

	Hardy & Hardy Funeral Home Record
Name of Deceased	John Riley Clendenen
Date of Entry	November 03, 1955
Page Number	Page 298
Marital Status	Widowed
Residence	1209 E. 16th, Muncie
Charge To	
Address	
Order Given By	
Spouse	
If Veteran, State War	
Occupation	Farmer
Social Security No.	
Employer and Address	
Date of Death	November 03, 1955
Date of Birth	March 21, 1867
Age	88 years
Date of Funeral	November 5, 1955; Saturday; 2:00 p.m.
Services At	Hardy Funeral Home
Clergyman	Rev. A. B. McKain - Geneva
Religion of the Deceased	
Birthplace	Adams County
Resided in the State	
Place of Death	At home
Cause of Death	Senility
Contributory Cause	?? Dept. Health Officers
Certifying Physician	Dr. H. M. Tomlin
His Address	Muncie, Indiana
Name of Father	Salem Clandenon
His Birthplace	
Maiden Name of Mother	
Her Birthplace	
Motor/Ship Remains To	
Size of Casket	
Manufactured By	Crawfordsville Casket
Cemetery	Brown
Note	
Grave No.	
Section No.	
Block No.	
Owner	

RECORD OF FUNERAL

Form No. 298 Yearly No. 9

Date of Entry Nov 3, 1955

Name of Deceased John Riley Chardener
 Married Single Widowed

White

Residence: 1909 E. 16th Street, Miami

Funeral Home

Charge to: _____
 Address: _____

Form No. 299

Order given by: _____
(see information)

Name of Deceased William Ott
 Married Single Widowed

How Secured: _____

Residence: R.R. Tenor, Ind.

If Veteran, State War _____

Charge to: _____

Occupation Farmer
(Social Security Number)

Address: _____

Employer and Address _____

Order given by: _____
(see information)

Date of Death Nov 3, 1955
(Date) (Hour)

How Secured: _____

Date of Birth March 21, 1867
(Date) (Hour)

If Veteran, State War _____

Age 88
(Years) (Months) (Days)

Occupation Farmer
(Social Security Number)

Date of Funeral Nov 5, 1955 at 2:00 P.M.
(Date) (City or Town) (Hour)

Employer and Address _____

Services at St. Joseph's Church

Date of Death Oct 25, 1955 at 5:00 P.M.
(Date) (City or Town) (Hour)

Clergyman Rev. A. B. McNeil
(Address)

Date of Birth May 2, 1866
(Date) (Hour)

Religion of the Deceased _____

Age 71
(Years) (Months) (Days)

Birthplace Adams Co.

Date of Funeral Oct 27, 1955 at 11:00 A.M.
(Date) (City or Town) (Hour)

Resided in the State _____
(in U.S. or City or County) (Years) (Months)

Services at St. Joseph's Church

Place of Death At Home

Clergyman Rev. A. B. McNeil

Cause of Death Senility

Religion of the Deceased Catholic

Contributory Cause High Blood Pressure

Birthplace Adams Co., Ind.

Certifying Physician Dr. W. M. Sander
(or County)

Resided in the State _____
(in U.S. or City or County) (Years) (Months)

His Address Miami, Fla.

Place of Death At Home

Name of Father Salmon Chardener

Cause of Death Myocardial Infarction

His Birthplace _____

Contributory Cause Diabetes Mellitus

Maiden Name of Mother _____

Certifying Physician Dr. P. H. Hachse

Her Birthplace _____

His Address Tenor, Ind.

Motor Ship } Remains to _____

Name of Father John Reiter

Size of Casket _____
(Length Color and Height)

His Birthplace _____

Manufactured by Beaumont

Maiden Name of Mother Janice Reiter

Cemetery } _____
 Conventory } _____

For Birthplace _____

Motor Ship } Remains to _____

Size of Casket _____

Manufactured by _____

Cemetery } _____
 Conventory } _____

0367

Lot No. _____
 Grave No. _____
 Section No. _____
 Block No. _____
 Owner _____