

Hardy & Hardy Funeral Home  
Record

Name of Deceased	Infant Wickelmen
Page Number	Page 32
Marital Status	Single
Residence	(blank)
Charge To	Arthur Wickelmen
Address	Bryant, Ind. R. R.
Order Given By	Above
How Secured	(blank)
If Veteran, State War	(blank)
Occupation	(blank)
Social Security Number	(blank)
Employer and Address	(blank)
Date of Death	July 01, 1947
Date of Birth	July 01, 1947
Age	Stillborn
Date of Funeral	July 2, 1947; Wednesday; 10:30 A.M.
Services At	Trinity Catholic Church
Clergyman	Rev. Father Wagner
Religion of the Deceased	Catholic
Birthplace	Decatur, Indiana
Resided in the State	(blank)
Place of Death	Adams Co. Hospital
Cause of Death	Stillborn
Contributory Cause	(blank)
Certifying Physician	Dr. D. D. Jones
His Address	Berne, Indiana
Name of Father	Arthur Wickelmen
His Birthplace	Jay Co.
Maiden Name of Mother	Loretta Homer
Her Birthplace	Texas
Motor/Ship Remains To	(blank)
Size of Casket	(blank)
Manufactured By	(blank)
Cemetery	Trinity
Lot No.	(blank)
Grave No.	(blank)
Section No.	(blank)
Block No.	(blank)
Owner	(blank)

# D OF FUNERAL

Date of Entry... June 30 - 1947

Male  
 Female

White  
(What Race)

Husband  Wife  Widow } Minnie Mae Cyle  
Age of Husband or Wife (if living) 73 Years

0932

Yearly No. .... Date of 1

Name of Deceased... Infant Wickelmen  
 Married  Single  Widowed  Divorced

Residence: .....  Husband  of .....

Charge to Arthur Wickelmen

Address... Bryant Ind. R.R.

Order given by... Abade  
(or informant)

How Secured .....

If Veteran, State War .....

Occupation ..... (Social Security Number)

Employer and Address .....

Date of Death... 7/1/47 (Date) (Hour)

Date of Birth... 7/1/47 (Date) (Hour)

Age... Seiborn  
(Years) (Month) (Day)

Date of Funeral... 7/2/47 Wed. 10:30 A.M.  
(Date) (Day of Week) (Hour)

Services at Primitive Catholic Church

Clergyman Rev. Foster Warner  
(Address)

Religion of the Deceased... Catholic

Birthplace... Decatur, Indiana

Resided in the State... (or U. S. or City or County) (Years) (Month)

Place of Death... Adena Co. Hospital

Cause of Death... Stomach

Contributory Causes .....

Certifying Physician... Dr. O. D. Jansal  
(or Physician)

His Address... Berne, Ind.

Name of Father... Arthur Wickelmen

His Birthplace... Ind. Co.

Maiden Name of Mother... Laetitia Warner

Her Birthplace... Texas

(Motor Ship) Remains to .....

Size of Casket... (State Color and Number)

Manufactured by... ..  
Cemetery } Adena  
Crematory }

Lot No. ....  
Grave No. ....  
Section No. ....  
Block No. ....  
Owner .....

Express of Lot or Vault