

	Hardy & Hardy Funeral Home Record
Name of Deceased	Charles George Hiland
Page Number	Page 232
Marital Status	Married
Residence	Geneva, Indiana R. R.
Charge To	
Address	
Order Given By	
Spouse	
If Veteran, State War	
Occupation	Service Man - Machinery
Social Security No.	
Employer and Address	
Date of Death	Aug. 22, 1953; 4:00 p.m.
Date of Birth	Feb. 17, 1874
Age	79 years
Date of Funeral	Aug. 25, 1953; Tuesday; 2:00 p.m.
Services At	Hardy Funeral Home
Clergyman	Rev. Roger Lautzenheiser - city
Religion of the Deceased	
Birthplace	Brown County, Indiana
Resided in the State	
Place of Death	Adams County Hospital
Cause of Death	Acute cardiac failure
Contributory Cause	Hypertension; heart disease
Certifying Physician	Dr. C. P. Hinchman
His Address	Geneva, Indiana
Name of Father	Jacob Hiland
His Birthplace	
Maiden Name of Mother	Barbara Stanbas....
Her Birthplace	
Motor/Ship Remains To	
Size of Casket	?? Interior Seafoam
Manufactured By	Connersville Casket
Cemetery	West Lawn
Lot No.	
Grave No.	
Section No.	
Block No.	
Owner	

RECORD OF FUNERAL

Record No. 232 Yearly No. _____ Date of Entry August 22 1953
 Name of Deceased Charles George Wilson White
 Married Single Widowed Divorced

Residence: Geneva, Ind. R.P.
 Charge to: _____
 Address: _____
 Order given by: _____

How Secured: _____
 If Veteran, State War 35303-3131
 Occupation Service Man - Machine
 Employer and Address _____

Date of Death Aug. 27, 1953 1:00 PM
 Date of Birth Feb. 17, 1894
 Age 59 (Years) _____ (Months) _____ (Days) _____

Date of Funeral Sept. 5, 1953 10:00 AM
 Services at First Free Will Church
 Clergyman Rev. Roger Sutzgaber

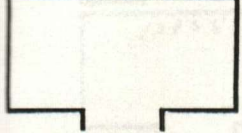
Religion of the Deceased _____
 Birthplace Brown Co. Ind.
 Resided in the State _____ (or U.S. City or County) (Years) (Months)

Place of Death Adams Co. Hospital
 Cause of Death Cute. Cardiac Failure
 Contributory Causes Hypertension

Certifying Physician Dr. C. P. Hinchman
 His Address Geneva, Ind.
 Name of Father Jacob Wilson
 His Birthplace _____

Maiden Name of Mother Barbara Stambaugh
 Her Birthplace _____

Motor Ship } Remains to _____
 Size of Casket 1 7/8 x 2 1/2 x 2 1/2
 Manufactured by Cannonville Caskets
 Cemetery Whitewater



Lot No. 44-3675
 Grave No. 12800
 Section No. _____
 Block No. _____
 Owner _____

Name of Deceased Michael John Bergin
 Residence Geneva, Ind.
 Charge to John Bergin
 Address _____

Order given by _____
 How Secured _____
 If Veteran, State War _____

Occupation _____
 Employer and Address _____
 Date of Death _____
 Date of Birth March 10, 1903

Age 50
 Date of Funeral Sept. 10, 1953
 Services at St. John's Church
 Clergyman Rev. Fred Hoyer

Religion of the Deceased _____
 Birthplace Portland, Ind.
 Resided in the State _____

Place of Death St. C. Hospital
 Cause of Death Blow to head
 Contributory Causes Intoxicated

Certifying Physician Dr. Fred Hoyer
 His Address Geneva, Ind.
 Name of Father John Bergin
 His Birthplace _____

Maiden Name of Mother Louise Neil
 Her Birthplace _____

Motor Ship } Remains to _____
 Size of Casket 3 1/2 x 6
 Manufactured by _____
 Cemetery West Hill