

	Hardy & Hardy Funeral Home Record
Name of Deceased	Frederick Roe
Page Number	Page 250
Marital Status	Single
Residence	R.R. 1, Geneva, Indiana
Charge To	
Address	
Order Given By	
Spouse	
If Veteran, State War	
Occupation	
Social Security No.	
Employer and Address	
Date of Death	May 4, 1954; 1:10 p.m.
Date of Birth	Dec. 7, 1951
Age	2 years
Date of Funeral	May 7, 1954; Friday; 10:00 a.m.
Services At	Spring Hill Cemetery
Clergyman	Rev. Earl Hartman - city
Religion of the Deceased	Methodist
Birthplace	Blue Creek Township
Resided in the State	
Place of Death	Adams County Hospital
Cause of Death	Bilateral Lobar Pneumonia
Contributory Cause	
Certifying Physician	Dr. Jas. V. Schetgen
His Address	Geneva, Indiana
Name of Father	Raymond Roe
His Birthplace	
Maiden Name of Mother	Lila Lee Gibbons
Her Birthplace	
Motor/Ship Remains To	
Size of Casket	
Manufactured By	Mid West Casket Co.
Cemetery	Spring Hill Cemetery
Lot No.	
Grave No.	
Section No.	
Block No.	
Owner	

Total No. 250 Yearly No. _____

Name of Deceased Frederick Rae

Married Single Widowed Divorced

Residence RR 1, Mandeville, Ind.

Charge to Raymond Rae

Address RR 1, Mandeville

Order given by _____ (or informant)

How Secured _____

If Veteran, State War _____

Occupation _____ (Social Security Number) _____

Employer and Address _____

Date of Death May 4, 1954 1:10 P.
(Date) (Hour)

Date of Birth Dec 7, 1951
(Date)

Age 2
(Years) (Month) (Days)

Date of Funeral 5-7-1954 Fri 10:00 A.
(Date) (Day of Week) (Time)

Services at Spring Hill Cemetery

Clergyman Rev. Earl Hartman
(Address)

Religion of the Deceased Methodist

Birthplace Blue Creek, Ind.

Resided in the State _____ (or U. S. or C. or Country) (Years) (Months)

Place of Death Adams Co. Hospital

Cause of Death Bilateral Lobes

Contributory Causes Pneumonia

Certifying Physician Dr. J. V. Schetsen
(or Coroner)

His Address Geneva

Name of Father Raymond Rae

His Birthplace _____

Maiden Name of Mother Bea Lee Gibbons

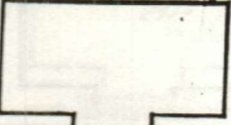
Her Birthplace _____

Motor Ship } Remains to _____

Size of Casket _____

Manufactured by Mid West Caskets Co
(State, Color and Number)

Cemetery } Spring Hill
Crematory }



Lot No. _____

Grave No. _____

Section No. _____

Block No. _____

Owner _____

Diagram of Lot or Vault