____

Number of Burial Certificate _____

Cause of Death _____

Date of Death _____

Occupation of the Deceased _____

Single or Married _____ Religion _____

Aged 76 Years, _____ Months, 5 Days.

Body to be shipped to _____

Size and Style of Casket or Coffin _____

Manufactured by _____

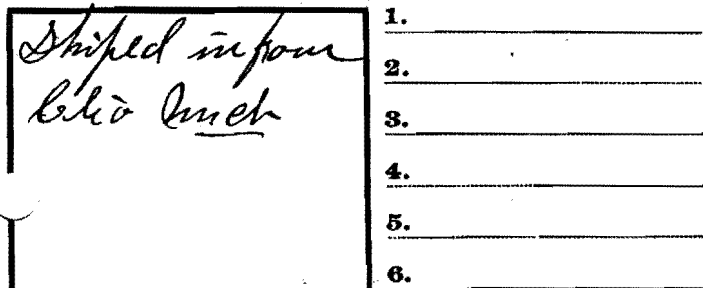
Metallic Lining _____

Outside Box _____

Number of Handles _____

Interment at Crowfords 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).