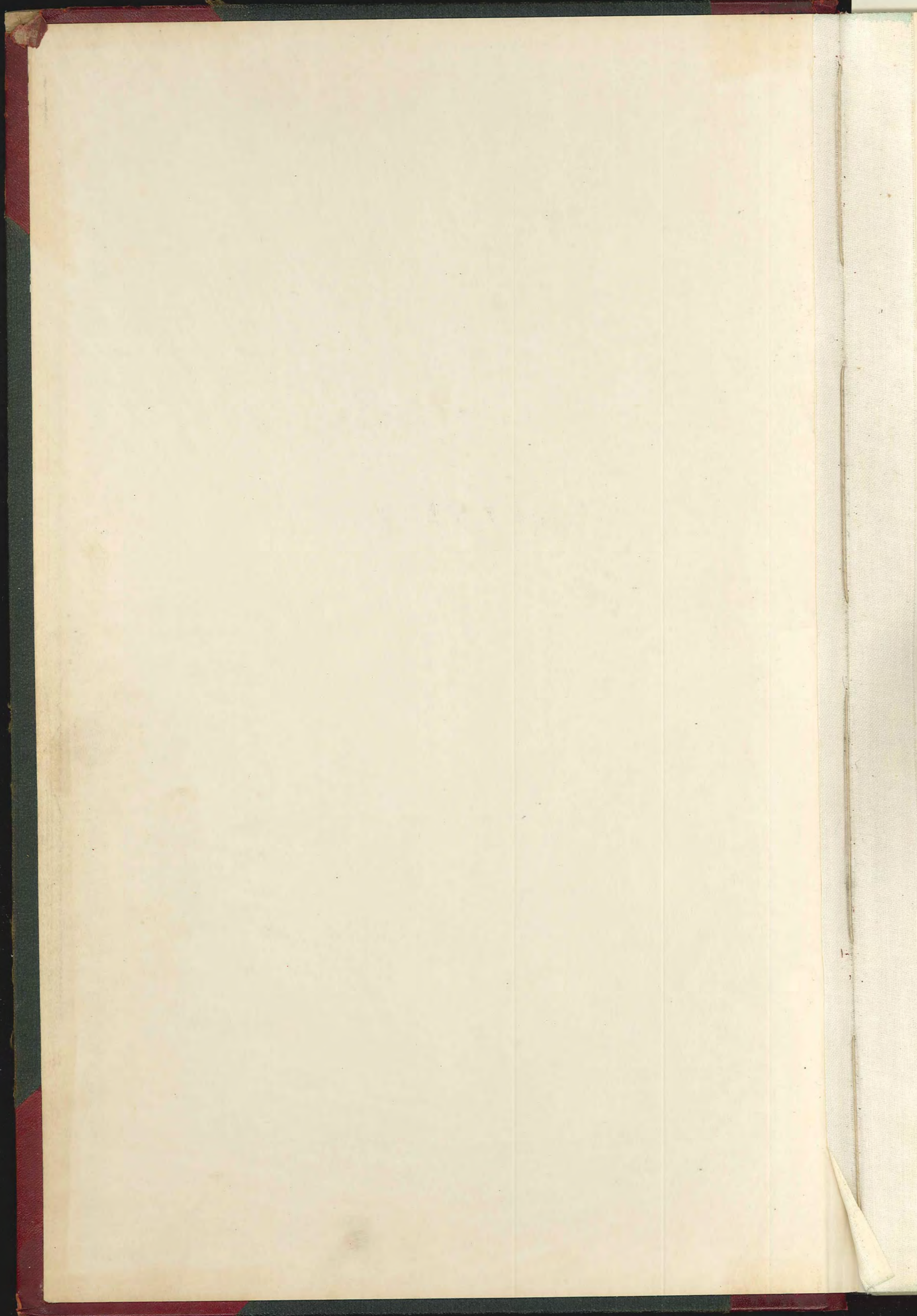


FUNER
REGIST

4/30/33
6/9/37



1933-1937

April 30, 1933
to
June 9, 1937

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Ayers John H.	194.
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Qinsley Virginia W.	243.
Adams Benjamin S.	272.
Austin Richard C.	293.
Ayers Annie C.	300.

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Bickerstaff Agnes S.	116.
Barnard Hannah R.	122
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Belinger Annette	142.
Braighton Anne S.	152.
Barney Grace Davis	170.
Bunker Elizabeth S.	172.
Burgess Lizzie A.	176.
Burdick Susan P.	191.
Bennett Robert C.	200.
Burgess Stephen C.	209.
Bronley Albert C.	211.
Bunker William M.	215
Burdick George S.	224.
Bartlett William M.	230.
Burgess Elizabeth G.	235.
Brooks Martha A.	262.
Backus James A.	265.
Butler Stanley B. ^{3rd}	278

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Clifton Thomas H. 10.
Chadwick Leon Jr. 26.
Cook Arthur H. 29.
Corill David F. 31
Chase Ella M. 47.
Cook John W. 52.
Chase Helen W. 54.
Crowley Charles H. 67.
Coffin Roland. 73
Carrington Edward 89
Collins Adelaide S. 100
Chadwick Albert S. 110
Coffin Bertha B. 112
Bulkley Merwin J. 113
Coffin Abbott S. 125.
Coleman Cecelia A. 136.
Cartwright Grace D. 139.
Coffin Margaret H. 143.
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Cushman Lydia C. 154.
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Chadwick Frederick S. 231.
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De Costa Manuel J.	119
Dickson Henrietta G.	146
Dennis Raymond F.	174
Dunham Margaret J.	196
Davis Robert S.	240
Day Doris M.	250
Dunham Flora B.	268
Dunbar Charles W. H.	270
Donnellis John.	299

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Eldridge Jesse H.	179
Eldridge Charles C. Jr.	188
Eldridge Wallace A.	189
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Freeman Millard F.	121
Fortin James F.	147. ✓
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Folger Clifford	178.
Francis Eben W.	184.
Fisher George A.	202.
Furtado Gammario	207.
Farrell Patrick F.	216.
Folger Mary H. Kelley	223.
Frye Mariott G.	234.
Forester Leo W.	242.
Folger Horace	248.
Fisher Betsy C.	260.
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Grosclaude George 87
Gibbs Houghten 90
Gomes Frank 129
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Gardner Clinton 133
Glowacki Frank P. 145
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Huntis Ozyro W.	9.
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Henn Carrie D.	251
Holm James Leslie	271.
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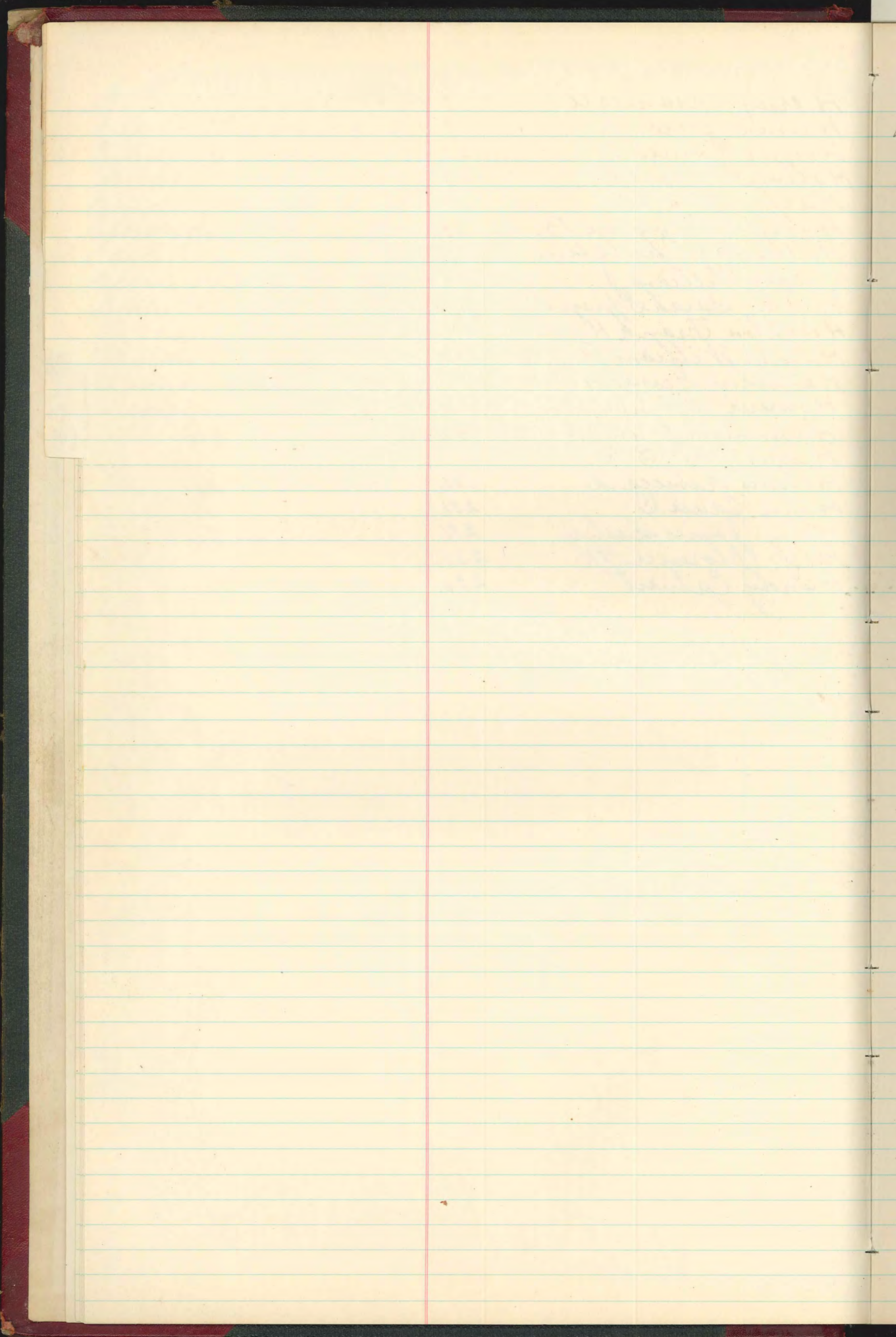
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Johnson Sillian K.	22
Johnson Ida M.	77
Jump Herbert A.	86
Joy Anna F.	162.
Jefferies Paul M.	221.
James Ellen J.	241.
Jones William H.	256.
Judkins Ellen E.	284.
Janes Benjamin F.	291.
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Kelley Eliza B. 68.
Killen Catherine 279

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Sanborns Martin	.33
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Segler Baby of Edmund	55
Lowell Samuel	59
Sumbert Emma S.	134.
Sanglands Helen C.	137.
Long Mary J.	201.
Long Ann	239

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Macy Thomas G.	6
Murphy Ruthindale	18
Mackay Robert S.	25.
Murray Maryanna	45.
Macy Sarah S.	49.
Marter Owen S.	58
Murphy Alexander M.	70.
Mendence Jason	76.
Mowry Charles H.	106
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Mooney Lawrence Jr.	118
Morris Nancy	128
Macy William Jr.	167.
McGrath Patricia	180
McCleave Benjamin B.	208.
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Mallowney John D.	229.
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Nickerson Butha	63.
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Nickerson Sussie M.	203.
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Pitman Francis H.	92
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Roberts Stephen M.	177.
Rickerson Elizabeth M.	206.
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Ryder Baby of Clifford	228.

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Smith William H.H.	14
Stetson Harrison G.	19
Swain Augustus C.	30
Snow Louisa	43
Shaw Ellen M.	50
Stokoe Sila B.	64
Strutt Clarence R.	69
Sozza Antonio J.	84
Sylvia Arline	124
Stumm Maud	132
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Sandsbury Everett	196
Swain Philip S.	197
Satter Karl C.	222
Snow Fannie D.	253
Starbuck Ellen	254
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Stovell Elizabeth C.	289
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Sylvia Annie Amelia	294

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Thurston Clara J.	95
Thomas Lydia W.	96
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Tobey Herbert A.	144.
Taylor. Benjamin F.	149
Tanning Margaret A.	151
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Underhill Evelyn J. 141.

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Van Hove Marie	156
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Wyer William H.	32.
Wyer Edgar Jr	40.
West John R.	46
Wildes Agnes S.	53
Whitman Anna A.	56
Wyer Ella R.	60
Williams Lydia B.	79
Waters Mary J. B.	83
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Watts Edith B.	94
Warren Thomas	99
Wood Nancy R.	187
Walcott John	244.
Wimbush Lillian	245
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Windle William W.	247
Wyer Lydia W.	276.

1933-1937

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1933-1937

RECORD AND BILL OF ITEMS

Yearly No. 22

FOR THE FUNERAL OF

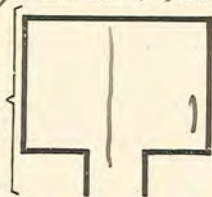
Total to date 905

Myrtle Coombs

Residence 95 Orange St
 Place of Death " " "
 Date of Birth 1892 Feb 24
 Date of Death 1933 May 26
 Maiden Name Myrtle Hill
 Birth-place Detroit Mich
 Name of Father George Hill
 Maiden Name of Mother Cornelia
 Cause of Death—Primary Cerebral Hem
 Certifying Physician Menges
 Place of Burial Wentz
 Funeral Service at " " "
 Time of Service May 30, 1933
 Date of Interment May 30, 1933

Wife or Widow of Otis A Coombs
 Age { 41 Years { Sex " { Color or Race Colored
 { 3 Months { Single "
 { 2 Days { Married X

Occupation Housework
 His Birth-place Detroit Mich
 Her Birth-place Canada
 Secondary Essential Hypertension
 Residence " " "
 Cemetery Prospect Hill
 Lot No. 226
 Grave No. "
 Section Otis A 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>285¹²</u>	<u>150 00</u>	Candles	
Size		Gloves	
Made by		Bearers or Porters	
Lining and Pillow Set No.		Hearse to	
Handles		Removal	
Plate		Automobiles	
Outside Box or Vault <u>Pine</u>	<u>15 00</u>	Newspaper Notices	
Burial Suit		<u>1/2 lot No 226</u>	<u>15 00</u>
Slippers		Transportation Charges	
Embalming <u>Services</u>	<u>35 00</u>	Officiating Clergyman <u>Johnson</u>	
Washing and Dressing		Amount of Bill	<u>243 00</u>
Shaving		Goods Ordered by <u>Otis Coombs</u>	
Services		Bill Charged to <u>" "</u>	<u>243 00</u>
Use of Chairs	<u>2 00</u>		
Church Charges			
Cemetery Charges <u>Int</u>	<u>25 00</u>		
Music <u>4 ps Flowers</u>	<u>1 00</u>		
Flowers			

DR. \$ 228.00

CR.

	<u>Pd. W. B Chase Jan 24</u>	<u>June 24</u>	<u>Cash</u>	<u>135 00</u>
	<u>Aug 15, 1933</u>	<u>July 29</u>	<u>"</u>	<u>25 00</u>
		<u>" 25</u>	<u>1934 Cash</u>	<u>30 00</u>
		<u>" 22</u>	<u>1934 "</u>	<u>10 00</u>
	<u>June 24</u>			
	<u>July 29</u>			
	<u>"</u>			
	<u>bal</u>			
	<u>July 25/34</u>			
	<u>bal</u>			
	<u>" 22/35</u>			
	<u>bal</u>			

RECORD AND BILL OF ITEMS

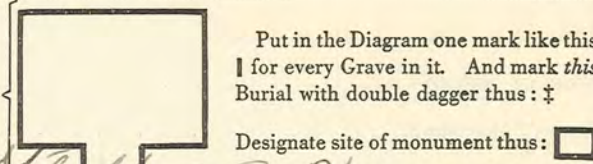
Yearly No. 27

FOR THE FUNERAL OF

Total to date 910

Thomas H. Clifton

Residence Sia S. Conser
 Place of Death N.C. Hospital Wife or Widow of Louise C. Clifton
 Date of Birth 1 (Year) June (Month) 14 (Day) Age 64 Years { Sex Divorced } Color or Race
 Date of Death 1933 (Year) June (Month) 14 (Day) { Months } Single
 Maiden Name _____ { Days } Married
 Birth-place Washington, N. Carolina Occupation Day laborer
 Name of Father Samuel Clifton His Birth-place North Carolina
 Maiden Name of Mother Avilda Her Birth-place Washington N.C.
 Cause of Death—Primary Coronary thrombosis Secondary Arterio Sclerosis & Chronic Bronchitis
 Certifying Physician Collins Residence _____
 Place of Burial Washington N.C. Cemetery _____
 Funeral Service at _____ Lot No. _____
 Time of Service _____ Grave No. _____
 Date of Interment June 18 Section _____
C. A. Campbell 222 W. 29th St. Norfolk Va. Phone 37776



Casket or Coffin No. <u>2855</u>	<u>150 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 <u>Express</u>	<u>64 00</u>
Shaving <u>Transfer from Hosp.</u>	<u>5 00</u>	Officiating Clergyman	<u>210 00</u>
Services <u>to Boat</u>	<u>5 00</u>	Amount of Bill	<u>274 00</u>
Use of Chairs _____		Goods Ordered by <u>C. A. Campbell</u>	
Church Charges _____		Bill Charged to <u>Norfolk Va.</u>	<u>274 00</u>
Cemetery Charges _____			
Music _____			
Flowers _____			

DR. \$ 210.00 CR.

			<u>June 15</u>	<u>1933 Check by Western Union from C. A. Campbell</u>	<u>274 00</u>
<u>Sent to Cherry Furniture Co. Washington N.C.</u>					

RECORD AND BILL OF ITEMS

Yearly No. 29

FOR THE FUNERAL OF

Total to date 9/2

Elizabeth C. Sherman

Residence Cambridge Mass

Place of Death Geneva Switzerland Wife or Widow of

Date of Birth 1868 July 18 Age 64 Years Sex

Date of Death 1933 Jan 29 Age 6 Months Single X Color or Race

Maiden Name Birth-place Middletown Occupation Artist & Pianist

Name of Father John H. Sherman His Birth-place New Bedford

Maiden Name of Mother Ellen Chace Her Birth-place Nant.

Cause of Death—Primary Secondary

Certifying Physician Residence

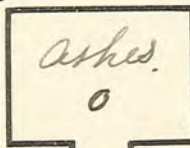
Place of Burial June 18 Nant. Cemetery P. H.

Funeral Service at Lot No. 60

Time of Service Grave No. 0

Date of Interment June 18 Section

Elizabeth C. Hussey of Church St. Nant.



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

Table with columns for items (Casket or Coffin No., Size, Lining and Pillow Set No., Handles, Plate, Outside Box or Vault, Burial Suit, Slippers, Embalming, Washing and Dressing, Shaving, Services, Use of Chairs, Church Charges, Cemetery Charges, Music, Flowers) and costs (Candles, Gloves, Bearers or Porters, Hearse to, Removal, Automobiles, Newspaper Notices, Transportation Charges, Officiating Clergyman, Amount of Bill, Goods Ordered by, Bill Charged to). Includes handwritten entries like 'Interment of Ashes 5 00' and 'Pickett 5 00'.

DR.

CR.

Table for recording payments, with columns for date, amount, and description. Includes handwritten entry: 'Mr Henry A. Kelley Cash July 15 1933 Check 5 00' and a 'RECEIVED' stamp.

RECORD AND BILL OF ITEMS

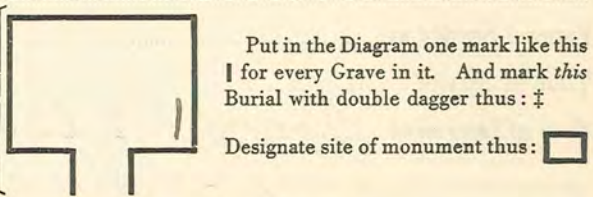
Yearly No. 30

FOR THE FUNERAL OF

Total to date 913

Philip H. Donnell

Residence 71 Liberty St.
 Place of Death Boston Dispensary Wife or Widow of Pauline Gill
 Date of Birth 1903 May 10 Age { 30 Years { Sex { Color or Race
 (Year) (Month) (Day) { 3 Months { Single {
 Date of Death 1933 June 22 { 12 Days { Married X {
 (Year) (Month) (Day) Maiden Name
 Birth-place New Bedford Occupation Clk Butcher
 Name of Father William Donnell His Birth-place So. Portland Me
 Maiden Name of Mother Jeanette Thomas Her Birth-place So. Portland Me
 Cause of Death—Primary Acute Secondary Ulcerative Colitis
 Certifying Physician Residence
 Place of Burial Nant Cemetery P.H.
 Funeral Service at Lot No. 823
 Time of Service Grave No.
 Date of Interment June 25 Section
William Donnell Jr.



Casket or Coffin No.		Candles	<u>7</u>	<u>Call to Boston</u>	<u>50</u>
Size	Made by	Gloves	<u>6</u>	<u>prs</u>	<u>1 50</u>
Lining and Pillow Set No.		Bearers or Porters			
Handles		Hearse to			
Plate		Removal			
Outside Box or Vault		Automobiles	<u>3</u>	<u>Jury</u>	<u>1 5 00</u>
Burial Suit				<u>Pease</u>	<u>1 5 00</u>
Slippers		Newspaper Notices		<u>Wood</u>	<u>1 5 00</u>
Embalming				<u>J. S. Waterman & Sons</u>	<u>266 75</u>
Washing and Dressing					<u>43 00</u>
Shaving					
Services	<u>1 0 00</u>				
Use of Chairs	<u>3 00</u>	Transportation Charges			
Church Charges		Officiating Clergyman			
Cemetery Charges	<u>Interment</u>	Amount of Bill			<u>326 75</u>
Music	<u>Trans. from Boat</u>	Goods Ordered by			
Flowers		Bill Charged to			<u>326 75</u>

DR.

73.00

CR.

July 6	Pd J S Waterman		Sept 7	1933 Check	<u>326 75</u>
Sept 11	Pd Jerry Cash	<u>5 00</u>			
" 9	" Pease Check	<u>5 00</u>			
" 16	Pd. George C Rule Adm.	<u>5 00</u>			
	Wood collected. own bill.				

RECEIVED PAYMENT

Sept 7, 1933

Geo. C. Rule

Admin.

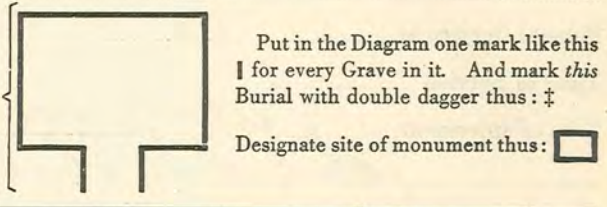
RECORD AND BILL OF ITEMS

Yearly No. 32

FOR THE FUNERAL OF

Total to date 915.

Residence Washington St. 1940
 Place of Death " Wife or Widow of Gertrude E. Murphy
 Date of Birth 1 (Year) July (Month) 4 (Day) Age 67 Years { Sex Male } Color or Race White
 Date of Death 1933 (Year) July (Month) 4 (Day) { Months Single }
 Maiden Name Harwich Mass Occupation Fisherman { Days Married }
 Birth-place Harwich Mass Occupation Fisherman
 Name of Father Curtis Song His Birth-place Harwich
 Maiden Name of Mother Paulina B. ... Her Birth-place Harwich
 Cause of Death—Primary Broncho Pneum. Secondary Rheumatic heart disease
 Certifying Physician Menges Residence Harwich
 Place of Burial Harwich Cemetery "
 Funeral Service at " Lot No. "
 Time of Service " Grave No. "
 Date of Interment July 6 Section "
Gertrude E. Song



Casket or Coffin No. <u>175¹²</u>	<u>100 00</u>	Candles	
Size <u>Made by</u>		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>full services</u>	<u>35 00</u>		
Washing and Dressing			
Shaving <u>Transfer to Rooms</u>	<u>5 00</u>	<u>L. S. Bial</u>	<u>60 00</u>
Services <u>" to Boat</u>	<u>5 00</u>		
Use of Chairs		Transportation Charges <u>tickets to Woods</u>	<u>9 00</u>
Church Charges		<u>144</u>	<u>160 00</u>
Cemetery Charges		Amount of Bill	<u>229 00</u>
Music		Goods Ordered by <u>Mrs Song</u>	
Flowers		Bill Charged to <u>" "</u>	<u>229 00</u>

DR. 160.00 CR.

	Bal.	<u>129 00</u>	Sept 1	1933 Cash	<u>100 00</u>
Sept 2	Pd L S Bial	<u>79 00</u>	July 7	1934 "	<u>50 00</u>
	<u>60.00</u>		Sept 10	" "	<u>25 00</u>
	<u>129</u>				
	<u>50</u>				
	<u>79</u>				
	<u>25</u>				
	<u>54 Bal</u>				

RECORD AND BILL OF ITEMS

Yearly No. 35

FOR THE FUNERAL OF

Total to date 918

Ruthindale D. Murphy

Residence.....
 Place of Death N.C. Hospital Wife or Widow of.....
 Date of Birth 1923 July 13 (Year) (Month) (Day) { Years { Sex { Color or Race
 Date of Death 1933 July 15 (Year) (Month) (Day) Age { Months { Single X {
 Maiden Name..... { 2 Days { Married.....
 Birth-place Nantucket Occupation None
 Name of Father Edward B. Murphy His Birth-place Nova Scotia
 Maiden Name of Mother Ruthindale Smith Her Birth-place.....
 Cause of Death—Primary Patent foramen ovale Secondary.....
 Certifying Physician Folger Residence.....
 Place of Burial Malden Cemetery Forestdale
 Funeral Service at..... Lot No. Put in the Diagram one mark like this
 Time of Service..... Grave No. | for every Grave in it. And mark this
 Date of Interment Edw. B. Murphy Section..... Burial with double dagger thus: †
 Designate site of monument thus:

Casket or Coffin No. <u>f Box</u>					Candles.....		
Size <u>2.0</u> Made by <u>White</u>		<u>15</u>	<u>00</u>		Gloves.....		
Lining and Pillow Set No.....					Bearers or Porters.....		
Handles.....					Hearse to.....		
Plate.....					Removal.....		
Outside Box or Vault.....					Automobiles.....		
Burial Suit.....					Newspaper Notices.....		
Slippers.....					Transportation Charges.....		
Embalming.....					Officiating Clergyman.....		
Washing and Dressing.....					Amount of Bill.....	<u>28</u>	<u>52</u>
Shaving.....					Goods Ordered by.....		
Services <u>f Transfers</u>		<u>5</u>	<u>00</u>		Bill Charged to <u>Edw. B. Murphy</u>	<u>28</u>	<u>52</u>
Use of Chairs.....							
Church Charges.....							
Cemetery Charges.....							
Music <u>2 tickets to Boston</u>		<u>8</u>	<u>52</u>				
Flowers.....							

DR. 28.52 CR.

				<u>July 14</u>	<u>1934 Cash</u>		<u>10 00</u>
				<u>Aug 4</u>	<u>" "</u>		<u>10 00</u>
				<u>Sept 12</u>	<u>" "</u>		<u>8 52</u>
							<u>28 52</u>
					PAID		
					<u>By Donald Murphy</u>		

RECORD AND BILL OF ITEMS

Yearly No. 47

FOR THE FUNERAL OF

Total to date 9.30

Augustus C. Swain

Residence 5 Simons St. Cambridge 30 yrs

Place of Death _____ Wife or Widow of Susan Coffin

Date of Birth 1893 Sept 23 (Year) (Month) (Day) Age { 89 Years { Sex _____ { Color or Race _____
 { 11 Months { Single _____ {
 { 24 Days { Married X {

Maiden Name _____ Occupation Clergyman

Birth-place Nantucket His Birth-place Nantucket

Name of Father William C. Swain Her Birth-place Nantucket

Maiden Name of Mother Mary Starbuck Her Birth-place _____

Cause of Death—Primary Cerebral Hem. Secondary 101 Beacon St. Cambridge

Certifying Physician O. A. Sathrop Residence _____

Place of Burial Nant. Cemetery P. H.

Funeral Service at _____ Lot No. 92

Time of Service _____ Grave No. _____

Date of Interment Sept 25 / 33 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:

Susan Swain. Cambridge Mass

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>	25 00
Plate _____		Removal <u>Cemetery Charges</u>	10 00
Outside Box or Vault _____		Automobiles <u>J. H. Wood</u>	5 00
Burial Suit _____		Newspaper Notices _____	
Slippers _____		Transportation Charges _____	
Embalming _____		Officiating Clergyman _____	40 00
Washing and Dressing _____		Amount of Bill _____	
Shaving _____		Goods Ordered by _____	
Services _____		Bill Charged to <u>A. E. Long & Son Inc.</u>	40 00
Use of Chairs _____			
Church Charges _____			
Cemetery Charges _____			
Music _____			
Flowers _____			

DR.		CR.	
		Oct 11, 1933 Check	40.00
		pd Herbert Cash	5 00
			35 00
<u>A. E. Long & Son Inc</u>			
<u>1977 Mass Ave</u>			
<u>Cambridge</u>			
		RECEIVED PAYMENT	
		<u>Oct 11, 1933</u>	
		BY <u>A. E. Long & Son Inc.</u>	

RECORD AND BILL OF ITEMS

Yearly No. 51

FOR THE FUNERAL OF

Total to date 934

Mary J. Fisher

Residence 7 W. York St. 1344

Place of Death N.C. Hospital Wife or Widow of Charles F. Fisher

Date of Birth 1 Feb. Age 38 Years Sex Female Color or Race White

(Year) (Month) (Day)

Date of Death 19 33 Oct 21 Age 8 Months Single Married X

(Year) (Month) (Day)

Maiden Name Mary J. Harris Birth-place Ireland Occupation House work

Name of Father Dennis Harris His Birth-place Ireland

Maiden Name of Mother Mary Harrison Her Birth-place Ireland

Cause of Death—Primary Gastric Hem. Secondary Gastric Ulcer.

Certifying Physician Silpatrick Residence St. Marys

Place of Burial Nant. Cemetery St. Marys

Funeral Service at James Harris Nantucket Lot No.

Time of Service Oct 25/33 Grave No.

Date of Interment Oct 25/33 Section

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>175th</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		
Outside Box or Vault <u>Pine</u>	<u>15 00</u>	Automobiles		
Burial Suit <u> </u>		Newspaper Notices		
Slippers <u> </u>		Transportation Charges		
Embalming <u>Services</u>	<u>35 00</u>	Officiating Clergyman <u>Fr. Sannikow</u>		
Washing and Dressing <u> </u>		Amount of Bill		
Shaving <u> </u>		Goods Ordered by <u>Chas F. Fisher</u>		
Services <u>Transfer</u>	<u>10 00</u>	Bill Charged to <u> </u>		<u>193 00</u>
Use of Chairs <u> </u>				
Church Charges <u> </u>				
Cemetery Charges <u>Interment</u>	<u>25 00</u>			
Music <u>Use of Bell & Condolence</u>	<u>5 00</u>			
Flowers <u>Candles</u>	<u>3 00</u>			

DR. 193.00
CR.

	<u>Bal.</u>	<u>93 00</u>		<u>Oct 23</u>	<u>33</u>	<u>Cash from</u>	
						<u>James Harris</u>	<u>100 00</u>
				<u>Nov 13</u>	<u>33</u>	<u>Check C.F.F.</u>	<u>93 00</u>
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;">PAID</p> <p style="margin: 0; font-size: 0.8em;">Nov 13 1933</p> <p style="margin: 0; font-size: 0.8em;">Chas F. Fisher</p> </div>							

RECORD AND BILL OF ITEMS

Yearly No. 61

FOR THE FUNERAL OF

Total to date 944

Joseph M. Nichols

Residence 156 Orange St
 Place of Death N. C. Hospital
 Date of Birth 1917 Sept 17
 Date of Death 1933 Nov 26
 Maiden Name _____
 Birth-place _____
 Name of Father Joseph M. Nichols
 Maiden Name of Mother Mary Fiera
 Cause of Death—Primary Assebrauylitis
 Certifying Physician Levis (Med Ex)
 Place of Burial Nant
 Funeral Service at _____
 Time of Service _____
 Date of Interment Nov 29 1933
 _____ Mary Nichols

Wife or Widow of _____
 Age { 16 Years { Sex _____ { Color or Race _____
 { 2 Months { Single X { Colored
 { 10 Days { Married _____ { _____

Occupation Fishing
 His Birth-place Brev.
 Her Birth-place New Bedford
 Secondary lumbar Vertebra (Septicemia)
 Residence _____
 Cemetery St. Marys

Lot No. _____
 Grave No. _____
 Section _____

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>297</u>	125 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 <u>for Priest</u>	3 00
Burial Suit <u>Grey Suit</u>	15 00	Newspaper Notices	
Slippers _____			
Embalming <u>Services</u>	35 00	Transportation Charges	
Washing and Dressing _____		Officiating Clergyman <u>Fr Griffin</u>	
Shaving _____		Amount of Bill	228 00
Services <u>Transfer</u>	5 00	Goods Ordered by _____	
Use of Chairs _____		Bill Charged to _____	
Church Charges _____			
Cemetery Charges <u>Interment</u>	25 00		
Music <u>Candelabra Rest</u>	3 00		
Flowers <u>Candles</u>	2 00		
DR. 2225 00			

DR.		CR.	
	228.00		Dec 16 1933 Cr: Cash 110 00
	110 00		Sept 17 1934 " 20 00
	118.00 Bal		Aug 6 1935 " 18 00
	20		" 20 " " 10 00
	79.80		July 27 1936 " 20 00
	18		July 7 1937 " 20 00
	Bal. 88.00		July 24 " " 15 00
	10		Bal. Donated 15 00
	78.00 bal.		PAID
	20		Bal July 24 1937
	58.00		
	20.00		
	38.00		

RECORD AND BILL OF ITEMS

Yearly No. 17

FOR THE FUNERAL OF

Total to date 964

Sila B Stokoe

Residence *Orange St*

Place of Death *"* Wife or Widow of *Charles W. S. Stokoe*

Date of Birth *1* (Year) *47* (Month) *4* (Day) Age *47* Years Sex *Female* Color or Race *White*

Date of Death *1934* (Year) *May* (Month) *4* (Day) Age *2* Months Single *Single*

Maiden Name *"* Married *X*

Birth-place *New Bedford* Occupation *Housework*

Name of Father *Marshall F. Lewis* His Birth-place *Brewster, Mass.*

Maiden Name of Mother *Annie J. Richmond* Her Birth-place *New Bedford*

Cause of Death—Primary *Rheumatic heart disease* Secondary *Chronic tonsillitis*

Certifying Physician *Minges* Residence *"*

Place of Burial *New Bedford* Cemetery *Oak Grove*

Funeral Service at *"* Lot No. *"*

Time of Service *"* Grave No. *"*

Date of Interment *May 7, 1934* Section *"*

Charles W. S. Stokoe

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>285¹²</i>	<i>165 00</i>	Candles	
Size Made by		Gloves	
Lining and Pillow Set No.		Bearers or Porters	
Handles <i>Ext.</i>		Hearse to	
Plate		Removal	
Outside Box or Vault <i>Pine & holls</i>	<i>18 00</i>	Automobiles	
Burial Suit		Newspaper Notices	
Slippers			
Embalming <i>Services</i>	<i>35 00</i>		
Washing and Dressing			
Shaving			
Services <i>Transfer to Boat</i>	<i>5 00</i>		
Use of Chairs	<i>2 00</i>	Transportation Charges	
Church Charges		Officiating Clergyman <i>Brown</i>	
Cemetery Charges		Amount of Bill	<i>225 00</i>
Music		Goods Ordered by <i>Chas. W. Stokoe</i>	
Flowers		Bill Charged to <i>"</i>	

DR.

225.00

CR.

	<i>225.00</i>		<i>May 28</i>	<i>Cash</i>	<i>10 00</i>
	<i>10 00</i>		<i>Jan 4</i>	<i>1935 Cash</i>	<i>70 00</i>
	<i>215 00</i>		<i>Aug 1</i>	<i>1936 "</i>	<i>40 00</i>
	<i>10 00</i>				
	<i>145 00</i>				
	<i>40 00</i>				
	<i>105.00</i>				

RECORD AND BILL OF ITEMS

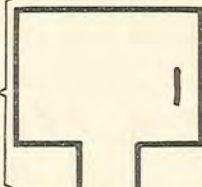
Yearly No. 19

FOR THE FUNERAL OF

Total to date 966

Stanley N. Taylor

Residence 145 Main St.
 Place of Death Warrentown Va. Wife or Widow of Muriel Patrick
 Date of Birth 1 (Year) 1 (Month) 1 (Day) Age { 33 Years { Sex Divorced Color or Race
 Date of Death 1934 (Year) May (Month) 5 (Day) { 10 Months { Single
 Maiden Name Days { Married
 Birth-place Chicago Ill. Occupation None
 Name of Father Benjamin F. Taylor His Birth-place Battle Creek Mich.
 Maiden Name of Mother Josephine S. Moore Birth-place St. Louis Mo.
 Cause of Death—Primary Bronchitis Secondary acute dilatation of heart.
 Certifying Physician Residence
 Place of Burial Nantucket Cemetery P.H.
 Funeral Service at Lot No. 822
 Time of Service Grave No.
 Date of Interment May 8, 1934 Section
Benjamin F. Taylor



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>Funeral Home Church</u>	26 00
Plate		Removal <u>From Boat</u>	5 00
Outside Box or Vault		Automobiles <u>Funeral Home</u>	5 00
Burial Suit		<u>Opening</u>	10 00
Slippers		Newspaper Notices	
Embalming		<u>Lot No 822.</u>	30 00
Washing and Dressing		Transportation Charges	
Shaving		Officiating Clergyman <u>Snelling</u>	
Services		Amount of Bill	75 00
Use of Chairs		Goods Ordered by <u>Mrs Taylor</u>	
Church Charges		Bill Charged to <u>Benj F Taylor</u>	
Cemetery Charges			
Music			
Flowers			

DR.			CR.
	<u>Benjamin F Taylor</u> <u>120 So. La Salle St.</u> <u>Chicago Ill.</u>	<u>May 17</u>	<u>1934 Check</u> 75 00
<u>May 19</u>	<u>Pd. W B Char for bill</u>		30 00
			PAID
			<u>May 17, 1934 By</u> <u>Benj F Taylor</u>

RECORD AND BILL OF ITEMS

Yearly No. 20

FOR THE FUNERAL OF

Total to date 967

Charles Hadwin Crowley

Residence No Liberty St.

Place of Death Brooklyn N.Y.

Date of Birth June 12 1934 (Year) (Month) (Day)

Date of Death May 16 1934 (Year) (Month) (Day)

Wife or Widow of Annie A. Henry

Age 74 Years { Sex Male } Color or Race W
 { Months 0 } { Single }
 { Days 0 } { Married Separated }

Maiden Name Sarah Hadwin

Birth-place Brooklyn N.Y. Occupation Insurance Agent Retired

Name of Father David Crowley His Birth-place Brooklyn N.Y.

Maiden Name of Mother Sarah Hadwin Her Birth-place N.Y.

Cause of Death—Primary Coronary thrombosis Secondary Died in sleep

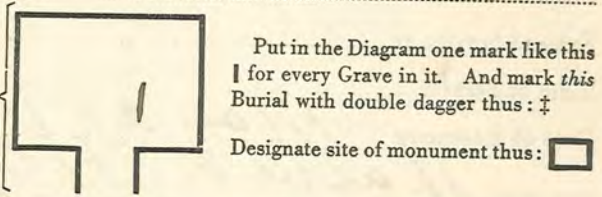
Certifying Physician Lewis Medley Residence P.H.

Place of Burial Nantucket Cemetery P.H.

Funeral Service at Sarah E. Hemen Lot No. 601

Time of Service May 19 1934 Grave No. 1

Date of Interment May 19 1934 Section 1



Casket or Coffin No. <u>115 blk</u>	<u>80 00</u>	Candles	
Size <u>Made by</u>		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 <u>J. Ferguson 1</u>	<u>5 00</u>
Burial Suit	<u>15 00</u>	Newspaper Notices	
Slippers		Transportation Charges	
Embalming <u>for services</u>	<u>35 00</u>	Officiating Clergyman <u>Snelling</u>	
Washing and Dressing		Amount of Bill	<u>175 00</u>
Shaving		Goods Ordered by <u>Sarah E. Hemen</u>	
Services		Bill Charged to <u>"</u>	
Use of Chairs			
Church Charges			
Cemetery Charges <u>Funeral</u>	<u>25 00</u>		
Music			
Flowers			
DR. 170.00			

DR. 170.00		CR.	
<u>Sarah E. Hemen</u>	<u>May 31</u>	<u>1934 check</u>	<u>175 00</u>
<u>45 Bow St.</u>			
<u>Stoneham</u>			
<u>Mass.</u>			
<u>Pat. Terry Cash. Apr 2</u>			
		PAID	
		<u>May 31, 1934</u>	
		<u>By Sarah E. Hemen</u>	

RECORD AND BILL OF ITEMS

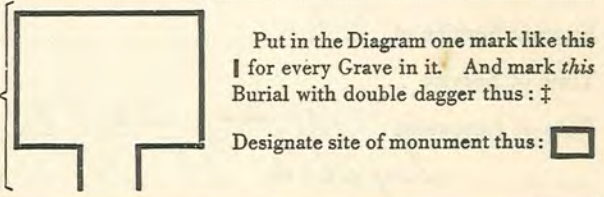
Yearly No. 22

FOR THE FUNERAL OF

Total to date 969

Clarence R. Streeter

Residence W. Chester St
 Place of Death " Wife or Widow of Ethel Seavett
 Date of Birth 1 (Year) 1934 (Month) May (Day) 19 (Day)
 Date of Death 1934 (Year) May (Month) 19 (Day) Age 33 Years { Sex Single } Color or Race Separated
 Maiden Name _____ { Married _____ }
 Birth-place New York Occupation Automobile Machinist
 Name of Father Charles W. Streeter His Birth-place New York
 Maiden Name of Mother unknown Her Birth-place _____
 Cause of Death—Primary death by inhalation of illuminating gas Secondary suicidal
 Certifying Physician Lewis Med. Ex. Residence _____
 Place of Burial Fulton, N.Y. Cemetery _____
 Funeral Service at _____ Lot No. _____
 Time of Service _____ Grave No. _____
 Date of Interment Glen Streeter, Fulton, N.Y. Section _____



Casket or Coffin No. <u>115 Dlk</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>4 holds</u>	<u>18 00</u>	Automobiles	
Burial Suit _____		Newspaper Notices	
Slippers _____		<u>Express Charges</u>	<u>34 92</u>
Embalming <u>Services</u>	<u>35 00</u>		<u>133 00</u>
Washing and Dressing _____		Transportation Charges	
Shaving <u>Transfer</u>	<u>5 00</u>	Officiating Clergyman	
Services _____		Amount of Bill	<u>167 92</u>
Use of Chairs _____		Goods Ordered by	
Church Charges _____		Bill Charged to	
Cemetery Charges _____			
Music _____			
Flowers _____			

DR. 133.00 CR.

<u>Edward P Cole</u>		<u>May 22</u>	<u>1934 check</u>	<u>167 92</u>
<u>40 So First St.</u>				
<u>Fulton, N.Y.</u>				
			PAID	
			<u>May 22, 1934</u>	
		<u>By</u>	<u>Edw. P. Cole</u>	
			<u>Undertaker</u>	

RECORD AND BILL OF ITEMS

Yearly No. 23

FOR THE FUNERAL OF

Total to date 970

Alexander M. Myrick

Residence 3 Hussey St.

Place of Death " " "

Date of Birth 1856 June 28 (Year) (Month) (Day)

Date of Death 1934 May 22 (Year) (Month) (Day)

Maiden Name " " "

Birth-place Nantucket

Name of Father Andrew M. Myrick

Maiden Name of Mother Louisa Thompson

Cause of Death—Primary Coronary thrombosis

Certifying Physician Lewis

Place of Burial Nantucket

Funeral Service at " " "

Time of Service May 25, 1934

Date of Interment May 25, 1934

Wife or Widow of Sydia B. Smith

Age { 77 Years { Sex " } Color or Race "
 { 10 Months { Single " }
 { 24 Days { Married " }

Occupation Merchant, Retired 10 yrs

His Birth-place Nantucket

Her Birth-place Nantucket

Secondary Hypertension

Residence " " "

Cemetery P.H.

Lot No. 504

Grave No. "

Section "

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>285¹²</u>	150 00	Candles		
Size		Gloves		
Made by		Bearers or Porters		
Lining and Pillow Set No.		Hearse to		
Handles		Removal		
Plate		Automobiles <u>Jeep 2</u>	10 00	
Outside Box or Vault <u>Pine</u>	15 00	<u>Wood 2</u>	10 00	
Burial Suit		Newspaper Notices	233 00	
Slippers				
Embalming <u>Services</u>	35 00			
Washing and Dressing				
Shaving		Transportation Charges		
Services <u>Funeral</u>	25 00	Officiating Clergyman <u>Pickett</u>		
Use of Chairs	3 00	Amount of Bill	253 00	
Church Charges		Goods Ordered by <u>Sydia B. Myrick</u>		
Cemetery Charges	5 00	Bill Charged to <u>" " "</u>		
Music				
Flowers				

DR.

233.00

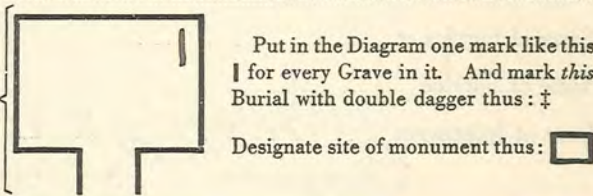
CR.

June 12.	Pd	Jeep Cash	10 00	June 12	1934 Check	253 00			
" "	"	" Wood "	10 00						
					PAID				
					June 12, 1934				
					By <u>Sydia B. Myrick</u>				

RECORD AND BILL OF ITEMS

Yearly No. 24 FOR THE FUNERAL OF Phoebe Ann Hathaway Total to date 971

Residence Old Peoples Home
 Place of Death " " " Wife or Widow of Charles B. Hathaway
 Date of Birth 1 Dec 17 Age 89 Years 5 Months 6 Days Sex Female Color or Race White
 Date of Death 1934 May 23 Maiden Name Phoebe Ann Worth Occupation None
 Birth-place Nantucket Name of Father George Worth His Birth-place Nantucket
 Maiden Name of Mother Unknown Her Birth-place Unknown
 Cause of Death—Primary Atherosclerosis Secondary Cerebral Hem.
 Certifying Physician Folger Residence P.H. M.V.
 Place of Burial Nantucket Cemetery P.H. M.V.
 Funeral Service at Nantucket Lot No. 3
 Time of Service May 25, 1934 Grave No. 3
 Date of Interment May 25, 1934 Section Phoebe Small



Casket or Coffin No. <u>176 12</u>	<u>100 00</u>	Candles	
Size <u>Made by</u>		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>of Services</u>	<u>35 00</u>	Officiating Clergyman <u>Henson</u>	
Washing and Dressing		Amount of Bill	<u>180 00</u>
Shaving		Goods Ordered by <u>Old Peoples Home</u>	
Services <u>Funeral</u>	<u>25 00</u>	Bill Charged to	
Use of Chairs			
Church Charges			
Cemetery Charges	<u>5 00</u>		
Music			
Flowers			

DR. \$180.00 CR.

				June 19 1934 Check	\$170 00
				" " Donated to Home	10 00
					\$180 00
				PAID	
				June 19, 1934	
				G. P. H.	

RECORD AND BILL OF ITEMS

Yearly No. 34

FOR THE FUNERAL OF

Total to date 981

Sarah Ann Briggs

Residence Fair St.
 Place of Death "
 Date of Birth 1846 Oct. "
 Date of Death 1934 " "
 Maiden Name Sarah Ann Thompson
 Birth-place Nantucket
 Name of Father Joseph Thompson
 Maiden Name of Mother Sarah Atkins
 Cause of Death—Primary Arteriosclerosis
 Certifying Physician Folger
 Place of Burial Nant.
 Funeral Service at "
 Time of Service "
 Date of Interment July 14, 1934
Earl F. Cook

Wife or Widow of Henry D. Briggs
 Age 87 Years 9 Months " Days
 Sex " Single Married
 Color or Race "
 Occupation None
 His Birth-place Western Isls
 Her Birth-place Nant.
 Residence "
 Cemetery P.H.
 Lot No. 222
 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>175. 12</u>	<u>100 00</u>	Candles	
Size <u>Made by</u>		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 <u>Grey Dress</u>	<u>15 00</u>	Newspaper Notices	
Slippers			
Embalming <u>Services</u>	<u>35 00</u>		
Washing and Dressing			
Shaving			
Services <u>Funeral</u>	<u>25 00</u>		
Use of Chairs		Transportation Charges	
Church Charges		Officiating Clergyman <u>Brown</u>	
Cemetery Charges <u>5 00</u>		Amount of Bill <u>\$195 00</u>	
Music		Goods Ordered by <u>Earl F. Cook</u>	
Flowers		Bill Charged to	

DR. \$195.00 CR.

		<u>July 17</u>	<u>1934 Cash</u>	<u>195 00</u>
			PAID	
			<u>July 17, 1934</u>	
			<u>By Mattie A. Cook</u>	

RECORD AND BILL OF ITEMS

Yearly No. 4752 FOR THE FUNERAL OF Total to date 992

Francis H. Pitman

Residence Linburg Ave. Seaconsset.

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

Date of Birth 1909 July 23 Age { 25 Years { Sex _____ { Color or Race _____

(Year) (Month) (Day)

Date of Death 1934 Aug 31 { 1 Months { Single _____

(Year) (Month) (Day)

Maiden Name _____ { 8 Days { Married _____

Birth-place Nantucket Occupation Day laborer

Name of Father Augustus Pitman His Birth-place Nantucket

Maiden Name of Mother Sarah Davis Her Birth-place County clair Ireland

Cause of Death—Primary Fracture of skull Secondary compound, auto. accident

Certifying Physician Lewis Med. Ex. Residence _____

Place of Burial Nantucket Cemetery St. Marys

Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment Sept 3, 1934 Section _____

Jack D. Pitman 50 Perkins St. Providence

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>115 St. Crispin</u>	75 00	Candles	2	00
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 <u>Car for Fr. Griffin</u>	1	50
Burial Suit _____		Newspaper Notices		
Slippers _____		<u>Undercloths & shirt</u>	3	50
Embalming <u>of Services</u>	35 00			
Washing and Dressing _____				
Shaving _____				
Services _____		Transportation Charges		
Use of Chairs _____		Officiating Clergyman <u>Fr. Griffin</u>	1	55 00
Church Charges <u>Funeral</u>	25 00	Amount of Bill	162.00	
Cemetery Charges	5 00	Goods Ordered by <u>Jack Pitman</u>		
Music _____		Bill Charged to _____		
Flowers _____				

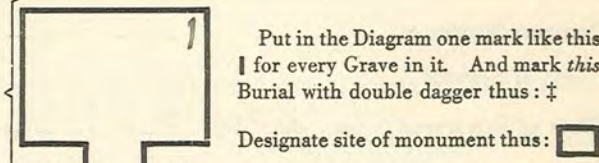
DR. 155.00
CR.

	162 00	Oct	25	1934 Cash Josephson	87 00
	87 00		Nov	17	53 00
Bal.	75 00	Aug	4	1935 Cash Jack	20 00
	53 00				
Bal.	22 00				
				PAID	
				Ac Bal Aug 4 1935	
				Jack Pitman	

RECORD AND BILL OF ITEMS

Yearly No. 46 FOR THE FUNERAL OF Mary Ellen Quinn Total to date 993.

Residence Three Tuns Montgomery Co Pennsylvania
 Place of Death N E Hospital Wife or Widow of _____
 Date of Birth _____ Age 26 Years { Sex _____ } Color or Race _____
 Date of Death 1934 Aug 31 (Year) (Month) (Day) { Months _____ } Single
 Maiden Name _____ { Days _____ } Married _____
 Birth-place Donegal Ireland Occupation House maid
 Name of Father Unknown His Birth-place _____
 Maiden Name of Mother Agnes Mc Andrew Her Birth-place Ireland
 Cause of Death—Primary Compound fracture of skull (Auto Accident) Secondary _____
 Certifying Physician Lewis Med Es Residence _____
 Place of Burial St Marys Cemetery _____
 Funeral Service at _____ Lot No. _____
 Time of Service _____ Grave No. _____
 Date of Interment Sept 3 1934 Section _____
Mr Richard Vaux, Maple Glen P.O. Pa



Casket or Coffin No. <u>115 St Euph</u>	<u>75 00</u>	Candles	<u>2 00</u>
Size _____ Made by _____		Gloves <u>6 prs.</u>	<u>1 50</u>
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 <u>Car for Fr Griffin</u>	<u>1 50</u>
Burial Suit _____		Newspaper Notices _____	
Slippers _____		Transportation Charges _____	
Embalming <u>of services</u>	<u>35 00</u>	Officiating Clergyman <u>Fr Griffin</u>	<u>155 00</u>
Washing and Dressing _____		Amount of Bill	<u>160 00</u>
Shaving _____		Goods Ordered by _____	
Services _____		Bill Charged to _____	<u>160 00</u>
Use of Chairs _____			
Church Charges <u>Funeral</u>	<u>25 00</u>		
Cemetery Charges	<u>5 00</u>		
Music _____			
Flowers _____			
<u>153.00</u>			

DR. 153.00 CR.

<u>Mr Richard Vaux,</u>	<u>Feb. 25</u>	<u>1936. Check</u>	<u>160 00</u>
<u>Maple Glen P.O.</u>			
<u>Montgomery Co.</u>			
<u>Pa.</u>			
		PAID	
		<u>By Roy Sanguinette,</u>	
		<u>Adm.</u>	

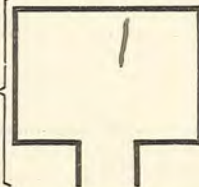
RECORD AND BILL OF ITEMS

Yearly No. 48

FOR THE FUNERAL OF

Total to date. 995

Residence 21 Milk St.
 Place of Death " " " Wife or Widow of Frank H. Thurston
 Date of Birth 1870 Feb 16 { 64 Years { Sex " { Color or Race "
 (Year) (Month) (Day) Age { 6 Months { Single " {
 Date of Death 1934 Sept 5 { 20 Days { Married 4 {
 (Year) (Month) (Day) Maiden Name Clara J. Fish
 Birth-place Nantucket Occupation Housewife
 Name of Father Nathan F. Fish His Birth-place Nantucket
 Maiden Name of Mother Ellen Johnson Her Birth-place County cork Ireland
 Cause of Death—Primary Cardiac and stroke Secondary "
 Certifying Physician Menges Residence "
 Place of Burial Nantucket Cemetery Prospect Hill
 Funeral Service at " Lot No. 190
 Time of Service " Grave No. "
 Date of Interment Sept. 8, 1934 Section "
Frank H. Thurston



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>175¹²</u>	<u>100 00</u>	Candles	
Size <u>Made by</u>		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>f. Services</u>	<u>35 00</u>		
Washing and Dressing			
Shaving			
Services <u>Funeral</u>	<u>25 00</u>	Transportation Charges	
Use of Chairs		Officiating Clergyman <u>Bloggett</u>	
Church Charges		Amount of Bill	
Cemetery Charges <u>5 00</u>		Goods Ordered by	
Music		Bill Charged to	
Flowers			

DR.

180.00

CR.

	<u>180 00</u>	<u>Sept 26</u>	<u>1934 Check D.O.P.</u>	<u>50 00</u>
<u>Sept 26 Check</u>	<u>50 00</u>	<u>" 2</u>	<u>" 51 "</u>	<u>10 00</u>
<u>Bal.</u>	<u>130 00</u>	<u>June 2</u>	<u>8936 Cash</u>	<u>10 00</u>
<u>60 00</u>	<u>10 00</u>	<u>July 8</u>	<u>1936 "</u>	<u>10 00</u>
<u>5 00</u>	<u>120 00</u>	<u>Aug 11</u>	<u>1936 "</u>	<u>10 00</u>
<u>55 00</u>	<u>10 00</u>	<u>Sept 20</u>	<u>" "</u>	<u>10 00</u>
<u>10 00</u>	<u>110 00</u>	<u>Oct 25</u>	<u>" "</u>	<u>10 00</u>
<u>45 00</u>	<u>10 00</u>	<u>Nov. 21</u>	<u>" "</u>	<u>10 00</u>
<u>60 00</u>	<u>140 00</u>	<u>Dec 13</u>	<u>1937 "</u>	<u>5 00</u>
<u>35 00</u>	<u>10 00</u>	<u>Apr 28</u>	<u>" " "</u>	<u>10 00</u>
<u>5 00</u>	<u>90 00</u>	<u>May 12</u>	<u>" " "</u>	<u>10 00</u>
<u>30 00</u>	<u>100 00</u>	<u>Nov 14</u>	<u>1937 Cash</u>	<u>5 00</u>
	<u>80 00</u>			
	<u>10 00</u>			
	<u>70 00</u>			
	<u>10 00</u>			
	<u>60 00</u>			

RECORD AND BILL OF ITEMS

Yearly No. 59

FOR THE FUNERAL OF

Total to date 1006

Charles H. Mowry

Residence 97 Bowdoin St. Dorchester Mass

Place of Death N.E. Hospital

Date of Birth 1860 June 10

Date of Death 1934 Oct 17

Wife or Widow of Susan A. Hussey

Age 74 Years Sex

4 Months Single

7 Days Married

Maiden Name

Birth-place Walpole Mass Occupation Hotel Manager

Name of Father Albert S. Mowry His Birth-place Unknown

Maiden Name of Mother Katherine Her Birth-place

Cause of Death—Primary Chronic Myocarditis Secondary Broncho Pneu.

Certifying Physician Lewis Residence

Place of Burial Nantucket Cemetery P.H.

Funeral Service at Lot No. 345

Time of Service Grave No.

Date of Interment Oct 19 1934 Section

Sena W. Grouard 37 Easton St.

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. 285 1/2	150 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 Services	35 00		
Washing and Dressing			
Shaving			
Services 2 Transfers	10 00		
Use of Chairs	3 00	Transportation Charges	
Church Charges Funeral	25 00	Officiating Clergyman Masons	
Cemetery Charges	5 00	Amount of Bill	
Music		Goods Ordered by Sena W. Grouard	
Flowers		Bill Charged to	243 00

DR.

\$243.00

CR.

				Nov 20	1934 Check	243 00
					PAID	
					Nov. 20, 1934	
					By Sena W. Grouard	

RECORD AND BILL OF ITEMS

Yearly No. 65

FOR THE FUNERAL OF

Total to date 1012

Bertha B. Coffin

Residence 15 Fairview Heights Rochester N.Y.

Place of Death Strong Memorial Hosp. Wife or Widow of John B. Coffin

Date of Birth 1863 Oct 26 (Year) (Month) (Day)

Date of Death 19 Nov 27 (Year) (Month) (Day)

Maiden Name Bertha Benson Age { 71 Years { Sex { } Color or Race { }
 { 1 Months { Single { }
 { 1 Days { Married { }

Birth-place Medina N.Y. Occupation House work

Name of Father Myron Benson His Birth-place Shelly N.Y.

Maiden Name of Mother Adelaide Noble Her Birth-place Fletcher N.Y.

Cause of Death—Primary Cancer of liver Secondary _____

Certifying Physician _____ Residence _____

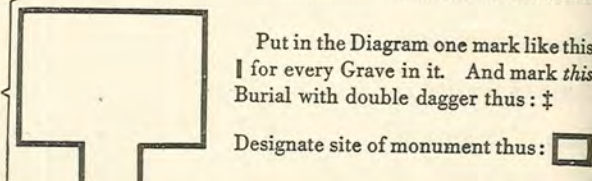
Place of Burial Nantucket Cemetery North

Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment Nov. 30, 1934 Section _____

Adelaide B. Coffin



Casket or Coffin No. _____	Candles <u>Personal Services</u> <u>5 00</u>
Size _____ Made by _____	Gloves _____
Lining and Pillow Set No. _____	Bearers or Porters _____
Handles _____	Hearse to <u>Boat</u> <u>5 00</u>
Plate _____	Removal <u>To church</u> <u>5 00</u>
Outside Box or Vault _____	Automobiles <u>Funeral from Church</u> <u>25 00</u>
Burial Suit _____	<u>Cemetery Charges</u> <u>10 00</u>
Slippers _____	Newspaper Notices <u>Pipe Bows</u> <u>5 00</u>
Embalming _____	<u>55 00</u>
Washing and Dressing _____	<u>July 2 Cars</u> <u>10 00</u>
Shaving _____	<u>Voorneveld</u> <u>6 00</u>
Services _____	Transportation Charges _____
Use of Chairs _____	Officiating Clergyman <u>Cond.</u>
Church Charges _____	Amount of Bill <u>71 00</u>
Cemetery Charges _____	Goods Ordered by _____
Music _____	Bill Charged to <u>Adelaide B. Coffin</u>
Flowers _____	

DR.				CR.
	<u>Miss Adelaide B. Coffin</u>	<u>Jan 16, 1935</u>	<u>Check</u>	<u>71 00</u>
	<u>84 Braiccliffe Rd.</u>			
	<u>Rochester</u>			
	<u>N.Y.</u>			
	<u>Jan 30 Pd Voorneveld</u>			
			PAID	
			<u>Jan 16 1935</u>	
			<u>By Bertha</u>	
			<u>Adelaide B. Coffin</u>	

RECORD AND BILL OF ITEMS

Yearly No. 13

FOR THE FUNERAL OF

Total to date 1629

Frank Gomes

Residence Washington St 24 yrs

Place of Death N. C. Hospital Wife or Widow of Germania Thatcher

Date of Birth 1879 Oct 10 Age 55 Years { Sex } Color or Race Colored

Date of Death 1935 Mich 14 { 5 Months } { Single } { 4 Days } { Married L }

Maiden Name

Birth-place Fogo Cape Verde Isls Occupation Day laborer

Name of Father Agnes Gomes His Birth-place Fogo Cape Verde Isls

Maiden Name of Mother Josephina Corea Her Birth-place Fogo. " "

Cause of Death—Primary Chronic Nephritis Secondary

Certifying Physician Folger Residence

Place of Burial

Cemetery St Marys

Funeral Service at

Lot No.

Time of Service

Grave No.

Date of Interment Mich 16 1935 Section

James R Gomes

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>297 Chest</u>	125	00	Candles <u>7 Concelebrata</u>	3	50
Size			Gloves <u>6 pairs</u>	1	50
Lining and Pillow Set No.			Bearers or Porters		
Handles			Hearse to		
Plate			Removal <u>From Hospital</u>	5	00
Outside Box or Vault <u>Pine</u>	15	00	Automobiles <u>Car for Priest</u>	3	00
Burial Suit			Newspaper Notices		
Slippers					
Embalming <u>of services</u>	35	00			
Washing and Dressing					205
Shaving					00
Services			Transportation Charges		
Use of Chairs			Officiating Clergyman <u>Fr. Lanahan</u>		
Church Charges <u>Funeral</u>	25	00	Amount of Bill	218	00
Cemetery Charges	5	00	Goods Ordered by <u>Mrs Gomes</u>		
Music			Bill Charged to <u>" "</u>		
Flowers					

DR.

205 00

CR.

mch	31.	Pd Terry Cash	3	00	mch	28	1935 Cash	200	00
							1950. Check	15	00
							PAID		

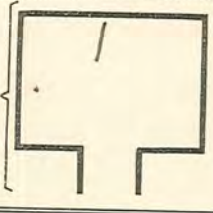
RECORD AND BILL OF ITEMS

Yearly No. 16

FOR THE FUNERAL OF

Total to date 1032

Residence *Maud Stumm*
Federal St.
 Place of Death " "
 Date of Birth 1 *about* Wife or Widow of
 Date of Death 1933 *about* Mch 12, 1933 Age 60 Years Sex _____ Color or Race _____
 (Year) (Month) (Day) (Year) (Month) (Day) Age { Months _____ Single _____
 { Days _____ Married _____
 Maiden Name _____
 Birth-place *Cleveland Ohio* Occupation *Artist*
 Name of Father *Frank A. Stumm* His Birth-place *Woorster Ohio*
 Maiden Name of Mother *Bess Wetmore* Her Birth-place *Phelps New York*
 Cause of Death—Primary *death by asphyxiation* Secondary *illuminating gas (Accidental)*
 Certifying Physician *Lewis C. Med. Ex.* Residence _____
 Place of Burial *Wandueckel* Cemetery *P.H.*
 Funeral Service at _____ Lot No. *810*
 Time of Service _____ Grave No. _____
 Date of Interment *Mch 24* Section _____
Carl W. Stumm, N.Y.



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>2797 mahg</i>	<i>350 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>Clark</i>	<i>125 00</i>	Automobiles <i>July 2</i>	<i>10 00</i>
Burial Suit _____		<i>Wood 1</i>	<i>5 00</i>
Slippers _____		Newspaper Notices	
Embalming <i>f Services</i>	<i>50 00</i>	<i>Set No 810</i>	<i>30 00</i>
Washing and Dressing _____			
Shaving _____			<i>560 00</i>
Services _____		Transportation Charges	
Use of Chairs _____		Officiating Clergyman <i>Blogett</i>	
Church Charges <i>Funeral</i>	<i>25 00</i>	Amount of Bill	<i>605 00</i>
Cemetery Charges	<i>10 00</i>	Goods Ordered by <i>Carl W. Stumm</i>	
Music _____		Bill Charged to " "	
Flowers _____			

DR. 560.00

CR.

	<i>Carl W. Stumm</i>		<i>Mch 22</i>	<i>Cr. By Cash</i>	<i>100 00</i>
	<i>P.O. Box 24</i>		<i>June 24</i>	<i>1935 Bal.</i>	<i>505 00</i>
	<i>Station J. N.Y.</i>				
	<i>Med. Examines</i>				
	<i>Transfer</i>	<i>6 00</i>			
	<i>Pd Apr 8.</i>				
<i>June 26</i>	<i>Paid July Cash</i>	<i>10 00</i>			
	<i>" Wood</i>	<i>5 00</i>			
<i>Apr 7</i>	<i>Pd WB Chas.</i>	<i>30 00</i>			

PAID
 By *Carl W. Stumm*
Adm.

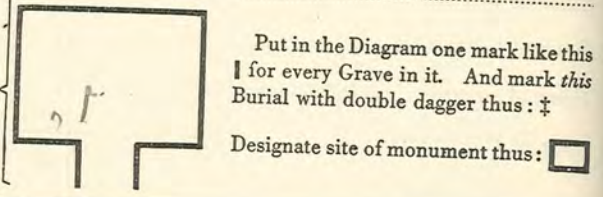
RECORD AND BILL OF ITEMS

Yearly No. 20

FOR THE FUNERAL OF

Total to date 1036

Residence 15 Mill St Cecilia A Coleman
 Place of Death " " "
 Date of Birth 1867 Apr 3 Wife or Widow of Walter S Coleman
 Date of Death 1935 Apr 14 Age 74 Years { Sex _____ } Color or Race _____
 Maiden Name Cecilia A McLaughlin { 0 Months } { Single _____ }
 Birth-place Boston Mass { 1 Days } { Married ✓ }
 Name of Father Charles McLaughlin Occupation House wife
 Maiden Name of Mother Hannah His Birth-place _____
 Cause of Death—Primary Cerebral Hemorrhage Her Birth-place Ireland
 Certifying Physician Minges Residence _____
 Place of Burial Waltham Cemetery P.H.
 Funeral Service at _____ Lot No. 769
 Time of Service _____ Grave No. _____
 Date of Interment April 6 Section _____
Walter S Coleman



Casket or Coffin No. <u>175</u>	<u>100</u>	<u>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</u>	<u>00</u>	Automobiles		
Burial Suit <u>Gray Dress</u>	<u>15</u>	<u>00</u>	Newspaper Notices		
Slippers _____					
Embalming <u>of Services</u>	<u>35</u>	<u>00</u>			
Washing and Dressing _____					
Shaving _____					
Services _____					
Use of Chairs _____	<u>2</u>	<u>00</u>	Transportation Charges		
Church Charges <u>Funeral</u>	<u>25</u>	<u>00</u>	Officiating Clergyman		
Cemetery Charges _____	<u>8</u>	<u>00</u>	Amount of Bill	<u>200</u>	<u>00</u>
Music _____			Goods Ordered by <u>Walter S Coleman</u>		
Flowers _____			Bill Charged to _____		

DR. \$200.00

DR.				CR.				
		<u>200</u>	<u>00</u>	<u>Aug</u>	<u>13</u>	<u>1935 Cash</u>	<u>50</u>	<u>00</u>
		<u>50</u>	<u>00</u>	<u>Mar</u>	<u>5</u>	<u>1937. Check</u>	<u>50</u>	<u>00</u>
	<u>Bal.</u>	<u>150</u>	<u>00</u>					
		<u>50</u>	<u>00</u>					
		<u>100</u>	<u>00</u>					

RECORD AND BILL OF ITEMS

Yearly No. 23

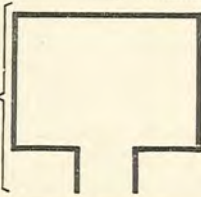
FOR THE FUNERAL OF

Total to date 1039

Grace D Cartwright

Residence Atlantic Ave
 Place of Death W. C. Hospital
 Date of Birth 1 Apr 12 (Year) (Month) (Day)
 Date of Death 19 35 Apr 9 (Year) (Month) (Day)
 Maiden Name Grace D. Caswell
 Birth-place Allston Mass
 Name of Father Henry W. Caswell
 Maiden Name of Mother Louella Martin
 Cause of Death—Primary Carcinoma of Secondary cervix of uterus Hemorrhage
 Certifying Physician S. J. Patrich
 Place of Burial Want
 Funeral Service at Lot No. 780
 Time of Service Grave No.
 Date of Interment Apr 12 1935 Section
 Archibald H. Cartwright

Wife or Widow of Archibald H. Cartwright
 Age { 28 Years { Sex {
 { 11 Months { Single { Color or Race
 { 28 Days { Married {



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. 115 Emb. doe	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		Newspaper Notices	
Slippers		201 No 780	30 00
Embalming & Services	35 00		
Washing and Dressing			
Shaving			
Services Trans from Hosp	5 00		
Use of Chairs		Transportation Charges	
Church Charges Funeral	25 00	Officiating Clergyman Dr Pond	
Cemetery Charges		Amount of Bill	185 00
Music		Goods Ordered by	
Flowers		Bill Charged to	

DR.

\$ 155.00

CR.

July 15	Paid W B Chan	30 00	Apr 23	1935 Cash	185 00
				Disc	5 00
				PAID	
				Apr 23 1935	
				By Archibald H Cartwright	

RECORD AND BILL OF ITEMS

Yearly No. 27

FOR THE FUNERAL OF

Total to date 104.3

Margaret H. Coffin

Residence *53 Court St. Middlebury Vt.*

Place of Death *" " " " " "* Wife or Widow of *Arthur M Coffin*

Date of Birth *1 874* (Year) *Feb* (Month) *18* (Day)

Date of Death *1935* (Year) *Feb* (Month) *23* (Day)

Maiden Name *Margaret Higgins* Age { *61* Years { Sex *wid* { Color or Race

Birth-place *Arlington Vt.* Occupation *None* { *0* Months { Single

Name of Father *John Higgins* His Birth-place *Argyle N.Y.* { *5* Days { Married

Maiden Name of Mother *Helen Welch* Her Birth-place *Argyle N.Y.* { *1935*

Cause of Death—Primary Secondary { *61*

Certifying Physician Residence { *1874*

Place of Burial *Nant.* Cemetery *P.H.*

Funeral Service at Lot No. *51*

Time of Service Grave No.

Date of Interment *May 2, 1935* Section *1*

Arthur J. Blackmer Middlebury Vt.

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>Tony Car for Brew</i>	<i>3 00</i>
Burial Suit		<i>Wood 2 "</i>	<i>10 00</i>
Slippers		Newspaper Notices	
Embalming		<i>Funeral from Boat</i>	<i>25 00</i>
Washing and Dressing		<i>Cemetery Chgs.</i>	<i>10 00</i>
Shaving		Transportation Charges	
Services		Officiating Clergyman <i>J. Higgins</i>	
Use of Chairs		Amount of Bill	<i>48 00</i>
Church Charges		Goods Ordered by	
Cemetery Charges		Bill Charged to	
Music			
Flowers			

DR.

CR.

			<i>May 2</i>	<i>1935 Check</i>	<i>48 00</i>
				PAID	
				<i>May 2 1935</i>	
				<i>By Dora C Higgins</i>	

RECORD AND BILL OF ITEMS

Yearly No. 31

FOR THE FUNERAL OF

Total to date 1047

James Fredonia Fortin

Residence 744 Carroll St Brooklyn N.Y. 6 ms

Place of Death Methodist Hosp Wife or Widow of Mary F Murphy

Date of Birth 1 (Year) 19 (Month) 35 (Day)

Date of Death 19 (Year) 35 (Month) May 11 (Day)

Maiden Name _____ Age { 52 Years { Sex _____ { Color or Race _____
 { _____ Months { Single _____ {
 { _____ Days { Married _____ {

Birth-place Canada Occupation Fisherman

Name of Father Isrial Fortin His Birth-place Canada

Maiden Name of Mother Adeline Turcott Her Birth-place Canada

Cause of Death—Primary Coronary thrombosis Secondary _____

Certifying Physician _____ Residence _____

Place of Burial Nantucket Cemetery St. Marys

Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment May 14, 1935 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 <u>4 Candelabra and</u>			
Size _____ Made by _____	Gloves <u>Prayer rail</u>		3	00
Lining and Pillow Set No. _____	Bearers or Porters <u>Chairs</u>		2	00
Handles _____	Hearse to _____			
Plate _____	Removal <u>From Boat</u>		5	00
Outside Box or Vault _____	Automobiles <u>Funeral</u>		25	00
Burial Suit _____	<u>Cemetery Chgs</u>		10	00
Slippers _____	Newspaper Notices _____			
Embalming _____				
Washing and Dressing _____				
Shaving _____				
Services _____				
Use of Chairs _____	Transportation Charges _____			
Church Charges _____	Officiating Clergyman <u>Jr.</u>			
Cemetery Charges _____	Amount of Bill _____		\$45	00
Music _____	Goods Ordered by <u>Mrs Fortin</u>			
Flowers _____	Bill Charged to _____			

DR.

CR.

			June 27	1935	Cash	\$45	00		
					PAID				
					June 27 1935				
					By Mrs Fortin				

RECORD AND BILL OF ITEMS

Yearly No. 44

FOR THE FUNERAL OF

Total to date 1060

Dora Riddell Terry

Residence 20 Centre St.
 Place of Death " " "
 Date of Birth 1889 Nov 18 (Year) (Month) (Day)
 Date of Death 1935 June 25 (Year) (Month) (Day)
 Maiden Name Dora Riddell
 Birth-place Wentucket
 Name of Father Henry Riddell
 Maiden Name of Mother Alice C. Macy
 Cause of Death—Primary Asphyxiation from Secondary self administered illumination
 Certifying Physician Lewis (Med Ex)
 Place of Burial Went.
 Funeral Service at R. Edward Terry
 Time of Service June 27
 Date of Interment June 27

Wife or Widow of R. Edward Terry
 Age { 45 Years { Sex Female
 { 7 Months { Single
 { 7 Days { Married 4
 Color or Race White
 Occupation House wife
 His Birth-place Wentucket
 Her Birth-place Wentucket
 Residence P.H.
 Cemetery P.H.
 Lot No. 128
 Grave No. 1
 Section 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>115 Stape</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		Transportation Charges	
Embalming <u>for services</u>	<u>35 00</u>	Officiating Clergyman <u>Bloggett</u>	
Washing and Dressing		Amount of Bill	
Shaving		Goods Ordered by <u>R. E. Terry</u>	
Services		Bill Charged to <u>" " "</u>	
Use of Chairs	<u>3 00</u>		
Church Charges <u>Funeral</u>	<u>25 00</u>		
Cemetery Charges	<u>17 00</u>		
Music			
Flowers			

DR. 160 00 CR.

	<u>13 5</u>	<u>Aug 3</u>	<u>1935. Cash</u>	<u>60 00</u>
	<u>25 00</u>	<u>" 14</u>	<u>" "</u>	<u>50 00</u>
		<u>Dec 9</u>	<u>" "</u>	<u>25 00</u>
		<u>July 25</u>	<u>36</u>	<u>25 00</u>
				<u>160 00</u>
			PAID	
			By <u>Edw. Terry</u>	

RECORD AND BILL OF ITEMS

Yearly No. 47

FOR THE FUNERAL OF

Total to date 1935

John Louis Hardy Jr

Residence

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

Date of Birth 1935 June 29 (Year) (Month) (Day) Age { Years { Sex { Color or Race

Date of Death 1935 July 3 (Year) (Month) (Day) Age { Months { Single {

Maiden Name 4 Days { Married {

Birth-place Nantucket Occupation

Name of Father John Louis Hardy His Birth-place Allandale N. S.

Maiden Name of Mother Lillian Kerick Her Birth-place East Hampton

Cause of Death-Primary Premature birth Secondary

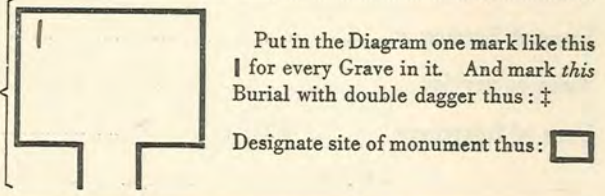
Certifying Physician Folger Residence

Place of Burial Nant. Cemetery P. H.

Funeral Service at Lot No. 811

Time of Service Grave No.

Date of Interment July 3 Section John Louis Hardy



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 entries like 'Casket or Coffin No. 15 00', 'Services Interment 5 00', 'Transportation Charges', 'Officiating Clergyman Pord', and 'Bill Charged to'.

DR.

20.00

CR.

Table for recording payments. Includes a date 'July 14 1935', amount 'Cash 20 00', and a large 'PAID' stamp with the signature 'By John L. Hardy'.

RECORD AND BILL OF ITEMS

Yearly No. 48

FOR THE FUNERAL OF

Total to date 1064

Residence 27 Academy Rd Morristown NJ
 Place of Death Memorial Hosp
 Date of Birth 1869 Nov 16 (Year) (Month) (Day)
 Date of Death 1935 July 3 (Year) (Month) (Day)
 Maiden Name _____
 Birth-place Detroit Mich
 Name of Father Howard Muir
 Maiden Name of Mother Victoria McGraw
 Cause of Death—Primary Carcinoma of
 Certifying Physician _____
 Place of Burial Nant
 Funeral Service at _____
 Time of Service _____
 Date of Interment July 6
Paul C Eschervia

Wife or Widow of Fernando Eschervia
 Age { 65 Years { Sex _____
 8 Months { Single _____
 13 Days { Married _____ } Color or Race _____
 Occupation Housework
 His Birth-place Detroit
 Her Birth-place Detroit
 Secondary Esophagus
 Residence _____
 Cemetery St Mary's
 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. _____	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 <u>Cemetery Chgs</u>	<u>10 00</u>
Outside Box or Vault _____	Automobiles <u>July 2</u>	<u>10 00</u>
Burial Suit _____	<u>" 1</u>	<u>3 00</u>
Slippers _____	Newspaper Notices _____	
Embalming _____	Transportation Charges _____	
Washing and Dressing _____	Officiating Clergyman <u>Higgins</u>	
Shaving _____	Amount of Bill _____	<u>48 00</u>
Services _____	Goods Ordered by _____	
Use of Chairs _____	Bill Charged to _____	
Church Charges _____		
Cemetery Charges _____		
Music _____		
Flowers _____		

DR.

CR.

<u>Paul C Eschervia</u>	<u>Dir</u>	<u>21</u>	<u>1935 Check</u>	<u>48 00</u>
<u>71 Maple Ave.</u>	<u>"</u>	<u>25</u>	<u>Paid July Cash</u>	<u>13 00</u>
<u>Morristown</u>				<u>35 00</u>
<u>NJ</u>				
<u>Arin N. Hughson Inc</u>				
<u>150 S Judwell Ave</u>				
<u>Morristown</u>				
<u>NJ</u>				
			PAID	
			By	
			<u>Arin N Hughson Inc</u>	

1933-1937

RECORD AND BILL OF ITEMS

Yearly No. 52

FOR THE FUNERAL OF

Total to date 1068

Residence No Beach St Obed Glidden

Place of Death " " "

Date of Birth 1 Sept 30 (Year) (Month) (Day)

Date of Death 1935 Sept 9 (Year) (Month) (Day)

Wife or Widow of Frances Dennigan

Age 63 Years 11 Months 10 Days

Sex Single Color or Race

Maiden Name

Birth-place Nantucket Occupation Fisherman

Name of Father Charles S. Glidden His Birth-place Nantucket

Maiden Name of Mother Catherine Blessington Her Birth-place Ireland

Cause of Death—Primary Chronic Alcoholism Secondary

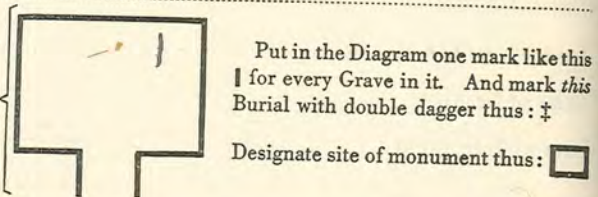
Certifying Physician Mengus Med E Residence

Place of Burial Nant. Cemetery P.H.

Funeral Service at Lot No. 185 S

Time of Service Grave No.

Date of Interment Section



Casket or Coffin No. <u>175 3</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	
Plate <u></u>		Removal	
Outside Box or Vault <u>Pine</u>	<u>15 00</u>	Automobiles	
Burial Suit <u></u>	<u>15 00</u>	Newspaper Notices	
Slippers <u></u>		Transportation Charges	
Embalming <u>Services</u>	<u>35 00</u>	Officiating Clergyman <u>Daley</u>	
Washing and Dressing <u></u>		Amount of Bill	<u>210 00</u>
Shaving <u></u>		Goods Ordered by <u></u>	
Services <u>Transfer</u>	<u>5 00</u>	Bill Charged to <u>Walter Glidden</u>	
Use of Chairs <u></u>			
Church Charges <u>Funeral</u>	<u>25 00</u>		
Cemetery Charges <u></u>	<u>10 00</u>		
Music <u>Prayer Rail Candelabra</u>			
Flowers <u>& Candelabra</u>	<u>5 00</u>		
DR. 210.00		CR.	

<u>Med. E.</u>		<u>Dec 13</u>	<u>Checks</u>	<u>165 00</u>
<u>Transfer</u>	<u>5.00</u>	<u>May 10</u>	<u>1938 Cash</u>	<u>20 00</u>
<u>Ad Oct By Tom Inman</u>		<u>Oct 31</u>	<u>" 29 "</u>	<u>25 00</u>
	<u>210 00</u>			
	<u>165 00</u>			
	<u>45 00</u>	<u>Bal.</u>	<u>PAID</u>	
	<u>20 00</u>		<u>By Walter Glidden</u>	
	<u>25 00</u>	<u>Bal</u>		

RECORD AND BILL OF ITEMS

Yearly No. 53 FOR THE FUNERAL OF Total to date 1969

Benjamin E. Pease

Residence 42 Pine St

Place of Death " Wife or Widow of Emma C. Harps

Date of Birth 1 Feb 22 Age { 84 Years { Sex { Color or Race
(Year) (Month) (Day) { 6 Months { Single {
(Year) (Month) (Day) { 2 Days { Married {

Maiden Name Birth-place Edgartown Mass Occupation Farmer

Name of Father Benjamin C. Pease His Birth-place Edgartown

Maiden Name of Mother Mary Vincent Her Birth-place "

Cause of Death—Primary Arteriosclerosis Secondary

Certifying Physician Folger Residence

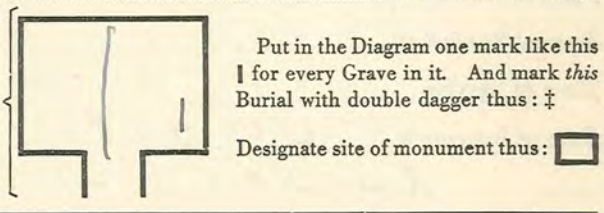
Place of Burial Went Cemetery PK

Funeral Service at Lot No. 736E

Time of Service Grave No.

Date of Interment Sept 26 1935 Section

Emma C. Pease



Casket or Coffin No. <u>160</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			
Services		<u>1/2 Lot No. 736</u>	<u>15 00</u>
Use of Chairs		Transportation Charges	
Church Charges <u>Funeral</u>	<u>25 00</u>	Officiating Clergyman	
Cemetery Charges	<u>10 00</u>	Amount of Bill	<u>165 00</u>
Music		Goods Ordered by	
Flowers		Bill Charged to	

DR. \$130.00 CR.

				<u>Dec 11</u>	<u>1935</u>	<u>Cash</u>	<u>\$165 00</u>
						PAID	
						By <u>Emma Pease</u>	

RECORD AND BILL OF ITEMS

Yearly No. 60

FOR THE FUNERAL OF

Total to date 1976

Residence *88 Main St. Warsaw Indiana*
 Place of Death *88 Main St. 5 yrs.*
 Date of Birth *1 849 May 1*
 Date of Death *19 35 Oct 27*
 Maiden Name _____
 Birth-place *Sporeham Vt.*
 Name of Father *Edgar S Cattlin*
 Maiden Name of Mother *Faymah M Chipman*
 Cause of Death—Primary *Cerebral Hem.*
 Certifying Physician *Levis.*
 Place of Burial *Warsaw Indiana*
 Funeral Service at _____
 Time of Service _____
 Date of Interment *Oct 29 1935*
 _____ *Edgar S Cattlin Brunswick Me*

Wife or Widow of _____
 Age { *86* Years { Sex _____
 5 Months { Single
 26 Days { Married _____
 Color or Race _____

Occupation *None*
 His Birth-place *Owille Vt.*
 Her Birth-place *Unknown*
 Secondary *General Arterial sclerosis.*
 Residence _____
 Cemetery _____
 Lot No. _____
 Grave No. _____
 Section _____

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

Casket or Coffin No. <i>1753</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>Chestnut</i>	<i>50 00</i>	Automobiles	
Burial Suit _____		Newspaper Notices	
Slippers _____		Transportation Charges <i>to Indiana</i>	<i>75 74</i>
Embalming <i>of Services</i>	<i>45 00</i>	Officiating Clergyman	
Washing and Dressing _____		Amount of Bill	<i>275 74</i>
Shaving _____		Goods Ordered by <i>Mrs Sam Kelly</i>	
Services <i>Transfer to Boat</i>	<i>5 00</i>	Bill Charged to <i>Edgar S Cattlin</i>	
Use of Chairs _____			
Church Charges _____			
Cemetery Charges _____			
Music _____			
Flowers _____			

DR. *\$200.00*

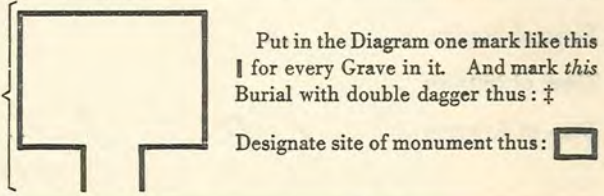
CR.

<i>Edgar S Cattlin</i>	<i>Nov 6</i>	<i>1935 Check</i>	<i>275 74</i>
<i>Wojewscot Paper Co</i>			
<i>Brunswick Me.</i>			
		PAID	
		<i>By Edgar S Cattlin</i>	

RECORD AND BILL OF ITEMS

Yearly No. 61 FOR THE FUNERAL OF Stephen M. Roberts, Total to date 1077

Residence 19 Orange St. 32 yrs
 Place of Death " " " Wife or Widow of Mary Shears
 Date of Birth 1844 Aug 7 Age 91 Years { Sex M. W. } Color or Race
 Date of Death 1935 Oct 30 { 2 Months } Single
 Maiden Name _____ { 23 Days } Married
 Birth-place Manchester, Vt. Occupation Physician
 Name of Father Daniel Roberts His Birth-place Manchester Vt.
 Maiden Name of Mother Caroline Martindale Her Birth-place Wallinford, Vt.
 Cause of Death—Primary Arteriosclerosis Secondary Broncho Pneumonia
 Certifying Physician Gilpatrick Residence _____
 Place of Burial Burlington Vt. Cemetery Lake View
 Funeral Service at _____ Lot No. _____
 Time of Service _____ Grave No. _____
 Date of Interment Caroline M. Roberts Section _____



Casket or Coffin No. <u>285¹²</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 <u>Transfer to Boat</u>	5 00	Transportation Charges <u>to Burlington</u>	16 88
Use of Chairs _____	3 00	Officiating Clergyman <u>Blogett</u>	
Church Charges _____		Amount of Bill	224 88
Cemetery Charges _____		Goods Ordered by <u>Caroline M Roberts</u>	
Music _____		Bill Charged to <u>Chas W. Darling</u>	
Flowers _____			

DR. 208.00 CR.

<u>Judge Charles W. Darling</u>	<u>Dec 7</u>	<u>1935 Check</u>	<u>224 88</u>
<u>Burlington</u>			
<u>Vt.</u>			
PAID			
<u>By Charles W. Darling</u>			

RECORD AND BILL OF ITEMS

Yearly No. 64

FOR THE FUNERAL OF

Total to date 1080

Patricia J McGrath

Residence 16 West Dover
 Place of Death N.C. Hospital
 Date of Birth 1932 June 22
 Date of Death 1935 Nov 10
 Maiden Name _____
 Birth-place Nantucket
 Name of Father Thomas McGrath
 Maiden Name of Mother Margaret Brennan
 Cause of Death—Primary Tetanus
 Certifying Physician Folger
 Place of Burial Nant
 Funeral Service at _____
 Time of Service _____
 Date of Interment Nov 17 1935

Wife or Widow of _____
 Age { 3 Years { Sex _____
 4 Months { Single
 23 Days { Married _____
 Color or Race _____
 Occupation None
 His Birth-place County Mayo, Ireland
 Her Birth-place Wexford, Ireland
 Secondary wound in foot by splinters of wood
 Residence _____
 Cemetery St. Marys
 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>35 00</u>	Candles	
Size		Gloves	
Made by		Bearers or Porters	
Lining and Pillow Set No.		Hearse to	
Handles		Removal	
Plate		Automobiles	
Outside Box or Vault <u>Pine</u>	<u>5 00</u>	Newspaper Notices	
Burial Suit		Transportation Charges	
Slippers		Officiating Clergyman <u>F. Daley</u>	
Embalming <u>& Services</u>	<u>15 00</u>	Amount of Bill	<u>78 00</u>
Washing and Dressing		Goods Ordered by	
Shaving		Bill-Charged to <u>Thos McGrath</u>	
Services <u>Transfer</u>	<u>5 00</u>		
Use of Chairs			
Church Charges			
Cemetery Charges <u>Interment</u>	<u>15 00</u>		
Music <u>Candelabra & Candles</u>	<u>3 00</u>		
Flowers			
DR.	<u>78.00</u>		

DR.		CR.	
		<u>Dec 4</u>	<u>1935 Cash</u>
			<u>78 00</u>
			(PAID)
			<u>By Thos. McGrath</u>

RECORD AND BILL OF ITEMS

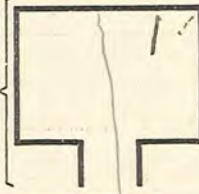
Yearly No. 69

FOR THE FUNERAL OF

Total to date 1085.

George Sylvia

Residence *73 Orange*
 Place of Death *State Forest* Wife or Widow of *Ida Garland*
 Date of Birth *1909 May 26* Age *26* Years Sex *Male* Color or Race
 Date of Death *1935 Dec 3* Age *6* Months Single
 Maiden Name *Ida* Days *7* Married
 Birth-place *New Bedford, Mass* Occupation *Day laborer*
 Name of Father *Manuel Sylvia* His Birth-place *Hayol*
 Maiden Name of Mother *Mary Rose* Her Birth-place *New Bedford*
 Cause of Death—Primary *gun shot wound* Secondary *left chest internal hemorrhage*
 Certifying Physician *Lewis Med. Co.* Residence *Penetrating left lung shot by*
 Place of Burial *Nantucket* Cemetery *P.H. another hunter*
 Funeral Service at _____ Lot No. *515*
 Time of Service _____ Grave No. _____
 Date of Interment *Dec 5, 1935* Section _____
Ida Sylvia



Casket or Coffin No. <i>B & H-type</i>	<i>45 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 _____		Newspaper Notices	
Slippers _____		Transportation Charges	
Embalming _____		Officiating Clergyman <i>Sphere</i>	
Washing and Dressing _____		Amount of Bill <i>100 00</i>	
Shaving _____		Goods Ordered by <i>Public Welfare</i>	
Services <i>15 00</i>		Bill Charged to _____	
Use of Chairs _____			
Church Charges _____			
Cemetery Charges <i>Interment</i>	<i>25 00</i>		
Music _____			
Flowers _____			

DR.

100 00

CR.

<i>Medical Expenses</i>		<i>Jan 2, 1936 Check</i>	<i>100 00</i>
<i>Transfer</i>	<i>5 00</i>		
<i>Used Morgue</i>	<i>10 00</i>		
<i>Paid</i>	<i>15 00</i>		
		PAID	
		<i>By Town Treasurer</i>	

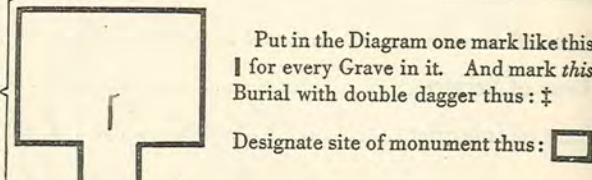
RECORD AND BILL OF ITEMS

Yearly No. 70

FOR THE FUNERAL OF

Total to date 1086

Residence 30 Pearl St. Wallau Cathcart
 Place of Death Foxboro State Hospital ^{11 mo 1 day} Wife or Widow of Mary E. Ayers
 Date of Birth 1 (Year) 1 (Month) 1 (Day)
 Date of Death 19 35 (Year) Dec (Month) 6 (Day) Age 79 Years 8 Months 16 Days { Sex Wid. Color or Race
 Maiden Name _____ { Single _____ Married _____
 Birth-place Nantucket Occupation Baker
 Name of Father David Cathcart His Birth-place Nantucket
 Maiden Name of Mother Caroline Suce Her Birth-place Nantucket
 Cause of Death—Primary Gen. Arteriosclerosis Secondary Chronic Myocarditis
 Certifying Physician _____ Residence _____
 Place of Burial Nantucket Cemetery P.H.
 Funeral Service at _____ Lot No. 523
 Time of Service _____ Grave No. _____
 Date of Interment Dec 8, 1935 Section _____
Foxboro Hospital Records



Casket or Coffin No. <u>2853</u>	<u>150 00</u>	Candles	
Size _____ Made by _____		Gloves	
Lining and Pillow Set No. _____		Bearers or Porters	
Handles _____		Hearse to	
Plate _____		Removal	
Outside Box or Vault _____		Automobiles	
Burial Suit _____		Newspaper Notices	
Slippers _____			
Embalming _____			
Washing and Dressing _____		<u>Paid Lewis Belcher</u>	<u>50 50</u>
Shaving _____			
Services <u>Transfer from Boat</u>	<u>5 00</u>		
Use of Chairs _____		Transportation Charges	
Church Charges <u>Funeral</u>	<u>25 00</u>	Officiating Clergyman <u>Blogett</u>	
Cemetery Charges _____	<u>10 00</u>	Amount of Bill	<u>240 50</u>
Music _____		Goods Ordered by <u>Alton Cathcart</u>	
Flowers _____		Bill Charged to _____	

DR. 190.00 CR.

	<u>145.00</u>	<u>240 50</u>	<u>Feb 2</u>	<u>Cr. Check</u>	<u>25 50</u>
<u>Jan 15</u>	<u>20 00</u>	<u>25 50</u>	<u>Oct 15</u>	<u>1936 Cr. Check</u>	<u>20 00</u>
	<u>125.00</u>	<u>20 00</u>	<u>Nov 14</u>	<u>" " "</u>	<u>10 00</u>
	<u>10 00</u>	<u>795 00</u>	<u>Apr 16</u>	<u>1937 Check</u>	<u>20 00</u>
<u>Feb 16/28</u>	<u>115.00</u>	<u>10 00</u>	<u>May 17</u>	<u>" " "</u>	<u>20 00</u>
	<u>20 00</u>	<u>185 00</u>	<u>Jan 15</u>	<u>1938 "</u>	<u>20 00</u>
	<u>95.00</u>	<u>20 00</u>	<u>" 31</u>	<u>" " "</u>	<u>10 00</u>
	<u>5 00</u>	<u>145 00</u>	<u>Feb 16</u>	<u>1938 "</u>	<u>20 00</u>
	<u>90.00</u>		<u>Mar 1</u>	<u>" " "</u>	<u>5 00</u>
	<u>5 00</u>		<u>" 30</u>	<u>" " "</u>	<u>5 00</u>
	<u>85.00</u>		<u>Apr 1</u>	<u>" " "</u>	<u>10 00</u>
	<u>10 00</u>		<u>May 16</u>	<u>" " "</u>	<u>10 00</u>
	<u>75.00</u>		<u>June 3</u>	<u>" " "</u>	<u>5 00</u>
	<u>10 00</u>				
	<u>65.00</u>				
	<u>5 00</u>				
	<u>60 00</u>				

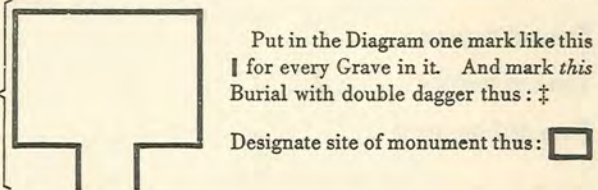
RECORD AND BILL OF ITEMS

Yearly No. 75

FOR THE FUNERAL OF

Total to date 1091

Susan P. Burdick
 Residence 1 East Dover
 Place of Death " " Wife or Widow of Benjamin F. Burdick
 Date of Birth June 5 (Year) 1935 (Month) 29 (Day) Age 65 Years { Sex Wid } Color or Race
 Date of Death 1935 (Year) Dec (Month) 29 (Day) Age 6 Months { Single }
 Maiden Name Susan P. Bowen (Year) (Month) (Day) Age 24 Days { Married }
 Birth-place Nantucket Occupation Housework
 Name of Father William H. Bowen His Birth-place Nantucket
 Maiden Name of Mother Nancy Hargrave Her Birth-place Savannah Ga.
 Cause of Death—Primary Chronic Nephritis Secondary _____
 Certifying Physician Folger Residence _____
 Place of Burial Nantucket Cemetery Newtown
 Funeral Service at _____ Lot No. _____
 Time of Service _____ Grave No. _____
 Date of Interment Jan. 2, 1936 Section _____
Catharine Grant



Casket or Coffin No. <u>1752 XXX</u>	<u>135 00</u>	Candles	
Size <u>6/3 XX</u> 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>of Services</u>	<u>35 00</u>	Officiating Clergyman <u>Bloggett</u>	
Washing and Dressing		Amount of Bill	<u>220 00</u>
Shaving		Goods Ordered by	
Services		Bill Charged to	
Use of Chairs			
Church Charges <u>Funeral</u>	<u>25 00</u>		
Cemetery Charges	<u>10 00</u>		
Music			
Flowers			

DR.

\$ 220.00

CR.

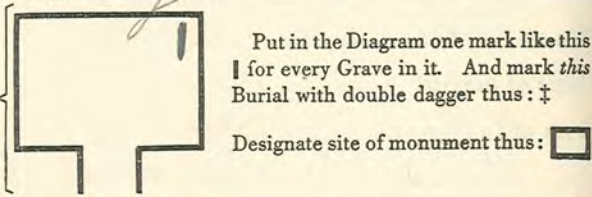
			<u>Dec 12</u>	<u>44</u>	<u>Check</u>	<u>200 00</u>
					<u>due</u>	<u>20 00</u>
						<u>220 00</u>
					PAID	
					<u>Lydia Schiele</u>	

1933-1937

RECORD AND BILL OF ITEMS

Yearly No. 5 FOR THE FUNERAL OF Fredrick C. Collinge Total to date 1098

Residence 50 West 58th St. N.Y. City
 Place of Death Manhattan General Hosp. Wife or Widow of Emma Russell
 Date of Birth 1 (Year) Jan (Month) 10 (Day) Age 69 Years { Sex Male } Color or Race
 Date of Death 1936 (Year) Jan (Month) 10 (Day) { Months 0 } { Single Yes }
 Maiden Name Santa Helena Eng. Occupation Musician
 Name of Father Greentree Collinge His Birth-place England
 Maiden Name of Mother Margaret Chapman Her Birth-place England
 Cause of Death—Primary Uremia Secondary _____
 Certifying Physician _____ Residence _____
 Place of Burial Nantucket Cemetery St. Marys
 Funeral Service at _____ Lot No. _____
 Time of Service _____ Grave No. _____
 Date of Interment Jan 18 Section _____



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	<u>100 00</u>	Automobiles	
Burial Suit		Newspaper Notices	
Slippers		Transportation Charges	
Embalming		Officiating Clergyman	
Washing and Dressing		Amount of Bill	<u>138 75</u>
Shaving		Goods Ordered by <u>James M. Smith</u>	
Services <u>Funeral from Boat</u>	<u>25 00</u>	Bill Charged to	
Use of Chairs			
Church Charges			
Cemetery Charges	<u>12 00</u>		
Music			
Flowers <u>Toll Call</u>	<u>1 75</u>		

DR. 138.75 CR.

<u>James M. Smith</u>	<u>Feb 21</u>	<u>1936 Check</u>	<u>138 75</u>
<u>30 Beekman Place</u>			
<u>New York City</u>			
<u>N.Y.</u>			
		PAID	
		<u>By Eunice Collinge</u>	
		<u>Adm.</u>	

RECORD AND BILL OF ITEMS

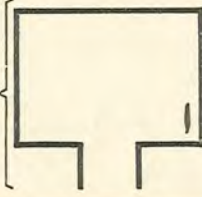
Yearly No. 18

FOR THE FUNERAL OF

Total to date 1111

Albert Chase Bromley

Residence 3 West York St.
 Place of Death N.C. Hospital
 Date of Birth 1935 Dec 25
 Date of Death 1936 Mar 24
 Maiden Name
 Birth-place Nantucket Occupation None
 Name of Father George R. Bromley His Birth-place Stoneington Conn.
 Maiden Name of Mother Helen F. Chase Her Birth-place Nantucket Mass.
 Cause of Death—Primary General Septicæmia Secondary Streptococcosis Burns Third degree Bath.
 Certifying Physician Gill Residence
 Place of Burial Newtown Cemetery Newtown
 Funeral Service at Lot No.
 Time of Service Grave No.
 Date of Interment Mar 26, 1936 Section
 George R. Bromley



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
Burial Suit	Newspaper Notices
Slippers	Casket & Interment \$15.00
Embalming	Transportation Charges
Washing and Dressing	Officiating Clergyman Blogett
Shaving	Amount of Bill
Services	Goods Ordered by
Use of Chairs	Bill Charged to
Church Charges	
Cemetery Charges	
Music	
Flowers	

DR.

CR.

	June 23	Cash	5.00
	Apr 16 1937	Cash	2.00
	May 19	"	1.00
	Nov 18	"	7.00
			15.00
		PAID	
		By Helen Bromley	

1933-1937

RECORD AND BILL OF ITEMS

Yearly No. 25

FOR THE FUNERAL OF

Total to date 1118

James D. Mooney

Residence 11 Pleasant St

Place of Death " " " " " "

Date of Birth 1863 Feb 19 (Year) (Month) (Day)

Date of Death 1936 Apr 30 (Year) (Month) (Day)

Wife or Widow of Margaret Driscoll

Age { 83 Years { Sex { Color or Race
 { 2 Months { Single
 { 11 Days { Married

Maiden Name

Birth-place Nantucket Occupation Undertaker Assistant

Name of Father Robert C. Mooney His Birth-place County Wexford Ireland

Maiden Name of Mother Julia Dunigan Her Birth-place Dublin Ireland

Cause of Death—Primary Cerebral Hem Secondary Arteriosclerosis

Certifying Physician Folger Residence

Place of Burial Nant Cemetery St Mary's

Funeral Service at Lot No.

Time of Service Grave No.

Date of Interment May 28th. Section

Margaret Mooney

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. 2853	150 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		Transportation Charges	
Embalming & Services	35 00	Officiating Clergyman J. Griffin	
Washing and Dressing		Amount of Bill	240 00
Shaving		Goods Ordered by Mrs Mooney	
Services		Bill Charged to	
Use of Chairs			
Church Charges Funeral	25 00		
Cemetery Charges	10 00		
Music Prayer Book & Candles	4 00		
Flowers Gloves	1 00		

DR.

\$240.00

CR.

	240 00	Feb 9 1937	Cash	50 00
	50 00	Apr 10	" "	50 00
Bal.	3190 00	May 12	" "	50 00
	50 00	June 16	37 Cash	50 00
	140 00	Sept 7	37 Cash	40 00
	50 00			
	90 00			
	50 00			
	40 00 Bal.			

PAID
By Mrs Mooney

1933-1937

RECORD AND BILL OF ITEMS

Yearly No. 35

FOR THE FUNERAL OF

Total to date 1128

Infant of Clifford & Ryder

Residence

Place of Death W. C. Hospital Wife or Widow of

Date of Birth 1 (Year) (Month) (Day) Age { Years { Sex
 { Months { Single
 { Days { Married
 Color or Race

Date of Death 1936 (Year) June (Month) 9 (Day)

Maiden Name

Birth-place Wentucket Occupation

Name of Father Clifford & Ryder His Birth-place Wentucket Mass

Maiden Name of Mother Amelia F. Merlock Her Birth-place Dorothy, N. J.

Cause of Death—Primary Stillborn Secondary

Certifying Physician F. J. Quinn Residence

Place of Burial

Funeral Service at

Time of Service

Date of Interment June 11, 1936 Cemetery PH
Clifford & Ryder Lot No. 787 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>45 00</u>	Candles	
Size	Made by	Gloves	
Lining and Pillow Set No.		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault		Automobiles	
Burial Suit		Newspaper Notices	
Slippers		Transportation Charges	
Embalming		Officiating Clergyman	
Washing and Dressing		Amount of Bill	<u>20 00</u>
Shaving		Goods Ordered by <u>Clifford Ryder</u>	
Services		Bill Charged to	
Use of Chairs			
Church Charges			
Cemetery Charges	<u>5 00</u>		
Music			
Flowers			

DR. \$ 20.00

CR.

		<u>June 21</u>	<u>1937. Cr Cash</u>	<u>10 00</u>
		<u>Aug 10</u>	<u>" " "</u>	<u>10 00</u>
				<u>20 00</u>
			PAID	
			<u>By Clifford Ryder</u>	

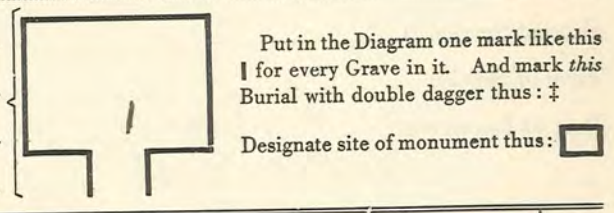
RECORD AND BILL OF ITEMS

Yearly No. 42

FOR THE FUNERAL OF

Total to date 1/136

Residence Broadway via Scouet
 Place of Death 1 Wife or Widow of Charles E. Burgess
 Date of Birth 1864 July 4 { 72 Years { Sex { Color or Race
 (Year) (Month) (Day) Age { 0 Months { Single {
 Date of Death 1936 July 8 { 4 Days { Married X {
 (Year) (Month) (Day) Maiden Name Elizabeth Gardner
 Birth-place Nantucket Occupation House wife
 Name of Father Harrison Gardner His Birth-place Nantucket
 Maiden Name of Mother Susan Folger Her Birth-place Nantucket
 Cause of Death—Primary Cerebral Hem Secondary
 Certifying Physician Wenger Residence
 Place of Burial Nantucket Cemetery P.H.
 Funeral Service at Lot No. 489
 Time of Service Grave No.
 Date of Interment July 11, 1936 Section
Charles E. Burgess



Casket or Coffin No. <u>175¹²</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>of Services</u>	<u>35 00</u>	Officiating Clergyman <u>Pickett</u>	
Washing and Dressing		Amount of Bill.....	<u>195 00</u>
Shaving		Goods Ordered by <u>Chas E. Burgess</u>	
Services <u>Transfer from Scouet</u>	<u>10 00</u>	Bill Charged to	
Use of Chairs			
Church Charges <u>Funeral</u>	<u>25 00</u>		
Cemetery Charges.....	<u>10 00</u>		
Music.....			
Flowers			
<u>8195.00</u>			

DR.	CR.
	<u>195 00</u>
	<u>Sept 26 36 Check</u>
PAID	
<u>By Charles E. Burgess</u>	
<u>Adm.</u>	

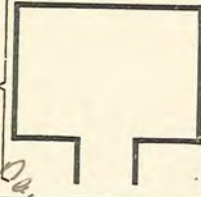
RECORD AND BILL OF ITEMS

Yearly No. 44

FOR THE FUNERAL OF

Total to date 1137

James J. McFadden
 Residence Rosemont, Pa.
 Place of Death Beach House Semist Wife or Widow of Adelle Lewis
 Date of Birth 1
 Date of Death 1936 (Year) July (Month) 15 (Day) Age 73 Years { Sex { Color or Race
 Maiden Name _____ Months { Single _____
 Birth-place Philadelphia Pa. Occupation Cotton Broker Days { Married r
 Name of Father George McFadden His Birth-place England
 Maiden Name of Mother Charlotte Her Birth-place England
 Cause of Death—Primary Coronary thrombosis Secondary _____
 Certifying Physician Wm. M. Med. Ex. Residence _____
 Place of Burial Rosemont Pa. Cemetery _____
 Funeral Service at _____ Lot No. _____
 Time of Service _____ Grave No. _____
 Date of Interment Shipped July 16 Section _____
Wilmer S. Ritcher Rosemont Pa.



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>B. S. of Boy</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		Automobiles	
Burial Suit		Newspaper Notices	
Slippers			
Embalmg. <u>services</u>	<u>35 00</u>		
Washing and Dressing			
Shaving <u>Transfer from Semist</u>	<u>10 00</u>		
Services <u>to Boat</u>	<u>5 00</u>		
Use of Chairs		Transportation Charges <u>Express</u>	<u>25 50</u>
Church Charges		Officiating Clergyman	
Cemetery Charges		Amount of Bill	<u>140 50</u>
Music		Goods Ordered by <u>Wilmer S. Ritcher</u>	
Flowers		Bill Charged to	

DR. 115.00

CR.

<u>John McFadden</u>	<u>Aug 14</u>	<u>36 Check</u>	<u>140 50</u>
<u>60 Wall St.</u>			
<u>N.Y. Cotton Exchange</u>			
<u>N.Y.</u>			
		PAID	
		<u>By Fidelity-Philadelphia Trust Co.</u>	

RECORD AND BILL OF ITEMS

Yearly No. 50

FOR THE FUNERAL OF

Total to date 1143

Virginia W Ainslie

Residence River Forest Ill.

Place of Death 34 Orange St. 1 mo. Wife or Widow of Samuel R Ainslie

Date of Birth 1 (Year) (Month) (Day) Age 80 Years Sex Color or Race

Date of Death 1936 Aug 4 (Year) (Month) (Day) Age Months Single Married

Maiden Name Days Married

Birth-place Palmyra Missouri Occupation None

Name of Father John W. Widdersfield His Birth-place England

Maiden Name of Mother Unknown Her Birth-place C

Cause of Death—Primary Caremona of night Secondary lung with intestinal & cerebral metastasis

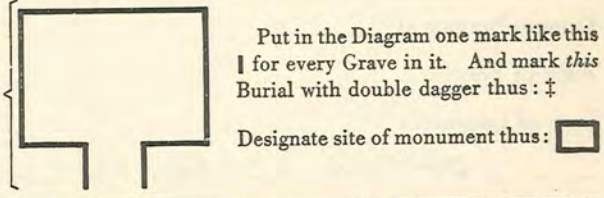
Certifying Physician Fine Residence Forest Home

Place of Burial Chicago Cemetery Forest Home

Funeral Service at Lot No.

Time of Service Grave No.

Date of Interment Shipped Aug 6 Genevieve Bye Section



Casket or Coffin No. 515 ¹²	250 00	Candles	
Size Made by		Gloves	
Lining and Pillow Set No.		Bearers or Porters	
Handles		Hearse to	
Plate		Removal	
Outside Box or Vault Pine	18 00	Automobiles	
Burial Suit		Newspaper Notices	
Slippers			
Embalming f. Services	50 00		
Washing and Dressing			
Shaving			
Services Transfer To Boat	5 00		
Use of Chairs		Transportation Charges	
Church Charges		Officiating Clergyman	
Cemetery Charges		Amount of Bill	
Music		Goods Ordered by Mary A. Ball	323 00
Flowers		Bill Charged to	

DR.

\$323.00

CR.

Genevieve Bye	Aug 23	36 Check	323 00
612 Franklin Ave			
Chicago			
		PAID	
		By Mary A. Ball	

RECORD AND BILL OF ITEMS

Yearly No. 60

FOR THE FUNERAL OF

Total to date 1153

Fanny D. Snow.

Residence *35 Pearl St*

Place of Death *M. C. Hospital* Wife or Widow of *Charles A. Snow*

Date of Birth *1st Mch 9* Age { *92* Years { Sex { Color or Race
 (Year) (Month) (Day) { *8* Months { Single {
 Date of Death *1936 Nov 2* (Year) (Month) (Day) Days { Married {

Maiden Name

Birth-place *Boston Mass* Occupation *None*

Name of Father *John H. Sherburne* His Birth-place *Portsmouth N.H.*

Maiden Name of Mother *Frances P. Devens* Her Birth-place *Boston*

Cause of Death—Primary *fracture compressed of the 5th cervical vertebra with* Secondary

Certifying Physician *Lewis Med. Ex.* Residence *hemorrhage into spinal cord*

Place of Burial *Pentucket* Cemetery *P.H.*

Funeral Service at Lot No. *716*

Time of Service Grave No.

Date of Interment *Nov. 4, 1936* Section
Mrs. Frances D. Parish

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. <i>285 S</i>	175	00	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>	15	00	Automobiles <i>Carlton West 1.</i>	5	00
Burial Suit			Newspaper Notices.....		
Slippers					
Embalming <i>f Services</i>	50	00			
Washing and Dressing					
Shaving					
Services <i>Transfer from hosp.</i>	5	00	Transportation Charges.....		
Use of Chairs			Officiating Clergyman <i>B. Loggett.</i>	280	00
Church Charges <i>Funeral</i>	25	00	Amount of Bill.....	285	00
Cemetery Charges.....	10	00	Goods Ordered by <i>Francis D. Parish</i>		
Music.....			Bill Charged to	285	00
Flowers					

DR.	<i>\$ 280.00</i>	CR.
a. <i>Carlton West on Bill</i>	<i>5 00</i>	<i>Nov. 7, 1936 Check</i>
		<i>\$ 285 00</i>
		<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> PAID By <i>Francis D. Parish</i> </div>

RECORD AND BILL OF ITEMS

Yearly No. 68

FOR THE FUNERAL OF

Total to date 1161

Annal Barker Folger

Residence 88 Main St.

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

Date of Birth 1852 May 25 Age 84 Years Sex Female Color or Race " "

Date of Death 1936 Nov 27 Age 6 Months Sex Single ✓

Maiden Name " " " " Age 2 Days Married " "

Birth-place Nantucket Occupation Artist

Name of Father Francis B. Folger His Birth-place Nantucket

Maiden Name of Mother Sucretia Coleman Her Birth-place Nantucket

Cause of Death—Primary Chronic Myocarditis Secondary Terminal Pneumonia

Certifying Physician Lewis J Residence " " " "

Place of Burial West Cemetery P. H.

Funeral Service at " " " " Lot No. 021

Time of Service " " " " Grave No. near 321

Date of Interment Nov 30 1936 Section 321

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>2855</u>	165	00	Candles		
Size <u>Est.</u> Made by <u>" "</u>			Gloves		
Lining and Pillow Set No. <u>" "</u>			Bearers or Porters		
Handles <u>" "</u>			Hearse to		
Plate <u>" "</u>			Removal		
Outside Box or Vault <u>Clark</u>	100	00	Automobiles		
Burial Suit			Newspaper Notices		
Slippers			<u>J. Terry 3 Cars</u>	15	00
Embalming <u>Services</u>	45	00	Transportation Charges		
Washing and Dressing			Officiating Clergyman <u>Blogett</u>		
Shaving			Amount of Bill	345	00
Services			Goods Ordered by <u>Verie F. Kelley</u>	360	00
Use of Chairs			Bill Charged to <u>Edgar S. Catlin Adm.</u>		
Church Charges <u>Funeral</u>	25	00			
Cemetery Charges	10	00			
Music					
Flowers					

DR.

\$345.00

CR.

	Edgar S. Catlin		Feb 15	1937 Check	360 00
	78 Pepperscott Paper Co.				
	Brunswick				
	Maine				
Feb 18	Pd Terry check	814			
				PAID	
				By Edgar S. Catlin Adm.	

RECORD AND BILL OF ITEMS

Yearly No. 6

FOR THE FUNERAL OF

Total to date 1177

Martha Taylor Manton

Residence 135 Chestnut St Chelsea

Place of Death Chelsea Memorial Hosp Wife or Widow of _____

Date of Birth 1878 Sept 27 Age 58 Years Sex _____ Color or Race _____
(Year) (Month) (Day)

Date of Death 1937 Jan 23 Months _____ Single Married _____
(Year) (Month) (Day)

Maiden Name _____

Birth-place Wantucket Occupation House keeper at home

Name of Father Charles B. Manton His Birth-place Wantucket

Maiden Name of Mother Martha J. Davis Her Birth-place Wantucket

Cause of Death—Primary Cardiac failure Secondary resulting from hypertensive heart disease

Certifying Physician _____ Residence Broncho Park

Place of Burial Want Cemetery Newtown

Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment Jan 26 1937 Section _____

Odd Dr by 135 Chestnut St Chelsea

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>	15 00	
Plate _____	Removal <u>Cemetery Chgs</u>	10 00	
Outside Box or Vault _____	Automobiles _____		
Burial Suit _____	Newspaper Notices _____		
Slippers _____	Transportation Charges _____		
Embalming _____	Officiating Clergyman _____		
Washing and Dressing _____	Amount of Bill _____	25 00	
Shaving _____	Goods Ordered by <u>Robert Manton</u>		
Services _____	Bill Charged to <u>F. J. Robinson</u>		
Use of Chairs _____			
Church Charges _____			
Cemetery Charges _____			
Music _____			
Flowers _____			

DR.

CR.

<u>Mr. F. J. Robinson</u>	<u>55 Moody St</u>	<u>Waltham</u>	<u>Mass.</u>
	<u>Feb 8</u>	<u>1937</u>	<u>Check</u>
			<u>\$ 25 00</u>
			PAID
			<u>By F. J. Robinson Acct</u>

RECORD AND BILL OF ITEMS

Yearly No. 8

FOR THE FUNERAL OF

Total to date 1179

Catherine Killen

Residence 3 Howard St.

Place of Death " " Wife or Widow of Charles Killen

Date of Birth 1849 Dec 6 (Year) (Month) (Day) Age 87 Years { Sex Color or Race

Date of Death 1937 Feb 6 (Year) (Month) (Day) { 2 Months { Single

Maiden Name Days { Married

Birth-place Ireland Occupation Housework

Name of Father James Casey His Birth-place Ireland

Maiden Name of Mother Mary Haliak Her Birth-place Ireland

Cause of Death—Primary Central Altruism Secondary

Certifying Physician Folger Residence

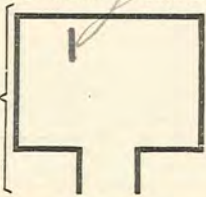
Place of Burial Wants Cemetery St Mary's

Funeral Service at Lot No.

Time of Service Grave No.

Date of Interment Feb 8 1937 Section

Marie K. Swayze



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>190 Blk</u>	<u>125</u>	<u>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</u>	<u>00</u>	Automobiles	
Burial Suit			Newspaper Notices	
Slippers				
Embalming <u>Services</u>	<u>35</u>	<u>00</u>		
Washing and Dressing				
Shaving				
Services <u>Transfer</u>	<u>5</u>	<u>00</u>		
Use of Chairs			Transportation Charges	
Church Charges <u>Funeral</u>	<u>25</u>	<u>00</u>	Officiating Clergyman <u>Fr Griffin</u>	
Cemetery Charges	<u>10</u>	<u>00</u>	Amount of Bill	<u>215</u> <u>00</u>
Music			Goods Ordered by <u>Marie K Swayze</u>	
Flowers			Bill Charged to	

DR. 215.00 CR.

	<u>215 00</u>			
	<u>136 19</u>			
	<u>78 81</u>	<u>Bal.</u>	<u>Oct 17</u>	<u>1937 Check</u>
				<u>metropolitan life ins</u>
			<u>May 14</u>	<u>1935 Bal</u>
				<u>4 136 19</u>
				<u>78 81</u>
				<u>215 00</u>
				PAID
				<i>By Marie K Swayze</i>

RECORD AND BILL OF ITEMS

Yearly No. 24

FOR THE FUNERAL OF

Total to date 1195

Residence Moses Joy 143 East 15th St New York City

Place of Death Bellevue Hosp Wife or Widow of _____

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

Date of Death 1937 (Year) May (Month) 1 (Day) Age { 83 Years { Sex _____ { Color or Race _____
 { _____ Months { Single
 { _____ Days { Married _____

Maiden Name _____

Birth-place Nantucket Occupation Consulting Engineer

Name of Father Moses Joy His Birth-place Nant.

Maiden Name of Mother Ann Russell Her Birth-place Nant.

Cause of Death—Primary Fracture of skull Secondary _____

Certifying Physician _____ Residence _____

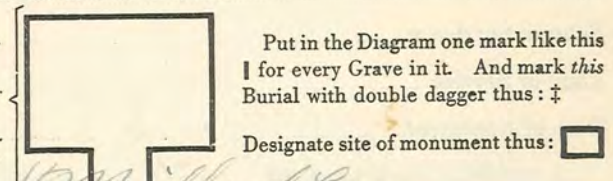
Place of Burial Nant Cemetery North

Funeral Service at _____ Lot No. _____

Time of Service _____ Grave No. _____

Date of Interment May 4, 1937 Section _____

David J. Greene 17 Broad St. Milford Conn.



Casket or Coffin No.		Candles	
Size	Made by	Gloves	
Lining and Pillow Set No.		Bearers or Porters	<u>Cemetery Chgo 10 00</u>
Handles		Hearse to	<u>Funeral 25 00</u>
Plate		Removal	<u>From Boat 5 00</u>
Outside Box or Vault		Automobiles	<u>Wood 5 00</u>
Burial Suit		Newspaper Notices	
Slippers		Transportation Charges	
Embalming		Officiating Clergyman	<u>Pickett 10 00</u>
Washing and Dressing		Amount of Bill	<u>55 00</u>
Shaving		Goods Ordered by	
Services		Bill Charged to	
Use of Chairs			
Church Charges			
Cemetery Charges			
Music			
Flowers			

DR.		CR.	
	<u>Mr David J Greene</u>	<u>May 27</u>	<u>1937 Check 55 00</u>
	<u>17 Broad St</u>		
	<u>Milford</u>		
	<u>Conn</u>		
			PAID
			<u>By</u>
			<u>David J Greene</u>

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GENERAL
REGISTER

4/30/33
6/9/37