

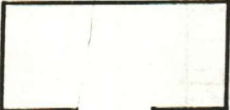
Hardy & Hardy Funeral Home Record

Name of Deceased	Peter Wesley Dunwiddie
Page Number	Page 208
Marital Status	Widowed
Residence	Geneva, Indiana
Charge To	Estate
Address	
Order Given By	John Dinwiddie
How Secured	
If Veteran, State War	
Occupation	
Social Security No.	
Employer and Address	Standard Brush
Date of Death	Dec. 19, 1952
Date of Birth	Sept. 27, 1877 [sic]
Age	79 years
Date of Funeral	Dec. 22, 1952; 10:00 a.m.
Services At	Funeral Home
Clergyman	Garth Shephard
Religion of the Deceased	
Birthplace	Indiana
Resided in the State	7? Years
Place of Death	Decatur Hospital
Cause of Death	Hypertension ??
Contributory Cause	
Certifying Physician	?? Raymond
His Address	Decatur
Name of Father	?? Dunwiddie
His Birthplace	Ohio
Maiden Name of Mother	Mary Jane ??
Her Birthplace	Indiana
Motor/Ship Remains To	
Size of Casket	
Manufactured By	Curtis
Cemetery	Riverside
Lot No.	
Grave No.	
Section No.	
Block No.	
Owner	

RECORD OF FUNERAL

Report No. 208
Name of Deceased Peter Steaty Durawick
 Married Single Widowed Divorced
Residence: *Waukegan, Ill.*
Charge to: *Estate*
Address: *306-21-6657*
Order given by: *John Durawick*
(or informant)
How Secured: *✓*
If Veteran, State War: *None*
Occupation: *None*
(Social Security Number)
Employer and Address: *None*
Date of Death: *Dec 19, 1952*
(Date) (Time) (Place)
Date of Birth: *Sept 27, 1877*
(Date) (Time) (Place)
Age: *75*
(Years) (Months) (Days)
Date of Funeral: *Dec 27, 1952*
(Date) (Day of Week) (Time) (Place)
Services at: *Trinity Lutheran Church*
Clergyman: *W. G. Stephens*
(Address)
Religion of the Deceased: *Prot.*
Birthplace: *Ill.*
Resided in the State: *Ill.*
(or U. S. or City or County) (Years)
Place of Death: *Ill.*
Cause of Death: *Hypertension & V. Retic.*
Contributory Causes: *None*
Certifying Physician: *None*
(or Coroner)
His Address: *None*
Name of Father: *John Durawick*
His Birthplace: *Ill.*
Maiden Name of Mother: *Mary Ann Watson*
Her Birthplace: *Ill.*
Motor Ship } Remains to
Size of Casket: *None*
(State over Third Number)
Manufactured by: *Waukegan*
Cemetery } *Waukegan*
Crematory }

Report No. 209
Name of Deceased: *Robert Wade*
 Married Single Widowed
Residence: *Waukegan, Ill.*
Charge to: *None*
Address: *None*
Order given by: *None*
(or informant)
How Secured: *None*
If Veteran, State War: *None*
Occupation: *None*
(Social Security Number)
Employer and Address: *None*
Date of Death: *Dec 9, 1952*
(Date) (Time) (Place)
Date of Birth: *Dec 27, 1909*
(Date) (Time) (Place)
Age: *43*
(Years) (Months) (Days)
Date of Funeral: *None*
(Date) (Day of Week) (Time) (Place)
Services at: *None*
Clergyman: *None*
(Address)
Religion of the Deceased: *None*
Birthplace: *Ill.*
Resided in the State: *Ill.*
(or U. S. or City or County) (Years)
Place of Death: *Ill.*
Cause of Death: *None*
Contributory Causes: *None*
Certifying Physician: *None*
(or Coroner)
His Address: *None*
Name of Father: *None*
His Birthplace: *None*
Maiden Name of Mother: *None*
Her Birthplace: *None*
Motor Ship } Remains to
Size of Casket: *None*
(State over Third Number)
Manufactured by: *None*
Cemetery } *Waukegan*
Crematory }



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

Diagram of Lot or Vault

Lot No.
Grave No.