

Hardy & Hardy Funeral Home  
Record

Name of Deceased	Charles Irvin Haffner
Page Number	Page 103
Marital Status	(blank)
Residence	Bryant R. R. 2
Charge To	(blank)
Address	(blank)
How Secured	(blank)
If Veteran, State War	(blank)
Occupation	Farmer
Social Security No.	(blank)
Employer and Address	(blank)
Date of Death	June 28, 1949; 1:30 P.M.
Date of Birth	September 14, 1869
Age	79 Years
Date of Funeral	July 1, 1949; Friday; 10:00 A.M.
Services At	Oakland Church
Clergyman	Rev. Elmer Strand
Religion of the Deceased	(blank)
Birthplace	Wayne Co., Ind.
Resided in the State	(blank)
Place of Death	Adams Co. Hospital
Cause of Death	Carcinoma
Contributory Cause	?? End of Stomach - 2 Yrs.
Certifying Physician	Dr. C. P. Hinchman
His Address	Geneva, Ind.
Name of Father	Andrew Haffner
His Birthplace	Wells Co., Ind.
Maiden Name of Mother	Susanah Lags
Her Birthplace	(blank)
Motor/Ship Remains To	(blank)
Size of Casket	(blank)
Manufactured By	Evansville Casket Co.
Cemetery	Odd Fellows - Pennville
Lot No.	(blank)
Grave No.	(blank)
Section No.	(blank)
Block No.	(blank)
Owner	(blank)

# RECORD OF FUNERAL

<del>pg 103</del> <b>pg 103</b>	Yearly No. ....	Date of Entry .....
Name of Deceased <b>Charles Edwin Haffner</b>	<input checked="" type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	<del>pg 104</del> <b>pg 104</b>
Residence <b>Burgant, E. R. R.</b>		Name of Deceased <b>E. C. Jones</b>
Charge to .....		Residence <b>Canada</b>
Address .....		Charge to .....
Order given by .....	<small>(or Informant)</small>	<del>pg 105</del> <b>pg 105</b>
How Secured .....		Name of Deceased <b>Ke...</b>
If Veteran, State War .....		Residence .....
Occupation <b>Farmer</b>		Charge to .....
Employer and Address .....		<del>pg 106</del> <b>pg 106</b>
Date of Death <b>Jan. 28, 1949</b>	<small>(Day) (Month) (Year)</small>	Name of Deceased .....
Date of Birth <b>Sept. 14, 1869</b>	<small>(Day) (Month) (Year)</small>	Residence .....
Age <b>79</b>	<small>(Years) (Months) (Days)</small>	Charge to .....
Date of Funeral <b>Jan. 29, 1949</b>	<small>(Day) (Month) (Year)</small>	How Secured .....
Services at <b>Oakland Church</b>	<small>(Day) (Month) (Year)</small>	If Veteran, State War .....
Clergyman <b>Rev. Elmer Strand</b>	<small>(Day) (Month) (Year)</small>	Occupation <b>Beautician</b>
Religion of the Deceased .....		Employer and Address .....
Birthplace <b>Wayne Co., Ind.</b>		Date of Death <b>July 1</b>
Resided in the State .....	<small>(or U. S. or City or County) (Years) (Months) (Days)</small>	Date of Birth <b>Feb</b>
Place of Death <b>Adams Co. Hospital</b>		Age <b>37</b>
Cause of Death <b>Carcinoma</b>		Date of Funeral <b>7-20-49</b>
Contributory Causes <b>Police eat of stomach 2 yrs.</b>		Services at <b>Domestic</b>
Certifying Physician <b>Dr. C. P. Henchman</b>		Clergyman <b>Rev. Chas</b>
His Address <b>Geneva, Ind.</b>		Religion of the Deceased .....
Name of Father <b>Andrew Haffner</b>		Birthplace <b>Wells Co.</b>
His Birthplace .....		Resided in the State .....
Maiden Name of Mother <b>Susanah Lage</b>		Place of Death <b>Geneva</b>
Her Birthplace .....		Cause of Death <b>HEPAT</b>
<input type="checkbox"/> Motor Ship <input type="checkbox"/> Remains to .....		Contributory Causes <b>6-6-49</b>
Size of Casket .....		Certifying Physician <b>D.R.C</b>
Manufactured by <b>Evansville Casket Co.</b>	<small>(State Color and Wood)</small>	His Address <b>Geneva</b>
Cemetery <b>Adm. Fellows - Providence</b>		Name of Father <b>FRANC</b>
<div style="border: 1px solid black; width: 100px; height: 100px; margin: 5px 0;"></div>		His Birthplace .....
	Lot No. ....	Maiden Name of Mother <b>he</b>
	Grave No. ....	Her Birthplace .....
	Section No. ....	<input type="checkbox"/> Motor Ship <input type="checkbox"/> Remains to .....
	Block No. ....	Size of Casket <b>6x6</b>
	Owner .....	Manufactured by <b>Byrd</b>
		Cemetery <b>1/2 mile -</b>