

Zwick Funeral Home Records 1918-1922

Name of Deceased	Name cut off [Wilbert Scheumann]
Embalming	yes
Shaving & Laying Out	
Casket No.	325; 4' 0"
Outside Case	
Metal Vault Style	
Candelabra	
Door Dressing	
Flowers	
Hears	
Coaches	
Clergyman	
Sexton	
Opening Grave	
Date of Funeral	December 15, 1918; 1:30 p.m.
Date of Death	December 12, 1918
Place of Death	Preble Township, Adams County, Indiana
Place of Funeral	Friedhine
Clergyman	
Date of Burial	December 15, 1918
Where Interred	Friedhine
Age	2 years, 2 months, 7 days
Color	White
Occupation	
Status	Single
Birthplace	Adams County, Indiana
Last Place of Residence	
How Long Resident of This State	
Husband's Name	
Father's Name	Ernst Scheimann
Country of Birth	Indiana
Mother's Name	Julia Conrad
Country of Birth	
Physician	Dr. Wyburn
Cause of Death	Pneumonia
Ordered By	Ernst Scheumann
Charge To	Ernst Scheumann
When Rendered	
Received on Account	December 15, 1918; by cash; Conrad; 2.00
Received on Account	December 18, 1918; by cash; Emil; 83.00
Received on Account	April 5, 1919; by cash; 45.40; (PAID 130.40)

Funeral of

Date of Funeral *Dec. 15 1918*

Hour *1:30* P. M.

Removing Remains.....

Embalming..... *K.W.*

Shaving and Laying Out.....

Casket No. *3125* Size..... *60x80*

Metal Inner Casket..... *Copper* Zinc.....

Handles No. *3 & 2*.....

Outside Case, Pine, Chestnut, Oak, Mahogany.....

Lining and Pillow Set No.....

Metal Lined Box.....

Mountings..... *Handles* Plate # *905*.....

Metal Vault, Style #..... *L.V. 7*

Box Mattress.....

Burial Robe.....

Slippers *16*..... *Gloves* *2/10*

..... *Doc. Chairs*

Personal Attendance and Assistants.....

..... *Drapery* *Candlers* *Candles*

..... *Podiatist* *Rug*

CASE EXPENDITURES

Door Dressing.....

..... *Flowers*

..... *7.45* *303* *6.50*

..... *2.00* *4.8*

..... *Porters and* *Gloves*

Funeral Notices.....

Clergyman.....

Section.....

Quartette, Soloist..... *Organist*

Delivering Box to.....

Opening Grave..... *Lining*

Vault Charges.....

Hearse.....

Coaches.....

Telegrams..... *Telephone*

Transportation Expenses.....

Date of Death *Dec 12 1918*

Place of Death *Public Tp. Adams Co Ind*

Place of Funeral *Funeral Home*

Clergyman *Brennan*

Date of Burial *Dec 15 1918*

Where Interred *Funeral Home*

Grave or Lot No..... Section.....

Location of Grave.....

Age *2* Years *7* Months *7* Days

Color *White* Occupation.....

Single, Married, Widow, Widower *Single*

Birthplace *Adams Co Ind*

Last place of residence.....

How long resident of this State.....

Husband's Name.....

Father's Name *Ernest Schumann*

Country of Birth *Ind*

Mother's Name.....

Country of Birth *Julia Conrad*

Physician *Dr. Wagoner*

Cause of Death *Tuberculosis*

Ordered by *Ernest Schumann*

Charge to *Ernest Schumann*

When rendered.....

RECEIVED ON ACCOUNT.

<i>1888</i>	<i>15</i>	<i>By cash</i>	<i>Conrad</i>	<i>2.00</i>
<i>"</i>	<i>1918</i>	<i>"</i>	<i>Ernest</i>	<i>8.00</i>
<i>April</i>	<i>5</i>	<i>"</i>	<i>"</i>	<i>4.50</i>
				<i>13.00</i>

Paid