

	Hardy & Hardy Funeral Home Record
Name of Deceased	Hattie Elizabeth Dunwiddie
Page Number	Page 172
Marital Status	Married
Residence	Geneva, Indiana
Charge To	(blank)
Address	(blank)
How Secured	(blank)
If Veteran, State War	(blank)
Occupation	Housewife
Social Security No.	(blank)
Employer and Address	(blank)
Date of Death	September 28, 1951; 11:30 p.m.
Date of Birth	September 29, 1880
Age	(blank)
Date of Funeral	October 1, 1951; Monday; 2:00 p.m.
Services At	Hardy Funeral Home
Clergyman	Garth Shepherd - City
Religion of the Deceased	(blank)
Birthplace	Ceylan, Indiana
Resided in the State	(blank)
Place of Death	At home
Cause of Death	Cerebral Hemorrhage
Contributory Cause	Hypertension; Renal disease
Certifying Physician	Dr. C. P. Hinchman
His Address	Geneva, Indiana
Name of Father	John Brown
His Birthplace	(blank)
Maiden Name of Mother	Jeanette Martin
Her Birthplace	(blank)
Motor/Ship Remains To	(blank)
Size of Casket	Metal - Green Int.
Manufactured By	F. H. Hill - Chicago
Cemetery	Riverside
Lot No.	(blank)
Grave No.	(blank)
Section No.	(blank)
Block No.	(blank)
Owner	(blank)

RECORD OF FUNERAL

Funeral No. 172 Yearly No. _____ Date of Entry Sept 1957

Name of Deceased Hatter, Elizabeth Ann
 Married Single Widowed Divorced

Residence: Geneva, Ind

Charge to: _____

Address: _____

Order given by: _____
(or informant)

How Secured: _____

If Veteran, State War _____

Occupation: Housewife
General Secretary (Member)

Employer and Address: _____

Date of Death: Sept. 28, 1957 11:30 AM
(Date) (Hour)

Date of Birth: Sept. 27, 1880

Age: _____

Date of Funeral: 10/1/57 10:00 AM
(Date) (Hour)

Services at: St. Ann's Episcopal Church

Clergyman: North Shepherd City
(Address)

Religion of the Deceased: _____

Birthplace: Ceylan, Indiana

Resided in the State: _____

Place of Death: St. Ann's
(in U.S. or City or County) (Town) (State)

Cause of Death: Cerebral Hemorrhage

Contributory Causes: Hypertension, Arteriosclerosis, Coronary Artery Disease

Certifying Physician: Dr. C. P. Finkbeiner

His Address: Geneva, Ind.

Name of Father: John Brown

His Birthplace: _____

Maiden Name of Mother: Jessette Martin

Her Birthplace: _____

Motor Ship | Remains to: Metal - Green Oak

Size of Casket: _____
(State Company Number)

Manufactured by: Hill - Chicago

Country Crematory: Geneva (John Brown)

Funeral No. 171 Yearly No. _____

Name of Deceased: Paul
 Married Single Widowed Divorced

Residence: Fr. Wayne, Ind.

Charge to: _____

Address: _____

Order given by: _____
(or informant)

How Secured: _____

If Veteran, State War _____

Occupation: _____

Employer and Address: _____

Date of Death: Sept. 23, 1957

Date of Birth: July 8, 1882

Age: 69

Date of Funeral: 9-24-57 10:00 AM
(Date) (Hour)

Services at: St. Ann's Episcopal Church

Clergyman: Red Crabill
(Address)

Religion of the Deceased: Methodist

Birthplace: Albion, Ind.

Resided in the State: _____

Place of Death: St. Ann's Episcopal Church
(in U.S. or City or County)

Cause of Death: Pneumonia

Contributory Causes: _____

Certifying Physician: _____

His Address: Fr. Wayne, Ind.

Name of Father: John A. Brown

His Birthplace: _____

Maiden Name of Mother: Mary Ely

Her Birthplace: _____