

FUNERAL

REGISTER

9/3/29

4/25/33

Sept 3. 1929
to
April 25-1933

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No
No
No

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5.	Ray. George A.
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46	Ray. George A.
64.	Ray. George A.
94	Ray. George A.
118.	Ray. George A.
134	Ray. George A.
154	Ray. George A.
160	Ray. George A.
164	Ray. George A.
183	Ray. George A.
204	Ray. George A.
207.	Ray. George A.
211.	Ray. George A.
217	Ray. George A.
293	Ray. George A.
299.	Ray. George A.

9.	James Hendrick & Scott
10.	Andrew J. Scott
14.	John W. Scott
16.	John W. Scott
18.	John W. Scott
22.	John W. Scott
25.	John W. Scott
32.	John W. Scott
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114.	John W. Scott
116.	John W. Scott
125.	John W. Scott
138.	John W. Scott
139.	John W. Scott
157.	John W. Scott
180.	John W. Scott
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185.	John W. Scott
191.	John W. Scott
194.	John W. Scott
224.	John W. Scott
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RECORD AND BILL OF ITEMS

Yearly No. 52

FOR THE FUNERAL OF

Total to date 604

Hollis R. Cook

Residence 34 Pleasant St Nantucket

Place of Death " " " " Wife or Widow of _____

Date of Birth 1917 June 26 Age { 12 Years { Sex _____ { Color or Race _____
 (Year) (Month) (Day) { 2 Months { Single _____ {
 Date of Death 1929 Sept 21 { 25 Days { Married _____ {
 (Year) (Month) (Day)

Maiden Name _____

Birth-place Nantucket Occupation At School

Name of Father Ernest M. Cook His Birth-place Davis County, Ky.

Maiden Name of Mother Mary V. Seary Her Birth-place Newport R.I.

Cause of Death—Primary Lobar Pneumonia Secondary dilatation of Rt. heart.

Certifying Physician Lewis Residence _____

Place of Burial Nantucket Cemetery St. Marys

Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment Sept 23 1929 Section _____

Ernest M. Cook

Put in the Diagram one mark like this | for every Grave in it. And mark this Burial with double dagger thus: †
 Designate site of monument thus: □

Casket or Coffin No. <u>S. 1547</u>	150 00	Candles	
Size _____ Made by _____		Gloves	
Lining and Pillow Set No. <u>55 white flake</u>		Bearers or Porters	
Handles _____		Hearse to _____	
Plate _____		Removal	
Outside Box or Vault <u>None</u>	15 00	Automobiles <u>John Terry 5-</u>	25 00
Burial Suit _____		<u>L. Dyer 1.7. Griffin</u>	3 00
Slippers _____		Newspaper Notices	225 75
Embalming	30 00		
Washing and Dressing		Transportation Charges	
Shaving <u>Candelabra</u>	2 00	Officiating Clergyman <u>F. Griffin</u>	
Services <u>1 1/2 doz Candles</u>	2 25	Amount of Bill	
Use of Chairs <u>6 pils & loves</u>	1 50	Goods Ordered by	
Church Charges _____		Bill Charged to	253 75
Cemetery Charges <u>Interment</u>	25 00		
Music _____			
Flowers <u>L. Dyer Car</u>	3 00		

DR. 225.75
CR.

			Sept. 26, 1929	Check	253 00
Sept 28.	Pd.	Terry	check no.	889	25.00
" "	" "	L. Dyer	" "	880	3.00

PAID

Sept 26, 1929
Ernest M. Cook

RECORD AND BILL OF ITEMS

Yearly No. 56

FOR THE FUNERAL OF

Total to date 608

John Francis. Meaney.

Residence 465 Washington St. Brookline, Mass.

Place of Death 11 Pearl St. Nantucket. Wife or Widow of Delia H. Meaney.

Date of Birth 1880 (Year) (Month) (Day) Age 49 Years { Sex Male } Color or Race White

Date of Death 1929 (Year) (Month) (Day) Oct. 4. Months { Single } Days { Married Married }

Maiden Name _____ Occupation Private Secretary.

Birth-place Providence R.I. His Birth-place Ireland.

Name of Father Patrick Meaney. Her Birth-place "

Maiden Name of Mother Ann Russell. Cause of Death—Primary Angina Pectoris Secondary _____

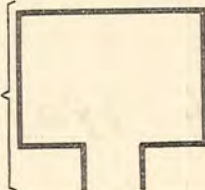
Certifying Physician Lewis Med. Exam. Residence _____

Place of Burial Brookline, Mass. Cemetery _____

Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment Oct 8, 1929 Section _____



Put in the Diagram one mark like this for every Grave in it. And mark this Burial with double dagger thus: †
Designate site of monument thus:

Casket or Coffin No. <u>160.</u>	50	00	Candles		
Size..... Made by.....			Gloves		
Lining and Pillow Set No.....			Bearers or Porters		
Handles			Hearse to		
Plate			Removal		
Outside Box or Vault <u>None</u>	15	00	Automobiles		
Burial Suit			Newspaper Notices		
Slippers					
Embalming	30	00			
Washing and Dressing					
Shaving					
Services <u>Removal from Hotel</u>	5	00			
Use of Chairs <u>" to Boat.</u>	5	00	Transportation Charges		
Church Charges <u>Express to New</u>	4	40	Officiating Clergyman		
Cemetery Charges <u>Bedford.</u>			Amount of Bill		
Music			Goods Ordered by		
Flowers			Bill Charged to		109 40

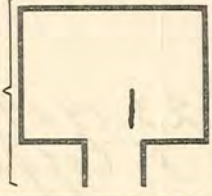
DR. \$ 109.40 CR.

			May 14	1931 Check	109 40
<u>John H. Sacy</u> <u>Brookline</u> <u>Mass.</u>					
<u>27 Harvard St.</u>					
				PAID	
				May 14 1931	
				By	
				<u>John H. Sacy</u>	

RECORD AND BILL OF ITEMS

Yearly No. 60 FOR THE FUNERAL OF Total to date 612

Franklin P. Dunham
Residence 9 W. Chester St. Nantucket.
Place of Death Mass. General Hospital. Wife or Widow of Flora B. Nickerson
Date of Birth 1
Date of Death 1929 Nov 6
Maiden Name
Birth-place Nantucket Occupation Carpenter
Name of Father John H. Dunham His Birth-place Nantucket
Maiden Name of Mother Martha Chase Her Birth-place New York
Cause of Death—Primary Symp. Glastons Secondary Bronch. Pneumonia
Certifying Physician Residence.
Place of Burial Nantucket Cemetery Prospect Hill.
Funeral Service at Lot No. 765
Time of Service Grave No.
Date of Interment Nov. 10. 1929 Section.
Roger F. Dunham.



Put in the Diagram one mark like this for every Grave in it. And mark this Burial with double dagger thus: † Designate site of monument thus: □

Table with columns for items and prices. Includes rows for Casket or Coffin No., Size, Lining and Pillow Set No., Handles, Plate, Outside Box or Vault (Clark 100.00), Burial Suit, Slippers, Embalming, Washing and Dressing, Shaving, Services, Use of Chairs, Church Charges, Cemetery Charges, Music, Flowers, Candles, Gloves, Bearers or Porters (Chairs 2.00), Hearse to Int. (25.00), Removal (From Boat 5.00), Automobiles (5 Cars 25.00), Newspaper Notices, Transportation Charges, Officiating Clergyman (Du Pond), Amount of Bill, Goods Ordered by, Bill Charged to (157.00).

Table with columns for DR. (Debit) and CR. (Credit). Entries include: Rodger Pd. Nov 26 1929 Cash 100.00; Mrs Dunham Pd Dec 11 11 Check 32.00; Total 132.00. Signed: Dec 11/29 Roger F. Dunham.

RECORD AND BILL OF ITEMS

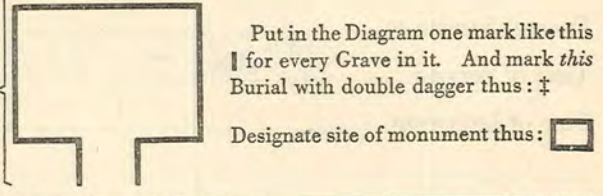
Yearly No. 62

FOR THE FUNERAL OF

Total to date 617

John W. Scott.

Residence Raphine Va.
 Place of Death M. C. Hospital. Wife or Widow of Mary Alice Riley
 Date of Birth 1869 Mar 10 Age 60 Years Sex Male Color of Race Black
 Date of Death 1929 Nov 12 Age 8 Months Single Wid.
 Maiden Name Star. Married 2 Days
 Birth-place Lexington Va. Occupation Laborer
 Name of Father John L. Scott. His Birth-place Rockbridge Co. Va.
 Maiden Name of Mother Nancy Steel Her Birth-place Fairfield Va.
 Cause of Death—Primary Acute regurgitation
 Certifying Physician Star. Residence _____
 Place of Burial Raphine Va. Cemetery _____
 Funeral Service at _____ Lot No. _____
 Time of Service _____ Grave No. _____
 Date of Interment Shipment Nov. 13. Section _____
Jacob R. Scott.



Casket or Coffin No. <u>1145. 12</u>	<u>100 00</u>	Candles	
Size..... Made by.....		Gloves	
Lining and Pillow Set No.		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault <u>Pine</u>	<u>15 00</u>	Automobiles	
Burial Suit		Newspaper Notices	
Slippers		Transportation Charges	
Embalming	<u>30 00</u>	Officiating Clergyman	
Washing and Dressing	<u>5 00</u>	Amount of Bill	
Shaving <u>Rem. from Hosp.</u>	<u>5 00</u>	Goods Ordered by	
Services <u>To Boat.</u>	<u>5 00</u>	Bill Charged to <u>Jacob R. Scott.</u>	<u>151 00</u>
Use of Chairs			
Church Charges			
Cemetery Charges			
Music <u>Death Certificates</u>	<u>1 00</u>		
Flowers			
	<u>151.00</u>		

DR. 151.00 CR.

		<u>Nov. 28. 1929</u>	<u>Check</u>	<u>151 00</u>
<u>Jacob R. Scott.</u>				
<u>141. Richmond St.</u>				
<u>W. Brighton</u>				
<u>N.Y. City</u>				
			<u>Nov. 28. / 29</u>	
			<u>Jacob R. Scott.</u>	

RECORD AND BILL OF ITEMS

Yearly No. 69

FOR THE FUNERAL OF

Total to date 621

Jacinto De Mello

Residence 2 Water St. W. Dartmouth Mass.
 Place of Death St. Lukes Hosp. N.B. Wife or Widow of Anna Mello
 Date of Birth 1
 Date of Death 1929 Dec 20 Age 67 Years { Sex _____ } Color or Race _____
 (Year) (Month) (Day) { _____ Months } { Single _____ }
 { _____ Days } { Married _____ }
 Maiden Name _____
 Birth-place Fericeia Azores Occupation Laborer
 Name of Father Jacinto De Mello His Birth-place St. Michael, Azores
 Maiden Name of Mother Rosa Her Birth-place Fericeia Azores
 Cause of Death—Primary Chronic Myocarditis
 Certifying Physician _____ Residence _____
 Place of Burial Nant. Cemetery St. Marys'
 Funeral Service at _____ Lot No. _____
 Time of Service _____ Grave No. _____
 Date of Interment Dec. 21. 1929 Section _____
Maria Almeida

1

Put in the Diagram one mark like this | for every Grave in it. And mark this Burial with double dagger thus: †
 Designate site of monument thus:

Casket or Coffin No. _____	Candles _____	
Size _____ Made by _____	Gloves _____	
Lining and Pillow Set No. _____	Bearers or Porters _____	
Handles _____	Hearse to <u>Cemetery from Boat</u> <u>25 00</u>	
Plate _____	Removal _____	
Outside Box or Vault _____	Automobiles _____	
Burial Suit _____	Newspaper Notices _____	
Slippers _____	Transportation Charges _____	
Embalming _____	Officiating Clergyman <u>F. Almeida</u>	
Washing and Dressing _____	Amount of Bill _____	
Shaving _____	Goods Ordered by _____	
Services _____	Bill Charged to <u>Maria Almeida</u> <u>25 00</u>	
Use of Chairs _____		
Church Charges _____		
Cemetery Charges _____		
Music _____		
Flowers _____		

DR.

CR.

				<u>Jan 14</u>	<u>1930</u>	<u>check</u>	<u>25</u>	<u>00</u>	

RECEIVED
PAYMENT

Jan 14 1930
Mrs Wm. Almeida

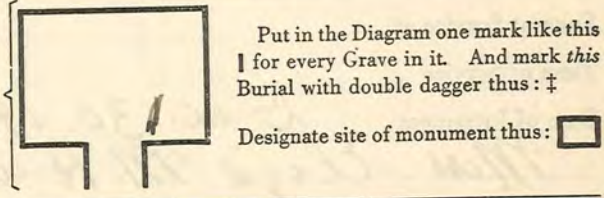
RECORD AND BILL OF ITEMS

Yearly No. 70

FOR THE FUNERAL OF

Total to date 623.

Residence 1. Beaver St. Nantucket.
 Place of Death Nantucket Wife or Widow of Charles S. Norcross
 Date of Birth 1859 Apr. 24 Age { Years { Sex { Color or Race
 Date of Death 1929 Dec. 26 { Months { Single {
 Maiden Name { Days { Married {
 Birth-place Nantucket Occupation At Home
 Name of Father John Morris His Birth-place Nantucket
 Maiden Name of Mother Mary B. Aldrich Her Birth-place Nantucket
 Cause of Death—Primary Cerebral Hem. Secondary _____
 Certifying Physician Collins Residence _____
 Place of Burial Nantucket Cemetery P.H.
 Funeral Service at _____ Lot No. 744
 Time of Service _____ Grave No. _____
 Date of Interment Dec. 29, 1929 Section _____
Edward Norcross



Casket or Coffin No. <u>120</u>	<u>50 00</u>	Candles	
Size..... Made by.....		Gloves	
Lining and Pillow Set No.....		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault <u>None</u>	<u>15 00</u>	Automobiles	
Burial Suit		Newspaper Notices	
Slippers			
Embalming	<u>25 00</u>		
Washing and Dressing			
Shaving			
Services		Transportation Charges	
Use of Chairs		Officiating Clergyman <u>Rogers</u>	
Church Charges	<u>2 00</u>	Amount of Bill	
Cemetery Charges <u>Interment</u>	<u>25 00</u>	Goods Ordered by	
Music		Bill Charged to	<u>\$ 117 00</u>
Flowers			

DR. 117.00 CR.

			Aug 4	1930 a. k. Check	<u>31 00</u>
			Dec 10	" Cash	<u>23 00</u>
Aug 4.	<u>31 00</u>		June 6	1931. "	<u>15 00</u>
	<u>86 00</u>		Aug 24	1931. Check	<u>48 00</u>
Dec 10	<u>23 00</u>				
	<u>63 00</u>				
	<u>15 00</u>				
	<u>48 00</u>				
					<u>\$ 117 00</u>

PAID
 By
Edw W. Norcross
 Adm

RECORD AND BILL OF ITEMS

Yearly No. 6.

FOR THE FUNERAL OF

Total to date 630

Willis Higgins

Residence 15 Milk St. Nantucket 4170

Place of Death N. C. Hospital Wife or Widow of Getta (Folger) Higgins

Date of Birth 1 May 20 Age 85 Years Sex Male Color or Race Retired 1120

Date of Death 1930 Jan 28 Age 8 Months Single

Maiden Name Age 8 Days Married X

Birth-place Eastham, Mass Occupation Sight House Repair 40 yrs

Name of Father Jessiah Higgins His Birth-place Eastham Mass

Maiden Name of Mother Ann Roddolls Her Birth-place Eastham "

Cause of Death—Primary Carcinoma of Prostrate gland & Bladder (Uremia) Secondary

Certifying Physician Collins Residence

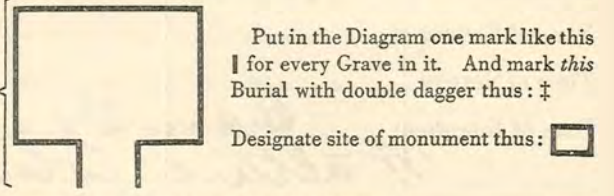
Place of Burial Provincetown, Cemetery

Funeral Service at Lot No.

Time of Service Grave No.

Date of Interment Feb. 1, 1930 Section

Mrs. Suzzie A. Lovel, Somerville, Mass



Casket or Coffin No. <u>285-5</u>	150 00	Candles	
Size Made by		Gloves	
Lining and Pillow Set No.		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault <u>Pine</u>	15 00	Automobiles	
Burial Suit		Newspaper Notices	
Slippers		<u>Ticket to Woods Hole</u>	1 75
Embalming	25 00	<u>Shirt & Collar</u>	2 25
Washing and Dressing	5 00		212 00
Shaving <u>Rem. from Hosp</u>	5 00		
Services <u>To House</u>	5 00	Transportation Charges	
Use of Chairs <u>Boat</u>	5 00	Officiating Clergyman <u>Bent</u>	
Church Charges <u>Chairs</u>	2 00	Amount of Bill	216 00
Cemetery Charges		Goods Ordered by	
Music		Bill Charged to <u>J. Y. Deacon</u>	216 00
Flowers			

DR. \$212.00
CR.

				Feb 17	1930. Check		216 00

RECEIVED
FEB 17 1930
J. Y. Deacon
Adm.

RECORD AND BILL OF ITEMS

Yearly No. 11.

FOR THE FUNERAL OF

Total to date 635.

Elizabeth E. Giddings Ross

Residence 41 Pearl St. Nantucket

Place of Death " " " Wife or Widow of Thomas A. Ross

Date of Birth 1 843 Jan 28 Age 87 Years { Sex Female } Color or Race
 (Year) (Month) (Day) { Months 0 } { Single Yes }
 Date of Death 1930 Feb 20 { Days 23 } { Married No }

Maiden Name

Birth-place Sudlow Vt. Occupation Home work

Name of Father Daniel Sawyer His Birth-place New Hampshire

Maiden Name of Mother Sarah E. Batchelder Her Birth-place " "

Cause of Death—Primary Cerebral Hem Secondary

Certifying Physician Folger Residence

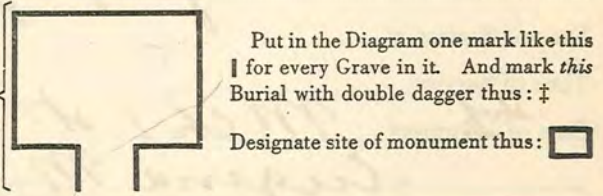
Place of Burial Sudlow Vt. Cemetery

Funeral Service at Lot No.

Time of Service Grave No.

Date of Interment Shipment Feb 23 Section

Dr. George A. Folger



Casket or Coffin No. <u>2855</u>	<u>950 00</u>	Candles	
Size..... Made by.....		Gloves	
Lining and Pillow Set No.....		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault <u>Pine</u>	<u>15 00</u>	Automobiles	
Burial Suit		Newspaper Notices	
Slippers		Transportation Charges	
Embalming	<u>25 00</u>	Officiating Clergyman	
Washing and Dressing	<u>5 00</u>	Amount of Bill	
Shaving		Goods Ordered by	
Services <u>Removal to Boat</u>	<u>5 00</u>	Bill Charged to <u>Mrs. Geo. A. Folger</u>	<u>200 00</u>
Use of Chairs			
Church Charges			
Cemetery Charges			
Music			
Flowers			

DR. 9200 00 CR.

	Nov. 26	1930	cash	200 00

RECEIVED
PAYMENT

Nov 26, 1930
Geo. A. Folger. M.D.

RECORD AND BILL OF ITEMS

Yearly No. 32

FOR THE FUNERAL OF

Total to date 656

William F. Merson

Residence 109 Hollis St Long Island N.Y.

Place of Death " " " " " " Wife or Widow of Carrie J. Murphy

Date of Birth 1 (Year) 19 (Month) 3 (Day)

Date of Death 1930 (Year) May (Month) 3 (Day)

Maiden Name _____

Age { 76 Years { Sex _____ { Color or Race _____
 { _____ Months { Single _____
 { _____ Days { Married X

Birth-place Boston Mass Occupation House Painter 1825

Name of Father Alexander Merson His Birth-place Nova Scotia

Maiden Name of Mother Mary Ann Anstie Her Birth-place England

Cause of Death—Primary Cancer of face Secondary _____

Certifying Physician _____ Residence _____

Place of Burial Nantucket Cemetery Prospect Hill

Funeral Service at _____ Lot No. 3

Time of Service _____ Grave No. _____

Date of Interment May 5, 1930 Section _____

Put in the Diagram one mark like this | for every Grave in it. And mark this Burial with double dagger thus: †

Designate site of monument thus:

Seroy Merson

Casket or Coffin No. _____	Candles _____
Size _____ Made by _____	Gloves _____
Lining and Pillow Set No. _____	Bearers or Porters _____
Handles _____	Hearse to _____
Plate _____	Removal <u>Interment from 300 ft</u> <u>30 00</u>
Outside Box or Vault _____	Automobiles <u>1 Ferry 1 Car</u> <u>5 00</u>
Burial Suit _____	Newspaper Notices _____
Slippers _____	Transportation Charges _____
Embalming _____	Officiating Clergyman _____
Washing and Dressing _____	Amount of Bill _____
Shaving _____	Goods Ordered by _____
Services _____	Bill Charged to _____ <u>35.00</u>
Use of Chairs _____	
Church Charges _____	
Cemetery Charges _____	
Music _____	
Flowers _____	

DR.	CR.
	May 5 Rec Cash <u>35 00</u>
	Pd to Ferry Cash May 5 <u>5 00</u>
<u>Mr Seroy Merson</u> <u>109-21-260th St.</u> <u>Between Hollis Ave & 108th Ave</u> <u>Hollis, Long Island</u> <u>N.Y.</u>	<u>30 00</u>
	<div style="border: 2px solid red; padding: 5px; display: inline-block;"> RECEIVED PAYMENT May 5, 1930 Seroy Merson </div>

RECORD AND BILL OF ITEMS

Yearly No. 37

FOR THE FUNERAL OF

Total to date 661.

Eliza A. Cornie.

Residence 17 York St. Nantucket.

Place of Death " " " " Wife or Widow of Agula Cornie.

Date of Birth 1881 May 19 (Year) (Month) (Day) Age 49 Years { Sex _____ } Color or Race _____
 { _____ Months } Single _____
 { _____ Days } Married X

Date of Death 1930 May 19 (Year) (Month) (Day)

Maiden Name Eliza A. Crocker

Birth-place Nantucket Occupation Housewife

Name of Father Frederick F. Crocker His Birth-place Nantucket

Maiden Name of Mother Marion Appleton Her Birth-place Nantucket

Cause of Death—Primary Metastatic Secondary Carcinoma of Left Breast.

Certifying Physician Lewis Residence _____

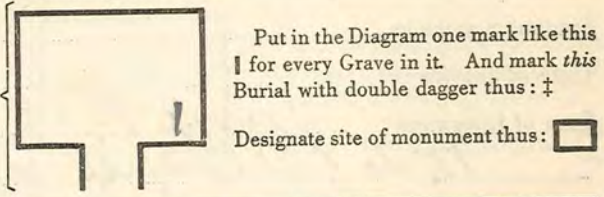
Place of Burial Nantucket Cemetery Prospect Hill

Funeral Service at _____ Lot No. 579

Time of Service _____ Grave No. _____

Date of Interment May 22, 1930 Section _____

Agula Cornie.



Casket or Coffin No. <u>515.7 12</u>	300 00	Candles	
Size..... Made by.....		Gloves	
Lining and Pillow Set No.....		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault <u>Clark Vault.</u>	100 00	Automobiles <u>Wood 3.</u>	15 00
Burial Suit		<u>Jury 2</u>	10 00
Slippers		Newspaper Notices <u>R.R. Ladden 1</u>	5 00
Embalming	25 00	<u>Carlton West 1.</u>	5 00
Washing and Dressing	5 00		
Shaving			455 00
Services		Transportation Charges	
Use of Chairs		Officiating Clergyman <u>Dr. Pond.</u>	
Church Charges <u>No Charge</u>		Amount of Bill	
Cemetery Charges <u>Interment</u>	25 00	Goods Ordered by	
Music		Bill Charged to	\$ 490 00
Flowers			

DR.

455 00

CR.

			May 29	Check					490 00
		Paid Wood.	May 29	Check no. 969.					35 00
									455 00

RECEIVED
PAYMENT

May 29 1930
Agula Cornie.

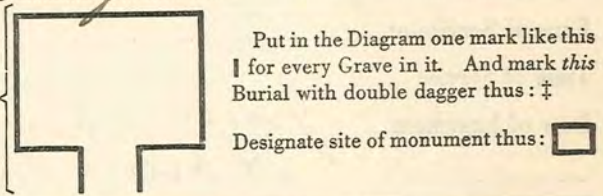
RECORD AND BILL OF ITEMS

Yearly No. 41

FOR THE FUNERAL OF

Total to date 666.

Residence 12 Washington St Nantucket
 Place of Death N.C. Hospital ~~Wife of~~ Widow of Amelia Corrie
 Date of Birth 1 (Year) June (Month) 16 (Day)
 Date of Death 1930 (Year) June (Month) 16 (Day) Age { 72 Years { Sex _____ { Color or Race _____
 { _____ Months { Single _____ { _____
 { _____ Days { Married _____ { _____
 Maiden Name _____
 Birth-place Fogo Cape Verde Occupation Stone keeper
 Name of Father Joseph Fernandes His Birth-place Fogo Cape Verde
 Maiden Name of Mother Clara Fernandes Her Birth-place Fogo
 Cause of Death—Primary Cerebral Hemiplegia Secondary _____
 Certifying Physician Lewis (Med Ex) Residence _____
 Place of Burial Nantucket Cemetery St. Mary's
 Funeral Service at _____ Lot No. _____
 Time of Service _____ Grave No. _____
 Date of Interment June 20, 1930 Section _____
Manuel Cosmo



Casket or Coffin No. <u>1145 12</u>	<u>100 00</u>	Candles	<u>2 00</u>
Size..... Made by.....		Gloves <u>4 pairs</u>	<u>1 00</u>
Lining and Pillow Set No.....		Bearers or Porters <u>Candelabra</u>	<u>2 00</u>
Handles.....		Hearse to.....	
Plate.....		Removal.....	
Outside Box or Vault <u>Pine</u>	<u>15 00</u>	Automobiles <u>J. Perry - Priest</u>	<u>3 00</u>
Burial Suit.....		Newspaper Notices.....	<u>180 00</u>
Slippers.....	<u>25 00</u>		
Embalming.....	<u>5 00</u>		
Washing and Dressing.....			
Shaving.....			
Services.....			
Use of Chairs.....		Transportation Charges.....	
Church Charges.....		Officiating Clergyman <u>J. Griffin</u>	
Cemetery Charges <u>Interment</u>	<u>25 00</u>	Amount of Bill.....	
Music <u>Removal from Hosp</u>	<u>5 00</u>	Goods Ordered by.....	
Flowers <u>" To house</u>	<u>5 00</u>	Bill Charged to <u>Mrs. Antonia Sylvia</u>	<u>188 00</u>
<u>180.00</u>			

DR. 180.00 CR.

			<u>July 11, 1930</u>	<u>Cash</u>	<u>188 00</u>
			<u>" 12</u>	<u>pd Perry</u>	<u>3 00</u>
					<u>185 00</u>
<u>Mrs Antonia Sylvia</u>					
<u>Vineyard Haven</u>					
<u>P.O. Box 216 Summer St</u>					
RECEIVED PAYMENT					
<u>July 11, 1930</u>					
<u>J. M. Daniel Cosmo</u>					

RECORD AND BILL OF ITEMS

Yearly No. 44

FOR THE FUNERAL OF

Total to date 668

Elizabeth R. Coffin

Residence 22 July St Nantucket

Place of Death N. C. Hospital Wife or Widow of _____

Date of Birth 1 Sept Age 79 Years Sex _____ Color or Race _____

Date of Death 1930 June 21 9 Months Single X Married _____

Maiden Name _____ Days _____

Birth-place New York Occupation Artist

Name of Father Andrew G Coffin His Birth-place Nantucket

Maiden Name of Mother Elizabeth Shinn Her Birth-place Brooklyn N.Y.

Cause of Death—Primary Cerebral Arterio Sclerosis Secondary Right Hemiplegia

Certifying Physician Fine Residence _____

Place of Burial Brooklyn N.Y. Cemetery Friends

Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment June 25/30 Section _____

Put in the Diagram one mark like this
| for every Grave in it. And mark this
Burial with double dagger thus: †
Designate site of monument thus: □

Casket or Coffin No. <u>515 12</u>	250 00	Candles	
Size _____ Made by _____		Gloves	
Lining and Pillow Set No. _____		Bearers or Porters	
Handles _____		Hearse to	
Plate _____		Removal	
Outside Box or Vault <u>Chestnut</u>	50 00	Automobiles <u>1 Taxi Car for Ministers</u>	1 00
Burial Suit _____		Newspaper Notices	
Slippers _____			
Embalming	5 00		
Washing and Dressing	30 00		
Shaving <u>Removal from Hosp</u>	5 00		
Services <u>to Boat</u>	5 00		
Use of Chairs	3 00	Transportation Charges	
Church Charges <u>Rem to House</u>	5 00	Officiating Clergyman <u>Dr Pond</u>	
Cemetery Charges		Amount of Bill	354 00
Music		Goods Ordered by	
Flowers		Bill Charged to	

DR. 353.00 CR.

	Jan 20. 1931	Check.	354 00
<i>Helen C. Buchanan</i>			
<i>14 Hillbury Rd.</i>			
<i>Searsdale</i>			
<i>N.Y.</i>			
<div style="border: 2px solid red; padding: 5px; display: inline-block; color: red; font-weight: bold;">RECEIVED</div> <i>Jan 20, 1931</i> <i>The Bank of America</i> <i>16 Court St</i> <i>Brooklyn</i> <i>N.Y.</i>			

RECORD AND BILL OF ITEMS

Yearly No. 69

FOR THE FUNERAL OF

Total to date 693

Residence 18 Gardner St. 15 yrs
Annie Gordon Pooler

Place of Death " " " Wife or Widow of Louis J Pooler

Date of Birth 1870 Sept 30 (Year) (Month) (Day) Age 60 Years Sex Female Color or Race
Date of Death 1930 Dec 3 (Year) (Month) (Day) 2 Months Single
3 Days Married

Maiden Name Arnie G Paddack Birth-place New York City Occupation Housewife

Name of Father James Paddack His Birth-place New York

Maiden Name of Mother Frances Gordon Her Birth-place New York

Cause of Death—Primary Suicide by Secondary illuminating gas.

Certifying Physician Lewis Medvey Residence _____

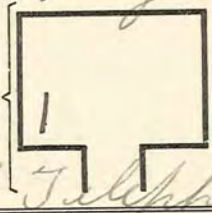
Place of Burial Nantucket Cemetery St. Marys

Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment Dec. 5, 1930 Section _____

Louis G. Pooler Riverside Drive Telephone Cathedral 7138



Put in the Diagram one mark like this | for every Grave in it. And mark this Burial with double dagger thus: † Designate site of monument thus: □

Casket or Coffin No. <u>2597 mahg</u>	<u>350 00</u>	Candles	
Size _____ Made by _____		Gloves	
Lining and Pillow Set No. _____		Bearers or Porters	
Handles _____		Hearse to _____	
Plate _____		Removal _____	
Outside Box or Vault <u>Clark Vault</u>	<u>100 00</u>	Automobiles <u>V.H. Wood 1.</u>	<u>5. 00</u>
Burial Suit _____		<u>Corpor for Meade</u>	<u>5. 00</u>
Slippers _____		Newspaper Notices _____	
Embalming _____	<u>35 00</u>	Transportation Charges _____	
Washing and Dressing _____		Officiating Clergyman <u>Fr. Meade</u>	
Shaving <u>Rem from House</u>	<u>5 00</u>	Amount of Bill _____	
Services <u>to House</u>	<u>5 00</u>	Goods Ordered by _____	
Use of Chairs _____		Bill Charged to <u>Louis G Pooler</u>	<u>538 00</u>
Church Charges _____			
Cemetery Charges <u>Int</u>	<u>25 00</u>		
Music <u>opening grave</u>	<u>5 00</u>		
Flowers <u>Candlesticks & Candles</u>	<u>3 00</u>		

4528 00

DR.

CR.

			<u>June 4, 1934</u>	
			<u>Herbert E. Hunziker</u>	
			<u>Attorney</u>	
			<u>Falmouth</u>	
			<u>Mass.</u>	

RECEIVED PAYMENT
June 4, 1934

Herbert E. Hunziker
Attorney
Falmouth
Mass.

RECORD AND BILL OF ITEMS

Yearly No. 75

FOR THE FUNERAL OF

Total to date 699

Anna Maria White

Residence Orange St Nantucket

Place of Death 269 Central Ave Abington Wife or Widow of Frank White

Date of Birth 1 (Year) 1 (Month) 1 (Day) Age { 67 Years { Sex _____ { Color or Race _____

Date of Death 1930 (Year) June (Month) 19 (Day) Age { 9 Months { Single _____ { _____

Maiden Name Annie M Folger Days { 10 Days { Married X { _____

Birth-place Nantucket Occupation Housekeeper

Name of Father Reuben S Folger His Birth-place Nantucket

Maiden Name of Mother Sydia F. Nicholson Her Birth-place Nantucket

Cause of Death—Primary Myocarditis Secondary _____

Certifying Physician _____ Residence _____

Place of Burial Nantucket Cemetery Newtown

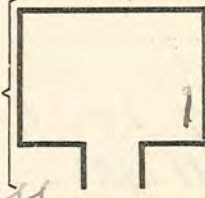
Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment Jan. 2, 1931 Section _____

Put in the Diagram one mark like this | for every Grave in it. And mark this Burial with double dagger thus: †

Designate site of monument thus:



Casket or Coffin No. _____	Candles _____		
Size _____ Made by _____	Gloves _____		
Lining and Pillow Set No. _____	Bearers or Porters _____		
Handles _____	Hearse to <u>Interment</u>	25	00
Plate _____	Removal <u>From Boat</u>	5	00
Outside Box or Vault _____	Automobiles <u>J.H. Wood car</u>	5	00
Burial Suit _____	Newspaper Notices _____		
Slippers _____	Transportation Charges _____		
Embalming _____	Officiating Clergyman <u>Rogers</u>		
Washing and Dressing _____	Amount of Bill _____		
Shaving _____	Goods Ordered by _____		
Services _____	Bill Charged to _____	35	00
Use of Chairs _____			
Church Charges _____			
Cemetery Charges _____			
Music _____			
Flowers _____			

30 00	
237 00	
267 00	

CR.

267 00	
30 00	
237 00	

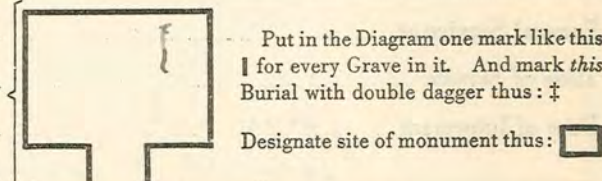
DR.

<u>Mrs Gertrude E. Howard</u>	<u>Nov</u>	<u>26</u>	<u>1938</u>	<u>Money order</u>	10	00
<u>269 Central Ave</u>						
<u>Abington Mass</u>						

RECORD AND BILL OF ITEMS

Yearly No. 8. FOR THE FUNERAL OF John N. Nicoletas. Total to date 707.

Residence 18 Fair St. Nantucket 13 yrs On U.S. 30 yrs
 Place of Death N.C. Hospital. Wife or Widow of _____
 Date of Birth 1882 Apr 14 Age 49 Years Sex Single Color or Race _____
 Date of Death 1931 Jan 23 Age 9 Months Sex Single Color or Race _____
 Maiden Name _____ Age 9 Days Sex Married Color or Race _____
 Birth-place Vassara Sparta Greece Occupation Retail Merchant
 Name of Father John N. Nicoletas His Birth-place Vassara Sparta, Greece
 Maiden Name of Mother Sophia Her Birth-place " " "
 Cause of Death—Primary Loba Pneumonia Secondary Chronic Myocarditis
 Certifying Physician _____ Residence _____
 Place of Burial _____ Cemetery _____
 Funeral Service at Single Grave in Lot No. 280
 Time of Service _____ Grave No. _____
 Date of Interment Jan 25, 1931 Section _____
George Nicoletas



Casket or Coffin No. <u>160 2014</u>	100 00	Candles	
Size <u>20"</u> Made by _____		Gloves	
Lining and Pillow Set No. _____		Bearers or Porters	
Handles _____		Hearse to _____	
Plate _____		Removal	
Outside Box or Vault <u>Pine</u>	15 00	Automobiles	
Burial Suit _____		Newspaper Notices	
Slippers _____	30 00		
Embalming _____			
Washing and Dressing _____			
Shaving <u>Removal from Hosp</u>	5 00	<u>Grave in P.H. Cemetery</u>	5 00
Services <u>To House</u>	5 00		
Use of Chairs _____		Transportation Charges	180 00
Church Charges _____		Officiating Clergyman <u>Blogett & Masons</u>	
Cemetery Charges <u>Interment</u>	25 00	Amount of Bill	
Music _____		Goods Ordered by _____	
Flowers _____		Bill Charged to _____	185 00

CR. 233 00 DR. 180.00 CR.

	185.00	Feb 12	1931. Check D. 507.	82 50
	110 25	" 14	" " Comp	27 75
	<u>74.75</u>			<u>110.25</u>
	15 00 Cars	Mch 5c	Rec Check Masons	84 75
	<u>89 75</u>			<u>195 00</u>
Paid Wood mch 7. Check no 1066				
" West " " " " 1067				

RECEIVED PAYMENT
 BY Odd Fellows Masons

RECORD AND BILL OF ITEMS

Yearly No. 27

FOR THE FUNERAL OF

Total to date 726

Cora Fisher Orpin

Residence Washington St. Nantucket

Place of Death " Wife or Widow of William E Orpin

Date of Birth 1879 March 9 Age 52 Years Sex Divorced Color or Race

Date of Death 1931 March 18 Age 0 Months Single

Maiden Name Cora Fisher Age 8 Days Married

Birth-place Nantucket Occupation House keeper

Name of Father Joseph S. Fisher His Birth-place Nantucket

Maiden Name of Mother Hannah Morton Her Birth-place Sandwich

Cause of Death—Primary Accidental Secondary electrocution from live wire

Certifying Physician Lewis Med. Ex. Residence

Place of Burial Nantucket Cemetery St. Mary's

Funeral Service at Single grave back of graveyard Lot No.

Time of Service March 20, 1931 Grave No.

Date of Interment Lawrence M. Burridge Section

Put in the Diagram one mark like this for every Grave in it. And mark this Burial with double dagger thus: †

Designate site of monument thus: □

Casket or Coffin No. <u>160-20</u>	100 00	Candles
Size..... Made by.....		Gloves
Lining and Pillow Set No.		Bearers or Porters
Handles		Hearse to
Plate		Removal
Outside Box or Vault <u>Pine</u>	15 00	Automobiles
Burial Suit <u>Grey dress</u>	20 00	Newspaper Notices
Slippers		Transportation Charges
Embalming	30 00	Officiating Clergyman <u>J. Griffin</u>
Washing and Dressing	5 00	Amount of Bill
Shaving <u>Congelation of Candles</u>	4 00	Goods Ordered by <u>Burridge</u>
Services <u>Chrissomals</u>	5 00	Bill Charged to <u>Phoebe A. Tracy</u>
Use of Chairs <u>1 Day</u>	1 00	
Church Charges		
Cemetery Charges <u>Interment</u>	25 00	
Music		
Flowers		
DR.		CR.
204 00		

	Jan 4	1932 Check	206 00
Called about 3-45 P.M.			
face bruised slightly and purging from mouth and nostrils			
Burn on Abdomen	8 in X 02"		
" " left Breast	6.7 X 02"		
left hand burned badly			
thumb missing			
		PAID	
		Jan 5, 1932	
		By Phoebe A. Tracy Adm	

RECORD AND BILL OF ITEMS

Yearly No. 33

FOR THE FUNERAL OF

Total to date 732

Harriett A. Ayers.

Residence *15 Liberty St.*

Place of Death *N. C. Hospital* Wife or Widow of *John C. Ayers*

Date of Birth *1858 Aug 15* Age *62* Years Sex *Female* Color or Race *Wid.*

Date of Death *1931 Apr 13* *7* Months Single

Maiden Name *Harriett A. Feely* *29* Days Married

Birth-place *Ireland* Occupation *Cook, Private family*

Name of Father *Thomas Feely* His Birth-place *Ireland*

Maiden Name of Mother *Ellen Brennan* Her Birth-place *Ireland*

Cause of Death—Primary *Carcinoma of left breast* Secondary *Siticaemia*

Certifying Physician *Lewis* Residence

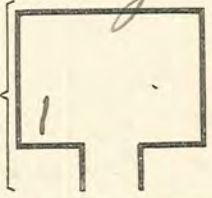
Place of Burial *Nantucket* Cemetery *St. Marys*

Funeral Service at Lot No.

Time of Service Grave No.

Date of Interment *Apr 16 1931* Section

Walter Ayers.



Put in the Diagram one mark like this | for every Grave in it. And mark this Burial with double dagger thus: †

Designate site of monument thus:

Casket or Coffin No. <i>515¹²</i>	<i>200 00</i>	Candles <i>3 doz @ .125</i>	<i>375 75</i>
Size..... Made by.....		Gloves <i>6 pr</i>	<i>1 50</i>
Lining and Pillow Set No.		Bearers or Porters	<i>365 00</i>
Handles		Hearse to	<i>370 25</i>
Plate		Removal	
Outside Box or Vault <i>Clark</i>	<i>100 00</i>	Automobiles <i>Jerry 500 1-300</i>	<i>8 00</i>
Burial Suit		<i>Wood 1</i>	<i>5 00</i>
Slippers		Newspaper Notices <i>Please Ayers</i>	<i>5 00</i>
Embalming	<i>25 00</i>	<i>R. S. Gladden</i>	<i>5 00</i>
Washing and Dressing	<i>5 00</i>		
Shaving		Transportation Charges	
Services <i>Transfers</i>	<i>10 00</i>	Officiating Clergyman <i>J. Griffin</i>	
Use of Chairs		Amount of Bill	<i>393 25</i>
Church Charges		Goods Ordered by	
Cemetery Charges <i>Interment</i>	<i>25 00</i>	Bill Charged to	
Music			
Flowers			

DR.	<i>365.00</i>	CR.
		<i>Apr 24 1931 Check</i>
		<i>393 25</i>
		<i>Prof Cars May</i>
		<i>23 00</i>
		<i>370 25</i>
		PAID
		<i>Apr. 24. 1931</i>
		<i>Lester C. Ayers.</i>

RECORD AND BILL OF ITEMS

Yearly No. 42

FOR THE FUNERAL OF

Total to date 741

Sarah E. Francis

Residence 9. North Water St.
 Place of Death N.C. Hospital
 Date of Birth 1 855 Nov 2
 Date of Death 19 31 May 15
 Maiden Name Sarah E. Fisher
 Birth-place Nantucket
 Name of Father Henry B. Fisher
 Maiden Name of Mother Maria Chase
 Cause of Death—Primary Chronic Myo. Secondary Broncho Pneumonia
 Certifying Physician Collins
 Place of Burial Nantucket
 Funeral Service at
 Time of Service
 Date of Interment May 17-1931
 Joseph H. Francis

Wife or Widow of James O. Francis
 Age 75 Years 6 Months 13 Days
 Sex Divorced
 Color or Race
 Occupation House work over home
 His Birth-place Edgartown
 Her Birth-place Nantucket
 Residence
 Cemetery Newtown
 Lot No.
 Grave No.
 Section

Put in the Diagram one mark like this | for every Grave in it. And mark this Burial with double dagger thus: †
 Designate site of monument thus: □

Casket or Coffin No. 160	75 00	Candles	
Size Made by		Gloves	
Lining and Pillow Set No.		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault Pine	15 00	Automobiles	
Burial Suit Dress	20 00	Newspaper Notices	
Slippers	25 00	Transportation Charges	
Embalming	5 00	Officiating Clergyman Snelling	
Washing and Dressing	5 00	Amount of Bill	
Shaving Removal from Hosp.	5 00	Goods Ordered by	
Services " To Church	5 00	Bill Charged to Joseph H. Francis	175 00
Use of Chairs			
Church Charges			
Cemetery Charges Interment	25 00		
Music			
Flowers			

DR. \$ 175.00 CR.

Aug 15. 1931. Check 175 00

PAID

Aug 15. 1931
 By Joseph H. Francis, Cash

RECORD AND BILL OF ITEMS

Yearly No. 58

FOR THE FUNERAL OF

Total to date 757.

Mary Silvia Santos.

Residence Cool Fish Park, Scarsd. & yrs.

Place of Death " " " " " " " " " " " "

Date of Birth 1884 May 10 (Year) (Month) (Day)

Date of Death 1931 July 19 (Year) (Month) (Day)

Maiden Name Mary Silvia

Wife or Widow of Tony Santos.

Age { 47 Years { Sex { }
 { 2 Months { Single { }
 { 9 Days { Married { } Color or Race { }

Birth-place Lyons Occupation House work.

Name of Father John Silvia His Birth-place Lyons

Maiden Name of Mother Emily Carolina Her Birth-place Lyons

Cause of Death—Primary Carcinoma of Secondary Stomach

Certifying Physician F. O'Leary Residence _____

Place of Burial Nantucket Cemetery St. Mary's

Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment July 22, 1931 Section _____

Tony Santos.

1

Put in the Diagram one mark like this | for every Grave in it. And mark this Burial with double dagger thus: †
 Designate site of monument thus: □

Casket or Coffin No. <u>Steel Delaware</u>	100	00	Candles		
Size _____ Made by _____			Gloves		
Lining and Pillow Set No. _____			Bearers or Porters		
Handles _____			Hearse to _____		
Plate _____			Removal		
Outside Box or Vault <u>Pine</u>	15	00	Automobiles		
Burial Suit _____			Newspaper Notices		
Slippers <u>4 pair Blones</u>	1	00			
Embalming	25	00			
Washing and Dressing	5	00			
Shaving _____					
Services <u>5 trips to Scarsd.</u>	15	00	Transportation Charges		
Use of Chairs _____			Officiating Clergyman <u>Fr. Griffin</u>		
Church Charges <u>Cont. from Scarsd.</u>	30	00	Amount of Bill	196	75
Cemetery Charges <u>Candelabra</u>	2	00	Goods Ordered by <u>Tony Santos.</u>		
Music <u>3 Doz Candles @ 1.25</u>	3	75	Bill Charged to <u>" "</u>	196	75
Flowers _____					

DR. \$ 196.75 CR.

<u>Rec from Judge Poland June 25</u>			<u>1951 Check Dev Deavichu</u>	59	00
<u>Cash \$ 20.00</u>			<u>51 Cash John Stanchigh</u>	59	00
			<u>29 " John Santos</u>	59	00
<u>196.75</u>					
<u>20</u>					
<u>176.75</u>					
			PAID		

RECORD AND BILL OF ITEMS

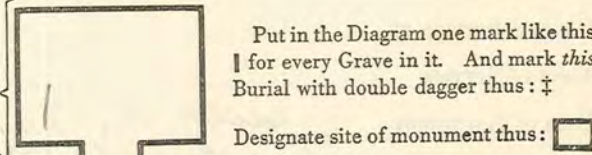
Yearly No. 63

FOR THE FUNERAL OF

Total to date 762

Celia M. Bearse

Residence 145 Main St. Nantucket
 Place of Death " " " " Wife or Widow of Elijah F. Bearse
 Date of Birth 1849 Jan. 27 Age 82 Years Sex { } Color or Race { }
 Date of Death 1931 July 31 Age 6 Months Single { }
 Maiden Name Celia M. Long 4 Days Married X
 Birth-place Nantucket Occupation Housework
 Name of Father George H. Long His Birth-place Nantucket
 Maiden Name of Mother Hannah B. Willey Her Birth-place Asterville
 Cause of Death—Primary Arteriosclerosis Secondary { }
 Certifying Physician Folger Residence { }
 Place of Burial Nantucket Cemetery North
 Funeral Service at { } Lot No. 170
 Time of Service { } Grave No. { }
 Date of Interment Aug 2, 1931 Section { }
 Kate M. Gupthil 15 Eaton St. Revere Mass.



Casket or Coffin No. 195-12	100 00	Candles	
Size Made by		Gloves	
Lining and Pillow Set No.		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault Pine	15 00	Automobiles	
Burial Suit		Newspaper Notices	
Slippers			
Embalming	25 00		
Washing and Dressing	5 00		
Shaving			
Services			
Use of Chairs	3 00	Transportation Charges	
Church Charges		Officiating Clergyman Rogus	
Cemetery Charges Interment	25 00	Amount of Bill	
Music Duplicate Certificate	1 00	Goods Ordered by Kate Gupthil	
Flowers		Bill Charged to Elijah F. Bearse	174 00

DR. 8174.00 CR.

	134 00	Oct 14	31 - check	40 00
	124 00	" 15	" Cash	10 00
	74 00	Nov 13	check	50 00
Bal.	34 00	Dec 12	"	40 00
	24 00	Feb 17	" Cash	10 00
Bal.	14 00	Mar 8	" "	10 00
Bal.	4 00	" 21	" "	10 00
	00 00	Apr. 8	" "	4 00
				174 00

RECEIVED PAYMENT
 Elijah F. Bearse

RECORD AND BILL OF ITEMS

Yearly No. 66 FOR THE FUNERAL OF Total to date 765.

George C. Dickson

Residence 677 Mass Ave. Boston 15 Lily St. Nant.

Place of Death Nantucket Cottage Hosp. Wife or Widow of Ann M. Murphy.

Date of Birth 1 (Year) Aug (Month) 7 (Day)

Date of Death 1931 (Year) Aug (Month) 7 (Day)

Maiden Name _____

Age { 71 Years { Sex _____ { Color or Race _____
 { _____ Months { Single _____ {
 { _____ Days { Married X {

Birth-place Boston, Mass Occupation Lawyer.

Name of Father John Dickson His Birth-place Ireland.

Maiden Name of Mother Isabel Her Birth-place England.

Cause of Death—Primary Cerebral Hem. Secondary _____

Certifying Physician Folger. Residence _____

Place of Burial Boston Cemetery Forest Hill

Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment Aug 10. 1931. Section _____

Anth. M. Dickson

Put in the Diagram one mark like this | for every Grave in it. And mark this Burial with double dagger thus: †

Designate site of monument thus:

Casket or Coffin No. _____	250 00	Candles _____	
Size _____ Made by _____		Gloves _____	
Lining and Pillow Set No. _____		Bearers or Porters _____	
Handles _____		Hearse to _____	
Plate _____		Removal _____	
Outside Box or Vault <u>Chestnut</u>	35 00	Automobiles _____	
Burial Suit _____		Newspaper Notices _____	
Slippers _____			
Embalming _____	30 00		
Washing and Dressing _____	5 00		
Shaving _____			345 00
Services <u>Transfer from Hosp</u>	5 00	<u>Collar shirt & socks</u>	2 50
Use of Chairs <u>to Boat</u>	5 00	Transportation Charges <u>2 tickets to Boston</u>	11 27
Church Charges _____		Officiating Clergyman _____	
Cemetery Charges _____		Amount of Bill _____	358 77
Music _____		Goods Ordered by <u>Ann M. Dickson</u>	
Flowers _____		Bill Charged to _____	358 77

DR. 7 345.00 CR.

				Sept 15	31. check				8 358 77

RECEIVED
PAYMENT

Sept. 15. 1931
Ann M. Dickson

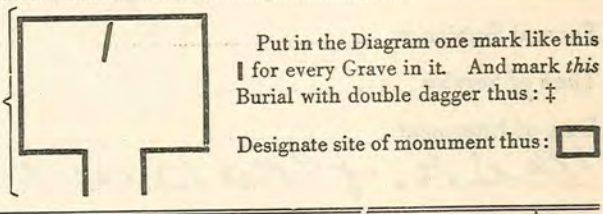
RECORD AND BILL OF ITEMS

Yearly No. 70

FOR THE FUNERAL OF

Total to date 769.

Residence Lincoln Burgess
109 Main St. Nantucket
 Place of Death M. C. Hospital Wife or Widow of Ellen H. Coffin
 Date of Birth 1862 Aug 9 Age 69 Years { Sex } Color or Race
 Date of Death 1931 Aug 23 { 0 Months } Single
 Maiden Name { 14 Days } Married X
 Birth-place Nantucket Occupation Butcher Retired 9 yrs
 Name of Father Richard E. Burgess His Birth-place Nantucket
 Maiden Name of Mother Catherine Smith Her Birth-place
 Cause of Death—Primary Carcinoma of stomach Secondary with abdominal metastases
 Certifying Physician Fine Residence
 Place of Burial Nantucket Cemetery P.H.
 Funeral Service at Lot No. 594
 Time of Service Grave No.
 Date of Interment Aug 25, 1931 Section
Ellen H. Burgess



Casket or Coffin No. <u>515¹²</u>	<u>250 00</u>	Candles	
Size..... Made by.....		Gloves	
Lining and Pillow Set No.....		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault <u>Pine</u>	<u>15 00</u>	Automobiles	
Burial Suit		Newspaper Notices	
Slippers			
Embalming	<u>30 00</u>	Transportation Charges	
Washing and Dressing	<u>5 00</u>	Officiating Clergyman <u>Pickett</u>	
Shaving <u>Transfer from Hosh</u>	<u>5 00</u>	Amount of Bill	
Services <u>" to House</u>	<u>5 00</u>	Goods Ordered by <u>Mrs Ellen Burgess</u>	
Use of Chairs <u>3 00</u>	<u>3 00</u>	Bill Charged to <u>Ethel Mackernan</u>	<u>338 00</u>
Church Charges			
Cemetery Charges <u>Interment</u>	<u>25 00</u>		
Music			
Flowers			
	<u>338.00</u>		

DR.

CR.

			<u>Mch 19 1932 check</u>	<u>175 00</u>
	<u>175 00</u>		<u>Aug 5 1932 "</u>	<u>63 00</u>
	<u>63 00</u>		<u>Feb 13 1933 "</u>	<u>50 00</u>
	<u>50 00</u>		<u>Mch 17 1933 check</u>	<u>50 00</u>
	<u>338 00</u>			<u>338 00</u>
	<u>288 00</u>			
	<u>50 00</u>			

RECEIVED PAYMENT

Ethel Mackernan

RECORD AND BILL OF ITEMS

Yearly No. 80

FOR THE FUNERAL OF

Total to date 779.

Ellouise Adams

Residence 17 Fair St Nantucket.

Place of Death " " " " Wife or Widow of "

Date of Birth 1857 Sept. 20 Age 74 Years Sex " Color or Race "

Date of Death 1931 Sept. 26 Age 0 Months Single X

Maiden Name " Age 6 Days Married "

Birth-place Nantucket. Occupation Milliner Retired 5 yrs

Name of Father Alden H. Adams His Birth-place Catuit

Maiden Name of Mother Electa M. Hinkle Her Birth-place Bourne

Cause of Death—Primary Chronic Myocarditis Secondary Broncho Pneumonia

Certifying Physician Collins Residence "

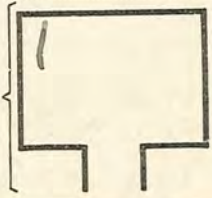
Place of Burial Nantucket Cemetery P.H.

Funeral Service at " Lot No. 475

Time of Service " Grave No. "

Date of Interment Sept 28, 1931 Section "

Nancy Adams



Put in the Diagram one mark like this | for every Grave in it. And mark this Burial with double dagger thus: † Designate site of monument thus: □

Casket or Coffin No. <u>195¹²</u>	<u>100 00</u>	Candles	
Size		Gloves	
Lining and Pillow Set No.		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault <u>Pine</u>	<u>15 00</u>	Automobiles	
Burial Suit		Newspaper Notices	
Slippers		Transportation Charges	
Embalming	<u>25 00</u>	Officiating Clergyman <u>Pickett</u>	
Washing and Dressing	<u>5 00</u>	Amount of Bill	
Shaving		Goods Ordered by	
Services		Bill Charged to <u>Nancy Adams</u>	<u>172 00</u>
Use of Chairs			
Church Charges	<u>2 00</u>		
Cemetery Charges <u>Interment</u>	<u>25 00</u>		
Music			
Flowers			

\$172.00

DR.

CR.

Nov 19 1931 Check #172 00

RECEIVED PAYMENT
 Nov 19 1931
 Nancy S Adams
 RECEIVED PAYMENT

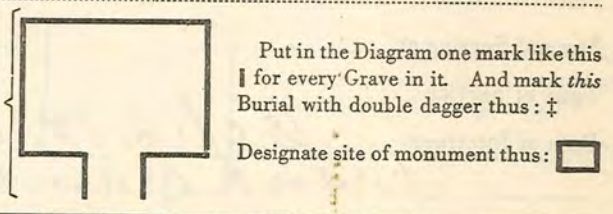
RECORD AND BILL OF ITEMS

Yearly No. 82

FOR THE FUNERAL OF

Total to date 781.

Residence Seland Hotel, Detroit Mich
 Place of Death Sanbaly Rd Seonset 4 mi. S. Wife or Widow of _____
 Date of Birth 1 878 Feb 19 Age 54 Years { Sex _____ } Color or Race _____
 Date of Death 19 31 Sept 28 { 7 Months } Single X
 Maiden Name _____ { 9 Days } Married _____
 Birth-place Celina Ohio Occupation Bonds salesman, Retired 2 yu
 Name of Father John J. McAfee His Birth-place Celina Ohio
 Maiden Name of Mother Minnie Schneiders Her Birth-place " "
 Cause of Death—Primary Heart failure Secondary Coronary Sclerosis
 Certifying Physician Lewis, Med. Ex. Residence _____
 Place of Burial Toledo Ohio Cemetery _____
 Funeral Service at _____ Lot No. _____
 Time of Service _____ Grave No. _____
 Date of Interment _____ Section _____



Casket or Coffin No. <u>195¹²</u>	<u>100 00</u>	Candles	
Size..... Made by.....		Gloves	
Lining and Pillow Set No.....		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault <u>Pine</u>	<u>15 00</u>	Automobiles	
Burial Suit		Newspaper Notices	
Slippers			
Embalming	<u>30 00</u>		
Washing and Dressing	<u>5 00</u>		
Shaving		<u>Duplicate Death Certificate</u>	<u>2 00</u>
Services <u>Transfer from Seonset</u>	<u>10 00</u>		<u>165 00</u>
Use of Chairs <u>to Boat</u>	<u>5 00</u>	<u>Transportation Charges 2 tickets Boston</u>	<u>8 52</u>
Church Charges		Officiating Clergyman	
Cemetery Charges		Amount of Bill	<u>175 52</u>
Music		Goods Ordered by <u>Wm J Chittendon</u>	
Flowers		Bill Charged to <u>S. Loyd McAfee</u>	<u>175 52</u>

DR. 165.00

CR.

			<u>Jan. 3.</u>	<u>1933 Check</u>	<u>87. 98</u>
	<u>S. Loyd McAfee</u>				
	<u>733 Security Bank Bld</u>				
	<u>Toledo Ohio</u>				
	<u>Jan 31 1933 received from</u>				
	<u>Detroit Trust Co.</u>	<u>\$87.98</u>			
	<u>allowed by Probate Court</u>				

RECORD AND BILL OF ITEMS

Yearly No. 89

FOR THE FUNERAL OF

Total to date 788

George W. Hooper.

Residence *Broad St. Nantucket.*

Place of Death *O.S.S. City of Birmingham* Wife or Widow of *Hannah England*

Date of Birth *1856* *Nov* *6* Age *75* Years Sex *Male* Color or Race *1931*

Date of Death *1931* *Nov* *7* Age *0* Months Single *1931*

Maiden Name *Nantucket* Days *1* Married *75*

Birth-place *Nantucket* Occupation *Hotel owner*

Name of Father *Simon A. Hooper* His Birth-place *Ashburnham 1856*

Maiden Name of Mother *Mary J. Coffin* Her Birth-place *Nantucket*

Cause of Death—Primary *Acute Cardiac* Secondary *dilatation (Myocarditis)*

Certifying Physician *G. H. Johnson* Residence *Savannah, Ga.*

Place of Burial *Nantucket* Cemetery *Prospect Hill*

Funeral Service at *Nantucket* Lot No. *267*

Time of Service *Nov. 14, 1931* Grave No. *1*

Date of Interment *Nov. 14, 1931* Section *Mary J. Long*

Put in the Diagram one mark like this for every Grave in it. And mark this Burial with double dagger thus: †

Designate site of monument thus:

Casket or Coffin No.		Candles	
Size	Made by	Gloves	
Lining and Pillow Set No.		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault		Automobiles <i>Wood 2</i>	<i>10 00</i>
Burial Suit		<i>Terry 2</i>	<i>10 00</i>
Slippers <i>Transfer from Boat</i>	<i>5 00</i>	Newspaper Notices	
Embalming		<i>Sign and Insure Papers</i>	<i>1 50</i>
Washing and Dressing			
Shaving			
Services <i>Personal</i>	<i>10 00</i>	<i>Toll Calls & Telegrams</i>	<i>8 93</i>
Use of Chairs	<i>3 00</i>	Transportation Charges <i>Express</i>	<i>87 60</i>
Church Charges		Officiating Clergyman <i>Red Man</i>	
Cemetery Charges <i>Interment</i>	<i>25 00</i>	Amount of Bill	<i>48 00</i>
Music <i>Opening Grave</i>	<i>5 00</i>	Goods Ordered by	
Flowers		Bill Charged to	<i>166 03</i>

DR.

48.00

CR.

<i>Robert C Miller</i>	<i>43 Isabella St</i>	<i>Melrose</i>	<i>Mass</i>	<i>Feb 23, 1932</i>	<i>check</i>	<i>166 03</i>
<i>Mr Frank H Chambers</i>	<i>49 Fellmore Rd</i>	<i>Malden</i>	<i>Mass</i>	<i>Feb 23, 1932</i>	<i>check</i>	

RECEIVED PAYMENT
Feb 23, 1932
Frank H Chambers
Atty.

RECORD AND BILL OF ITEMS

Yearly No. 29

FOR THE FUNERAL OF

Total to date 823

Otis W. Crowell

Residence *4 Mulberry St - 9 yrs*

Place of Death " " " " " " " "

Date of Birth *1 857 July 13* (Year) (Month) (Day)

Date of Death *19 32 Apr 19* (Year) (Month) (Day)

Age { *74* Years { Sex { } Color or Race {
 { *9* Months { Single { }
 { *6* Days { Married *X* { }

Maiden Name _____

Birth-place *Dennisport* Occupation *Carpenter*

Name of Father *Otis Crowell* His Birth-place *Dennisport*

Maiden Name of Mother *Betsy Kelley* Her Birth-place " "

Cause of Death—Primary *Chronic Myo.* Secondary *Chronic Interstitial Nephritis*

Certifying Physician *Roberts* Residence _____

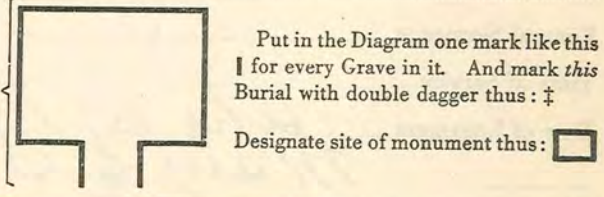
Place of Burial *Dennisport* Cemetery *Swanlake*

Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment *Apr 21/32* Section _____

Mrs M. J. Crowell



Casket or Coffin No. <i>115 B-12</i>	<i>100 00</i>	Candles	
Size Made by		Gloves	
Lining and Pillow Set No.		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault <i>Pine</i>	<i>15 00</i>	Automobiles	
Burial Suit <i>Black</i>	<i>15 00</i>	Newspaper Notices	
Slippers		Transportation Charges	
Embalming	<i>30 00</i>	Officiating Clergyman <i>Johnson</i>	
Washing and Dressing	<i>5 00</i>	Amount of Bill	
Shaving		Goods Ordered by	
Services <i>Transfer to Boat</i>	<i>5 00</i>	Bill Charged to <i>Mrs M. J. Crowell</i>	<i>170 00</i>
Use of Chairs			
Church Charges			
Cemetery Charges			
Music			
Flowers			

DR. *170.00*

CR.

1935	Mrs M. J. Crowell	Aug 17.	C. check money order	50 00
(last address)	2012 N. Main St.	Dec 12.	" checks	32 13
	Middleborough	June 13.	31 " "	18 22
new address 7	Lowell Mass	" 13	33 money order	10 00
		Aug 24	" check	13 22
	<i>170.00</i>	Mch 20	34. check 13.22 m. order 11.78	25 00
	<i>50.00 Cr.</i>	" 7	35 money order 6.43	6 43
	<i>120 00 Bal.</i>			
	<i>32 13 Cr.</i>			
	<i>87.87 Bal.</i>			
	<i>23.22</i>			
	<i>64.65 Bal</i>			
	<i>13.22</i>			
	<i>51.43 Bal</i>			
	<i>25.60</i>			
	<i>26.43</i>			
	<i>6.73</i>			
	<i>20.00 Bal.</i>			
	<i>18.57</i>			
	<i>1.43</i>			

PAID
By Mrs M. J. Crowell

RECORD AND BILL OF ITEMS

Yearly No. 33

FOR THE FUNERAL OF

Total to date 827

Residence West York St.
 Place of Death "
 Date of Birth 1 (Year) May (Month) 3 (Day)
 Date of Death 1932 (Year) May (Month) 3 (Day)
 Maiden Name "
 Birth-place Fogo, Cape Verde
 Name of Father Henry Heberu
 Maiden Name of Mother Catherine
 Cause of Death—Primary Pulmonary Embolism
 Certifying Physician Collins
 Place of Burial Nantucket
 Funeral Service at "
 Time of Service "
 Date of Interment May 5, 1932
 Wife or Widow of John M. Deluz
 Age 43 Years { Sex " } Color or Race Colored
 { Months " } Single {
 { Days " } Married X }
 Occupation Housewife
 His Birth-place Fogo
 Her Birth-place "
 Residence "
 Cemetery Newtown
 Lot No. "
 Grave No. "
 Section "
 Put in the Diagram one mark like this | for every Grave in it. And mark this Burial with double dagger thus: †
 Designate site of monument thus:

Casket or Coffin No. <u>1065 St. Del.</u>	<u>100 00</u>	Candles	
Size <u>"</u> Made by <u>"</u>		Gloves	
Lining and Pillow Set No. <u>"</u>		Bearers or Porters	
Handles <u>"</u>		Hearse to <u>"</u>	
Plate <u>"</u>		Removal <u>From Hospital</u>	<u>5 00</u>
Outside Box or Vault <u>Pine</u>	<u>15 00</u>	Automobiles <u>Trans to house</u>	<u>5 00</u>
Burial Suit <u>Grey Dress</u>	<u>20 00</u>	Newspaper Notices	<u>197 50</u>
Slippers <u>"</u>		Transportation Charges	
Embalming <u>of services</u>	<u>35 00</u>	Officiating Clergyman <u>Johnson</u>	<u>207 50</u>
Washing and Dressing		Amount of Bill	<u>207 50</u>
Shaving		Goods Ordered by <u>John M. Deluz</u>	<u>207 50</u>
Services		Bill Charged to <u>John M. Deluz</u>	<u>207 50</u>
Use of Chairs			
Church Charges			
Cemetery Charges <u>Interment</u>	<u>25 00</u>		
Music <u>"</u>			
Flowers <u>Door Spray</u>	<u>2 50</u>		
	<u>197 50</u>		

DR.

CR.

	<u>207 50</u>	<u>May 23, 1932</u>	<u>Cash</u>	<u>130 00</u>
	<u>130 00</u>		<u>"</u>	<u>10 00</u>
	<u>077 50</u>	<u>" 25</u>	<u>1939</u>	<u>"</u>
	<u>10 00</u>			
	<u>67 50</u>			
	<u>10 00</u>			
	<u>57 00</u>			

RECORD AND BILL OF ITEMS

Yearly No. 45.

FOR THE FUNERAL OF

Total to date 839.

Darius C. Coombs.

Residence 4 W. York St. 17 yrs
 Place of Death " " " " Wife or Widow of Ruth West.
 Date of Birth 1 886 Nov 28 { 46 Years { Sex _____ { Color or Race _____
 (Year) (Month) (Day) { 6 Months { Single _____
 Date of Death 1932 June 24 { 27 Days { Married 1 _____
 (Year) (Month) (Day)
 Maiden Name _____
 Birth-place Mashpee Occupation Fisherman
 Name of Father Oakes C. Coombs His Birth-place Mashpee
 Maiden Name of Mother Amanda Hicks Her Birth-place "
 Cause of Death (Primary) Broncho Pneum. Secondary _____
 Certifying Physician Folger Residence _____
 Place of Burial Nantucket Cemetery Prospect Hill
 Funeral Service at _____ Lot No. 225
 Time of Service _____ Grave No. _____
 Date of Interment June 26 1932 Section _____
Ruth Coombs



Put in the Diagram one mark like this | for every Grave in it. And mark this Burial with double dagger thus: †
 Designate site of monument thus:

Casket or Coffin No. <u>285-12</u>	150 00	Candles	
Size..... Made by.....		Gloves	
Lining and Pillow Set No.....		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault <u>Pine</u>	15 00	Automobiles	
Burial Suit		Newspaper Notices	
Slippers			
Embalming <u>Services</u>	35 00		
Washing and Dressing			
Shaving			
Services			
Use of Chairs	2 00	Transportation Charges	
Church Charges		Officiating Clergyman <u>Blogett</u>	
Cemetery Charges <u>Interment</u>	25 00	Amount of Bill	
Music		Goods Ordered by	
Flowers <u>4 Pns Gloves</u>	1 00	Bill Charged to <u>Ruth Coombs</u>	228 00

\$228.00

DR.

CR.

	228 00						
	5 00			Aug 26	1934	Cash	5 00
	223 00			" 21	1935	E. Mansfield	3 00
Memor. bill	3 00						
	220 00						

RECORD AND BILL OF ITEMS

Total to date 842

Yearly No. 48

FOR THE FUNERAL OF

Frank Brooks

Residence 239 W. Canton St Boston

Place of Death 17 Pearl - 1mo Wife or Widow of Carrie Young

Date of Birth 1 May 4 Age 57 Years Sex Male Color or Race Black
(Year) (Month) (Day)

Date of Death 19 July 14 Months Single
(Year) (Month) (Day) Days Married

Maiden Name _____ Occupation Waiter

Birth-place Macon Ga. His Birth-place Unknown

Name of Father John Brooks Her Birth-place _____

Maiden Name of Mother Martha Secondary _____

Cause of Death—Primary Hectic Heart disease

Certifying Physician Frank Residence _____

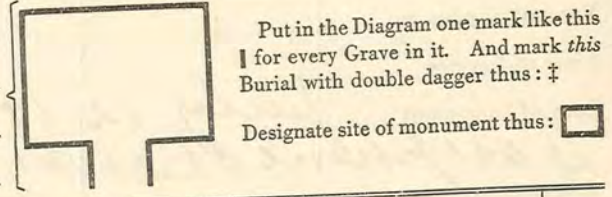
Place of Burial Boston Cemetery _____

Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment _____ Section _____

Mrs Carrie Brooks



Casket or Coffin No. <u>160</u>	<u>75 00</u>	Candles	
Size _____ Made by _____		Gloves	
Lining and Pillow Set No. _____		Bearers or Porters	
Handles _____		Hearse to _____	
Plate _____		Removal	
Outside Box or Vault <u>Pine</u>	<u>15 00</u>	Automobiles	
Burial Suit _____		Newspaper Notices	
Slippers _____			
Embalming <u>+ Services</u>	<u>35 00</u>		
Washing and Dressing _____		Transportation Charges	
Shaving <u>Transfer from House</u>	<u>5 00</u>	Officiating Clergyman	
Services <u>to Boat</u>	<u>5 00</u>	Amount of Bill	
Use of Chairs _____		Goods Ordered by <u>Carrie Brooks</u>	
Church Charges _____		Bill Charged to _____	<u>135 00</u>
Cemetery Charges _____			
Music _____			
Flowers _____			
	<u>\$ 135.00</u>		

DR.				CR.
	<u>Mrs Carrie Brooks</u>	<u>July 15</u>	<u>1932 Cash</u>	<u>30 00</u>
	<u>239 W. Canton St</u>	<u>" 30</u>	<u>" Money order</u>	<u>57 00</u>
	<u>Boston</u>	<u>July 10</u>	<u>1933 " "</u>	<u>10 00</u>
		<u>" 24</u>	<u>" " 3</u>	<u>10 00</u>
	<u>135.00</u>	<u>Aug 17</u>	<u>1934 " "</u>	<u>15 00</u>
	<u>57 00</u>	<u>July 3</u>	<u>135 " "</u>	<u>13 00</u>
	<u>48.00 Bal.</u>			
	<u>10 00 money order</u>			
	<u>38 00 Bal.</u>			
	<u>10 00 money order</u>			
	<u>28.00</u>			
	<u>15 00</u>			
	<u>\$ 12.00 Bal.</u>			
			PAID	
			<u>By Mrs Brooks</u>	

RECORD AND BILL OF ITEMS

Yearly No. 56

FOR THE FUNERAL OF

Total to date 850

Agnes A. Brown

Residence 87 Main St. Nantucket

Place of Death M. C. Hospital Wife or Widow of Bayley B. Brown

Date of Birth 1839 Oct 31 Age { 92 Years { Sex { Color or Race
(Year) (Month) (Day)

Date of Death 1932 Aug 7 { 9 Months { Single
(Year) (Month) (Day)

Maiden Name Agnes A. Farmer { 7 Days { Married
(Year) (Month) (Day)

Birth-place New York Occupation None

Name of Father Gordon Farmer His Birth-place New York

Maiden Name of Mother Nancy Frank Her Birth-place New York

Cause of Death—Primary Arteriosclerosis Secondary Senile Dementia

Certifying Physician Menges Residence Prospect Hill

Place of Burial Nantucket Cemetery Prospect Hill

Funeral Service at Lot No. 728

Time of Service Grave No.

Date of Interment Aug 9, 1932 Section West

Put in the Diagram one mark like this
 † for every Grave in it. And mark this
 Burial with double dagger thus: ††

Designate site of monument thus:

Casket or Coffin No. <u>515 12</u>	250 00	Candles	
Size Made by		Gloves	
Lining and Pillow Set No.		Bearers or Porters	
Handles <u>wt.</u>		Hearse to	
Plate		Removal	
Outside Box or Vault <u>Pine</u>	15 00	Automobiles <u>Jerry & Son 1</u>	5 00
Burial Suit		Newspaper Notices <u>N. Y. Times</u>	4 00
Slippers		<u>N. Y. Herald & Tribune</u>	4 00
Embalming <u>Services</u>	35 00		
Washing and Dressing			
Shaving			3 35 00
Services <u>2 Transfers</u>	10 00	Transportation Charges	
Use of Chairs		Officiating Clergyman <u>Pickett</u>	3 48 00
Church Charges <u>Interment</u>	25 00	Amount of Bill	3 48 00
Cemetery Charges		Goods Ordered by <u>Fanny Clark</u>	
Music		Bill Charged to <u>" " John</u>	3 48 00
Flowers			
DR. 335.00			CR.

Miss Fanny Clark	Oct 25	1932 Check	348 00
115 Dwight Place	Nov 3	Pd Jerry Cash	5 00
Inglewood			
N. J.			
<div style="border: 2px solid black; padding: 5px; display: inline-block;"> RECEIVED PAYMENT Oct 25/32 Miss Fanny Clark John </div>			

RECORD AND BILL OF ITEMS

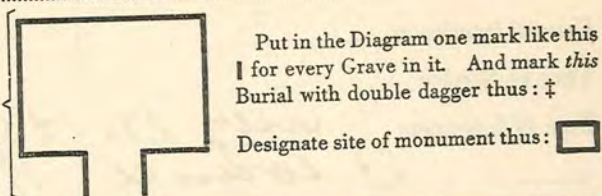
Yearly No. 57

FOR THE FUNERAL OF

Total to date 851

Thaddeus Beal

Residence Lehr Lane Newburg N.Y.
 Place of Death Hulbert Ave. Newburg N.Y. Wife or Widow of Alice S. Dressel
 Date of Birth June 28 1932 (Year) (Month) (Day) Age 62 Years { Sex _____ } Color or Race _____
 Date of Death July 10 1932 (Year) (Month) (Day) { 1 Months } Single _____
 Maiden Name _____ { 13 Days } Married _____
 Birth-place New York City Occupation Pres. Gas & Electric Co.
 Name of Father William R. Beal His Birth-place New York
 Maiden Name of Mother Eleanore Bell Her Birth-place New York
 Cause of Death—Primary Coronary thrombosis Secondary Coronary sclerosis
 Certifying Physician Lewis (Med Ex) Residence _____
 Place of Burial Newburg N.Y. Cemetery Woodlawn
 Funeral Service at _____ Lot No. _____
 Time of Service _____ Grave No. _____
 Date of Interment Aug 11, 1932 Section _____
Alice S. Beal



Casket or Coffin No. <u>120</u>	<u>65 00</u>	Candles	
Size _____ Made by _____		Gloves	
Lining and Pillow Set No. _____		Bearers or Porters	
Handles _____		Hearse to _____	
Plate _____		Removal _____	
Outside Box or Vault <u>Pine</u>	<u>15 00</u>	Automobiles	
Burial Suit _____		Newspaper Notices	
Slippers _____			
Embalming <u>& Services</u>	<u>35 00</u>		
Washing and Dressing _____			
Shaving <u>Transfer to Rooms</u>	<u>5 00</u>		
Services <u>" Boat</u>	<u>5 00</u>		
Use of Chairs <u>2 tickets to N-Budford</u>	<u>3 60</u>	Transportation Charges	
Church Charges _____		Officiating Clergyman	
Cemetery Charges _____		Amount of Bill	
Music <u>Assistant to N-Budford</u>	<u>10 00</u>	Goods Ordered by	
Flowers _____		Bill Charged to <u>Murtfeldt & Calyer</u>	<u>138 60</u>

\$ 138.60

CR.

DR.

					<u>Oct 11, 1932</u>	<u>check</u>	<u>138 60</u>
<u>Murtfeldt & Calyer Inc.</u>		<u>110 Grand St</u>		<u>Newburg N.Y.</u>			

RECORD AND BILL OF ITEMS

Yearly No. 61

FOR THE FUNERAL OF

Total to date 855

Mathew J. Ellis

Residence *11 Gay St. Nantucket 40 yrs*

Place of Death *" " " "* Wife or Widow of *Grace Raymond*

Date of Birth *1868 Sept 23* Age *63* Years Sex *Male* Color or Race

Date of Death *1932 Aug 25* Age *11* Months Sex *Single* Color or Race

Maiden Name *St. Helena* Age *5* Days Sex *Married* Color or Race

Birth-place *St. Helena* Occupation *Cartaker*

Name of Father *Un known* His Birth-place

Maiden Name of Mother *Un known* Her Birth-place

Cause of Death—Primary *Sudden death* Secondary *in sleep Presumably*

Certifying Physician *Sewis. Med. Ex.* Residence *Cerebral Embolism*

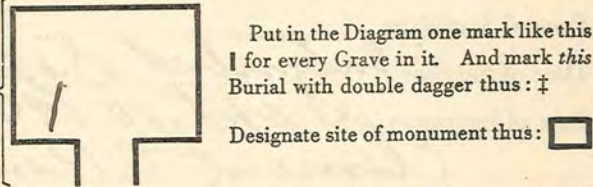
Place of Burial *Nantucket* Cemetery *Prospect Hill*

Funeral Service at Lot No. *543*

Time of Service *Sept. 1, 1932* Grave No. *1*

Date of Interment *Sept. 1, 1932* Section

Sullivan Coffin



Casket or Coffin No. <i>285-2</i>	<i>150 00</i>	Candles	
Size..... Made by.....		Gloves	
Lining and Pillow Set No.....		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault <i>Pine</i>	<i>15 00</i>	Automobiles <i>J Terry</i>	<i>5 00</i>
Burial Suit		Newspaper Notices	<i>230 00</i>
Slippers			
Embalming <i>Services</i>	<i>35 00</i>		
Washing and Dressing			
Shaving			
Services <i>Transfer</i>	<i>5 00</i>		
Use of Chairs <i>No Charge</i>		Transportation Charges	
Church Charges		Officiating Clergyman <i>Odd Fellows</i>	
Cemetery Charges <i>Interment</i>	<i>25 00</i>	Amount of Bill	<i>235 00</i>
Music		Goods Ordered by <i>Sullivan Coffin</i>	
Flowers		Bill Charged to <i>"</i>	<i>235 00</i>

8230.00

DR.		CR.	
		<i>Oct. 1, 1932 Cash</i>	<i>235 00</i>
		<i>" " Pd Terry Cash</i>	<i>5 00</i>
			<i>230 00</i>

RECORD AND BILL OF ITEMS

Yearly No. 69 FOR THE FUNERAL OF Total to date 863

Nellie F. Barnard

Residence 35 Pine St. Nantucket.

Place of Death " " " " " " Wife or Widow of " " " " " "

Date of Birth 1882 July 31 Age 50 Years Sex Female Color or Race " "

Date of Death 1932 Sept 24 Age 1 Months Single X

Maiden Name " " " " " " Age 24 Days Married " "

Birth-place Nantucket Occupation None

Name of Father Frederick H. Barnard His Birth-place Nantucket

Maiden Name of Mother Deborah S. Gibbs Her Birth-place Nantucket

Cause of Death—Primary Arteriosclerosis Secondary " "

Certifying Physician Folger Residence " "

Place of Burial Nantucket Cemetery Newtown

Funeral Service at " " Lot No. " "

Time of Service " " Grave No. " "

Date of Interment Sept 26, 1932 Section " "

Put in the Diagram one mark like this | for every Grave in it. And mark this Burial with double dagger thus: †

Designate site of monument thus:

Casket or Coffin No. <u>195 12</u>	100 00	Candles	
Size..... Made by.....		Gloves	
Lining and Pillow Set No.....		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault <u>Pine</u>	16 00	Automobiles <u>J. T. Tynan 2</u>	10 00
Burial Suit <u>Grey Dress</u>	15 00	Newspaper Notices	198 00
Slippers		Transportation Charges	
Embalming <u>3</u>	35 00	Officiating Clergyman <u>Blugeth</u>	
Washing and Dressing <u>3</u>		Amount of Bill	208 00
Shaving		Goods Ordered by	
Services <u>Transfer</u>	5 00	Bill Charged to <u>Eliz. C. Fitzgerald</u>	208 00
Use of Chairs			
Church Charges			
Cemetery Charges <u>Interment</u>	25 00		
Music			
Flowers <u>Doors pray</u>	3 00		
CR.	DR. 198.00	CR.	

		Sept 26 1932 Check	208 00
Elizabeth C. Fitzgerald	" "	Paid Ferry Cash	10 00
1151 Cottage Park Rd			
Waltham			
Mass			
<div style="border: 2px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;">RECEIVED PAYMENT</p> <p style="margin: 0;">Sept 26, 1932</p> <p style="margin: 0;">Elizabeth C. Fitzgerald</p> </div>			

RECORD AND BILL OF ITEMS

Yearly No. 72

FOR THE FUNERAL OF

Total to date 866

Harriett H. Swain

Residence Cliff Road

Place of Death " " Wife or Widow of Alexander C. Swain

Date of Birth 846 Dec 31 (Year) (Month) (Day) Age { 86 Years { Sex { Color or Race

Date of Death 1932 Oct 15 (Year) (Month) (Day) { 8 Months { Single {

Maiden Name Harriett H. Hamblin (Year) (Month) (Day) { 15 Days { Married {

Birth-place Nantucket Occupation None

Name of Father Thomas C. Hamblin His Birth-place Barnstable

Maiden Name of Mother Sophronia M. Holway Her Birth-place Barnstable

Cause of Death—Primary Cerebral Hem. Secondary Arterio Sclerosis

Certifying Physician Lewis Residence

Place of Burial Nantucket Cemetery North

Funeral Service at Lot No. Put in the Diagram one mark like this for every Grave in it. And mark this Burial with double dagger thus: †

Time of Service Grave No. Designate site of monument thus:

Date of Interment Oct. 17, 1932 Section
Eleanor Appleton

Casket or Coffin No. <u>450</u>	100 00	Candles	
Size..... Made by.....		Gloves	
Lining and Pillow Set No.....		Bearers or Porters.....	
Handles		Hearse to	
Plate		Removal.....	
Outside Box or Vault <u>Pine</u>	15 00	Automobiles.....	
Burial Suit <u>Blk Dress</u>	15 00	Newspaper Notices.....	
Slippers			
Embalming <u>Services</u>	35 00		
Washing and Dressing			
Shaving			
Services			
Use of Chairs	2 00	Transportation Charges.....	
Church Charges.....		Officiating Clergyman <u>Johnson</u>	
Cemetery Charges <u>Interment</u>	25 00	Amount of Bill.....	
Music.....		Goods Ordered by <u>Eleanor Appleton</u>	
Flowers		Bill Charged to	192 00

DR. 9192.00 CR.

	192 00	Credit			
<u>Grave Stone & Lock</u>	42 00			<u>Soda & 6 sets</u>	30 00
	150 00			<u>stone</u>	12 00
<u>Dec 30 Check</u>	50 00				42 00
<u>Jan 13/44</u>	1 00	<u>Dec 20</u>		<u>C. Check</u>	50 00
<u>May 6</u>	75 00	<u>Feb 13</u>		<u>"</u>	15 00
	75 00	<u>May 6</u>		<u>Cash</u>	10 00
		<u>July 27</u>		<u>1944</u>	75 00

RECEIVED
PAYMENT

BY Eleanor Appleton

RECORD AND BILL OF ITEMS

Yearly No. 1

FOR THE FUNERAL OF

Total to date 884

William H. Church

Residence 5 Pleasant St. Nantucket

Place of Death " " " " Wife or Widow of Edith Gray

Date of Birth 1 869 Nov. 1 Age 63 Years Sex Wid. Color or Race _____
(Year) (Month) (Day)

Date of Death 1933 Jan. 2 Age 2 Months Sex _____ Color or Race _____
(Year) (Month) (Day)

Maiden Name _____ Age 1 Days Sex _____ Married _____

Birth-place Bath, N. Y. Occupation School Master Retired 6 yrs.

Name of Father Edwin S. Church His Birth-place Unknown

Maiden Name of Mother Agusta Bull Her Birth-place "

Cause of Death—Primary Coronary thrombosis Secondary _____

Certifying Physician Lewis Med. Ex. Residence _____

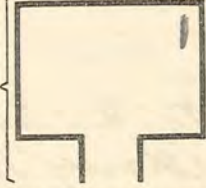
Place of Burial Nantucket Cemetery Prospect Hill

Funeral Service at _____ Lot No. 658

Time of Service _____ Grave No. _____

Date of Interment Jan. 4. Section _____

Put in the Diagram one mark like this
 | for every Grave in it. And mark this
 Burial with double dagger thus: †
 Designate site of monument thus: □



Casket or Coffin No. <u>160</u>	85 00	Candles	
Size..... Made by.....		Gloves	
Lining and Pillow Set No.....		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault <u>None</u>	15 00	Automobiles	
Burial Suit		Newspaper Notices	
Slippers		Transportation Charges	
Embalming <u>for services</u>	35 00	Officiating Clergyman <u>Blogett</u>	
Washing and Dressing		Amount of Bill	
Shaving		Goods Ordered by <u>Wm Bunker</u>	
Services <u>Transfer to Church</u>	5 00	Bill Charged to <u>Wm B Church</u>	165 00
Use of Chairs			
Church Charges			
Cemetery Charges <u>Interment</u>	25 00		
Music			
Flowers			
DR. 165.00		CR.	

		May 10 1933 Check	165 00
<i>William Bull Church</i>			
<i>Salisbury School</i>			
<i>Salisbury Conn</i>			
RECEIVED PAYMENT			
May 10. 1933			
BY <i>Wm B Church</i> Adm.			

