	Zwiek Eugerel Here Beserde 4040 4000
	Zwick Funeral Home Records 1918-1922
Name of Deceased	Leroy Hoffman
Removing Remains	Leroy Homman
Embalming	
Shaving & Laying Out	
Casket No.	#00; Size 2' 0"; Cost \$12.00
Outside Case	που, σιευ ε υ , σουι ψτε.σο
Handles	
Lining & Pillow Set	2 yds.
Metal Vault Style	z yus.
Mountings	
Burial Robe	
Slippers	
Candelabra	
Door Dressing	
Flowers	
Funeral Notices	
Hearse	
Coaches	
Telegrams	
Clergyman Sexton	
Vault Charges	
Opening Grave Date of Funeral	Neveral at 04, 4040
	November 04, 1919
Date of Death Place of Death	November 04, 1919
	Decatur, Indiana
Place of Funeral	At the home; 918 S. 13th Street
Clergyman  Date of Burial	November 04, 4040
Where Interred	November 04, 1919
	November 04, 4040
Born	November 04, 1919
Age Color	1/2 hour
_	White
Occupation	Cinala
Status	Single
Birthplace	Decatur, Indiana; S. 13th Street #918
Last Place of Residence	Decatur, Indiana
How Long Resident of This State	Life
Husband's/Wife's Name	James C. Hoffman
Father's Name	James C. Hoffman
Country of Birth	Kirkland Township, Adams County, Indiana
Mother's Name	Flora M. Gould
Country of Birth	Kentucky
Physician Cause of Dooth	Dr. E. Berns
Cause of Death	Exhaustion due to premature delivery and long labor
Ordered By	James C. Hoffman
Charge To	James C. Hoffman
When Rendered	November 04, 1919
Received on Account	January 16, 1920; by cash; \$12.00 (PAID)

Funeral of

Nov. 46 Date of Funeral. Hour Removing Remains.... Date of Death NOV. 4 1919 Place of Death Dicatur Sand Embalming ..... ..... Place of Funeral at The Home 918 3 13 s Shaving and Laving Out..... Casket No. O.O. Size L. O. O.S. Clerguman.... Date of Burial Nav. 4 1919 Where Interred..... Handles No. Grave or Lot No.....Section... Outside Case, Pine, Chestnut, Oak. Mahoganu..... Location of Grave ..... Lining and Pillow Set No. 2 Los @ Ot +3 ..... Metal Lined Box..... Mountings...... Handles..... Plate.... Date of Birth Nov 4 1919 = Metal Vault, Style..... Age Years Months Days /alton Box Mattress Slippers Prs. Gloves..... Single, Married, Widow, Widower ......Doz. Chairs..... Last place of residence . Breatur Personal Attandance and Assistants ..... Drapery......Candelabra.....Candles..... How long resident of this State. ..... Pedestals.....Rug..... Husband's Name : Father's Name. CASH EXPENDITURES. Country of Birth Kunkland The Mother's Name Loza Door Dressing..... Country of Birth..... Cause of Death Exka Long Ordered by . James Porters and ..... Funeral Notices..... Charge to ..... When rendered NOV 4 1719 RECEIVED ON ACCOUNT. Sexton..... Quartette, Soloist.....Organist..... ..... Delivering Box to..... Opening Grave .....Lining..... Vault Charges..... Hearse.....