

	Hardy & Hardy Funeral Home Record
Name of Deceased	Harmon Leo Merriman
Page Number	Page 152
Marital Status	Married
Residence	
Charge To	
Address	
How Secured	
If Veteran, State War	
Occupation	Farmer
Social Security No.	
Employer and Address	
Date of Death	Feb. 3, 1951; 3:00 p.m.
Date of Birth	August 8, 1884
Age	66 years
Date of Funeral	Feb. 6, 1951; Tuesday; 10:00 a.m.
Services At	Phoenix, EUB
Clergyman	Rev. Earl Vane
Religion of the Deceased	
Birthplace	South Whitley, Indiana
Resided in the State	
Place of Death	At home
Cause of Death	Coronary Thrombosis
Contributory Cause	Severe hypertension; Arthritis
Certifying Physician	Dr. Jas. V. Schetgen
His Address	Geneva, Indiana
Name of Father	John E. Merriman
His Birthplace	
Maiden Name of Mother	Margaret Syck??
Her Birthplace	
Motor/Ship Remains To	
Size of Casket	Grey Oak; Pink Int.
Manufactured By	F. H. Hill Co.
Cemetery	South Whitley, Indiana
Lot No.	
Grave No.	
Section No.	
Block No.	
Owner	

RECORD OF FUNERAL

Funeral No. 152 Yearly No. _____ Date of Entry Feb

Name of Deceased Harmon Lee Missionan
 Married Single Widowed Divorced

Residence: _____ Husband Wife Widow } Chla
Age of Husband _____

Charge to: _____
Address: _____

Order given by: _____ (or Informant)
How Secured: _____

If Veteran, State War _____
Occupation Farmer

Employer and Address _____
Date of Death Feb 3, 1937 3:00 P.M. Elizabeth

Date of Birth Aug 6, 1887
Age 66 (Years) (Months) (Days)

Date of Funeral 2-6-37 10:00 A.M.
Services at Phonix E. U. B.

Clergyman Rev. Earl Voss
Religion of the Deceased _____

Birthplace South Whitley, Ind.
Resided in the State _____

Place of Death At home
Cause of Death _____

Contributory Causes Severe hypertension
Arteriosclerosis

Certifying Physician Dr. Jay V. Schitzen
His Address Geneva, Ind.

Name of Father John E. Missionan
His Birthplace _____

Maiden Name of Mother Margaret Schitzen
Her Birthplace _____

Motor Ship } Remains to _____
Size of Casket Gray Oak Pine Int.

Manufactured by B. F. N. Hill, Cal.
Cemetery South Whitley, Ind.

Funeral No. 151 Yearly No. _____ Date of Entry _____

Name of Deceased _____
 Married Single

Residence: _____
Age of Husband or Wife (if _____)

Charge to: _____
Address: _____

Order given by: _____ (or Informant)
How Secured: _____

If Veteran, State War _____
Occupation Oil Man

Employer and Address _____
Date of Death Jan 28, 1935

Date of Birth Aug 7, 1875
Age 75 (Years) (Months) (Days)

Date of Funeral 1-30-35 _____
Services at Woodsy Fair

Clergyman Rev. Earl Voss
Religion of the Deceased Cath.

Birthplace New York
Resided in the State _____

Place of Death At Home
Cause of Death General

Contributory Causes Severe
Failing organs

Certifying Physician Dr. C. C. ...
His Address Geneva, Ind.

Name of Father Jacob
His Birthplace _____

Maiden Name of Mother Henri
Her Birthplace _____