

	Hardy & Hardy Funeral Home Record
Name of Deceased	Mark Anthony Whetstone
Date of Entry	
Page Number	Page 293
Marital Status	Single
Residence	
Charge To	
Address	
Order Given By	
Spouse	
If Veteran, State War	
Occupation	
Social Security No.	
Employer and Address	
Date of Death	August 18, 1955; 12:00
Date of Birth	August 17, 1955
Age	
Date of Funeral	August 19, 1955; Friday; 10:00 a.m.
Services At	Graveside
Clergyman	Roger Lautzenheiser
Religion of the Deceased	
Birthplace	Jay County Hospital
Resided in the State	
Place of Death	Jay County Hospital
Cause of Death	??
Contributory Cause	Prematurity
Certifying Physician	Dr. Jas. V. Schetgen
His Address	Geneva, Indiana
Name of Father	Alen Whetstone
His Birthplace	Jay County Hospital
Maiden Name of Mother	Grace Smith
Her Birthplace	
Motor/Ship Remains To	
Size of Casket	
Manufactured By	Mid West
Cemetery	Gravel Hill
Note	
Grave No.	
Section No.	
Block No.	
Owner	

The Form

Form No. 293 *Walter H. Heston*

Name of Deceased *Walter H. Heston*

Residence _____

Charge to _____

Address _____

Order given by _____

How Secured _____

If Veteran, State War _____

Occupation _____

Employer and Address _____

Date of Death *Aug. 11, 1955* *Age*

Date of Birth *July 12, 1908*

Age _____

Date of Funeral *Aug. 14, 1955*

Services at *Trinity*

Clergyman *Rev. Roy W. Heston*

Religion of the Deceased _____

Birthplace *Jay Co. Hospital*

Resided in the State _____

Place of Death *Jay Co. Hospital*

Cause of Death *Atelectasis*

Contributory Cause *Pneumonia*

Certifying Physician *Dr. J. H. Heston*

His Address _____

Name of Father *Alex. Heston*

His Birthplace *Jay Co. Ind.*

Maiden Name of Mother *Grace Smith*

Her Birthplace _____

Motor Ship) Remains in _____

Size of Casket _____

Manufactured by *Walter Heston*

Cemetery) *Gravel Hill*

Cemetery) _____

Lot No. _____

Grave No. _____

Section No. _____

Block No. _____

Owner _____

Diagram of Lot or Vault