

Hardy & Hardy Funeral Home
Record

Name of Deceased	Warren G. Kraner
Page Number	Page 58
Marital Status	Widowed
Residence	Geneva, Indiana
Charge To	(blank)
Address	(blank)
Order Given By	(blank)
How Secured	(blank)
If Veteran, State War	(blank)
Occupation	(cut off)
Employer and Address	(blank)
Date of Death	(cut off)
Date of Birth	(cut off)
Age	(cut off)
Date of Funeral	(cut off)
Services At	Evangelical United Brethren
Clergyman	Rev. Roy Schwartz - City
Religion of the Deceased	United Brethren
Birthplace	Adams Co.
Resided in the State	(blank)
Place of Death	Adams Co., Geneva
Cause of Death	Hypostatic Pneumonia
Contributory Cause	Cerebral Arter??
Certifying Physician	Dr. N. Beavers
His Address	Berne, Ind.
Name of Father	John O. Kraner
His Birthplace	Pennsylvania
Maiden Name of Mother	Elmire Macklin
Her Birthplace	(blank)
Motor/Ship Remains To	(blank)
Size of Casket	(blank)
Manufactured By	(blank)
Cemetery	Gravel Hill - Bryant
Lot No.	(blank)
Grave No.	(blank)
Section No.	(blank)
Block No.	(blank)
Owner	(blank)

RECORD OF FUNERAL

Yearly No.

Name of Deceased *Harriet E. Kramer*

Married Single Widowed Divorced

Residence: *Geneva, Ind.*

Charge to:

Address:

Order given by: (or Informant)

How Secured:

Time of Funeral: *War* (Date) (Day of Week) (Hour)

Services at: *Evangelical United Brethren*

Clergyman: *Rev. Ray Schwartz, City*

Religion of the Deceased: *United Brethren*

Birthplace: *Adams Co.*

Resided in the State: (or U. S. or City or County) (Years) (Months)

Place of Death: *Adams Co. Geneva*

Cause of Death: *Hypostatic pneumonia*

Contributory Causes: *Coronary arteriosclerosis*

Certifying Physician: *Dr. N. Beemer*

His Address: *Beemer, Ind.*

Name of Father: *John D. Kramer*

His Birthplace: *Pennsylvania*

Maiden Name of Mother: *Elmira Macklin*

Her Birthplace:

Motor Ship } Remains to

Size of Casket: (State Color and Number)

Manufactured by:

Cemetery } *Gravel Hill - Bryant*

Lot No.

Grave No.

Section No.

Block No.

Owner:

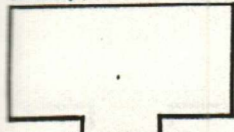


Diagram of Lot or Vault

pg 5

Name of Deceased

Residence

Employer and Address

Date of Death

Date of Birth

Age

Date of Funeral

Services at

Clergyman

Religion of the Deceased

Birthplace

Resided in the State

Place of Death

Cause of Death

Contributory Causes

Certifying Physician

His Address

Name of Father

His Birthplace

Maiden Name of Mother

Her Birthplace

Motor Ship } Remains to

Size of Casket

Manufactured by

Cemetery } *Gravel Hill - Bryant*