

## Hardy &amp; Hardy

## Funeral Home Record

Name of Deceased	Sevalla Northern Glendening
Page Number	156
Marital Status	Not stated
Residence	Bryant, Ind.
Charge To	Wesleyan Burial Assoc, Marion, Ind
Address	(blank)
Order Given By	(blank)
How Secured	(blank)
If Veteran, State War	(blank)
Occupation	Housewife
Employer and Address	(blank)
Date of Death	Feb. 16, 1951 11:00
Date of Birth	Dec. 21, 1878
Age	72 Years, Months, Days
Date of Funeral	2/18/1951 Sun 2:00?
Services At	Wesleyan Methodist Church
Clergyman	Rev. Edward Smithee
Religion of the Deceased	(blank)
Birthplace	Bearcreek Twp, Jay Co
Resided in the State	(blank)
Place of Death	at home
Cause of Death	Cardiac Failure
Contributory Cause	Gastric Ulcer
Certifying Physician	Dr. Jas. V. Schetgen
His Address	Geneva, Indiana
Name of Father	Walter Northern
His Birthplace	(blank)
Maiden Name of Mother	Catherine Scott
Her Birthplace	(blank)
Motor/Ship Remains To	(blank)
Size of Casket	(blank)
Manufactured By	Hardwood Casket
Cemetery	Gravel Hill
Lot No.	(cut off)

# RECORD OF FUNERAL

Funeral No. <u>154</u>	Yearly No. _____	Date of Entry <u>Feb. 16,</u>	
Name of Deceased <u>Seamus Northern</u>	<u>Northern</u>	<u>Flushing</u>	
<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Infant <input type="checkbox"/> Child			
Residence: <u>Bryant Ltd</u>		<u>Lawler</u>	
Charge to <u>Wesleyan Burial Home</u>			
Address: <u>27.00. 2000th St</u>			
Order given by _____			
How Secured _____			
If Veteran, State War _____			
Occupation <u>Housewife</u>			
Employer and Address _____			
Date of Death <u>Feb. 16, 1951</u>			
Date of Birth <u>Nov. 24, 1971</u>			
Age <u>78</u>			
Date of Funeral <u>Feb. 17, 51</u>			
Services at <u>Wesleyan Methodist</u>			
Clergyman <u>Rev. Edward Smith</u>			
Religion of the Deceased _____			
Birthplace <u>Dearborn, Mich.</u>			
Resided in the State _____			
Place of Death <u>At Home</u>			
Cause of Death <u>Cardiac Failure</u>			
Contributory Causes <u>Arteriosclerosis</u>			
Certifying Physician <u>Dr. J. J. Scheraga</u>			
His Address <u>Genoa, Ind.</u>			
Name of Father <u>Walter Northern</u>			
His Birthplace _____			
Maiden Name of Mother <u>Catherine Scott</u>			
Her Birthplace _____			
Motor Ship } Remains to _____			
Rise of Coffin _____			
Manufactured by <u>Harold's Undertaking</u>			
Cemetery <u>Gravel Hill</u>			

Funeral No. <u>155</u>	Yearly No. _____	Date of Entry _____	
Name of Deceased _____			
<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Infant <input type="checkbox"/> Child			
Residence _____			
Charge to _____			
Address _____			
Order given by _____			
How Secured _____			
If Veteran, State War _____			
Occupation _____			
Employer and Address _____			
Date of Death <u>Feb. 11, 1951</u>			
Date of Birth <u>June 23, 1900</u>			
Age <u>70</u>			
Date of Funeral <u>Feb. 12, 1951</u>			
Services at <u>E. St. Church</u>			
Clergyman <u>Rev. Lester Payne</u>			
Religion of the Deceased _____			
Birthplace <u>Eastland, Ind.</u>			
Resided in the State _____			
Place of Death <u>Day Care Home</u>			
Cause of Death <u>Cranial Pressure</u>			
Contributory Causes _____			
Certifying Physician <u>Dr. J. J. Scheraga</u>			
His Address <u>Genoa, Ind.</u>			
Name of Father <u>Charles E. Payne</u>			
His Birthplace _____			
Maiden Name of Mother <u>Kathleen</u>			
Her Birthplace _____			
Motor Ship } Remains to _____			
Rise of Coffin _____			
Manufactured by _____			
Cemetery _____			