

OSMA ROOM

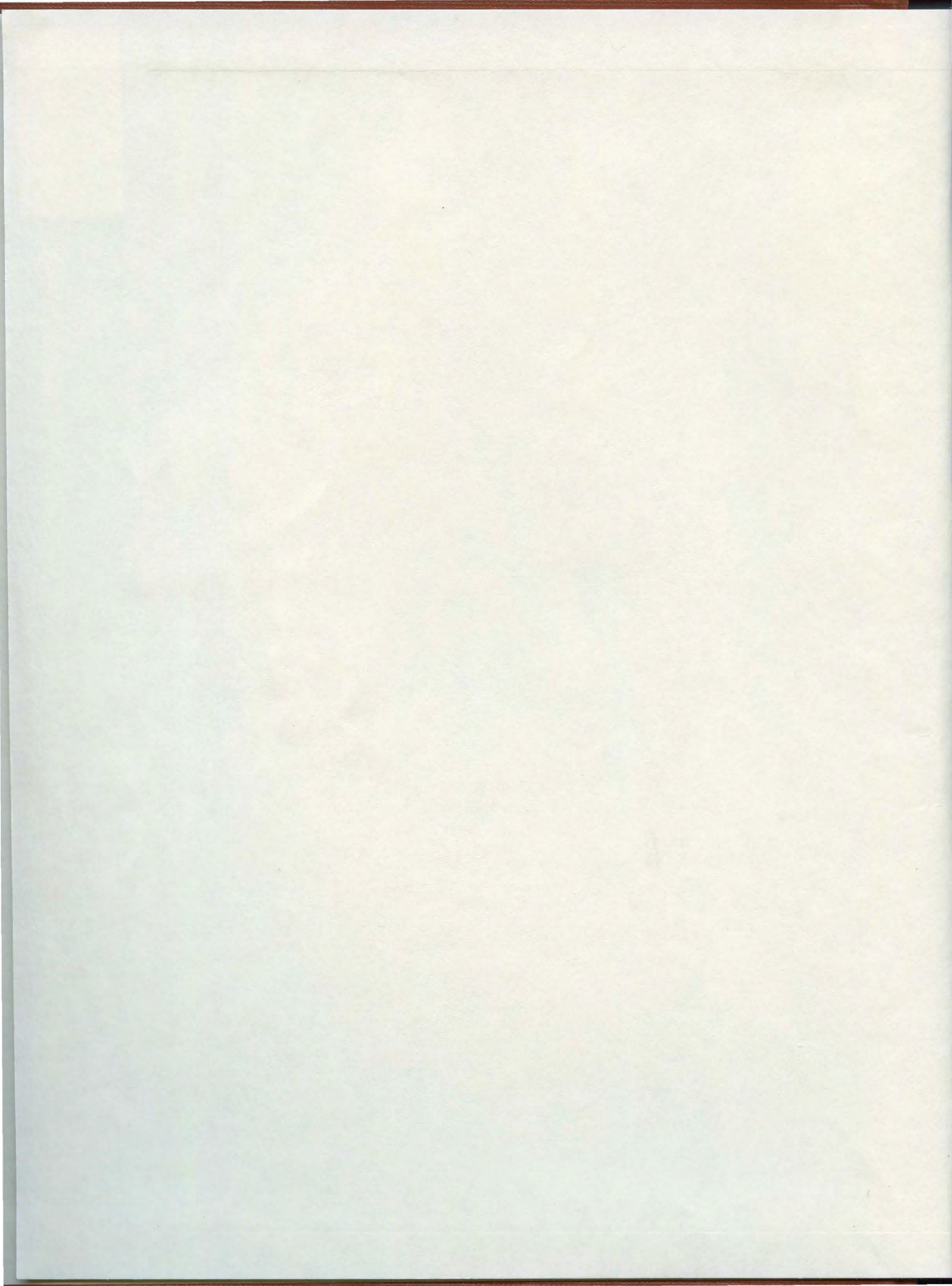
Douglas County Genealogical Society

Douglas County Genealogical Society

213.56

KC
929.378:
FUNK MOI
1913/16

02/27/09



Lawrence Daily Journal

Saturday May 6, 1911

Funk Sale Overtaken

George Schaffer sells interest in Underwriting Firm
The underwriting establishment of Schaffer & Funk
has changed hands, the Junior Assoc buying out Mr.
Funk. The deal has been pending since the 15th of the month, but
not consummated until yesterday.

Mr. Funk will conduct the business at his present location.
The firm has been established about 2 years in Lawrence and is
run up a good practice.

End of article.

SATURDAY MAY 6, 1911

"FUNK SOLE OWNER"

"George SHAFER SELLS INTEREST IN UNDERTAKING FIRM"

"THE UNDERTAKING ESTABLISHMENT OF SHAFER & FUNK
940 MASS. HAS CHANGED HANDS, THE JUNIOR PARTNER BUYING OUT MR.
SHAFER. THE DEAL HAS BEEN PENDING SINCE THE 1ST OF THE MONTH, BUT
WAS NOT CONSUMMATED UNTIL YESTERDAY."

"MR. FUNK WILL CONDUCT THE BUSINESS AT ITS PRESENT LOCATION.
THE FIRM HAS BEEN ESTABLISHED ABOUT 2 YEARS IN LAWRENCE AND IS
BUILDING UP A GOOD PRACTICE."

END OF ARTICLE.

Age 19 Years 6 Months 1
Color White Occupation Student
Single, married, widow, widower Married
Birthplace Maryland
Last place of residence St. Paul, Minn.
How long resident of this state 10
Husband's Name _____
Father's Name _____
Country of Birth _____
Mother's Name _____
Country of Birth _____
Physician H. J. Jones (Jones)
Cause of Death Constitution Entestines
Buried by C. P. Brown Son-in-law
Casket to Mary E. Crowl
Surnames Feed

Other Information:

Told on account by:
C. E. Brown

T.D. FUNK
MCRTUARY BOCK (Aug. 25, 1913 - Sept. 6, 1916)

Page 1

FUNERAL of Laurena W. Crowl

Other Information:

Date of Funeral Aug. 25 1913 2:30 P.M.

Date of Death Aug. 23 11:30 P.M.

Place of Death 1146 Tenn St.

Place of Funeral 1146 Tenn St.

Clergyman McFARLAND

Date of Burial Aug 25 1913

Where Interred Oak Hill

Grave or Lot No. 62-63 Sec. 8

Location of Grave _____

Age: 69 Years 6 Months 1 Days.

Color white Occupation Retired merchant

single, married, widow, widower married

Birthplace Maryland

Last place of residence Westmorland Kans.

How long resident of this state 54

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician H T Jones (Jones)

Cause of Death Fermentation Intestines

Ordered by C P Brown Son-in-Law

Paid on Account-by:

Charge to Mary E. Crowl

C. E Brown

Sexton H Reed

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

Page 2

C.R.I.+P R.R name

FUNERAL of Julian Besera (Viceria) (Becera)

Other Information:

Date of Funeral Aug 31 (1913) 8:00 AM

Date of Death Aug 29

Place of Death Midland Kans

Place of Funeral Catholic Cemetary

Clergyman _____

Date of Burial Aug 31

Where Interred Catholic Cemetary

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 35 Years _____ Months _____ Days.

Color Mexican Occupation R.R. Laborer

single, married, widow, widower married

Birthplace Mexico

Last place of residence Midland Kans

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

^{wife's}
Mother's Name Burbarita Rodrigues

Country of Birth Trplatitan Galisco Mexico

Physician H T Jones Cor.

Cause of Death Fractured skull Hit By Train

Ordered by Cummings - Sheriff

Paid on Account by:

Charge to U.P.R.R.

Dr. H T Jones

Sexton Reed

C.R.I.+P. R.R.

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of CLAUDE J. Owen

Other Information:

Date of Funeral Sep 1 1913

Date of Death Aug 30 1913

Place of Death 1224 Del. ST

Place of Funeral 1224 Del. ST

Clergyman O. C. Brown

Date of Burial Sep 1 1913

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 18 Years 1 Months _____ Days.

Color white Occupation at school

single, married, widow, widower Single

Birthplace Kansas

Last place of residence 1224 Del. ST.

How long resident of this state 18-1

Husband's Name _____

Father's Name (C) E. R. Owen

Country of Birth Ohio

Mother's Name M. Andrews

Country of Birth Ky

Physician Rudolph

Cause of Death Fracture of Skull

Ordered by Rud

Paid on Account by:

Charge to _____

Mrs Owens

Sexton _____

Son

mother

Page 4

FUNERAL of Frank Oechsli

Date of Funeral Sep 2 1913 2 P.M.

Date of Death Aug 30 1913

Place of Death Corner Berkly + Ky St.

Place of Funeral Methodist Church

Clergyman Wolf

Date of Burial Sep 2

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave white Lot Sec. 1.

Age: 64 Years 4 Months 21 Days.

Color White Occupation Minister

single, married, widow, widower Married

Birthplace Switzerland

Last place of residence Baldwin Kans

How long resident of this state 18 yrs.

Husband's Name _____

Father's Name Frederich Oechsli

Country of Birth Swi

Mother's Name _____

Country of Birth Swi

Physician Rudolph

Cause of Death Sudden Heat (Heart) Failure

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

Paid on Account by:

Mrs. F. Oechsli

Page 5

FUNERAL of Myron E. Durkee

Date of Funeral Sep 9 1913 ^{shipped Santa Fe} 2:21

Date of Death Sep 8. 2:45 PM

Place of Death U.P. Frt. House

Place of Funeral Olatha Kans.

Clergyman _____

Date of Burial Sep 9

Where Interred Olatha Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 47 Years 7 Months 23 Days.

Color White Occupation Monument workman

single, married, widow, widower Married

Birthplace Sycamore Ills.

Last place of residence Drexel Mo.

How long resident of this state 14 yrs.

Husband's Name _____

Father's Name Silos Durkee

Country of Birth N. Hampshire

Mother's Name Erma Withington

Country of Birth N. Hampshire

Physician H. T. Jones

Cause of Death Accidental Fracture Base of Skull

Ordered by Dr. Keith

Charge to Mrs. MAY Durkee

Sexton _____

Other Information:

Paid on Account by:

Mrs Durkee

1429 Harrison St. K.C. Mo.

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs Matilda Buch

Date of Funeral Sep 29 1913 2:30PM

Date of Death Sep 27 1913

Place of Death 1004 N. Jersey ST.

Place of Funeral 1004 N. Jersey ST.

Clergyman J. H. Nigg

Date of Burial Sep 29 1913

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 70 Years 2 Months 25 Days.

Color white Occupation Housewife

single, married, widow, widower Married

Birthplace: Kentucky Paducah

Last place of residence ..

How long resident of this state 46 yrs

Husband's Name John Buch

Father's Name -

Country of Birth -

Mother's Name _____

Country of Birth _____

Physician A J Anderson

Cause of Death Heart disease

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

Paid on Account by:

John Buch Jr.

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs Elizabeth Marrow

Date of Funeral Oct. 4 1913 2:30 PM

Date of Death OCT 2 1913

Place of Death 941 R. I. ST.

Place of Funeral " "

Clergyman WOLF

Date of Burial OCT 4 1913

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 89 Years 11 Months 21 Days.

Color White Occupation Housewife

single, married, widow, widower Widow

Birthplace Kentucky

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Simmons

Cause of Death Cancer of Breast

Ordered by W. B. Slack

Charge to _____

Sexton Reed

Other Information:

Soloist: Blair, Wolf

Paid on Account by:

W. B. Slack

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

Page 8

FUNERAL of Ray William Ticknor

Date of Funeral Oct. 14 1913 9:30 AM

Date of Death Oct 13 1913

Place of Death G W Jones Hospital

Place of Funeral Funk Chapel

Clergyman Payne

Date of Burial Oct. 15 1913

Where Interred Larned Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 16 Years 4 Months 8 Days.

Color White Occupation School

single, married, widow, widower Single

Birthplace Kans

Last place of residence 1212 La. St

How long resident of this state 16-4-8

Husband's Name _____

Father's Name O B Ticknor

Country of Birth Pawnee

Mother's Name _____

Country of Birth _____

Physician G W Jones

Cause of Death Mangled under Street Car

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Paid on Account by:

Ed. Lindee

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

Page 9

FUNERAL of Infant of H L Dunnett

Other Information:

Date of Funeral Oct 20 1913 2:30 P.M.

Date of Death Oct 20 5:00 AM

Place of Death 510 W. Pickney St

Place of Funeral " "

Clergyman _____

Date of Burial Oct 20

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: ^{still} born Years 7 Months 25 Days.

Color white Occupation _____

single, married, widow, widower Single

Birthplace 510 Pickney St.

Last place of residence " "

How long resident of this state _____

Husband's Name H L Dunnett

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician H T Jones

Cause of Death Stillborn

Ordered by H. L. Dunnett

Paid on Account by:

Charge to _____

H L Dunnett

Sexton _____

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs. Lela Dunnett

Date of Funeral Oct 28 1913 2:00PM

Date of Death Oct 25 5:00 AM

Place of Death 510 W. Pickney ST

Place of Funeral " "

Clergyman Wolf

Date of Burial Oct 29

Where Interred Hutchinson Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 40 Years 7 Months 25 Days.

Color White Occupation Housewife

single, married, widow, widower Married

Birthplace Laclede (Ladede) Mo.

Last place of residence Salina Kans.

How long resident of this state 8 yrs.

Husband's Name H L Dunnett

Father's Name Geo Phillippe

Country of Birth _____

Mother's Name Lucile Tracy

Country of Birth Ohio

Physician H T Jones

Cause of Death Oedema of Lung + Brain

Ordered by H L Dunnett

Other Information:

Soloist: Miss Olson

Paid on Account by:

Charge to _____

H. Dunnett

Sexton _____

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Geo H Roper

Other Information:

Date of Funeral Oct 28 1913 1:30 PM

Date of Death Oct 26 5:30 AM

Place of Death 543 Mich. ST.

Place of Funeral " "

Clergyman Stauffer + Peck

Date of Burial Oak Hill

Where Interred Oct. 28 1913

Grave or Lot No. 75 Sec.

Location of Grave

Age: 26 Years 9 Months 17 Days.

Color white Occupation Carpenter

single, married, widow, widower married

Birthplace Lawrence Kans.

Last place of residence Lawrence, Kans.

How long resident of this state 26-9-1.

Husband's Name

Father's Name W J Roper

Country of Birth Mass.

Mother's Name Magie Martin

Country of Birth Ind.

Physician H T Jones

Cause of Death

Ordered by U L TAYLOR

Paid on Account by:

Charge to

Mrs Geo H Roper

Sexton Reed

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs Mary A. Otten

Date of Funeral Oct. 30 1913 10:30 a.m.

Date of Death Oct 29, 1913

Place of Death 724 R. Island ST.

Place of Funeral " " "

Clergyman Wolf

Date of Burial Oct. 31, 1913

Where Interred Boonville Mo.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 62 Years 11 Months 18 Days.

Color white Occupation -

single, married, widow, widower Married

Birthplace Mo.

Last place of residence Mound City Kans

How long resident of this state 9 yrs

Husband's Name C H Otten

Father's Name Henry Gout

Country of Birth Germany

Mother's Name Alina Reckeymer

Country of Birth Germany

Physician H T Jones + Chambers

Cause of Death Artero Cerosis

Ordered by _____

Charge to _____

Sexton Paul

Other Information:

*Deputy Sheriff
Supt. Mrs. Stator*

Paid on Account by:

W E^r Kruse

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Col. John K. Rankin

Date of Funeral Oct 31 1913 2:30 PM

Date of Death Oct 29 1913

Place of Death 731 La St.

Place of Funeral Presbyterian Church

Clergyman Powell

Date of Burial Oct 31 1913

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 76 Years _____ Months _____ Days.

Color white Occupation Manager Ice Co.

single, married, widow, widower married

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Simmons

Cause of Death Dilatation of Heart

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

clergyman: Rowell ?

Soloist: Mrs Staffor

Paid on Account by:

Mrs Rankin

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs Celia German

Other Information:

Date of Funeral Nov 8 1913 11:00 AM

Date of Death Nov 6 1913

Place of Death 1 mi S. West

Place of Funeral Twin Mounds

Clergyman _____

Date of Burial Nov 8 1913

Where Interred Twin Mounds

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 86 Years 10 Months 21 Days.

Color White Occupation Housewife

single, married, widow, widower Married

Birthplace Ky

Last place of residence _____

How long resident of this state _____

Husband's Name W L German

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death Senile Debility

Ordered by _____

Paid on Account by:

Charge to _____

Mr L German

Sexton _____

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs Mary Fountain (colored)

Other Information:

Date of Funeral Nov 12 1913 2:30PM

Date of Death Nov 11 1913

Place of Death Douglas Co. Home

Place of Funeral Holly Grove Church N.J. St.

Clergyman Brasco

Date of Burial Nov 12, 1913

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 87 Years 7 Months 11 Days.

Color Col. Occupation -

single, married, widow, widower widow

Birthplace _____

Last place of residence County Home

How long resident of this state _____

Husband's Name David Fountain -

Father's Name buried Oct 1908 Maple Grove

Country of Birth in grave pauper #115

Mother's Name _____

Country of Birth _____

Physician E D F Phillips

Cause of Death Senile & ulser on Right foot

Ordered by Selig + Miss Hutt

Paid on Account by:

Charge to _____

Miss Hutt

Sexton _____

when rendered: Jesse Pieratt

Sup. D. Co. Home

T.D. FUNK
MCRTUARY BCGK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Clarence Stewart Col.

Other Information:

Date of Funeral Dec. 14 1913 10:00 AM.

Date of Death Dec 12 1913

Place of Death Rudolph Hosp

Place of Funeral K City

Clergyman _____

Date of Burial Dec 14 1913

Where Interred K City Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 37 Years 9 Months 6 Days.

Color Colored Occupation Drayman

single, married, widow, widower Single

Birthplace K C Kans

Last place of residence K C Kans

How long resident of this state 37-9-6

Husband's Name _____

Father's Name Albert Stewart

Country of Birth Wellington Mo.

Mother's Name Ella Stewart - ? Trueman ^{108 first + Jersey ST} K.C.K.

Country of Birth Columbia Mo.

Physician Barnes + Rudolph

Cause of Death Gun shot wound

Ordered by _____

Paid on Account by:

Charge to _____

S. Wyatt

Sexton _____

+ Randolph

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FUNERAL of HARRY K BEAL

Other Information:

Date of Funeral Dec 14 1913 2:30 PM.

Date of Death DEC 12 1913

Place of Death 839 N Hampshire ST.

Place of Funeral " " "

Clergyman Staffer

Date of Burial DEC 14 1914 (^{as} written)

Where Interred Oak Hill

Grave or Lot No. 121 Sec. 7

Location of Grave _____

Age: 31 Years 9 Months 14 Days.

Color white Occupation Drayman

single, married, widow, widower Married

Birthplace Lawrence Kans

Last place of residence 839 N. N. ST.

How long resident of this state 31-9-14

Husband's Name _____

Father's Name William Beal

Country of Birth England

Mother's Name Mrs W. Beal

Country of Birth —

Physician Bechtol

Cause of Death Typhoid Pneumonia (?)

Ordered by _____

Paid on Account by:

Charge to _____

Mrs H. Beal

Sexton Reed

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs Nancy J Hattan

Other Information:

Date of Funeral Dec 25 1913 3:00 PM

Date of Death Dec 24 1913

Place of Death Methodist Church (as written)

Place of Funeral 707 West Warren St.

Clergyman Wolf

Date of Burial Dec 25 1913

Where Interred Oak Hill

Grave or Lot No. N 1/2 164 Sec. 7

Location of Grave _____

Age: 73 Years 7 Months 28 Days.

Color White Occupation Housewife

single, married, widow, widower Married

Birthplace Ky

Last place of residence 707 West Warren St.

How long resident of this state 29 yrs

Husband's Name Mr. F. Hattan

Father's Name Wright Allen

Country of Birth Ky

Mother's Name -

Country of Birth Ky

Physician Morris

Cause of Death Paralysis

Ordered by _____

Paid on Account by:

Charge to _____

F. Hattan

Sexton Reed

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Cap. James B Shane

Date of Funeral Dec 30 1913 10:30 AM

Date of Death Dec 28 1:00 AM

Place of Death Savoy Hotel Lawrence Kans

Place of Funeral 928 R.I. ST.

Clergyman McFarland

Date of Burial Dec 30 1913

Where Interred Oak Hill

Grave or Lot No. 49 Sec. 10

Location of Grave _____

Age: 73 Years _____ Months 23 Days.

Color white Occupation Retired O. Soldier

single, married, widow, widower Widower

Birthplace Ky

Last place of residence _____

How long resident of this state 49 yrs

Husband's Name _____

Father's Name N D Sharpre (Shapre)

Country of Birth Ky

Mother's Name _____

Country of Birth _____

Physician Dr. Blair

Cause of Death Bright disease Nephritis

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

Soloist: Elorlton (?)

Casket No: Shrine K.C.

Paid on Account by:

J. B. Shane Son ^{adm.}

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Infant of James W Davies

Other Information:

Date of Funeral JAN 12 1914 3:00 PM

Date of Death Jan 11 9 P.M.

Place of Death 944 Ala. ST.

Place of Funeral " "

Clergyman None

Date of Burial Jan 12 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 11

Location of Grave _____

Age: Still Years born Months _____ Days.

Color white Occupation _____

single, married, widow, widower _____

Birthplace 944 Ala ST.

Last place of residence " "

How long resident of this state _____

Husband's Name _____

Father's Name James W Davies

Country of Birth Douglas

Mother's Name Sarah Allen

Country of Birth Wales Great Brittan

Physician Chambers

Cause of Death Stillborn

Ordered by _____

Paid on Account by:

Charge to _____

J W Davis (as written)

Sexton Red

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs Ella Maud Funk

Date of Funeral JAN 25 1914 2:30 PM

Date of Death JAN 23 5:30 AM 1914

Place of Death 1106 VT ST Lawrence Kans.

Place of Funeral " " "

Clergyman Wolf

Date of Burial Jan 25 1914

Where Interred Oak Hill Cemetary Lawrence Kans.

Grave or Lot No. 88 Sec. 8

Location of Grave _____

Age: 51 Years _____ Months _____ Days.

Color White Occupation at home

single, married, widow, widower Divorced

Birthplace Decatur Ills.

Last place of residence 1106 VT ST.

How long resident of this state 2 yrs

Husband's Name E. F. Funk

Father's Name David Plank

Country of Birth Penn

Mother's Name _____

Country of Birth _____

Physician S. & Chambers

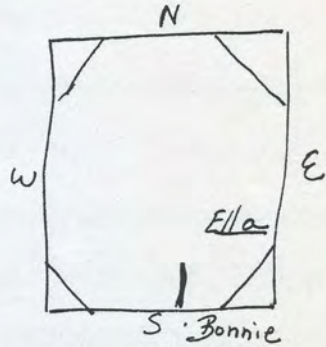
Cause of Death _____

Ordered by _____

Charge to _____

Sexton Reed

Other Information:



Paid on Account by: _____

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Cordelia Brown

Date of Funeral JAN 29 1914 2:30 PM

Date of Death Jan 28 6 AM.

Place of Death 701 1/2 Conn ST.

Place of Funeral Holden Mo.

Clergyman _____

Date of Burial Jan 29 1914

Where Interred Holden Mo.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 1 Years 9 Months _____ Days.

Color white Occupation _____

single, married, widow, widower Single

Birthplace Nebraska

Last place of residence Lawrence Kans.

How long resident of this state 1 yr

Husband's Name Francis Brown (as written)

Father's Name _____ " _____ "

Country of Birth _____

Mother's Name Florence May Baldwin

Country of Birth Kans

Physician W.C. McConnell

Cause of Death Broncho Pneumonia

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Clayton R. Powell

Paid on Account by:

B. Wilson

Mrs Brown

T.D. FUNK
MCRTUARY BCOCK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Ellen Morris

Date of Funeral Feb 2 1914 2:30 PM

Date of Death Jan 31 5:00 AM

Place of Death 1401 N. Y. ST.

Place of Funeral " "

Clergyman Powell

Date of Burial Feb 2 1914

Where Interred O. Hill

Grave or Lot No. 77 Sec. 8

Location of Grave _____

Age: 58 Years 9 Months 14 Days.

Color white Occupation Housewife

single, married, widow, widower Married

Birthplace Illinois

Last place of residence 1401 N York ST.

How long resident of this state 12 yr.

Husband's Name _____

Father's Name Tom McDowell

Country of Birth Penn

Mother's Name Martha Postlewait

Country of Birth Penn

Physician H T Jones

Cause of Death Pneumonia

Ordered by L. W. Green

Charge to _____

Sexton Reed

Other Information:

Clergyman: Rev. Powell

Paid on Account by:

Mrs L. W. Greenie

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FUNERAL of Bernice Irene Isley

Date of Funeral Feb 15 1914 10:00 AM.

Date of Death Feb 13, 12:00 AM

Place of Death 264 Bridge St.

Place of Funeral " "

Clergyman _____

Date of Burial Feb 15 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 11

Location of Grave _____

Age: 7 Years _____ Months _____ Days.

Color White Occupation at school

single, married, widow, widower _____

Birthplace Fall Leaf Kans

Last place of residence 264 Bridge St.

How long resident of this state 7 yrs

Husband's Name _____

Father's Name Wesley Isley

Country of Birth Ills.

Mother's Name Lizzy Isley

Country of Birth Kans

Physician Rudolph

Cause of Death Burned Accidental

Ordered by A. L. Selig

Charge to _____

Sexton _____

Other Information:

Miss T. Olson

Paid on Account by:

A. L. Selig

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FUNERAL of James B. Helmick

Date of Funeral Feb 18 1914 2:30 PM

Date of Death Feb 14 1914 11 PM

Place of Death 50 E. Hancock

Place of Funeral " "

Clergyman Wolf

Date of Burial _____

Where Interred Oak Hill

Grave or Lot No. 173 Sec. 8

Location of Grave _____

Age: 65 Years 10 Months 19 Days.

Color White Occupation R. Farmer

single, married, widow, widower Married

Birthplace W. Virginia

Last place of residence 50 E. Hancock St.

How long resident of this state 9 mo.

Husband's Name _____

Father's Name Cornelius Helmick

Country of Birth Germany

Mother's Name L. Graham

Country of Birth W. Virginia

Physician Rudolph

Cause of Death Cerebral Hemorrhage.

Ordered by C.A. Maris S. in Law

Charge to _____

Sexton Reed

Other Information:

Soloist: Olson

Paid on Account by:

C. F. Maris

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FUNERAL of Mrs. Louisa Meuffels

Date of Funeral Feb. 18 1914 10:30 AM

Date of Death Feb 16 4:30 P.

Place of Death 1229 Conn. St.

Place of Funeral " "

Clergyman STAUFFER

Date of Burial O Hill (as written)

Where Interred " "

Grave or Lot No. 6-8+69 Sec. 8

Location of Grave _____

Age: 49 Years 3 Months 4 Days.

Color _____ Occupation _____

single, married, widow, widower _____

Birthplace Minnesota

Last place of residence Lawrence Kans.

How long resident of this state 13 yrs.

Husband's Name H. J.

Father's Name F. Moy

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death _____

Ordered by _____

Charge to _____

Sexton Beed

Other Information:

Soloist:
Mrs STAUFFER

Paid on Account by:

H. J. Meuffels

T.D. FUNK
MCRTUARY BOCK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Cara E. Guiles (Giles)

Other Information:

Date of Funeral Feb 23 1914 2:00 PM

Date of Death Feb 21 1914 10am

Place of Death 1500 Learned ave.

Place of Funeral 1500 " "

Clergyman Smith

Date of Burial Feb 23 1914

Where Interred Oak Hill

Grave or Lot No. 1345 Sec. 4

Location of Grave _____

Age: 23 Years 3 Months 29 Days.

Color Black Occupation at home

single, married, widow, widower married

Birthplace Lawrence Kans

Last place of residence 1500 Learned Ave.

How long resident of this state 23-3-29

Husband's Name John F. Guiles (Giles)

Father's Name A. R. McNutt

Country of Birth Mississippi

Mother's Name Arten Chaslepter

Country of Birth Frankfort Ohio

Physician H T Jones + Rud.

Cause of Death Gunshot wound Through Heart (Suicide)

Ordered by _____

Paid on Account by:

Charge to _____

Jack Guiles

Sexton _____

Page 28

FUNERAL of Clemb. B. Ambler

Other Information:

Date of Funeral Feb 26 1914 2:00 P.M.

Date of Death Feb 24 1914 9:30 P

Place of Death 271 Walnut St. N. Lawrence

Place of Funeral U. B. Church N. La.

Clergyman Testerman

Date of Burial Feb 26 1914

Where Interred Maple Grove N. L.

Grave or Lot No. 107 Sec. 5

Location of Grave _____

Age: 72 Years 4 Months 16 Days.

Color white Occupation Retired Farmer^{24 yrs}

single, married, widow, widower Widower

Birthplace Belmont Co. Ohio

Last place of residence 271 Walnut St.

How long resident of this state 30 yrs

Husband's Name _____

Father's Name John C. Ambler

Country of Birth Virginia

Mother's Name Lavica Slahan

Country of Birth Belmont Co. Ohio

Physician Rudolph

Cause of Death Chronic

Ordered by _____

Paid on Account by:

Charge to _____

Mrs Muzzy

Sexton _____

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Sylvester A. Riskey

Date of Funeral March 2 1914 10 am.

Date of Death Feb 28 1914 12:00 PM

Place of Death 827 Kentucky St.

Place of Funeral " " "

Clergyman _____

Date of Burial Feb 2 1914

Where Interred Oak Hill

Grave or Lot No. 59460 Sec. 8

Location of Grave _____

Age: 63 Years 4 Months _____ Days.

Color White Occupation Hack Driver

single, married, widow, widower Married

Birthplace Ohio

Last place of residence 827 Ky St.

How long resident of this state 37-5

Husband's Name _____

Father's Name Reason Riskey

Country of Birth Conn.

Mother's Name Lecinda Parsons

Country of Birth Conn.

Physician Rud.

Cause of Death Chronic Bright Disease.

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

Paid on Account by:

Mrs Emma Riskey
1612-5th Ave East
Cedar Rapids Iowa

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs MARY Louise Schrader

Date of Funeral March 10 1914 10 a.m.

Date of Death March 6 (7) 1914 8:30 P

Place of Death 505 Miss St.

Place of Funeral " "

Clergyman O. C. Brown

Date of Burial March 10 1914

Where Interred Oak Hill

Grave or Lot No. 120 Sec. 10

Location of Grave _____

Age: 31 Years 2 Months _____ Days.

Color white Occupation Wife

single, married, widow, widower Married

Birthplace Lawrence, Kans.

Last place of residence 505 Miss St.

How long resident of this state 31-2

Husband's Name CARL R. SCHRADER

Father's Name A. H. WHITCOMB

Country of Birth Main(e)

Mother's Name Mary Griffith

Country of Birth Vermont

Physician Rudolph

Cause of Death UTerine Hemmorrhage.

Ordered by _____

Charge to _____

Sexton Reed

Other Information:



Paid on Account by:

Mr. Schrader

T.D. FUNK
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FUNERAL of Infant of Mary Louise Schrader

Date of Funeral March 10 1914 10 a.m.

Date of Death _____

Place of Death _____

Place of Funeral _____

Clergyman _____

Date of Burial _____

Where Interred _____

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years _____ Months _____ Days.

Color _____ Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Stillborn

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Stillborn
Same casket

Paid on Account by: _____

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

Page 32

FUNERAL of MARTHA A. BALEE

Date of Funeral March 11 1914 2:30 PM

Date of Death March 9 1914 10 am

Place of Death 425 Ohio

Place of Funeral 425 Ohio

Clergyman Brown

Date of Burial March 11 1914

Where Interred O Hill

Grave or Lot No. 93 Sec. 5

Location of Grave _____

Age: 76 Years _____ Months 14 Days.

Color White Occupation at home

single, married, widow, widower Widow

Birthplace Little York Ohio

Last place of residence 425 Ohio

How long resident of this state 56 yrs

Husband's Name _____

Father's Name John A Lehman

Country of Birth Ohio

Mother's Name Julia Angle

Country of Birth _____

Physician Anderson

Cause of Death Paralysis

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

*address 20 from
under clothes
Quick-Turn
218 220 174
March 11*

Paid on Account by:

C.F. Squires

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

Page 33

FUNERAL of J. H. MORRIS

Date of Funeral March 18 1914 3:45 PM

Date of Death March 17 (16) 1914

Place of Death General Hospital K.C. Mo.

Place of Funeral Funk Chapel

Clergyman Powell

Date of Burial March 18 1914

Where Interred Oak Hill

Grave or Lot No. 76 Sec. 8

Location of Grave _____

Age: 50 Years _____ Months _____ Days.

Color W. Occupation Laborer

single, married, widow, widower Widower

Birthplace Kans.

Last place of residence 619 E. 12th St K.C. Mo.

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Carbolic Acid Suicide

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

address on form
under clothes:

Quirk + Tobin
3015 K.C. Mo
main st.

Paid on Account by:

Mrs Bell Green

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs Elizabeth Lischesky

Date of Funeral March 28 1914 9:00 AM.

Date of Death March 26 7 PM

Place of Death 1018 N J ST.

Place of Funeral " "

Clergyman Stauffer

Date of Burial March 29 1914

Where Interred Ellenwood Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 85 Years 4 Months 22 Days.

Color white Occupation housewife

single, married, widow, widower Widow

Birthplace MaKeL Germany

Last place of residence 1018 N J ST.

How long resident of this state _____

Husband's Name _____

Father's Name Falesky

Country of Birth Germany

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death Artero Selerous

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Casket No:

KCKC Shrine

Paid on Account by:

Chas Lischesky

Great Bend Kans

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs Arabella P Barber (Barben)

Other Information:

Date of Funeral April 17 1914 2:00 PM

Date of Death April 14 1914

Place of Death ST. Louis Mo

Place of Funeral Episcopal Chapel

Clergyman Edwards

Date of Burial April 17 1914

Where Interred O Hill

Grave or Lot No. 16 Sec. 1

Location of Grave _____

Age: 64 Years _____ Months _____ Days.

Color white Occupation at home

single, married, widow, widower widow

Birthplace _____

Last place of residence ST. Louis Mo

How long resident of this state _____

Husband's Name John

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Myocarditis

Ordered by _____

Paid on Account by:

Charge to _____

Julian Petite

Sexton Red

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

Page 36

FUNERAL of Mrs Caroline WulfKuhle

Other Information:

Date of Funeral April 21 1914 2:30 PM

Date of Death 903 La. ST. 8 PM (as written)

Place of Death April 18 1914

Place of Funeral 903 La. St. Home

Clergyman Rudolph

Date of Burial April 21 1914

Where Interred Oak Hill

Grave or Lot No. 23 Sec. 8

Location of Grave _____

Age: 79 Years 10 Months 14 Days.

Color White Occupation at home

single, married, widow, widower married

Birthplace Germany

Last place of residence 903 La ST.

How long resident of this state 30 yrs

Husband's Name Augusta WulfKuhle

Father's Name Dravis

Country of Birth Germany

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death Arterio Sclerosis

Ordered by _____

Paid on Account by:

Charge to _____

Mr. Augusta WulfKuhle

Sexton Reed

T.D. FUNK
MCRTUARY BOCK (Aug. 25, 1913 - Sept. 6, 1916)

Page 37

FUNERAL of Anna K. RODELL

Date of Funeral April 25 1914 2:30

Date of Death April 23 5:30 P.

Place of Death 924 Miss St.

Place of Funeral Luthern Church

Clergyman Staffer

Date of Burial April 25 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 82 Years 6 Months 19 Days.

Color white Occupation house wife

single, married, widow, widower widow

Birthplace Germany

Last place of residence 924 Miss St.

How long resident of this state 56 yrs.

Husband's Name Austave Rodell

Father's Name Daniel Chelman

Country of Birth Germany

Mother's Name _____

Country of Birth _____

Physician Anderson

Cause of Death Seniality

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

clergyman: STauffer

Paid on Account by:

Mrs Brooks &

seller (Sellen)

(Seiler)

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Roy Jacobs

Other Information:

Date of Funeral May 4 (1914) AM

Date of Death May 2 9 AM

Place of Death 1144 Penn ST.

Place of Funeral " "

Clergyman Staffer

Date of Burial May 4

Where Interred Olatha Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 2 Years 6 Months 10 Days.

Color white Occupation at home

single, married, widow, widower Single

Birthplace Johnson Co. Kans.

Last place of residence 1144 Penn

How long resident of this state 2-6-10

Husband's Name _____

Father's Name W. A. Jacobs

Country of Birth Johnson Co. Kans.

Mother's Name Emma Jacobs

Country of Birth Johnson Co. Kans

Physician Anderson

Cause of Death Mal

Ordered by _____

Paid on Account by:

Charge to _____

W A Jacobs

Sexton _____

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

Page 39

FUNERAL of CARA E. Giles

Other Information:

Date of Funeral Disinterment MAY 5 2 P.M.

Date of Death _____

Place of Death _____

Place of Funeral _____

Clergyman _____

Date of Burial _____

Where Interred _____

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years _____ Months _____ Days.

Color _____ Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death _____

Ordered by Coriner + A R McNutt

Paid on Account by:

Charge to _____

A R McNutt

Sexton _____

Page 40

FUNERAL of Mrs Harriett Lee Col.

Date of Funeral MAY 8 1914 9:30 PM

Date of Death MAY 7 5 AM

Place of Death 842 Penn St.

Place of Funeral Warren Baptist Church

Clergyman _____

Date of Burial May 8 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 11

Location of Grave _____

Age: 83 Years _____ Months _____ Days.

Color Colored Occupation at home

single, married, widow, widower Widow

Birthplace _____

Last place of residence 842 Penn St.

How long resident of this state 50

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician E. F. Phillipps

Cause of Death Seniality Old AGE

Ordered by Mrs Potter + Miss Fisher

Charge to _____

Sexton Reed

Other Information:

*old residence Home
Lowmorth, Kans
(had been moved out)
Sister's Olson*

Paid on Account by:

R Melvin
Adm. Insurance
R E. Melvin

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FUNERAL of Alice R. Coleman

Date of Funeral May 14 1914 10:40 AM

Date of Death May 12 1914 11:00 A.

Place of Death 1145 Ind. ST.

Place of Funeral " " "

Clergyman Powell

Date of Burial May 14 1914

Where Interred Cottonwood Falls Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 51 Years 7 Months 1 Days.

Color White Occupation at home

single, married, widow, widower _____

Birthplace Jamesville

Last place of residence 1145 Ind. ST.

How long resident of this state 30 yrs

Husband's Name L. W. Coleman

Father's Name W. Rockwood

Country of Birth N York

Mother's Name _____

Country of Birth N. Y.

Physician Chambers

Cause of Death Broncho. Pneumonia

Ordered by Bell Memorial Hsp. Karedale Kans Paid on Account by: _____

Charge to Herbert R. Coleman Herb.

Sexton _____

Other Information:

old soldiers Home
Leavenworth Kans
(had been crossed out)

Soloist: Olson

Page 42

FUNERAL of JOHN W. Wooderson

Date of Funeral May 17 1914 at Mo. at Home ^{9:PM} Other Information: Hour of Funeral: 2:30 PM
₅₋₁₅

Date of Death May 15 1914

Place of Death West Warren ST.

Place of Funeral " " "

Clergyman O.C. Brown

Date of Burial 5-17 1914

Where Interred Ridgeway Mo.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 72 Years 3 Months 12 Days.

Color White Occupation R. Farmer

single, married, widow, widower Widower

Birthplace Mo.

Last place of residence West Warren ST.

How long resident of this state 6 Mo.

Husband's Name _____

Father's Name David Wooderson

Country of Birth Ohio

Mother's Name Elizabeth Officer

Country of Birth Ohio

Physician Rudolph

Cause of Death Arterio Sclerosis

Ordered by _____ Paid on Account by: _____

Charge to _____ Mrs Lamb

Sexton _____

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FUNERAL of Mrs. Louisa Wahl

Other Information:

Date of Funeral May 22 1914 3 PM

Date of Death May 21 12:15 a.

Place of Death 1004 Conn. St.

Place of Funeral " " "

Clergyman Stauffer

Date of Burial May 22

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 89

Location of Grave _____

Age: 65 Years 11 Months 26 Days.

Color white Occupation Housewife

single, married, widow, widower Married

Birthplace Sweden

Last place of residence 1004 Conn St.

How long resident of this state 30 yrs

Husband's Name August Wahl

Father's Name Drag

Country of Birth Sweden

Mother's Name _____

Country of Birth _____

Physician C Phillipps

Cause of Death Carconia of womb

Ordered by _____

Paid on Account by:

Charge to _____

Mr. A. Wahl

Sexton Reed

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FUNERAL of Charles E. Tuttle

Other Information:

Date of Funeral June 13 1914 1:00 PM

Date of Death June 11 1914 10:50 P

Place of Death 931 Mo.

Place of Funeral " "

Clergyman Wolf

Date of Burial JUNE 13 1914

Where Interred Vinland Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 45 Years 3 Months 16 Days.

Color white Occupation Ins.

single, married, widow, widower Married

Birthplace Lawrence Kans.

Last place of residence " "

How long resident of this state 45-3-16

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician H T Jones

Cause of Death Accidental Gun shot

Ordered by _____

Paid on Account by:

Charge to _____

Mrs. Tuttle

Sexton _____

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of James Dunn

Other Information:

Date of Funeral June 26 1914 1:30PM

Date of Death June 24 1914 5:00PM

Place of Death 8 mi S.W.

Place of Funeral " "

Clergyman Topeka

Date of Burial June 26

Where Interred Clinton

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 65 Years _____ Months _____ Days.

Color White Occupation R. Farmer

single, married, widow, widower Married

Birthplace Ohio

Last place of residence 8 m. S.W.

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Keith

Cause of Death Paralysis

Ordered by _____

Paid on Account by:

Charge to _____

Sexton _____

T.D. FUNK
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FUNERAL of Lewis Hatfield Kunce

Other Information:

Date of Funeral June 27 1914 7:00 PM

Date of Death June 27 1914 3:00 AM

Place of Death 1 mi N Tongonxie (SP)

Place of Funeral Tongonxie

Clergyman _____

Date of Burial June 28 1914

Where Interred Winfield Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 12 Years _____ Months _____ Days.

Color white Occupation at school

single, married, widow, widower Single

Birthplace Winfield Kans

Last place of residence 1 mi N Tongonxie

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Appendicitis

Ordered by _____

Paid on Account by:

Charge to _____

H.L. Kunce

Sexton _____

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Infant of R.C. MCHENRY

Date of Funeral June 30 1914 11:00 AM

Date of Death June 29 1914

Place of Death 1910 Mass ST.

Place of Funeral " "

Clergyman None

Date of Burial June 30 1914

Where Interred Oak Hill

Grave or Lot No. 273 Sec. 4

Location of Grave _____

Age: ^{still} born Years _____ Months _____ Days.

Color W Occupation _____

single, married, widow, widower _____

Birthplace 1910 Mass.

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name R.C. MCHENRY

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Chambers

Cause of Death _____

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Bro. Hugh Kidd, Sexton
Bro. H.C. Kidd
710 Harrison St. N.C. Mass.
July 2, 1914

Paid on Account by:

MCHenry

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Martha Jane Kidd

Date of Funeral July 11, 1914 10 A.M.

Date of Death July 9 6 P.M.

Place of Death 10 M. S. W.

Place of Funeral " "

Clergyman _____

Date of Burial July 11 1914

Where Interred O. Hill

Grave or Lot No. 1273 Sec. 4

Location of Grave _____

Age: 55 Years _____ Months _____ Days.

Color W Occupation at H.

single, married, widow, widower Married

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name M. M. Kidd

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Dr. Nelson - Lone star

Cause of Death Tuberculosis

Ordered by J. S. Starnes

Charge to _____

Sexton _____

Other Information:

Bro:
Hugh Kidd Groceryman
Indianapolis Ind.

Bro:
H.C. Kidd
Clinchport Va. Scott Co.

J.S. Starnes

(this address Listed as given)
~~218 Etenwood St. K.C. Mo.~~
710 Harrison St. K.C. Mo.
July 9, 1915

Paid on Account by:
Hugh Kidd
1006 Bellfountain Ave.
K.C. Mo.

T.D. FUNK
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FUNERAL of CARY SMITH

Other Information:

Date of Funeral July 12, 1914 5 P.M.

Date of Death July 11, 1914

Place of Death 917 La. St.

Place of Funeral " "

Clergyman Kaufman

Date of Burial July 12, 1914

Where Interred Oak H

Grave or Lot No. _____ Sec. 8

Location of Grave _____

Age: 54 Years _____ Months _____ Days.

Color W. Occupation at Home

single, married, widow, widower Married

Birthplace VT.

Last place of residence 917 La. St.

How long resident of this state _____

Husband's Name T. E. Smith

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Anderson

Cause of Death Cancer of Breast

Ordered by _____

Paid on Account by:

Charge to _____

Mr. Smith

Sexton Reed

T.D. FUNK
MCRTUARY BCOCK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of FRANCIS A. SUGRUE

Date of Funeral July 13 1913 (as written) 9.A.M.

Date of Death July 11 7 P.M.

Place of Death Kaw River

Place of Funeral 1108 R. I. ST.

Clergyman Eckhart

Date of Burial July 13 1914

Where Interred O. Hill

Grave or Lot No. Lot 16 Sec. 4

Location of Grave _____

Age: 23 Years _____ Months _____ Days.

Color W Occupation Tailor

single, married, widow, widower Single

Birthplace Lawrence K.

Last place of residence 1108 R. I. ST.

How long resident of this state 23 yrs.

Husband's Name _____

Father's Name John SUGRUE

Country of Birth Douglas

Mother's Name Margurite Lee SUGRUE

Country of Birth Douglas Co.

Physician H. T. Jones

Cause of Death accidental Drowning

Ordered by _____

Charge to _____

Sexton _____

Other Information:

(Date was given as 1913
but Sequence in book
would be 1914)

Date of Burial given
as 1914

Paid on Account by:

John Sugrue

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs. Augusta Eno

Other Information:

Date of Funeral July 13 1914 11 PM (as given)

Date of Death July 11 7 P.

Place of Death 1001 Penn St.

Place of Funeral Washington Creek Church

Clergyman _____

Date of Burial July 13 1914

Where Interred Colliers (as given)

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 79 Years _____ Months _____ Days.

Color W. Occupation house wife

single, married, widow, widower Married

Birthplace Germany

Last place of residence 1001 Penn St.

How long resident of this state 47 yrs.

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Anderson

Cause of Death Acute Entertis

Ordered by _____

Paid on Account by:

Charge to _____

F. J. Eno.

Sexton _____

T.D. FUNK
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FUNERAL of FREDERICK WILLIAM NOLL

Other Information:

Date of Funeral July 23, 1914 7:am.

Date of Death July 20, 3:00 AM

Place of Death Hays Sanitarium Bonner Springs Kans.

Place of Funeral 846 R. I. ST.

Clergyman STaffer

Date of Burial July 23 1914

Where Interred Leavenworth Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 45 Years 9 Months _____ Days.

Color W. Occupation Married

single, married, widow, widower _____

Birthplace Leavenworth Kans.

Last place of residence 846 R. I. ST.

How long resident of this state 45-9

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician H. C. Hays Bonner Springs Kans.

Cause of Death General Paresis

Ordered by _____

Paid on Account by:

Charge to _____

Mrs F. Noll

Sexton _____

T.D. FUNK
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FUNERAL of Mrs. MARY PLANZ

Date of Funeral Aug 5 1914 2 P.M.

Date of Death Aug. 3 1914

Place of Death 1112 Pa ST.

Place of Funeral " "

Clergyman Becker

Date of Burial Aug 5 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 4

Location of Grave _____

Age: 68 Years 4 Months 5 Days.

Color W. Occupation housewife

single, married, widow, widower married

Birthplace Germany

Last place of residence 1112 Pa ST.

How long resident of this state 48 yrs

Husband's Name Jacob Planz

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Anderson

Cause of Death DROPSY

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Soloist: Stoffer + Endicott

Paid on Account by:

Jacob Planz

T.D. FUNK
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FUNERAL of DELBERT EUGENE WICLER

Other Information:

Date of Funeral AUG 6 1914 10: a.m.

Date of Death Aug 5 1914

Place of Death 1238 Miss. ST.

Place of Funeral " " "

Clergyman O C Brown

Date of Burial Aug 7 1914

Where Interred Harper Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years 5 Months _____ Days.

Color W Occupation Home

single, married, widow, widower -

Birthplace Harper Kans

Last place of residence " "

How long resident of this state 5 mo

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Gardner

Cause of Death accidental Strychine Poison

Ordered by Mrs Ella Tetter (?)

Paid on Account by:

Charge to 1238 Miss

Sexton _____

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of ARTHER R WILLIAMS

Other Information:

Date of Funeral Aug 14, 1914 3:30 P.M.

Date of Death Aug 11, 1914

Place of Death Buffalo Mont.

Place of Funeral 1535 Mass St.

Clergyman Smith

Date of Burial Aug 14 1914

Where Interred Oak Hill

Grave or Lot No. 258 Sec. 8

Location of Grave _____

Age: _____ Years _____ Months _____ Days.

Color white Occupation Farmer

single, married, widow, widower Married

Birthplace _____

Last place of residence Buffalo Mont.

How long resident of this state _____

Husband's Name _____

Father's Name W. R. Williams

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death NOT KNOWN

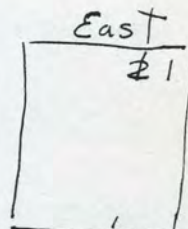
Ordered by _____

Paid on Account by:

Charge to _____

W. R. Williams

Sexton Road



Clergyman Mrs. Rachel Woodard

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of JOSEPH W. Griffin

Other Information:

Date of Funeral Aug 16 1914 2:30PM.

Date of Death Aug 13 12:30 P

Place of Death Barker Ave.

Place of Funeral " "

Clergyman Mrs. Woodward

Date of Burial Aug 16 1914

Where Interred Oak Hill

Grave or Lot No. 1414-15 Sec. 4

Location of Grave _____

Age: 75 Years 2 Months 1 Days.

Color W Occupation Retired Farmer 7yrs.

single, married, widow, widower Married

Birthplace Hamilton Co. Ohio

Last place of residence Barker Ave

How long resident of this state 14 yrs

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Dr. Kenner

Cause of Death Intestinal Nephritis

Ordered by _____

Paid on Account by:

Charge to _____

Mrs J W. Griffin

Sexton Reed

Clergyman: Mrs Rachel Woodard

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FUNERAL of Infant of Elmo Winger

Other Information:

Date of Funeral Aug 17 1914 10:00 A.M.

Date of Death Aug 16 1914

Place of Death 1 mi west of City

Place of Funeral " " "

Clergyman McFarland

Date of Burial Aug 17 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 4
Location of Grave _____

Age: _____ Years _____ Months 13 Days.

Color _____ Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____
How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name Lena Model

Country of Birth Germany

Physician H. T. Jones

Cause of Death Hepetic Congestion

Ordered by _____

Paid on Account by:

Charge to _____

Mr Winger

Sexton _____

T.D. FUNK
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FUNERAL of Walter R. Lester

Other Information:

Date of Funeral Aug 19 1914 3:00 PM

Date of Death about Aug 14 1914

Place of Death Quincy Ills.

Place of Funeral Oak Hill

Clergyman Stauffer

Date of Burial Aug 19 1914

Where Interred Oak Hill

Grave or Lot No. 32 Sec. 9

Location of Grave _____

Age: 25 Years _____ Months _____ Days.

Color white Occupation Mechanic

single, married, widow, widower Single

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Gun shot wound

Ordered by Fred W. Fein

Paid on Account by:

Charge to _____

Ernest Lester

Sexton Reed

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Emmyline Edson

Date of Funeral Aug 21 1914 10:00 AM.

Date of Death Aug 20 1914

Place of Death Belmont Add.

Place of Funeral STull

Clergyman Gresser

Date of Burial Aug 21 1914

Where Interred STull Cemetary STull Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 80 Years 5 Months 9 Days.

Color White Occupation at Home

single, married, widow, widower Widow

Birthplace M.

Last place of residence Belmont Add.

How long resident of this state 57 yrs

Husband's Name _____

Father's Name S. Thompson

Country of Birth Mass

Mother's Name Elizabeth Devow

Country of Birth Mass

Physician Anderson

Cause of Death Senility

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Two Carriages Mrs Simmons

Paid on Account by:

Mrs. Ernie Yahn(?)

YAHN

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs Nellie Mortensen

Other Information:

Date of Funeral Aug 23 1914 2:30 PM

Date of Death Aug 21 3:00 A.

Place of Death 924 E. 14th St.

Place of Funeral " "

Clergyman STaffer

Date of Burial Aug 23 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 57 Years _____ Months _____ Days.

Color White Occupation at home

single, married, widow, widower Married

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name John Mortensen

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Simmons

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

H.E. Mortensen

Sexton Reed

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FUNERAL of Susie Schooley

Other Information:

Date of Funeral Aug 26 1914 1:00 PM

Date of Death Aug 23, 1914

Place of Death ST Margarets Hosp. K.C. Kans.

Place of Funeral Oak Hill

Clergyman Coffman

Date of Burial Aug 26 1914

Where Interred Oak Hill

Grave or Lot No. 56 Sec. 8

Location of Grave _____

Age: 48 Years _____ Months _____ Days.

Color W Occupation at home

single, married, widow, widower Married

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Peritinitis

Ordered by _____

Paid on Account by:

Charge to _____

Sexton Reed

T.D. FUNK
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FUNERAL of Francisco Gutierrez

Other Information:

Date of Funeral Aug 31 1914 10:30 PM

Date of Death Aug 30 1914

Place of Death Cameron Bluff

Place of Funeral Funk's

Clergyman X

Date of Burial Aug 31 1914

Where Interred Franklin Cemetary

Grave or Lot No. _____ Sec. _____
Location of Grave _____

Age: 35 Years _____ Months _____ Days.

Color Mexican Occupation R.R. Laborer

single, married, widow, widower married

Birthplace Mexico

Last place of residence Lake View
How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician H. T. Jones

Cause of Death Accidental Drowning

Ordered by _____

Paid on Account by:

Charge to _____

Esteban Lato

Sexton _____

Dr. H. T. Jones

T.D. FUNK
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FUNERAL of Evans Dosier Grant

Other Information:

Date of Funeral Sep 11 1914 10:00 AM

Date of Death Sep 9 1914 7:30 a.

Place of Death 808 Ind. ST.

Place of Funeral " "

Clergyman Powell

Date of Burial Sep 11 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 93 Years 9 Months _____ Days.

Color W. Occupation Retired Auctioneer

single, married, widow, widower Widow

Birthplace Kenton Co. Ky

Last place of residence 808 Ind. ST.

How long resident of this state 14 yrs.

Husband's Name _____

Father's Name Squire Grant

Country of Birth N. Carolina

Mother's Name _____

Country of Birth _____

Physician Keith

Cause of Death Arterio Scerosis

Ordered by _____

Paid on Account by:

Charge to _____

Mrs J Henley (Henly)

Sexton _____

Daughter

E. J. Kelso

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FUNERAL of Robert J STRaffon

Other Information:

Date of Funeral Sep 16 1914 2:30 PM

Date of Death Sep 14 1914 10:00 P.

Place of Death 1602 Mass. St.

Place of Funeral " " "

Clergyman Edwards

Date of Burial Sep 16, 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 86 Years 4 Months 27 Days.

Color W. Occupation Retired

single, married, widow, widower Married

Birthplace London Eng.

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician A.J. Anderson

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

C.W. STRaffon

Sexton _____

T.D. FUNK
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FUNERAL of Mary Ella Rowland

Other Information:

Date of Funeral Sep 20 1914 shipped 19

Date of Death Sep 15, 1914

Place of Death 420 Ala.

Place of Funeral Foster Mo. Bates Co.

Clergyman -

Date of Burial Sep 20 1914

Where Interred Foster Mo.

Grave or Lot No. 17 Sec. 7

Location of Grave

Age: 45 Years 7 Months 4 Days.

Color W. Occupation at Home

single, married, widow, widower Widow

Birthplace Macon Co. Mo.

Last place of residence 420 Ala. St.

How long resident of this state 6 yrs

Husband's Name

Father's Name John Kernes

Country of Birth Iowa

Mother's Name

Country of Birth

Physician G. W. Jones O'Connell

Cause of Death Tumor of brain

Ordered by

Paid on Account by:

Charge to

Miss Rowland

Sexton

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Elisha Ridenour

Other Information:

Date of Funeral Sep 28 1914 9:30 a.m.

Date of Death Sep 23 1914

Place of Death Liberal Mo.

Place of Funeral Oak H.

Clergyman I O O F

Date of Burial Sep 28 1914

Where Interred O Hill

Grave or Lot No. 17 Sec. 7

Location of Grave _____

Age: 70 Years _____ Months _____ Days.

Color W Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Valvular Heart Trouble

Ordered by C. M. Ridenour

Paid on Account by:

Charge to Liberal Mo.

Gettie Ridenour

Sexton _____

adm.

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FUNERAL of Henrietta B. Ledaboer

Other Information:

Date of Funeral Sep 29, 1914 2:00

Date of Death Sep 28 1914 8:00 a.

Place of Death 1345 Del. ST.

Place of Funeral " " "

Clergyman Edwards

Date of Burial Sep 29 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 5 Years _____ Months _____ Days.

Color W. Occupation at Home

single, married, widow, widower S

Birthplace Lawrence Kans.

Last place of residence " "

How long resident of this state 5 yrs

Husband's Name _____

Father's Name Geo. Ledaboer

Country of Birth Minn

Mother's Name _____

Country of Birth Iowa

Physician Anderson

Cause of Death Bronchi Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

Geo. Ledaboer

Sexton _____

Gasoline

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Shirley Venard

Other Information:

Date of Funeral Sep 30 1914 2:30 P.M.

Date of Death Sep 28 1914

Place of Death 1 mi S W of City

Place of Funeral " "

Clergyman Eckhart

Date of Burial Sep 30 1914

Where Interred Franklin

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years 6 Months 23 Days.

Color W Occupation at Home

single, married, widow, widower S

Birthplace Lawrence Kans.

Last place of residence " "

How long resident of this state -6-23

Husband's Name E. F. Venard (^{as} listed)

Father's Name _____

Country of Birth Iowa

Mother's Name Mary Kelly

Country of Birth Penn.

Physician Smith

Cause of Death Maningitis

Ordered by _____

Paid on Account by:

Charge to (Hazelwood)
61 Hazelwood Ave. Pittsburg, Pa.

E F Venard

Sexton Reed

T.D. FUNK
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FUNERAL of Wilfred E. Parker

Other Information:

Date of Funeral Oct 3 1914

Date of Death Oct 2 1914 9:15 a.

Place of Death 3 mi. East on U.P.R.R.

Place of Funeral Junction City Kans.

Clergyman _____

Date of Burial Oct 4 1914

Where Interred Junction City Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 56 Years 7 Months _____ Days.

Color W Occupation R.R. Foreman (foreman)

single, married, widow, widower Married

Birthplace Mich.

Last place of residence Junction City, Kans.

How long resident of this state _____

Husband's Name _____

Father's Name John Parker

Country of Birth Ohio

Mother's Name Sarah Culbertson

Country of Birth Ohio

Physician Davis Coroner Leavenworth Kans.

Cause of Death accidental death RR

Ordered by Mrs W. E. Parker

Paid on Account by:

Charge to 134 East Pine St.
Junction City Kans.

Mrs. W. E. Parker

Sexton _____

T.D. FUNK
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FUNERAL of Chas. G. Smock

Other Information:

Date of Funeral Oct 5 1914 10:00 AM

Date of Death Oct 3 1914 12:10 P.

Place of Death 701 R. I. ST.

Place of Funeral " "

Clergyman C. Science

Date of Burial Oct. 5 1914

Where Interred Oak Hill

Grave or Lot No. 1271 Sec. 4

Location of Grave _____

Age: 74 Years 1 Months 15 Days.

Color W Occupation Retired F.

single, married, widow, widower Widower

Birthplace Kentucky

Last place of residence 701 R. I. ST

How long resident of this state 30 yrs.

Husband's Name _____

Father's Name R. D. Smock

Country of Birth Ind.

Mother's Name _____

Country of Birth _____

Physician D. Tipton

Cause of Death Dropsy

Ordered by _____

Paid on Account by:

Charge to _____

C. W. Pippert

Sexton _____

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Harry J. Morris

Other Information:

Date of Funeral Oct 5, 1914 6:30 PM

Date of Death Oct. 3, 3:10 a.

Place of Death Boulder, Col.

Place of Funeral Oak Hill Cemetary

Clergyman Powell

Date of Burial Oct 5 1914

Where Interred OAK HILL

Grave or Lot No. 90 Sec. 8

Location of Grave _____

Age: 24 Years _____ Months _____ Days.

Color W Occupation Laborer Clerk

single, married, widow, widower Single

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name J. H. Morris

Country of Birth _____

Mother's Name ELLEN MORRIS

Country of Birth Illinois

Physician _____

Cause of Death Pulmonary Tuberculosis

Ordered by _____

Paid on Account by:

Charge to _____

Mrs. Green

Sexton _____

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of THOMAS C. WHITE

Date of Funeral shipped Oct 15, 1914 #5

Other Information:

santa Fe 10:40 a.m.

Date of Death OCT 13 1914 5:30 P.

Place of Death 1111 Ky ST.

(other name mentioned)

Place of Funeral " "

Borrowed from Mrs Reading

Clergyman _____

Date of Burial Oct 16

Where Interred Col. Springs Col.

Grave or Lot No. 5 Sec. Block 37

Location of Grave _____

Evergreen Cemetary

Age: 75 Years 9 Months 13 Days.

Color W. Occupation Contractor

single, married, widow, widower M.

Birthplace N. Carolina

Last place of residence 1111 Ky ST.

How long resident of this state 37(27) yrs.

Husband's Name _____

Father's Name John White

Country of Birth N. Carolina

Mother's Name Feba Coffa

Country of Birth N. Carolina

Physician Anderson

Cause of Death _____

Ordered by Beyle Bro Colo. Springs Colo. Paid on Account by:

Charge to _____ Mrs white

Sexton _____ (?) H.F. for Beyle Bro.

T.D. FUNK
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FUNERAL of JOHN A. WILLETT

Other Information:

Date of Funeral Oct 15, 1914 11:00 a.m.

Date of Death OCT 14 1914 5:30 a.

Place of Death 905 Ohio ST.

Place of Funeral " " "

Clergyman WOLF

Date of Burial Oct. 15, 1914

Where Interred O. Hill

Grave or Lot No. _____ Sec. 8

Location of Grave _____

Age: 60 Years _____ Months 19 Days.

Color W Occupation Salesman

single, married, widow, widower Married

Birthplace Penn.

Last place of residence 905 Ohio ST.

How long resident of this state _____

Husband's Name _____

Father's Name LEWIS WILLETT

Country of Birth Penn

Mother's Name Longshore

Country of Birth Penn

Physician Simmons

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Son

Sexton Read

T.D. FUNK
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FUNERAL of KATHERINE S. OPPERMAN

Other Information:

Date of Funeral Oct 26 1914 10:30 a.m.

Date of Death OCT. 25 3:00 a.

Place of Death 1 mi S.W. of City

Place of Funeral " "

Clergyman Stauffer

Date of Burial Oct 26 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 75 Years 11 Months 19 Days.

Color W Occupation at Home

single, married, widow, widower Widow

Birthplace Penn

Last place of residence 1 mi S.W.

How long resident of this state 35 yrs

Husband's Name _____

Father's Name THOMAS CHARLTON

Country of Birth Penn

Mother's Name _____

Country of Birth _____

Physician Gardner

Cause of Death Gangrene

Ordered by _____

Paid on Account by:

Charge to _____

Mr. Opperman

Sexton Reed

T.D. FUNK
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FUNERAL of THOMAS JONES

Date of Funeral OCT. 27, 1914 9(?) a.m.

Date of Death OCT 25, 1914

Place of Death CITY JAIL

Place of Funeral 940 MASS. ST.

Clergyman JACKSON

Date of Burial OCT 27, 1914

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 45 Years _____ Months _____ Days.

Color B Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name WALTER JONES

Country of Birth _____

Mother's Name EMILY THOMPSON

Country of Birth PAKIST

Physician H. T. Jones

Cause of Death APPOLEXY

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Douglas Co. Grave in
Maple Grove Cemetery

Paid on Account by:

Porter City Hall

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of WONDA (WANDA) JAAP

Other Information:

Date of Funeral OCT. 29, 1914 2:00 P.M.

Date of Death OCT. 29, 1914

Place of Death 1019 Conn ST.

Place of Funeral " NO "

Clergyman "

Date of Burial OCT 29, 1914

Where Interred OAK Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years 5 Months 27 Days.

Color W Occupation _____

single, married, widow, widower 5

Birthplace Lawrence

Last place of residence _____

How long resident of this state 5-27

Husband's Name _____

Father's Name WALTER JAAP

Country of Birth _____

Mother's Name INAS(?) THOMPSON

Country of Birth Dakota

Physician H. T. JONES

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Sexton _____

T.D. FUNK
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FUNERAL of William Sullivan

Other Information:

Date of Funeral Nov 3 1914 2:30 P.M.

Date of Death Oct 31 1914

Place of Death State Hospital Topeka Kans

Place of Funeral 705 Ark. St.

Clergyman McFarland

Date of Burial Nov. 3

Where Interred O. Hill

Grave or Lot No. 50 Sec. 4

Location of Grave _____

Age: 40 Years _____ Months _____ Days.

Color W Occupation R Mason

single, married, widow, widower Married

Birthplace Lawrence Kans

Last place of residence 705 Ark. St.

How long resident of this state 40 yrs

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Paresis

Ordered by _____

Paid on Account by:

Charge to _____

L. M. Penwell, Topeka Kans.

Sexton Reed

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of MALINDA JANE HOUSE

Date of Funeral Nov 4 1914 11:30 a.m.

Date of Death Nov 3 1914 7 a.

Place of Death Douglas Co. Farm

Place of Funeral Funk Chapel

Clergyman McFarland

Date of Burial Nov 4 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 62 Years 8 Months 10 Days.

Color W Occupation at Home

single, married, widow, widower Widow

Birthplace Ind.

Last place of residence Co. Farm

How long resident of this state 40 yrs

Husband's Name LAZESS HOUSE

Father's Name JOHN LOVE

Country of Birth Ind.

Mother's Name _____

Country of Birth _____

Physician E.D.F. Phillips

Cause of Death Cerebral Hemorrhage

Ordered by Wennie Love Vineland Kans.

Charge to Ollie Macey ^{Daughter} 461 Sumner St. Topeka

Sexton _____

(address written above wennie Love with
different ink)

Ellsworth House 233 Cline St. Topeka

Other Information:

(This entry was crossed out)

Mrs. J. A. Garrett
9012 ? Franklin Road (P)
Clapton

Paid on Account by:

Pieratt County Farm

Mrs Woodard Clinton Kans.

J. R. Shirar

Chas. "

K. A. GARRETT

C. S. Gaumer

R. House

307 BRAUNER ST. Topeka Kans

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of JULIA WOYAHN

Other Information:

Date of Funeral Nov. 5, 1914 3:00 P.M.

Date of Death Nov. 4, 1914 3 a.m.

Place of Death 1023 N.H. ST

Place of Funeral " "

Clergyman Stauffer

Date of Burial Nov. 5, 1914

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 84 Years 2 Months 7 Days.

Color W. Occupation at Home

single, married, widow, widower Widow

Birthplace Germany

Last place of residence 1023 N.H. ST.

How long resident of this state 42 yrs.

Husband's Name _____

Father's Name JOHN KAMP

Country of Birth Germany

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death Chronic Indigestion

Ordered by _____

Paid on Account by:

Charge to _____

Mrs. T. M. Hopkins

Sexton _____

644 Kans City Mo

T.D. FUNK
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FUNERAL of DAVID ALLEN

Other Information:

Date of Funeral Nov. 9, 1914 -

Date of Death Nov. 7, 1914 1: P. M.

Place of Death 3 mi North of LAWRENCE

Place of Funeral K. C. K

Clergyman _____

Date of Burial _____

Where Interred _____

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 40 Years _____ Months _____ Days.

Color W Occupation Bridge Foreman

single, married, widow, widower Married

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Keith

Cause of Death Valvular Heart Disease

Ordered by _____

Paid on Account by:

Charge to _____

Daniels Bro.

Sexton _____

644 Kans City Kan.

T.D. FUNK
MCRTUARY BCOCK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Baby Harry Houk

Other Information:

Date of Funeral Nov 11 1914 5:00 PM

Date of Death Nov. 11 1914 1:00 P.

Place of Death 942 N.H. ST.

Place of Funeral NO

Clergyman "

Date of Burial Nov 11, 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 4

Location of Grave _____

Age: ^{still} born Years _____ Months _____ Days.

Color W. Occupation stillborn

single, married, widow, widower -

Birthplace Lawrence Kans

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name Harry Houk

Country of Birth Lawrence Kans.

Mother's Name _____

Country of Birth _____

Physician CARL Phillips

Cause of Death labor pains

Ordered by _____

Paid on Account by:

Charge to _____

Mrs H. Houk

Sexton _____

T.D. FUNK
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FUNERAL of SARAH BURKE

Other Information:

Date of Funeral Nov 12, 1914 12:00 Noon

Date of Death Nov. 10, 1914

Place of Death Kan City Kans.

Place of Funeral Franklin Cemetary

Clergyman Eckhart

Date of Burial Nov 12 1914

Where Interred Franklin Cemetary

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 78 Years _____ Months _____ Days.

Color W Occupation at H.

single, married, widow, widower Widow

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Labor Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

B(R) J. OBRIEN

Sexton _____

T.D. FUNK
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FUNERAL of MARY P. JOHNSON

Other Information:

Date of Funeral DEC 1, 1914 10 a.m.

Date of Death Nov 29, 1914 4 a.m.

Place of Death 843 Miss. ST.

Place of Funeral Wamego Kans.

Clergyman _____

Date of Burial Dec 1, 1914

Where Interred Wamego Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 48 Years 29 Months _____ Days. (as given)

Color W. Occupation AT Home

single, married, widow, widower Married

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician HT Jones

Cause of Death Cancer of STOMACH

Ordered by _____

Paid on Account by:

Charge to _____

E. J. STEWART

Sexton _____

T.D. FUNK
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FUNERAL of JAMES B. ROBINSON

Date of Funeral Dec 2, 1914 9:40 a.m.

Date of Death Nov 30 1914

Place of Death Santonio Texas

Place of Funeral from Train

Clergyman De Forrest

Date of Burial Dec 2 1914

Where Interred Oak Hill

Grave or Lot No. S. 1/2 83 Sec. 10

Location of Grave _____

Age: 77 Years _____ Months _____ Days.

Color W Occupation at Home

single, married, widow, widower Widower

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Pul Tuberc

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Mrs CLIFTON HIATT

Paid on Account by:

Mrs C. Hiatt

T.D. FUNK
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FUNERAL of DAN CORCORAN

Date of Funeral Dec 3 1914 10: a.m.

Date of Death Nov 30. 1914

Place of Death ST Margurite Hosp. K.C. Mo.

Place of Funeral Catholic Church

Clergyman Father Eckhart

Date of Burial Dec 3, 1914

Where Interred Franklin

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 34 Years _____ Months _____ Days.

Color W. Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Pul. Tuber

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

could be
CARCARAN

Douglas County Genealogical Society

Paid on Account by:

Ed CORORAN

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of MAMIE SMITH

Date of Funeral Dec 9 1914 1:00 PM

Date of Death Dec 8 1914

Place of Death 1132 N.J. ST.

Place of Funeral " "

Clergyman ELDERKIN

Date of Burial Dec 8, 1914

Where Interred K C Mo.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 36 ⁽³⁵⁾ Years 9 Months 1 Days.

Color W Occupation at H

single, married, widow, widower Married

Birthplace Indiana

Last place of residence 1132 N. J. ST.

How long resident of this state 2 yrs

Husband's Name MARSHALL C. SMITH

Father's Name HENRY KENNER

Country of Birth Ind.

Mother's Name _____

Country of Birth _____

Physician Anderson

Cause of Death Exhaustion from Operation of Stomach

Ordered by _____

Charge to _____

Sexton _____

Other Information:

(age: 35 with 36
written over it)

Paid on Account by:

M. C. SMITH

T.D. FUNK
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FUNERAL of JOSEPH C. BERNHARD

Date of Funeral Dec 10, 1914 2: P.M.

Date of Death Dec 8, 1914

Place of Death 1230 Miss. ST.

Place of Funeral " " Church

Clergyman Wolf

Date of Burial DEC 10, 1914

Where Interred Oak Hill

Grave or Lot No. 220 Sec. 8

Location of Grave _____

Age: 64 Years 4 Months 18 Days.

Color W. Occupation a minister Ret.

single, married, widow, widower Married

Birthplace Ohio

Last place of residence 1230 Miss. ST.

How long resident of this state 30 yrs

Husband's Name _____

Father's Name JOHNAS BERNHARD

Country of Birth Penn ST.

Mother's Name _____

Country of Birth _____

Physician Carl Phillips

Cause of Death Pul Edema

Ordered by _____

Charge to _____

Sexton REED

Other Information:

Paid on Account by:

MISS ALICE BERNHARDT

T.D. FUNK
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FUNERAL of ALEXANDER ROSE

Date of Funeral Dec. 10 1914 2: P.M.

Date of Death Dec 7, 1914

Place of Death 332 Ills. ST.

Place of Funeral Baptist Church

Clergyman _____

Date of Burial _____

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 86 Years 8 Months 5 Days.

Color W. Occupation Retired Farmer

single, married, widow, widower Married

Birthplace W. Virginia

Last place of residence 332 Ills ST.

How long resident of this state 56 yrs

Husband's Name _____

Father's Name E. ROSE

Country of Birth W. Virginia

Mother's Name _____

Country of Birth _____

Physician H. T. JONES

Cause of Death Valvular Insufficiency

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

Clergyman Brown

Paid on Account by:

ARTHUR ROSE

T.D. FUNK
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FUNERAL of MARICE HERNANDEZ

Other Information:

Date of Funeral Dec 10. 1914 NOON

Date of Death Dec 9 1914

Place of Death 730 N. J. ST.

Place of Funeral Franklin Cemetary

Clergyman _____

Date of Burial Dec 10 1914

Where Interred Franklin

Grave or Lot No. _____ Sec. _____
Location of Grave _____

Age: 27 Years _____ Months _____ Days.

Color Mexican Occupation _____

single, married, widow, widower Married

Birthplace Mexico

Last place of residence _____
How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death Tuberculosis

Ordered by _____

Paid on Account by:

Charge to _____

Mrs. J. A. Hamlin

Sexton _____

Mrs F. MORRIS

T.D. FUNK
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FUNERAL of De Witt M. STILES (INFANT)

Other Information:

Date of Funeral Dec 11 1914 2 P.M.

Date of Death Dec 10 11:45 P.

Place of Death 1215 Ky ST.

Place of Funeral " "

Clergyman Brown, O.C.

Date of Burial Dec 11 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 4

Location of Grave _____

Age: still born Years _____ Months _____ Days.

Color W Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name DeWitt STILES (as written)

Father's Name " "

Country of Birth Joliet Ills.

Mother's Name _____

Country of Birth Ark.

Physician McCONNELL

Cause of Death Still born

Ordered by _____

Paid on Account by:

Charge to _____

DeWitt STILES

Sexton _____

T.D. FUNK
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FUNERAL of GEO. RAHRIG

Other Information:

Date of Funeral Dec 16, 1914 2:30 P.M.

Date of Death Dec 12 1914

Place of Death Simmons Hosp.

Place of Funeral Funk Chapel

Clergyman Stauffer

Date of Burial Dec 16 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 4

Location of Grave _____

Age: 55 Years 10 Months 14 Days.

Color White Occupation sheet metal Worker

single, married, widow, widower Married

Birthplace Penn.

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Simmons

Cause of Death Pneumonia

Ordered by BROKER

Paid on Account by:

Charge to _____

BROKER

Sexton Red

T.D. FUNK
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FUNERAL of DAVID JORDAN

Date of Funeral Dec. 18. 1914 2 P.M.

Date of Death Dec. 16 1914

Place of Death 337 Mich. ST.

Place of Funeral " "

Clergyman Brown. O.C.

Date of Burial Dec 18 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 65 Years 7 Months 10 Days.

Color W. Occupation MASON

single, married, widow, widower Married

Birthplace Maine

Last place of residence 337 Mich.

How long resident of this state 31

Husband's Name _____

Father's Name JOSEPH JORDAN

Country of Birth Maine

Mother's Name _____

Country of Birth _____

Physician Anderson

Cause of Death Heat (Heart)? Failure

Ordered by _____

Charge to (Mull Pd \$4 Flowers)

Sexton Reed

Other Information:

Paid on Account by:

EBEN BALDWIN

T.D. FUNK
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FUNERAL of JAMES H. STRODE

Date of Funeral Dec 19 1914 2 P.M.

Date of Death Dec 14 1914

Place of Death 745 Penn ST.

Place of Funeral A. M. E. Church

Clergyman _____

Date of Burial Dec. 19, 1914

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 54 Years 9 Months 26 Days.

Color Col. Occupation Barber

single, married, widow, widower Widower

Birthplace Independance Mo.

Last place of residence 745 Penn.

How long resident of this state 20 yrs

Husband's Name _____

Father's Name TROY STRODE

Country of Birth Tenn.

Mother's Name JULIA SMITH

Country of Birth Virginia

Physician F. K. Rogers

Cause of Death Nephritis

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

Paid on Account by:

Pomp STRODE

T.D. FUNK
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FUNERAL of JEREMIAH BROOKS

Other Information:

Date of Funeral Dec 22 1914 2 P.M.

Date of Death Dec 20 1914 2:30 A.

Place of Death 1433 Tenn

Place of Funeral " "

Clergyman Brown. O.C.

Date of Burial Dec 22

Where Interred O. Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 86 Years 8 Months 26 Days.

Color W. Occupation Florist

single, married, widow, widower Single

Birthplace Maine

Last place of residence 1433 Tenn

How long resident of this state 40 yrs.

Husband's Name _____

Father's Name JEREMIAH BROOKS

Country of Birth N. H.

Mother's Name _____

Country of Birth _____

Physician Owens

Cause of Death Seni. Debility

Ordered by _____

Paid on Account by:

Charge to _____

P R BROOKS

Sexton _____

T.D. FUNK
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FUNERAL of ERIC GRIFFIN OWENS

Other Information:

Date of Funeral Jan. 7 1915 2:30 P.M.

Date of Death Jan 5 1914 1:00 a (1915) should be 1915
but is given 1914

Place of Death 1030 Ohio ST.

Place of Funeral " "

Clergyman O. C. Brown

Date of Burial JAN 8 1914 (should be 1915)

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 10

Location of Grave _____

Age: 65 Years 9 Months 23 Days.

Color W Occupation Comm. of Poor

single, married, widow, widower widower

Birthplace Wales

Last place of residence 1030 Ohio

How long resident of this state 40 yrs

Husband's Name _____

Father's Name _____

Country of Birth Wales

Mother's Name _____

Country of Birth _____

Physician A.J. Anderson

Cause of Death Cancer of Pelvis

Ordered by _____

Paid on Account by:

Charge to _____

Eric Owens Jr.

Sexton Reed

T.D. FUNK
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FUNERAL of Geo. W. HAYSLETT

Other Information:

Date of Funeral Jan 13 1915 2:30 PM

Date of Death Jan 10 1914 (1915) ^{should}_{be}

Place of Death 916 Tenn. St.

Place of Funeral " "

Clergyman Backus

Date of Burial Jan 13 1914 (1915)

Where Interred OAK HILL R Vault

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 80 Years 1 Months 4 Days.

Color W. Occupation Retired F.

single, married, widow, widower Married

Birthplace W. Virginia

Last place of residence 916 Tenn. St.

How long resident of this state 31 yrs.

Husband's Name _____

Father's Name Robert HAYSLETT

Country of Birth Ireland

Mother's Name ELIZABETH

Country of Birth _____

Physician Anderson

Cause of Death Senality (sp)

Ordered by _____

Paid on Account by: _____

Charge to _____

Sexton Reed

T.D. FUNK
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FUNERAL of CHRISTINE EDHOLM

Other Information:

Date of Funeral Jan 15 1915 12:36 PM

Date of Death Jan 14 1915 6:55 a.

Place of Death K. C. Mo.

Place of Funeral " "

Clergyman -

Date of Burial Jan 15 1915

Where Interred Oak Hill

Grave or Lot No. 5266 Sec. 14

Location of Grave

Age: 73 Years 2 Months 5 Days.

Color W. Occupation at Home

single, married, widow, widower Widow

Birthplace

Last place of residence

How long resident of this state

Husband's Name D. O. EVERHART

Father's Name

Country of Birth

Mother's Name

Country of Birth

Physician W. N. Ritchey 2710 Prospect

Cause of Death Mitral Insufficiency

Ordered by

Paid on Account by:

Charge to

Mr. J. A. JOHN (3)

Sexton

T.D. FUNK
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FUNERAL of Infant of M. O. EBERHART

Other Information:

Date of Funeral Jan 21 1915 3 PM

Date of Death Jan 20 1915

Place of Death Jones Hosp.

Place of Funeral 1026 N. J. ST.

Clergyman Rev. Delow

Date of Burial Jan 21, 1915

Where Interred O. Hill

Grave or Lot No. S^{1/2} 66 Sec. 10

Location of Grave _____

Age: _____ Years _____ Months 2 Days.

Color W Occupation at H.

single, married, widow, widower _____

Birthplace JONES HOSP.

Last place of residence " " _____

How long resident of this state 2 days

Husband's Name M. O. EBERHART (as written)

Father's Name " " _____

Country of Birth Lawrence, Kans.

Mother's Name HEMPHILL

Country of Birth Vinland K.

Physician G. W. Jones

Cause of Death Heart NOT Normal

Ordered by _____

Paid on Account by:

Charge to _____

W. O. EBERHART

Sexton _____

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FUNERAL of ISAAC S. HALL

Date of Funeral Jan 29, 1915 2:00 P.M.

Date of Death Jan 27 1915 2: a.

Place of Death 1104 N. J. ST.

Place of Funeral Methodist Church

Clergyman Wolf

Date of Burial Jan 29 1915

Where Interred Oak Hill

Grave or Lot No. 1284 Sec. 4

Location of Grave _____

Age: 74 Years 7 Months 22 Days.

Color W. Occupation R. Minister

single, married, widow, widower Widower

Birthplace N. YORK

Last place of residence 1104 N. J. ST.

How long resident of this state 40 yrs.

Husband's Name _____

Father's Name I. S. HALL

Country of Birth N. YORK

Mother's Name ETTA POLK

Country of Birth N. YORK

Physician MCCONNELL

Cause of Death Paralysis

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

Paid on Account by:

Edw. L. Hutchins Treas.

B. S. + Rev. Wolf

Mrs Newbauer(?)

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FUNERAL of WHITMAN A. CHURCHILL

Other Information:

Date of Funeral Feb 1 1915 2:30

Date of Death Jan 31 1915

Place of Death 1210 Ohio

Place of Funeral " "

Clergyman Brown

Date of Burial Feb. 1 1915

Where Interred Oak H.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 47 Years 6 Months 22 Days.

Color W. Occupation Bank Clerk

single, married, widow, widower Married

Birthplace Lawrence Kans

Last place of residence 1210 Ohio

How long resident of this state 47-6-22

Husband's Name _____

Father's Name GEO. CHURCHILL

Country of Birth England

Mother's Name HELLEN SHAW

Country of Birth NEW BRUNSWICK

Physician G. W. JONES

Cause of Death Suicide Knife

Ordered by _____

Paid on Account by:

Charge to _____

Watkins Nat. Bank

Sexton Reed

C. Tucker

T.D. FUNK
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FUNERAL of CHARLES W. MCFARLAND

Date of Funeral Feb. 2 1915 3:00 PM

Date of Death JAN 31 1915

Place of Death 940 R. I. ST.

Place of Funeral " "

Clergyman Wolf

Date of Burial Feb. 2 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 58 Years 8 Months _____ Days.

Color W. Occupation Mfg

single, married, widow, widower Married

Birthplace Oskaloosa Iowa

Last place of residence 940 R I

How long resident of this state 40

Husband's Name _____

Father's Name J. M. MCFARLAND

Country of Birth washington Ohio

Mother's Name SAMANTHA BARNES

Country of Birth _____ ohio

Physician Anderson

Cause of Death P

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

Singers:

Metcalf
Mr & Mrs HOLTZ
Mrs Dunlap

Paid on Account by:

Mrs. MCFARLAND

T.D. FUNK
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FUNERAL of Mrs. EUNICE WOOD

Date of Funeral Feb 2 1915 2:30 PM

Date of Death Feb 1 1915

Place of Death 239 3ST

Place of Funeral " "

Clergyman Testerman

Date of Burial Feb 2 1915

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 3 Years 2 Months 12 Days.

Color W Occupation at H

single, married, widow, widower Married (LP) as written)

Birthplace Mo

Last place of residence 239 3ST

How long resident of this state 20 yrs

Husband's Name JAMES F. WOOD

Father's Name R FORD

Country of Birth Mo.

Mother's Name ERMA CLOKLEY

Country of Birth ILLs.

Physician Rudolph

Cause of Death Tuberculosis

Ordered by _____

Charge to _____

Sexton _____

Other Information:

(age was listed as
3 years 2 months 12 days
but
How long in state was
given as 20 years
with husbands name
and married written in)

Pittsburg Kans.
was in when rendered
blank

Paid on Account by:

J. F. Wood

T.D. FUNK
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FUNERAL of HARRY AUSTIN COLE (shipin)

Other Information:

Date of Funeral Feb 2 1915 11:00 a.m.

Date of Death Jan 29 1915 11:30 P.

Place of Death Kalamazoo Mich.

Place of Funeral Oak H.

Clergyman Elder Kin

Date of Burial Feb 2 1915

Where Interred Oak Hill Vault

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 54 Years _____ Months _____ Days.

Color W. Occupation _____

single, married, widow, widower _____

Birthplace England

Last place of residence Kalamazoo Mich.

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician E R. Swift

Cause of Death Myocarditis

Ordered by undertaker - C Van Halst

Paid on Account by:

Charge to _____

Miss Cole

Sexton Reed

T.D. FUNK
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FUNERAL of GEORGE PIERSON COOPER

Other Information:

Date of Funeral Feb 4 1915 10:30 a.m.

Date of Death Feb 2 1915

Place of Death 1123 Oregon ST.

Place of Funeral " "

Clergyman K. C.

Date of Burial Feb 4

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 76 Years 11 Months 29 Days.

Color W. Occupation Painter

single, married, widow, widower Married

Birthplace England

Last place of residence 1123 Oregon

How long resident of this state 40 yrs

Husband's Name Not Known

Father's Name " "

Country of Birth _____

Mother's Name " "

Country of Birth " "

Physician G. W. JONES

Cause of Death Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

G. O. Cooper

Sexton Reed

H. C. Cooper

T.D. FUNK
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FUNERAL of MARRY M. LEFFORD

Other Information:

Date of Funeral Feb 4 1915 2PM

Date of Death Feb 2 1915

Place of Death 1123 Oregon ST.

Place of Funeral " "

Clergyman Holyfield

Date of Burial Feb 4 1915

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 74 Years 9 Months _____ Days. - (28 erased as # of days)

Color W. Occupation P

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Chronic Myelitis

Ordered by _____

Paid on Account by:

Charge to _____

Laura LEFFERD

Sexton _____

T.D. FUNK
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FUNERAL of HOWARD BARNETT (ship in)

Other Information:

Date of Funeral Feb 16 1915 2:00 PM

Date of Death Feb 12 1915

Place of Death Dalton Mo.

Place of Funeral A M E Church

Clergyman _____

Date of Burial Feb 16 1915

Where Interred OAK Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 78 Years _____ Months _____ Days.

Color B Occupation _____

single, married, widow, widower widow

Birthplace _____

Last place of residence Dalton Mo.

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Ship in

Cause of Death Bro. Pneumonia

Ordered by Masonic Lodge

Paid on Account by:

Charge to _____

Son

Sexton _____

T.D. FUNK
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FUNERAL of WILLIAM COLLETT

Date of Funeral Feb 15 1915 8 a.m.

Date of Death Feb 14 1915

Place of Death Douglas Co Farm

Place of Funeral No

Clergyman _____

Date of Burial University of Kans.

Where Interred " "

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 79 Years 5 Months 29 Days.

Color W. Occupation Inmate of Co.

single, married, widow, widower Married

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician E.D. F. Phillips

Cause of Death Chronic Diarrhea

Ordered by Co. Poor Com.

Charge to Pro Synwall K.U.

Sexton _____

Other Information:

County Farm To Parlor
Chapel to K.U. E. Smith Dr.

Paid on Account by:

Geo Foster

T.D. FUNK
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FUNERAL of MARY I. McMILLAN

Date of Funeral Feb 18 1915 2 P.M.

Date of Death Feb 16 1915

Place of Death 945 VT ST.

Place of Funeral Methodist Church

Clergyman Wolf

Date of Burial Feb 18, 1915

Where Interred OAK Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 75 Years _____ Months _____ Days.

Color W. Occupation at Home

single, married, widow, widower Widow

Birthplace Bowling Green Ind.

Last place of residence 945 VT ST.

How long resident of this state 47 yrs

Husband's Name _____

Father's Name ROBERT WINDGATE

Country of Birth Paris Ills

Mother's Name CINTHA ASH

Country of Birth _____

Physician Rudolph

Cause of Death Cerebral Hemmorrhage

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Paid on Account by:

J I NORTON

T.D. FUNK
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FUNERAL of MARY S. GRANGER

Other Information:

Date of Funeral Feb 18 1915 3:30 PM

Date of Death Feb 17 1915

Place of Death 909 TENN. ST.

Place of Funeral " "

Clergyman Powell

Date of Burial Feb. 18 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 53 Years 9 Months 7 Days.

Color W. Occupation at Home

single, married, widow, widower Married

Birthplace JamesTown N York

Last place of residence Lawrence Kans

How long resident of this state 24 yrs

Husband's Name _____

Father's Name THOMAS SHAW

Country of Birth New York

Mother's Name ADELIA ALLEN

Country of Birth N York

Physician Anderson

Cause of Death Sacomia of Liver

Ordered by _____

Paid on Account by:

Charge to _____

Mr Granger

Sexton _____

T.D. FUNK
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FUNERAL of WINIFRED B Gunn

Other Information:

Date of Funeral Feb 20 1915 12.08 am (as written)

Date of Death Feb 19 1915 5:20 a.m

Place of Death K.C. Mo.

Place of Funeral K.C. + OAK Hill

Clergyman EIDERKIN

Date of Burial Feb 20 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 45 Years _____ Months _____ Days.

Color W Occupation at Home

single, married, widow, widower Married

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name Geo. Gunn

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Geo F. Hamel

Cause of Death Muscular Atrophy

Ordered by _____

Paid on Account by:

Charge to _____

T C Gunn

Sexton _____

T.D. FUNK
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FUNERAL of ELI B HUNTER

Other Information:

Date of Funeral Feb 23 1915 2:00 PM

Date of Death Feb 21 1915 2:45 P

Place of Death KC Mo.

Place of Funeral 1145 Penn

Clergyman McFarland

Date of Burial Feb 23 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 65 Years _____ Months _____ Days.

Color W Occupation Grocerman

single, married, widow, widower Married

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician JOHN H. OTTEN Rialto Bldg K.C. Mo.

Cause of Death Uraemia

Ordered by Freeman + Marshall

Paid on Account by:

Charge to _____

Hunter Bros

Sexton _____

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FUNERAL of SARAH HAMER

Other Information:

Date of Funeral Feb 26 1915 2:00 PM

Date of Death Feb 24 1915

Place of Death 4 mi S W Lawrence

Place of Funeral AME Church

Clergyman Wolf

Date of Burial Oak Hill (as written)

Where Interred Feb 26 1915

Grave or Lot No. _____ Sec. _____
Location of Grave _____

Age: 72 Years 5 Months 24 Days.

Color White Occupation at home

single, married, widow, widower Widow

Birthplace Ohio

Last place of residence 4 mi S W

How long resident of this state 30 yrs

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician DE Smith

Cause of Death Bronco Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

Mr. HAMER

Sexton _____

T.D. FUNK
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FUNERAL of HENRY SNODGRASS

Other Information:

Date of Funeral Feb 27 1915 2:00 PM

Date of Death Feb 25 1915

Place of Death Rudolph Hosp.

Place of Funeral 3 mi NORTH

Clergyman Testerman

Date of Burial Feb 27 1915

Where Interred Maple Grove

Grave or Lot No. 10 Sec. _____

Location of Grave _____

Age: 5 Years _____ Months _____ Days.

Color W. Occupation at school

single, married, widow, widower Single

Birthplace Lawrence Kans

Last place of residence 3 mi North

How long resident of this state 5 yrs

Husband's Name WILLIAM SNODGRASS (as given)

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death Bronco Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

Mrs SNODGRASS

Sexton _____

T.D. FUNK
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FUNERAL of MOLLY MAE NELSON (col)

Other Information:

Date of Funeral March 13 1915 2:00

Date of Death March 11 1915 8:00 a

Place of Death 735 N.J. ST

Place of Funeral " " Church

Clergyman _____

Date of Burial Feb 13 1915

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave Reserve

Age: 24 Years 1 Months 15 Days.

Color B Occupation Housewife

single, married, widow, widower Married

Birthplace Kansas

Last place of residence 735 N.J. ST

How long resident of this state 24-1-15

Husband's Name RUCK NELSON

Father's Name STEWART DRAKE

Country of Birth _____

Mother's Name EMMA HIGHTOWER

Country of Birth _____

Physician A. J. Anderson

Cause of Death Pul Tuberculosis

Ordered by RUCK

Paid on Account by:

Charge to _____

Sexton Red

T.D. FUNK
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FUNERAL of ANNA M. ANDERSON

Other Information:

Date of Funeral March 17 1915 2:30 PM

Date of Death March 15, 1915 1:30 P.

Place of Death Simmons Hosp

Place of Funeral Luthern Church

Clergyman STauffer

Date of Burial March 17 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 50 Years 3 Months 21 Days.

Color W. Occupation at Home

single, married, widow, widower married

Birthplace Sweden

Last place of residence 725 Mass ST.

How long resident of this state 35 yrs

Husband's Name Ed. ANDERSON

Father's Name S. OLSON

Country of Birth Sweden

Mother's Name _____

Country of Birth _____

Physician Keith

Cause of Death Septic following operation

Ordered by _____

Paid on Account by:

Charge to _____

Ed ANDERSON

Sexton Reed

T.D. FUNK
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FUNERAL of JOHN LACY

Other Information:

Date of Funeral March 22, 1915 2:30 P.M.

Date of Death March 20 1915 5. a.

Place of Death Topeka Kans.

Place of Funeral Funks Chapel

Clergyman McFarland

Date of Burial March 22

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 84 Years _____ Months _____ Days.

Color W Occupation old Soldier

single, married, widow, widower widower

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Dr. J.H. Cooper

Cause of Death Influnza

Ordered by Poor Com. + Mewby

Paid on Account by:

Charge to _____

I J. GREY

Sexton _____

T.D. FUNK
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FUNERAL of ELIZ

Other Information:

Date of Funeral March 26 1915 2:30 P.M.

Date of Death _____

Clergyman: OC Brown

Place of Death _____

Place of Funeral _____

Clergyman _____

Date of Burial _____

Where Interred _____

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 52 Years _____ Months _____ Days.

Color _____ Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Cancer of Stomach

Ordered by _____

Paid on Account by:

Charge to CRISPIN

Mr. CRISPIN

Sexton _____

T.D. FUNK
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FUNERAL of CHARLES C. FORD

Other Information:

Date of Funeral March 28 1915 2:00 PM

Date of Death March 24 1915

Place of Death 620 N 6th ST.

Place of Funeral " "

Clergyman Rev. ORRICK

Date of Burial 3-28.15

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 48 Years 2 Months 10 Days.

Color W Occupation Laborer

single, married, widow, widower Married

Birthplace PENN.

Last place of residence Lawrence Kans

How long resident of this state _____

Husband's Name _____

Father's Name M C FORD

Country of Birth Maine

Mother's Name _____

Country of Birth _____

Physician H T Jones

Cause of Death Cerebral hemorrhage (as written)

Ordered by _____

Paid on Account by:

Charge to _____

G. B. GARRISON
Mrs. FORD

Sexton Paul

M. L. DeHAVEN Paola Kans.

Mr C. C. Ford

Mrs. C. C. FORD

A OLSON

T.D. FUNK
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FUNERAL of ANTON OLSON

Date of Funeral March 28, 1915 2:00 P.M.

Date of Death March 26

Place of Death 1017 N Y ST.

Place of Funeral _____

Clergyman _____

Date of Burial _____

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 57 Years _____ Months _____ Days.

Color W Occupation Retired Lab.

single, married, widow, widower Widower

Birthplace Sweden

Last place of residence 1017 N. Y. ST.

How long resident of this state 35 yrs.

Husband's Name _____

Father's Name OLOF JOHANSON

Country of Birth Sweden

Mother's Name _____

Country of Birth _____

Physician Anderson

Cause of Death _____

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

clerqyman: Stauffer

Paid on Account by:

ANNA OLSON

AXEL OLSON +

A OLSON

T.D. FUNK
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FUNERAL of ELIZABETH CLARK

Date of Funeral March 28 1915 4:00 PM

Date of Death March 27 1915 4:30 a.

Place of Death 1012 N.H. ST.

Place of Funeral " "

Clergyman Wolf

Date of Burial March 29 1915

Where Interred Overbrook Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 78 Years _____ Months _____ Days.

Color W Occupation at H.

single, married, widow, widower widow

Birthplace England

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name ALBERT COLLIER

Country of Birth England

Mother's Name _____

Country of Birth _____

Physician E R Keith + Clambre(?)

Cause of Death Pneumonia

Ordered by _____

Charge to _____

Sexton _____

Other Information:

H.W. Bomgardner
F.H. Earnest

Paid on Account by:

E.J. Hilkey adx.

T.D. FUNK
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FUNERAL of PERRY COOPER (Col.)

Other Information:

Date of Funeral April 5 (1915) 2:30 P.M.

Date of Death March 31 1915

Place of Death 520 California ST.

Place of Funeral Funks Chapel

Clergyman Jackson

Date of Burial April 5 1915

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 79 Years _____ Months _____ Days.

Color B Occupation Laborer

single, married, widow, widower widower

Birthplace Mo.

Last place of residence 520 California ST.

How long resident of this state 25 yrs.

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician H. T. Jones

Cause of Death Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

H. T. Jones

Sexton _____

adm.

FUNERAL of MARGURITE KINCAID

Date of Funeral April 15 1915 2:00

Date of Death April 14 1915

Place of Death 5 mi North

Place of Funeral " Home

Clergyman McFarland

Date of Burial April 15 1915

Where Interred Hardy Oak

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 1 Years 10 Months 3 Days.

Color W Occupation Home

single, married, widow, widower S

Birthplace Williamstown Kans.

Last place of residence 5 M. North

How long resident of this state 1-10-3

Husband's Name _____

Father's Name Cecil KINCAID

Country of Birth _____

Mother's Name FERN GREEN

Country of Birth Jackson Co. Kans.

Physician Anderson

Cause of Death Prongial Pneumonia

Ordered by _____

Charge to _____

Sexton _____

Other Information:

flowers from Luther

Paid on Account by:

Mr. KINCAID

T.D. FUNK
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FUNERAL of EURIKA PADRTA

Other Information:

Date of Funeral April 16 1915 9:30 a.m.

Date of Death April 15 1915

Place of Death 2013 Ohio St.

Place of Funeral " " "

Clergyman _____

Date of Burial April 16 1915

Where Interred Franklin

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years 5 Months 13 Days.

Color W Occupation at Home

single, married, widow, widower Single

Birthplace Ozark Mo.

Last place of residence 2013 Ohio

How long resident of this state 1 Mo.

Husband's Name _____

Father's Name JOHN PADRTA

Country of Birth Kans.

Mother's Name _____

Country of Birth _____

Physician G. W. JONES

Cause of Death Primary Tuberculosis

Ordered by JOHN PADRTA

Paid on Account by:

Charge to LYTAN NEB. 2-24-20

Sexton _____

JOHN PADRTA

U.S.P. OFFICE

T.D. FUNK
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FUNERAL of TALRAN HARVEY

Date of Funeral April 18 1915 2:00 P.M.

Date of Death April 15 1915

Place of Death 809 Garfield St.

Place of Funeral " "

Clergyman McFarland

Date of Burial April 18 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 47 Years 4 Months 9 Days.

Color W. Occupation Teamster

single, married, widow, widower Married

Birthplace Iowa

Last place of residence 809 Garfield St.

How long resident of this state 14 yrs.

Husband's Name _____

Father's Name Joseph Harvey

Country of Birth Indiana

Mother's Name Hanna Brown

Country of Birth Ind

Physician H. T. Jones

Cause of Death Pulmonary Tuberculosis

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

These addresses on page:

1214 N. Jersey
10 + Cal. Ave. Topeka
Rural No. 1.

Paid on Account by:

Mrs T. Harvey

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FUNERAL of RICHARD J. JONES

Other Information:

Date of Funeral April 17-18 1915

Date of Death April 16 1915

Place of Death 815 Mo. St.

Place of Funeral " " + Lebo. Kans.

Clergyman _____

Date of Burial April 18 1915

Where Interred Lebo Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 70 Years 5 Months 20 Days

Color W. Occupation widower

single, married, widow, widower Contractor

Birthplace Wales

Last place of residence 815 Mo. St.

How long resident of this state 40 yrs.

Husband's Name _____

Father's Name JOHN JONES

Country of Birth Wales

Mother's Name _____

Country of Birth _____

Physician H T Jones

Cause of Death Apoplexy

Ordered by _____

Paid on Account by:

Charge to _____

N. Pickens

Sexton _____

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FUNERAL of VALENTINE B. HOFFMAN

Other Information:

Date of Funeral April 26, 1915 2:00 P.M.

Date of Death April 24, 1915 3 P

Place of Death 1009 Ky ST.

Place of Funeral " "

Clergyman Rev. Lawrence

Date of Burial April 26

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 78 Years _____ Months _____ Days.

Color W. Occupation Ret. Farmer

single, married, widow, widower Married

Birthplace Rockford Ills.

Last place of residence Lawrence Kans.

How long resident of this state 7 yrs.

Husband's Name _____

Father's Name V B HOFFMAN

Country of Birth France

Mother's Name _____

Country of Birth _____

Physician Noah Hayes

Cause of Death Arthritic Deforman

Ordered by _____

Paid on Account by:

Charge to Plattsburg Clinton Co. Mo.

Mrs V. D. Hoffman

Sexton _____

R#5

T.D. FUNK
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FUNERAL of LELAND W. MOORE

Other Information:

Date of Funeral April 30, 1915

Date of Death April 29 1915 10 a.

Place of Death 1040 VT. ST.

Place of Funeral OTTawa Kans.

Clergyman _____

Date of Burial April 30 1915

Where Interred OTTawa Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 31 Years 4 Months 19 Days.

Color W. Occupation STENO.

single, married, widow, widower Single

Birthplace Cascade Iowa

Last place of residence 1040 VT. ST.

How long resident of this state 20 yrs.

Husband's Name _____

Father's Name WILLIAM B MOORE

Country of Birth Vicksburg Miss.

Mother's Name _____

Country of Birth _____

Physician H. T. Jones

Cause of Death Gunshot in head Suicide

Ordered by _____

Paid on Account by:

Charge to _____

Bro C. J Hardy
of OTTawa

Sexton _____

T.D. FUNK
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FUNERAL of Stillborn of Arthur L. MARKS

Other Information:

Date of Funeral Burial May 6 1915

Date of Death May 5 1915 2:30

Place of Death 735 Mass. ST.

Place of Funeral No.

Clergyman "

Date of Burial May 6 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: still born Years _____ Months _____ Days.

Color W. Occupation _____

single, married, widow, widower _____

Birthplace Lawrence Kans.

Last place of residence No.

How long resident of this state _____

Husband's Name _____

Father's Name ARTHUR L. MARKS

Country of Birth Douglas Co.

Mother's Name _____

Country of Birth _____

Physician Carl PHILLIPS

Cause of Death Stillborn

Ordered by _____

Paid on Account by:

Charge to _____

A. MARKS

Sexton _____

T.D. FUNK
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FUNERAL of Mrs. ANNA GEO SHORT

Other Information:

Date of Funeral May 9 1915

Date of Death May 8 1915 2:30 a.

Place of Death Social Service Hosp.

Place of Funeral Funk's Chapel

Clergyman Testerman

Date of Burial May 9 1915

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 78 Years _____ Months _____ Days.

Color W Occupation at Home

single, married, widow, widower Married

Birthplace Germany

Last place of residence 645 N 3 ST.

How long resident of this state 35 yrs

Husband's Name GEO. SHORT

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Dr. O Connell

Cause of Death Paralysis

Ordered by _____

Paid on Account by:

Charge to _____

Miss Dias SHORT

Sexton _____

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FUNERAL of LAURA LULA McCONNELL

Other Information:

Date of Funeral May 12 1915 1:00 PM

Date of Death May 11 1915 1:50a

Place of Death 1131 Ky ST.

Place of Funeral " "

Clergyman Methodist

Date of Burial May 12 1915

Where Interred Weston Mo.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 78 Years _____ Months _____ Days.

Color W Occupation at Home

single, married, widow, widower widow

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name ^{son} Marmaduke McConnell

Country of Birth 1131 Ky ST.

Mother's Name _____

Country of Birth _____

Physician FD Morse

Cause of Death Cancer of Stomach

Ordered by _____

Paid on Account by:

Charge to _____

Miss McConnell

Sexton _____

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FUNERAL of ROBERT M. KUNKEL

Other Information:

Date of Funeral May 16 1915

Date of Death May 14 - 15 800P

Place of Death Sim Hosp.

Place of Funeral Perry Kans

Clergyman _____

Date of Burial May 16 - 15

Where Interred _____

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 47 Years 8 Months 12 Days.

Color W. Occupation Farmer

single, married, widow, widower Married

Birthplace Thompsonville Kans.

Last place of residence 9 mi N.

How long resident of this state 47-8-12

Husband's Name _____

Father's Name Geo KUNKEL

Country of Birth Penn

Mother's Name _____

Country of Birth McCoy Perry ^{wife} (as written)

Physician H. T. Jones

Cause of Death Gunshot wound Homicide

Ordered by _____

Paid on Account by:

Charge to _____

Sexton _____

T.D. FUNK
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FUNERAL of ELIGIO C. ESTRADO

Date of Funeral May 17 1915 2:30 PM

Date of Death May 14 1915 3:00 P

Place of Death 832 N. J. ST.

Place of Funeral " "

Clergyman Topeka Priest

Date of Burial May 17 1915

Where Interred Franklin Cemetary

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 14 Years 5 Months 6 Days.

Color Mexican Occupation at school

single, married, widow, widower S

Birthplace Mexico

Last place of residence 832 N. J. ST.

How long resident of this state 6 yrs

Husband's Name _____

Father's Name E. ESTRADO

Country of Birth Mexico

Mother's Name PAULINE COSTILLO

Country of Birth Mexico

Physician R E Barnes

Cause of Death Tuberculosis Perotinitis

Ordered by Mrs F. Morris

Charge to _____

Sexton _____

Other Information:

amb. 832 N J ST. to
Social Service
Social Service To 832 N J ST.

Paid on Account by:

E. ESTRADO Mrs. Morris

Mrs F. Morris

T.D. FUNK
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FUNERAL of WILLIAM HARRISON IRWIN

Other Information:

Date of Funeral May 16, 1915 3:30 PM

Date of Death May 15 1915 5:30 a.

Place of Death 1101 VT. ST.

Place of Funeral Baptist Church

Clergyman O C Brown

Date of Burial May 16 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 73 Years _____ Months _____ Days.

Color W Occupation Retired Minister

single, married, widow, widower Married

Birthplace Paris Ill.

Last place of residence 1101 VT. ST.

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician R D Morse

Cause of Death Valvular disease of Heart

Ordered by _____

Paid on Account by:

Charge to _____

Dr. C M. Gibson

Sexton Red

Franklin Kans.

T.D. FUNK
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FUNERAL of OSGOOD A. COLMAN

Other Information:

Date of Funeral May 20 1915 10:30 a.m.

Date of Death May 18 7:30 P

Place of Death 922 Mo. ST.

Place of Funeral 730 Ind. ST.

Clergyman _____

Date of Burial May 20 1915

Where Interred Oak Hill

Grave or Lot No. 6 Sec. 10

Location of Grave _____

Age: 65 Years 3 Months 28 Days.

Color W Occupation Ret Farmer

single, married, widow, widower Married

Birthplace Chulsy Mass.

Last place of residence 922 Mo ST.

How long resident of this state 60 yrs.

Husband's Name _____

Father's Name E. A. Colman

Country of Birth Mass.

Mother's Name MARY J WENDEL

Country of Birth Mass.

Physician Simmons

Cause of Death c Bright Disease

Ordered by O Smith

Paid on Account by:

Charge to _____

Mrs Colman

Sexton Reed

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FUNERAL of HENRY WILLIAM SCHAAKE

Other Information:

Date of Funeral May 23 1915 2:30 PM

Date of Death May 21 1915 3:30 a

Place of Death 1246 Conn ST.

Place of Funeral " "

Clergyman ASling

Date of Burial May 23, 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 37 Years 11 Months 13 Days.

Color W Occupation Inpy(?) Dealer

single, married, widow, widower married

Birthplace Edwardsville, Ills

Last place of residence 1246 Conn. ST.

How long resident of this state 12 yrs.

Husband's Name _____

Father's Name William SCHAAKE

Country of Birth Germany

Mother's Name KATHERINE DUDA

Country of Birth Edwardsville Ills.

Physician W. C. McConnell

Cause of Death Fatty Degeneration of heart
with Rupture of Right Auricle.

Ordered by _____

Paid on Account by:

Charge to _____

C SCHAAKE

Sexton Reed

T.D. FUNK
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FUNERAL of ALEXANDER RICHARD McNUTT

Other Information:

Date of Funeral May 22 1915 2:00 PM

Date of Death May 20 1915 5:50 a.

Place of Death Eureka Kans.

Place of Funeral 1500 Lenard Ave

Clergyman Payne

Date of Burial May 22 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 4
Location of Grave _____

Age: 64 Years _____ Months _____ Days.

Color B Occupation _____

single, married, widow, widower Married

Birthplace _____

Last place of residence Eureka Kans.
How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician H W Manning

Cause of Death Cerebral Hemorrhage

Ordered by _____

Paid on Account by:

Charge to _____

Mr Brown son-in-law

Sexton _____

Dora Brown

Miss McNutt

Mrs Dora Brown

T.D. FUNK
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FUNERAL of MARY C. SCHOOLEY

Other Information:

Date of Funeral May 23 1915 2:30 P.M.

Date of Death May 21 1915 6:00 P.

Place of Death 937 Conn. ST.

Place of Funeral " "

Clergyman Haworth

Date of Burial May 23, 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 65 Years _____ Months 5 Days.

Color W. Occupation Housewife

single, married, widow, widower Married

Birthplace Virginia

Last place of residence 937 Conn. ST.

How long resident of this state 5 yrs.

Husband's Name B. M. SCHOOLEY

Father's Name JAMES MIDDLETON (MIDDLETEN)

Country of Birth Virginia

Mother's Name _____

Country of Birth _____

Physician Anderson

Cause of Death Pul-Tuberculosis

Ordered by _____

Paid on Account by:

Charge to _____

B. M. SCHOOLEY

Sexton Reed

Prudential

Fritz Mine

FUNERAL of HELENA LAHRMANN

Date of Funeral May 25 1915 3:00 PM

Date of Death May 23, 4:30 P

Place of Death 910 VT. ST.

Place of Funeral " "

Clergyman Asling

Date of Burial May 25, 1915

Where Interred Oak Hill

Grave or Lot No. 10 Sec. 1

Location of Grave _____

Age: 85 Years 2 Months 11 Days.

Color W Occupation Home

single, married, widow, widower Widow

Birthplace Germany

Last place of residence 910 VT. ST.

How long resident of this state 30 yrs.

Husband's Name _____

Father's Name HENRY RECKEMEYER

Country of Birth Germany

Mother's Name -

Country of Birth -

Physician Anderson

Cause of Death Seniality

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

Soloist: Mrs E. Charter (?)

Paid on Account by:

F. MEINHAFER

T.D. FUNK
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FUNERAL of Infant of Mrs. W. A. CHURCHILL

Other Information:

Date of Funeral May 24 1915 1:30 PM

Date of Death May 24 1915

Place of Death Stillborn

Place of Funeral no

Clergyman "

Date of Burial May 30 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: still born Years _____ Months _____ Days.

Color W Occupation _____

single, married, widow, widower _____

Birthplace 1210 Ohio St.

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name WHIT A CHURCHILL

Country of Birth Lawrence Kans

Mother's Name _____

Country of Birth _____

Physician Dr. McConnell

Cause of Death stillborn

Ordered by _____

Paid on Account by:

Charge to _____

Mrs CHURCHILL

Sexton Beard

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FUNERAL of CLARA E. BISHOP

Date of Funeral May 30 1915 3:00 P.M.

Date of Death May 27 1915 12:00

Place of Death 820 R I ST.

Place of Funeral Luthern Church

Clergyman DeLo

Date of Burial May 30 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 44 Years 10 Months 4 Days.

Color W. Occupation Home

single, married, widow, widower Married

Birthplace Lawrence Kans

Last place of residence 820 R. I.

How long resident of this state 44

Husband's Name Jim Bishop

Father's Name MICHAEL OSWALT

Country of Birth Ohio

Mother's Name Sarah Teter

Country of Birth Ohio

Physician McConnell

Cause of Death Cancer of Uterus

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

clergyman: DeLo 1333 R.I.

G23Ra
Sec 5

Paid on Account by:

Mrs. Bishop

daughter

T.D. FUNK
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FUNERAL of MARTHA KELLOGG

Other Information:

Date of Funeral shipped to Lecompton JUNE 2 1915 1108 Santa Fe P.M.

Date of Death JUNE 2 1915 10:am

Place of Death Simon Hosp (Simmons)

Place of Funeral shipped To Lecompton

Clergyman _____

Date of Burial _____

Where Interred _____

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 59 Years 6 Months 19 Days.

Color W. Occupation Housewife

single, married, widow, widower Married

Birthplace Rosendale Mo.

Last place of residence Lecompton

How long resident of this state _____

Husband's Name T. R. KELLOGG

Father's Name W. ADKINS

Country of Birth Mo.

Mother's Name _____

Country of Birth _____

Physician H. L. Chambers

Cause of Death Cancer of Liver

Ordered by _____

Paid on Account by:

Charge to _____

T. R. KELLOGG

Sexton _____

T.D. FUNK
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FUNERAL of WILLIAM MARCUS CRAVEN

Other Information:

Date of Funeral June 8 1915 shipped Clayton Ind. 5:44 2:00 PM

Date of Death June 6 1915

Place of Death 212 Lincoln ST

Place of Funeral " "

Clergyman _____

Date of Burial shipped To Clayton Ind. 6-8

Where Interred " "

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 41 Years 6 Months 12 Days.

Color W. Occupation Carpenter

single, married, widow, widower Married

Birthplace Center Valley Ind.

Last place of residence 212 Lincoln ST

How long resident of this state 4

Husband's Name _____

Father's Name W M CRAVEN

Country of Birth N Carolina

Mother's Name SARAH BARKER

Country of Birth Ind.

Physician Rudolph

Cause of Death Tuberculosis

Ordered by _____

Paid on Account by:

Charge to _____

J.E. CRAVEN

Sexton _____

T.D. FUNK
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FUNERAL of PETER JONES

Other Information:

Date of Funeral June 22 1915 2:00 P.M.

Date of Death June 20 1915

Place of Death Douglas County Farm

Place of Funeral Bloomington Kans

Clergyman _____

Date of Burial June 22 1915

Where Interred Clinton

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 39 Years _____ Months _____ Days.

Color B Occupation Laborer

single, married, widow, widower Married

Birthplace Lawrence Kans. 7 mi W.

Last place of residence County Farm

How long resident of this state 39

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician RDF Phillips

Cause of Death Enlargment of Hart (as given)

Ordered by P.C. Gray

Paid on Account by:

Charge to Geo. Washington

J Kelsey

Sexton _____

RFD #9

Geo. Washington

T.D. FUNK
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FUNERAL of Lydia A STRAFFON

Other Information:

Date of Funeral June 24 1915 3 00 PM

Date of Death June 23 1915

Place of Death 1602 Mass ST.

Place of Funeral " "

Clergyman Edwards

Date of Burial June 24, 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 10

Location of Grave _____

Age: 87 Years 2 Months 19 Days.

Color W. Occupation at Home

single, married, widow, widower widow

Birthplace Canada

Last place of residence 1602 Mass ST.

How long resident of this state 40

Husband's Name ROBERT J STRAFFON

Father's Name DAVID MILLS

Country of Birth N York

Mother's Name _____

Country of Birth _____

Physician A. J. Anderson

Cause of Death senility

Ordered by _____

Paid on Account by:

Charge to _____

C W STRAFFON

Sexton _____

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FUNERAL of HATTY BAKER

Other Information:

Date of Funeral June 25 1915 2:30 P.M.

Date of Death June 24, 1915

Place of Death 937 Conn St

Place of Funeral " "

Clergyman Haworth

Date of Burial June 25

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 68 Years _____ Months _____ Days.

Color W Occupation at Home

single, married, widow, widower widow

Birthplace Virginia

Last place of residence 937 Conn. St.

How long resident of this state 1-2

Husband's Name _____

Father's Name JAMES MIDDLETON

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Anderson

Cause of Death Cerosis of Arterus

Ordered by BM SCHOOLEY

Paid on Account by:

Charge to _____

BM SCHOOLEY

Sexton _____

Prudential Check

T.D. FUNK
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FUNERAL of CLAUD W NORRIS

Other Information:

Date of Funeral June 25 1915 shipped UPRR 9:10 a.m.

Date of Death June 24, -15 5:00 a.m.

Place of Death 2 1/2 mi N UP Track

Place of Funeral Leavenworth Kans.

Clergyman _____

Date of Burial June 25 1915

Where Interred Leavenworth

Grave or Lot No. _____ Sec. _____
Location of Grave _____

Age: 38 Years _____ Months _____ Days.

Color W Occupation Laborer

single, married, widow, widower Widower

Birthplace Leavenworth Kans.

Last place of residence _____

How long resident of this state 38 yrs

Husband's Name _____

Father's Name JOSEPH NORRIS

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician H T Jones

Cause of Death Runover by RR Train

Ordered by _____

Paid on Account by:

Charge to _____

Cleo O. Bedwell

Sexton _____

T.D. FUNK
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FUNERAL of ELIZABETH MARTIN

Other Information:

Date of Funeral June 27 1915 2:30 PM

Date of Death June 23 1915

Place of Death 744 Mass St

Place of Funeral " "

Clergyman Backus

Date of Burial June 27 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 77 Years 3 Months 1 Days.

Color W Occupation Home

single, married, widow, widower Widow

Birthplace Germany

Last place of residence 744 Mass St

How long resident of this state 58 yrs

Husband's Name _____

Father's Name FRED LINTNER (?)

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Simmons

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Mrs Martin

Sexton _____

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FUNERAL of FRANK A. HASTIE

Date of Funeral June 27 1915 9:00 a.m.

Date of Death June 25 1915

Place of Death 917 La. ST.

Place of Funeral " " Church

Clergyman STauffer

Date of Burial June 27 1915

Where Interred Stony Point Cemetary

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 39 Years _____ Months 28 Days.

Color W. Occupation Laborer

single, married, widow, widower Single

Birthplace Lawrence Kans

Last place of residence 917 La

How long resident of this state 39-0-28

Husband's Name _____

Father's Name Geo HASTIE

Country of Birth Scotland

Mother's Name SUSIE EBERHART

Country of Birth Penn.

Physician Anderson

Cause of Death _____

Ordered by W L HASTIE

Charge to _____

Sexton _____

Other Information:

*UP Dept to Chapel
Chapel to home 11:30 AM*

Paid on Account by:

Mo. Hastie

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FUNERAL of WINIFRED WALKER

Date of Funeral July 2 1915 2:30

Date of Death June 28 1915

Place of Death Denver Colo

Place of Funeral Baptist Church

Clergyman Brown

Date of Burial July 2 1915

Where Interred Oak Hill

Grave or Lot No. 35 Sec. 12

Location of Grave _____

Age: 25 Years _____ Months _____ Days.

Color W Occupation at School

single, married, widow, widower Single

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name JAMES H. P. WALKER

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Suicide From B, ychloride of Mercury

Ordered by undertaker W. A. Burke

Paid on Account by:

Charge to Local R. W. H. SHAPLEY

Walker

Sexton _____

Other Information:

U.P. Depot To Chapel
Chapel To House 1025 Ala.

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FUNERAL of JOHN A. WEIDMAN

Other Information:

Date of Funeral July 4 1915 3:30 PM

Date of Death June 30 1915 6:00 P

Place of Death Kaw River Dam

Place of Funeral Oak Hill

Clergyman H. Rosler (?)

Date of Burial July 4 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 13 Years 2 Months 29 Days.

Color W Occupation at school

single, married, widow, widower Single

Birthplace Lawrence Kans

Last place of residence 321 Maden Lane ST.

How long resident of this state 13-2-29

Husband's Name _____

Father's Name W. E. WEIDMAN

Country of Birth Douglas

Mother's Name CLARA N. SAYLOR

Country of Birth _____

Physician Col. H. T. Jones

Cause of Death accidental Drown.

Ordered by W. E. Weidman

Paid on Account by:

Charge to _____

W. E. WEIDMAN

Sexton _____

Ed Shubert at

Eudora

July 31, 1915

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FUNERAL of JULES RICHARDSON

Date of Funeral July 8 1915 11:00 P.M.

Date of Death July 6 1915 7a.

Place of Death 1101 Penn ST.

Place of Funeral Tonganoxie

Clergyman Haworth

Date of Burial July 8 1915

Where Interred Tonganoxie

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 68 Years 11 Months 10 Days.

Color W Occupation Carpenter

single, married, widow, widower Married

Birthplace Ohio

Last place of residence 1101 Penn ST.

How long resident of this state 40 yrs.

Husband's Name _____

Father's Name JAMES RICHARSON (?)

Country of Birth Ind.

Mother's Name _____

Country of Birth _____

Physician Simmons

Cause of Death Chro. Bright disease

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Miss Smith
Clergyman: Haworth

Paid on Account by:

Mrs Woodward

Bert Richardson

(S. over E.) - Mrs E(S) Richardson

T.D. FUNK
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FUNERAL of MARY H. STEELE

Date of Funeral July 13 1915 2:00 PM

Date of Death July 12 1915 5:00 a.

Place of Death 842 Ind. ST.

Place of Funeral " "

Clergyman Lythe

Date of Burial July 13 1915

Where Interred Oak Hill

Grave or Lot No. 97E¹/₂ Sec. 1

Location of Grave _____

Age: 83 Years 6 Months 6 Days.

Color W Occupation Home

single, married, widow, widower Married

Birthplace Boston

Last place of residence 842 Ind. ST.

How long resident of this state _____

Husband's Name Judge Steele

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Anderson - Keith signed

Cause of Death Valvular Heart disease

Ordered by _____

Charge to _____

Sexton Beed

Other Information:

Soloist: Miss Smith

Paid on Account by:

Chas O. Stoddord (?)

adm.

T.D. FUNK
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FUNERAL of JOHN MORTENSON

Other Information:

Date of Funeral July 14 1915 2:30 PM

Date of Death July 12 1915 8:30 P.

Place of Death 924 E. 14th ST.

Place of Funeral " "

Clergyman Stauffer

Date of Burial July 14 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 75 Years 7 Months 21 Days.

Color W. Occupation RR. Laborer

single, married, widow, widower Widower

Birthplace Sweden

Last place of residence _____

How long resident of this state 45 yrs

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Simmons

Cause of Death Chronic Gastritiy

Ordered by _____

Paid on Account by:

Charge to _____

Mrs Mortenson

Sexton Reed

T.D. FUNK
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FUNERAL of WILLIAM C. HODGES

Other Information:

Date of Funeral July 19 1915 11:00

Date of Death July 18 1915

Place of Death Lone Star

Place of Funeral " "

Clergyman _____

Date of Burial July 19 1915

Where Interred Washington Creek Cem.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 79 Years 4 Months 3 Days.

Color W Occupation Farmer

single, married, widow, widower Married

Birthplace Ills.

Last place of residence Lone Star

How long resident of this state 50 yrs

Husband's Name _____

Father's Name JESSIE HODGES

Country of Birth Ills.

Mother's Name _____

Country of Birth _____

Physician Lone Star Kans.

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

A. M. Reaser

Sexton _____

T.D. FUNK
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FUNERAL of Infant of THEO WILEY

Other Information:

Date of Funeral July 18 1915 5:30 PM

Date of Death July 18 1915

Place of Death 447 Pleasant ST.

Place of Funeral No

Clergyman "

Date of Burial July 18 1915

Where Interred OAK Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: ^{still} born Years _____ Months _____ Days.

Color W Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name THEO WILEY

Country of Birth Douglas

Mother's Name LEDA WONACH (?)

Country of Birth MO.

Physician Carl Phillips

Cause of Death still born

Ordered by _____

Paid on Account by:

Charge to _____

Mr Wiley

Sexton _____

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FUNERAL of WESLEY E. PLATTS

Other Information:

Date of Funeral July 20 1915 2:30PM

Date of Death July 19 1915

Place of Death 1221 Del ST.

Place of Funeral " "

Clergyman Haworth

Date of Burial July 20 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____
Location of Grave _____

Age: 72 Years 8 Months 29 Days.

Color W. Occupation Carpenter

single, married, widow, widower Married

Birthplace N. York

Last place of residence 1221 Del ST.

How long resident of this state 46 yrs

Husband's Name _____

Father's Name GEO W. PLATTS

Country of Birth N. York

Mother's Name MIRA METCALF

Country of Birth N. York

Physician Keith

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Mrs. W.E. Platts

Sexton _____

T.D. FUNK
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FUNERAL of ALBERT C. ABRANZ (ship in)
Other Information:

Date of Funeral July 26 1915 1208 Santa Fe P.M.

Date of Death July 24 1915 500 a.

Place of Death Kansas City Mo.

Place of Funeral Oak Hill

Clergyman Father Eckhart

Date of Burial July 26 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____
Location of Grave _____

Age: 56 Years _____ Months _____ Days.

Color W Occupation _____

single, married, widow, widower Married

Birthplace _____

Last place of residence _____
How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician C. E. Frazier

Cause of Death acute Nephritis

Ordered by _____

Charge to _____

Sexton _____

Paid on Account by:

Mrs Abranz

T.D. FUNK
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FUNERAL of Infant of RALPH GRAHAM

Other Information:

Date of Funeral July 29 1915 4:30 P.M.

Date of Death July 29 1915

Place of Death Simmons Hosp.

Place of Funeral No

Clergyman "

Date of Burial July 29 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 4 hrs Years _____ Months _____ Days.

Color W Occupation _____

single, married, widow, widower _____

Birthplace Simmons Hosp.

Last place of residence _____

How long resident of this state _____

Husband's Name RALPH GRAHAM (as given)

Father's Name _____

Country of Birth Iowa

Mother's Name MARGARITE HOSFORD

Country of Birth _____

Physician H. L. Chambers

Cause of Death Premature Infant

Ordered by C. B. HOSFORD

Paid on Account by:

Charge to _____

Mrs Graham

Sexton _____

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FUNERAL of JOHN RICHARDSON

Other Information:

Date of Funeral July 31 1915

Date of Death July 29 1915 6:30 P.

Place of Death 1227 Conn ST.

Place of Funeral Ponoma Kans

Clergyman —

Date of Burial July 30 1915

Where Interred Ponoma Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 85 Years 7 Months 25 Days.

Color W. Occupation Ret Farmer 10yrs

single, married, widow, widower Widower

Birthplace Kentucky

Last place of residence 1227 Conn ST.

How long resident of this state 40 yrs

Husband's Name _____

Father's Name I. (that's all)

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician H.L. Chambers

Cause of Death Cerebral Hemorrhage

Ordered by B. F. ERWIN

Paid on Account by:

Charge to 1224 E 6th AVE
Topeka Kans

MRS Erwin

Sexton _____

(address crossed out)
Probably
Topeka
address
214 Western Ave

T.D. FUNK
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FUNERAL of PAUL C. EBERHART

Other Information:

Date of Funeral July 31 1915 9:00 A.M.

Date of Death July 25 1915

Place of Death Los Angeles

Place of Funeral 94 Ala. St.

Clergyman Testerman

Date of Burial July 31 1915

Where Interred Stony Point

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 77 Years _____ Months _____ Days.

Color W. Occupation _____

single, married, widow, widower married

Birthplace Penn.

Last place of residence Los Angeles

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Frederick B. West

Cause of Death Cerebral Meningitis

Ordered by _____

Paid on Account by:

Charge to _____

Mr Bert Dale

Sexton _____

T.D. FUNK
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FUNERAL of EMMA M. FISCHER

Other Information:

Date of Funeral Aug 7 1915 10:00 a.m.

Date of Death Aug 5 1915 1:00 PM

Place of Death 921 Ills. ST.

Place of Funeral " "

Clergyman Powell + Price

Date of Burial Aug 7 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 65 Years 10 Months 27 Days.

Color W Occupation Nurse

single, married, widow, widower Single

Birthplace West Prussia

Last place of residence 921 Ills ST.

How long resident of this state 45 yrs

Husband's Name _____

Father's Name CARL FISCHER

Country of Birth W. Prussia

Mother's Name ELIZABETH OWOSKI

Country of Birth W. Prussia

Physician F. D. Morse

Cause of Death Sarcoma

Ordered by _____

Paid on Account by:

Charge to _____

Anna FISCHER

Sexton Reed

(OTTO FISCHER)
cab.

T.D. FUNK
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FUNERAL of CLARENCE JAMES GOODWIN Col.

Other Information:

Date of Funeral Aug. 8 1915 9:30 A.M.

Date of Death Aug 7 1915

Place of Death 1105 Ala. ST.

Place of Funeral A. M. E. Church

Clergyman Payne + Jackson

Date of Burial Aug 8 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____
Location of Grave _____

Age: 23 Years 1 Months 21 Days.

Color Col. Occupation Cook

single, married, widow, widower Married

Birthplace Eudora Kans.

Last place of residence 1105 Ala. ST.

How long resident of this state 23-1-21

Husband's Name _____

Father's Name R. GOODWIN

Country of Birth not known

Mother's Name KATY MONROE

Country of Birth Eudora Kans.

Physician H T Jones

Cause of Death Tuberculosis

Ordered by _____

Paid on Account by:

Charge to _____

Mrs GOODWIN

Sexton _____

T.D. FUNK
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FUNERAL of LOUISE ROBERTS ROUSELAUX

Other Information:

Date of Funeral Aug 10 1915 3:00 PM

Date of Death Aug 9 1915 5 a.m.

Place of Death 1041 VT. ST.

Place of Funeral 944 N. H. ST.

Clergyman STimpson

Date of Burial Aug 10 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 90 Years 5 Months 23 Days.

Color W Occupation at Home

single, married, widow, widower Widow

Birthplace Mass.

Last place of residence 1041 VT. ST.

How long resident of this state 61 yrs.

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician D Anderson

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Mrs Radcliff

Sexton _____

T.D. FUNK
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FUNERAL of MAGGIE ELLIS REED

Other Information:

Date of Funeral Aug 10 1915 1:00PM

Date of Death Aug 8 1915

Place of Death 10 mi north

Place of Funeral Funks Chapel

Clergyman Hollyfield

Date of Burial Aug 10 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 33 Years _____ Months 17 Days.

Color W Occupation at Home

single, married, widow, widower married

Birthplace Ohio

Last place of residence 10 mi North

How long resident of this state 31 yrs

Husband's Name Lawrence REED

Father's Name J. BURILE

Country of Birth Ohio

Mother's Name SARAH BURNHARDT

Country of Birth Ohio

Physician Simmons

Cause of Death Blood Poison Abortion

Ordered by Lawrence Reed

Paid on Account by:

Charge to RFD 4 Tongonoxie, Kan

Herb Reed

Sexton _____

L. Reed

T.D. FUNK
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FUNERAL of CHAROLETT HYLA HUEY

Other Information:

Date of Funeral Aug 11 1915

Date of Death Aug 10 1915

Place of Death Lecompton Kans

Place of Funeral " "

Clergyman _____

Date of Burial Aug 11 1915

Where Interred Lecompton Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 5 Years _____ Months _____ Days.

Color W. Occupation school Home

single, married, widow, widower S

Birthplace Lecompton Kans.

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name O T HUEY

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Arsnetic Poison (as written)

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

C. BARTLETT

Sexton _____

Ed J Robinson

Sept 1 1915

T.D. FUNK
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FUNERAL of Infant of GEO ALLENDORF

Other Information:

Date of Funeral Aug 11 1915 3:00

Date of Death Aug 11 1915 12 P.

Place of Death 1001 N H ST.

Place of Funeral MO

Clergyman _____

Date of Burial Aug 11 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 4 hrs Years _____ Months _____ Days.

Color W Occupation _____

single, married, widow, widower _____

Birthplace Lawrence Kans.

Last place of residence 1001 N H ST.

How long resident of this state _____

Husband's Name _____

Father's Name GEO. ALLENDORF

Country of Birth Greece

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death Premature Birth

Ordered by _____

Paid on Account by:

Charge to _____

Sexton _____

T.D. FUNK
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FUNERAL of MELVIN K. SCOTT

Other Information:

Date of Funeral Aug 13 1915 2:00

Date of Death Aug 12 1915 3am

Place of Death Lecompton Kans

Place of Funeral " "

Clergyman _____

Date of Burial Aug 13 1915

Where Interred Lecompton Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 2 Years 0 Months 3 Days.

Color W Occupation Home

single, married, widow, widower S.

Birthplace Lecompton Kans.

Last place of residence " "

How long resident of this state 2-0-3

Husband's Name ROBERT SCOTT (as written)

Father's Name _____

Country of Birth Ills.

Mother's Name ALICE MCKEWN

Country of Birth Ark.

Physician _____ Lecompton

Cause of Death Nephritis

Ordered by _____

Paid on Account by:

Charge to _____

R. SCOTT

Sexton _____

T.D. FUNK
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FUNERAL of MILTON W. PETTIBONE

Date of Funeral Aug 19 1915 2:00PM

Date of Death Aug 17 1915 10:45a

Place of Death Country Club

Place of Funeral 1124 R I ST.

Clergyman Stauffer

Date of Burial Aug 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 24 Years 5 Months _____ Days.

Color W Occupation Lineman

single, married, widow, widower Married

Birthplace Kans.

Last place of residence 1206 Penn St.

How long resident of this state 24-5-0

Husband's Name _____

Father's Name C. B. PETTIBONE

Country of Birth Kans

Mother's Name ETTA WILLEY

Country of Birth Kans.

Physician Anderson

Cause of Death caught on Live Electric Light wire was instantly killed

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Soloist:
Mrs ENDICOTT + STAUFFER

Paid on Account by:

Mrs PETTIBONE

T.D. FUNK
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FUNERAL of CAROLINE VETTER

Other Information:

Date of Funeral shipped To Red Rock OKla Aug 24, 1915 Santa Fe 11:08 PM

Date of Death Aug 24, 1915

Place of Death Santa Fe #9

Place of Funeral _____

Clergyman _____

Date of Burial shipped To

Where Interred Red Rock OKla.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years 10 Months 10 Days.

Color Indian Occupation _____

single, married, widow, widower _____

Birthplace Red Rock OKla

Last place of residence _____

How long resident of this state 7 days

Husband's Name _____

Father's Name FRED VETTER Red Rock OKla.

Country of Birth OKlahoma

Mother's Name ELLA PETTIT

Country of Birth OKla

Physician _____

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

FRED VETTER

Sexton _____

Momez(?) ORDEN

Momez^{or (?)} ORDEN

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of JEREMIAH B. SLACK

Other Information:

Date of Funeral Sep 1 1915 2:30

Date of Death Aug 29 1915 4:30 P.

Place of Death ST. Joseph Hosp. K.C. Mo.

Place of Funeral 941 B I ST.

Clergyman Thompson

Date of Burial Sep 1 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 85 Years _____ Months _____ Days.

Color W Occupation Retired

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician C.E. WILSON 924 Rialto Bldg K.C. Mo.

Cause of Death Hypers Labar Pneumonia
Following Fracture of Hip

Ordered by _____

Paid on Account by:

Charge to Raymond A. BARROWS adm.

Raymond A.

Sexton _____
2511 Prospect
K.C. Mo.

Barrows

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FUNERAL of EMMA NEAL

Other Information:

Date of Funeral Sep 3, 1915 10:00 a.m.

Date of Death Sep 1 1915

Place of Death 1107 Conn ST.

Place of Funeral " "

Clergyman Stauffer

Date of Burial Sep 3 1915

Where Interred Oak Hill

Grave or Lot No. N 1/2 166 Sec. 7

Location of Grave _____

Age: 59 Years _____ Months 25 Days.

Color W Occupation Home

single, married, widow, widower Widow

Birthplace Mo

Last place of residence 1107 Conn ST.

How long resident of this state 40 yrs

Husband's Name _____

Father's Name HENRY MORTIN ^{could}_{be} (MARTIN)

Country of Birth Ohio

Mother's Name NANCY KERR

Country of Birth Tenn.

Physician Smith

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

MARTIN HACK

Sexton Reed

Mrs. M. HAZE

MARTIN

ALICE Snyder (Snyded)

T.D. FUNK
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FUNERAL of ROBERT F. GLASS

Date of Funeral Sep 9 1915 10:00 am.

Date of Death Sep 7 1915 noon

Place of Death 501 Second ST.

Place of Funeral 504 Locust

Clergyman Elder Kin

Date of Burial Sep 9 1915

Where Interred Oak Hill

Grave or Lot No. 34 Sec. 4

Location of Grave _____

Age: 64 Years 1 Months _____ Days.

Color W Occupation restaurant keeper

single, married, widow, widower Married

Birthplace W. Virginia

Last place of residence 504 Locust

How long resident of this state 33 yrs.

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death Cerebral Hemorrhage

Ordered by Geo. L. Glass

Charge to _____

Sexton _____

Other Information:

Soloist: Dickers

Paid on Account by:

Geo. Glass

T.D. FUNK
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FUNERAL of PHOEBE ELIOT

Other Information:

Date of Funeral Sep 15 1915 From Train 3:47 PM

Date of Death Sep 13 1915 11 a.m.

Place of Death DELPHOS, Kans

Place of Funeral Oak Hill

Clergyman STauffer

Date of Burial Sep 15 1915

Where Interred Oak Hill Sec. 9

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 97 Years _____ Months _____ Days.

Color W Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician W H Ashby

Cause of Death Fall + Old Age

Ordered by _____

Paid on Account by:

Charge to Mrs A. Jonnie Blackfoot Ida.

Jonnie

Sexton _____

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FUNERAL of NINA NEWBY

Other Information:

Date of Funeral Sep 17 2:30 PM

Date of Death Sep 16 1915 12:30 a.

Place of Death 1105 N. J. ST.

Place of Funeral " "

Clergyman McFarland

Date of Burial Sep 17 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 62 Years 6 Months 16 Days.

Color W Occupation at Home

single, married, widow, widower Single

Birthplace Indiana

Last place of residence 1105 N J ST.

How long resident of this state 34 yrs

Husband's Name _____

Father's Name HENRY NEWBY

Country of Birth Ind.

Mother's Name LACY

Country of Birth Ind.

Physician Simmons

Cause of Death APoplexy

Ordered by _____

Paid on Account by:

Charge to _____

MISS NEWBY

Sexton _____

FUNERAL of ELUM I ALEXANDER

Other Information:

Date of Funeral Sep 19 1915 2:00PM

Date of Death Sep 18 1915 2:15P

Place of Death 1801 Ind. ST.

Place of Funeral " "

Clergyman OLINGEN (?)

Date of Burial Sep 19 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 4

Location of Grave _____

Age: 70 Years _____ Months _____ Days.

Color W Occupation Laborer

single, married, widow, widower Single

Birthplace Ind.

Last place of residence 1801 Ind.

How long resident of this state _____

Husband's Name _____

Father's Name S. ALEXANDER

Country of Birth Penn.

Mother's Name STRING

Country of Birth Penn.

Physician H. T. Jones

Cause of Death CANCER

Ordered by _____

Paid on Account by:

Charge to _____

Noble SHERWOOD

Sexton _____

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FUNERAL of JOHN JAMES FITZGIBBONS

Other Information:

Date of Funeral Sep 20 shipped To Topeka Kans

5:54 PM

Date of Death Aug 28 1915 3 PM

Place of Death Topeka Kans

Removing Remains:

Eudora + back

Place of Funeral " "

Clergyman _____

off. Pd at
Eudora To Boatman

Date of Burial _____

Where Interred Topeka Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 8 Years _____ Months _____ Days.

Color W Occupation School

single, married, widow, widower S

Birthplace Topeka Kans.

Last place of residence _____

How long resident of this state 8

Husband's Name _____

Father's Name GEO. FITZGIBBONS

Country of Birth Topeka + Wichita Kans

Mother's Name _____

Country of Birth _____

Physician H T Jones

Cause of Death accidental Drowned

Ordered by _____

Paid on Account by:

Charge to _____

GEO. H. FITZGIBBONS

Sexton _____

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FUNERAL of MYRTLE ADA REUSCH

Other Information:

Date of Funeral Sep 28 1915 9:30 a.m.

Date of Death Sep 26 1915

Place of Death Simmons Hosp.

Place of Funeral Pleasant Grove Church

Clergyman _____

Date of Burial Sep 28, 1915

Where Interred Day Cemetery (as written)

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 26 Years 5 Months _____ Days.

Color W Occupation Housewife

single, married, widow, widower Married

Birthplace Oklahoma

Last place of residence 10 mi. South

How long resident of this state 15 yrs

Husband's Name FLANDERS REUSCH

Father's Name A. B. JONES

Country of Birth Ark.

Mother's Name Ovanda MAIN

Country of Birth Kans.

Physician Keith

Cause of Death Stomachitis

Ordered by _____

Paid on Account by:

Charge to _____

E DEAY

Sexton _____

E. REUSCH

T.D. FUNK
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FUNERAL of EDITH COOK SANBORN

Other Information:

Date of Funeral Oct. 1 1915 2:00PM

Date of Death Sep 29 1915 5:00 P.

Place of Death 917 Ky ST.

Place of Funeral " "

Clergyman Edwards

Date of Burial Oct 1 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 38 Years _____ Months 3 Days.

Color W Occupation _____

single, married, widow, widower Married

Birthplace FT. WORTH Texas

Last place of residence 917 Ky ST.

How long resident of this state 38-0-3

Husband's Name J. R. SANBORN

Father's Name WALTER COOKS

Country of Birth FT. Worth

Mother's Name CLEMENTINA COOKS

Country of Birth F. Worth Tex.

Physician Anderson

Cause of Death Cancer of Stomach

Ordered by _____

Paid on Account by:

Charge to _____

Mr. Sanborn

Sexton Reed

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FUNERAL of ROSE E. SMITH

Other Information:

Date of Funeral Oct. 2 1915 2:30 PM

Date of Death Sep 29 1915

Place of Death 1244 Tenn. ST.

Place of Funeral " "

Clergyman Hargett

Date of Burial Oct 2 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 2

Location of Grave _____

Age: 48 Years 4 Months 6 Days.

Color W Occupation _____

single, married, widow, widower Married

Birthplace Kansas

Last place of residence 1244 Tenn.

How long resident of this state 48-4-6

Husband's Name F. P. SMITH

Father's Name DAVID BROCK

Country of Birth Ind.

Mother's Name MCARDLE

Country of Birth Ills.

Physician CHAMBERS

Cause of Death Carcomia Sigmoid

Ordered by _____

Paid on Account by:

Charge to _____

F. P. Smith

Sexton Reed

T.D. FUNK
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FUNERAL of MAUD NETTIE ROBERMAN

Other Information:
823 Santa Fe

Date of Funeral Oct 5 shipped To DeSoto

Date of Death OCT 3 1915

Place of Death 833 Conn ST.

Place of Funeral DeSoto Kans

Clergyman _____

Date of Burial OCT 5 1915

Where Interred De Soto Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 45 Years 8 Months 19 Days.

Color W. Occupation Housewife

single, married, widow, widower Married

Birthplace Ohio

Last place of residence 833 Conn ST.

How long resident of this state 36 yrs

Husband's Name ARTHUR ROBERMAN

Father's Name _____

Country of Birth _____

Mother's Name ALICE MARTIN

Country of Birth _____

Physician Angevine

Cause of Death Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

A. ROBERMAN

Sexton _____

T.D. FUNK
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FUNERAL of MARY BENNETT

Other Information:

Date of Funeral Oct 6 1915 ship-in 9:45 P.M.

Date of Death Oct 4 1915 6:30 PM

Place of Death K.C. Mo.

Place of Funeral Catholic Church

Clergyman Father ECKERT

Date of Burial Oct 6 1915

Where Interred Franklin Cemetery

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 73 Years _____ Months _____ Days.

Color W Occupation Housewife

single, married, widow, widower Widow

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician W. H. Leonard Summit st K.C. Mo.

Cause of Death Nephritis chardic Permi hynation

Ordered by _____

Paid on Account by:

Charge to F. E. Mortenson

F E Mortenson

Sexton _____
2113 Jefferson

N Orden

K.C. Mo

T.D. FUNK
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FUNERAL of Mrs G. J(?) SMITH

Date of Funeral Oct 7 1915

Date of Death Oct 15 1915

Place of Death 515 1st St

Place of Funeral _____

Clergyman _____

Date of Burial Oct 30 1915

Where Interred Oak Hill

Grave or Lot No. 1309 Sec. 4

Location of Grave _____

Age: _____ Years _____ Months _____ Days.

Color _____ Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence 515 1st St

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death _____

Ordered by _____

Charge to Fred C. Bartlett (undertaker)

Sexton _____ LeCompton Kans.

Other Information:

Paid on Account by:

F. C. Bartlett

M. Order

T.D. FUNK
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FUNERAL of ALIVE WALKER

Date of Funeral OCT 20 1915 3:00

Date of Death OCT. 15 1915

Place of Death 515 Ind. ST.

Place of Funeral _____

Clergyman O. C. Brown

Date of Burial OCT. 20 1915

Where Interred Oak Hill

Grave or Lot No. 1309 Sec. 4

Location of Grave _____

Age: 4 Years 8 Months 2 Days.

Color Indian Occupation Home

single, married, widow, widower Single

Birthplace Lawrence Kans

Last place of residence 515 Ind. ST.

How long resident of this state 4-8-2

Husband's Name _____

Father's Name CLAUDIE WALKER

Country of Birth Okla.

Mother's Name BLANCH BURSON

Country of Birth UTAH

Physician Rudolph

Cause of Death Convulsions (as written)

Ordered by NICK SHOUCHUK

Charge to Mrs BLANCH LA ROSE (child)

Sexton _____
White Rock, UTAH

Other Information:

Telegrams To

UTAH

Paid on Account by:

Olin Burson

By Prud.

Bicycle

WELDON BURSON

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FUNERAL of JOHN WATKINS

Other Information:

Date of Funeral OCT. 24, 1915 3:00 PM

Date of Death OCT. 22 1915

Place of Death 923 VT. ST.

Place of Funeral " "

Clergyman HARGETT

Date of Burial OCT 24 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 74 Years 10 Months 29 Days.

Color W. Occupation Painter

single, married, widow, widower married

Birthplace England

Last place of residence 923 VT. ST.

How long resident of this state 51 yrs

Husband's Name _____

Father's Name JAMES WATKINS

Country of Birth England

Mother's Name ANNA LIGHT

Country of Birth Eng.

Physician OWENS

Cause of Death Arterial Scerosis

Ordered by _____

Paid on Account by:

Charge to _____

Mrs J. WATKINS

Sexton Reed

T.D. FUNK
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FUNERAL of ISAAC BABB

Other Information:

Date of Funeral Nov. 1 1915 2:00 P.M.

Lone Star To Chapel

Date of Death Oct 29 1915

Place of Death Bridge at Lone Star

Place of Funeral Funk Chapel

Clergyman Braden

Date of Burial Nov 1 1915

Where Interred Oak Hill

Grave or Lot No. 1269 Sec. 4

Location of Grave _____

Age: 59 Years _____ Months _____ Days.

Color W. Occupation Farmer

single, married, widow, widower Single

Birthplace Holt Co. Mo.

Last place of residence Lone Star

How long resident of this state 20 yrs

Husband's Name _____

Father's Name WILLIAM BABB

Country of Birth Tenn

Mother's Name Juni BEAN

Country of Birth Tenn.

Physician W.O. Nelson Lone Star

Cause of Death (Asphiated) accidental while excavating was suddenly buried with 5 feet of dirt

Ordered by _____

Paid on Account by:

Charge to _____

EARL BABB

Sexton Reed

Napier Mo.

T.D. FUNK
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FUNERAL of Infant of GEO COOPER

Other Information:

Date of Funeral NOV 5 1915 11:00PM

Date of Death NOV 4 1915

Place of Death 1123 Oregon ST

Place of Funeral no

Clergyman _____

Date of Burial NOV 5 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: ^{still} born Years _____ Months _____ Days.

Color W. Occupation _____

single, married, widow, widower S.

Birthplace Lawrence Kans.

Last place of residence 1123 Oregon

How long resident of this state _____

Husband's Name _____

Father's Name GEO O. COOPER

Country of Birth Kansas

Mother's Name ANNA BLANKENSHIP

Country of Birth Mo.

Physician Chambers

Cause of Death stillborn

Ordered by _____

Paid on Account by:

Charge to _____

Mr. Geo COOPER

Sexton _____

T.D. FUNK
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FUNERAL of Louis BEURMAN

Other Information:

Date of Funeral NOV 11 1915 10:00 AM

Date of Death NOV 9 1915

Place of Death 5 1/2 mi NW of Lawrence

Place of Funeral "

Clergyman Stauffer

Date of Burial NOV 11 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 77 Years 10 Months 3 Days.

Color W. Occupation Farmer

single, married, widow, widower Married

Birthplace Germany

Last place of residence 5 1/2 m. N. W.

How long resident of this state 47 yrs

Husband's Name _____

Father's Name Louis BEURMAN

Country of Birth Germany

Mother's Name _____

Country of Birth _____

Physician E. M. Owens

Cause of Death Arterio Sclerosis

Ordered by _____

Paid on Account by:

Charge to _____

L. A. BEURMAN

Sexton _____

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FUNERAL of WILLIAM H. OWENS

Date of Funeral Nov 14 1915 2:30 PM

Date of Death Nov 12 1915

Place of Death 719 Mich ST.

Place of Funeral " "

Clergyman Coffman

Date of Burial Nov 14 1915

Where Interred Oak Hill

Grave or Lot No. 20+21^{graves} Sec. 9 Row J
Location of Grave _____

Age: 64 Years 5 Months 22 Days.

Color W Occupation Plaster

single, married, widow, widower Married

Birthplace Michigan

Last place of residence 719 Mich ST.

How long resident of this state 40 yrs

Husband's Name _____

Father's Name NOAK (NOAH) OWENS

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death Cerebral Hemmorrhage

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

Soloist: Richardson

Paid on Account by:

Mrs Owens

T.D. FUNK
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FUNERAL of GEORGE W. STUART (shipped)

Other Information:

Date of Funeral NOV. 24 1915 2:00

Date of Death Nov 22 1915

Place of Death 814 Ala ST.

Place of Funeral " "

Clergyman Powell

Date of Burial NOV 24 1915

Where Interred Baldwin Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 68 Years 5 Months 11 Days.

Color W. Occupation Farmer Ret. 10 yrs

single, married, widow, widower Married

Birthplace Ohio

Last place of residence 814 Ala ST.

How long resident of this state 16 yrs

Husband's Name _____

Father's Name CHAS. STUART

Country of Birth Ohio

Mother's Name _____

Country of Birth _____

Physician D. Keith

Cause of Death Organic Heart Trouble

Ordered by _____

Paid on Account by:

Charge to _____

STELLA STUART

Sexton _____

T.D. FUNK
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FUNERAL of PHOEBE CALHOUN (shipped)

Other Information:

Date of Funeral Nov. shipped 24th Buick 25, 1915

Date of Death Nov 22 1915

Place of Death 4 mi N. W.

Place of Funeral " "

Clergyman O C Brown

Date of Burial Nov 25 1915

Where Interred Sabetha Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 80 Years 11 Months 24 Days.

Color W. Occupation Housewife

single, married, widow, widower widow

Birthplace N Carolina

Last place of residence 4 mi N W

How long resident of this state 10 yrs

Husband's Name _____

Father's Name JACOB SMITH

Country of Birth N. Carolina

Mother's Name SARAH SAPP

Country of Birth N. Carolina

Physician Chambers

Cause of Death History of a Serious Heart Trouble

Ordered by _____

Paid on Account by:

Charge to _____

Mr. CALHOUN

Sexton _____

FRAKER

T.D. FUNK
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FUNERAL of JOHN H. McELROY (shipped) Nov 27

Other Information:

Date of Funeral NOV 28, 1915

Date of Death NOV 26 1915 9:30 a.

Place of Death 1643 Ky ST.

Place of Funeral Butler Mo.

Clergyman _____

Date of Burial NOV 28 1915

Where Interred Butler Mo.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 71 Years _____ Months _____ Days.

Color W. Occupation Ret. Far. 15 yrs

single, married, widow, widower Widower

Birthplace Ills

Last place of residence 1643 Ky ST

How long resident of this state 3 yrs.

Husband's Name _____

Father's Name THOMAS

Country of Birth SCOTLAND

Mother's Name SARAH EVA ADKINS

Country of Birth —

Physician A. J. ANDERSON

Cause of Death Cancer of Liver

Ordered by _____

Paid on Account by:

Charge to _____

J. A. McELROY

Sexton _____

T.D. FUNK
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FUNERAL of BERNIA HECK

Date of Funeral NOV 27 1915

Date of Death NOV 25 1915

Place of Death 5 Mi N. W.

Place of Funeral No

Clergyman "

Date of Burial NOV 26 1915

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years _____ Months 1 Days.

Color W. Occupation Home

single, married, widow, widower S

Birthplace 5 Mi N. W.

Last place of residence "

How long resident of this state 1 day

Husband's Name _____

Father's Name FRED HECK

Country of Birth Kans

Mother's Name ANNA WULFKUHLE

Country of Birth Stull Kans.

Physician H. T. Jones

Cause of Death Lack of Vitality

Ordered by _____

Charge to _____

Sexton Read

Other Information:

(Date of Funeral +
date of Burial
given as Copied)

Paid on Account by:

Mr Heck

T.D. FUNK
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FUNERAL of GEORGE H KIMBALL

Date of Funeral Dec 5 1915 2:30PM

Date of Death Dec 3 1915

Place of Death 933 VT ST.

Place of Funeral " "

Clergyman Elder Kin

Date of Burial Dec 5 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 97 Years 6 Months 3 Days.

Color W. Occupation C maker

single, married, widow, widower Widower

Birthplace N. Hampshire

Last place of residence 933 VT. ST.

How long resident of this state 50 yrs

Husband's Name _____

Father's Name BENONI KIMBALL

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Chambers

Cause of Death Failure of Circulation

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

Soloist: Riggs

Paid on Account by:

R Melvin

T.D. FUNK
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FUNERAL of ELIZABETH A. LOVING

Date of Funeral Dec 5. 1915 4:00 PM

Date of Death Dec. 4 1915

Place of Death 1135 Oregon ST.

Place of Funeral " "

Clergyman _____

Date of Burial Dec. 5. 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 4

Location of Grave _____

Age: 59 Years 6 Months 4 Days.

Color W. Occupation at Home

single, married, widow, widower Widow

Birthplace Ohio

Last place of residence 1135 Oregon

How long resident of this state 45 yrs.

Husband's Name _____

Father's Name JOHN WILLIAMSON

Country of Birth X

Mother's Name AMERICAS LUCAS

Country of Birth X

Physician Anderson + Carl Phillips

Cause of Death Cancer of STomach

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Clergyman: _____

Friend Minister

Lot 14 Sec 4

Paid on Account by:

J.H. Loving

T.D. FUNK
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FUNERAL of CHARLES E. HILL

Date of Funeral Dec 6. 1915 10:00 a.m.

Date of Death Dec 3 1915

Place of Death Social S Hall. Hosp.

Place of Funeral 401 Maple

Clergyman _____

Date of Burial Dec 6 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 54 Years 8 Months 10 Days.

Color W. Occupation Tool Sharpener

single, married, widow, widower Married

Birthplace Ohio

Last place of residence 401 Maple St.

How long resident of this state 12 yrs.

Husband's Name _____

Father's Name E. N. Hill

Country of Birth Ohio

Mother's Name Hannah KIDD

Country of Birth Ohio

Physician H T Jones

Cause of Death Suicide by Gun Shot

Ordered by _____

Charge to _____

Sexton _____

Other Information:

clergyman: Rev Haworth

Paid on Account by:

Mrs. Hill

T.D. FUNK
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FUNERAL of DORA WOODS + GOLDIE I WOODS

Date of Funeral Dec 8. 1915 2:00 M.

Other Information:

(Mrs Wood + Child)

Date of Death Dec 5 + 7 1915

Place of Death Social S Hosp + 820 Conn. ST.

Place of Funeral A. M. E. Church

Clergyman Henderson

Date of Burial Dec 8 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 37 Years 5 Months 1 Days.

Color Col. Occupation at home

single, married, widow, widower M + S

Birthplace Lawrence Kans + Concordia Kans

Last place of residence 820 Conn. ST.

How long resident of this state _____

Husband's Name B. HENRY WOODS

Father's Name J. H. WOODY

Country of Birth Lawrence Kans.

Mother's Name _____

Country of Birth _____

Physician Harvey + H. T. Jones

Cause of Death accidental Burned 820 Conn. ST.
leaky Gasoline stove exploded

Ordered by _____

Paid on Account by:

Charge to _____

WOODY

Sexton _____

Douglas Co.

Brown

Urtle Lamb (?)

Mrs WOOD

T.D. FUNK
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FUNERAL of JANE P. FLINN

Date of Funeral Dec 8 1915 2:30 PM

Date of Death Dec 6 1915

Place of Death 817 Ind.

Place of Funeral " "

Clergyman Episcopal

Date of Burial Dec 8, 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 80 Years 10 Months 15 Days.

Color W. Occupation at Home

single, married, widow, widower Widow

Birthplace Phil. Penn.

Last place of residence 817 Ind.

How long resident of this state 47 yrs.

Husband's Name _____

Father's Name SAMUEL PERROTT

Country of Birth London Eng.

Mother's Name SARAH DEACON

Country of Birth London Eng.

Physician Anderson

Cause of Death Senility + Acute Bronchial Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

Miss Ann Flinn

Sexton Reed

T.D. FUNK
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FUNERAL of MARY C. ANDERSON

Other Information:

Date of Funeral Dec 14. 1915 1:30 PM

Date of Death 1040 Conn St. (as given)

Place of Death Dec 13 1915 12:30a.

Place of Funeral 1040 Conn St.

Clergyman -

Date of Burial Dec 15 1915

Where Interred Vinland Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 78 Years 7 Months 27 Days.

Color W. Occupation House wife

single, married, widow, widower Widow

Birthplace Sweden

Last place of residence 1040 Conn. St.

How long resident of this state 47 yrs.

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Bechtold

Cause of Death Sclerosis of Liver

Ordered by _____

Paid on Account by:

Charge to _____

ALA ANDERSON

Sexton _____

De Forest

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of HANNAH STEINBERGER

Other Information:

Date of Funeral Shipped To ST. Louis Mo. Dec 14. 1915 1:30 P.M.

Date of Death Dec 13 1915 5:00 PM

Place of Death 726 La. ST.

Place of Funeral " "

Clergyman BACKUS

Date of Burial Dec 15 1915

Where Interred ST. Louis Mo.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 76 Years 9 Months 28 Days.

Color W Occupation at HOME

single, married, widow, widower widow

Birthplace BAVERIA

Last place of residence 726 La ST

How long resident of this state 1 mo.

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician McConnell

Cause of Death acute Indigestion

Ordered by _____

Paid on Account by:

Charge to _____

SAL MARKS

Sexton De Forest

De Forest

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of FRANCIS METTNER

Other Information:

Date of Funeral Dec 17 1915

Date of Death Dec 15 1915 11:30 P

Place of Death Rudolph Hosp.

Place of Funeral 1109 N H ST.

Clergyman Stauffer

Date of Burial X

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 7

Location of Grave #68

Age: 72 Years 3 Months 12 Days.

Color W. Occupation Photographer 15 Retired

single, married, widow, widower Widower

Birthplace Germany

Last place of residence Lawrence Kans.

How long resident of this state 36 yrs

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death Arteria Sclerosis

Ordered by _____

Paid on Account by:

Charge to _____

Mr. C. Mettner

Sexton Reed

T.D. FUNK
MCRTUARY BCOCK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Mrs - A EDDY (ship in)

Other Information:

Date of Funeral Dec 16 1915 3:50

Date of Death Dec 10 1915

Place of Death California

Place of Funeral Oak Hill

Clergyman Brown

Date of Burial Dec 16 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 79 Years 5 Months 13 Days.

Color W Occupation _____

single, married, widow, widower Married

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician D Crise

Cause of Death Influnza

Ordered by _____

Paid on Account by:

Charge to _____

Miss Flaude Johnson

Sexton _____

T.D. FUNK
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FUNERAL of IDA E. STEVENS

Other Information:

Date of Funeral Dec 19 1915 2:30 PM

Date of Death Dec 12

Place of Death Long Beach Cal.

Place of Funeral Luthern Church

Clergyman Stauffer

Date of Burial Dec 19 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 52 Years _____ Months _____ Days.

Color W. Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician A. F. Hammonds Calif

Cause of Death Uremia

Ordered by _____

Paid on Account by:

Charge to _____

Thad Stevens

Sexton _____

T.D. FUNK
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FUNERAL of GRACE E. PORTER Shipped Santa Fe 11:09 PM

Date of Funeral Dec 19 1915 4:30 PM

Other Information:

Date of Death Dec 17 1915 11:30

Place of Death Simmons Hosp

Place of Funeral 925 Ind. St.

Clergyman Brown

Date of Burial Dec 20 1915

Where Interred Quincy Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 21 Years _____ Months _____ Days.

Color W. Occupation Housewife

single, married, widow, widower Married

Birthplace Kans

Last place of residence _____

How long resident of this state _____

Husband's Name J PORTER

Father's Name THOMAS E. JONES

Country of Birth Ills

Mother's Name MAGGIE WORD (WARD)

Country of Birth Kans

Physician Carl Phillips

Cause of Death Cerebral Abscess

Ordered by _____

Paid on Account by:

Charge to E. W. PORTER

E. W. PORTER

Sexton _____

T.D. FUNK
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FUNERAL of Mr + Mrs. SAMUEL HYETT

Other Information:

Date of Funeral Dec 18. 1915 2:00 P.M.

Date of Death Dec 17-18 1915

Place of Death Lecompton Kans.

Place of Funeral _____

Clergyman _____

Date of Burial _____

Where Interred _____

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years _____ Months _____ Days.

Color _____ Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to F.C. Bartlett

Fred Bartlett

Sexton Lecompton Kans.

T.D. FUNK
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FUNERAL of HAIRSHUL KNIGHT shipped to K.C.K. Other Information:

Date of Funeral Dec 19 1915 U.P. 3:50 PM

Date of Death Dec 18 1915 9:45 P

Place of Death Simmons Hosp

Place of Funeral shipped

Clergyman —

Date of Burial —

Where Interred K.C.

Grave or Lot No. — Sec. —

Location of Grave —

Age: 21 Years — Months — Days.

Color W. Occupation Horse Trainer (as written)

single, married, widow, widower Single

Birthplace Litchfield Ky.

Last place of residence 825 Miami St. K.C. Kans.

How long resident of this state 1 day

Husband's Name —

Father's Name —

Country of Birth —

Mother's Name —

Country of Birth —

Physician Keith

Cause of Death Gunshot

Ordered by —

Paid on Account by:

Charge to O.P. Knight 825 Miami Ave

O.P. Knight

Sexton — K.C. Kans.

A Traub

1415 Guinotte
K.C. Mo.

T.D. FUNK
MCRTUARY BOCK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of KATHERINE LANDEN

Other Information:

Date of Funeral Dec 22 1915 2:30 PM

Date of Death Dec 20 1915

Place of Death 1131 N.J. ST.

Place of Funeral " "

Clergyman Brown (O.C. Brown)

Date of Burial Dec 22 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 75 Years 9 Months 27 Days.

Color W. Occupation Home

single, married, widow, widower Married

Birthplace Germany

Last place of residence _____

How long resident of this state _____

Husband's Name JACOB LANDEN

Father's Name Germany

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Chambers

Cause of Death Bronchitis

Ordered by _____

Paid on Account by:

Charge to _____

Mr. Landen

Sexton Reed

T.D. FUNK
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FUNERAL of LINCOLN COOK

Other Information:

Date of Funeral shipped To Leocompton Dec 26 1915 Santa Fe 9:20

Date of Death Dec 24 1915

Place of Death Douglas Co. Home

Removing Remains:

Place of Funeral Leocompton Kans.

Poor Farm To Chapel

Clergyman _____

Date of Burial Dec 26 1915

Where Interred Leocompton Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 55 Years 11 Months 8 Days.

Color W. Occupation _____

single, married, widow, widower Single

Birthplace Leocompton Kans.

Last place of residence Douglas Co. P-Farm

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician R.F.D Phillips

Cause of Death Arenia Anemia

Ordered by _____

Paid on Account by:

Charge to _____

Sexton _____

T.D. FUNK
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FUNERAL of MARGARITE NEWMAN

Other Information:

Date of Funeral Dec 26 1915 2:30 P.M.

Date of Death Dec 24 1915 10:P.

Place of Death 1031 N.J. ST.

Place of Funeral A.M. E. Church

Clergyman Henderson

Date of Burial Dec 26 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 70 Years _____ Months _____ Days.

Color Black Occupation at Home

single, married, widow, widower Widow

Birthplace Jackson Co. Mo.

Last place of residence 1031 N.J. ST.

How long resident of this state 50 yrs.

Husband's Name _____

Father's Name EVANS

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Kenner

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Mrs C. Richardson

Sexton _____

T.D. FUNK
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FUNERAL of EARNEST SIMPSON

Other Information:

Date of Funeral Jan 2 1916 11:00 A.M.

Date of Death Dec 31 1915

Place of Death 928 N J. ST.

Place of Funeral no

Clergyman "

Date of Burial Jan 1 1916 (as given)

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 11

Location of Grave _____

Age: _____ Years 4 Months 11 Days.

Color B Occupation _____

single, married, widow, widower S

Birthplace Lawrence Kans.

Last place of residence 901 N J. ST.

How long resident of this state 4-11

Husband's Name _____

Father's Name JAMES SIMPSON

Country of Birth Lawrence Kans

Mother's Name MAMIE BLUNT

Country of Birth Lawrence Kans

Physician Rudolph

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Mr. Simpson

Sexton _____

T.D. FUNK
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FUNERAL of FILICIANA GUTIERREZ

Other Information:

Date of Funeral Jan 9 1916

Date of Death Dec 19 1915

Place of Death 746 Del. ST.

Place of Funeral X

Clergyman _____

Date of Burial _____

Where Interred Catholic Cemetary

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 28 Years _____ Months _____ Days.

Color W. Mexican Occupation _____

single, married, widow, widower _____

Birthplace LEON Old Mexico

Last place of residence _____

How long resident of this state 5 yrs

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician HT Jones

Cause of Death Gunshot wound thru Heart

Ordered by _____

Paid on Account by:

Charge to _____

Sexton _____

T.D. FUNK
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FUNERAL of HENRY B. ANDERSON

Other Information:

Date of Funeral Jan 2 1916 2:30 PM.

Date of Death Dec 31 1915

Place of Death K.C. Mo.

Place of Funeral 824 Tenn ST.

Clergyman Brown

Date of Burial Jan 2 1915 (1916)

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 76 Years _____ Months _____ Days.

Color W. Occupation _____

single, married, widow, widower widower

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth Mrs A A. Biglow Father

Mother's Name _____

Country of Birth _____

Physician Fred Berry

Cause of Death arterial Sclerosis

Ordered by _____

Paid on Account by:

Charge to _____

Jack Anderson

Sexton _____

T.D. FUNK
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FUNERAL of ROSANA GRINTER

Date of Funeral Jan 6 1916 shipped from Perry

Other Information:
U.P.R.R. 8:30 a.m.

Date of Death Jan 2 1916

Place of Death Perry Kans

Place of Funeral Muncie Kans.

Clergyman _____

Date of Burial Jan 5 1915 (1916)

Where Interred Grinten Cemetery

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 83 Years _____ Months _____ Days.

Color W. Occupation at Home

single, married, widow, widower Widow

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Dr Zimmerman

Cause of Death Brancho Pneumonia

Ordered by BENjamin E. Wilson

Paid on Account by:

Charge to V. C. Rains Perry Kans. adm
Williamstown Kans

V C Raines

Sexton _____

T.D. FUNK
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FUNERAL of JOSEPH REESE MILLER

Other Information:

Date of Funeral Jan 5 1916 10:00 a.m.

Date of Death Jan 3 1916

Place of Death 1921 VT ST.

Place of Funeral Dunkard Church

Clergyman _____

Date of Burial Jan 5 1915

Where Interred Oak Hill

Grave or Lot No. 183 Sec. 8

Location of Grave _____

Age: 72 Years 3 Months 16 Days.

Color W. Occupation Ret. Farmer

single, married, widow, widower Married

Birthplace Washington Co., Pa.

Last place of residence 1921 VT. ST.

How long resident of this state 38-10 mo.

Husband's Name _____

Father's Name JOHN MILLER

Country of Birth Washington Co. Pa.

Mother's Name NANCY REESE

Country of Birth Washington Co. Pa.

Physician E. R. Keith

Cause of Death Cerebral Hemmorrhage

Ordered by _____

Paid on Account by:

Charge to _____

Mrs STOUT

Sexton _____

T.D. FUNK
MCRTUARY BCGK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of LIZZIE FERGUSON

Date of Funeral Jan 6 1916 + 9 2:30 P.M.

Other Information:

Date of Death Jan 4 1916

Place of Death 846 1/2 N-J ST.

Place of Funeral Funk Chapel

Clergyman _____

Date of Burial Jan 6 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 11

Location of Grave _____

Age: 48 Years _____ Months _____ Days.

Color B Occupation at Home

single, married, widow, widower Single

Birthplace Lawrence Kans.

Last place of residence 846 1/2 N-J ST.

How long resident of this state 48 yrs

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death Influenza

Ordered by _____

Paid on Account by:

Charge to _____

Metropolitan

Sexton _____

+ Tom Ferguson + Son.

T.D. FUNK
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FUNERAL of Baby SMITH

Date of Funeral Jan. 6 1916 Santa Fe #1

Date of Death Jan 5 1916

Place of Death K.C. Mo.

Place of Funeral " "

Clergyman NO

Date of Burial Jan 6 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years _____ Months 17 Days.

Color W. Occupation Home

single, married, widow, widower S.

Birthplace K.C. Mo.

Last place of residence _____

How long resident of this state _____

Husband's Name C. B. ALLEN

Father's Name _____

Country of Birth England

Mother's Name _____

Country of Birth England

Physician Neff 900 Rialto Bldg

Cause of Death (?) Low genital weakness

Ordered by _____

Charge to Hugh Blair (Blair)

Sexton Boyd

Other Information:
1208 P.M.

Paid on Account by:

H. Blair (Blain)

T.D. FUNK
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FUNERAL of EMLEY F. ALLEN

Date of Funeral Jan 9 1916

Date of Death Jan 7 1916

Place of Death 922 Pa. ST.

Place of Funeral Engelical Church (as given)

Clergyman _____

Date of Burial Jan 9 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 76 Years 8 Months 27 Days.

Color W. Occupation Home

single, married, widow, widower Married

Birthplace England

Last place of residence 922 Pa. ST.

How long resident of this state 50 yrs.

Husband's Name C. B. ALLEN

Father's Name _____

Country of Birth England

Mother's Name Tiplady

Country of Birth England

Physician Rudolph

Cause of Death Cerebral Hemorrhage

Ordered by _____

Charge to _____

Sexton Reed

Other Information:

name was given as
Emely in index

Paid on Account by:

Leona ALLEN

T.D. FUNK
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FUNERAL of ELLEN RUSSELL ROWLEY

Other Information:

Date of Funeral Jan 10 1916 4:00 P.M.

Date of Death Jan 9 1916 8 P.M.

Place of Death 1139 N J ST.

Place of Funeral Chapel Funks

Clergyman Thompson

Date of Burial Jan 10 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 74 Years 4 Months 26 Days.

Color _____ Occupation _____

single, married, widow, widower _____

Birthplace Farmersville N.Y.

Last place of residence 1139 N J

How long resident of this state 30 yrs

Husband's Name _____

Father's Name Earnest Russell

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Anderson

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Mrs Winifred

Sexton _____

R. Hamilton

San Antonio Tex.

527 Moore Bldg

T.D. FUNK
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FUNERAL of EDITH GULLEY

Other Information:

Date of Funeral Jan 11 1916 3:00 PM

Date of Death Jan 10 1916

Place of Death N 3rd ST

Place of Funeral " "

Clergyman Holeyfield

Date of Burial Jan 11 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 60 Years _____ Months _____ Days.

Color W Occupation at Home

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Pul. Tuberculosis

Cause of Death Rudolph

(written as given)

Ordered by _____

Paid on Account by:

Charge to _____

TOBE Gully

Sexton _____

JESSIE "

T.D. FUNK
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FUNERAL of CAROLINE BALDWIN

Other Information:

Date of Funeral Jan 11 1916 10 00 am.

Date of Death Jan 10 1916

Place of Death 4 mi N.W.

Place of Funeral " "

Clergyman O. C. Brown

Date of Burial Jan 11 1915 (1916)

Where Interred _____

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 96 Years _____ Months _____ Days.

Color W. Occupation at Home

single, married, widow, widower Widow

Birthplace N York

Last place of residence 4 mi N.W.

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Owens

Cause of Death Seniality

Ordered by _____

Paid on Account by:

Charge to _____

E. BALDWIN

Sexton _____

T.D. FUNK
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FUNERAL of HATTIE B. REID

Date of Funeral Jan 11. 1915* #5 Santa Fe

Date of Death Jan 9 4 P.M.

Place of Death Muskogee Okla.

Place of Funeral _____

Clergyman No.

Date of Burial _____

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 69 Years _____ Months _____ Days.

Color W. Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician J Hutchings White

Cause of Death La Gripp

Ordered by _____

Paid on Account by:

Charge to _____

Reid

Sexton _____

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FUNERAL of ROSE MAXINE LASTER

Date of Funeral Jan 14 1915*

Date of Death Jan 13 1916

Place of Death 772 LOCUST ST.

Place of Funeral No

Clergyman _____

Date of Burial Jan 14 1916

Where Interred McLouth Kans.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 1 Years 7 Months 13 Days.

Color W Occupation Home

single, married, widow, widower Single

Birthplace K.C. Kans.

Last place of residence 772 Locust St.

How long resident of this state 1-7-13

Husband's Name _____

Father's Name Louis LASTER

Country of Birth McLouth Kans

Mother's Name DOLLIE OTTINGER

Country of Birth McLouth Kans

Physician R. E. Barnes

Cause of Death (Bronchitis) Volvulus

Ordered by _____

Charge to _____

Sexton _____

Other Information:
year should be 1916

Paid on Account by:

Saster (Laster)

T.D. FUNK
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FUNERAL of RUTH A. ADAMY

Date of Funeral Jan 23, 1915*

Other Information:
date should be *1916

Date of Death Jan 21 1916

Place of Death IDOF Home Manhattan Kans.

Place of Funeral Chapel Funk's

Clergyman _____

Date of Burial Jan 23 1916

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 79 Years _____ Months _____ Days.

Color W. Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician C. Haffitt

Cause of Death Pneumonia

Ordered by _____

Paid on Account by:

Charge to Geo. Loit

Mrs. Bride

Sexton _____

Jenny Pett Jones (?)

GEO. "

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Infant of RUSSELL LEFFERD

Other Information:

Date of Funeral Jan 2 1916

Date of Death _____

Place of Death 705 Conn. ST.

Place of Funeral " "

Clergyman _____

Date of Burial _____

Where Interred Maple Grove

Grave or Lot No. 29 Sec. 5

Location of Grave _____

Age: still ~~born~~ Years _____ Months _____ Days.

Color W. Occupation _____

single, married, widow, widower S.

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name RUSSELL LEFFORD

Country of Birth _____

Mother's Name BESSIE CLARK

Country of Birth _____

Physician H. T. Jones

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Mr. LEFFORD

Sexton _____

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FUNERAL of ANGIE E. REYER

Other Information:

Date of Funeral Jan 26, 1916 2:30

Date of Death Jan 23 1916

Place of Death 742 Conn ST.

Place of Funeral " "

Clergyman Hargett

Date of Burial Jan 26 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 8
Location of Grave _____

Age: 47 Years 6 Months 23 Days.

Color W. Occupation Home

single, married, widow, widower Married

Birthplace Lawrence Kans.

Last place of residence 742 Conn ST.

How long resident of this state 47-6-23

Husband's Name HENRY REYER

Father's Name HOMER WINCHELL

Country of Birth -

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death Cancer of Breast

Ordered by _____

Paid on Account by:

Charge to _____

H Reyer

Sexton _____

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FUNERAL of OTTO BRUCKMILLER

Date of Funeral Jan 30. 1916 10:30

Other Information:

index reads BRUCHMILLER

Date of Death Jan 28 1916

Place of Death 8 mi north of Lawrence

Place of Funeral " "

Clergyman STauffer

Date of Burial 1-30-15

*should be 16

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 72 Years 1 Months 11 Days.

Color W. Occupation Farmer

single, married, widow, widower Widower

Birthplace Germany

Last place of residence 8 mi North

How long resident of this state 46 yrs

Husband's Name _____

Father's Name CARL BRUCKMILLER

Country of Birth Germany

Mother's Name _____

Country of Birth _____

Physician Chambers

Cause of Death Bronchitis

Ordered by _____

Paid on Account by:

Charge to _____

LIZZIE BRUCHMILLER

Sexton _____

OR BRUCKMILLER

T.D. FUNK
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FUNERAL of HENRY NEWBY

Other Information:

Date of Funeral Feb 3 1916 2:30 PM

Date of Death Feb 1 1916 10:00 a.

Place of Death 1105 N.J. ST.

Place of Funeral Christian Church

Clergyman Braden

Date of Burial Feb 3 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 89 Years 1 Months 4 Days.

Color W. Occupation Ret. Farmer

single, married, widow, widower Widower

Birthplace JACKSON Co. Ind.

Last place of residence 1105 N.J. ST.

How long resident of this state 37 yrs

Husband's Name _____

Father's Name JOHN NEWBY

Country of Birth N. Carolina

Mother's Name REBECA LITTLER

Country of Birth No. Carolina

Physician Simmons

Cause of Death Nephritis

Ordered by _____

Paid on Account by:

Charge to _____

Rebecca Newby

Sexton _____

T.D. FUNK
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FUNERAL of NETTIE LAVO

Other Information:

Date of Funeral Feb 10 1916 10:30 a.m.

Date of Death Feb 7 1916 8:30 a.

Place of Death 845 N Y ST.

Place of Funeral Eudora Lutheran Church

Clergyman _____

Date of Burial Feb 10 1916

Where Interred Eudora Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 76 Years 3 Months 20 Days.

Color W. Occupation at Home

single, married, widow, widower Widow

Birthplace Germany

Last place of residence 845 N Y ST.

How long resident of this state 2 days

Husband's Name _____

Father's Name WILLIAM DRESCHER(?)

Country of Birth Germany

Mother's Name _____

Country of Birth _____

Physician H. T. Jones

Cause of Death Fatty degeneration of Heart

Ordered by _____

Paid on Account by:

Charge to _____

Adolph Lotz adx

Sexton _____

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FUNERAL of MARY EVANS

Other Information:

Date of Funeral Feb 11 1916 10:00 a.m.

Date of Death Feb 9 1916

Place of Death 4 mi west

Place of Funeral " "

Clergyman Testerman

Date of Burial Feb.

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 68 Years 10 Months 13 Days.

Color W. Occupation Home

single, married, widow, widower Widow

Birthplace Ills

Last place of residence 4 mi west

How long resident of this state _____

Husband's Name _____

Father's Name ANDERSON

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Anderson

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Mr. Evans

Sexton _____

T.D. FUNK
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FUNERAL of ELIZABETH SCHNACK

Other Information:

Date of Funeral Feb 15 1916 2:00 PM

Date of Death Feb 12 1916 7:30 PM.

Place of Death 1944 Barker Ave

Place of Funeral " "

Clergyman Stauffer

Date of Burial Feb 15 1916

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 68 Years 5 Months 15 Days.

Color W Occupation Home

single, married, widow, widower Married

Birthplace Penn

Last place of residence 1944 Barker Ave.

How long resident of this state 34 yrs

Husband's Name Eli SCHNACK

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician RDF Phillips

Cause of Death Diabetes

Ordered by _____

Paid on Account by:

Charge to _____

J W. MORROW

Sexton _____

T.D. FUNK
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FUNERAL of RAYMOND DEWITT STILES

Other Information:

Date of Funeral Feb 16 1916 2:30 P.M.

Date of Death Feb 15 1916

Place of Death 1215 Ky ST.

Place of Funeral No

Clergyman O. C. Brown

Date of Burial Feb 16 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years _____ Months 4 Days.

Color W. Occupation _____

single, married, widow, widower Single.

Birthplace 1215 Ky ST.

Last place of residence " "

How long resident of this state 4 days

Husband's Name DeWITT STILES (as given)

Father's Name _____

Country of Birth Lawrence Kans.

Mother's Name ELIZABETH SIMMERMACKER

Country of Birth ARK.

Physician Chambers

Cause of Death Premature Birth

Ordered by _____

Paid on Account by:

Charge to _____

D. W. Stiles

Sexton _____

T.D. FUNK
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FUNERAL of Infant of ARTHUR SKEET

Other Information:

Date of Funeral Feb 16 1916 2:30 P

Date of Death Feb 16 1916

Place of Death Simmons Hosp

Place of Funeral NO

Clergyman "

Date of Burial Feb 16 1916

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

(?) Brookmetler Lot

Age: ^{still}~~born~~ Years _____ Months _____ Days.

Color W. Occupation Home

single, married, widow, widower Single

Birthplace Simmons Hosp

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name ARTHUR SKEET

Country of Birth Lawrence Kansas

Mother's Name GERTRUDE BROOKMITLER

Country of Birth Lawrence Kans.

Physician Chambers

Cause of Death Premature Birth

Ordered by _____

Paid on Account by:

Charge to _____

A. SKEET'S

Sexton _____

T.D. FUNK
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FUNERAL of RACHEL ELLEN HAGUE

Other Information:
6:43 a.m. Santa Fe

Date of Funeral Shipped To Des Moines Iowa Feb 19 1916

Date of Death Feb 18 1916

Place of Death 5 mi S.E.

Place of Funeral Des Moines Iowa

Clergyman _____

Date of Burial _____

Where Interred Des Moines Iowa

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 63 Years 6 Months 12 Days.

Color W. Occupation Home

single, married, widow, widower Widow

Birthplace IOWA

Last place of residence 5 mi S E

How long resident of this state 2 yrs 9 mo.

Husband's Name _____

Father's Name T. C. Lewis

Country of Birth Ind.

Mother's Name Viola SHIRER

Country of Birth Kans.

Physician C. Phillips

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to P.N. SHIRER 5 mi S.E.

T N SHIRAR

Sexton _____

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FUNERAL of JOSHUA WALLACE SPENCER

Other Information:

Date of Funeral Feb. 20. 1916 2:00PM

Date of Death Feb 18 1916 5:00PM

Place of Death 1046 Ky ST.

Place of Funeral " "

Clergyman Holeyfield

Date of Burial Feb 20 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 53 Years _____ Months _____ Days.

Color W Occupation Ret. Grocer

single, married, widow, widower married

Birthplace Kansas

Last place of residence 1046 Ky ST.

How long resident of this state 53 yrs

Husband's Name _____

Father's Name H. K. Spencer

Country of Birth Ky ST

Mother's Name MARTHA HOLMES

Country of Birth Ind.

Physician Anderson

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Mr. Spencer

Sexton Reed

T.D. FUNK
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FUNERAL of SARAH MURPHY

Date of Funeral Feb 22 2:30 a.m.

Date of Death Feb 20 1916 4:30 a.

Place of Death 1146 Del ST.

Place of Funeral " "

Clergyman HARGETT

Date of Burial Feb 22 1916

Where Interred Oak Hill

Grave or Lot No. 107 Sec.

Location of Grave 5 1/2 Sec 7

Age: 83 Years Months Days.

Color W Occupation Home

single, married, widow, widower widow

Birthplace Penn

Last place of residence 1146 Del

How long resident of this state 18

Husband's Name

Father's Name C. Opdyle

Country of Birth not known

Mother's Name "

Country of Birth "

Physician Anderson

Cause of Death Bronchial Pneumonia

Ordered by

Charge to

Sexton Reed

Other Information:

Soloist:
Miss Smith

Paid on Account by:

J. M. Saunders

T.D. FUNK
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FUNERAL of SARAH ELIZABETH McCARTY

Other Information:

Date of Funeral Shipped To West Alexander, Pa.

Date of Death Feb 19 1916 3:30 P

Place of Death 2 mi S.W. of Lawrence

Place of Funeral Penn. West Alexander

Clergyman No

Date of Burial _____

Where Interred West Alexander Pa.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 61 Years 8 Months 17 Days.

Color W. Occupation Home

single, married, widow, widower married

Birthplace Iowa

Last place of residence 2 mi S. W.

How long resident of this state 25 yrs

Husband's Name MARLON McCARTY

Father's Name SAMUEL FIREBAUGH (FIREFAUGH)

Country of Birth Ohio

Mother's Name A. TRUE

Country of Birth Ohio

Physician Gardner

Cause of Death Carcinoma of the Rectum

Ordered by _____

Paid on Account by:

Charge to _____

MARLON McCARTY

Sexton _____

T.D. FUNK
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FUNERAL of PETER RALSTON

Date of Funeral Feb 25, 1916 10:00 AM.

Other Information:

Date of Death Feb 23, 1916

Place of Death 4 mi South

Place of Funeral Fairview Church

Clergyman From Vinland P. JUST (?)

Date of Burial Feb 25 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 79 Years 9 Months 8 Days.

Color W. Occupation Farmer

single, married, widow, widower Single

Birthplace SCOTLAND

Last place of residence 4 mi South

How long resident of this state 51 yrs

Husband's Name _____

Father's Name PETER RALSTON

Country of Birth Scotland

Mother's Name BROWN

Country of Birth Scotland

Physician Anderson

Cause of Death Bronchial Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

C. E. RALSTON

Sexton _____

T.D. FUNK
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FUNERAL of ELIZABETH F. HAYSLETT

Other Information:

Date of Funeral Feb 27 1916 2 00 P.M.

Date of Death Feb 25 1916 5 00 P

Place of Death 916 Tenn ST.

Place of Funeral " "

Clergyman Backus

Date of Burial Feb 27 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 71 Years 8 Months 25 Days.

Color W Occupation Home

single, married, widow, widower Widow

Birthplace Wisconsin

Last place of residence 916 Tenn. ST.

How long resident of this state 60 yrs

Husband's Name _____

Father's Name JOHN DYER

Country of Birth IRELAND

Mother's Name BRIGET DOYLE

Country of Birth Ireland

Physician Keith

Cause of Death Vomiting

Ordered by _____

Paid on Account by:

Charge to _____

R. Hayslett

Sexton _____

T.D. FUNK
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FUNERAL of LA VERNE WENDAL LYONS

Other Information:

Date of Funeral MARCH 1, 1916 11:00 AM.

Date of Death March 1 1916

Place of Death 307 E. 8th ST.

Place of Funeral "

Clergyman O. C. BROWN

Date of Burial March 1 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years _____ Months 1 Days.

Color W Occupation _____

single, married, widow, widower Single

Birthplace Lawrence, Kans.

Last place of residence 307 E. 8th ST.

How long resident of this state _____

Husband's Name _____

Father's Name NEWELL LYONS

Country of Birth Ohio

Mother's Name RANES JOHNSON

Country of Birth Kans.

Physician H T JONES

Cause of Death Innstitution

Ordered by _____

Paid on Account by:

Charge to _____

Glee Spuis (?)

Sexton _____

T.D. FUNK
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FUNERAL of JOSIAH M. TURNER

Other Information:

Date of Funeral March 5 1916 2:PM.

Date of Death March 4 1916

Place of Death 1137 Ky ST.

Place of Funeral Masonic Temple

Clergyman O.C. Brown

Date of Burial March 5, 1916

Where Interred Oak Hill

Grave or Lot No. 40 Sec. 5

Location of Grave _____

Age: 77 Years 10 Months 28 Days.

Color W. Occupation Bookkeeper

single, married, widow, widower married

Birthplace Clinton Co., Ohio

Last place of residence 1137 Ky. ST.

How long resident of this state 4.3 yrs

Husband's Name _____

Father's Name GEO H TURNER

Country of Birth X

Mother's Name HESTER MCKIBBER (MCKIBBEN)

Country of Birth X

Physician Anderson

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Mr TURNER

Sexton Reed

T.D. FUNK
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FUNERAL of ELIZABETH C. GILBERT

Date of Funeral March 13, 1916 2:30PM

Date of Death March 11, 1916

Place of Death 1121 R. I. ST.

Place of Funeral Congregation Church

Clergyman BOLTZ of Wichita

Date of Burial Mch. 13 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 94 Years _____ Months 5 Days.

Color W Occupation Home

single, married, widow, widower Widow

Birthplace England

Last place of residence 1121 R. I. ST.

How long resident of this state 61 yrs

Husband's Name _____

Father's Name Wm SMITH

Country of Birth England

Mother's Name _____

Country of Birth _____

Physician Chambers

Cause of Death Heart Failure

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Clergyman: BOLTZ + Edwards

Paid on Account by:

E. R. LEARNED

T.D. FUNK
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FUNERAL of EMELINE THORNTON

Other Information:

Date of Funeral March 14, 1916 10:00 a.m.

Date of Death Mch. 11, 1916

Place of Death 913 1/2 Mass ST.

Place of Funeral Funks Chapel

Clergyman _____

Date of Burial Mch 14 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 74 Years 2 Months 8 Days.

Color W Occupation Home

single, married, widow, widower Widow

Birthplace Indiana

Last place of residence 913 1/2 Mass. ST.

How long resident of this state 25 yrs.

Husband's Name _____

Father's Name W^m INNES

Country of Birth England

Mother's Name WILKEY

Country of Birth Indiana

Physician H T Jones

Cause of Death Bronchial Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

JESS THORNTON

Sexton _____

T.D. FUNK
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FUNERAL of FLOYD E. KARNES

Date of Funeral Mch 14 1916 2:30PM

Date of Death Mch 12 1916

Place of Death 509 LINCOLN

Place of Funeral " "

Clergyman Testerman

Date of Burial Mch 14 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 25 Years 7 Months 3 Days.

Color W. Occupation Painter

single, married, widow, widower Single

Birthplace Ills.

Last place of residence 509 Lincoln ST.

How long resident of this state 10 yrs

Husband's Name _____

Father's Name JAMES KARNES (KARNES)

Country of Birth Ohio

Mother's Name EMMA FOX

Country of Birth Ills.

Physician Rudolph

Cause of Death Tuberculosis

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Embalming 15.00

Casket No:

Chgs S G Crepe

outside case 50.00

5.00

Burial Robe:

Shirt 1.00 Tie .25 Collar 15

Hearse 10.00

Coaches:

Hunsinger 2

Will Lescher Wagonette 11.00

opening grave 5.00

Total Bill 97.40

Paid on Account by:

Mrs Karns

Emma Karnes

T.D. FUNK
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FUNERAL of JOSHUA MOORE

Other Information:
1: Pm

Date of Funeral Shipped Mch 17 1916 K.C. mo.

Date of Death Mch 15 1916

Place of Death 2112 Tenn ST.

Place of Funeral " "

Clergyman Braden

Date of Burial Mch 17, 1916

Where Interred ELmwood Cemetery K.C. mo.

Grave or Lot No. NW quarter Sec. Lot 17

Location of Grave Block 8

Age: 32 Years Months 27 Days.

Color W Occupation -

single, married, widow, widower Single

Birthplace K.C. Kans

Last place of residence 2112 Tenn. ST.

How long resident of this state 7 yrs.

Husband's Name

Father's Name GEO W. MOORE

Country of Birth Mo.

Mother's Name Martha Schimmelfeny

Country of Birth Ills

Physician E. R. Keith

Cause of Death Epilepsy

Ordered by

Paid on Account by:

Charge to

Mrs Martha Moore

Sexton

T.D. FUNK
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FUNERAL of ISAAC L. BAKER

Other Information:

Date of Funeral March 19, 1916 9 00 a.m.

Date of Death Mch 17, 1916

Place of Death 1205 Ky ST.

Place of Funeral Masonic Temple

Clergyman "

Date of Burial Mch 19 1916

Where Interred Baldwin Kans

Grave or Lot No. _____ Sec. _____
Location of Grave _____

Age: 86 Years 8 Months 7 Days.

Color W. Occupation Ret. Farmer

single, married, widow, widower Married

Birthplace Lancaster Penn

Last place of residence 1205 Ky ST.

How long resident of this state 59 yrs

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician H T Jones

Cause of Death CrytITis

Ordered by _____

Paid on Account by:

Charge to _____

Mrs BARKER

Sexton _____

MINNIE M. BARKER

T.D. FUNK
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FUNERAL of KATHELINA HUNSINGER

Other Information:

Date of Funeral Mch 20 1916 2:00 PM.

Date of Death Mch 16 1916

Place of Death 825 Ala. ST.

Place of Funeral " "

Clergyman Stauffer

Date of Burial Mch 21 1916

Where Interred Maple Grove

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 73 Years 2 Months 24 Days.

Color W Occupation Home

single, married, widow, widower Married

Birthplace Germany

Last place of residence 825 Ala.

How long resident of this state 49 yrs

Husband's Name PETER HUNSINGER

Father's Name PAUL MUGLER

Country of Birth Germany

Mother's Name KATHERINE MITLEN (MITLER)

Country of Birth Germany

Physician Anderson

Cause of Death Heart

Ordered by _____

Paid on Account by:

Charge to _____

Peter Hunsinger

Sexton _____

T.D. FUNK
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FUNERAL of ALLEN HUNTER

Date of Funeral Shipped To Allison Iowa 3-28 Other Information: -8:40 PM

Date of Death Mch 27, 1916

Place of Death Social S Hosp.

Place of Funeral Allison Iowa

Clergyman Mch 31 1916 (as given)

Date of Burial _____

Where Interred Allison Iowa

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 60 Years _____ Months _____ Days.

Color W Occupation Farmer

single, married, widow, widower Widower

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician A. J. Anderson

Cause of Death Bronchial Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

Mr. Hunter

Sexton _____

T.D. FUNK
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FUNERAL of ALEXANDER MONROE

Other Information:

Date of Funeral Mch 29, 1916 3:30 PM

Date of Death Mch 24, 1916

Place of Death San Diego Cal.

Place of Funeral 615 La. ST.

Clergyman Edwards

Date of Burial Mch 29, 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 72 Years 7 Months 22 Days.

Color W. Occupation Cap. Ret.

single, married, widow, widower Married

Birthplace Mid Ocean

Last place of residence Lawrence Kans

How long resident of this state _____

Husband's Name _____

Father's Name DONALD MONROE

Country of Birth Scotland

Mother's Name JEANETTE ROSS

Country of Birth Scotland

Physician Dr. Thomas Coe Little

Cause of Death NULBEAR PARALYSIS

Ordered by _____

Paid on Account by:

Charge to _____

F. C. MONROE (Reath)

Sexton _____

BISHOP

T.D. FUNK
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FUNERAL of ELLEN PRIESTLY

Other Information:

Date of Funeral Mch 30 1916 300 PM

Date of Death Mch 28 1916

Place of Death 1505 Ky ST.

Place of Funeral " "

Clergyman Edwards

Date of Burial Mch 30 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 82 Years 4 Months 25 Days.

Color W Occupation Home

single, married, widow, widower Widow

Birthplace Ohio

Last place of residence 1505 Ky ST.

How long resident of this state 46 yrs.

Husband's Name _____

Father's Name ROBERT LINGO

Country of Birth Virginia

Mother's Name ELLEN STEWART

Country of Birth France

Physician Gifford

Cause of Death Seniality

Ordered by _____

Paid on Account by:

Charge to _____

Mrs J H BEAN

Sexton _____

T.D. FUNK
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FUNERAL of ELIZA J. PORTRIDGE

Other Information:

Date of Funeral April 3 1916 2:10 PM

Date of Death April 2 1916

Place of Death Topeka Kans

Place of Funeral Oak Hill

Clergyman Backus

Date of Burial 4-3, 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 87 Years _____ Months _____ Days.

Color W Occupation _____

single, married, widow, widower _____

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Senility

Ordered by Assist. of Mrs O P BARKER

Paid on Account by:

Charge to _____

O. P. BARKER

Sexton _____

T.D. FUNK
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FUNERAL of CARL ALBERT STEHWIEN

Other Information:

Date of Funeral April 9, 1916 2:30

Date of Death April 7, 1916

Place of Death 6 mi S.W.

Place of Funeral German Lutheran Church

Clergyman Kreuger Topeka

Date of Burial April 9 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 64 Years 8 Months 17 Days.

Color W. Occupation Farmer

single, married, widow, widower married

Birthplace Germany

Last place of residence 6 mi S.W.

How long resident of this state 48 yrs

Husband's Name _____

Father's Name CARL

Country of Birth Germany

Mother's Name ANNA SANDER

Country of Birth Germany

Physician Blair + Rudolph

Cause of Death Diabetes

Ordered by _____

Paid on Account by:

Charge to _____

Mrs Stehwien

Sexton _____

T.D. FUNK
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FUNERAL of JACOB PLANZ

Date of Funeral April 9, 1916 2:30PM

Date of Death April 6, 1916

Place of Death 1112 Penn ST.

Place of Funeral " "

Clergyman STorker (Eudora)

Date of Burial April 9, 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 73 Years 5 Months 24 Days.

Color W Occupation Baker

single, married, widow, widower widower

Birthplace Germany

Last place of residence 1112 Penn st.

How long resident of this state 52 yrs

Husband's Name _____

Father's Name EBERHART PLANZ

Country of Birth Germany

Mother's Name ELEANOR KOCH

Country of Birth Germany

Physician Anderson

Cause of Death Heart Trouble

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Soloist:

Mrs Endicott

Stauffer

Telegram To

Ellenwood, Kans

Paid on Account by:

Mrs WELLMAN

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of EDWARD L. MASON

Other Information:

Date of Funeral April 10, 1916 10:30 a.m.

Date of Death April 7, 1916

Place of Death 1110 VT. ST.

Place of Funeral " " Private

Clergyman Elder Kin

Date of Burial 4-10-16

Where Interred Oak Hill

Grave or Lot No. 67 Sec. 12

Location of Grave _____

Age: 46 Years 1 Months 23 Days.

Color W. Occupation Ins Agent.

single, married, widow, widower Married

Birthplace Michigan

Last place of residence 1110 VT. ST.

How long resident of this state 3 yrs

Husband's Name _____

Father's Name E. MASON

Country of Birth N. York

Mother's Name DAVIS

Country of Birth N. York

Physician H.T. Jones

Cause of Death Cyanide Suicide

Ordered by _____

Paid on Account by:

Charge to _____

Miss Mason

Sexton _____

T.D. FUNK
MCRTUARY BCGK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of HELLEN HOGAN

Other Information:

Date of Funeral April 14, 1916 2:30 PM

Date of Death April 12 1916

Place of Death 1238 N. H. ST.

Place of Funeral " "

Clergyman Elder Kin

Date of Burial 4-14-16

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 77 Years 11 Months 13 Days.

Color W. Occupation Home

single, married, widow, widower Widow

Birthplace Penn.

Last place of residence Lawrence, Transfer

How long resident of this state 47

Husband's Name _____

Father's Name THOMAS COOKS

Country of Birth Pa.

Mother's Name GORDEN

Country of Birth IRELAND

Physician Chambers

Cause of Death Heart Trouble

Ordered by _____

Paid on Account by:

Charge to _____

E. R. Leonard

Sexton _____

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of JOHN M. SPENCER

Other Information:

Date of Funeral April 16, 1916 3:00 PM

Date of Death April 14 1916

Place of Death 1100 Conn St.

Place of Funeral Methodist Church

Clergyman Hargett

Date of Burial April 17 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 83 Years 10 Months 25 Days.

Color W. Occupation Pension Agent

single, married, widow, widower Married

Birthplace N. York

Last place of residence 1100 Conn St.

How long resident of this state 37 yrs.

Husband's Name _____

Father's Name AMBRO (?) SPENCER

Country of Birth N. YORK

Mother's Name MARY RUSSELL

Country of Birth N. YORK

Physician Chambers

Cause of Death Anginia Bectoris

Ordered by _____

Paid on Account by:

Charge to _____

Mr. A. Spemce (?)

Sexton _____

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of IDA F. GLENN

Other Information:

Date of Funeral April 18, 1916 800am

Date of Death April 16, 1916

Place of Death 1245 Penn St.

Place of Funeral " "

Clergyman —

Date of Burial April 18 1916

Where Interred Lecompton Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

X Age: _____ Years _____ Months _____ Days. (no age given)

Color W Occupation School

single, married, widow, widower Single

Birthplace Lawrence Kans

Last place of residence 1245 Penn

How long resident of this state _____

Husband's Name _____

Father's Name GRANT GLENN

Country of Birth Lecompton

Mother's Name MARTHA DAVIDSON

Country of Birth Lecompton Kans.

Physician H. T. Jones

Cause of Death Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

Mrs Glenn

Sexton _____

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of BETTIE BRECHTELSBAUER

Other Information:

Date of Funeral April 19, 1916 2:30 PM

Date of Death April 18, 1916

Place of Death over Dutch Weimiller 300 BIK. Mass ST.

Place of Funeral 716 R.I. ST.

Clergyman Stauffer

Date of Burial April 19, 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 89 Years 6 Months 21 Days.

Color W Occupation Home

single, married, widow, widower widow

Birthplace Germany

Last place of residence 700 B Mass. ST.

How long resident of this state 55 yrs

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician CARL Phillips

Cause of Death Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

Mrs Wieman (Wiernan)

Sexton _____

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of JOHN F. ROBERTS

Other Information:

Date of Funeral April 23, 1916 300PM

Date of Death April 21 1916

Place of Death 827 Miss. St.

Place of Funeral " "

Clergyman Hargett

Date of Burial April 23, 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 85 Years 11 Months 9 Days.

Color W Occupation Miller

single, married, widow, widower Married

Birthplace Penn.

Last place of residence 827 Miss

How long resident of this state 13 yrs.

Husband's Name _____

Father's Name THOMAS F. ROBERTS

Country of Birth _____

Mother's Name RACHEL PHILLIPS

Country of Birth _____

Physician Gardner

Cause of Death Seniality bilit

Ordered by _____

Paid on Account by:

Charge to _____

F. Roberts

Sexton _____

T.D. FUNK
MCRTUARY BOCK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of Lucy C. RICHARDS

Date of Funeral April 27, 1916
Shipped to Minneapolis Kans. 11:52 U.P.R.R.

Date of Death April 26 1916 4:00 PM

Place of Death K.U. Gym

Place of Funeral Minneapolis, Kans

Clergyman _____

Date of Burial _____

Where Interred Minneapolis Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 23 Years _____ Months 22 Days.

Color W Occupation Student

single, married, widow, widower Single

Birthplace Minneapolis Kans

Last place of residence Roomed at 917 Ohio

How long resident of this state 23 - 22

Husband's Name _____

Father's Name J. S. RICHARDS

Country of Birth Minneapolis Kans

Mother's Name LUCY CAREY

Country of Birth Ohio

Physician H. T. Jones

Cause of Death Acute Dilatation Heart

Ordered by Body Taken To J. V. Carpen

Charge to _____
1000 ILLS ST.
Bell 1557 W

Sexton _____

Other Information:

(The C. in the name
has a line thru it)

Paid on Account by:

J. S. RICHARDS

T.D. FUNK
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FUNERAL of CONSTANT F. SQUIRES

Other Information:

Date of Funeral April 28, 1916 2:00 PM

Date of Death April 28, 1916

Place of Death 425 Ohio St.

Place of Funeral Masonic Temple

Clergyman O. C. BROWN

Date of Burial April 30 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 45 Years 11 Months 11 Days.

Color W. Occupation Photographer

single, married, widow, widower married

Birthplace Penn.

Last place of residence 425 Ohio

How long resident of this state 8 yrs (written 8 yrs)

Husband's Name _____

Father's Name WILLIAM A. SQUIRES

Country of Birth X

Mother's Name HATTIE E. WOOD

Country of Birth _____

Physician Anderson

Cause of Death acute indigestion + obstruction of bowels

Ordered by _____

Paid on Account by:

Charge to _____

Mrs Squires

Sexton _____

T.D. FUNK
MORTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of CARA A. HORN

Other Information:

Date of Funeral Shipped To MANKATO Kans MAY 1 1916 5:48 Santa Fe

Date of Death April 29 1916

Place of Death SIMMONS Hosp.

Place of Funeral 1029 Miss. ST.

Clergyman Hargett

Date of Burial _____

Where Interred Man Kato

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 36 Years 7 Months _____ Days.

Color W Occupation Home

single, married, widow, widower Single

Birthplace Mo.

Last place of residence 1029 Miss.

How long resident of this state 33 yrs.

Husband's Name _____

Father's Name JOHN D. HORN

Country of Birth Ohio

Mother's Name MAY (MARY) HAWK

Country of Birth Ohio

Physician Smith

Cause of Death Trombus of Blood vessel of the mesentery

Ordered by _____

Paid on Account by:

Charge to _____

Mr. HORN

Sexton _____

T.D. FUNK
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FUNERAL of CHARLES O. MORROW

Other Information:

Date of Funeral May 2 1916 2 30 PM

Date of Death April 26 1916

Place of Death Larimer Co. Col.

Place of Funeral 917 Main ST.

Clergyman O. C. Brown

Date of Burial May 2 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 40 Years 10 Months 9 Days.

Color W Occupation Laborer

single, married, widow, widower Married

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician W T Hollowell (cor) Fort Collins Col.

Cause of Death Ulcer of Stomach (Perfecation)

Ordered by _____

Paid on Account by:

Charge to _____

Madala F. Morrow

Sexton _____

T.D. FUNK
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FUNERAL of JOSEPH C. RODGERS

Other Information:

Date of Funeral Shipped To Dallis Texas May 8, 1916 Santa Fe 2:10

Date of Death May 7 1916 3:30 P

Place of Death 1328 Ky ST.

Place of Funeral " "

Clergyman Father

Date of Burial May 9, 1916

Where Interred Dallis Texas

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 5 Years 9 Months 27 Days.

Color W. Occupation Home

single, married, widow, widower Single

Birthplace Dallis, Texas

Last place of residence 1328 Ky ST.

How long resident of this state 1 mo.

Husband's Name _____

Father's Name J. D. RODGERS

Country of Birth Texicana Texas

Mother's Name ADDA STILLWELL

Country of Birth Kans

Physician H. T. Jones

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

J. D. RODGERS

Sexton _____

T.D. FUNK
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FUNERAL of ARTHUR SIGELIN

Other Information:

Date of Funeral May 8 1208 Santa Fe PM

Date of Death May 6 1916

Place of Death Gen. Hosp. K.C. Mo.

Place of Funeral Oak Hill

Clergyman Braden

Date of Burial May 8, 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 26 Years _____ Months _____ Days.

Color W. Occupation Clerk

single, married, widow, widower married

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician F. A. Trump

Cause of Death Scarlet Fever + Diphtheria

Ordered by _____

Paid on Account by:

Charge to _____

E. SIGELIN

Sexton _____

STEELE

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of HOWELL M. WALKER

Other Information:

Date of Funeral May 23 1916 Santa Fe

10:22 a.m.

Date of Death May 21 1916 12 noon

Place of Death K.C. Kans.

Place of Funeral Oak Hill

Clergyman Stauffer

Date of Burial 5-23-1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 15 Years _____ Months _____ Days.

Color W. Occupation School

single, married, widow, widower Single

Birthplace _____

Last place of residence KC Kans.

How long resident of this state _____

Husband's Name _____

Father's Name JOHN W. WALKER

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician W. S. Furgusen

Cause of Death Scarlet Fever

Rule # 2

Ordered by _____

Paid on Account by:

Charge to _____

J. W. Walker

Sexton _____

T.D. FUNK
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FUNERAL of MARY E. HASTIE

Other Information:

Date of Funeral May 31 1916 2:00 PM

Date of Death May 26 1916

Place of Death 1218 N.Y. ST. (N.J.) ST.

Place of Funeral Funk Chapel

Clergyman Stauffer

Date of Burial May 31 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 5

Location of Grave _____

Age: 63 Years 8 Months 17 Days.

Color W. Occupation Home

single, married, widow, widower married

Birthplace DAYTON Ohio

Last place of residence 1218 N.J. ST.

How long resident of this state 56 yrs.

Husband's Name PETER HASTIE

Father's Name R. McCANNES

Country of Birth Penn.

Mother's Name _____

Country of Birth _____

Physician McCONNELL

Cause of Death senility (valvulation Heart T.)

Ordered by _____

Paid on Account by:

Charge to _____

P. HASTIE

Sexton _____

N. Lawrence

T.D. FUNK
MCRTUARY BOCK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of VELMA EDWARDS

Date of Funeral May 28, 1916 2:00 PM

Date of Death May 27, 1916

Place of Death 1428 Penn. ST.

Place of Funeral " "

Clergyman Elderkin

Date of Burial May 28 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 12 Years 6 Months 3 Days.

Color W. Occupation Home

single, married, widow, widower Single

Birthplace Iola Kans

Last place of residence 1428 Penn ST.

How long resident of this state 12-6-3

Husband's Name _____

Father's Name J. C. EDWARDS

Country of Birth Kans.

Mother's Name NORA J COTTLE

Country of Birth Garnett Kans.

Physician H. T. Jones

Cause of Death Mitral Insufficiency

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Sobist: Mrs Mackie

Paid on Account by:

EDWARDS

T.D. FUNK
MCRTUARY BOOK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of WALTER GRAHAM THIELE

Other Information:

Date of Funeral May 29 1916 3:00 PM

Date of Death May 28 1916

Mrs Masone

Place of Death 1208 Ky ST.

Place of Funeral " "

Clergyman Hargett

Date of Burial 5-29-16

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years _____ Months 15 Days.

Color W. Occupation Home

single, married, widow, widower Single

Birthplace Lawrence Kans.

Last place of residence 1208 Ky ST.

How long resident of this state 15 days

Husband's Name _____

Father's Name WALTER THIELE

Country of Birth Washington Kans.

Mother's Name MAUDE L. BAKER

Country of Birth CLIFFTON Kans

Physician Keith

Cause of Death obstruction of Bowels

Ordered by _____

Paid on Account by:

Charge to _____

W. THIELE (as given)

Sexton _____

T.D. FUNK
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FUNERAL of ALEXANDER MARKS

Other Information:

Date of Funeral May 31, 1916 2:30 PM

Date of Death May 28, 1916

Place of Death 702 La. ST.

Place of Funeral " "

Clergyman F. P. Smith

Date of Burial May 31 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____
Location of Grave _____

Age: 72 Years 4 Months 22 Days.

Color W. Occupation Jeweler

single, married, widow, widower Married

Birthplace Germany

Last place of residence 702 La. ST.

How long resident of this state 58 yrs

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name ELIZA SIESS

Country of Birth Germany

Physician Morris

Cause of Death Erysifilar

Ordered by _____

Paid on Account by:

Charge to _____

ARTHUR MARKS

Sexton _____

T.D. FUNK
MCRTUARY BCOCK (Aug. 25, 1913 - Sept. 6, 1916)

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FUNERAL of EVA M. BATES

Date of Funeral June 5 1916 2:00 PM

Date of Death June 3 *1915

Place of Death 1024 R. I. ST.

Place of Funeral " "

Clergyman Hargett

Date of Burial June 5 1915

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 38 Years 5 Months 29 Days.

Color W. Occupation Home

single, married, widow, widower Single

Birthplace Virginia

Last place of residence 1024 R. I.

How long resident of this state 29 yrs.

Husband's Name _____

Father's Name DANIEL BATES

Country of Birth Virginia

Mother's Name ANNA BARNETT

Country of Birth Virginia

Physician H. T. Jones

Cause of Death _____

Ordered by _____

Charge to _____

Sexton _____

Other Information:

* (should be 1916)

Paid on Account by:

O. BATES

T.D. FUNK
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FUNERAL of BEULAH HARRIS (Col)

Other Information:

Date of Funeral June 12 1916 11:00 a.m.

Date of Death June 10 1916

Place of Death Sociel S. Hosp.

Place of Funeral Funks Chapel

Clergyman Jackson

Date of Burial 6-12-1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 31 Years _____ Months _____ Days.

Color Col Occupation _____

single, married, widow, widower married

Birthplace N. Carolina

Last place of residence 211 W 6th ST. Lawrence, Kans

How long resident of this state 4 mo.

Husband's Name JAMES HARRIS

Father's Name _____

Country of Birth _____

^{Maden} Mother's Name BEULAH WITHERS

Country of Birth _____

Physician Rudolph

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to St. Joe² Mo¹⁰ - Mo. Valley Bridge +

J Harris

Sexton Iron Co. Station A. Box 36

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FUNERAL of MOLLIE C. KENT

Date of Funeral Shipped To Paola Kans June 15, 1916 ^{4:00PM}

Date of Death June 13 1916 4 P.M.

Place of Death 610 W 4th ST.

Place of Funeral " "

Clergyman Ainsley

Date of Burial 6-15-1916

Where Interred Paola Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 63 Years _____ Months 4 Days.

Color W Occupation Home

single, married, widow, widower Widow

Birthplace W. Virginia

Last place of residence 610 W 4th st.

How long resident of this state 48 yrs

Husband's Name _____

Father's Name T ELLIS

Country of Birth W. Virginia

Mother's Name LUCY SNEED

Country of Birth Virginia

Physician Rudolph

Cause of Death Mitral Insiffency

Ordered by _____

Charge to _____

Sexton _____

Other Information:

(could be MOLLIE E. KENT)

(death time is a 2 PM with a
4 written over it.)

Paid on Account by:

MATTIE KENT

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FUNERAL of ELIZABETH A. PALMER

Other Information:

Date of Funeral June 16 1916 4PM.

Date of Death June 15 1916 10:00 a.

Place of Death 909 Ohio ST.

Place of Funeral " "

Clergyman _____

Date of Burial June 16 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 58 Years 5 Months 1 Days.

Color W. Occupation Home

single, married, widow, widower married

Birthplace Ills.

Last place of residence 909 Ohio

How long resident of this state 32 yrs

Husband's Name SIDNEY PALMER

Father's Name M. HOAG

Country of Birth N. Y.

Mother's Name MARGARITE HAYS

Country of Birth Virginia

Physician Anderson

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

S. L. Palmer

Sexton _____

T.D. FUNK
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FUNERAL of CECELIA O. TOWNE

Other Information:

Date of Funeral June 21, 1916 2:30 PM

Date of Death June 19, 1916

Place of Death 1147 Ohio St.

Place of Funeral 1147 Ohio St.

Clergyman O.C. Brown

Date of Burial June 21 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 74 Years 8 Months 29 Days.

Color W. Occupation Home

single, married, widow, widower Widow

Birthplace Peru Ohio

Last place of residence 1147 Ohio St.

How long resident of this state 35 yrs.

Husband's Name _____

Father's Name JOHN HARRY

Country of Birth N YORK

Mother's Name ELIZABETH COLE

Country of Birth N YORK

Physician Simmons

Cause of Death Carcinoma of Breast

Ordered by _____

Paid on Account by:

Charge to _____

Miss Towne

Sexton _____

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FUNERAL of HENRY CARLSON

Other Information:

Date of Funeral June 27 - 16

Date of Death June 25 - 9 P.M.

Place of Death 901 N Y ST

Place of Funeral Appanoose C Franklin E(?)

Clergyman _____

Date of Burial June 27

Where Interred _____

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 27 Years 4 Months 20 Days.

Color _____ Occupation Farmer

single, married, widow, widower _____

Birthplace Kan.

Last place of residence Colo

How long resident of this state _____

Husband's Name _____

Father's Name PETER CARLSON

Country of Birth Sweden

Mother's Name ALICE BOND

Country of Birth Kans

Physician H.T. Jones

Cause of Death Apoplexy

Ordered by _____

Paid on Account by:

Charge to _____

Mrs Carlson

Sexton _____

T.D. FUNK
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FUNERAL of HARRY A. GREY

Date of Funeral wed June 28 1916 10 a.m. Other Information:

Date of Death June 27

Place of Death I. J. GREY Res

Place of Funeral " " "

Clergyman Rev. Lawrence

Date of Burial June 28 10 am

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 40 Years _____ Months _____ Days.

Color white Occupation _____

single, married, widow, widower Single

Birthplace Mich

Last place of residence Lawrence

How long resident of this state _____

Husband's Name _____

Father's Name I. J. GREY

Country of Birth Ohio

Mother's Name MARY AMBLER

Country of Birth Ohio

Physician A. J. Anderson

Cause of Death Bright Disease

Ordered by _____

Paid on Account by:

Charge to _____

Mr GRAY

Sexton _____

T.D. FUNK
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FUNERAL of ALBERT G. BROOKS

Other Information:

Date of Funeral June 29 1916 3:27 U.P. Train

Date of Death June 24 1916

Place of Death Riverside Cal.

Place of Funeral Oak Hill

Clergyman O. C. BROWN

Date of Burial June 29 1916

Where Interred Oak Hill

Grave or Lot No. 118 Sec. 3

Location of Grave _____

Age: 77 Years 7 Months 6 Days.

Color W. Occupation accountant

single, married, widow, widower _____

Birthplace YORK MAIN

Last place of residence Riverside Cal.

How long resident of this state _____

Husband's Name _____

Father's Name JEREMIAH BROOKS

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Appendicitis

Ordered by _____

Paid on Account by:

Charge to _____

P. R. BROOKS

Sexton _____

T.D. FUNK
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FUNERAL of MARIE PUTZE

Other Information:

Date of Funeral July 11 1916 2:30 P.M.

Date of Death July 9 1916

Telegram: Washington

Place of Death 800 N. Y. ST.

Place of Funeral " " "

Clergyman Father Eckart

Date of Burial July 11 1916

Where Interred Oak Hill

Grave or Lot No. 118 Sec. 8

Location of Grave _____

Age: 62 Years 7 Months 27 Days.

Color W Occupation Grocer

single, married, widow, widower widow

Birthplace Germany

Last place of residence 800 N. Y. ST.

How long resident of this state 36 yrs

Husband's Name _____

Father's Name GEO WIND

Country of Birth Germany

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Dr. J.C. Rudolph

Sexton _____

T.D. FUNK
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FUNERAL of EDWARD TRYON

Date of Funeral July 10, 1916 11:00 AM.

Date of Death July 9 1916

Place of Death 528 Florida St.

Place of Funeral NO

Clergyman NO

Date of Burial July 10 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years _____ Months 2 Days.

Color W Occupation NO

single, married, widow, widower S

Birthplace Lawrence Kans

Last place of residence 528 Florida St.

How long resident of this state 2 days

Husband's Name _____

Father's Name ED. TRYON

Country of Birth Kans

Mother's Name OTTAE AUNGER

Country of Birth Mo.

Physician Rudolph

Cause of Death _____

Ordered by _____

Charge to _____

Sexton _____

Other Information:

in pencil

Address:

1244 Ky St.

+ 2531 J Bell

Telephone # ~~Crossed out~~

Paid on Account by:

Mrs. TRYON

T.D. FUNK
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FUNERAL of HENRY M. NOLAND

Date of Funeral July 13 1916 2:30

Date of Death July 11 1916

Place of Death 546 California ST.

Place of Funeral " "

Clergyman DARSEY

Date of Burial July 13 1916

Where Interred Oak Hill

Grave or Lot No. T8 RB Sc B Sec. _____

Location of Grave _____

Age: 79 Years 8 Months 6 Days.

Color W. Occupation Ret Farmer

single, married, widow, widower widower

Birthplace Kentucky

Last place of residence 546 N(?) Cal. ST.

How long resident of this state 5 yrs

Husband's Name _____

Father's Name JAMES NOLAND

Country of Birth VIRGINIA

Mother's Name _____

Country of Birth _____

Physician Rudolph

Cause of Death Cerebral Hemorrhage.

Ordered by _____

Charge to _____

Sexton _____

Other Information:

Paid on Account by:

M. NOLAND.

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FUNERAL of NELLIE M. TULLER

Date of Funeral July 15, 1916 shipped To Baldwin Santa Fe 10 25 AM

Date of Death July 14 1916 5:25 P

Place of Death 1725 Ind. ST.

Place of Funeral Baldwin

Clergyman _____

Date of Burial July 16 1916

Where Interred Lebo Kans

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 74 Years 10 Months 28 Days.

Color W Occupation Home

single, married, widow, widower Married

Birthplace Ohio

Last place of residence 1725 Ind. ST.

How long resident of this state 50

Husband's Name A. G. TULLER

Father's Name JOHN WHITCRAFT

Country of Birth Penn

Mother's Name ELLEN HORKINS

Country of Birth Penn

Physician Gardner

Cause of Death Cancer of Abdominal Visceris

Ordered by _____

Paid on Account by:

Charge to _____

Mr. TULLER

Sexton _____

Other Information:

This name could be
TULLEN but I believe
it is TULLER

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FUNERAL of Mrs JARILDA VANHOESEN

Date of Funeral July 17, 1916 1208 PM Santa Fe RR.

Other Information:

Date of Death _____

Place of Death Atchinson Kans

Place of Funeral Oak Hill

Clergyman Darsey

Date of Burial July 17 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 80 Years _____ Months _____ Days.

Color W Occupation Home

single, married, widow, widower Widow

Birthplace _____

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician _____

Cause of Death Diabetes

Ordered by LUTHER-LEWIS

Paid on Account by:

Charge to James Challis

Mrs (B) Sheffield

Sexton _____ Atchison Kans.

Ingalls

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FUNERAL of LYDIA P. PEARSE

Other Information:

Date of Funeral July 20 1916 2:30 P.M.

Date of Death July 19 1916

Place of Death 1911 Ky ST.

Place of Funeral " "

Clergyman Lawrence

Date of Burial July 20 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 95 Years 10 Months 29 Days.

Color W Occupation Home

single, married, widow, widower widow

Birthplace MAINE

Last place of residence 1911 Ky ST.

How long resident of this state 61 yrs

Husband's Name _____

Father's Name PERKINS

Country of Birth Maine

Mother's Name _____

Country of Birth _____

Physician Chambers

Cause of Death Bronchial Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

MISS PEARSE

Sexton Reed

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FUNERAL of JOSEPH G. SULLIVAN

Other Information:

Date of Funeral July 21 1916 2:00 pm.

Date of Death July 19 1916

Place of Death 723 ARK. ST.

Place of Funeral " "

Clergyman Maughlin

Date of Burial July 21 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 83 Years 4 Months 6 Days.

Color W. Occupation Stonemason

single, married, widow, widower Widower

Birthplace England

Last place of residence 723 Ark.

How long resident of this state 49 yrs

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Anderson

Cause of Death Starvation + Senility

Ordered by _____

Paid on Account by:

Charge to _____

A. E. LOWERY

Sexton _____

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FUNERAL of Infant of RALPH E. STANDING

Other Information:

Date of Funeral July 27 1916 5:00 PM.

Date of Death July 27 1916

Place of Death 2108 Barker Ave.

Place of Funeral No

Clergyman "

Date of Burial July 27 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years _____ Months _____ Days.

Color W. Occupation _____

single, married, widow, widower S.

Birthplace 2108 Barker Ave.

Last place of residence _____

How long resident of this state _____

Husband's Name _____

Father's Name RALPH E. STANDING

Country of Birth Douglas Co.

Mother's Name CLARO O. DAVIS

Country of Birth Douglas Co.

Physician Chambers

Cause of Death Stillborn - unknown

Ordered by _____

Paid on Account by:

Charge to _____

Mr STANDING

Sexton Reed

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FUNERAL of GILBERT J. SNYDER

Other Information:

Date of Funeral July 29 1916 10:30 AM.

Date of Death July 28 1916

first name
could be GIBBERT

Place of Death Social Service Hosp.

Place of Funeral Funks Chapel

Clergyman Holeyfield

Date of Burial July 29 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years _____ Months 13 Days.

Color W. Occupation no

single, married, widow, widower S

Birthplace Lawrence Kans

Last place of residence Social S. Hosp.

How long resident of this state 13 days

Husband's Name _____

Father's Name GILBERT GEORGE SNYDER

Country of Birth Douglas Co.

Mother's Name GRACE RULE

Country of Birth Douglas Co

Physician Anderson

Cause of Death _____

Ordered by _____ Ladies Rel.

Paid on Account by:

Charge to Mrs Geo. W. Snyder

Geo. W. Snider (as written)

Sexton _____
RFD 3 Lawrence Kans

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FUNERAL of GEORGE W. REEVES (Col)

Other Information:

Date of Funeral Aug 6 1916 2:30 PM

Date of Death Aug 3 1916

Place of Death 923 Conn ST.

Place of Funeral Methodist Church

Clergyman _____

Date of Burial Aug 6 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 4

Location of Grave _____

Age: 50 Years _____ Months 4 Days.

Color B Occupation Plaster

single, married, widow, widower married

Birthplace Mo.

Last place of residence 923 Conn. ST.

How long resident of this state 11 yrs.

Husband's Name _____

Father's Name E. REEVES

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Dr. Harvey

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Dr. Harvey Mason

Sexton _____

Western Star Lodge #1

Mrs Reeves

FUNERAL of DAVID L. WADLINGTON (Col.)

Other Information:

Date of Funeral shipped To Topeka #1 Aug 10 1916

11:00 AM

Date of Death Aug 8 1916 300 a.

Place of Death King Hotel 800 BIK VT. ST.

Place of Funeral Funk Chapel

Clergyman Henderson

Date of Burial Aug 10 1916

Where Interred Topeka Kans

Grave or Lot No. _____ Sec. _____
Location of Grave _____

Age: 50 Years 2 Months 20 Days.

Color B Occupation Laborer

single, married, widow, widower married

Birthplace Miss.

Last place of residence Lawrence Kans

How long resident of this state 12 yrs.

Husband's Name _____

Father's Name HENRY WADLINGTON

Country of Birth Miss.

Mother's Name _____

Country of Birth _____

Physician H T Jones

Cause of Death Arsenic Poisoning (Suicide)

Ordered by _____

Paid on Account by:

Charge to _____

W. C. Brown ^{mason}

Sexton _____

mrs WADLINGTON

T.D. FUNK
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FUNERAL of CHARLES W. RENFROW

Other Information:

Date of Funeral Aug 12 1916 1000 am.

Date of Death Aug 10 1916

Place of Death 828 Ind. ST.

Place of Funeral " "

Clergyman Jackson

Date of Burial Aug 12 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 3 Years 10 Months 1 Days.

Color B Occupation Home

single, married, widow, widower S

Birthplace Lawrence Kans

Last place of residence " "

How long resident of this state 3-10-1

Husband's Name _____

Father's Name LOUIS RENFROW

Country of Birth Douglas Co.

Mother's Name LUCIE BROWN

Country of Birth Douglas Co.

Physician Rudolph

Cause of Death Bronchial Pneumonia

Ordered by _____

Paid on Account by:

Charge to _____

Louis Renfrow

Sexton _____

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FUNERAL of EARL R BULIS

Date of Funeral Aug 13 1916 200am.

Date of Death Aug 12 1916

Place of Death 1230 N Y ST.

Place of Funeral " "

Clergyman _____

Date of Burial Aug 13 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: _____ Years 7 Months 1 Days.

Color W Occupation Home

single, married, widow, widower Single

Birthplace Lawrence, Kans

Last place of residence 1230 N Y

How long resident of this state 0-7-1

Husband's Name _____

Father's Name EARL BULIS

Country of Birth Douglas Co

Mother's Name LULA THOMPSON

Country of Birth Ohio

Physician Barnes

Cause of Death Cholera Infantum

Ordered by Mr. Frank NORTON

Charge to To County ATTORNY Campbell Bldg

Sexton _____ Salina Kans

Other Information:

Sprgs Colo.

Written in pencil

Following name.

Paid on Account by:

EARL Bulis Salina Kans.

Floyd Russell

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FUNERAL of GEORGE SMITH (STINER SCHMIDT)

Other Information:

Date of Funeral Aug 15 1916 400 PM.

Date of Death Aug 12 1916 1:30 P

Place of Death Santa Fe Hotel

Place of Funeral Chapel Mo.

Clergyman _____

Date of Burial Aug 15 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. 4

Location of Grave _____

Age: 40 Years _____ Months _____ Days.

Color W Occupation Laborer

single, married, widow, widower Single

Birthplace Switzerland (as given)

Last place of residence 419 E 33 ST. K.C. Mo.

How long resident of this state 1 day

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician H.T. Jones Cor.

Cause of Death Gunshot wound Through Head (Suicide)

Ordered by _____

Paid on Account by:

Charge to _____

Mr Sam B. Strothers

Sexton _____

908 Scarritt Bldg.

K.C. Mo.

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FUNERAL of EDWIN L. SAYLOR

Other Information:

Date of Funeral Aug. 16 1916 10 AM

Date of Death Aug 15 1916 3:30 P

Place of Death 822 R.I. ST.

Place of Funeral " "

Clergyman Testerman

Date of Burial Aug 16 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 65 Years 2 Months 21 Days.

Color W. Occupation Ret.

single, married, widow, widower Married

Birthplace Penn

Last place of residence 822 R.I. ST.

How long resident of this state 39 yrs

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Keith

Cause of Death _____

Ordered by _____

Paid on Account by:

Charge to _____

Mrs SAYLOR

Sexton _____

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FUNERAL of ALONZO YOUNG

Other Information:

Date of Funeral Aug 20 1916 200 PM

Date of Death Aug 18 1916 3 a.m.

Place of Death 704 Ind. ST

Place of Funeral " "

Clergyman O C. BROWN

Date of Burial Aug 20 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 68 Years 4 Months 19 Days.

Color W. Occupation Clothier

single, married, widow, widower Married

Birthplace Iowa DEAVENPORT

Last place of residence 704 Ind ST.

How long resident of this state 40 yrs

Husband's Name _____

Father's Name W^m YOUNG

Country of Birth Ky

Mother's Name ELIZABETH M^cGRANGER

Country of Birth X

Physician Simmons

Cause of Death Apoplexy

Ordered by _____

Paid on Account by:

Charge to _____

Mrs A. YOUNG

Sexton _____

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FUNERAL of MARTHA ANDERSON

Other Information:

Date of Funeral Aug 27, 1916 1100 a.m.

Date of Death Aug 25 1916

Place of Death 1000 R. I. ST.

Place of Funeral Pleasant Grove Church

Clergyman _____

Date of Burial Aug 27 1916

Where Interred Pleasant Grove Cemetary

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 27 Years 5 Months 15 Days.

Color W Occupation Home

single, married, widow, widower married

Birthplace Douglas Co

Last place of residence "

How long resident of this state 27-5-15

Husband's Name J. L. ANDERSON

Father's Name SAMUEL FLORY

Country of Birth ohio

Mother's Name ELIZABETH BURNHARDT

Country of Birth Virginia

Physician Simmons

Cause of Death Pulmonary Tuberculosis

Ordered by _____

Paid on Account by:

Charge to _____

M. J. L. Anderson

Sexton _____

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FUNERAL of JNO V SIBLEY

Other Information:

Date of Funeral Aug 27 1916 10:20 a.m.

Date of Death Aug 25, 1916 1:30 a.

Place of Death K.C. Mo.

Place of Funeral "

Clergyman _____

Date of Burial Aug 27 1916

Where Interred Oak Hill

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 46 Years _____ Months _____ Days.

Color W Occupation _____

single, married, widow, widower Married

Birthplace _____

Last place of residence K.C. Mo.

How long resident of this state _____

Husband's Name _____

Father's Name _____

Country of Birth _____

Mother's Name _____

Country of Birth _____

Physician Geo F. Hamel

Cause of Death Chronic Nephritis

Ordered by _____

Paid on Account by:

Charge to Chas. Thompson 2214 E 15th St.

Mary Orden

Sexton _____

K.C. Mo.

Thompson

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FUNERAL of GEORGE R. White

Other Information:

Date of Funeral Aug. 30 1916 10:00 a.m.

Date of Death Aug 28 1916 5:00 a.

Place of Death 215 Ind. St.

Place of Funeral " "

Clergyman O. C. Brown

Date of Burial Aug 30 1916

Where Interred Oak Hill

Grave or Lot No. 19 Sec. 4

Location of Grave _____

Age: 64 Years 6 Months 24 Days.

Color W. Occupation Grocer

single, married, widow, widower Married

Birthplace England

Last place of residence 215 Ind. St.

How long resident of this state 35 yrs

Husband's Name _____

Father's Name EDWARD WHITE

Country of Birth England

Mother's Name ELIZABETH PENFOLD

Country of Birth England

Physician H. T. Jones

Cause of Death Cancer of Stomach

Ordered by _____

Paid on Account by:

Charge to _____

Mrs White

Sexton _____

A. C. Long

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FUNERAL of MARIE STILLMAN

Other Information:

Date of Funeral Sep 1 1916 2:30 PM.

Date of Death Sep 1 1916

Place of Death 2 1/2 mi S. E.

Place of Funeral " "

Clergyman " "

Date of Burial Sept, 1916

Where Interred Oak Hill

Grave or Lot No. Sec.

Location of Grave

Age: Years Months 21 Days.

Color W Occupation Home

single, married, widow, widower S

Birthplace Lawrence Kans.

Last place of residence " "

How long resident of this state 21 days

Husband's Name

Father's Name B. S. STILLMAN

Country of Birth Kans

Mother's Name MARTHA MORRIS

Country of Birth Ind.

Physician Gifford

Cause of Death

Ordered by

Paid on Account by:

Charge to

Ben Stillman

Sexton

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FUNERAL of NELLIE F. DICK

Other Information:

Date of Funeral Sep 5 1916 12 noon

Date of Death Sep 4 1916

Place of Death South W. Limit

Place of Funeral Funk Chapel

Clergyman STauffer

Date of Burial Sep 5 1916

Where Interred WILLIAMSTOWN

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 10 Years 7 Months 9 Days.

Color W Occupation School

single, married, widow, widower Single.

Birthplace Douglas Co.

Last place of residence S.W. Limit

How long resident of this state 10-7-9

Husband's Name _____

Father's Name Louis Dick

Country of Birth Jefferson Co.

Mother's Name LILLY DEAN

Country of Birth Jefferson Co

Physician H. T. Jones

Cause of Death Electric Shock accidental

Ordered by _____

Paid on Account by:

Charge to _____

Lewis Dick

Sexton _____

Amb. House To S.S. Hosp.

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FUNERAL of JOHN TIGER

Other Information:

Date of Funeral Shipped To Hanna OKla. Sep 6

Date of Death Sep 5 1916 6: P

Place of Death HASKEL HOSP

Place of Funeral Chapel

Clergyman O. C. Brown

Date of Burial shipped Sep 6 - 16

Where Interred Hanna OKla.

Grave or Lot No. _____ Sec. _____

Location of Grave _____

Age: 19 Years _____ Months _____ Days.

Color Indian Occupation Student

single, married, widow, widower S

Birthplace Hanna OKla.

Last place of residence Haskel Ins.

How long resident of this state 5 yrs

Husband's Name _____

Father's Name TOM TIGER

Country of Birth _____

Mother's Name Mrs ROSE TIGER

Country of Birth Hanna OKla

Physician _____

Cause of Death Valvular Heart Leasion (?)

Ordered by _____

Paid on Account by:

Charge to _____

J. R. Wise

Sexton _____

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