| | Jahn Funeral Home 1921 Record | | | | |
|-------------------------------|--|--|--|--|--|
| | | | | | |
| Name of Deceased | Lewis Gero | | | | |
| Page Number | No. 258 | | | | |
| Date of Funeral | | | | | |
| Removing Remains | | | | | |
| Embalming | Cost \$15.00 | | | | |
| Shaving & Laying Out | | | | | |
| Casket Number | | | | | |
| Size | | | | | |
| Metal Inner Casket | | | | | |
| Copper | | | | | |
| Zinc | | | | | |
| Handles No. | | | | | |
| Outside Case | | | | | |
| Lining & Pillow Set No. | | | | | |
| Metal Lined Box | | | | | |
| Mountings | | | | | |
| Metal Vault, Style | | | | | |
| Box Mattress | | | | | |
| Burial Robe | | | | | |
| Slippers/Gloves | | | | | |
| Doz. Chairs | | | | | |
| Pers. Attendants & Assistants | | | | | |
| Drapery/Candles | | | | | |
| Pedestals/Rug | | | | | |
| Door Dressing | | | | | |
| Flowers/Palms | | | | | |
| Funeral Notices | | | | | |
| Clergymen/Sexton | | | | | |
| Quartette/Soloist/Organist | | | | | |
| Delivering Box To | Use of box; \$1.00 | | | | |
| Opening Grave | | | | | |
| Vault Charges | | | | | |
| Hearse | | | | | |
| Coaches | Delivering body; \$3.00 | | | | |
| Telegrams/Telephone | | | | | |
| Transportation Expenses | | | | | |
| Date of Death | Jan. 3, 1922 | | | | |
| Place of Death | Adams Co. Infirmary | | | | |
| Place of Funeral | None | | | | |
| Clergyman | None | | | | |
| | Ship to Robert E. Neff Ind. ?? School of | | | | |
| Date of Burial | Med.??? | | | | |
| Where Interred | | | | | |
| Grave/Lot No./ Section | | | | | |
| Location of Grave | | | | | |
| Date of Birth | Unknown | | | | |
| Age | About 50 years | | | | |
| Color | White | | | | |
| Occupation | | | | | |

| Marital Status | Single | | | | |
|-------------------------|----------------------------------|--|--|--|--|
| Birthplace | Ohio | | | | |
| Last Place of Residence | Adams Co. Infirmary | | | | |
| How Long in This State | Switzerland [sic] | | | | |
| Husband/Wife Name | | | | | |
| Father's Name | David Geroe | | | | |
| Country of Birth | Unknown | | | | |
| Mother's Name | Unknown | | | | |
| Country of Birth | Unknown | | | | |
| Physician | C. S. Clark | | | | |
| Cause of Death | Paralysis; contributing cause ?? | | | | |
| Ordered By | B. D. Myers | | | | |
| Charge To | B. D. Myers | | | | |
| When Rendered | Jan. 4, 1922 | | | | |
| Received on Account | March 30, 1922; by ck; \$20.35 | | | | |

| 258 | | | | | | | | |
|---|--------------|-------|--|----------|-------------------------------|----------------------------|---------|--|
| Funeral of Truns Yers | | | | | | | | |
| Date of Funeral | | | | | Hour | | M. | |
| | 1 | | | | 1 | | | |
| Removing Remains | A CONTRACTOR | | - | | Jan. 3 192 | | | |
| Embalming | | | Place of | Death. | adamo en Ir | fermony | ······ | |
| Shaving and Laying Out | | | | | al. None | | | |
| Casket NoSize | | | Clergyman North Statut & Noff Lod mind July 2. | | | | Calle o | |
| | | | Date of Burial Ship to Robert & Maff Sod mining Land | | | | | |
| Metal Inner CasketCopperZinc | | | | | | | | |
| Handles No. | | | Grave or Lot NoSection | | | | | |
| Outside Case, Pine. Chestnut, Oak, Mahogany | | | Location | n of Gra | ave | | | |
| Lining and Pillow Set No. | | | | | | | | |
| Metal Lined Box | | | | | | | | |
| Mountings | | | | | | | | |
| Metal Vault. Style | | | . Dati. | broth. | unknow | | S and a | |
| Box Mattress | | | Age | 5.0. 1 | Years Months | Days. | | |
| Burial Robe | | | Color | wh | Occupat | tion | | |
| SlippersPrsGloves | | | Single, | Marrie | d, Wido w, Widower | La. | | |
| Doz. Chairs | | | | | Shio | | | |
| Personal Attandance and Assistants | T | | Last pla | ce of re | sidence a lana e | v Intern | m | |
| DraperyCandelabraCandles. | | | How long resident of this State Solderland | | | | | |
| Pedestals | | | | | | | | |
| | | | Husband's Name | | | | | |
| CASH EXPENDITURES. | | | Country of Birth | | | | | |
| Door Dressing | | | Mother's Name | | | | | |
| Palms | | | Country of Birth | | | | | |
| Flowers | | 1.000 | 1 | | 6 S xalark | | | |
| | | | Cause of Death Par Chipsis | | | | | |
| | | | Carlse of Death I've any and Sell habre | | | | | |
| Porters and | | | ordered by B. D. My | | | | | |
| Funeral Notices. | | | | | | | | |
| T uneruu Ivouces | | | Charge to | | | | | |
| | | | | enaerea | | | | |
| 117122 | | | | | ECEIVED ON ACCOUNT. | | | |
| Clergyman. | | | Meh | | Buck | 20 | 35 | |
| Sexton | | | . I.R St. (| Q | 10-1-1 | | × | |
| Quartette, SoloistOrganist | | | | | | | | |
| Delivering Box to And Box | | 00 | | | | | | |
| Opening Grave | · | · | | | | | | |
| | | | | | | | | |
| Vault Charges | | | | | | | | |
| Coaches Deling Buly | 3 | 00 | | | ····· | | | |
| Courses. | | | | | | | | |
| | | | | | | | | |
| Telegrams | | | ••••• | | | •••••• | | |
| | | | | | | | | |
| Transportation Expenses | | | | | | | | |
| | | | | | | •••••• | | |
| | | | | | | and the state of the state | | |