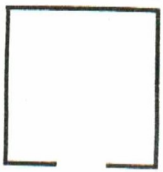


	Zwick Funeral Home Records 1918-1922
Name of Deceased	Oscar Bultemeyer Infant
Removing Remains	
Embalming	
Shaving & Laying Out	
Casket No.	Size 2' 0"; \$10.00
Outside Case	
Handles	None
Lining & Pillow Set	2 yds.
Metal Vault	
Mountings	
Burial Robe	
Slippers	
Candelabra	
Door Dressing	
Flowers	
Funeral Notice	
Hearse	
Coach	To ambulance trip to Ft. Wayne \$10.00
Telephone	
Clergyman	
Vault Charges	
Opening Grave	
Date of Funeral	August 27, 1920
Date of Death	August 27, 1920
Place of Death	Lutheran Hospital, Fort Wayne, Indiana
Place of Funeral	None
Clergyman	
Date of Burial	August 27, 1920
Where Interred	St. John's Lutheran Cemetery
Date of Birth	
Age	0 days
Color	White
Occupation	
Status	Single
Birthplace	Ft. Wayne, Indiana
Last Place of Residence	
How Long Resident of This State	
Husband's/Wife's Name	
Father's Name	Oscar Bultemeyer
Country of Birth	
Mother's Name	
Country of Birth	
Physician	
Cause of Death	
Ordered By	
Charge To	
When Rendered	
Received on Account	May 25, (1927?); by ck \$20.00

Funeral of Oscar Butternut Infant Hour _____ M.
Date of Funeral Aug 27 1920

Removing Remains.....
Embalming.....
Shaving and Laying Out.....
Casket No. Size: 2-2 R.T.R. 1.0 0.0
Metal Inner Casket..... Copper..... Zinc.....
Handles No. None
Outside Case, Pine, Chestnut, Oak, Mahogany.....
Lining and Pillow Set No. 2 yds @ 70c R.T.
Metal Lined Box.....
Mountings..... Handles..... Plate.....
Metal Vault, Style.....
Box Mattress.....
Burial Robe.....
Slippers..... Prs..... Gloves.....
..... Doz. Chairs.....
Personal Attendance and Assistants.....
Drapery..... Candelabra..... Candles.....
Pedestals..... Rug.....

Date of Death Aug 27 1920
Place of Death Luton Norfolk P.T. wayne Pa
Place of Funeral None
Clergyman.....
Date of Burial Aug 27 1920
Where Interred St. Johns, Lutton county
Grave or Lot No..... Section.....
Location of Grave.....
Age..... Years..... Months..... Days.....
Color White Occupation.....
Single, Married, Widow, Widower Widow
Birthplace Lt wayne Pa
Last place of residence.....
How long resident of this State.....
Husband's Name.....
Father's Name Oscar Butternut
Country of Birth.....
Mother's Name.....
Country of Birth.....
Physician.....
Cause of Death.....



CASH EXPENDITURES.

Door Dressing.....
..... Palms.....
Flowers.....
..... Porters and..... Gloves.....
Funeral Notices.....
Clergyman.....
Sexton.....
Quartette, Soloist..... Organist.....
Delivering Box to.....
Opening Grave..... Lining.....
Vault Charges.....
Hearse.....
Coaches T.O. Ambulance Inf. to 7th St 10 00
Telegrams..... Telephone.....
Transportation Expenses.....

Ordered by.....
Charge to.....
When rendered.....

RECEIVED ON ACCOUNT.

June 24/22			
Sept 20/24			
April 5/25			
Aug 12/25			
May 25	Beaschick	20	-
Paid			