

Hardy & Hardy Funeral Home Record	
Name of Deceased	Clinton Mathys
Page Number	Page 260
Marital Status	Married
Residence	R. R. Geneva, Indiana
Charge To	
Address	
Order Given By	
Spouse	
If Veteran, State War	
Occupation	
Social Security No.	
Employer and Address	Central Soya
Date of Death	Aug. 13, 1954; 9:00 a.m.
Date of Birth	Sept. 30, 1894
Age	59 years
Date of Funeral	August 15, 1954; Sunday; 2:00 p.m.
Services At	Hardy Funeral Home
Clergyman	Rev. Schmid, Berne
Religion of the Deceased	
Birthplace	Berne, Indiana
Resided in the State	
Place of Death	Adams County Hospital
Cause of Death	Cerebral embolism
Contributory Cause	Left ventricular failure; Pulmonary
Certifying Physician	Dr. Burk
His Address	Decatur, Indiana
Name of Father	Fred Mathys
His Birthplace	Berne, Switzerland
Maiden Name of Mother	Lydia Klopfenstein
Her Birthplace	Adams County
Motor/Ship Remains To	
Size of Casket	Monaseal - Rose interior
Manufactured By	Batesville Casket Co.
Cemetery	Riverside
Lot No.	
Grave No.	
Section No.	
Block No.	
Owner	

RECORD OF FUNERAL

Form No. 260 **Yearly No.** 77
Name of Deceased ... *Clinton Mathys*
 Married Single Widowed Other
Residence: *R. P. Geneva, Ind.*
Charge to:
Address:
Order given by:
(or informant)
How Secured:
If Veteran, State War:
Occupation:
(Social Security Number)
Employer and Address: *Central Day*
Date of Death: *Aug. 13, 1954* *9:00 P.*
(Date) (Hour)
Date of Birth: *Sept. 30, 1894*
Age: *59*
(Years) (Months) (Days)
Date of Funeral: *Aug. 15, 1954 Sun* *2:00 P.*
(Date) (Day of Week) (Hour)
Services at: *Hardy First Home*
Clergyman: *Rev. Schmidt, Geneva*
(Address)
Religion of the Deceased:
Birthplace: *Berna, Ind.*
Resided in the State:
(or U. S. or City or County) (Years) (Months)
Place of Death: *Garner Co. Hospital*
Cause of Death: *Cerebral embolism*
Contributory Causes: *Left ventricular failure, pulmonary congestion*
Certifying Physician: *Dr. Burk*
(or Coroner)
His Address: *Decatur, Ind.*
Name of Father: *Fred Mathys*
His Birthplace: *Berna, Switzerland*
Maiden Name of Mother: *Lydia Klappenstein*
Her Birthplace: *Indiana*
Motor Ship } Remains to:
Size of Casket: *Monument - Full Inter*
(State Color and Number)
Manufactured by: *Batesville Casket Co.*
Cemetery: *Riverside*
Cemetery:
Lot No.:
Grave No.:
Section No.:
Block No.:
Owner:
Diagram of Lot or Vault: 00332

Name of Deceased
 Residence
 Charge to
 Address
 Order given by
 How Secured
 If Veteran, State War
 Occupation
 Employer and Address
 Date of Death
 Date of Birth
 Age
 Date of Funeral
 Date of Birth
 Age
 Date of Funeral
 Services at
 Clergyman
 Religion of the Deceased
 Birthplace
 Resided in the State
 Cause of Death
 Contributory Causes
 Certifying Physician
 His Address
 Name of Father
 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
 Cemetery
 Lot No.
 Grave No.
 Section No.
 Block No.
 Owner
 Diagram of Lot or Vault