

	Jahn Funeral Home 1921 Record
Name of Deceased	James Berman Sunday
Page Number	No. 265
Date of Funeral	Jan. 20, 1922; 10:00 a.m.
Removing Remains	
Embalming	
Shaving & Laying Out	
Casket Number	4114 Constantine
Size	2' 6"; \$20.00
Metal Inner Casket	
Copper	
Zinc	
Handles No.	No. 37 1/2
Outside Case	Pine
Lining & Pillow Set No.	
Metal Lined Box	
Mountings	
Metal Vault, Style	
Box Mattress	
Burial Robe	
Slippers/Gloves	
Doz. Chairs	
Pers. Attendants & Assistants	
Drapery/Candles	
Pedestals/Rug	
Door Dressing	
Flowers/Palms	
Funeral Notices	
Clergymen/Sexton	
Quartette/Soloist/Organist	
Delivering Box To	
Opening Grave	
Vault Charges	
Hearse	
Coaches	
Telegrams/Telephone	
Transportation Expenses	
Date of Death	Jan. 18, 1922
Place of Death	415 Grant St. Decatur, Indiana
Place of Funeral	At the home; 415 Grant St.
Clergyman	Rev.
Date of Burial	Jan. 20, 1922
Where Interred	Decatur Cemetery
Grave/Lot No./ Section	
Location of Grave	
Date of Birth	July 15, 1921
Age	0 Years, 6 Months, 3 Days
Color	White
Occupation	
Marital Status	Single

Birthplace	Decatur, Indiana
Last Place of Residence	Decatur, Indiana
How Long in This State	Life
Husband/Wife Name	
Father's Name	Samuel D. Sondag
Country of Birth	Dark Co., Ohio
Mother's Name	Emma Gertrude Way
Country of Birth	Union Tp., Adams Co., Indiana
Physician	Dr. E. Burns, Decatur, Indiana
Cause of Death	
Ordered By	Samuel D. Sondag
Charge To	Samuel D. Sondag
When Rendered	Jan. 20, 1922
Received on Account	July 1, 1927; by M.O.; \$5.00
	Aug. 1927; by M.O.; \$5.00

Funeral of James Berman Sunday
 Date of Funeral Jan. 20 1922 Hour 10 A M.

Removing Remains.....
 Embalming.....
 Shaving and Laying Out.....
 Casket No. 4.114 Constantine Size 24 20 20
 Metal Inner Casket..... Copper..... Zinc.....
 Handles No. 27 1/2 02
 Outside Case, Pine, Chestnut, Oak, Mahogany..... oas
 Lining and Pillow Set No. 08
 Metal Lined Box.....
 Mountings..... Handles..... Plates 7.2
 Metal Vault, Style.....
 Box Mattress.....
 Burial Robe.....
 Slippers..... Prs..... Gloves.....
 Doz. Chairs.....
 Personal Attendance and Assistants.....
 Drapery..... Candelabra..... Candles.....
 Pedestals..... Rug.....

CASH EXPENDITURES.

Door Dressing.....
 Palms.....
 Flowers.....
 Porters and..... Gloves.....
 Funeral Notices.....

Date of Death Jan. 18 1922
 Place of Death 415 Grant St. Wacatan Ind.
 Place of Funeral at the home 415 Grant St.
 Clergyman Rev
 Date of Burial Jan. 20 1922
 Where Interred Wacatan cemetery
 Grave or Lot No..... Section.....
 Location of Grave.....
 Date of Birth July 15 1921
 Age..... Years 6 Months 3 Days.....
 Color white Occupation.....
 Single, Married, Widow, Widower Mar
 Birthplace Wacatan Ind.
 Last place of residence.....
 How long resident of this State life
 Husband's Name.....
 Father's Name Samuel O. Sunday
 Country of Birth Frank co Ohio
 Mother's Name Emma J. Sunday
 Country of Birth Union Adams Co Ind
 Physician Dr. E. B. Berman Wacatan Ind.
 Cause of Death.....

Ordered by Samuel O. Sunday
 Charge to.....
 When rendered Jan. 20 1922

RECEIVED ON ACCOUNT.

Clergyman.....
 Sexton.....
 Quartette, Soloist..... Organist.....
 Delivering Box to.....
 Opening Grave..... Lining.....
 Vault Charges.....
 Hearse.....
 Coaches.....
 Telegrams..... Telephone.....
 Transportation Expenses.....

Jan 24/25
24
By M.O.
500
500