RECORD OF FUNERAL.

No. 27		_ Date	7-17	***********************	19/5
Name of Deceased Mile Holman	Reynor	ds.	/		
Charge to Sen Burket					
Order Given by "					
How Secured	Name and Association of the State of the Sta			mayan. Marinin	1
Date of Funeral 7-18	**************************************				
Place of Death Mourt In					
Funeral Services at Home					
Time of Funeral Service 200 PM					
Clergyman Rev. Kaley					
Certifying Physician					
His Residence					
Number of Burial Certificate 28					
Cause of Death Drowning	Medinal principles - A				
Date of Death 7-16	***************************************				
Coupation of the Deceased					
Single or Married Religion	***************************************				
Aged / Years, // Months, 15-1	Days.				
Body to be shipped to	ya ta angan an an pa				
Size and Style of Casket or Coffin 6-3 63	Couch				
Valor Steel Grey	***************************************				
Manufactured by Brawfordsville					
Metallic Lining	Priddle hanned spirity managegig				
Outside Box Vaulf Clark	***************************************				
Number of Handles Silves Estens	Lion				
Interment at Spring Hill Com	netery.				
Lot or Grave NoSection No	************				
1.	-				
2.	Marie and a second				
3.	APPRING NATIONAL N				
4.					
5.	TAMBET AND A TOTAL OF THE STATE				
6.					
(Diagram of Lot.)					

Designate Bil Graves in Lot with numbers (1, 2, 3, 4, etc.), and mark space for this Funeral with a cross (K).

Designate place for Monument with a small square (1).

Use space to the right of Diagram for the names of those burier