

RECORD OF FUNERAL.

No. 46 Date 11-8 1916

Name of Deceased Matthias Miller Jr

Charge to " " Estate

Order Given by Family

How Secured _____

Date of Funeral 11-11

Place of Death Robson Creek

Funeral Services at Spring Hill

Time of Funeral Service 10:00 A.M

Clergyman Rev. Johnson

Certifying Physician Dr. Clark

His Residence Alcatraz

Number of Burial Certificate _____

Cause of Death Accidental Shooting

Date of Death 11-8

Occupation of the Deceased Laborer

Single Married _____ Religion _____

Aged 28 Years, _____ Months, _____ Days.

Body to be shipped to _____

Size and Style of Casket or Coffin 6-6- Oak Couch

Manufactured by Franklinville Coffin Co

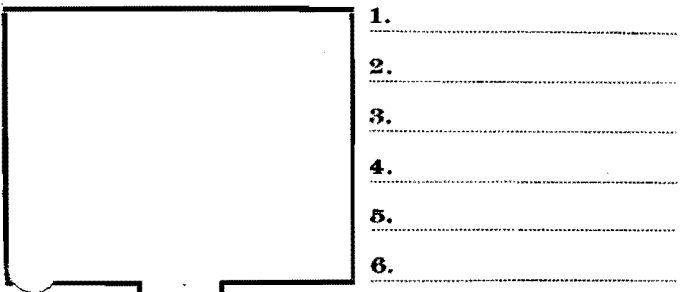
Metallic Lining _____

Outside Box Black Vault

Number of Handles End & Extension

Interment at Spring Hill 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.