

## Hardy &amp; Hardy Funeral Home Record

Name of Deceased	Hester Anna Cline
Page Number	Page 249
Marital Status	Widowed
Residence	R. R. Geneva
Charge To	
Address	
Order Given By	
Spouse	John
If Veteran, State War	
Occupation	Housewife
Social Security No.	
Employer and Address	
Date of Death	April 25, 1954; 10:37 p.m.
Date of Birth	March 10, 1871
Age	83 years
Date of Funeral	April 28, 1954; Wednesday; 10:30 a.m.
Services At	Hardy Funeral Home
Clergyman	Rev. Paul Logan - Bryant, Indiana
Religion of the Deceased	E.U.B.
Birthplace	Ohio
Resided in the State	
Place of Death	Marion Cline Res.
Cause of Death	?? Thrombosis
Contributory Cause	Rev. Lowell Kester??
Certifying Physician	Dr. Jas. V. Schetgen
His Address	Geneva, Indiana
Name of Father	James Romine
His Birthplace	
Maiden Name of Mother	Christina
Her Birthplace	
Motor/Ship Remains To	
Size of Casket	46-23 HC Silver Blue Shade; Int. 3021
Manufactured By	Indpls. Casket Co.
Cemetery	King's Creek Cem. Urbine, Ohio
Lot No.	
Grave No.	
Section No.	
Block No.	
Owner	

# RECORD OF FUNERAL

Form No. 249 Yearly No. \_\_\_\_\_ Date of Entry April 25, 1954  
 Name of Deceased Hester Anna Cline (What Race) White  
 Married  Single  Widowed  Divorced

Residence: R.R. Geneva (What Race) John  
 Charge to: \_\_\_\_\_ Age of Husband or Wife (if living) \_\_\_\_\_ Years

Address: \_\_\_\_\_  
 Order given by: \_\_\_\_\_ (or informant)

How Secured: \_\_\_\_\_  
 If Veteran, State War \_\_\_\_\_

Occupation: Housewife (Social Security Number) \_\_\_\_\_  
 Employer and Address \_\_\_\_\_

Date of Death: April 25, 1954 (Time) 11:37 P.M.  
 Date of Birth: Mar. 10, 1871 (Time) \_\_\_\_\_

Age: 83 (Years) (Month) (Days)  
 Date of Funeral: April 26, 1954 (Time) 10:30 A.M.

Services at: Spring Hill Cemetery  
 Clergyman: Rev. Paul Loren Byers

Religion of the Deceased: E. P. B.  
 Birthplace: Ohio

Resided in the State: \_\_\_\_\_  
 Place of Death: Marion, Ohio

Cause of Death: Mesenteric Thrombosis  
 Contributory Causes: \_\_\_\_\_

Certifying Physician: Dr. J. V. Schetzgen  
 His Address: Geneva

Name of Father: James Ramine  
 His Birthplace: \_\_\_\_\_

Maiden Name of Mother: Christina  
 Her Birthplace: \_\_\_\_\_

Motor Ship } Remains to \_\_\_\_\_  
 Size of Casket: 4 1/2 R. H. C. Sewell Co.

Manufactured by: W. H. C. Sewell Co.  
 Cemetery: Spring Hill

Lot No. \_\_\_\_\_  
 Grave No. \_\_\_\_\_

Section No. \_\_\_\_\_  
 Block No. \_\_\_\_\_  
 Ouder: \_\_\_\_\_

Diagram of Lot or Vault \_\_\_\_\_

Form No. 250 Yearly No. \_\_\_\_\_  
 Name of Deceased: Fredrick Roe

Married  Single  Widowed  Divorced  
 Residence: R.R. Mansel, Ind.

Charge to: Payment Roe  
 Address: R.R. Mansel

Order given by: \_\_\_\_\_ (or informant)  
 How Secured: \_\_\_\_\_

If Veteran, State War \_\_\_\_\_  
 Occupation: \_\_\_\_\_ (Social Security Number) \_\_\_\_\_

Employer and Address: \_\_\_\_\_  
 Date of Death: May 4, 1954 (Date) 1:10 P.M. (Hour)

Date of Birth: Dec. 7, 1951  
 Age: 2 (Years) (Month) (Days)

Date of Funeral: 5-7-1954 (Date) 10:00 A.M. (Time)  
 Services at: Spring Hill Cemetery

Clergyman: Rev. Earl Huston (Address) \_\_\_\_\_  
 Religion of the Deceased: Methodist

Birthplace: Blue Creek, Ind.  
 Resided in the State: \_\_\_\_\_ (or U. S. or C. or Country) (Years) (Month)

Place of Death: Adams Co. Hospital  
 Cause of Death: Bilateral Lobar

Contributory Causes: Pneumonia  
 Certifying Physician: Dr. J. V. Schetzgen (or Coroner)

His Address: Geneva  
 Name of Father: Raymond Roe

His Birthplace: \_\_\_\_\_  
 Maiden Name of Mother: Ma Lee Gibson

Her Birthplace: \_\_\_\_\_  
 Motor Ship } Remains to \_\_\_\_\_

Size of Casket: \_\_\_\_\_  
 Manufactured by: W. H. C. Sewell Co.

Cemetery: Spring Hill