

Hardy & Hardy Funeral Home
Record

Name of Deceased	Rachel Ann Myers
Page Number	Page 15
Marital Status	Married
Residence	Bryant, Ind.
Charge To	James Myers
Address	Bryant, Ind.
Order Given By	James Myers
How Secured	(blank)
If Veteran, State War	(blank)
Occupation	(blank)
Social Security Number	(blank)
Employer and Address	(blank)
Date of Death	February 18, 1947; 7:55 P.M.
Date of Birth	September 8, 1889
Age	58 years
	February 21, 1947; Friday; 2:00 P.M.
Date of Funeral	
Services At	Hardy Funeral Home
Clergyman	Rev. Paul Logan
Religion of the Deceased	(blank)
Birthplace	Indiana
Resided in the State	(blank)
Place of Death	Bryant, Ind.
Cause of Death	Carcinoma of Breast
Contributory Cause	(blank)
Certifying Physician	Dr. C. P. Hinchman
His Address	Geneva, Ind.
Name of Father	Harvey Perry
His Birthplace	Indiana
Maiden Name of Mother	Josephine McClellan
Her Birthplace	Indiana
Motor/Ship Remains To	(blank)
Size of Casket	Oak
Manufactured By	(blank)
Cemetery	Gravel Hill
Lot No.	(blank)
Grave No.	(blank)
Section No.	(blank)
Block No.	(blank)
Owner	(blank)

RECORD OF FUNER

Total No. pg 15 Yearly No.

Name of Deceased Lockett Ann Myer
 Married Single Widowed Divorced

Residence: Bryant, Ind Oklahoma Wis Wyo

Charge to: James M. Myer

Address: Bryant, Ind

Order given by: James M. Myer
(or informant)

How Secured:

If Veteran, State War

Occupation

Employer and Address

Date of Death Feb. 18, 1947 7:55 P.M.
(Date) (Hour)

Date of Birth Sept. 8, 1889
(Date)

Age 58
(Years) (Months) (Days)

Date of Funeral 3/1/47 11:00 A.M.
(Date) (Day of Week) (Hour)

Services at: St. Paul's Episcopal Church

Clergyman: Rev. Paul Lagan
(Address)

Religion of the Deceased

Birthplace Indiana

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

Place of Death Bryant, Ind

Cause of Death Carcinoma of Breast

Contributory Causes

Certifying Physician Dr. C. P. Hinckley
(or Chaplain)

His Address Greensburg, Ind

Name of Father Hardy Perry

His Birthplace Indiana

Maiden Name of Mother Justine M. Cline

Her Birthplace Indiana

Motor Ship } Remains to

Size of Casket Oak
(State Color and Number)

Manufactured by

Cemetery Gravel Hill

Gravemary

Owner

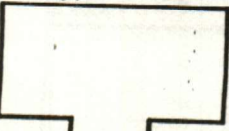


Diagram of Lot or Vault

Lot No.

Grave No.

Section No.

Block No.

Owner

Total No. pg 16

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

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

Motor Ship } Remains to

Size of Casket Oak

Manufactured by

Cemetery Gravel Hill