#### MT. HOPE CEMETERY

#### INTERMENT ORDER

NT NO	OPE CEMETERY	
INTERN	MENT ORDER	
A4	of San Diego	
Off-outer	Date 3/15/95	
L. Bu	UND TO	
You are hereby authorized and instructed, so	ubject to your rules and regulations, to inter the re	mains
of Patricia Ma	ruso PA# 1177060	
inaliner	Funeral, date, time Eu 3/17/95	@11
Church, Chapel, Graveside all. on	ly merkly thell Mor	rtuary.
All Funeral cars must arrive before 3:30 p.m.	U	30
will be applied and billed to undersigned.		
War time veleran		1
100 110	4	2
Lot 725 Grave Row	Section Division/Block	_
Grave space & Care Fund	124	$\omega$
Additional spaces and care fund		300
Opening/Closing & Setup		5.0
Burial Container	<u>50,</u>	00
Handling Fees		
Flower vases - Marker setting fee	20 CARLON SANGER FOR STORY OF STORY SANGE SANGE SANGES SANGE	
Recording and filing fee	112	00
المسامة المسامة	Total Die 386	100
thered	The state of the s	
AND OF PAIN	receipt number	_
110-	Balance due	
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization and the said authorization and the said authorization are said authorization.	of the above named dec n of remains as above indicated. I certify and repr n and I agree to hold Mt. Hope Cemetery harmless and interment.	resent
I hereby authorize the interment in lot I hold under deed.	Signature	_
	Authora	_
Bignature of recorded holder of deed	City	Tip Code
/	OMEGANICA STATE OF THE STATE OF	08-07-08-08
<b>1</b>	Telephone	
_ 12100	Invoice # <u>351540</u>	
Work Order #	ACCL # 000952	
PY-593 (Rev. 8-92)	01 - <del>2   0</del>   1   1   1   1   1   1   1   1   1	



LINER ... 50.00 **新花学** (1) 45.00 RECORDING FEE

AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE," AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT ISTED ABOVE White - Customer Copy . Yellow - Remittance Copy INV NO.

NOTICE: PLEASE RENTY PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO

TOTAL DUE

386.00

E12100

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS'

A. NAME OF DECEDE	NT-FIRST (GIVEN)	18. MIDDLE	IC. LAST (FAMILY)			OF DEATH 4. SEX
A CITY OF DEATH	)		58. COUNTY OF DEA	TH-OUTSIDE CAUF.	6. NAME. RELATIONSHIP, FULL MAILING AT OF INFORMANT	DORESS AND ZIP CODE
1630	EY-WITCHELL I			ALIF. LICENSE HUMBER HE APPLYCABLE D-119	SAM DUMO, CA 92123	
ACKHONILEDGMENT OF A	I hereby	acknowledge as applicant that the	proposed dispusition stated herein is one of t and was authorized pursuant to Section 7100 of	he dissositions authorized by	BA. SIGNAPHIE OF APPLICANT—Forms tolong	permit, 88. DATE SIGNED 03/16/1995
PERMIT AUTHORIZATION OF LOCAL RESISTRAR	THIS PERMIT IS ISS SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	UED IN ACCORDANCE WITH FORMA HEALTH AND SAFE TY FOR THE DISPOSITION S	H PROVI- TY CODE PECIFIED 9A. AMOUNT OF FEE 7.00	THE RESIDENCE OF THE PARTY OF T	T ISSUED OC. SIGNATURE OF LOCAL REG	ISTRAR ISSUING PERMIT
A STATE OF THE PARTY OF THE PAR	9D. ADDRESS OF R IF DEATH OCCURR	EGISTRAR OF DISTRICT	OF DEATH— SE. A	DORESS OF REGISTRAL	R OF DISTRICT OF DISPOSITION— DUR IN ANOTHER DISTRICT IN CALIFORNIA	
HORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS			FOR CORONER'S	USE ONLY
B. CREMATION  C. DISPOSITION  THAN IN A CE  D. SCIENTIFIC US  BURIAL	SE 11A. NAME AND A	DDRESS OF CALIFORNIA	CEMETERY	ISIDE OF CALIFORNIA		HARGE OF BURIAL
CREMATION		DORESS OF CALIFORNIA	CREMATORY Curiod Realid	128, DATE CREMA	TED 12C SIGNATURE OF PERSON IN C	HARGE OF CREMATION
SCIENTIFIC USE	18A. HAME AND A	DORESS OF CALIFORNIA	FACILITY RECEIVING REMAINS	138, DATE RECE	IVED 19C, SIGNATURE OF PERSON IN C	HAPRE OF FACILITY
' TRANSIT		DORESS IN RECEIVING S CREMATED REMAINS AR	TATE OR COUNTRY WHERE HE TO BE SHIPPED	148. DATE SHIPF	14C, ADDRESS AND SIGNATURE COP PLACING WITH THE CARE	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY			NE, OR OTHER DESCRIPTION SUF- CA <u>DISTRICT</u> OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	15D. LICENSE NUMBER OF CREMATED RE- MAINS DISPOSEE —IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



City of San Diego

A 1177206	Date 3-16-45
You are hereby authorized and instructed.	subject to your rules and regulations, to inter the remains
of JOHN (94-1988	
	Europal data time
Church, Chapel, Graveside	0 10
	n. of regular work day or an extra charge of \$
will be applied and billed to undersigned.	CONTRACTOR OF THE CONTRACTOR O
CALDUSANDIA ALIGA MARKAMATAN AND MAKAMANI —	
War time veteran,	
Lot Grave Row	Section Division/Block
Grave space & Care Fund	136.00
Additional spaces and care fund	
Opening/Closing & Setup	165.0
Burial Container	
Flower vases - Marker setting fee	\ \ / /
Recording and filing fee	)/ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Sales taxes	/ Na! /
	P4, Total Due
Pair	d receipt number
ucca	Balance due
ar	
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization	of the above named deceded on of remains as above indicated. I certify and represent on and I agree to hold Mt. Hope Cemetery harmless from and interment.
I hereby authorize the interment in lot I hold under deed.	Signature
	Activos
Signature of recorded holder of deed	Cay Zip Code
	Telephons
<b>- 12101</b>	Invoice #

Work Order # E PY-593 (Rev. 8-92)

City of San Diego

Elle.	Date 3/17/95
	ibject to your rules and regulations, to interine remain
oi myra Grub	
na ash woult	Funeral, date, time AYD - as loom
	ue only: Carina cremation
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge of \$ 150
will be applied and billed to undersigned.	nalla Zhire Interneth Dres
War time veteran 270	7
Lot 56 Grave 10 Row	Section <u>3</u> Division/Block <u>5</u>
Grave space & Care Fund	Med A-8818
Additional spaces and care fund	<u> </u>
Opening/Closing & Setup	
Burial Container	<u> </u>
landling Fees	_(@).09
lower vases - Marker setting fee	
Recording and filing fee	45.0
Sales taxes	385
	Total Due
Paid	receipt number VISA 268-8
1	Balance due
hereby certify I am the X40 Ohere	of the above named decede
and this is your authority to make disposition	r of remains as above indicated. I certify and represe a and I agree to hold Mt. Hope Cemetery harmless fro
hereby authorize the interment in lot I	X// Perthat Have for enneths
NO UNDER GOOD	1 Port 36
Signature of recorded hosper of deed	Cantro TX 75497
	(903) 383 - 2674
r 12102	Invoice #
Work Order # E	Acct. #
Y-593 (Rev. 8-92)	7 1
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	arun the chest of

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

E 12102

CARING CREMAILUN

67230

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS FOUND IA. NAME OF DECEDENT-FIRST (GIVEN) 1B. MIDDLE IC LAST (FAMILY) 3. DATE OF DEATH 2. DATE OF BIRTH 4. SEX MONTH DAY YEAR MONTH DAY YEAR 09/02/191303/14/1995 GRUBBS MYRA SA. CITY OF DEATH 5B. COUNTY OF DEATH-OUTSIDE CALIF. 6. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE ENTER STATE OF INFORMANT SAN DIEGO SAN DIEGO KENNETH GRUBBS-NEPHEW 7A. TYPED NAME AND ADDRESS OF CALIFORNIA - FUNERAL DIRECTOR OR PERSON ACTING AS SUCH. 7B. CALIF, LICENSE NUMBER ROUTE #1 BOX 36 CARING CREMATION SERVICES OF S.D. -IF APPLICABLE TX 75497 YANTIS. P.O.BOX 711036 S.D. CA 92171-9972 FD-1516 BA. SIGNATURE OF APPLICANT-Person taking persit. 88. DATE SIGNED Thereby achievements as applicant that the proposed disposition stated herein is one of the dispositions authorized by Section 10376 of the Humith and Safety Code, and was authorized parasited to Section 7100 of the Humith and Safety Code. 03/21/1995 ACKNOWLEDGMENT OF APPLICANT THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE

AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED.

98. DATE PERMIT ISSUED. 9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT

03/21/1995, 9503831 PERMIT AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED **AUTHORIZATION OF** IN THIS PERMIT. \$7.00 ROSA NAVA HOTE: THIS PERMIT GIVES NO ENGLY OF DISPOSAL OUTSIDE OF CALIFORNIA. LOCAL REGISTRAR OD. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH-9E. ADDRESS OF REGISTRAR OF DISTRICT OF DISPOSITION-ANY CHANGE IN DISPOSE IF DEATH OCCURRED IN CAUPORNIA IF DISPOSITION IS TO OCCUR IN AMOTHER DISTRICT IN CAUFORNIA TION REQUIRES A NEW TO SHOW FINAL P.O.BOX 85222 SPOSITION. SAN DIEGO, CA 92186-5222 FOR CORONER'S USE ONLY THORIZED DISPOSITION(S) CHECK APPLICABLE ITEMS I. DISPOSITION PENDING-REMAINS LOCATED AT X A. BURIAL (INCLUDES ENTOMBMENT) E. TEMPORARY ENVAULTMENT (Name and Address) X F. DISINTERMENT B. CREMATION DISPOSITION OF CREMATED REMAINS OTHER G. SHIP IN TO CALIFORNIA THAN IN A CEMETERY D. SCIENTIFIC USE H, TRANSIT TO OUTSIDE OF GALIFORNIA 11A. NAME AND ADDRESS OF CALIFORNIA CEMETERY 118, DATE BURNED 11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL MT HOPE CEMETERY BURIAL 3751 MARKET ST SAN DIEGO CA 92102 12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY TURE OF PERSON IN CHARGE OF CREMATION 128. DATE CREMATED 12C. CYPRESS VIEW CREMATORY CREMATION APPLICABLE 3953 IMPERIAL AVE S.D. CA 92113 13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS ISC. SIGNATURE OF PERSON IN CHARGE OF FACILITY 13B. DATE RECEIVED SCIENTIFIC N/A USE 7 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE 14B. DATE SHIPPED 14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED OF PLACING WITH THE CARRIER TRANSIT N/A ISC. SIGNATURE OF PERSON IN 13D. LICENSE NUMBER 15A. ADDRESS, MEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUF-15B. DATE OF SCATTERING AT SEA FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT OF DISPOSITION DISPOSITION CHARGE OF DISPOSITION OF CREMATED RE-MAINS DISPOSER DISPOSITION OTHER -IF APPLICABLE

COPY 1 OF THE PERMIT ACCOMPANIES THE REMAINS TO THE STATED PLACE OF DISPOSITION. THE PERSON IN CHARGE OF DISPOSITION IS RESPONSIBLE FOR COMPLETING AND FORWARDING THE PERMIT WITHIN 10 DAYS OF DISPOSITION TO THE REGISTRAR OF THE DISTRICT IN WHICH DISPOSITION OCCURRED OF THE DISTRICT NEAREST THE POINT WHERE THE CREMATED REMAINS WERE SCATTERED AT SEA. THE LOCAL REGISTRAR MAY DESTROY ANY ORIGINAL OR DUPLICATE PERMIT AFTER ONE YEAR FROM ISSUE DATE.

COPY 1

THAN IN A CEMETERY N/A

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

PA 1177192

Date 3-17-95

or DOE, 94-230	5	JOHN	I And	
ina	F	uneral, date, time		
Church, Chapel, Graveside		: Con		J. Mortuary.
All Funeral cars must arrive befor	e 3:30 p.m. o	f regular work day or	an extra charge	of \$
will be applied and billed to under	rsigned.			
War time veteran				4
Lot Grave	_ Row	Section	Division/E	Block
Grave space & Care Fund			6	136.00
Additional spaces and care fund.			. \	
Opening/Closing & Setup			7,	165.00
Burial Container				50.00
Handling Fees		VY		1-
Flower vases - Marker setting lee		)		
Recording and filing fee		2		45,00
Sales taxes		12		
		Total	Due	386
Nim	Paid re	ceipt number		
P. 14.	1		Balance du	·X
I hereby certify I am the			of the above	named decedent
and this is your authority to make that I have the right to make this a any liability on account of said au	authorization	and I agree to hold M	Indicated, I cert	ity and represent
I hereby authorize the interment i	n lot i	Signature		7
Tions disor decis		Address	-	
Signature of recorded holder of deed		City		Zip Code
		1000		Zip Code
		Telephone		
- 1210	)3	Invoice #		
Work Order # E		Acct.#		
PY-593 (Rev. 6-92)		100000000000000000000000000000000000000		

P. BURIAL

### MT. HOPE COMETERY INTERMENT ORDER

City of San Diego

Date 3/17/95

VautUlner	Funeral, date, time MON 3/2495 @SPI
Church, Chapel, Graveside <u>deliver</u>	y only Enckrolerson Mortuary
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge of \$
will be applied and billed to undersigned.	
War time veteran	
Lot /42 Grave 5 Row -	Section / Division/Bleek /2
	\$ 126.0
Additional spaces and care fund	
	165.00
	500
Flower vases – Marker setting fee	
	<u>#5.00</u>
Sales taxes	Total Due
	Total Due
Paid	receipt number
	Balance due
I hereby certify I am the and this is your authority to make disposition	Balance due of the above named decedent n of remains as above indicated. I certify and represent n and I agree to hold Mt. Hope Cemetery harmless from
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization	Balance due of the above named decedent n of remains as above indicated. I certify and represent n and I agree to hold Mt. Hope Cemetery harmless from
I hereby certify I am the	Balance due of the above named decedent n of remains as above indicated. I certify and represent n and I agree to hold Mt. Hope Cemetery harmless from and interment.
I hereby certify I am the	Balance due of the above named decedent n of remains as above indicated. I certify and represent n and I agree to hold Mt. Hope Cemetery harmless from and interment.
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization.  I hereby authorize the interment in lot I hold under deed.	Balance due of the above named decedent n of remains as above indicated. I certify and represent n and I agree to hold Mt. Hope Cemetery harmless from and interment.  Signature
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization.  I hereby authorize the interment in lot I hold under deed.	of the above named decedent of remains as above indicated. I certify and represent n and I agree to hold Mt. Hope Cemetery harmless from and interment.  Signature  Address  City  Zp Code



#### CITY OF SAN DIEGO GALIFORNIA GENERAL INVOICE



Make Remittance Pavable to CITY TREASURER P O Box 2289

THURSDANDING Sani Diego, California 92112-Please Return YELLOW Cary with Your Payment

COUNTY DE SAN DIEGO PUBLIC ADMINISTRATOR 5201 A RUFFIN ROAD SAN DIEGO CA 92123 ACCT NO 000952

-- TREASURERS USE ONLY-PAYMENT DATE

PAYMENT REF NO-C

INVOICE DATE 03/21/95

PAYMENT DUE 04/20/95

PERIOD COVERED FEBRUARY

FOR INFORMATION CONCERNING YOUR BILLING CONTACTS JOANN WAITS REF NOT E-12104 DEPTA PROPERTY DEPT-NT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES  AMDUNT

JOHN DIE PA 117176 SERVICES LOT 142 GRAVE 5 SEC 1 DIV 12 OPENING/CLOSING -MATS 8 LINER

126-00 165-00

RECORDING FEE

50.00 数等がままれた 45.00

TOTAL DUE NOTICE: PLEASE REMIT PAYMENT PROMPTLY PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10, WHICHEVER IS GREATER. INTEREST OF 18 PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT LISTED ABOVE. White - Customer Copy Yellow - Remittance Copy

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

	US	E BLACK INK ONLY-MAK	E NO ERASURES, W	HITEOUTS OR O	OTHER ALTERATIONS FOUND
John	NT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMILY)		2. DATE OF BIRTH 3. DATE OF DEATH 4. SEX MONTH, DAY, YEAR MONTH, DAY, YEAR UNICHOWN 12/12/1992 m
San Dieg	0		San Dieg		6 NAME RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMANT San Diego County Public
Erickson	-Anderson	A FUNERAL DIRECTOR OR PERSON Mortuary , LA Mesa, CA	-	LIF. LICENSE MUMBER F APPLICABLE D296	Administrator 89123  BA SIGNATURE OF APPLICANT—Pursun thing permit, 88 DATE SIGNE
ACHNOWLEDGMENT OF M	PENCANT I bereby a Section 10	cknowledge as applicant that the proposed dis 375 of the Health and Safety Code, and was suffi	position stated herein is one of the period pursuant to Section 7150 of the	dispositions authorized by the Health and Safety Code.	DA Le x 103/17/1
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT. NOTE: THIS PERMIT GIVES IN	VED IN ACCORDANCE WITH PROVI- ORINA HEALTH AND SAFETY CODE Y FOR THE DISPOSITION SPECIFIED DIRBIT OF DISPOSAL OUTSIDE OF CALFORNIA.	\$ 7.00	03/17/1	17 ISSUED 90 SIGNATURE OF LOCAL REGISTRAR ISSUING PERMI
TICOLEGUIRES A NEW TO SHOW FINAL POSITION.	P.O. BOX	GISTRAR OF DISTRICT OF DEAT P IN CAUPOINIA 85222 O, CA 92186-52	1 1 1		R OF DISTRICT OF DISPOSITION— CUR IN ANOTHER DISTRICT IN CALIFORNIA
O. STHORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS			FOR CORONER'S USE ONLY
8. CREMATION		LINS OTHER	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	ORNIA	L DISPOSITION PENDING—REMAINS LOCATED (Name and Address)
BURIAL	The state of the s	oness of california cemete e Cemetery go, CA	RY	3/2/1/95	ED   11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL
CREMATION	13	board cremat	FORY	128. DATE CREMA	TED 12C. SIGNATURE OF PERSON IN CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND A	DDRESS OF CALIFORNIA FACILITY	Y RECEIVING REMAINS	13B. DATE RECE	IVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY
THANSIT		DRESS IN RECEIVING STATE OF CREMATED REMAINS ARE TO BE		148. DATE SHIPP	PED 14C ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR O NTIFY FINAL PLACE AND CA <u>DISTE</u>		15B. DATE OF DISPOSITION	N CHARGE OF DISPOSITION 15D. UCDISE NUMBER OF CREMATED ITS MAINS DISPOSES —IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 3/17/95

of walking off.	Dewey 150
na liner	Funeral, date, time 3/24/95 10:30 A
Church, Chapel, Graveside	E Gransid Layis-Colonial Mortual
	30 p.m. of regular work day or an extra charge of \$ 150
will be applied and billed to undersign	
War time veteran	
Lot 159 Grave - Ro	ow - Section 3 Division/Bleek 8
60.0	11- New D-3421 D.I.P. O
Grave space & Care Fund	DAID (6-1232)
Additional spaces and care fund	PAID 275 A
Opening/Closing & Setup	MAD 91 1005 /90
Burial Container	MAR 21 1995 /90.1
Handling Fees	T. HOPE CEMETERY
Flower vases - Marker setting feeting	Y of SAN DIEGO, CALIF
Recording and filing fee	45.00
Sales taxes	<i>13.3</i> 0
by Saxor	Total Due
126-0861	Paid receipt number (Pd) MASTERIARD 768
3414	Balance due
1 V 4 50	and off deares as the share assess deared
and this is your authority to make disp that I have the right to make this autho	position of remains as above indicated. I certify and represe prization and I agree to hold Mt. Hope Cemetery harmless fro
and this is your authority to make disp that I have the right to make this author any liability on account of said authori	position of remains as above indicated. I certify and represe orization and I agree to hold Mt. Hope Cernetery harmless fro zation and interment.
and this is your authority to make disp hat I have the right to make this author any liability on account of said authori- hereby authorize the interment in lot	position of remains as above indicated. I certify and represe orization and I agree to hold Mt. Hope Cernetery harmless fro zation and interment.
and this is your authority to make disp that I have the right to make this author any liability on account of said authorial I hereby authorize the interment in lot hold under deed.	position of remains as above indicated. I certify and represe orization and I agree to hold Mt. Hope Cernetery harmless fro zation and interment.
	position of remains as above indicated. I certify and represe orization and I agree to hold Mt. Hope Cernetery harmless fro zation and interment.
and this is your authority to make disp that I have the right to make this author any liability on account of said authorian hereby authorize the interment in lot hold under deed.	position of remains as above indicated. I certify and represent a substitution and I agree to hold Mt. Hope Cernetery harmless from the substitution and interment.  I Superhore Serving United 9197.  Vision of remains as above indicated. I certify and represent a substitution of the sub

E 12105

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

A. NAME OF DECEDE	The second second	18. MIDDLE	1C. LAST (FAMILY)	Market State of State		2. DATE OF BIRTH	3. DATE O		4. SEX
WILLARD		MORRIS	DEWEY			01/17/1918	03/17	/1995	H
A CITY OF DEATH			58. COUNTY OF DEA	A A STATE OF THE PARTY OF THE P	THE REAL PROPERTY AND ADDRESS OF THE PARTY AND	RELATIONSHIP, FULL N	Harman Marie Commercial Commercia	and the same of the	o Deminson
CHULA VIST			SAN DIEG		ROBI	ERT VROEGIN			HER
TEMIS COL	LONIAL/BENB	A-FUNERAL DIRECTOR OR PER OUGH MORTUARY SAN DIEGO, GA 9	-	IF APPLICABLE	CAR	LSBAD, CA 9	2008		E SIGNED
ACKNOWLEDGMENT OF A	milioner   I hereby a	chrowledge as applicant that the propuse 176 of the Health and Safety Code, and we	of dispusition stated become ones of the	in dispositions authorized by	► 9	ten low	reason money perm		20/19
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	JED IN ACCORDANCE WITH PROPOSITION HEALTH AND BAFETY CITY FOR THE DISPOSITION SPECIES OF CRUEN OF CRUEN	OVI- ODE FIED \$7.00	ASSESSMENT OF PERSONS ASSESSMENT ASSESSMENT AS ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSME	CONTRACT OF	SIGNATURE OF LO	CAL REGIST	RAR ISSUM	FIMIT
NY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL SPOSITION.	IF DEATH OCCURRE	RDSP.O. BOX	85222 "	DEFESS OF REGISTRAR DISPOSITION IS TO OCCU			RPRA		
THORIZED DISP	OSITION(S) CHECK A					FOR COR	ONER'S U	SE ONLY	1
B. CREMATION C. DISPOSITION THAN IN A CE O. SCIENTIFIC US BURIAL	SE	DRESS OF CALIFORNIA CEN	- Annie Santonia de Santonia	ORNIA SIDE OF CALIFORNIA	D   11C.	SIGNATURE OF PER	SON IN CHA	AGE OF BU	IRIAL
CREMATION	12A. NAME AND AD	DDRESS OF CALIFORNIA CHE	MATORY	12B DATE CHEMAT	ED 12C	SIGNATURE OF PER	SON IN CHAR	RGE OF CRE	EMATION
SCIENTIFIC USE	13A. NAME AND AL	ODRESS OF CALIFORNIA FAC	OLITY RECEIVING REMAINS	ISB. DATE RECEI	VED 13C	SIGNATURE OF PER	ISON IN CHA	RGE OF FA	ACILITY
TRANSIT		DDRESS IN RECEIVING STATE CREMATED REMAINS ARE TO		14B DATE SHIPPI	ED   14C	ADDRESS AND SIGN OF PLACING WITH 1			CHARGE
SCATTERING AT SEA		REST POINT ON SHORELINE, O		15B. DATE OF DISPOSITION		SIGNATURE OF PER CHARGE OF DISPOS		SD. LICENSE OF CREM.	ATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN HARGE OF DISPOSING OF THE CREMATED REMAINS.

City of San Diego

Date 3-20-95

or ganes of the	aug
	Funeral, date, time 3/31/95 TUBS 1/A
Church, Chapel, Graveside Grave	veside : Paris Fridaich Mortua
All Funeral cars must arrive before 3:3	30 p.m. of regular work day or an extra charge of \$ 150
will be applied and billed to undersign	ed. X PM
War time veteran	
101 351 Grava - B	ow — Section 3 Division/Block 8
	nud 6 D-2732 &
	2
Additional spaces and care fund	2n5 D
Opening/Closing & Setup	PAID
Burial Container	
Handling Fees	MAR 2 1 1995
Flower vases - Marker setting fee	
Abbridge Committee Committ	HOPE CEMETERY 46.0
	of SAN DIEGO, CALIFI
Adul	Total Dug # 768-
ito	Paid receipt number LSC # 4608 # 192.
	Balance due 576:-
I hereby certify I am the X	andaughter of the above named decede
and this is your authority to make disp	position of remains as above indicated. I certify and repress orization and I agree to hold Mt. Hope Cemetery harmless fro
any liability on account of said authori	zation and interment.
	Vin Mitcholl
I hereby authorize the interment in lot hold under deed.	1 Sprawa 20 Comment
***************************************	1500 Mings
Signature of recorded holder of deed	- X Ef Cayon CH 920
anglination of recorded fromth of dates.	11/11/12/12/1
	79909009
	Trieghone Trieghone
	Invoice #

PY-1012 (11-88)

En1. 30

W.O. # E- 12106

### NOTE

\$ 576.30	San Diego, California	march	20 199
Thirty days after date for value received, the undersign	ned maker promises to pa	y San Diego City	Treasurer, or order
3751 Market Street, San Diego, CA 92101, the sum of	Five Hundred Se	verty Six ?	39/00 DOLLAR
with interest from april 21	, 1995	on	the unpaid princip
at the rate of 12 percent per annum, payable on dem			
Should this note not be paid when due, it shall the accrue at the rate indicated above. Principal and interwill be liable and consents to renewals, replacement maturity, and waives presentment, demand and prot person who signs this note agrees that recourse ma contained herein. If any action be instituted on this may fix as attorney's fees.	est are payable in lawful n s and extensions of time est and the right to asser y be held against his/her	noney of the Unit for payment here t any statute of li separate proper	ted States. The make eof before, at or afte limitations. A marrie rty for any obligatio
Part II, Chapter I, Article 2, Paragraph 752 authorizes the removal of any remains from a			
PRINT NAME PMITCHELL	SIGNATURE BIN	mith	ell
ADDRESS 58 DannySt ElCo	yon @ 92	1508	
CALIFORNIA DRIVER LICENSE NUMBER 1031313	734 ssn	<u>5500</u>	86606

# WHITE TO CUSTOMER CANARY CEMETERY NIK AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

romParr Midel	Dry h	lundred muty Su tarment of Jane	Magnolia De Addy	ANG. 192	00;
ot 351	Grave	- Row -	Section	Division Block	8
v.o. <u>E 13 106</u>	e.30	NOT VALID FOR PURPOSE STATED UNLESS STAMPE "PAID" IN THIS SPACE.	20% Sales Care 77 80% Sales of Lots 77 Opening/ Closing 77 Burial Containers 77 Handling Fee 77 Recording 5	100 184 100 181 100 182 100 185	. 00
re-Need Lot	On Acct Check D 3500 3-31-95	ISSUED BY The Clark	Pre-Need 63 Trust 9	183 133 133 101 190 \$	0

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY 527-3400

		Date:	with al	
From Ham Phetchell	Address: 538 Danny	hSt. El	Cajon	92021
two Hundred.	Seventy Sex 1 3400-	D	ollars (\$ _57/	.365
nPayment of	Enterment of Dan	et Ado	ty.	2
	0.0			
ot Grave	Flow S	ection	Division	
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 20% Sales Care	67007 77184	
Acct. No.	PAID IN THIS SPACE	80% Sales Care of Lots	100 77184	
N.O. E-12/06	THE RESERVE THE PARTY OF THE PA	Opening/ Closing	77181	15 99
2	The state of the s	Burial Containers	77182 100 100	500
BALANCE DUE	THE RESERVE THE PARTY OF THE PA	Handling Fee Recording &	100 4	500
Pre-Need Lot	A TOTAL DESTRUCTION	Misc Fees Pre-Need Trust	77183 63033 9022	
Pre-need Trust  Cash Check	an I	Sales Tax	60101 78390	30
AC-212 (Rev. 5-94)	ISSUED BY M Clark	TOTAL PAID	1 57	6 30

E12106

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

JANET	ENT—FIRST (GIVEN) 1B. MIDDLE MARIE	IC. LAST (FAMILY)		2. DATE OF BIRTH 06/07/1910		4 SEX
LA MESA		SAN DIEGO	OUTSIDE CALIF., E. N.	AND DESCRIPTION OF THE PARTY OF	GRANDDAUGHT	
PARIS-FRED	DDRESS OF CALIFORNIA—FUNERAL DIRECTOR OF PERSO ERICK MORTUARY NOLIA AVE., EL CAJON, CA 92	-#F/	PPLICABLE EL	BB DANNY STRE CAJON, CA 9 BIGNATURE OF APPLICANT	2021 7 First taking perget, 88. DAT	E SIGNED
ACHNOWLEDGMENT OF A	PPLICANT I benefity acknowledge as applicant that the proposed di Section 10376 of the Health and Safety Code, and was appli-			Jay 9)U	ance 1:03/2	1/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI BIONS OF THE CALIFORNIA HEALTH AND SAFETY COD AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT.  RUTE THIS PERMIT GIVES NO RIGHT OF DEPOSAL OWISING OF CALFORNIA	7.00	03/21/1995 PEGGY VANC	9503832	LOCAL REGIŌTRAR ISSUIN	G PERMIT
ANY CHANGE IN DISPOSI- TION EROURES A NEW POSITION.	9D ADDRESS OF REGISTRAR OF DISTRICT OF DEA IF DEATH OCCURRED IN CAUFORNIA P.O. BOX 85222 SAN DIEGO, CA 92186-5222			DISTRICT OF DISPOSITION ANOTHER DISTRICT IN CAL		
IO AUTHORIZED DISP	OSITION(S) CHECK APPLICABLE ITEMS			FOR CO	PRONER'S USE ONLY	
teres.						
B. CREMATION	SE	E. TEMPORARY ENVAUL F. DISINTERMENT G. SHIP IN TO CALIFORI H. TRANSIT TO OUTSIDE	NIA E OF CALIFORNIA	Olame and		
8. CREMATION C. DISPOSITION THAN IN A CI	OF CREMATED REMAINS OTHER	F. DISINTERMENT G. SHIP IN TO CALIFORI H. TRANSIT TO OUTSID	NIA	Olame and		
B. CREMATION C. DISPOSITION THAN IN A CI D. SCIENTIFIC U	OF CREMATED REMAINS OTHER EMETERY SE  11A NAME AND ADDRESS OF CALIFORNIA CEMET MOUNT HOPE CEMETERY	F. DISINTERMENT G. SHIP IN TO CALIFORE H. TRANSIT TO OUTSIDE ERY GO, CA	NIA E OF CALIFORNIA	Olame and	Address)	HAL
B. CREMATION C. DISPOSITION THAN IN A CT D. SCIENTIFIC U	OF CHEMATED REMAINS OTHER EMETERY SE  11A. NAME AND ADDRESS OF CALIFORNIA CEMET MOUNT HOPE CEMETERY 3751 MARKET ST., SAN DIE	F. DISINTERMENT G. SHIP IN TO CALIFORI H. TRANSIT TO OUTSIDERY GO, CA	TIB. DATE BURIED  3/2//95  128. DATE CREMATED	11C SIGNATURE OF PE	ERSON IN CHARGE OF BU	MATION
B. CREMATION C. DISPOSITION THAN IN A CT D. SCIENTIFIC U	OF CREMATED REMAINS OTHER EMETERY SE  11A NAME AND ADDRESS OF CALIFORNIA CEMET MOUNT HOPE CEMETERY 3751 MARKET ST., SAN DIE	F. DISINTERMENT G. SHIP IN TO CALIFOR H. TRANSIT TO OUTSIDE ERY GO, CA TORY TY RECEIVING REMAINS OR COUNTRY WHERE	TIB. DATE BURIED  3/2//95  128. DATE CREMATED	11C SIGNATURE OF PE	ERSON IN CHARGE OF BE ERSON IN CHARGE OF CRE ERSON IN CHARGE OF FA	MATION SCILITY

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

INTER	MENT ORDE	R	
City	of San Diego		
come		Date 3-20	95
You are hereby authorized and instructed, s	ubject to your rules ar	nd regulations, to in	iter the remai
of Shipichi YONE	KURA &	FRI 20	1
ina ASH VAULT	Funeral, date, time	SAT 3-25-	95@11
Church, Chapel, Graveside CRIAVES	DE Le	wis Col	Mortua
All Funeral cars must arrive before 3:30 p.m	of regular work day	or an extra charge	ot \$ 150
will be applied and billed to undersigned.	BITTE	Kuse	cha
War time veteran NO .		- /	
Lot 38 Grave / AHA Row -	Section	// Division/Bi	7
	The state of the s	-5423	B
Grave space & Care Fund PRE-N	CV CV II	212	-
Additional spaces and care fund	CO - X /03	7.7/	0
Opening/Closing & Setup	20 0-00	7.21	0
Burial Container PRE NO	ED D-03	od!	-0
Handling Fees			-0
Flower vases - Marker setting fee			0
Recording and filing fee PRE	NEED D-	6321	0
			0
NEA: 1284 KULD Paid	Total	al Due	0
Paid Paid	receipt number	DE-15	
KHJO		Balance due	0
Heroby Certary I ain use		of the above n	
and this is your authority to make dispositio that I have the right to make this authorization any liability on account of said authorization	n and I agree to hold I	e indicated. I certif Mt. Hope Cemeter	and represe harmless fro
	VA	+4	
hereby authorize the interment in lot I hold under deed.	#gp#turs	cy pu	raka
note discer deed.	21	9 60 8	<u> </u>
Signature of recorded holder of deed	1 Che	un The	stal.
/	X 911	210 11.	71-12
/	Telephone	10 4-	0 19
- 12107	Telephone	10 4	0 /9

PY-593 (Rev. 8-92)

67229 F 1 2 10

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

TA. NAME OF DECEDE	NT-FIRST (GIVEN)	18. MIDDLE	10. LAST (FAMILY)		2. DATE OF BIRTH 3. DATE OF DEATH 4. SEX
SHIQLCH	I		YONEKU	RA	MONTH DAY YEAR MONTH DAY YEAR M
SA CITY OF DEATH			58. COUNTY OF DEATH	H-OUTSIDE CALIF.,	6: NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMANT
	A VISTA		SAN DIEGO		BETTY KUSAKA - SISTER
LEWIS COLO	MIAL/BENBO	DGH HORTUARY		LIF. LICENSE NUMBER F APPLICABLE	219 'D' STREET CHULA VISTA, CA 91910
3051 EL CA	JOH BIAD 21	AN DIEGO, CA 92	104 F	D 480	BA. SIGNATURE OF APPLICANT—Person taking permit, BB. DATE SIGNED
ACKNOWLEDGMENT OF A			sed disposition stated becomes one of the res authorized pursuant to Section 7100 of th		► COW 10~ 03/21/199
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	IED IN ACCORDANCE WITH P ORNIA HEALTH AND SAFETY TY FOR THE DISPOSITION SPEC I MEET OF DEPOSAL QUISIDE OF CILL	S7.00	3 / 2 1 /	1995 A PARTIE OF LOCAL REGISTRAN ISSUING PERMIT
		GISTRAR OF DISTRICT OF DISCASSIFORM BOX CA 92186-5222	85222 F		OF DISTRICT OF DISPOSITION— UN IN ANOTHER DISTRICT IN CAUFORNIA
O AUTHORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS			FOR CORONER'S USE ONLY
B. CREMATION C DISPOSITION THAN IN A CE D SCIENTIFIC US		AINS OTHER	F. DISINTERMENT G. SHEP IN TO CALIFO H. TRANSIT TO OUTS		(Name and Address)
BURIAL		DDRESS OF CALIFORNIA CE CHARTERY T STREET SAN	DIEGO, CA 92102	3/34/95	D 110 BIGNATURE OF PERSON IN CHARGE OF BURIAL
CREMATION	CYPRESS V	DORESS OF CALIFORNIA OF TRW CREMATORY/N RIAL AVE SAN DI	AUSOLEUH	128. DATE CREMA	TED 12C MATURE OF PERSON IN CHARGE OF CREMATION
SCIENTIFIC	13A, NAME AND AC	DORESS OF CALIFORNIA FA	CILITY RECEIVING REMAINS	138. DATE RECEI	VED 13C SIGNATURE OF PERSON IN CHARGE OF FACILITY
TRANSIT		DORESS IN RECEIVING STAT CREMATED REMAINS ARE T		14B. DATE SHIPP	ED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE GARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, NTIFY FINAL PLACE AND CA	OR OTHER DESCRIPTION SUF- DISTRICT OF DISPOSITION	158 DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION CHARGE OF DISPOSITION CF CREMATED REMAINS DISPOSER OF APPLICABLE

COPY 3 OF THE PERMIT IS TO BE RETURNED TO THE COUNTY OF DEATH WHEN THE REMAINS ARE DISPOSED OF IN ANOTHER DISTRICT, IF NOT APPLICABLE, COPY 3 MAY BE DISCARDED. THE LOCAL REGISTRAR MAY DESTROY ANY ORIGINAL OF DUPLICATE PERMIT AFTER ONE YEAR FROM SUE DATE.

#### City of San Diego

Date 3-20-95

n - 40 , n 0	d. 04 1000 0 100
VasIM inac	ral, date, time Thurs IPM 3 23
Church, Chapel, Graveside Spaniside	: Featherwall Mortuary.
All Funeral cars must arrive before 3:30 p.m. of re-	gular work day or an extra charge of \$ 150
will be applied and billed to undersigned. 📈 🧷	n. B.
War time veteran	
ot 32 Grave 10 Row —	2 5444
	- A CONTRACTOR OF THE PARTY OF
Grave space & Care Fund(RD) Rul-	11ea E-1054 6
Additional spaces and care fund	-
Opening/Closing & Setup	33.a
Burial Container	380.00
Handling Fees	320.a
lower vases - Marker cetting fee	
Recording and filing fee	42.00 45 00
A - A	26.60
Lid in Kee	Total Due 11 23 30 14 14 - 6
Touch and.	pt number
Paid receip	pt number
100	Balance due
hereby certify I am the Lough	of the above named decedent emains as above indicated. I certify and represent
hat I have the right to make this authorization and in liability on account of said authorization and in	I agree to hold Mt. Hope Cemetery harmless from
my easily on account of sale authorization and a	memeric.
hereby authorize the interment in lot I	May Davron
old under deed.	Signifure
	10 4348 - MS No tak ST
ignature of recorded holder of deed	By S D CA 9010 20 Cook
	Tappione O A 2 - a LIA
	Invoice 2 5150 2 5180
40400	Invoice # 45 700 3 3 100
<b>=</b> 12108	
Vork Order # E 12108	Acct # 0847# 0847

MT. HOPE CEMETERY	w	1.0.# E-12108
45 DAY	NOTE	
\$ 1173.30	San Diego, California	march 20 19 95
Thirty days after date for value received, the un 3751 Market Street, San Diego, CA 92101, the	sum of Eleven Hundry	Seventy three Bloodollars
	ry 5, 1995	on the unpaid principal
at the rate of 12 percent per annum, payable of	on demand.	
Should this note not be paid when due, it is accrue at the rate indicated above. Principal ar will be liable and consents to renewals, replace maturity, and waives presentment, demand ar person who signs this note agrees that recourant contained herein. If any action be instituted or may fix as attorney's fees.	nd interest are payable in lawful m cements and extensions of time for and protest and the right to assert arse may be held against his/her	oney of the United States. The maker or payment hereof before, at or after any statute of limitations. A married separate property for any obligation
Part II, Chapter I, Article 2, Paragra authorizes the removal of any remains to		
PRINT NAME MARY BARRON	signature m	vy Daron
ADDRESS 4348 My Clintock ST	+1 San Duego,	Ca. 92105
CALIFORNIA DRIVER LICENSE NUMBER RO90	6339 ssn#	, 425-30-3558

E12108

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

	NT-FIRST (GIVEN)	18 MIDDLE		1C. LAST (FAMILY)			2. DATE OF BIRTH		OF DEATH	4. SEX
JEREMIAH		C.		HYRICK			08/31/1929	0371	971995	M
CITY OF DEATH				58. COUNTY OF DEAT	H-OUTSIDE CALIF.		RELATIONSHIP, FULL I	MAILING ADI	DRESS AND Z	IP CODE
San Dieg	go			SIR Wiego	)		Barron, fr	iend		
TYPED NAME AND AD	DORESS OF CALIFORN	IA-FUNERAL DI	RECTOR OR PERSON	ACTING AS SUCH 7B. CA	LIF LICENSE NUMBER	MODERN STREET, STR	McClintock			
FEATH	ERINGILL MO	RTUARY	6322_E1 C	ajon Blyd.	4000		Diego, CA 9		110	
100000000			San Diego	THE RESIDENCE OF THE PERSON NAMED IN COLUMN 2 IN COLUM	and the second	BA. SIGNA	TUBE OF APPLICANT-	Figure taking pe	emit, 8B, DAT	E SIGNED
ACTIONLEDGMENT OF A				position stated ferms is one of the orized purposed to Section 7100 of the		Di	REDMARUS	V.	03/2/	11995
PERMIT UTHORIZATION OF OCAL REGISTRAR	THIS PERMIT IS ISSI SIONS OF THE CALIF AND IS THE AUSTROPE IN THIS PERMIT. NOTE: THIS PERMIT GIVES I	FORNIA HEALTH TY FOR THE DISE	AND SAFETY CODE POSITION SPECIFIED	\$7.00	98. DATE PERMIT 03/21/199 Edward Feet	5	9503841	OCAL REGIS	STRAR ISSUM	IG PERMIT
THE REAL PROPERTY AND ADDRESS OF THE PARTY O		ED IN CAUFORNIL		I IF	DRESS OF REGISTRAN DISPOSITION IS TO OCCU	OF DISTR				
THORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEM	AS.				FOR COR	RONER'S	USE ONL	Y
A. BURIAL (INCLU	IDES ENTOMOMENTO		- [	E. TEMPORARY ENV	ALII TMENT		IT L DISPOSITION	PENDING	REMAINS L	OCATED AT
B. CREMATION	OF CREMATED REM	AINS OTHER		F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	OHNIA		(Name and /			JONIES H
B. CREMATION C. DISPOSITION THAN IN A CE	OF CREMATED REM		[ [ ALIFORNIA CEMETE	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	OHNIA	)   116.		Address)	HARGE OF B	
B. CREMATION C. DISPOSITION THAN IN A CE	OF CREMATED REM EMETERY SE 11A. NAME AND A	DORESS OF CA		F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	ORNIA SIDE OF CALIFORNIA	1110	(Name and /	Address)	HARGE OF B	
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC BY	OF CREMATED REM EMETERY SE 11A. NAME AND A Mt. Hope San Die	DORESS OF CA		F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	ORNIA SIDE OF CALIFORNIA		(Name and /	Address)	3333	URIAL
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US	OF CREMATED REM EMETERY SE 11A. NAME AND A Mt. Hope San Die 12A. NAME AND A	DORESS OF CA	TY ALIFORNIA CREMAT	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	OFFINIA  11B. DATE BURIED  12B. DATE CREMAT	ED 120	SIGNATURE OF PER	Address) RSON IN CH	ARGE OF CR	URIAL
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US BURIAL CREMATION SCIENTIFIC	OF CREMATED REMEMETERY SE  11A. NAME AND A  Mt. Hopi San Dis  12A. NAME AND A  13A. NAME AND A	DORESS OF CA	CY ALIFORNIA CREMAT ALIFORNIA FACILITY	F. DISINTERMENT G. SHIP IN TO CALIFI H. TRANSIT TO QUIS	OFFINIA  11B. DATE BURIED  12B. DATE CREMAT	ED 12C	SIGNATURE OF PER	Address)  RSON IN CH	HARGE OF F	EMATION  ACILITY

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

City of San Diego

Date 3-20-95

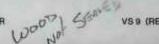
ina Liner	Funeral, date, time WED 3/39/95	DIA
Church, Chapel, Graveside Del. 6	11 Balling	Mortuary
All Funeral cars must arrive before 3:30 p.m.	. of regular work day or an extra charge of \$	
will be applied and billed to undersigned		
War time veteran		
Lot 12 Grave 1 Row	Section Division/Block	12
Grave space & Care Fund	la	6.00
Additional spaces and care fund		9
Opening/Closing & Setup	- 1/2	5a
Burial Container	50	1.00
Handling Fees		9
Flower vases - Marker setting fee		9
Recording and filing fee	45	00
Sales taxes		7
1 Martin	Total Due	200
Paid Paid	receipt number	
par - a	Balance due	
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization	of the above named on of remains as above indicated. I certify and on and I agree to hold Mt. Hope Cemetery harm and interment.	epreser
I hereby authorize the interment in lot I	Signature	
I hereby authorize the interment in lot I hold under deed.	Signeture	
		Zip Coo
hold under deed.	Address	Zip Coc
hold under deed.	Address	Zip Coc

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

	NT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMIL	Y)		2. DATE OF BIRTH MONTH, DAY, YEAR	3. DATE OF D		4. SEX
ROEIN .		-	DOE		- 9	NWORDBY	01/24/1	995	西
A. CITY OF DEATH					OF INF	RELATIONSHIP, FULL M ORMANT			CODE
CEANSIDE			SAN DIE	GO I	PUBL	IC ADMINI	STRATOR		
A. TYPED NAME AND AD	DRESS OF CALIFORN	IA-FUNERAL DIRECTOR	OR PERSON ACTING AS SUCH 78		5201	A RUFFIN I	ROAD		
PARK CREST	FUNERAL	HOME	i	-IF APPLICABLE	SAN I	DIEGO, CA	92123		
2441 UNIVE	RESITY AV	E. SAN DI	EGO, CA 92104			TURE OF APPLICANT		BB. DATE	SIGNED
ACKNOWLEDGMENT OF AP	murant I hereby a	acknowledge as applicant that I	he proposed disposition stated herein is one	of the dispositions authorized by	Ind	Nath.	1 13	1/201	1,00
			de, and was authorized pursuant to Section 710 WITH PROVI- 9A. AMOUNT OF F		eaven (	C SIGNATURE OF LO	PAL REGISTRAS	ISSUING	PERMI
PERMIT	SIONS OF THE CALIF	ORNIA HEALTH AND SATY FOR THE DISPOSITION	FETY CODE		1		4	5	FERMI
UTHORIZATION OF	IN THIS PERMIT			03/29/	1995	1	Refere	2	>
	The second second second second second	IO RIGHT OF DISPOSAL OUTSIDE EGISTRAR OF DISTRIC	CONTRACTOR OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO	ADDRESS OF REGISTRAR (		CT OF DISPOSITION.		-	
NY CHANGE IN DISPOSI-	IF DEATH OCCURRE	D IN CALIFORNIA	OF DEATH—	IF DISPOSITION IS TO OCCUP			RNIA		
PERMIT TO SHOW FINAL	PO BOX 8								
British State Stat		O, CA 9218	36-5222						
THORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS				FOR COR	ONER'S USE	ONLY	
A BURIAL (INCLU	DES ENTOMBMENT)		E TEMPORARY	ENVAULTMENT			PENDING REM	AINS LOC	
			The state of the s						CATED A
B. CREMATION			F. DISINTERMENT			(Name and A	ddress)		CATED A
C DISPOSITION	OF CREMATED REM	AINS OTHER	F. DISINTERMENT			(Name and A	ddress)		CATED A
Service Control of the Control of th	METERY	AINS OTHER	G. SHIP IN TO CA			(Name and A	ddress)		CATED /
C DISPOSITION O	METERY SE		G. SHIP IN TO CA	ALIFORNIA DUTSIDE OF CALIFORNIA	110			AF N	THE THE TANK
C DISPOSITION OF THAN IN A CE	METERY SE 11A. NAME AND A	DDRESS OF CALIFORN	G. SHIP IN TO CA	ALIFORNIA	110.	(Name and A		E OF BUR	THE THE TANK
C DISPOSITION O	IIA. NAME AND A	DDRESS OF CALIFORN	G. SHIP IN TO CA	ALIFORNIA DUTSIDE OF CALIFORNIA	1110.			E OF BUR	THE THE TAN
C DISPOSITION OF THAN IN A CE	METERY 11A NAME AND A MT HOPE SAN DIEG	DDRESS OF CALIFORN CEMETERY O, CA	G. SHIP IN TO CA	DUTSIDE OF CALIFORNIA		SIGNATURE OF PER	SON IN CHARGE		NAL
C DISPOSITION OF THAN IN A CE	IIA. NAME AND AN HOPE SAN DIEG	DDRESS OF CALIFORN CEMETERY O, CA DDRESS OF CALIFORN	G. SHIP IN TO CA	ALIFORNIA DUTSIDE OF CALIFORNIA			SON IN CHARGE		RIAL
C DISPOSITION OF THAN IN A CE	IIA. NAME AND AN HOPE SAN DIEG	DDRESS OF CALIFORN CEMETERY O, CA DDRESS OF CALIFORN	G. SHIP IN TO CA	DUTSIDE OF CALIFORNIA		SIGNATURE OF PER	SON IN CHARGE		RIAL
C DISPOSITION OF THAN IN A CE D. SCIENTIFIC US BURIAL	IIA. NAME AND AN HOPE SAN DIEG	DDRESS OF CALIFORN CEMETERY O, CA	G. SHIP IN TO CA	DUTSIDE OF CALIFORNIA		SIGNATURE OF PER	SON IN CHARGE		RIAL
C DISPOSITION OF THAN IN A CE D. SCIENTIFIC US BURIAL CREMATION	ITA. NAME AND AI MT HOPE SAN DIEG	DDRESS OF CALIFORN CEMETERY O, CA DDRESS OF CALIFORN	G. SHIP IN TO CA	DUTSIDE OF CALIFORNIA  118. DATE BURIED  128. DATE CREMATE	D 12C.	SIGNATURE OF PER	SON IN CHARGE	OF CREA	NATION
C DISPOSITION OF THAN IN A CE D. SCIENTIFIC US  BURIAL  CREMATION  SCIENTIFIC	ITA. NAME AND AI MT HOPE SAN DIEG	DDRESS OF CALIFORN CEMETERY O, CA DDRESS OF CALIFORN	G. SHIP IN TO CO. H. TRANSIT TO CO. NIA CEMETERY NIA CREMATORY SUBJECT	DUTSIDE OF CALIFORNIA  118. DATE BURIED  128. DATE CREMATE	D 12C.	SIGNATURE OF PERS	SON IN CHARGE	OF CREA	NATION
C DISPOSITION OF THAN IN A CE D. SCIENTIFIC US BURIAL CREMATION	ITA. NAME AND AI MT HOPE SAN DIEG	DDRESS OF CALIFORN CEMETERY O, CA DDRESS OF CALIFORN	G. SHIP IN TO CO. H. TRANSIT TO CO. NIA CEMETERY NIA CREMATORY SUBJECT	DUTSIDE OF CALIFORNIA  118. DATE BURIED  128. DATE CREMATE	D 12C.	SIGNATURE OF PERS	SON IN CHARGE	OF CREA	NATION
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COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.





### CITY OF SAN DIEGO, CALIFORNIA

5.52

## Make Remittance Payable to CITY TREASURER P.Q.Box 2289

San Diego, California 92112

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

Received

5-4-9 STREASPRERS USE

BYE CA CK IF

PAYMENT REF NO 04-806636 | AMT PAID: \$386.00

INVOICE DATE 03/30/95 04/29/95

PERIOD COVERED

JOANN WAITS REF NOT E-12109
DEPT - PROBERTY DEPT MITHOPE CEMETERY 619 527 3400

POSTO DESCRIPTION OF CHARGES

AMOUNT

JOHN DUE PA LLT7L84 SERVICE LOT 12 GRAVE 1 SEC 1 DIV 12 OPENING/CLOSING

LINER RECORDING FEE 165.00 50.00

126.00

TOTAL DUE

386-00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10, WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT LISTED ABOVE.

White-Customer Copy \* Yellow-Remittance Copy

White-Customer Copy \* Yellow-Remittance Copy

City of San Diego

Date 3-20-95

You are hereby authorized and instructed, so or YONEKURA		
ina Ash Vault	Funeral, date, time	SA+ 3-25, 10:00A.
Church, Chapel, Graveside GRAVE		
All Funeral cars must arrive before 3:30 p.m.	of regular work day or	an extra charge of \$
will be applied and billed to undersigned		
War time veteran		
Lot Grave Row	Section	Division/Block
Grave space & Care Fund		4
Additional spaces and care fund	( ) ~ ~ ~	
Opening/Closing & Setuh	1/12	1
Burial Container	/ 10	
Handling Fees	10	
Flower vases - Market setting fee	/\ O.T	210,00
Recording and filing fee	/	
Sales taxes QU		
	Total	Due
Paid	receipt number	
		Balance due
I hereby certify I am the		of the above named decedent
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization	n and I agree to hold Mi	Indicated. I certify and represent t. Hope Cemetery harmless from
I hereby authorize the interment in lot I hold under deed.	Signature	
	Address	
Bignature of recorded holder of deed	CIN	Zip Gode
	Telephone	
- 12110	invoice #	
Work Order # E 12110	Acct.#	
DV 502 (Dev. 9.02)	NO 050 11 (7)	

City of San Diego

Date 3/20/95

	avid L		A THE REAL PROPERTY AND A SECOND PORCE.	The state of the s	7
ina ash 1	PAULT	Funeral,	date, time M	ON 3/2	7/501A
Church, Chapel,	Graveside GRA	VESIDE	_: CYPK	255 VI	Mortuary.
All Funeral cars n	nust arrive before 3	:30 p.m. of regula	work day or a	n extra char	ge of \$ 1500
will be applied an	d billed to undersign	ned W	OHIV	just	
War time veteran	NO.	CA	Juce	/	
Lot 114 0	Grave 4 F	lows	Section 2	Division	Block 12
Grave space & C	are Fund	need (4)	D-85	36	<u> </u>
Additional spaces	s and care fund	*****			
Opening/Closing	& Setup			7	105.00
Burial Container.		PA	IU_		55.00
Handling Fees	1				
Flower vases – M	farker setting fee	MAR 21	1995		-0
	ing fee	MT. HOPE	PMETER	z	45.00
Sales taxes		TTY of SAND	IEGO, CAL	E	3.85
			Total C		268.85
		Paid receipt no	umber REC-	# 41004	2 268.85
	0	,		Balance o	tue D
hereby certify I a	am the X DVO	Hita.			e named deceden
and this is your a that I have the rig	uthority to make dis ht to make this auth	orization and I ag	ree to hold Mt.	dicated. I ce Hope Ceme	rully and represent tery harmless from
any liability on ac	count of said author	rization and intern	nent.	1	1/
l barretor and barbara	a the listening and to the	. 00	Alka	This	Shr
hold under deed.	e the interment in lo	黄		Guntle	011.11)1011
		()	The state of the s	V/C0	03/14
Signature of recorded hold	ser of dead	X ST	THAT E	1270.	Zip Gode
	/	Traff	Hohone -	024	
Side L	12111	Inv	voice #		

CYPRESS VIEW 67248 = 12111

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

TA. NAME OF DECEDE	NT-FIRST (GIVEN)	Marcus	Davenport	, Sr.		DATE OF BIRTH	3. DATE OF DEATH	
San Diego			SB. COUNTY OF DEAT ENTER STATE S	in Diego		Wousie M.	Davenport-	
Sypress Vi	ew/ nonnam 1	FUNERAL DIRECTOR OR PERS Frothers , San Diego, CA		LIF. LICENSE NUMBER F APPLICABLE -670	BA. SIGNATU		o, CA 9211- rom twing permit 8B. DA	
. ACKNOWLEDGMENT OF AP		clemwiedge an applicant that the proposed 176 of the Health and Safety Code, and was a	eitherized pursuant to Section 7100 of 5	he Health and Safety Code.	▶ ≥ 3	minken.		21/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	IED IN ACCORDANCE WITH PRO ORNIA HEALTH AND SAFETY COI Y FOR THE DISPOSITION SPECIFI D WANT OF DEPOSAL OUTSIDE OF CAUFORD	\$7.00	03/21/1	7 IBSUED, 9C	95038		ING PERMIT
TION REQUIRES A NEW PERMIT TO SHOW FINAL	San Diego	GISTRAR OF DISTRICT OF DE D IN CALIFORNIA County - Vital R 5222, San Diego,	acords "	DRESS OF REGISTRAR DISPOSITION IS TO OCC			ENIA	
HORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS				FOR COR	ONER'S USE ON	LY
D. SCIENTIFIC US	OF CREMATED REM. METERY SE 11A. NAME AND AL	OBESS OF CALIFORNIA CEME		DRNIA		☐ (Name and A	PENDING—REMAINS I ddress)	
	3751 Market	t Street, San Di	ego, CA	727/9:	510	Wait	4	
CREMATION	Cypress	View Crematory brial Avenue, S	Con - Con Strate	128. DATE CREMA	TED 120/8	IGNATURE OF PERS	SON IN CHARGE OF C	REMATION
SCIENTIFIC USE	13A. NAME AND AD	DDRESS OF CALIFORNIA FACIL	ITY RECEIVING REMAINS	13B DATE RECE	EVED FAC S	IGNATURE OF PER	SON IN CHARGE OF	FACILITY
TRANSIT		DRESS IN RECEIVING STATE CREMATED REMAINS ARE TO		14B. DATE SHIPP		DDRESS AND SIGN. F PLACING WITH TI	ATURE OF PERSON I ME CARRIER	N CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR NTIFY FINAL PLACE AND CA <u>DIS</u>		19B. DATE OF DISPOSITION		IGNATURE OF PERS HARGE OF DISPOS	THON OF CHE	E NUMBER IMATED RE- DISPOSER PPLICABLE

COPY 3 OF THE PERMIT IS TO BE RETURNED TO THE COUNTY OF DEATH WHEN THE REMAINS ARE DISPOSED OF IN ANOTHER DISTRICT. IF NOT APPLICABLE, COPY 3 MAY BE DISCARDED. THE LOCAL REGISTRAR MAY DESTROY ANY ORIGINAL OF DUPLICATE PERMIT AFTER ONE YEAR FROM SUE DATE.



Invoice No. \_

**BALANCE DUE** 

Pre-Need Lot

AC-212 (Rev. 5-94)

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

Payment of

At Need D On Acct

Cash

Grave

MOUNT HOPE CEMETERY 527-3400

Row

NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.

ISSUED BY 17

Date: Day	Olars (\$	268.2 Sr. 0	14 5 )
ection_2		Division Block	2
CREDIT 20% Sales Care	67007 77184 —		THE .
80% Sales of Lots	100		
Opening/	100	105	00
Closing Burist	77181 -	15	10
Containers	77182 — 100	100	m
Handling Fee Recording & Misc. Fees	77195 — 100	2/5	100
Misc. Fees Pre-Need	77183 — 63033	-	-
Trust Sales Tax	9022 - 60101	3	95
TOTAL PAID	78390 —	21.8	80

City of San Diego

Date 3/20/95

0 .	Johnson
na Vadeliner	Funeral, date, time SAT 3/25/95 // AM
Church, Chapel, Graveside GRAVESII	DE : Eeatheringill Mortuan
Il Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge of \$ 150
rill be applied and billed to undersigned. X	
Var time veteran 200.	
ot //8 Grave 8 Row -	Section   Division/Bleck /2
(R) 0.	Section / Division/elock /6
irave space & Care Fund	1-51144 E-100-1
dditional spaces and care fund	HI DVEKTIMEFEE BU
pening/Closing & Setup	
urial Container Lines HD B	re- Dud E-1889 -
andling Fees	145.00
lower vases - Marker setting fee	-0
lecording and filing fee ()	45.00
	6
· I We a gray of	Total Due
Willes To South	receipt number R-46055 790.
the west of	
July and the N 500	Balance due
nd this is your authority to make disposition	of the above named deceder of remains as above indicated. I certify and represer
nat I have the right to make this authorization ny liability on account of said authorization a	and I agree to hold Mt. Hope Cemetery harmless from
	(100-CD)
hereby authorize the interment in lot I	Han promo
old under deed.	124987 Caro) Lane
gnature of recorded holder of deed	Thauva Hillschar
grazure of recorded holder or used	17714 827-204 7 20Co
	Telephone Telephone
10110	territor a
F 12112	Invoice #
Vork Order # L	Acct. #



Invoice No.

BALANCE DUE

Pre-Need Lot

Pre-need Trust

AC-212 (Rev. 5-04)

Acct. No.

WHITE..... TO CUSTOMER CANARY CEMETERY PINK AUDITOR

6343

ISSUED BY

MOUNT HOPE CEMETERY

527-3400 Payment of \_ Division Grave Row. Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT 57007 20% Sales Care 77184 80% Sales 100 of Lots Opening/ 100 Closing Burisi 100 Containers 77182 100 77185 Handling Fee Recording & Misc. Fees Pre-Need At Need - On Acct 63033 9022 Trust Sales Tax 60101

TOTAL PAID



#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

CARL	ENTFIRST (GIVEN)	18. MIDDLE WILLHELM	JOHNSON		2. DATE OF BIRTH 3. DATE OF DEATH 4.5	SEX	
5A. CITY OF DEATH  Spring Velley  7A. TYPED NAME AND ADDRESS OF CALIFORNIA—FUNERAL DIRECTOR OR PERSON AS			O LIF LICENSE NUMBER	8 NAME RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMANT Featheringill Mortuary 6322 El Cajon Blvd.			
FEATHERING	I I basks a	San Diego, CA	92115	F APPLICABLE	San Diego, CA 92115  BA. SIGNATURE OF APPINICANT—PURSON LINING METERS 88. DATE SIG	NED	
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	276 of the Haath and Salety Code, and was as IED IN ACCORDANCE WITH PROV ORNIA HEALTH AND BAFETY COD Y FOR THE DISPOSITION SPECIFIED DISPIT OF DISPOSAL OUTSIDE OF CALFORNIA	thereal persuant to Section 7100 at 1	or Health and Salely Code	995 9503874	RMIT	
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL POSITION.	IF DEATH OCCURRE	85222, San Dieg	1		R OF DISTRICT OF DISPOSITION— CUR IN ANOTHER DISTRICT IN CALIFORNIA		
A. BURIAL (INCLU	OF CREMATED REMA		E. TEMPORARY ENVI	ORNIA	FOR CORONER'S USE ONLY  I. DISPOSITION PENDING—REMAINS LOCATE (Name and Address)	D AT	
BURIAL	Comment of the Commen	oress of California Cemet oe Cemetery ogo, CA	ERY	3/35/98	ED   11C, SIGNATURE OF PERSON IN CHARGE OF BURIAL		
CREMATION	12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY			128. DATE CREMA	ATED 12C SIGNATURE OF PERSON IN CHARGE OF CREMATI	ON	
SCIENTIFIC	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS			13B. DATE RECEI	EIVED 13C, SIGNATURE OF PERSON IN CHARGE OF FACILITY	Y	
TRANSIT	14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED			14B. DATE SHIPP	ATE SHIPPED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER		
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR INTIFY FINAL PLACE AND CA <u>DIST</u>		15B. DATE OF DISPOSITION	16C. SIGNATURE OF PERSON IN 15D. LICENSE NUMBER OF DISPOSITION OF CREMATED IN MAINS DISPOSE —IF APPLICABLE	RE- H	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



WERRED LEFT'S CENTER

PY-593 (Rev. 8-92)

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 3/20/95

You are hereby authorized and instructed,	subject to your rules and regulations, t	inter the remains
of _ Stelling 17. &	SUCHE SUCES	A.U. D
in a Vaulturer	_ Funeral, date, time TWE 5/10	prepared to
Church, Chapel, Graveside delive	ry only Burial per	mortuary.
All Funeral cars must arrive before 3:30 p.	m. of regular work day or an extra char	ge of \$
will be applied and billed to undersigned.		Marin .
War time veteran		
Lot 360 Grave & Row	Section GAR Division	VBlock 3
Grave space & Care Fund Par Po	1- True + E-8	931 A
	06	0
Additional spaces and care fund	م الع	105.00
Opening/Closing & Setup	1 V 27	100.CC
Burial Container	006	10.00
Handling Fees	00)	(a.co
Flower vases - Marker setting fee .V	<b>Y</b>	
Recording and filing fee		<u>45.CC</u>
Sales taxes		3.85
5-0-1590 -	Total Due	368.8
o U gal	id receipt number 40256	268 85
	Balance o	due _
I hereby certify I am the X daught		e named decedent
and this is your authority to make disposit that I have the right to make this authorizat	ion of remains as above indicated. I ce	rtify and represent
any liability on account of said authorization	n and interment	,
	& Gadnin Dags	1
I hereby authorize the interment in lot I hold under deed.	Biendura MA	Stand I
	100 Merrinac	Street
Signature of recorded holder of deed	I new beatond,	MA OZZAN
	X 508 - 984576	)3
/	100000	
- 12113	Invoice #	
Work Order #	Acct. #	15



THE CITY OF

### SAN DIEGO

MT. HOPE CEMETERY • 3751 MARKET STREET • SAN DIEGO, CALIFORNIA 92102
Real Estate Assets Department
Business hours 8 a.m. to 4 p.m.
527-3400
Monday through Friday • Gates open daily

April 19, 1995

Barbara Baczek 105 Merrimac Street New Bedford, MA 02740

Dear Ms. Baczek:

We are in receipt of your father's remains, your check for payment of his interment and the Interment Order that you signed.

However, we are also required by the State of California to have a Burial Permit prior to any burial in a cemetery in California. Burial permits are obtained via Mortuaries. I am enclosing a list of local mortuaries and their phone numbers for you. am sure that any of them would assist the mortuary you dealt with in obtaining this permit for you. The mortuary that is closest to our cemetery is Greenwood. I have highlighted their phone number for you. You may of course pick any of those listed to work with the mortuary you worked with. The permit is obtained from the County of San Diego. The mortuary here will explain to the mortuary who services you utilized what documentation is required from them in order to obtain the permit from the County of San Diego. The mortuary that assists you in this matter should be instructed to bring the Burial Permit to our office. Upon receipt of the permit, we will then schedule the burial of Mr. Baczek. Until we receive the permit, we will keep the remains and we will also hold the check you remitted. Your check will be deposited after the burial has been completed.



I sincerely apologize for any inconvenience this may cause you. The person from our office that you spoke with is new and is in training and she inadvertently forgot to mention that the California Burial Permit is also required. Again, I apologize for this oversight in her conversation with you.

Upon receipt of the Burial Permit, we will phone you to let you know when the burial is schedule to take place. In the mean time, if we can be of any further assistance to you, please contact us.

Sincerely,

Joann Waits,

Cemetery Manager

April /, 1995

Dear Michele,

Enclosed please find the interment order for our father's ashes along with a check in the amount of \$268.85 to cover the cost of the interment. I would appreciate it immensely if you would telephone, (coilect), to let us know when the interment is to take place. Although we will not be there we would like to know the date and time.

Thank you for your assistance. It has been a great comfort.

Sincerely,

Barbara Baczek

Sarbara Baczols

#### **CREMATION CERTIFICATE**

CREMATION SERVICES OF NEW ENGLAND, INC.

DATE Aug 11, 1992

HEREBY CERTIFIES THAT THE BODY OF <u>TADEUSZ A. BACZEK</u>
WAS CREMATED ON <u>Aug 11, 1992</u> AND ARE RECORDED IN OUR
FILES AS 3654.

THE BURIAL PERMIT AND CERTIFICATE OF THE MEDICAL EXAMINER WITH ALL INFORMATION PERTINENT TO THE ABOVE WERE FILED WITH THE TOWN OF SCITUATE AND SHOWS Aug 8, 1992 AS THE DATE OF DEATH AT 78 YEARS OLD.

CREMATION SERVICES OF NEW ENGLAND, INC. PO BOX 216 SCITUATE, RI 02857

CERTIFICATE SHOULD ACCOMPANY CREMAINS TO FINAL RESTING

TADEUSZ A. BACZEK

#### MORTUARIES AND CEMETERIES - SAN DIEGO COUNTY

Am Isreal Mortuary	583-8850	6316 El Cajon Blvd., SD	92115
Anderson-Ragsdale Mortuary	263-3141	5050 Federal Blvd., SD	92102
Beardsley-Mitchell Mortuary	223-7181	1818 Sunset Cliffs Blvd., SD	92107
Berge-Roberts Mortuary	474-6565	607 National City Blvd., NC	92050
California Burial	234-3272	5880 El Cajon Blvd., SD	92115
Carroll's Mortuary	440-8033	684 S. Mollison Ave., EC	92020
Clairemont Mortuary	279-2211	4266 Mt. Abernathy, SD	92117
Conrad Mortuary	460-4601	7387 Broadway, LG	92045
Cypress View Mortuary	264-3168	3953 Imperial Ave., SD	92113
El Cajon Mortuary	442-6677	624 El Cajon Blvd., EC	92020
El Cajon Cemetery	449-2929	2080 Dehesa Road., EC	92020
	442-0052	1371 Partridge Ave., EC(MAIL)	The state of the s
El Camino Mortuary	459-2928	5600 Carroll Canyon Rd., SD	92121
El Camino Cemetery	453-2121	5600 Carroll Canyon Rd., SD	92121
Erickson-Anderson Mortuary	466-3297	8390 Allison Ave., LM	92041
Featheringill Mortuary	583-9511	6322 El Cajon Blvd., SD	92115
Glen Abbey Mortuary	498-4600	P.O. Box 607, CV	92102
Glen Abbey Cemetery	498-4600	Bonita Road, CV	92102
Goodbody's Mortuary	582-1700	5027 El Cajon Blvd., SD	92115
Greenwood Mort. & Cemetery	264-3131	P.O. Box 88, SD	92112
Guadalupana Memorial Chapel	544-9333	2601 Imperial Ave., SD	92102
and Mortuary			
Heath Funeral Home	477-4139	611 Highland Ave., SD	92050
Holy Cross Cemetery-Catholic	264-3127	4470 Hilltop Drive, SD	92102
Home of Peace Cem Jewish	264-0832	3668 Imperial Ave., SD	92113
" " " - Office	286-1867	2512 Third Ave., SD	92103
Hubbard Mortuary	422-6151	321 "E" Street, CV	92010
Humphrey-Chula Vista	425-9111	855 Broadway, CV	92010
Lakeside Mortuary	443-3918	9840 Maine, Lakeside	92040
La Vista Cemetery	262-1225	3191 Orange, National City	92050
Lewis Colonial-Benbough	283-7211	3051 El Cajon Blvd., SD	92104
Mayer Mortuary	281-7055	2859 Adams Ave., San Diego	92116
Merkley-Mitchell Mortuary	295-2177	3655 Fifth Ave., San Eiego	92103
Pacific Beach Mortuary	488-5553	4710 Cass Steeet, San Diego	92109
Parkcrest Funeral Home	260-1280	2441 University Avenue, SD	92104
Paris-Frederick Mortuary	442-4411	374 NO. Magnolia, El Cajon	92022
Pinkham-Mitchell Mortuary	423-4787	808 13th St., Imperial Beach	92032
Poway Bernardo Mortuary	566-8211	13243 Poway Road, Poway	92064
Ft. Rosecrans Nat'l Cemetery	533-2084	Point Loma, San Diego	22004
re. Mosectans Mar I cemerery	333-2004	rothe bolla, san brego	

ERIB

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

		SE BLACK INK ONLY-MA	an Balle Residence and Company	HITEOUTS OR OT			
A. NAME OF DECEDE	Marie Company of the Company of	18. MIDDLE	1C, LAST (FAMILY)	DA CYCENT	HONTEL DAY, YEAR MI	DATE OF BEATH	4. SEX
TADEUS	6	λ.	-	BACZEK	D9/27/1914   O	8/03/1992	M
SCITUA	TE	The selling	SB. COUNTY OF DEATH ENTER STATE REODE IS		NAME, RELATIONSHIP, FULL MAILI OF INFORMANT MICHELE L. CLARK:		P CODE
A. TYPED NAME AND A	DDRESS OF CALIFORN	A-FUNERAL DIRECTOR OR PERSO		F. LICENSE NUMBER	3558 HELIX STREET		
GREENW	OOD MORTUAL	RY:			SPRING VALLEY, CA	91977	
1-805		AVE., SAN DIEGO,	CA I		BA. SIGNATURE OF APPLICANT—Paisan	taking pormit 88. DAT	E SIGNED
ACKNOWLEDGMENT OF A	PPEKANT I hereby a Section 10	chnowledge as applicant that the proposed of 576 of the Health and Safety Code, and was no	isposition stated herein in one of the Cherupal personel to Section 7100 of the	dispositions milliorized by Health and Safety Code.	Villare me	JUS/10	/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	IED IN ACCORDANCE WITH PROV ORNIA HEALTH AND SAFETY COD TY FOR THE DISPOSITION SPECIFIE 0 ROUT OF DISPOSAL OUTSIDE OF CALFORNIA	7.00	Wo5/10/1	3300311	REGISTRAR ISSUIN	G PERMIT
INY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	9D. ADDRESS OF RI	EGISTRAR OF DISTRICT OF DEA D IN CALIFORNIA	P.0		OF DISTRICT OF DISPOSITION— R IN ANOTHER DISTRICT IN CALIFORNIA		
HORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS	Cartis	DILLOUP CEL S	A CANADA CONTRACTOR OF THE CON	ER'S USE ONLY	1
AT A BURIAL UNCLU	UDES ENTOMBMENTS		E TEMPORARY ENVA	ULTMENT	The state of the s	IDING REMAINS LO	
B. CREMATION			F. DISINTERMENT		(Name and Addre		MILES A
The state of the s		AINS OTHER	G. SHIP IN TO CALIFO				
	NAME OF TAXABLE PARTY.	DDRESS OF CALIFORNIA CEMET	ERY	118. DATE BURIED	11C SIGNATURE OF PERSON	IN CHARGE OF BU	IRIAL
BURIAL	The State of the S	T STREET, SAN D	1830, CA 92102	5/17/95	· Wat	+	
CREMATION	12A. NAME AND AL	DDRESS OF CALIFORNIA CREM	ATORY	128. DATE CREMATE	ED 12C. SIGNATURE OF PERSON	IN CHARGE OF CR	MATION
	ISAL NAME AND AL	DDRESS OF CALIFORNIA FACILI	TY RECEIVING REMAINS	138. DATE RECEIV	ED 13C. SIGNATURE OF PERSON	IN CHARGE OF FA	CILITY
SCIENTIFIC							
TRANSIT		ORESS IN RECEIVING STATE O CREMATED REMAINS ARE TO B		148. DATE SHIPPE	D 14C. ADDRESS AND SIGNATU OF PLACING WITH THE		CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR ONTIFY FINAL PLACE AND CA DIST		15B. DATE OF DISPOSITION	150. SIGNATURE OF PERSON CHARGE OF DISPOSITIO		ATED RE-
COPY 2 IS RET	TAINED BY THE I	PERSON IN CHARGE OF 1	HE G WETER WONTE	NTORY FACEN	DEOP SCIENTIFIC USE, OR	BY THE PERSO	N IN
			INFORMA	NT:			
COPY 2		STATE OF CALIFORNIA, DEP	ARTMENT Barbara	Baczek er)	ISTRIAR	VS 9 (R	EV. 6/91)
			105 Mer	crimac St.	The state of the s		
				Aford, Mass			

02740

(508) 984-5703



		Date: May	AT , 19 70
rom Layrona Bacy	Address: 205 Minus	rac St. All	w Bedford MH
nPayment of	number of Jad	Dollars (	icyck
ot 36 Grave	2 Row S	ection GAR	Division Block
nvoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 57007 20% Sales Care 77184 - 80% Sales 100	
v.o. <u>E- 13 11 3</u>		of Lots 77184 - Opening/ 100 Closing 77181 - Burist 100 Containers 77182 -	105 00
BALANCE DUE		Handling Fee 77185 - Recording & 100 Misc. Feee 77183 -	45 00
Pre-Need Lot		Pre-Need 53033 Trust 9022 - Sales Tax 60101 78390 -	3 85
C-212 (Rev. 5-94) # /333	ISSUED BY 111 CLARK	TOTAL PAID \$	268 85

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 03/20/95

ina liner	Funeral, date, tim	THURS 3/23/	95 a 281
Church, Chapel, Graveside deline	ry only to	BergeRoberts	Mortuary
All Funeral cars must arrive before 3:30 p.m			
will be applied and billed to undersigned.			
War time veteran			
Lot 12 Grave 9 Row_	Section _	/ Division/Ble	oek 13
Grave space & Care Fund	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		126.00
Additional spaces and care fund			Comment of the Commen
Opening/Closing & Setup			-
Burial Container			50.00
Handling Fees			~~
Flower vases - Marker setting fee			~
Recording and filing fee			110010
			2
Sales taxes		Total Due	
seccap.			
e sor	receipt number	-	
		Balance due	100
I hereby certify I am the and this is your authority to make disposition	on of remains as at	of the above na	amed decedent and represent
	CONTRACTOR OF THE PARTY OF THE	old Mt. Hope Cemetery	harmless from
that I have the right to make this authorization	on and I agree to he and interment.	and the same of th	
that I have the right to make this authorization any liability on account of said authorization	on and I agree to he and interment.		
that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I	and interment.		
that I have the right to make this authorization	and interment.		
that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I hold under deed.	Signature Address		
that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I hold under deed.	and interment.		Zip Code
that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I hold under deed.	Signature Address		Zip Code
that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I	Signature Address Otty	251703	Zip Code

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

	NT—FIRST (GIVEN)	18. MICOLE	IC. LAST (F)	The state of the s		ANDS 1904	3. DATE OF		4. SEX
NATIONAL C	TTY		SB. COUNTY (	OF DEATH-OUTSIDE CALIF., ATE SAN DIEGO	OF INFO	RELATIONSHIP, FULL M DRMANT THY ERONN,		SS AND ZE	CODE
BERGE-ROES	RTS MORTUAR	XX	TTY, CA91950	78. CALIF. LICENSE NUMBER —IF APPLICABLE  FD—284	NATIO	EUCILID AVEN	CA 9195	0	
ACKNOWLEDGMENT OF A	Thereby a	cknowledge as applicant that the	proposed disposition States hereo is a military pursuant to Society	one of the dispositions authorized by	BA. SIGNAT	and beat	Mail Control of the	D3R	1 Aggs
PERMIT LITHORIZATION OF OCAL REGISTRAR	SIONS OF THE CALIF MID IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE W ORNIA HEALTH AND SAF TY FOR THE DISPOSITION O RIGHT OF DISPOSAL OUTSIDE (	SPECIFIED 7.00	98. DATE PERM 03/21/199	95	C SIGNATURE OF LO	CAL REGISTR	The second second	3868
W CHANGE IN DISPOSI- TION REQUIRES A NEW ERANT TO SHOW FINAL SPOSITION.	P.O. BOX	EGISTRAH OF DISTRICT B 10 CALEGORNIA B 10 CA 92186-		PE ADDRESS OF REGISTRAF IF DISPOSITION IS TO OCC	ACCUSED THE OWNER.	CONTRACTOR OF THE PERSON NAMED IN CONTRA	RNIA		
THORIZED DISP	OSITION(S) CHECK A					FOR COR	ONER'S U	SE ONLY	
B. CREMATION			F. DISINTERN	ENT		(Name and A	(ddress)		GATED AT
	ITA NAME AND A	DDRESS OF CALIFORN	G. SHIP IN TO	CALIFORNIA TO OUTSIDE OF CALIFORNIA		SIGNATURE OF PER		RGE OF BU	ORIAL
C. DISPOSITION THAN IN A CE D. SCIENTIFIC US	11A NAME AND ALME HOPE 3751 MARKE	DDRESS OF CALIFORN	G SHIP IN TO  H. TRANSIT I	CALIFORNIA TO OUTSIDE OF CALIFORNIA	ED 11C.		SON IN CHAP		RIAL
G. DISPOSITION THAN IN A CE D. SCIENTIFIC UI	11A NAME AND ALL HOPE 3751 MARKE	DORESS OF CALIFORN T STREET SO	G SHIP IN TO  H. TRANSIT I	CALIFORNIA TO OUTSIDE OF CALIFORNIA 118. DATE BURNE 2102 128. DATE CREMA	ED 11C.	SIGNATURE OF PER	SON IN CHAR	GE OF CRE	PRIAL MATION
G. DISPOSITION THAN IN A CE D. SCIENTIFIC US BURIAL CREMATION SCIENTIFIC	11A NAME AND ALL STATES AND ALL SAL NAME	DORESS OF CALIFORN TOTAL STREET	G. SHIP IN TO H. TRANSIT I IA CEMETERY  AN DIEGO, CA 9: IA CREMATORY  A FACILITY RECEIVING REPORTS  STATE OR COUNTRY WHEE	CALIFORNIA TO OUTSIDE OF CALIFORNIA 13B. DATE BURIE 2102 12B. DATE CREMA	IVED 13C.	SIGNATURE OF PERSONATURE OF PERSONATURE	SON IN CHAR SON IN CHAR	GE OF CRE	EMATION CILITY

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

GENERAL INVOTCE

# Make Remittance Payable to

P O Box 2289

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

Received 5/9/95 REASURERS USE ONLY

PAYMENT DATE 5-8-95 (7)
BY: CA CK IF

PAYMENT REF NO.04-806636 | AMT PAID: \$386.00

INVOICE DATE

PAYMENT DUE 04/22/95 PERIOD COVERED

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS

REF NO: E-12114

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMDUNT

LINA HICKS PA 1176383
LOT 12 GRAVE 9 SEC 1 DIV 12

126.00 165.00 50.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10, WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT APPLICABLE PENALTIES.

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 3/21/95

Vaulituner	Funeral, date, time	Wed 3/2	A CONTRACTOR OF THE PARTY OF TH
Church, Chapel, Graveside delevery	osly:	Constad	Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day	y or an extra char	ge of \$
will be applied and billed to undersigned.			
War time veteran MO.			
Lot 149 Grave 3 Row	Section	/ Division	/Block 12
Grave space & Care Fund			126.CC
Additional spaces and care fund			-
Opening/Closing & Setup			165.00
Burial Container			50.00
Handling Fees			-0
Flower vases - Marker setting fee		·········	0
Recording and filing fee			45.00
Sales taxes			
	Te	otal Due	386-0
Paid	receipt number		
		Balance d	lue
			e named deceden
I hereby certify I am the		of the above	rtify and represent
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization is	n and I agree to hol	ve indicated. I ce	tery harmless from
and this is your authority to make disposition that I have the right to make this authorization	n and I agree to hol	ve indicated. I ce	tery harmless from
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization in the said authorization in th	n and I agree to hol and interment.	ve indicated. I ce	tery narmiess from
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and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization in the latest authorization in late	n and I agree to hol and interment. Signature	ve indicated. I ce	
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization in the said authorization in th	n and I agree to hole and interment. Signature Address City	ve indicated. I ce	Top Code

GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P. O Box 2289

San Diego, California 92112
Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

TREASURERS USE ONLY-

PAYMENT DATE 4-10-95 BY: CA CO IF

PAYMENT REF NO 04-785058 | AMT PAID: \$ 386.00

INVOICE DATE

PAYMENT DUE

PERIOD COVERED FEBRUARY

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:
JOANN WALTS REF NO: E-12115
DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

JOHN DOE 94-2265 PALL77192 LOT 149 GRAVE 3 SEC 1 DIV 1211 OPENING/CLOSING LINER RECORDING FEE

165.00 50.00 45.00

126.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10, WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT ABOVE White-Customer Copy Yellow-Remittance Copy No. 251701

E 12115

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

John	ENT-FIRST (GIVEN)	18. MIDDLE	Doe			DATE OF BIRTH	11929	Y994AR	4. SEX
San Diego			SAIT Diego	The second secon	OF INCOM	ELATIONSHP, FULL MAI RMANT lego County			
. CONRAD LE	NOW GROVE H			LIF. LICENSE NUMBER F APPLICABLE	5555 ( San Di	Overland Ave	enue ornia !	92123	
ACKNOWLEDGMENT OF A	Line I hereby a	acknowledge as applicant that the p	proposed dispusition stated terrin is one of the and was sufflorized pursuant to Section 7100 of th	dispositions authorized by	SIGNATI	THE OF APPLICANT—PHI	non taking period	03/2	/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	JED IN ACCORDANCE WITH FORNIA HEALTH AND SAFE TY FOR THE DISPOSITION S TO RIGHT OF REPOSAL DUTNIDE OF	TY CODE \$7.00		995	SIGNATURE OF LOC	REGISTE	AR ISSUME	PERMIT
ANY CHANDE IN DISPOSI- TION REQUIRES A NEW PLANT TO SHOW FINAL SPOSITION.	9D. ADDRESS OF R	EGISTRAR OF DISTRICT PARTY MARY AND POR HE ROS PO BOX CA 92186-52	OF DEATH— 9E. AD	DRESS OF REGISTRAR O			NIA		
THORIZED DISP	POSITION(S) CHECK A				- 1	FOR CORO	NER'S U	SE ONLY	
B. CREMATION  C. DISPOSITION THAN IN A C  D. SCIENTIFIC U	SE	DDRESS OF CALIFORNIA CEMETERY T STREET	G. SHIP IN TO CALIFO  H. TRANSIT TO OUTS  CEMETERY		110.1	L DISPOSITION P	dress)		
	THE RESERVE AND ADDRESS OF THE PARTY OF THE								
CREMATION	N/A	DORESS OF CALIFORNIA	CREMATORY	128. DATE GREMATE	D 12G.	SGNATURE OF PERSO	ON IN CHAR	GE OF CRE	MATION
SCIENTIFIC		DORESS OF CALIFORNIA	CREMATORY FACILITY RECEIVING REMAINS			SIGNATURE OF PERSO	200000000000000000000000000000000000000		
CREMATION  SCIENTIFIC  USE  TRANSIT	13A. NAME AND AI	DORESS OF CALIFORNIA	FACILITY RECEIVING REMAINS TATE OR COUNTRY WHERE		ED 13C. 8		ON IN CHAP	AGE OF FA	CILITY

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



# Pro- held INTERMENT ORDER City of San Diagram

You are hereby authorized and instruct	ed, subject to your rules and regulations, to inter the remains
or Floya Wannel	Lord & Shower Cleveland
ina TS. Vaults	Funeral, date, time
Church, Chapel, Graveside	: Mortuary.
All Funeral cars must arrive before 3:30	p.m. of regular work day or an extra charge of \$
will be applied and billed to undersigned	d
War time veteran 405	
Lot 86 Grave 9 9 4 10 Rov	w Section/_ Division/Bleek//_
Grave space & Care Fund	895 DD X 2 1790.00
Additional spaces and care fund	
Opening/Closing & Setup	37500 x 2 750.00
Burial Container 3-3-199	17 250.00x 2 500.00
Handling Fees	185.00 x 2 370.00
Flower vases - Marker setting fee	
Recording and filing fee	45 00 x 3 90.00
Sales taxes	17.50x 2 35.00
	Total Dug3535.00
	Paid receipt number 4041 884.00
	Balance due 245/.00
that I have the right to make this authori	of the above named decedent position of remains as above indicated. I certify and represent ization and I agree to hold Mt. Hope Cemetery harmless from
any liability on account of said authoriza	ation and interment.
I hereby authorize the interment in lot I hold under deed.	Amor Bender loya W Low 8 87 8 Kolburn DV
Signature of recorded holder of deed	Spring Valley (A 91977
- 12116	Invoice #
Work Order # E	Acct. #
PY-593 (Rev. 8-92)	

F-12116

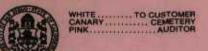
	5 88/	8 Kelburn Dr. S.V. CA 91977 RATING	LIMIT			
DATE		ITEMS	DEBIT	1	CREDIT	BALANCE
-21	-95	Opened Pre-Need Lots (2) & Trusts (2)		+		
		Lots: 86-9&10-1-11 2 @ 895.00	1790.	0		
		Trusts: (2) 0/C; (2) T.S. Vaults; (2) Hand.				
		fees; (2) Rec. fees; (2) Tax on Vaults.	1745.0			3535.0
-21	-95	Downpayment Rec#46041 (80% = 1432 1)			884.00	2651.0
6	95	B-46099 CPN 1 08:350			110,00	2541
19/	95.	Rec # 46204 cayon 2		11	110,00	2431
17/	95	Rec # 463/7 Coupon 3		11	10.00	2321.0
15	95	11 464/3 11 4			1/000	3311
78	95	11 46515 11 5 82 40 2070			11000	2/0/
112	95	4 40603 4 6 8110 to 20%			11000	1991
112	95	46699 11 7			11000	1881
17	95	" 46793 " 8/		"	11000	1771
215	95	11 RHe868 11 9			11000	16101
13	96	R-46963 11 1D			1/000	1551
1/7	96	11 47065 11 17			111000	144)

AVERY FORM NO 25-204 Churchill, Grover & Lord, Flora (2) Pre-Need Lots and Trusts PRINTED IN USA

E 12116 ACCT. NO.

NAME						ACCTINO	
A				RATING		LIMIT	
A	15		ITEMS BLOW To	TIESO X	1	CREDIT	BALANCE
DAT	E.		ITEMS TO THE TOTAL TOTAL	LIL	11	1 1 1	1144100
		11 12	8 47147		11	1 1000	133100
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4-4	196	. 11 11 13	R- 41253	1 11	11	11000	111100
5-8	96	11 14	R- 47356		11	(10.00)	10010
6-3	.90	. " 15	R- 47453		- 1 1		001198
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-	190	11 17	R-47676		11	110.00	781.00
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	90	1 18	P-47890		1	110.00	501:00
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12-3	90	pa.	T POULT		11	11110:00	231100
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23	97	11 23	R-48255	1111	-	121.00	N.
3-3	97	11 24	P-48331	1 1111	-11	121:00	
		paid u	1 full				
		3-3	3-97	8			
					1		
					1		
St. Land							

#### OFFICIAL RECEIPT



CITY OF SAN DIEGO, CALIFORNIA

	1 To 10 TO 1	Date:	. 19
From: Grover Churchill	Address: 8878 Kell	pur Ave Spil	ng valley 910
In Payment of Pil-1	red Lots yor 6	Dollars (\$	12 10
and fit	na tora		Division
Lot Grave	Row_	Section	Block 1
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMF "PAID" IN THIS SPACE.	2ED CREDIT 57007 20% Sales Care 77184 - 80% Sales 100 of Lots 77184 -	1=1
Acct, No	THE LEWIS	Opening/ 100 Closing 77181 - Buriel 100	
BALANCE DUE	COLUMN TO THE PARTY OF	Containers 77182 - 100 Handling Fee 77185 -	
	The state of the s	Recording & 100 Misc. Fees 77183 -	
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Cneck ☐	Miting Junge	Pre-Need 53033 Trust 9022 - Sales Tax 60101 78390 -	
AC-212 (Rev. 5-94) 2537	ISSUED BY	TOTAL PAID \$	121 100

47676



WHITE......TO CUSTOMER CANARY CEMETERY PINK AUDITOR

From: Arover Churchilly One hundred a	ten and in	8878 KEII Tion S and th	Date: 5- buin Ave. S	ollars (\$ 110.	19 94 17 (20.9)
Lot 80 Grav	9410	Row	_ Section/	Division Block	11
invoice No.	The second secon	SE STATED UNLESS STAN	APED CREDIT 20% Sales Care 90% Sales	67007 77164	
Acct, No			of Lots Opening/ Closing	77184	
BALANCE DUE 781 00			Burial Containers Handling Fee	77182 100 27185	
Pre-Need Lot At Need On Acc	ct 🗆		Recording & Misc. Fees Pre-Need Trust	77183 45053 9022	10
Pre-need Trust Cash Check	XQ PAI	una Durge	Sales Tax TOTAL PAID	\$ //O	0

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### 90

From: Flower Lord	-	Address:	8878 Ku	Hurn an	. 4	Deina V	Illu "
In part Payment	of Pro	ed tens a	notion.	te	ollars (\$	110.00	2 1
4ot 86	_ Grave _	7410	Row_	Section/_		Division Block	7
Invoice No		NOT VALID FOR PURPO "PAID" IN THIS SPACE	DSESTATED UNLESS STA	MPED CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burisl Containers	67007 77184 — 100 77184 — 100 77161 — 100 77182 —	110	00
The state of the s	On Acct Check	06	2	Handling Fee Recording & Minc. Fees Pre-Need Trust Sales Tax	100 77185 — 100 77183 — 83033 9022 — 90101 78390 —		
AC-212 (Rev. 5-94)	1970	ISSUED BY	puch	TOTAL PAID	1	110	00

46204



\* Invoice No. \_\_ Acct. No .- \_\_

AC-212 (Rev. 5-94)

K	WHITE.		
Mills	PINK	 A	UDITOR

Payment of

BALANCE DUE # 2/3/ CC

Pre-Need Lot At Need On Acct 

Grave

MOUNT	HOPE	CEM	31	ERY
	527-3	400		

NOT VALID FOR PURPOSE STATED UNLESS STAMPE

ISSUED BY M. Clash

4	Date: A	ay g	9 V. 919	19.95		
-	Pre- Mend Lusts (2)					
Se	ction/	10	Division Block	11		
	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burtal Containers Handling Fee	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 —	110	00		
	Recording & Misc. Fees Pro-Need Trust Sales Tax TOTAL PAID	100 77163 — 63033 9022 — 60101 78390 —	110	100		

46317

# WHITE TO CUSTOMER CANARY CENETERY PINK AUDITOR

Ferrya W Ford 4		Date:	une ?	
From Boar C. hurchill	Address: 8878 Kelbury	AR. S.V.	91977	
- One Hunde	ed ten dollars &	2/10- D	oliars (\$	0.00
In Payment of	med 8013 (3) & True	to (2);	2010	
(2) TS Vaults; (2) 4	landling fus ; (2) k	scording	feed (	2) (ax
Act Ste Grave	9-11D Row S	ection/	Blo	ck. //
Invoice No	NOT VALID FOR PLIPPOSE STATED UNLESS STAMPED -PAID IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing	100 77184 100 77184 100 77181	10 00
BALANCE DUE 2021.00		Burial Containers Handling Fee Recording & Misc. Fees Pre-Need	100 77182 100 77185 100 77183 63033	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 5-94)	ISSUED BY IN Clark	Trust Sales Tax TOTAL PAID	9022 60101 78390	110.00



The same					Date:	0/1		1975
From:	Floya Lond		Address	8878 K	burn as	t., 3p	ring Va	Dey C
In.	Paymen	nt of Pre	- need !	do a true	ata	Dollars (\$	110.00	
Lat	86	Grave	9210	Row	Section /		Division /	_
Invoice	No		NOT VALID FOR PUR	RPOSESTATED UNLESS S	STAMPED CREDIT 20% Sales C	67007 77184 —	a	00
Acct. No	== 1211/	-			80% Sales of Lots Opening/ Closing	100 77184 — 100 77181 —	108	00
w.o	F 10116				Burial Containers	77182 —		
BALAN	CE DUE				Handling Fer			-
Pre-Nee		On Acct			Misc. Feek Pre-Need Trust	77583 — 63033 9022 —		
Pre-need	Trust \ Cash \	Check 9	ISSUED BY	Rouch	Sales Tax TOTAL PAID	80101 78390 —	110	00

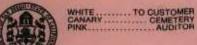
46413

From: Avanta Andreas	Address: 1999 9/ 1/4	Date:Dollars (\$	110,00
Lot Grave	9 ¥ 10 • Row s	ection	Division Block
Invoice No	NOT VALID FOR PURPOSESTATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 67007 20% Sales Care 77184 — 80% Sales 100 of Lots 77184 — Opening/ 100 Closing 77181 — Bursal 100 Containers 77182 — Handling Fee 77185 — Recording 4 100	110 00
Pre-Need Lot Ar Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 5-94)	ISSUED BY BARNING	Mitc. Fees 77183 — Pre-Need 83933 Trust 9022 — Sales Tax 60191 76390 — TOTAL PAID \$	110 00

46699

		Date:/0 /	1940
One Rundred teny	Landress S878 Kelly	Dollars (\$	pring table
Payment of Processor State of Grave	7,000	Section	Division Block
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 67007 20% Sales Care 77184 - 80% Sales 100 of Lots 77184 - Opening/ 77181 - Burist 100 Containers 77182 - Handling Fee 77185 - Recording 8 100 Misc. Fees 77185 - Pre-Need 63033 Trust 8022 - Sales Tax 60101	110 00
AC-212 (Rev. 5-94) 3,030	ISSUED BY / Durk	78190 -	110 00

#### OFFICIAL RECEIPT



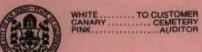
#### CITY OF SAN DIEGO, CALIFORNIA

#### MOUNT HOPE CEMETERY 527-3400

46793

	1	Date:	6/7 .19	95
One hundred	Len color	Are, p	ollars (\$ HO.O.	27
InPayment of	rened Lot / Trus			===
Lot 86 Grave _	9-110 RowS	ection	Division //	
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 20% Sales Care	67007	00
Acct. No		60% Sales of Lots Opening/	77184 100	
w.o		Ciosing Burial Containers	77181 100 77182	
BALANCE DUE		Handling Fee Recording & Misc. Fees	77185 100	
Pre-Need Lot D At Need On Acct	1) 11	Misc. Fees Pre-Need Trust	77183 63033 9022	
Pre-need Trust G Cash G Check	Taryalor -	Sales Tax	60101 78390	-
AC-212 (Rev. 5-94)	ISSUED BY	TOTAL PAID	110	00

#### OFFICIAL RECEIPT



CITY OF SAN DIEGO, CALIFORNIA

#### MOUNT HOPE CEMETERY

46368

From: Lord Churchell In Payment of Pro	Need Lot Trust		Ing Valley Ca	9/9
Lot 86 Grave	9-110 Row_s	ection/	Division Block	1/
Acct. No W.OBALANCE DUE	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees	100 77184 100 77185 100 77	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check CAS-AC-212 (Rev. 5-94)	ISSUED BY Karyp Kake	Trust Sales Tax	9022 90101 76390 \$ 110	00



From: Hoya W. Sor In Part Payment of	L Address 8373 Kolke	Date: John Dollars	3 85 979 15 110,00	1991
	Murchell	Dec la la		-
Lot 86 Grave	9410 ROWSe	ection/	Division /	_
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED - PAID' IN THIS SPACE.	CREDIT 20% Sales Care 77184 80% Sales 100 of Lots 77184 Opening/ 100 Closing 77187 Burial 100 Containers 77185 Recording \$ 100 Misc. Fees 77185 Pre-Need 63035 Trust 9002		
Pre-need Trust  Cash Check  AC-212 (Rev. 5-94)	ISSUED BY Meisner	Sales Tax 80107 78390 TOTAL PAID		00



WHITE ....

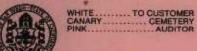
TO CUSTOMER
OEMETERY

Address: State of Spring of Section Division   Division	16
tot Grave Row Section Block	
NOT VALID FOR PURPOSE STATED UNIL ESS STAMPED CREDIT 87007	10
PAID   IN THIS SPACE	111111



From: Annual Churchill  One Hundred Ten  In part Payment of N	Address: \$878 Killoun (	Date: 3-6  Dollars	Jally 9	1977
Lot 8 Grave _	9 × 10 Row Se	oction	Division	
Acct. No W.O. F - 1216 BALANCE DUE 133 1 00	NOT YALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 77184 80% Sales 100 of Lots 77184 Opening/ 100 Closing 77181 Burial 77182 Containers 77182 Handling Fee 77185 Recording 6 100 Misc. Fees 77183		
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	ISSUED BY J. William	Pre-Need 63033 Trust 9022 Sales Tax 60101 78390 TOTAL PAID 5		00

#### OFFICIAL RECEIPT



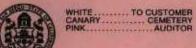
CITY OF SAN DIEGO, CALIFORNIA

#### MOUNT HOPE CEMETERY 527-3400

47253

From: Grove Churchell  In Handal Ten  In Payment of Ru	Address: 3878 Killmun	Date:	ollars (\$ 110 00)	19
Lot 8 Grave	) - \0 RowSe	ection	Division \\	
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots	67007 77184 100 77184	
W.O. E- 12 11 6 BALANCE DUE 1221.00	27 7 11 34	Opening/ Closing Burist Containers Handling Fee	100 77181 100 77182 100 77185	The state of
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AC-212 (Rev. 5-94)	ISSUED BY DIMINISTRA	TOTAL PAID	110 00	

#### OFFICIAL RECEIPT



CITY OF SAN DIEGO, CALIFORNIA

### MOUNT HOPE CEMETERY

47356

From: Ho ya W. Lord + 6	rover C	Ch VAddress:	8878 Kelb	um Ave.	3 onna	valley,	1990 Ca 91
one hundred	ten	and in	Canto of		ollars (\$	110.00	
ot 39 6	Grave 9	× 16	Row	_ Section	1	Division Block	1)
No. E-12///		OT VALID FOR PURP PAID' IN THIS SPACE	OSE STATED UNLESS STAM	PED CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Surial Containers	67007 77184 — 100 77184 — 100 77181 —		

Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐

BALANCE DUE\_

AC 212 (Rev. 5-94)

2356

SSUED BY 1. MICHAEL

TOTAL PAID

Handling Fee Recording & Misc. Fees

Pre-Need

Sales Tox

Trust

77185

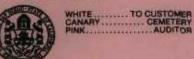
100 77183

63033 9022

90101 78390 \$ 110 WHITE ..... TO CUSTOMER

CAMARY CEMETER		7-	5		96
Pre Anon chuch	Address: 8878 Kellow	Date:	ollars (\$ _	91977	) )
Payment of	9 + 10	Section		Division Block	\
Invoice No	NOTVALIDEOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	20% Sales Care 80% Sales of Lote Opening/ Closing Burisi Containers Handling Fee Recording &	67007 77184 100 77184 100 77181 100 77182 100 77185		
Pre-Need Lot At Need On Acc Pre-need Trust Cash Check AC-212 (Rev. 5-84)		Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	77183	110	00

#### OFFICIAL RECEIPT



CITY OF SAN DIEGO, CALIFORNIA

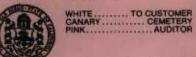
From: ERLYLR CHURCHILL + F	and officer	TITAL . F	ing Valley,	<u>(a 1</u> 191
Lot 810 Grave	7410 Row	Section	Division Block	11_
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	GREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fas Recording & Misc. Fees Pre-Need Trust	87007 77184 7,00 77184 100 77181 100 77182 100 77185 100 77185 100 77183 83033 9022	00
Pre-need Trust Cash Check C	ISSUED BY CHINALIN DUNG! (7)	Sales Tax TOTAL PAID	80101 78390 \$ 110	00



WHITE.....TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITTOT SAIN DIEGO, GAEN ONNIA

From Grover Churchy	Address: 8878 Kelb	Urh aly.	Sprug Valle lars (\$ 110 00 )
In Payment of Pu	raid (166) our of	Man	
Lot Grave	7410 Row	Section_/	Division // Block
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w.o. = 12110		Surial	100
BALANCE DUE	The Assessment of the State of	Recording &	100 17185
Pre-Need Lot At Need On Acct		Pre-Need 6	77183
Pre-need Trust Cash Check	ISSUED BY MANA MINA	Sales Tax  TOTAL PAID	\$0101 78390
AC-212 (Rev. 5-94)			-110



on hundred ten	Address: 8878 Killow	Date: Jan	10.00 91°
ot_ 6 Grave_	1 10 Row S	ection	Division \\
NO. F- RILL	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	of Lots 771	84 00 84 00
BALANCE DUE 231.00		Containers 771 Handling Fee 771	00 85
Pre-Need Lot At Need On Acct Ore-need Trust Cash Check Of Check Of Cash Check Of Cash Cash Cash Cash Cash Cash Cash Cash	ISSUED BY J. Mulilla	Pre-Need 530 Trust 90 Sales Tax 601 783 TOTAL PAID	01



WHITE.....TO CUSTOMER CANARY CEMETERY PINK....AUDITOR

CITT OF SAN DIEGO, CALIFORNIA

From Fluya Lord4	Erave.	MAddress .	8878 1	Date:	Dollars (\$	110.1	77
In Payment of	Grave	9410	Row	Section		Division Block	//
Invoice No		NOT VALID FOR PURPOSE "PAID" IN THIS SPACE	STATED UNLESS ST	AMPED CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burisl Containers Handling Fee Recording & Misc. Fees	87007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 —		
The state of the s	heck D	ISSUED BY MELI	in Our	Pre-Need Trust Sales Tax TOTAL PAID	63033 9002 — 90101 76390 —	110	00

# our Esout ?

Fram:

- Invoice No. Acct. No.

Payment of

Grave

#### MOUNT HOPE CEMETERY 527-3400

Row.

NOT VALID FOR PURPOSE STATED UNLESS STAMPE "PAID" IN THIS SPACE

2	Date: J	Mari	9192	19_95
	c	Oollars (\$	284	00,
Se	otion/		Division Block	11
7	CREDIT 20% Sales Care	57007		
	80% Sales of Lots	77184 — 100 77184 —	884	00
ı	Opening/ Closing	100 77181 —		-
1	Burial Containers	77182 —		-
1	Handling Fee	77185 —	-	+-
1	Recording & Misc. Fees	77183 —		-
ш	Pre-Need Trust	93033	1	
1	Sales Tax	80101 78390 —	-	-
	TOTAL PAID		10011	1 m

BALANCE DUE	1126	. 00
Pre-Need Lot Pre-need Trust P		On Acct Check
C-212 (Rev. 5-94)		1990

#### OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA

From Krown Churchill	Address: 8878 Kelloum	Date: 9-1	ing Valley	9197
One Hundred Ten	tunt - that but a	Doll	are (\$ 110.00	)
Lot 86 Grave	10 Row Se	ection	Division Block	I
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	80% Sales of Lots Opening/ Closing Burist Containers Handling Fee Recording & Misc. Fees Pre-Need	77007 77184 — — — — — — — — — — — — — — — — — — —	00
Pre-need Lot Lat Need Lat On Acct Later Pre-need Trust Later Cash Later	resuezer l Meditter	Trust Sales Tax 6	9022 90101 8390 \$ 1\0	00

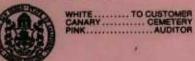


WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY

527-3400

From Ever C Churchil	Address: 8878 Kelbu	Date: 12-5 IN AVE. SP	nna valigy	7
ETENER CHANGE	need lets and trus	ats for		
Lot Sto Grave	7+10 Row	ection	Division	
Acct. No.  M.O. E - 12/10  BALANCE DUE 341.00  Pre-Need Lot At Need On Acct On	NOT VALID FOR PURPOSESTATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 57007 20% Sales Care 77184 80% Sales 100 of Lota 77184 Opening/ 100 Closing 77187 Surial 100 Containers 77182 100 Handling Fee 77185 Recording & 100 Misc. Fees 77185 Pre-Need 63033 Trust 9022	110 10	
Pre-need Trust Cash Check C	ISSUED BY CATHIA QUAYINA	Sales T4x 60101 78390 TOTAL PAID \$	110 0	



MOUNT HOPE CEMETERY 527-3400

From: Floya June 4 61 ON Num In Part Payment	over Cl	hurchill an den roed lot	and und	burn De. St Tus Tuots	nung Dollars (\$	vallei 110 a	19 91 9 9 91 9
Lot 86	Grave 9	410	Row	Section		Division Block	11
Invoice No.		NOT VALID FOR PURP	OSE STATED UNLESS S	TAMPED CREDIT 20% Sales Care	87007 77184 —	- 2 1	1
Acct. No.				60% Sales of Lots Opening/	77184 — 100		-
w.o. E-12110				Closing Bunal Containers	77181 — 100 77182 —		
BALANCE DUE 501.00				Handling Fee	77185 —		
Pre-Newd Lot D At Need D				Resording 6 Misc, Fees Pre-Need	77183 — 63033	110	00
AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	On Acct C	No.	wa Aura	Trust Sales Tax	9022 — 60101	710	
AC-212 (Rev. 5-94)	401	ISSUED BY	na Jung	TOTAL PAID	78390 —	110	60

### MOUNT HOPE CEMETERY 527-3400

	S. putter		00-0	Date:	^ 4	-0	, 19
rom: G Chus	chill	Address:	8818 1	Selleura	Use.	Spains	Johns
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010	- 0	- 10	The second		1	Division	1.7
ot	Grave	9 10	Row	Section.	_	Block	11
nvoice No.		NOT VALID FOR PURI	POSE STATED UNLESS	STAMPED CREDIT	es Care 7718		
		Train in this serve		80% Sar of Lots	85 10	00 1117	100
cot. No.	2 3			Opening		00	
10. = 13/14				Closing Burial	7718	00	
IALANGE DUE				Contain	10		
	TO TO			Handlin Records			
				Misc. Fr	ms 7716	3-	-
	On Acct		0	Trust	900		-
re-need Trust Cash C	Check D	( N	10.1	Sales To	0X 6010 7830		-
C-212 (Rev. 5-94)	809	ISSUED BY	callen	TOTAL PA	VID	\$ 110	00



WHITE..... TO CUSTOMER

PINK.	AUDITOR	MOUNT HOPE CEMETERY 527-3400			
Floya Elong	1 5 14	00 9878 V.DL.	on Ave S	narch o	21 19 9
Eight He	inded		Do	ollars (\$ 28	34.00
InPay	ment of Ps	i- Need Lots & Trusts			
Lot 86	Grave 2	94/D ROW	Section /	Divis	
Invoice No.	7	NOTVALID FOR PURPOSE STATED UNLESS STAMPE "PAID" IN THIS SPACE.	D CREDIT 20% Sales Care 80% Sales	67007 77184	
Acct. No w.o <i>E- 121</i>	116		of Lots Opening/ Closing	77184 100 77181	
BALANCE DUE #24	CDG (185-19-19-19-19-19-19-19-19-19-19-19-19-19-		Burial Containers Handling Fee	100 77182 100 77185	
			Recording & Misc. Fees Pre-Need	100 77183 ————————————————————————————————————	
Pre-need Trust Cash	☐ On Acct ☐		Trust Sales Tax	9022 60101 78390	
AC-212 (Rev. 5-94)	1790	ISSUED BY ON. CLARE	_ TOTAL PAID	1 8	84 0

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end or bring one coupon with each remittance DO NOT MAIL ENTIRE BOOK	COUPON	4
DO NOT MAIL ENTIRE BOOK		-

ACCOUNT No. E-12116 (2) Pre-Need Lots Grover C. Churchill & Trusts Floya W. Lord (86-9&10-1-11)

Floys W. Lord 8878 Kelburn Dr.

Spring Valley, CA 91977

APR MAY JUN JUL AUG SEP OCT NOV DEC JAN FEB MAR

Amount due if paid more than days

Amount due when paid on, or before,

due date above

after due date above

\$\_\_\_\_\_

110.00

NAME GROVER C. CHURCHILL ROOW LOED ADDRESS 8878 KALDURN AVE

CITY SOUND VAILEY STATE CA ZIE

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NAME GROVER Church II

**ADDRESS** 

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DO NOT MAIL ENTIRE BOOK ACCOUNT No. 2012116 (2) Pro-1886 Lots
Grover C. Charchill & Trusts
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#### MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 94-1988 You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains PA # 1177206 Doe Funeral, date, time Wed 3-22: 11: DOA M Church, Chapel, Graveside Delivery Ragsdale All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge of \$ will be applied and billed to undersigned. War time veteran Section \_\_ 126.00 Grave space & Care Furid Additional spaces and care fund Opening/Closing & Setup Burial Container..... 80 Handling Fees ..... Flower vases - Marker setting fee 45.00 Recording and filing fee Total Due ..... Paid receipt number\_ Balance due I hereby certify I am the of the above named decedent and this is your authority to make disposition of remains as above indicated. I certify and represent that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and interment. I hereby authorize the interment in lot I Signature hold under deed. Address Signature of recorded holder of deed City Zip Code Telephone 12117 Work Order PY-593 (Rev. 8-92)



#### GENERAL INVOICE

Make Remittance Pavable to CITY TREASURER

San Diego, California 92112 Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO PUBLIC ADMINISTRATOR 5201 A RUFFIN ROAD SAN DIEGO CA 92123

ACCT NO 000952

TTREASURERS USE ONLY

PAYMENT DATE BYE CA CK IF

4-10-95

PAYMENT REF NO 04-785058 | AMT PAID: \$ 386.00

INVOICE DATE 03/23/95

04/22/95

PAYMENT DUE PERIOD COVERED FEBRUARY

FOR INFORMATION CONCERNING YOUR BILLING CONTACT: JOANN MAITS REF NOT E-12117 DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMDUNT

JOHN DOE 94-1988 PA 1177206 LOT & GRAVE 4 SEC 1 DIV 12 OPENING/CLOSING LINER RECORDING FEE

126.00 165-00 50.00 45-00

TOTAL DUE 386.00 NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER. INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE. AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT

E1217

## APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

	USE BLACK INK	ONLY-MAKE NO ERASURES, W	HITEOUTS OR OTH	IER ALTERATIONS	Found	
John	NT—FIRST (GIVEN) 1B. MIDDLE	IC. LAST (FAMILY)		2. DATE OF BIATH MONTH, DAY, YEAR UNKNOWN	3. DATE OF DEATH	4 NEX
SA. CITY OF DEATH	El Cajen	SB. COUNTY OF BEATT ENTER STATE San Dieg	1-OUTSIDE CALIF., 6.	NAME, RELATIONSHIP, FULL OF INSORMANT UDITE Administ	mailing address and z	P CODE
TYPED NAME AND AD	DRESS OF CALIFORNIA FUNERAL DIRECT	OR OR PERSON ACTING AS SUCH 78. CAL	F APPLICABLE	201- A Ruffin	Radd	
Anderson-Ra	andala Mart.		1220	an Diego, GA 9		E SIGNED
ACKNOWLEDGMENT OF A	PLICANT   I heroby acknowledge as applicant to Section 10376 of the Health and Safet	at the proposed disposition stated herson is one of the y Code, and was authorized pursuant to Section 7100 of th	dispositions authorized by	dethe phil	03/2	21/199
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANC SIONS OF THE CALIFORNIA HEALTH AND AND IS THE AUTHORITY FOR THE DISPOSI IN THIS PERMIT. NOTE: THIS PERMIT GIVES NO JIGHT OF DISPOSAL OUT.	TION SPECIFIED \$7.00	BULLET	SSUED 9C. SIGNATURE OF L	OCAL REGISTRAR ISSUIN	IG PERMIT
ANY CHANGE IN DISPOSE	PD. ADDRESS OF REGISTRAR OF DIST IF DEATH OCCURRED ON CALIFORNIA VItal Records; P.O. San Diego, CA	Box 85222		F DISTRICT OF DISPOSITION- IN ANOTHER DISTRICT IN CALIF	DRNIA	
THORIZED DISPE	DSITION(S) CHECK APPLICABLE ITEMS	70.200 70.00	The state of the s	FOR COL	RONER'S USE ONLY	Y
A BURIAL (INCLU	DES ENTOMBMENT)	E TEMPORARY ENVA	ULTMENT	I DISPOSITION	PENDING-REMAINS LO	DCATED AT
B. CREMATION		F. DISINTERMENT		(Name and		
C. DISPOSITION O	OF CREMATED REMAINS OTHER	G. SHIP IN TO CALIFO	PINIA			
D. SCIENTIFIC US		H. TRANSIT TO OUTS	IDE OF CALIFORNIA			
BURIAL	Mt. Hope Cemetery;	ORNIA CEMETERY 3751 Market St. ian Diggo, CA	3/22/95	11C SIGNATURE OF PER	SON IN CHARGE OF BI	UFILAL.
2.	12A. NAME AND ADDRESS OF CALIFO	DRNIA CREMATORY	128. DATE CREMATEL	12C. MIGNATURE OF PER	SON IN CHARGE OF CR	EMATION
CREMATION	N/A		1	1		
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SCIENTIFIC USE	13A. NAME AND ADDRESS OF CALIFO	ORNIA FACILITY RECEIVING REMAINS	13B. DATE RECEIVE	D 13C SIGNATURE OF PER	RSON IN CHARGE OF FA	ACILITY
THANSIT	14A. NAME AND ADDRESS IN RECEIV REMAINS OR CREMATED REMAIN N/A		14B. DATE SHIPPED	14C. ADDRESS AND SIG OF PLACING WITH		CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEAREST POINT ON SH FICIENT TO IDENTIFY FINAL PLACE N/A	DRELINE, OR OTHER DESCRIPTION SUF- AND CA <u>DISTRICT</u> OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PEI CHARGE OF DISPO	RSON IN STRON OF CREW	NATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



# MT. HOPE CEMETERY

# INTERMENT ORDER

City of San Diego

Date 3/21/95

- Pines	Funeral, date, time Fri 3/24/95 @ 11:
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Church, Chapel, Graveside hunch	15.4
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vill be applied and billed to undersigned	778
Var time veteran	
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Additional spaces and care fund	0
Opening/Closing & Setup	375.00
Burial Container	190.00
landling Fees	Q:d 145.0
lower vases - Marker setting fee	Par II
Recording and filing fee	45.00
Sales taxes	12.21
ales lakes	Total Due
	Paid receipt number (PU) MATERCARD 311.00
	1102 21
	Balance due 11 14 - SC
hereby certify I am the No. of this is your authority to make dispose that I have the right to make this authorization liability on account of said authorizations.	sition of remains as above indicated. I certify and represen ation and I agree to hold Mt. Hope Cemetery harmless from
	Vd.1
hereby authorize the interment in lot I old under deed.	Sprane h well
Nid dilusi deed,	\$ 6099 Seripps 5+
ignature of recorded holder of deed	Sun Dingo 9212 =
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- 12118	Invoice * 25/744

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PY-1012 (11-99)

w.o. # E-12118

# NOTE

	\$ 1172.30	San Diego, California	march 21 19 95
•	hirty days after date for value received, the undersign	gned maker promises to pa	y San Diego City Treasurer, or order at
	3751 Market Street, San Diego, CA 92101, the sum	of Eleven hlundred	deventy Jus & Sy DOLLARS
	3751 Market Street, San Diego, CA 92101, the sum with interest from	4 1995'	on the unpaid principal
	at the rate of 12 percent per annum, payable on der		
	Should this note not be paid when due, it shall the accrue at the rate indicated above. Principal and interest will be liable and consents to renewals, replacement maturity, and waives presentment, demand and properson who signs this note agrees that recourse may contained herein. If any action be instituted on this may fix as attorney's fees.	erest are payable in lawful into and extensions of time otest and the right to assenay be held against his/he	money of the United States. The maker for payment hereof before, at or after rt any statute of limitations. A married r separate property for any obligation
	Part II, Chapter I, Article 2, Paragraph 75 authorizes the removal of any remains from a		
	PRINT NAME Valencia L. Bondon	SIGNATURE Value	in 2 Bil
	ADDRESS 6099 Scripps St SanDies	TSISP AD OF	
	CALIFORNIA DRIVER LICENSE NUMBER N 987 39		11 552-27-1174

= 12118

## APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

A NAME OF DECEDE	NT-FIRST (GIVEN)	18. MIDDLE	1C. LAST (FA	100-00	2. DATE OF BIRTH 3.	DATE OF DEATH 4. S
Hazel Lee SA CITY OF DEATH San Diego		58. COUNTY C	Mathews 07/01/1937 03/18/1995 58. COUNTY OF DEATH—OUTSIDE CALIF., B. NAME. RELATIONSHIP, FULL MAILING ADDRESS AND ZIP OF NEORMANT Valencia Bondon—Daughter			
A. TYPED NAME AND AL	Cremation	& Burial Ch	OR PERSON ACTING AS SUCH	The State Control of the State	6099 Scripps Street San Diego, CA 9211	t
6602 E1 Ca	I beenly o	San Diego, Co	A 92115 proposed degention stated heren is	FD 1357	BA. SIGNATURE OF ARPLICANT—Person	Jung permit 88. DATE SIGN
PERMIT AUTHORIZATION OF	THIS PERMIT IS ISSUEDING OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	376 of the Health and Safety Coa JED IN ACCORDANCE W ORNIA HEALTH AND SAF Y FOR THE DISPOSITION O MIGHT OF DISPOSAL OUTSIDE O	SPECIFIED			REGISTRAR ISSUING PER
NY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	VIENT RECE	GISTRAR OF DISTRICT D IN CAUGORNIA DTGS-P.U. BO CA 92186-5	x 85222		R OF DISTRICT OF DISPOSITION— SUR IN ANOTHER DISTRICT IN CALIFORNIA	
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B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US	TIA. NAME AND AL	ODRESS OF CALIFORNI	F. DISINTERM G. SHIP IN TO		(Name and Address	
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SCIENTIFIC USE	13A. NAME AND AD	DORESS OF CALIFORNI	A FACILITY RECEIVING REN	AINS 13B. DATE RECE	IVED 13C. SIGNATURE OF PERSON	IN CHARGE OF FACILITY
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SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY			LINE, OR OTHER DESCRIPTION D CA <u>DISTRICT</u> OF DISPOSITION		15C. SIGNATURE OF PERSON CHARGE OF DISPOSITION	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN MARGE OF DISPOSING OF THE CREMATED REMAINS.

251744 03/27/95 084723 VALENCIA L BONDON

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MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 3-21-95

ina ASH VAUL	mar Tf	uneral, date, time	nes 3-28	-95,AY.
Church, Chapel, Graveside I	retirer	y only: Pa	cific Be	ach Mortuary
All Funeral cars must arrive be	fore 3:30 p.m. o	f regular work day	or an extra charge	e of \$
will be applied and billed to und	dersigned			
War time veteran				
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Grave space & Care Fund				300.00
Additional spaces and care fun				
Opening/Closing & Setup				
Burial Container	-	AID		55.00
Handling Fees	1 4	$\neg$ 1 $\cup$	1	60.00
Flower vases - Marker setting	tee MAR	2 1 1995		
Recording and filing fee	ļ		COLUMN CONTRACTOR DE LA COLUMN	45.00
Sales taxes		E CEMETERY N DIEGO, CAL		3.8.
STE: The ron		A AND DESCRIPTION OF THE PARTY	al Due	568.
juested we no	Paid re	ceipt number M	C	568.
ne his address	es/phon	uno to	Balance du	·
I hereby certify I am the	Son	0	of the above	named deceden
and this is your authority to ma that I have the right to make this	s authorization a	and I agree to hold I	Mt. Hope Cemete	ry harmless from
any liability on account of said	authorization an	id interment.	11	
I hereby authorize the intermen	it in lot I	1 Olice	alia Ma	
hold under deed.		Signature 184	5 Grane	I Ave.
Signature of recorded holder of deed		Address San	Diego	92109
		City 619.	272.71	4 P Zb Cod
	/	Telephone		
	140	Invoice #		
- 121	14			

Go41 Fountain PK.Ln.#12 Woodland Hills, CA. 9/367 818-116-1235

SEE CHER POR PERFO

### PACIFIC BEACH

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS POSSINT 1A NAME OF DECEDENT-FIRST (GIVEN) 1B. MIDDLE 1C. LAST (FAMILY) 2. DATE OF BIRTH 3. DATE OF DEATH 4. SEX 0670471943 VALERTE PAGENDAM TABISOLA MARTA 5A. CITY OF DEATH SE. COUNTY OF DEATH-OUTSIDE CALIF... 6. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE DOMEST AND BOOD CHEPFORMY SOLA SAN DIEGO - SON 7A TYPED NAME AND ADDRESS OF CALIFORNIA - FUNERAL DIRECTOR OR PERSON ACTING AS SUCH 7B. CALIF, LICENSE NUMBER 1845 GRAND AVENUE PACIFIC BEACH MORTUARY, 4710 CASS STREET. -F APPLICABLE SAN DIEGO. CA 92109 SAN DIEGO, CA 92109 815 BA. SIGNATURE OF APPLICANT--Person taking prently, SB. DATE SIGNED I hereby achieved as applicant that the proposed diagnation stated borns is one of the dispositions authorized by Section 10376 of the Health and Safety Code, and was authorized pursuant to Section 71(0) of the Health and Safety Code. ADMINISTREMENT OF APPLICANT THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVIDE 9A. AMOUNT OF FEE PAID 9B. DATE PERMIT ISSUED 9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT BOOK OF THE CALIFORNIA HEALTH AND BAFETY CODE PERMIT AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED \$7.00 AUTHORIZATION OF IN THIS PERMIT MOTE: THES PERMIT GIVES NO PHONE OF DESPOSAL OUTSIDE OF CALIFORNIA LOCAL REGISTRAR 9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH-9E. ADDRESS OF REGISTRAR OF DISTRICT OF DISPOSITION-ANY CHANGE IN DISPOSE IF DEATH OCCURRED IN CAUFORNIA IF DISPOSITION IS TO OCCUR IN ANOTHER DISTRICT IN CALIFORNIA TION REQUIRES A NEW VITAL RECORDS, P. O. BOX 85222 PERMIT TO SHOW FINAL POSITION. SAN DIEGO, CA 92186-5222 IORIZED DISPOSITION(S) CHECK APPLICABLE ITEMS FOR CORONER'S USE ONLY A BURIAL (INCLUDES ENTOMBMENT) E TEMPORARY ENVAULTMENT DISPOSITION PENDING-REMAINS LOCATED AT (Name and Address) A B. CREMATION F. DISINTERMENT C. DISPOSITION OF CREMATED REMAINS OTHER G. SHIP IN TO CALIFORNIA THAN IN A CEMETERY D. SCIENTIFIC USE H. TRANSIT TO OUTSIDE OF CALIFORNIA 11A NAME AND ADDRESS OF CALIFORNIA CEMETERY MOUNT HOPE CEMETERY, 3751 HARKET STREET 11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL 11B. DATE BURIED BURIAL SAH DIEGO, CA 92102 12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY 128. DATE CREMATED 12C. SIGNATURE OF PERSON IN CHARGE OF CREMATION CYPRESS VIEW CREMATORY, 3953 IMPERIAL CREMATION AVENUE, SAN DIEGO, CA 92113 13B. DATE RECEIVED 13C SIGNATURE OF PERSON IN CHARGE OF FACILITY 13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS SCIENTIFIC USE 14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE 14B. DATE SHIPPED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED OF PLACING WITH THE CARRIER TRANSIT 15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUF-16B. DATE OF 15C. SIGNATURE OF PERSON IN 15D. LICENSE NUMBER SCATTERING AT SEA FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT OF DISPOSITION DISPOSITION CHARGE OF DISPOSITION OF CREMATED RE-MAINS DISPOSER DISPOSITION OTHER -IF APPLICABLE THAN IN A CEMETERS

COPY 3 OF THE PERMIT IS TO BE RETURNED TO THE COUNTY OF DEATH WHEN THE REMAINS ARE DISPOSED OF IN ANOTHER DISTRICT, IF NOT APPLICABLE, COPY 3 MAY BE DISCARDED. THE LOCAL REGISTRAR MAY DESTROY ANY ORIGINAL OF DUPLICATE PERMIT AFTER ONE YEAR FROM SSUE DATE

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

RICHTER

Date 3-21-95

of	MALC	COLM		HENDELE &	2		
ina	Ash	Vau	et	Funeral, date, tim	e S	at 3-25	12:00 NO
Church, Chape	d, Graves	side	GR	aveside:	F	AMILY	Mortuary.
All Funeral car	s must ar	rive befor	re 3:30	p.m. of regular work d	ay or ar	n extra charge of	\$
will be applied	and bille	d to under	rsigned				*
War time veter	an						
int 76	Grave	2	Row	Section	4	Division/Bloc	× 5
Grave space &				PRE-LEEP	C-	4903	8
STATE OF THE PARTY OF THE PARTY.							
Handling Fees							60.00
Flower vases -	- Marker	setting fee	e	Sature	cy	0.1	210.00
Recording and	filing fee						45.00
Sales taxes							3 83
					Total Di	ue	478,85
			1	Paid receipt number	46	6043	478.85
						Balance due	Ø
hereby certify	I am the	×	So	N		of the shove nar	triahanah ham
and this is you that I have the	r authorit	y to make	e dispo authoriz	sition of remains as at tation and I agree to he tion and interment.	old Mt.	dicated. I certify a Hope Cemetery I	and represent narmless from
I hereby autho hold under dec		nterment i	n lot l	Signature		» NHe	whie
Signature of recorded	holder of dee	d		- ×2	043	VENICE	5t Zin Code
		/	/	Y S Telephone	HAS	DIETO CA	92107
	- 4	212	0.0	Invoice #		1- 222	
Work Order #	E	ALA	20	Acct. #			

E12120

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

8

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

Malcolm -		1	Hendrie		2. DATE OF BIRTH 3. DATE OF DEATH 4. SEX 0472691913" 0371291995" M		
A CITY OF DEATH San Diego A TYPED NAME AND ADDRESS OF CALIFORNIA FUNERAL DIRECTOR OR PERSON Balboa Cremation Services 4658 30th ST; San Diego, CA 92116		58. COUNTY OF DEATH	n Diego	NAME RELATIONSHIP FULL MAILING ADD OF INFORMANT AMES N. Hendrie, Son	DRESS AND ZIP CODE		
		-\F	APPLICABLE	043 Venice Street an Diego, CA 92107			
ACKNOWLEDGMENT OF AF	PLICANT Thereby acknowledge as applicant that the proposed de Socious 10376 of the Health and Safety Code, and was auth		Health and Safety Code. 7	Withher so	103/14/1995		
PERMIT UTHORIZATION OF OCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIES IN THIS PERMIT. NOTE: THE PERMIT WAS NO RIGHT OF DISPOSAL OUTSES OF CALFORNIA	\$7.00	03/14/1995 K.Kerrigar	9503503	STRAR ISSUING PERMIT		
No. 200 Contract of the Contra	ob address of Registrar of District of Deal if Death Occurred in Caufornia Vital Records; P.O.Box 8522 San Diego, CA 92186-5222	1 IF D		DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CALIFORNIA	-		
HORIZED DISPO	DITION(S) CHECK APPLICABLE ITEMS			FOR CORONER'S	USE ONLY		
X A BURIAL (INCLU	IDES ENTOMBMENT)	E. TEMPORARY ENVAL	JLTMENT	L DISPOSITION PENDING-	REMAINS LOCATED AT		
X B. CREMATION	OF CREMATED REMAINS OTHER METERY  11A. NAME AND ADDRESS OF CALIFORNIA CEMETI Mt. Hode Cemetery	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTSI	RNIA	L DISPOSITION PENDING- (Name and Address)  11C. SEGNATURE OF PERSON IN CH			
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US	OF CREMATED REMAINS OTHER METERY JE  11A. NAME AND ADDRESS OF CALIFORNIA CEMETI	F DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTSI ERY A 92102	RNIA DE OF CALIFORNIA 11B. DATE BURIED	(Name and Address)	HARGE OF BURNAL		
X B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US	of CREMATED REMAINS OTHER  THA NAME AND ADDRESS OF CALIFORNIA CEMET  Mt. Hope Cemetery  3751 Market St. San Diego, C  12A NAME AND ADDRESS OF CALIFORNIA CREMA  Leneda Inc.; 14065 Olde Hwy.	F DISINTERMENT G, SHIP IN TO CALIFO H. TRANSIT TO OUTSI ERY CA 92102 STORY 80	RNIA DE OF CALIFORNIA 11B. DATE BURIED 13/35/95 12B. DATE GREMATED	(Name and Address)	ARGE OF BURIAL		
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US BURIAL CREMATION SCIENTIFIC	of CREMATED REMAINS OTHER METERY  TIA. NAME AND ADDRESS OF CALIFORNIA CEMET Mt.Hope Cemetery 3751 Market St.San Diego, C  12A NAME AND ADDRESS OF CALIFORNIA CREMA Leneda Inc.;14065 Olde Hwy. El Cajon, CA 92021	F DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTSI ERY A 92102 STORY 80 TY RECEIVING REMAINS	RNIA DE OF CALIFORNIA 11B. DATE BURIED 13/35/95 12B. DATE GREMATED	(Name and Address)  11C. SESNATURE OF PERSON IN CH	ARGE OF BURIAL  ARGE OF CREMATION  WARGE OF FACILITY  PERSON IN CHARGE		

COPY\_1 OF THE PERMIT ACCOMPANIES THE REMAINS TO THE STATED PLACE OF DISPOSITION. THE PERSON IN CHARGE OF DISPOSITION IS RESPONSIBLE FOR COMPLETING AND FORWARDING THE PERMIT WITHIN 10 DAYS OF DISPOSITION TO THE REGISTRAR OF THE DISTRICT IN WHICH DISPOSITION OCCURRED OR THE DISTRICT NEAREST THE POINT WHERE THE CREMATED REMAINS WERE SCATTERED AT SEA. THE LOCAL DISTRICT MAY DESTROY ANY ORIGINAL OR DUPLICATE PERMIT AFTER ONE YEAR FROM ISSUE DATE.

TO: MT. HOPE CEMETARY

I, CAROLE WILLIAMS, formerly known as CAROLE HANDRIE, am the title owner of Lot 76, Grade 2, Section 4, Division 5.

I hereby grant permission for my ex-parents-in-law, MALCOLM HENDRIE and ANNIE W. HENDRIE, to have their cremated remains interred in that Lot, and to have their names engraved on the headstone.

DATED: August 10, 1994

CAROLE WILLIAMS

CITY OF SAN DIEGO, CALIFORNIA

46043

WHITE YO CUSTOMER CANARY CEMETERY PINK AUDITOR

From MALCOLM HENDRIE		2043 1	Penice ST.	3-21 5. Dieyo	CA 9	12/107
In full Payment of Und	rement	of en	ANCCOLM	Dollars (\$		5)
Lot 76 Grave	2	Row	Section	4	Division Block	5
Invoice No.	NOT VALID FOR PURP	OSESTATED UNLESS	20% Sales			
Acct. No.	162		80% Sales of Lots Opening/	77184 — 100	105	00
w.o. E - 12120			Closing Burial Container	77181 — 100 8 77182 —	55	00
BALANCE DUE			Handling	100	60	00
			Recording Misc. Fee	77183 —	255	00
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐			Pre-Need Trust Sales Tax		3	85
AC-212 (Rev. 5-94)	ISSUED BY	Baloblu	TOTAL PAI	78390 —	478	85

#### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 3/22/95

You are hereby authorized and instruct	ed, subject to your rules and regulations, to inter the remains
of Robert d	El Jones
2.	
ina <i>Uner</i>	Funeral, date, time TUES 3/28/95@ /
Church Change Graves de Abu a A	+ 3 graveside Ragodale, Mortuary
Charles Chares de Laveside	MARK)
All Funeral cars must arrive before 3:30	p.m. of regular work day or an extra charge of \$ 150
will be applied and billed to undersigne	d X Fiwi &
War time veteran MD	A COLOR OF THE COL
Lot 89 Grave 6 Roy	Section 3 Division/Block /2
LOT CHAVE THOS	tor .
Grave space & Care Fund	795.0
Additional spaces and care fund	
	777
Opening/Closing & Setup	5/5.6
Burial Container	190.0
	1 1159
Handling Fees	170.0
Flower vases - Marker setting fee	10
Recording and filing fee	H = 45
b	12 35
Sales taxes	7122
De Consider	Total Due
00000	Paid receipt number B-Hloo65 391.0
Sales taxes with a sales taxes with a sales taxes with a sale at the sales taxes with a sale at the sales taxes with a sales ta	h 1100
to To	Balance due 4 11 /d
hereby certify I am the XFAT	HCR of the above named deced
and this is your authority to make dispo	sition of remains as above indicated. I certify and represen
hat I have the right to make this authori any liability on account of said authoriza	zation and I agree to hold Mt. Hope Cemetery harmless from
	Vamery Jones
hereby authorize the interment in lot I old under deed.	Signature (b)
	3443 marchorovers
ignature of recorded holder of deed	- SANDIEGO CALL
regulativité de rescurded notides de déed	Pity Dp Cod
- /	2 83-5476 7210
V	respons.
19191	Invoice # 251883
<b>-</b> 12121	60/17/3
Nork Order # -	Acct. # 084160

At the later !		The same of the same	
887	HOPE	CERRE	TEDV
PAGE 18	DUPE	CEME	

W.O. #\_ E- 12121

### NOTE

\$ 1172.30			San Diego, California	March 2	2 1995
Thirty days after date for a					
3751 Market Street, San I	Diego, CA 92101, the	e sum of	1005	avery rang 1	2)DOLLARS
with interest from	april	do	1995	on the un	paid principal
at the rate of 12 percent	per annum, payable	on dema	ind.		
Should this note not	he paid when due it	shall the	reafter hear interest on the	principal Interest afte	r maturity will

Should this note not be paid when due, it shall thereafter bear interest on the principal. Interest after maturity will accrue at the rate indicated above. Principal and interest are payable in lawful money of the United States. The maker will be liable and consents to renewals, replacements and extensions of time for payment hereof before, at or after maturity, and waives presentment, demand and protest and the right to assert any statute of limitations. A married person who signs this note agrees that recourse may be held against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promise(s) to pay such sum as the Court may fix as attorney's fees.

Part II, Chapter I, Article 2, Paragraph 7528 of the State of California Health and Safety Code authorizes the removal of any remains from a plot for which the purchase price is past due and unpaid.

PRINT NAME JAMES WALTER JO	NES SIGNATURE	Comes watter Jones
ADDRESS 3443 malborou		
CALIFORNIA DRIVER LICENSE NUMBER 3040		SSN#431-48-8599

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	THE THE PARTY OF T	1B. MIDDLE	IC. LAST (FAMILY)			OF BIRTH	S. DATE O		4. SEX
Robert	S Dev Edit (B)	Lee	Jones			1955	63721		M
San Diego		58. COUNTY OF DEATH	0	OF INFORMANT	Manual Assessment		NAME OF THE OWNER, WHEN THE OW	CODE	
nderson-Rags	A TYPED NAME AND ADDRESS OF CALIFORNIA—FUNERAL DIRECTOR OR PERSON derson—Ragadale Mortuary; 5050 Federal Blvd.; San Diego, CA		-	ACTING AS SUCH 7B. CALIF. LICENSE NUMBER 3443			Ave.	Apt. H	
ACKNOWLEDGMENT OF A	PPLICANT   Terreby : Section 10	classwinger as applicant that the proposed 176 of the Health and Sefety Code, and was a	disposition stated herein is one of the otherized pursuant to Section 7100 of the	dispositions authorized by Health and Safety Code.	delle	whel	lem	03/2	3/199
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	IED IN ACCORDANCE WITH PROV ORNIA HEALTH AND SAFETY COR Y FOR THE DISPOSITION SPECIFIE II BEST OF DISPOSAL OUTSIDE OF CALFORN	\$7.00	98. DATE PERMIT		ATURE OF LO		AAR ISSUM	G PERMIT
ANY CHANGE IN DISPOSE	Vital Reco	GISTRAR OF DISTRICT OF DEAD IN CALIFORNIA TOS. Box 85:	222	DRESS OF REGISTRAR I	OF DISTRICT OF D	ISPOSITION— RICT IN CAUPOR	erala.		
THORIZED DISP	OSITION(S) CHECK A					FOR COR	ONER'S U	SE ONLY	6
B CREMATION	11A. NAME AND AL	DORESS OF CALIFORNIA CEME Cemetery; 3751 1 San Diego	Market St.	DRNIA:		DISPOSITION (Name and Ac	ddress)		893098300
CREMATION SCIENTIFIC	12A. NAME AND AS	DORESS OF CALIFORNIA CREM		12B. DATE CREMATE	D 12C. SIGNAT	URE OF PERS	ON IN CHAR	IGE OF CRE	MATION
SCIENTIFIC	13A, NAME AND AL	DRESS OF CALIFORNIA FACILI	TY RECEIVING REMAINS	ISB. DATE RECEIV	ED ISC. SIGNAT	URE OF PERS	SON IN CHAI	RGE OF FA	CILITY
E (-	14A NAME AND AL		OR COUNTRY WHERE	14B. DATE SHIPPE		S AND SIGN			CHARGE
TRANSIT	N/A	DRESS IN RECEIVING STATE C CREMATED REMAINS ARE TO I	E SHIPPED		OF PLA	CING WITH TI	HE CARRIER	N.F	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

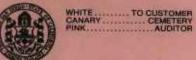
251883 03/30/95 084763 JAMES W JONES

E-12/2/ 100 072 77181 000072 375.00
100 072 77183 000072 100 072 17184 000072 45.00
100 072 77185 000072 145.00
60101 78390 77184 159.00

1,172.30 PAID IN FULL

CITY OF SAN DIEGO, CALIFORNIA

46065



From Onderson Rogso	lale Address: 5050 Feder	ol Bl.	9310	1995
In Payment of Int	erment of Bolust	Lee Doll	nrs (\$ 391.0	10,
Lot 89 Grave	Row Se	ection 3	Division Block	12
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	20% Sales Care 80% Sales of Lota Opening/ Closing Burial Containers	57007 77184 100 397 100 77181 100 77182 100 11185 100	50
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 5-94)	ISSUED BY Rauch	Misc. Fees Pro-Need Trust Sales Tax	77183 53033 9022 60101 78390 \$	00

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 3/83/95

Church, Chapet, Graveside GNAVSIDE : Furthering III  All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge of \$ will be applied and billed to undersigned.  War time veteran Church Grave Section Division/Block Grave space & Care Fund DRA DRA FULL FOR Section Division/Block Grave space & Care Fund DRA DRA FULL FOR Section Division/Block Grave space & Care Fund DRA DRA FULL FOR Section Division/Block Grave space & Care Fund DRA DRA FULL FOR SECTION Section Full For Section Division/Block Grave space & Care Fund DRA FULL FOR SECTION Section Full For Section Division/Block Grave space & Care Fund DRA FULL FOR SECTION Section Full For Section Full Full For Section Full Full Full Full Full Full Full Ful	a IPI
All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge of \$ will be applied and billed to undersigned.  War time veteran **  WW T time veteran **  WW T T Grave	
will be applied and billed to undersigned. **X FLORIZED ACTION OF The Comment of the property of the above named and this is your authority to make disposition and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I necessary. **Signature of recorded holder of deed **  **End of the above of the deed **  **End of the above of the	
War time veteran WWT Section Division/Block.  Grave space & Care Fund DPU JULIA E 1/11/7  Additional spaces and care fund DPU JULIA E 1/11/7  Additional spaces and care fund DPU JULIA E 1/11/7  Burial Container  Handling Fees  Flower vases – Marker setting fee Recording and filling fee DPU JULIA E 1/11/7  Sales taxes  Total Due Paid receipt number  Balance due Of the above named and this is your authority to make disposition of remains as above indicated. I certify and that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Signature of recorded holder of deed  E 12122 Invoice #	- /
Grave space & Care Fund  Additional spaces and care fund Opening/Closing & Setup  Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filing fee  Balance due  I hereby certify I am the SPOUSE and this is your authority to make disposition of remains as above indicated. I certify and that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  E 12122  Invoice #  Invoice #	~
Additional spaces and care fund Opening/Closing & Setup  Opening/Closing & Setup  Burial Container  Handling Fees  Flower vases – Marker setting fee Recording and filling fee  Balance due  Of the above named and this is your authority to make disposition and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Signature of recorded holder of deed  Invoice #	11
Additional spaces and care fund  Opening/Closing & Setup.  Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filing fee  Balance due  I hereby certify I am the STOUSE of the above named and this is your authority to make disposition of remains as above indicated. I certify and that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harm any liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Signature of recorded holder of deed  12122 Invoice #	11
Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filling fee  Balance due  I hereby certify I am the SPOUSE and disposition of remains as above indicated. I certify and that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harm any liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.  Signature of recorded holder of deed  F 12122  Invoice #	$\alpha_{-}$
Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filling fee  Paid receipt number  Paid receipt number  Balance due  of the above named and this is your authority to make this authorization of remains as above indicated, I certify and that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.  Bigneture of recorded holder of deed  Lance #  Invoice #  Invoice #	0_
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Paid receipt number  Balance due  Cof the above named and this is your authority to make disposition of remains as above indicated. I certify and that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmany liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.  The large of the above named and this is your authority to make disposition of remains as above indicated. I certify and that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmany liability on account of said authorization and interment.  The large of the above named and this is your authority to make disposition of remains as above indicated. I certify and that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmany liability on account of said authorization and interment.  The large of the above named and this is your authority to make disposition of remains as above indicated. I certify and that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmany liability on account of said authorization and interment.  The large of the above named and the large to hold Mt. Hope Cemetery harmany liability on account of said authorization and interment.  The large of the large o	0
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Paid receipt number  Balance due  Thereby certify I am the SPOUSE of the above named that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.  Thereby authorize the interment in lot I hold under deed.  Thereby authorize the interment in lot I hold under deed.  Thereby authorize the interment in lot I hold under deed.  Thereby authorize the interment in lot I hold under deed.  Thereby authorize the interment in lot I hold under deed.  Thereby authorize the interment in lot I hold under deed.  Thereby authorize the interment in lot I hold under deed.  Thereby authorize the interment in lot I hold under deed.  Thereby authorize the interment in lot I hold under deed.  Thereby authorize the interment in lot I hold under deed.  Thereby authorize the interment in lot I hold under deed.  Thereby authorize the interment in lot I hold under deed.	0
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Paid receipt number  Balance due  Thereby certify I am the SPOUSE of the above named and this is your authority to make disposition of remains as above indicated, I certify and that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.  Balance due  Of the above named and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.  Balance due  Of the above named and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and	0_
Balance due	0
hereby certify I am the XSPOUSE of the above named and this is your authority to make disposition of remains as above indicated, I certify and that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery ham any liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.  Invoice #	B
hat I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmany liability on account of said authorization and interment.  Thereby authorize the interment in lot I have been authorized in lot I have been authorized to a lot of the light and the lot of the	
ignature of recorded holder of deed  ignature of recorded holder of deed holder of deed holder of deed holder holder of deed holder of deed holder holder of deed holder of deed holder holder holde	represent
2619/461-5131 Telephone #	ler e.#8
A STATE OF THE STA	219 Code
AND ADDRESS OF THE PARTY OF THE	72
Work Order # Acct. #	

E 12122

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

FRED	CEDENT-FIRST (GIVEN)	1B. MIDDLE GSCAR	ADLER			DATE OF DEATH 4. SEX
San Diego		SE COUNTY OF DEA	TH-OUTSIDE CALIF.,	8. NAME, RELATIONSHIP, FULL MALIN CE INFORMANT FLOTENCE AGLET, W		
Control of the second	PPED NAME AND ADDRESS OF CALIFORNIA FUNERAL DIRECTOR OR PERSON ACTING  EATHERINGILL MORTUARY 5322 E1 Cajon Blvc San Diego, CA 9211		jon Blvd. CA 92115	CTING AS SUCH 7B. CALIF. LICENSE NUMBER 8070 Orange Ave.		
ACKNOWLEDGMEN	Section 10	376 of the Health and Salety Code, and	aposod disposition stated herris is one of ti d was authorated purposent to Section 7100 of	the Health and Safety Code.	De alantena	03/23/1995
PERMIT AUTHORIZATION LOCAL REGISTE	OF IN THIS PERMIT	JED IN ACCORDANCE WITH CRINA HEALTH AND SAFETY TY FOR THE DISPOSITION SP IO MIGHT OF DISPOSAL OUTSIDE OF CO	\$7.00	PAID BB. DATE PERMIT 03/23/19 Edward Fee		REGISTRAR ISSUING PERMIT
ANY CHANGE IN DIS TION REQUIRES A N PERMIT TO SHOW FI DISPOSITION	NOSH- OF DEATH OCCURRE	EGISTRAR OF DISTRICT O			OF DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CALIFORNIA	
HORIZED	DISPOSITION(S) CHECK A	PPLICABLE ITEMS			FOR CORONE	R'S USE ONLY
B. CREMAT	TION OF CREMATED REM A CEMETERY FIC USE	AINS OTHER	- Barris San Market Control		(Name and Addre	
BURIAL	Mt. Hope Sen Diego			1/20/9	5 Val	
CREMATION	Daniein C		CREMATORY	3/27/5K	ED 12C. SIGNATURE OF DERSON	IN CHARGE OF CREMATION
SCIENTIFIC USE		DDRESS OF CALIFORNIA F	FACILITY RECEIVING REMAINS	138. DATE RECEIV	VED 13C. SIGNATURE OF PERSON	CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING STA	ATE OR COUNTRY WHERE TO BE SHIPPED	14B, DATE SHIPPI	D 14C ADDRESS AND SIGNATUR OF PLACING WITH THE C	
SCATTERING A OR DISPOSITION O THAN IN A CEME	THER FICIENT TO IDE		E, OR OTHER DESCRIPTION SUF- A <u>DISTRICT</u> OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON CHARGE OF DISPOSITION	

COPY 3 OF THE PERMIT IS TO BE RETURNED TO THE COUNTY OF DEATH WHEN THE REMAINS ARE DISPOSED OF IN ANOTHER DISTRICT. IF NOT APPLICABLE, COPY 3 MAY BE DISCARDED. THE LOCAL REGISTRAR MAY DESTROY ANY ORIGINAL OF DUPLICATE PERMIT AFTER ONE YEAR FROM SUE DATE.

CITY OF SAN DIEGO, CALIFORNIA

46414



WHITE..... TO CUSTOMER CANARY...... CEMETERY PINK...... AUDITOR

		Date:	. 19
From: Florence G. Ads	Une Address: 8070 Ongra	@ QAH. #802.	La Musa Ct 919
One Rundred two	enter-fine a sis/100	Dollars (	125.00)
nPayment of	spir cotting lan-	Fred adl	2
	00		The sales of
lot 47 Grave	5Row8	Section 2	Division //
Ínvoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	GREDIT 67007 20% Sales Care 77184 - 80% Sales 77184 - 0 f Lots 77184 -	
Acct No		Opening/ 100 Closing 77181 - Burial 100 Containers 77182 -	
BALANCE DUE		Hendling Fee TT185- Recording & 100 Misc. Fees 77183	13500
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐		Pre-Need 63033 Trust 9022- Sales Tax 60101 78390	
AC-212 (Rev. 5-94)	ISSUED BY KOUCK	TOTAL PAID \$	125 00

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 3/23/95

of Mathanial	Holmes
ina 75. Vault	Funeral, date, time July 13/38/95 @ 1
	weside: Rappdale Mortuary
	of regular work day or an extra charge of \$ 150
will be applied and billed to undersigned. $\chi$	KH
War time veteran	
Lot 96 Grave 6 Row -	Section 3 Division/Block 12
	795 N
Grave space & Care Fund	N
Additional spaces and care fund	2 MAC
Opening/Closing & Setup.  Burial Container T.S. Vaux	08
Handling Fees	10 4-29-95 185-0
Flower vases - Marker setting fee	<u> </u>
Recording and filing fee	45.00
Sales taxes	17.50
· want 18	Total Due A / 6/6 1-00
Jusor 8910 Paid	receipt number Rec # 46046 # 4-17-00
200	Balance due 1250-5
I hereby certify I am the X SON	of the above named decedent
and this is your authority to make disposition that I have the right to make this authorization	n of remains as above indicated, I certify and represent in and I agree to hold Mt. Hope Cemetery harmless from
any liability on account of sald authorization	and interment.
	VV. HARTIN
I hereby authorize the interment in lot I hold under deed.	Signature 1/870 5- 1010 0 11
	40 /0 SCIDIA HA
Signature of recorded holder of deed	San Vikao 7211
/	7 6/9-266-8418
	2517911
- 12123	Invoice # 901/84
The second secon	A 1111 7 1 1 A

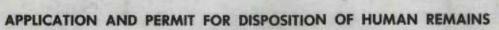
#### MT. HOPE CEMETERY

PY-1012 (11-89)

W.O. # E-12123

### NOTE

1250.00	San Diego, California	march	23	19.95
Thirty days after date for value received, the under 3751 Market Street, San Diego, CA 92101, the sun with interest from	not welve Hundred 28, 1995	(fifty = 5)		DLLARS
Should this note not be paid when due, it shall accrue at the rate indicated above. Principal and in will be liable and consents to renewals, replacem maturity, and waives presentment, demand and person who signs this note agrees that recourse contained herein. If any action be instituted on the may fix as attorney's fees.	nterest are payable in lawful rents and extensions of time protest and the right to asser may be held against his/her	noney of the Unite for payment here t any statute of lin separate propert	ed States. The of before, at mitations. A my for any ob	e maker or after married ligation
Part II, Chapter I, Article 2, Paragraph authorizes the removal of any remains from PRINT NAME RICHARD HOLMES  ADDRESS 4870 Solo 19 1 Av. CALIFORNIA DRIVER LICENSE NUMBER #30210	signature R		and unpaid.	



E 12123

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

Nathankel	NT-FIRST (GIVEN)	1B. MIDDLE	Holmes		2. DATE OF BIRTH	3. DATE OF DEATH 4. SEX 1033/22/1995 M
San	Diego	19/	58. COUNTY OF DEATH		NAME RELATIONSHIP, FULL N OF INFORMANT ICHARD Holmes	MAILING ADDRESS AND ZIP CODE
74 TYPED NAME AND AD	lale Mort.;	5050 Federal I San Diego, CA	RSON ACTING AS SUCH 78. CA	F APPLICABLE S	814 Cherokee As an Diego. CA 9: SIGNATURE OF APPLICANT—	2104 Forum taking permit, 8B. DATE SIGNED
ACKNOWLEDGMENT OF AP	PERCANT   I hereby a Section 10	cknowledge as applicant that the proper 376 of the Health and Safety Code, and w	and disposition stated become is one of the as authorized pursuant to Section 7100 of th	dispositions auffinized by be Health and Safety Code.	gethicke	ac 03/23/1995
	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH PI CORNIA HEALTH AND SAFETY ( TY FOR THE DISPOSITION SPEC D RIGHT OF DISPOSAL OUTSIDE OF CALF	IFIED \$7.00	98. DATE PERMIT IS 03/24/299		OCAL REGISTRAR ISSUING PERMIT 9504092
ANY CHANGE IN DISPOSITION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	Vital Reco	EGISTRAR OF DISTRICT OF IN CAUFORNIA Ords; P.O. Box I Diego, CA 92180	35222		DISTRICT OF DISPOSITION- IN ANOTHER DISTRICT IN CALIFO	RNIA
THORIZED DISPO	OSITION(S) CHECK A				FOR COR	ONER'S USE ONLY
B CREMATION C DISPOSITION O THAN IN A CE D. SCIENTIFIC US	OF CREMATED REM. METERY SE	AINS OTHER	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	DRNIA	(Name and A	PENDING—REMAINS LOCATED AT
BURIAL	Mt. Hope	Cemetery; 3751 San Diego	Market St.	3/28/95	· ODa	7
CREMATION	N/A	odress of california cr	Sealer	128. DATE CREMATED	120. SIGNATURE OF PERS	SON IN CHARGE OF CREMATION
	N/A	DORESS OF CALIFORNIA FA	CILITY RECEIVING REMAINS	136. DATE RECEIVE	D 13C. SIGNATURE OF PER	SON IN CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING STAT CREMATED REMAINS ARE T		14B, PATE SHIPPED	14C. ADDRESS AND SIGN OF PLACING WITH T	NATURE OF PERSON IN CHARGE THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, ENTIFY FINAL PLACE AND CA		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PER CHARGE OF DISPOS	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

Three Mundred	4 99/100-	Date: 11	10 CH 92	19 7
	terment of nathan		red	
ot 96 Grave		ection	Division Block	12
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	CREDIT 20% Sales Care 90% Sales of Lots Opening/ Closing Burist Containers Handling Fee Recording & Misc. Fees Pre-Need	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77185 100 77185 100 77185	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check CAC-212 (Rev. 5-94)	ISSUED BY In Clark	Trust Sales Tax TOTAL PAID	9022 60101 78390 \$ 300	000

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 3/24/95

ou are hereby authorized and instructed, so			egulations, to in	nter the rema
na lines	Funeral, date	time Th	non 3/2	145@
Church, Chapet Graveside Church &	nantsii	to CAL	Burial	Mortu
All Funeral cars must arrive before 3:30 p.m.	-	ork chay or a	n extra charge	of \$ _150
War time veteran 000.	14/	ever.		
			7:	10
ot <u>25</u> Grave Row	Sect	ion	Division/B	lock /O
Grave space & Care Fund				995.
Additional spaces and care fund 8 14	Wi			0
Opening/Closing & Setup				7/2-
eyesumogenesses wenteren heaville illight from the form		770	رم	190
Burial Container	0085	0.0000000000000000000000000000000000000		1415
Surial Container FULV Handling Fees VREASY	PK. P			1
Flower vases - Marker setting fee				-0
Recording and filing fee				45.a
Sales taxes				15.30
		Total D	ue	1763
Paid	receipt numb	or Per	#46047	\$441.6
v -1-10	1.0.	0	Balance due	
hereby certify I am the And this is your authority to make disposition hat I have the right to make this authorization my liability on account of said authorization and the said autho	and I agree	to hold Mt.	of the above n dicated. I certif Hope Cemeter	v and repres
hereby authorize the interment in lot I	X1	edt	atril	K
old under deed.	1	3003	pla	la D
ignuture of recorded holder at deed	7	Ban	Diear (	Ca, 92
/	Telephon	19-	479-4	177300
E 12124	Invoice	* 2	5178	5
Vork Order #	Acct. #	-00	270	
Y-593 (Rev. 8-92)		200	4728	0×4-

MAT	HC	DE	CEN	ET	ERY
mar.		<b>/</b> FE	CEIV		

PY-1012 (11-89)

W.O. # E-12124

### NOTE

	1,322.30	. San Diego, California _	march	24 19	95
	Thirty days after date for value received, the undersign 3751 Market Street, San Diego, CA 92101, the sum of with interest from	huteen Hundr	ed Swenty Fe	reasurer, or ord	ARS
	at the rate of 12 percent per annum, payable on den	nand.			
,	"Should this note not be paid when due, it shall the accrue at the rate indicated above. Principal and interwill be liable and consents to renewals, replacement maturity, and waives presentment, demand and properson who signs this note agrees that recourse me contained herein. If any action be instituted on this may fix as attorney's fees.	erest are payable in lawful a hts and extensions of time oftest and the right to asset ay be held against his/he	money of the Unite for payment here rt any statute of lir r separate propert	d States. The most before, at or a nitations. A many for any obliga	aker after rried ation
	Part II, Chapter I, Article 2, Paragraph 75 authorizes the removal of any remains from a PRINT NAME TED PATRICK				
	ADDRESS 3003 PLATO DR.		0 CP. 92	139	
	CALIFORNIA DRIVER LICENSE NUMBER GO 46 45	502 SSN	+ 4/3-30	95-92	_



#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	CONTRACTOR OF THE PROPERTY OF	IC. LAST (FAMILY)	2. DATE OF BIRTH 3. DATE OF DEATH 4. SEX
Theodere	Roosevelt	Patrick, Sr	03/23/1905   03/22/1995   M
SA. CITY OF DEATH	4	SB COUNTY OF DEATH—OUTSIDE CALIF.,	8 NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMANT PATTICK, JT-Son
San Diego		San Diego	
California	ODRESS OF CALIFORNIA—FUNERAL DIRECTOR OR PERSON AN Cremation & Burial Chapel	IF APPLICABLE	San Diego, CA 92139
5602 E1 Ca	jon Blvd. San Diego, CA 92115		8A. SIGNATURE OF APPLICANT—Turn taking sernit, 8B. DATE SIGNED
ACKNOWLEDGMENT OF A	PPECANT I hereby acknowledge an applicant that the preprint dispersion 10376 of the Health and Salety Code, and was authorize	from stated herein is one of the diagonations authorized by not pursuant to Section 7100 of the Health and Soleta Code.	Jalua 03/24/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI- SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT. NOTE: THE PRIMIT GRES NO BIGHT OF DISPOSAL OUTSIDE OF CALIFORNIA.	9A AMOUNT OF FEE PAID 9B DATE PERI 93/24/1 \$7.00 Kyle Ch	995 9504085
TION REQUIRES A NEW TO SHOW FINAL POSITION	9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH- IF DEATH OCCURRED IN CAUPORNIA Vital Records-P.O. Box 85222 San Diego, CA 92186-5222	I IE DISPOSITION IS TO OR	AR OF DISTRICT OF DISPOSITION— CEUR IN ANOTHER DISTRICT IN CALIFORNIA
HORIZED DISP	OSITION(S) CHECK APPLICABLE ITEMS		FOR CORONER'S USE ONLY
B. CREMATION		E. TEMPORARY ENVAULTMENT F. DISINTERMENT* G. SHIP IN TO CALIFORNIA H. TRANSIT TO OUTSIDE OF CALIFORNIA	L DISPOSITION PENDING—REMAINS LOCATED AT (Name and Address)
RURIAL	Mount Hope Cemetery	3/216	JED   11C SIGNATURE OF PERSON IN CHARGE OF BURIAL
	San Diego, CA  12A NAME AND ADDRESS OF CALIFORNIA CREMATOR	RY 128 DATE CREW	IATED 12C. SIGNATURE OF PERSON IN CHARGE OF CREMATION
CREMATION	- Metal Don-Si		The post of the second of the
SCIENTIFIC	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY I	RECEIVING REMAINS 138. DATE REC	EIVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY
TRANSIT	14A. NAME AND ADDRESS IN RECEIVING STATE OR O REMAINS OR CREMATED REMAINS ARE TO BE S		PED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHE FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT		ON CHARGE OF DISPOSITION 150. LICENSE NUMBER OF CHARGE OF DISPOSITION OF CREMATED RE- MAINS DISPOSER — IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



### WHITE......TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA

		Date:	CUICED 27,18	3 1
From Augion Pitrick	Address: 3003 Plato	D. S.D.	CA 92130	7_
Four blu	endred Sertinane & S	Mao Dolla	rs (\$ 441. 0	0,
nPayment of	taribent of the	dou Retrie	k 51.	
0.507	0			
Grave	RowS	ection	Division Block	10
nvoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67 20% Sales Care 77	7007	_
Acct. No.		of Lots 77	100 7 7/	00
N.O. E-12124		Closing 77 Burial	181	
BALANCE DUE # 1322 30			182	
	1. 1881 1871	Recording & 77	100	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		Trust	1033 1022	_
106	ISSUED BY IN Clark		1390	ish
NC-212 (Rev. 5-94)	100000	TO THE TAIL	776	0

## MT. HOPE CEMETERY

City of San Diego

Date 3/27/95

Paid receipt number 8-46056  Balance due  I hereby certify I am the	-010	100 21-1		moray	01
All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge of will be applied and billed to undersigned.  War time veteran			2.18	VaulifLiner	
War time veteran			U	hepet Graveside Churc	
War time veteran	\$ 150	day or an extra charge of	.m. of regular work	cars must arrive before 3:	All Funeral co
Grave space & Care Fund  Additional spaces and care fund  Opening/Closing & Setup  Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filling fee  Sales taxes , 10  Paid receipt number			<u>K</u>	lied and billed to undersign	will be applie
Additional spaces and care fund Opening/Closing & Setup Burial Container Handling Fees Flower vases – Marker setting fee Recording and filling fee Sales taxes				reteran no.	War time vet
Grave space & Care Fund  Additional spaces and care fund  Opening/Closing & Setup  Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filling fee  Sales taxes Describe Paid receipt number B-46056  Balance due  of the above nan and this is your authority to make disposition of remains as above indicated. I certify a that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery hany liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Signature of recorded holder at deed  Gity  Address  Signature of recorded holder at deed	* 9	/ Division/Bto	Section	30 Grave - R	Lot 3330
Additional spaces and care fund  Opening/Closing & Setup  Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filling fee  Sales taxes in the paid receipt number 8-46056  Balance due of the above name and this is your authority to make disposition of remains as above indicated. I certify any liability on account of said authorization and I agree to hold Mt. Hope Cemetery in any liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Signature of recorded holder of deed  Signature of recorded holder of deed	100.00	,			
Opening/Closing & Setup  Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filling fee  Sales taxes and the setting fee   Paid receipt number B-46056  Balance due of the above name and this is your authority to make disposition of remains as above indicated. I certify a that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery hand liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Signature of recorded hister of deed  Signature of recorded hister of deed	10				
Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filling fee  Sales taxes July Paid receipt number B-46056  Balance due  of the above name and this is your authority to make disposition of remains as above indicated. I certify a that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery hany liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Signature of recorded holder at deed  Signature of recorded holder at deed					
Flower vases – Marker setting fee  Recording and filling fee  Sales taxes					
Recording and filing fee  Sales taxes July Paid receipt number B-146056  Balance due  I hereby certify I am the of the above nar and this is your authority to make disposition of remains as above indicated. I certify that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery hany liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Signature of recorded holder of deed  City  Tilephane	-			tainer	Burial Contai
Sales taxes Described Paid receipt number B-46056  Balance due I hereby certify I am the	0			ees	Handling Fee
Paid receipt number B-46056  Balance due  I hereby certify I am the					
Paid receipt number B-46056  Balance due  I hereby certify I am the	45.00			and filing fee	Recording an
Paid receipt number B-46056  Balance due  I hereby certify I am the				مرابع النارة	Sales taxes
Balance due  I hereby certify I am the	270.00	Total Due		the mil	wx.
I hereby certify I am the	270.00	B-46056	aid receipt number_	v-195 -	Die weller
and this is your authority to make disposition of remains as above indicated. I certify a that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery hany liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Signature of recorded holder of deed  City  Tillephane	80	Balance due		120	واوسه
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_ 19195 Invoice #			Invoice #	- 12125	
Work Order # E TATAS	C 13X		Acct #		Work Order A

THE RESERVE OF THE PARTY OF THE



Invoice No.

BALANCE DUE

Pre-Need Lot

Pre-need Trust

AC-212 (Rev. 5-94)

Acct. No.

WHITE ..... TO CUSTOMER CANARY CEMETERY PINK AUDITOR MOUNT HOPE CEMETERY 527-3400

Leatheringel Address Dollars (\$ Payment of Division 3330 Section Block Grave Row NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE CREDIT 67007 20% Sales Care 80% Sales 100 of Lots 771B4 Opening/ 77181 Cloning Buriat Containers 77182 Handling Fee 77185 Recording & Misc. Fees 77183 Pre-Need 63033 At Need On Acct Trust 0022 Check D Sales Tax 60101 78390 Cash TOTAL PAID



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

malu	ary -	Date:	, 19 7
From Godherinail	Address: 6303 El (	an ol,	10 92115
Two hundred best	why 4 20/100	D D	ollars (\$
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2237			Division
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		Recording & Misc. Fees	77183 45 00
Pre-Need Lot At Need DO On Acct	The second secon	Pre-Need Trust	9022
Pre-need Trust  Cash  Check		Bales Tax	60101 78390
AC-212 (Rev. 5-94) /_ 2 U =>	ISSUED BY	TOTAL PAID	1 270 00

E12125

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

A NAME OF DECEDE Moray	ENT-FIRST (GIVEN)	18. MIDDLE Devo	IC. LAST (FAMILY) Davis			G OF DEATH 4 SEX
San Die	ego		SE COUNTY OF DEATH	H-OUTSIDE CALIF., 6.	NAME RELATIONSHIP FULL MAILING A OF INFORMANT Drike Davis, mother	DDRESS AND ZIP CODE
Feathering San Diego	gill Mortue	ry 6322 El Ca		F APPLICABLE N	617 E. Plaze Blvd. ational City, CA 91	#217 .950
ACMONITORNET OF A	I hereby a	schoowledge as applicant that the pro	posed disputition stated herein is one of the disposed disputition stated herein is one of the	dispositions authorized by	SIGNATURE OF APPLICANT—PEDOS LIMITS	03- 17-1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORS IN THIS PERMIT	JED IN ACCORDANCE WITH FORMA HEALTH AND SAFETY TY FOR THE DISPOSITION SP ID NIGHT OF BEDYGAL GUISSE OF CA	PROVI- CODE ECIFIED 7.00	AID BB. DATE PERMIT IS	SUED 9C SIGNATURE OF LOCAL REC	SISTRAR ISSUING PERMIT
	IF DEATH OCCURRE	EGISTRAR OF DISTRICT OF D IN CALIFORNIA 5222, San Dieg			F DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CALIFORNIA	7 38
HORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS			FOR CORONER'S	S USE ONLY
B. CREMATION C. DISPOSITION THAN IN A CI D. SCIENTIFIC US BURIAL	SE	odress of California C	F. DISINTERMENT  G. SHIP IN TO CALIFO  H. TRANSIT TO OUTS	PRNIA	(Name and Address)	CHARGE OF BURIAL
CREMATION	12A. NAME AND AL	NON SEAL	NAMES AND ASSOCIATION OF THE PROPERTY OF THE P	128. DATE CHEMATED	12C SIGNATURE OF PERSON IN C	HARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND AL	DDRESS OF CALIFORNIA F	FACILITY RECEIVING REMAINS	13B. DATE RECEIVE	13C. SIGNATURE OF PERSON IN	CHARGE OF FACILITY
<b>İ</b> IRANSIT	14A. NAME AND AS REMAINS OR	DDRESS IN RECEIVING STA CREMATED REMAINS ARE	ATE OR COUNTRY WHERE TO BE SHIPPED	14B. DATE SHIPPED	14C ADDRESS AND SIGNATURE OF PLACING WITH THE CARR	
	15A, ADDRESS, NEA	DEST DOWN ON SHOOK ME	, OR OTHER DESCRIPTION SUF-	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	150 LICENSE NUMBER

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

	- 1
мт. но	PE CEMETERY
A INTERM	ENT ORDER
a their data city	of San Diego
The Strong of	Date 3/23/95
July Burns.	- Jan
You are hereby authorized and instructed, su	bject to your rules and regulations, to inter the rema
or Valetta meRoy	6
ina T.S. Vault	Funeral, date, time
Church, Chapel, Graveside	Mortua
	of regular work day or an extra charge of \$
will be applied and billed to undersigned.	
	THE RESERVE OF THE PARTY OF THE
War time veteran	
Lot 43 Grave 7 Row_	Section / Division/Bleek //
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Additional spaces and care fund	
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I hereby authorize the interment in lot I hold under deed.	Valetta 7 Myloy
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ary more or separation noticer or alead	City I 284 1220 2pc
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San Diego, CA 92105											
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NAME Valita The Hay

ADDRESS 3607 Chamond Que

CITY Son Detgo STATE Ca ZIP 92105

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ACCOUNT No.

Valuatio Medica

Month and Day Due Indicated Below

Amount due when paid on, or before.

due date above.

Final Payment & 339,00

NAME Valette Francisco Poy
ADDRESS 5308 Monrae There
CITY Sem Disao STATE Ca 2199211.

NAME

ACCT. NO.



ADDRESS 3	607 Chamoune Ave. S.D. 92105 RATING	LIMIT		0 ***72	782"41153""
DATE	ITEMS	DEBIT	1	CREDIT	BAL
3-22-95	Opened Pre-Need Trust (second burial of DIP)				
	Trust: O/C; T.S. Vault; Handling Fee; Rec. Fee;		T		1114
	Tax on Vault.	872.50	П		
2 22 25			11		
3-22-95	Downpayment Rec# 46048		11	218.00	654.
6-95	R-46098 CPN1	1 14		27-00	627
8/95	Rect He194 Coupon 2			27.00	600
17/95	Rec # 46316 Cayon 3			27.00	573
6 95	11. 46410 11 4			97,00	546
8/7 95	1 46508 11 5 .			a7 00	519
917 95	" 46588 6			27 ∞	492
10/5 95	" 46663 7			27 00	665.
111795	Rec 46783 # 8.			8000	43
17	11 9		H	2700	61
1/3/96	Aza. 46974 11 11		11	12/200	504
15/46	1 47073 W			2700	3575
-5 96	R - 47141 13			2700	5303
-10 90	R- 47299		1	2700	503
10 10	1 011		1	100	PLO!

NAME			ACCT. NO.	
ADDRESS	Truck	RATING	LIMIT	
ATE	ITEMS	DEBIT	CREDIT	BALANCE
		111111	1111	50350
5-8 96	Coupon # 14 R - 47378		12700	
6-10 196	" # 15 R-47497	111111	R1700	
7-3 90 8-4 96	# 10 R-47575	1111111	12900	420 50
8-le 96	" #17 R-47680		27.00	393 10
9-5 90	1 #18 R-47777		27.00	31000 OD
10-16 90	11 #19 R-47920		27.00	339.00
10-6 96		111111	27.0	31200
10			389,00	18
	paid in full			
	for our gain		1111	
	11-10-910			
	" a 14			
				Hill

47575



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

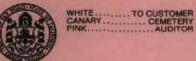
		Date	, 19	118
From: Valetta F. Mc ROY	nd notice 3007 Chamos	TIME PER S	in Dugo, a	9
In Part Payment of Pre	need thist	Dollars	\$ 200	
Lot 43 Grave	7RowSe	ection/	Division //	
Invoice No.	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 87007 20% Seins Care 77184 80% Seiss 100		H.
Acct. No w.o. £ -/2/2/0		of Lots 77184 Opening/ 100 Closing 77181 Burist 100		
BALANCE DUE # 0 5 420.9		Containers 77182 100 Handling Fee 77185		
Pre-Need Lot  At Need  On Acct  O	A STATE OF THE STA	Recording & 100   Misc. Feee   77183   Fre-Need   63033   Trust   9022		200
Pre-need Trust Cash Check A	ISSUED BY CAMPA DURANT	Sales Tax 60101 78390 TOTAL PAID \$	29	00
-0001				



WHITE......TO CUSTOMER CANARY CEMETERY PINK......AUDITOR

From: Valetta 1110	Three mind	red thirty	none 4 no	Dollars (\$	3390	50,
Payment of 43	of	Row	Section		Division //	
Acct. No	NOT VALID FOR P	URPOSE STATED UNLESS STA	MPED CREDIT 20% Sales Ca 80% Sales of Lots Opening/ Closing Burtal Containers Handling Fee Respecting & Miss. Fees	77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 —		
The state of the s	On Acct Check Constant Issued by	ntina Durg	Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 — 60101 78390 —	339	00

46663



	20	Date:	101-	197
From: Valitta Me Kou	Address: 3607 Cham s	wine any	109	3105
Twenty - wream &	20/100	- 00	liars (\$ 27.00	
In pant Payment of Ph	o-need trust	-		
Payment of			II TO LOW IT	
Lot 43 Grave	7 Row Se	ection_	Division Block	1
	NOT VALID FOR PURPOSE STATED LINLESS STAMPED	CREDIT	67007	na i
Invoice No.	"PAID' IN THIS SPACE.	20% Sales Care 80% Sales	77184	
Acct. No.		of Lots Opening/	77184	
w.o. E-13136		Closing Buriat	77181	-
NAME OF THE OWNER OWNER OF THE OWNER OWNE	*	Contsiners	77182	
BALANCE DUE		Handling Fee	77185 —	
		Recording & Misc. Fees	77183	CO. N
Pre-Need Lot At Need On Acct		Pre-Need Trust	63033	00
Pre-need Trust 🖽 Cash 🗆 Check 📮	(A)Da I	Salas Tax	90101 78390	
AC212 (Rev. 594) 5182	ISSUED BY / SOUCH	TOTAL PAID	1 27	00

		Date:	, 19=/-
From: Valetta Me Roy	Address: 3607 Cham	9	Lans Drigo
In Payment of Of	re-need trust	Dollars	(\$ 27.00)
Lot 43 Grave	7 Row	Section/	Division Block //
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPE "PAID" IN THIS SPACE.	O CREDIT 6700 20% Sales Care 7718 80% Sales 10 of Lots 7718	0
W.O. E-13126		Opening/ 10 Closing 7718 Burial 10 Containers 7718	0 2 0
Pre-Need Lot At Need On Acct		Handling Fee 7718 Recording & 10 Misc. Fees 7718 Pre-Need 6303 Trust 902	27 00
Pre-need Trust Cash Check AC-212 (Rev. 594)	ISSUED BY PRINCE	Belen Tax 6010 7639 TOTAL PAID	27 00



WHITE...... TO CUSTOMER CANARY CEMETERY PINK AUDITOR

Valtte or O	2127 062	Date:	8-7	05	1995
Twonty-seven		en On	oliars (\$	37.00	
Lot 43 Grave	7 Row Se	ection		Division / /	
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 —	H Sec(IA)	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Acces (Rev. 584)	ISSUED BY Rouch	Recording & Misc. Fees Pre-Need Trust Sales Tax	77183 — 63033 9022 — 60101 78390 —	37	00



WHITE.....TO CUSTOMER CANARY.....CEMETERY PINK....AUDITOR

From Ma Citta 470 Ra	4 Address: 9609Ph an	Date:	ue. 9	1990
In Payment of	bee I need true	To Do	llars (\$	00,
Lot 43 Grave	7Rows	ection	Division Block	1/
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees	67007 77184 100 77184 100 77187 100 77187 100 77188 100 77185 100 77185	
Pre-Need Lot	ISSUED BY	Pro-Need Trust Sales Tax TOTAL PAID	63033 9022 60101 78390 \$	700

## WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

		Date:	nuy s	19
From: Valetta Inc Roy	Address: 3607 Cham	oune AV	e. 5.D. 931	05
Sulon	ten Seven doctars	Do	ollars (\$ 27.0	0
nPayment of _Px	- Truck Trust - Seco	nd of D	IP; O	6,
13 Vault; Hard	do Per see you	on Vaul	t	
ot <u>43</u> Grave	7 Row So	ection/	Division Block	11
nvoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184	-
Acct. No.		60% Sales of Lots Opening/	77184 100	-
N.O. E-12/26	OF THE STATE OF TH	Closing Burial Containers	77181	
BALANCE DUE \$ 1000,50	The Party of the Party of	Handling Fee	77185 —	
	and the last of the last	Recording & Misc. Fees Pre-Need	100 77183 63033	100
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	The same of the same of the same of	Trust Sales Tax	9022 60101	-
(C-212 (Rev: 594)	ISSUED BY M. Clark	TOTAL PAID	18390	00
the second second second				All Printers and the Paris of t

- Transk m . Or



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

		Date.	-	8
From: Valetta Mc Coy	Address: 3(0)7 Channel		S. O. CR 9	205
- Jun hund	sed Eighteen & Two	Dollars (	\$ 218.00	2
n Payment of	med fruit Losson	d bureaf &	(B. IP).	0/0
TS Vanet bandle	ma Reading her	· Tax on	vauls	tion
Lot 43 . Grave _	RowSo	ection	Division Block	1
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 87007 20% Sales Care 77184		
Acct. No.		80% Sains 100 of Lots 77184		
W.O. F - 12124		Opening/ 100 Closing 77181 Burial 100		-
BALANCE DUE # 1854 50	THE PARTY NAMED IN	Containers 77182 100		
		Handling Fee 77185 Recording & 100 Misc. Fees 77183		
Pre-Need Lot At Need On Acct	THE RESIDENCE OF THE PARTY OF T	Pre-Need 63033 Trust 9022	218	00
Pre-need Trust Cash Check	A STATE OF THE PARTY OF THE PAR	Sales Tex 60101 78390		
AC-212 (Rev. 5-94) 50/1	ISSUED BY M. CLARK	TOTAL PAID \$	218	00



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

		Date:	June	7 .	19 9
From Valetta F Mrkoy	- Address: 3107 Champu	ne Avr.	3.b.	92105	
	Jugaty Series doll	ary-p	ollars (\$ _	27.00	)
nPayment of	freed Luck for 3100	nd bur	al of	(D.T.	15
Old 18 Chust Hara	Clina Lie Resording	de h	y dis	Vault	
ot 43 Grave	RowSe	oction /		Division Block	11
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	to Mark	CREDIT 20% Sales Core 80% Sales of Lote Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77154 100 77184 100 77181 100 77182 100 77185 100 77185 100 77183 63033 9022 60101 78390	27	00
AC-212 (Rev. 5-94) 45073	ISSUED BY	TOTAL PAID	*_	27	00

#### OFFICIAL RECEIPT

#### CITY OF SAN DIEGO, CALIFORNIA

MOUNT HOPE CEMETERY 527-3400

**	0100
Diego (n	95
Division Block	
3	7 00
3	27 250

Dollars

ACTES

Lot Grave	7RowSe	ection	Division //
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	80% Sales of Lots Opening/ Closing Burial Containers 7 Handling Fee Recording &	7007 7784 100 7784 100 7781 100 7782 100 7782 100 7785
Pre-need Trust Cash Check	Har And	Pre-Need 6 Trust Sales Tax 6	9022 90101 8390

#### MOUNT HOPE CEMETERY 527-3400

46376

From Natotta Makou	Address: 3/60 7 0/4 0000	Date:	916 Don B 20	1995
In Payment of	THE RIENT TOUCH	Do	llars (\$	0 ,
Lot. 43 Grave	7 Row Se	ction	Division Block	11
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees	67007 77184 100 77184 100 77181 100 77181 100 77182 300 77185	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 5-94)	ISSUED BY KATELL DAK	Pre-Need Trust Sales Tax TOTAL PAID	63633 9022 60101 78390	00

## WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

From Aletta 7 MC	Royaddress 3607 Cha e-need Dru	Date:	1 2 2 00 )
Lot 43 Grave	7 Row So	ection/	Division //
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	CREDIT 20% Sales Care 77754 80% Sales 100 of Lots 77754 Opening/ 100 Closing 77181 Burial 100 Containers 77182 Handling Fee 77185 Recording 8 77183	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 5-94)	ISSUED BY A. Woisner	Pre-Need 63033 Trust 9022 Sales Tax 50101 78390 TOTAL PAID 8	2700

#### OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

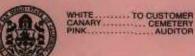
#### CITY OF SAN DIEGO, CALIFORNIA

#### MOUNT HOPE CEMETERY 527-3400

47073

From Valetta Ma Roy In part   Payment of	Address: 3607	Chamoure T	Dollars (\$ 2	0 ugo	4210
Lot 43 Grave	17 Row_	Section	1	Division	T
Acct. No W.O S37.50	NOT VALID FOR PURPOSE STATED UNI. "PAID" IN THIS SPACE.	ESS STAMPED CREDIT 20% Sales of Lots Opening/ Closing Burial Containers Handling Fe	77184 — 100 77181 — 100 77182 —		
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐	1 111	Recording & Misc. Fees Pre-Need Trust Sales Tax		27	00
AC-212 (Rev. 5-94) 5-2-71	ISSUED BY 30 - XVIVV	TOTAL PAID	41.18	33	00

#### OFFICIAL RECEIPT



CITY OF SAN DIEGO, CALIFORNIA

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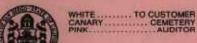
From: Valette Me Roy	Address: 3607 Vienner		10 9210 Mars (\$ 27.00	1996
7-1	7 Bow Se	ection	Division Block	11
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burist Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77184 100 77184 100 77185 100 77185 100 77185 100 77185 100 77185 100 77185 100 77185 100 77185 100 77185 100 77185 100 77185 100 77185	0.0

#### MOUNT HOPE CEMETERY 527-3400

47299

From: Valetta MeRUI TWENLY Seven and In_Part Payment of Pre-	notico notal tust	Date: 4/10	10-10-10-10-10-10-10-10-10-10-10-10-10-1
Lot 43 Grave	7RowSe	ection	Division //
Acct. No	NOTVALIDFOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	CREDIT 6700 20% Sales Care 7718 80% Sales 10 of Lots 7718 Opening/ 10 Closing 7718 Burial 10 Containers 7718 Recording A 10 Misc. Fees 7718 Pre-Need 6303 Trust 9002 Sales Tax 6010 7839	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

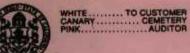
#### OFFICIAL RECEIPT



CITY OF SAN DIEGO, CALIFORNIA

_	_	400	_	_
- 48.7	~8		_	€2.
48.	•	83	•	-
_		•	•	

From: Valette he Roy	Address: 3607 Chamer		19 9215 ars (\$ 27.00	76
Payment of	7 Row Se	ection	Division 7	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	80% Sales of Lots 7: Opening/ Closing 7: Burial Containers 7: Handling Fee 7: Recording 4 Misc. Fees 7: Pre-Need 6: Trust Sales Tax 8:	7007 7184 100 7184 100 7181 100 7182 100 7185 7185 7185 7185 7185 7185 7185 7185	0.0



tion		Division \	Va.
CREDIT 20% Sales Care 80% Sales of Lote Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 — 6002 — 60101 78390 — 60101	27	00
	20% Sales Care 80% Sales of Lots Opening/ Closing Burisi Containers  Handling Fee Recording & Misc. Fees Pre-Need Trust	80% Sales 100 of Lots 77184 — Opening/ 100 Closing 77181 — Buriel 100 Containers 77182 — 100 Handling Fee 77185 — Recording & 100 Misc. Fees 77183 — Pre-Need 53033 Trust 9022 — Sales Tax 60101 78390 —	80% Sales 100 of Lots 77184



WHITE......TO CUSTOMER CAMARY.....CEMETERY PINK.....AUDITOR

From: Valetta McRby Owenty Deven ar	Address: 3007 Chame	Date: 8-4 UNL AVE S.1 Dollars	1, Ca 92105 (s 27.00
In Payment of P21  Lot 43 Grave	7s	ection/	Division //
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 80% Sales 100 of Lots 77184 Opening/ 100 Closing 77181 Burisi 100 Containers 77183 Handling Fee 77185 Recording & 100 Maisc, Fees 77185	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 5-94)	ISSUED BY Catina Durgeon	Pre-Need 53033 Trust 9022 Sales Tax 80101 78390 TOTAL PAID \$	27 00

47920



WHITE TO CUSTOMI CANARY CEMETER VINK AUDITO

In Part Payment of Pre-herd Lot and trust  Lot 43 Grave Row Section Block // PAID' IN THIS SPACE.  NOT VALID FOR PURPOSE STATED UNLESS STAMPED 20% Sales Care 77184 80% Sales 100 of Lots 77184 Opening/ 100 closing 77181 100 Containers 77182 Burial 100 Containers 77182 Burial 100 Containers 77182 Pre-Need 100 Miles Feet 77185 Recording 8 700 Miles Feet 77185 Pre-Need 63833 27 60 Pre-Need Trust 9022 Sales Tax 60101	From: Valetta F. No Poy TWENTY SEVEN AN	d 120/100	amnine are san D	uap 92105
Acct. No	42	need lot and tru	Section 1	
FIGURE TIME TO CHECK THE CONTROL OF	Acct. No	NOT VALID FOR PURPOSE STATED UNLESS "PAID" IN THIS SPACE.	SSTAMPED CREDIT 67007 20% Sales Care 77184 80% Sales 100 of Lots 77184 Opening/ 100 Closing 77181 Burial 100 Containers 77182 General 100 Handling Fee 77185 Recording & 100 Miac. Fees 77183 Pre-Need 63633 Trust 9022	27 00



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

Valita M. D	au Address: 3607 Chan	Date:	1-6 1995
Tues by Surfey	a notico	Doll	ars (\$ 27.00 )
ot Grave	Row	Section	Division Block
Acct. No	NOTVALID FOR PURPOSE STATED UNLESS STAMPER PAID IN THIS SPACE	20% Sales Care 7 80% Sales of Lots Opening/ Closing 7 Burial Containers 7 Handling Fee 7 Recording 5 Misc Feet 7 Pra-Nised Trust Sales Tex 6	7007 7184 100 7784 100 7181 100 7182 100 7185 100 7185 100 7185 100 7185 100 9022 0101
C212 (Rev. 504) 503	I ISSUED BY // QUICK	_ TOTAL PAID	: 37 00

# Pre Dud

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 3/27/95

You are hereby authorized and instruc	cted, subject to your rules and regulations, to inter the	remains
of disinter- Curti	is Carter & Inter Delou	s Carte
ina dbl. dipth cry	Funeral, date, time	
Church, Chapel, Graveside		fortuary.
All Funeral cars must arrive before 3:3	30 p.m. of regular work day or an extra charge of	50.00
will be applied and billed to undersigned		
War time veteran		
Lot 75 Grave 3 Ro	ow Section /# Division-Black	7
Grave space & Care Fund	C2499	9
Additional spaces and care fund		3
Opening/Closing & Setup	@ 3500 7	50.00
Burial Container	380.00%	E-E-0
Handling Fees		20.00
Flower vases - Marker setting fee	ENT: 1.00	0.00
Recording and filing fee	2645.00 90	2.00
Sales taxes	- 26	60
	Total Due	6.40
	Paid receipt number & #40491	7.00
20-	Balance doe /93	14.60
I hereby certify I am the and this is your authority to make disp	dosition of remains as above indicated. I certify and re	lecedent epresent
that I have the right to make this author any liability on account of said authorize	orization and I agree to hold Mt. Hope Cemetery harmle	1603.00
	(dental Parla	1400,00
I hereby authorize the interment in lot hold under deed.	Gigneral Control Control	2
	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	7-21
Signature of recorded holder of deed	- xun iana cu 74	Zip Chan
/	X (5/0) 5 62 -4464	
1010		
Work Order # E 12127	Acct #	
THE STATE OF THE S	Place #	

Annette Carter-Replis Came in 3/27/95. She wanted to set up an payment plan to disinter her father Curtis Carter and Re inter him in the same grane, kut in a double depth crypt. She also wanted to pay you the second burief in the dbl. depth - her mother Delores Carter.

DUNG 22 1095



WHITE. TO CUSTOMER CANARY CEMETERY PINK AUDITOR

The same of the same of				Date.	11.1421	-	19
From: annitte la	Her- Prop	Address:	7850 7	market S	1. Out	land C	9 9466
Sty Hundre	d dest	Ego The	\$ 2/105		Dollars	(\$ 1042 C	20,
In Paym	ent of	Interna	ent of Cu	rais Colt	us & R	Burra	1 0/
Him on del a	Expth or	yet Trus	+; O/C,	Rec fu o	An Do	lows Ca	with a
Lot 25	Grave	3	Row	Section	14	Division Block	7
Invoice No		NOT VALID FOR PURP	OSESTATED UNLESS				
Acct. No		Black III		90% Sal of Lots Opening	77184		-
w.o. F- 12127	(A) (A)	13359		Opening Closing Burtal Contain	100		
BALANCE DUE # 19	24-60	The state of		Handlin	g Fee 77185		
Pre-Need Lot At Need	On Acet	6-18-13		Recordi Misc. Fe Pre-Nee	es 77183	1000	(20)
Pre-Need Lot At Need L Pre-need Trust Cash				Trust Sales Ta			
AC-212 (Rev. 5-94)	0755	ISSUED BY	Mark	TOTAL PA		642	00

46115



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

From: CARLOR	Jours Analle	Address:	2007	By the Ave	4-10	klond	19 95 PP 94
In part Pa	yment of	bro- need	disco	lee /20-	Dollars (\$ .	and	oo )
Lot 75	Grave	- Peoples	- Row_	Section	14	Division Block	7
Acct. No W.O BALANCE DUE	12 127	NOTVALID FOR PURPOSES' PAID' IN THIS SPACE.	TATED UNLESS STAMP	20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers	100 77184 — 100 77181 — 100 77182 —		
Pre-Need Lot ☐ At Need Pre-need Trust ☐ Cash	□ Check □	SSUED BY	Balebory	Handling Fee Recording & Misc, Fees Pre-Need Trust Sales Tax TOTAL PAID	77185 — 100 77183 — 63033 9022 — 60101 78390 —	321	00

An An 20 Oa	not count net 07 kla	MAIL F No. te 87t and,		121 ter ve.	27 P.	Pr R f	e-N e-i	eed nte 2nd	Di r. bu	& T	ter rus	
JAN	FEB	ponorarization;	APR 10	ACCRECATION AND PARTY.	NC ADDRESS		100000000000000000000000000000000000000		-		DEC	
ue da	nt due	ve.	naid on		da	Aa	s	3	21.	00		
fr.	m			nes C An	S	Secerve	\$ d S	3	21.	00	)	
YTK	RESS	П	check	c ( v	) if t	STAT	-	v add	ZVP			

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 3/27/95

	subject to your rules and regulations, to inter the remains
	Funeral, date, time WED 3/29/95 @IPD
	graveside: Ragodale Mortuary.
* All Funeral cars must arrive before 3:30 p	m. of regular work day or an extra charge of \$ 150
will be applied and billed to undersigned.	X
200	No.
	2 12
Lot <u>153</u> Grave Row_	Section Division/Block
Grave space & Care Fund	895.00
Additional spaces and care fund	
Opening/Closing & Setup	PAID 35.00
Burial Container	1 / 1 250.00
Handling Fees	MAR 27 1995 /85.00
Flower vases - Marker setting fee	0
Recording and filing fee	MT. HOPE CEMETERY TY OF SAN DIEGO, CALIF
Sales taxes	17.50
	Total Due
Pa	aid receipt number <u>Rx # 44052 1741 50</u>
-	D N Balance due
I hereby certify I am the Daug	of the above named decedent
and this is your authority to make disposit that I have the right to make this authoriza- any liability on account of sald authorization	tion of remains as above indicated. I certify and represent tion and I agree to hold Mt. Hope Cemetery harmless from on and interment.
	Theram. LE la-1
I hereby authorize the interment in lot I hold under deed.	Signature A + B
	1017 Dania Vistalia
Signature of recorded holder of deed	Man Jugo 72/14
	X(6/9) 263 8 777
- 12128	Invoice #
Work Order # E 12120	Acct. #
PY-593 (Rev. 8-92)	

#### CITY OF SAN DIEGO, CALIFORNIA

#### MOUNT HOPE CEMETERY 527-3400

			Date:	Willey	OK!	19_/_
rom: Sherman & Engl	Address:	214 - Jente	a Kontia	50	CA 90	2114
- severtur fundia	d sign of	al Alexander	100 Do	ollars (\$ _	1701	00)
n Payment of	throught	of the true	THE PER	e .		21
ot Grave	1	_ Row	Section	V	Division Block	12
nvoice No	NOT VALID FOR PURPOSES	TATED UNLESS STAMPER	CREDIT 20% Sales Care	67007 77184	179	100
Acpt. No.	A STATE OF THE STA		90% Sales of Lots Opening/	77184 — 100	716	100
N.O. E-12128	STARKE !		Clasing Burist	77161 — 100 77162 —	250	00
BALANCE DUE			Containers Handling Fee	100 77185	185	00
	THE PARTY		Ascording & Misc. Fees Pre-Need	100 77183	40	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check			Trust Sales Tax	63033 9022 — 60101 78390 —	17	50
IC-212 (Rov. 5-94)	ISSUED BY	lark	TOTAL PAID		1769	10

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	NT-FIRST (GIVEN)   18. MIDDLE	1C. LAS	T (FAMILY)			E OF DEATH 4. SEX
Henrie	tta -	F	oster	11	/27/1904 03/	24/1995 F
San I	Diego	ENTE	NTY OF DEATH—OUTSIDE CALIF., R. STATE Diego	OF INFORM	ATIONSHIP, FULL MALING A MANT n England - Da	and the same of th
7A. TYPED NAME AND AL Inderson-Ragi	odele Hort.; 5050 San D:	Federal Blvd. Lego, CA	7B. CALIF. LICENSE NUMBER —IF APPLICABLE F-1329	214 Sa San Di	nta Rosalia ego, CA 92114 RE OF APPLICANT—Person taking	
ACKNOWLEDGMENT OF AP		Scart that the proposed disposition stated he nd Safety Gode, and was authorized pursuant to		> det	Lullean	03/27/199
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCOR SIONS OF THE CALIFORNIA HEALT AND IS THE AUTHORITY FOR THE DI IN THIS PERMIT. NOTE: THIS PERMIT GRES NO HIGH! OF DISPO	AND SAFETY CODE SPOSITION SPECIFIED	03/28/19			9504245
TION REQUIRES A NEW PERSON TO SHOW FINAL POSITION.	D. ADDRESS OF REGISTRAR OF IF DEATH OCCURNED IN CALIFORN VItal Records; P. San Dies	IA.	9E. ADDRESS OF REGISTRA		OF DISPOSITION— DISTRICT IN CALIFORNIA	
HORIZED DISPO	SITION(S) CHECK APPLICABLE IT			- 1	FOR CORONER'S	S USE ONLY
B. CREMATION	ŧ	F. DISINI G. SHIP H. TRAN	IN TO CALIFORNIA SIT TO OUTSIDE OF CALIFORNIA	-	- (Name and Address)	REMAINS LOCATED A
BURIAL		y; 3751 Market Si Diego, CA	BATE BUR	ED   11C. 8	Dait	CHARGE OF BURIAL
CREMATION	12A. NAME AND ADDRESS OF 1	Sealer	125. DATE CREM	ATED 12C, SI	GNATURE OF PERSON IN C	HARGE OF CREMATION
SCIENTIFIC	13A. NAME AND ADDRESS OF (	CALIFORNIA FACILITY RECEIVING	REMAINS 138 DATE REC	EIVED 13C. SI	GNATURE OF PERSON IN	CHARGE OF FACILITY
TRANSIT		ECEIVING STATE OR COUNTRY EMAINS ARE TO BE SHIPPED	WHERE 14B. DATE SHIP		DRESS AND SIGNATURE ( PLACING WITH THE CARI	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		ON SHORELINE, OR OTHER DESCRIP PLACE AND CA <u>DISTRICT</u> OF DISP			GNATURE OF PERSON IN HARGE OF DISPOSITION	150. LICENSE NUMBER OF CREMATED RE- MAINS DISPOSER —IF APPLICABLE



## Caskets

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date Mou 3-27-94

	ANTANITA	
in a	Funeral, date, time Wed 3-29; 1:30 F	M
Church, Chapel, Graveside	eweside : CA BURIAL MC	rtuar
All Funeral cars must arrive before 3:	3:30 p.m. of regular work day or an extra charge of \$ 15	00
will be applied and billed to undersign	oned	
War time veteran		
Lot 3328 Grave P	Row Section/ Division/Bleek	9
Grave space & Care Fund		0.0
Additional spaces and care fund		
Opening/Closing & Setup		5.0
	***************************************	
	φ	
		5.6
Cales taves	0.00	
Sales taxes	Total Due 270	2.0
LINE CHECKER PARTIN	Paid receipt number B-H6064 370	0.0
LINGER WAR	4	
in the	Balance due	>
	of the above named de	code
hereby certify I am the	of the above named de	25000
Thereby certify I am the and this is your authority to make distinct I have the right to make this auth	isposition of remains as above indicated. I certify and rep horization and I agree to hold Mt. Hope Cemetery harmles	orese
hereby certify I am the and this is your authority to make distinct I have the right to make this auth	isposition of remains as above indicated. I certify and rep horization and I agree to hold Mt. Hope Cemetery harmles	orese
Thereby certify I am the and this is your authority to make dis that I have the right to make this auth any liability on account of said author	isposition of remains as above indicated. I certify and rephorization and I agree to hold Mt. Hope Cemetery harmles prization and interment.	orese
Thereby certify I am the	isposition of remains as above indicated. I certify and rephorization and I agree to hold Mt. Hope Cemetery harmles prization and interment.	orese
Thereby certify I am the	isposition of remains as above indicated. I certify and rephorization and I agree to hold Mt. Hope Cemetery harmles of zation and interment.	orese
Thereby certify I am the	isposition of remains as above indicated. I certify and rephorization and I agree to hold Mt. Hope Cemetery harmles orization and interment.	presess fro
Thereby certify I am the and this is your authority to make dis that I have the right to make this auth any liability on account of said author I hereby authorize the interment in lo hold under deed.	isposition of remains as above indicated. I certify and rephorization and I agree to hold Mt. Hope Cemetery harmles orization and interment.	presess fro
Thereby certify I am the	isposition of remains as above indicated. I certify and rephorization and I agree to hold Mt. Hope Cemetery harmles orization and interment.	presess fro
Thereby certify I am the	isposition of remains as above indicated. I certify and rephorization and I agree to hold Mt. Hope Cemetery harmles orization and interment.  ot I  Signature  Address  X  Telephone	orese ss fro



WHITE TO DUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY 527-3400

	_	_		_
6 R B	- 41		-01	
440.0			30.4	

			Date: Thu	ch 29 , 19 95
From: CA Burial	Addre	5880 El Caj	on Blad. 3	D CA 92115
- Levo Hundres	d Sevents	y + 00/100-	Doll	ars (\$ 270.00)
In Payment of	Interni	ent of anti	nia Fort	100000
	The House of	0		
Lot 3328 Gra	ve	Row	Section/	Division 9
Invoice No.	NOT VALID FOR P	PURPOSE STATED UNLESS STAMPED	CREDIT 6	7007 20 00
Aget, No.		*****	80% Sales of Lots 7	100 80 00
w.o F- /3/29			Opening/ Closing 7 Burlet	100 7181 100
BALANCE DUE			Containers 7	7182
			Recording 8	7185 100 7183 45 DD
Pre-Need Lot At Need On Ac			Pre-Need 6	3083
Pre-need Trust Cash Check		n Mark	7	0101 8390
AC-212 (Rev. 5.94) 835	34 ISSUED BY	11 LAWING	TOTAL PAID	-210 00

E 12129

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

LISE BLACK INK ONLY-MAKE NO FRASURES. WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	18. MIDDLE	1C. LAST (FAMILY)		2. DATE OF BIRTH 3. DATE OF DEATH 4. SEX
Antonia		Antonettle	Ford		16371771995 16371771995 P
A. CITY OF DEATH				ATH-OUTBIDE CALIF.	6. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE
Sah Diego			San Bieg	Market and the Control of the Contro	Lavonne Rusinskas-Mother
California	ODRESS OF CALIFORN	& Burial Chapel	ON ACTING AS SUCH 7B. C	ALIF, LICENSE NUMBER -IF APPLICABLE	47 Fourth Avenue #G Chula Vista, CA 91911
5602 E1 Ca		San Diego, CA 92		FD 1357	BA, SIGNATURE OF A PLICANT forum taking sermit, BB. DATE SIGNED
*ACKNOWLEDGMENT OF A	PPLICANT I hereby a Section 10	cknowledge as applicant that the proposed 376 of the Health and Safety Code, and was	dispusition stated herein is one of authorized personnt to Section 7100 o	the dispositions authorized by the Health and Safety Code.	> Par a (03/24/1995
PERMIT	SIONS OF THE CALIF	JED IN ACCORDANCE WITH PRO ORNA HEALTH AND SAFETY CO TY FOR THE DISPOSITION SPECIFI	DE	98. DATE PERMI	
AUTHORIZATION OF LOCAL REGISTRAR	IN THIS PERMIT.	D RIGHT OF DESPOSAL OUTSIDE OF CALIFOR	67 00	Kyle Ch	Control of the Contro
THE SECTION OF THE PARTY OF THE	Vital Rec	GISTRAR OF DISTRICT OF DE DIN CAUSONNA ORGANIA BOX 85 CA 92186-5222			UT OF DISTRICT OF DISPOSITION— CUR IN ANOTHER DISTRICT IN CALIFORNIA
HORIZED DISP	OSITION(S) CHECK A			+	FOR CORONER'S USE ONLY
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US		AINS OTHER	F. DISINTERMENT	Fornia TSIDE OF CALIFORNIA	(Náme and Address)
BURIAL	Mount H	ope Cemetery,	ETERY	3/29/9	11C SIGNATURE OF PERSON IN CHARGE OF BURIAL
	A STATE OF THE PARTY OF THE PAR	DERESS OF CALIFORNIA CREA	MATORY	128 DATE CREMA	ATED 12C SIGNATURE OF PERSON IN CHARGE OF CREMATION
CREMATION	- h	load, Hon	-Sealer		
SCIENTIFIC USE	13A. NAME AND AL	ODRESS OF CALIFORNIA FACI	LITY RECEIVING REMAINS	13B. DATE RECE	EIVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING STATE CREMATED REMAINS ARE TO		14B. DATE SHIP!	PED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR INTIFY FINAL PLACE AND CA DE		15B. DATE OF DISPOSITIO	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION OF CREMATED RE. MAINS DISPOSE MAINS DISPOSE OF APPLICABLE



#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

DA 1177168

Date 3-27-95

or Jahn Das 95-	Funeral, date, time Mov 4/3/95 // A/
Church, Chapel, Graveside	: Foatharing & Mortuary
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge of \$
will be applied and billed to undersigned.	
War time veteran	0 4
Lot II Grave 2 Row_	Septon / Division/Bleek / 2
Grave space & Care Fund	1260
Additional spaces and care fund	V \ \ \ \
Opening/Closing & Setup	1450
Burial Container	8\
Handling Fees	
Flower vases - Marker setting fee	
Recording and filing the	45.0
Sales taxes	-
elecco Barr	Total Due
Paid	receipt number
	Balance due
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization	of the above named deceden n of remains as above indicated. I certify and represen n and I agree to hold Mt. Hope Cemetery harmless from and interment.
I hereby authorize the interment in lot I hold under deed.	Signature
I hereby authorize the interment in lot I hold under deed.	Address
I hereby authorize the interment in lot I hold under deed.  Signature of recorded holder of deed	
hold under deed.	Address
hold under deed.	Address Zip Cod



#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

E12130

FOUND USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS 3. DATE OF DEATH 1A. NAME OF DECEDENT-FIRST (GIVEN) 1B. MIDDLE TC. LAST (FAMILY) 2 DATE OF BIRTH 4. SEX MONTH, DAY, YEAR JOHN DOE 5A CITY OF DEATH 5B. COUNTY OF DEATH-OUTSIDE CALIF... 5 NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE San Diego Featheringill Mortuary San Diego 7A. TYPED NAME AND ADDRESS OF CALIFORNIA FUNERAL DIRECTOR OR PERSON ACTING AS SUCH 7B. GALIF LICENSE NUMBER 6322 El Cajon Blvd. 6322 El Cajon Blvd. San Diego, CA 92115 FEATHERINGILL MORTHARY BA. SKIRATORE OF APPLICANT-Person taking permit, 8B. DATE SIGNED San Diego, CA 92115 I hereby administration on applicant that the proposed disposition stables herein in one of the dispositions subnerized by Section 10376 of the Health and Solvity Code, and was authorized pursuant to Section 7160 of the Health and Solvity Code. ACKNOWLEDGMENT OF APPLICANT PERMIT **AUTHORIZATION OF** IN THIS PERMIT Edward Feezell \$7,00 NOTE: THIS PERMIT GIVES NO RIGHT OF DISPOSAL OUTSIDE OF CALIFORNIA. LOCAL REGISTRAR 9D ADDRESS OF REGISTRAR OF DISTRICT OF DEATH-9E ADDRESS OF REGISTRAR OF DISTRICT OF DISPOSITION-ANY CHANGE IN DISPOSE IF DISPOSITION IS TO OCCUR IN ANOTHER DISTRICT IN CALIFORNIA IF DEATH OCCURRED IN CALIFORNIA TION REQUIRES A NEW P. O. Box 85222, San Diego O SHOW FINAL MODIFICAL. 92186-5222 THORIZED DISPOSITION(S) CHECK APPLICABLE ITEMS FOR CORONER'S USE ONLY A. BURIAL (INCLUDES ENTOMBMENT) E. TEMPORARY ENVAULTMENT I. DISPOSITION PENDING REMAINS LOCATED AT (Name and Address) B. CREMATION F. DISINTERMENT' C. DISPOSITION OF CREMATED REMAINS OTHER G. SHIP IN TO CALIFORNIA THAN IN A CEMETERY D SCIENTIFIC USE H. TRANSIT TO OUTSIDE OF CALIFORNIA 11A NAME AND ADDRESS OF CALIFORNIA CEMETERY DATE BURIED LLC. SIGNATURE OF PERSON IN CHARGE OF BURIAL 118. Mt. Hope Cemetery DURIAL San Diego, CA 12C. SIGNATURE OF PERSON IN CHARGE OF CREMATION 12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY 12B DATE CREMATED CREMATION 13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS 13B DATE RECEIVED 13C SIGNATURE OF PERSON IN CHARGE OF FACILITY SCIENTIFIC USE 14A NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE 14B DATE SHIPPED 14C ADDRESS AND SIGNATURE OF PERSON IN CHARGE COMPLETE REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED OF PLACING WITH THE CARRIER TRANSIT 15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUF-15B. DATE OF 15C. SIGNATURE OF PERSON IN 15D. LICENSE NUMBER SCATTERING AT SEA FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT OF DISPOSITION

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

DISPOSITION

CHARGE OF DISPOSITION



DISPOSITION OTHER

THAN IN A CEMETERY

OF CREMATED BE MAINS DISPOSER

-IF APPLICABLE

CITY OF SAN DIEGO, CALIFORNIA = 0 3 2 12 13

#### GENERAL INVOICE:

Make Remittance Payable to

CITY TREASURER P O Box 2289 San Diego, California 92112

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO PUBLIC ADMINISTRATOR 5201 A RUFFIN ROAD

SAN DIEGO Received CA 92123

5-4-45 TREASURERS USE

CK

PAYMENT REF NO 04-806636

ANT PAID: \$386.00

INVOICE DATE 04/04/95

PAYMENT DUE 05/04/95

PERIOD COVERED MARCH

ACCT NO

000952

FOR INFORMATION CONCERNING YOUR BILLING CONTACT: JOANN WALTS DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF

AMOUNT

JOHN DOE ME#95-0185 PA#1177168 SERVICES LOT 11 GRAVE 2 SEC 1 DIV 12

OPENING/CLOSING

LINER RECORDING FEE

TOTAL DUE

386-00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER. INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT AChe Last. Trep. A BUVE White - Customer Copy . Yellow - Remittance Copy

252071 04/04/95 000952 COUNTY OF SAN DIEGO 100 072 100 072 100 072 67007

77181 000072 77182 000072 77183 000072 77184 386.00 165.00 50.00 45.00 126.00

04-806636

386-00 PAID IN FULL

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date\_ 3-28-95

regular wor 40 Sectio	: <u>Ba</u>	ensc orane	extra charge  Division/Bi	×
section	rk day	or an e	extra charge	of \$ 150.
Section 531	on	11	_ Division/B	100k 7-
Sectio				×
531				×
531				×
				375.
				Carried and I to
				250.
				185.0
ARLY	A.A	4	OT	150.
				45.
				17.5
	Tot	al Due	£	
eipt numbe	MA	STER	CARD	256.0
			Balance due	766.5
remains as	s abov o hold	e indic	ated. I certif	v and repres
Signature	3688			
City Care	5AN 619-			Ten. (
	eipt number remains and I agree to interment.	Tot eipt number M	Total Due eipt number MASTER  orernains as above indicated agree to hold Mt. Hold interment.  y Quan Master 3688 Ke Address X SAN DIE Gity A 619-335 Telephone	Total Due  From Master Card  Balance due  of the above remains as above indicated. I certified I agree to hold Mt. Hope Cemeter I interment.   Y Am M. Ong  Signature 3688 Kueffe De Address X SAN DIEGO, CA  City 1619-381-792-89  Telephone  Invoice # 35200

## W.O. # E-12131 .

Murch 28

#### NOTE

\$ seven hundred sixty six and solosan Diego, California

3751 Market Street, San Die	ego, CA 92101, the sur	n of	766.50	DOLLARS
with interest from	April	28.	1995	on the unpaid principal
at the rate of 12 percent per	annum, payable on d	emand.		
will be liable and consents	to renewals, replacem ntment, demand and p	ents and exterotest and t	tensions of time for pa he right to assert any	of the United States. The maker yment hereof before, at or after statute of limitations. A married
contained herein. If any act				
contained herein. If any act may fix as attorney's fees. Part II, Chapter I,	ion be instituted on th Article 2, Paragraph	7528 of the	undersigned promise( State of California H	rate property for any obligations) to pay such sum as the Court lealth and Safety Code e is past due and unpaid.
contained herein. If any act may fix as attorney's fees.  Part II, Chapter I, authorizes the removement of the property of the	Article 2, Paragraph val of any remains from	7528 of the na plot for w	State of California Hich the purchase price	lealth and Safety Code e is past due and unpaid.  M. Ong
contained herein. If any act may fix as attorney's fees. Part II, Chapter I, authorizes the remo	Article 2, Paragraph val of any remains from	7528 of the na plot for w	State of California Hich the purchase price	lealth and Safety Code e is past due and unpaid.  M. Ong

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

A. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMILY)	III III DE DE DESERVE	2. DATE OF BIR		4. SEX
HARUKI		JACK	K	ОВА	02/27/19		100
SA CITY OF DEATH	LEGO		SB. COUNTY OF DEA	GO CALIF.	6. NAME, RELATIONSHIP, FU OF INFORMANT DUANE H. KOB	LL MAILING ADDRESS AND T	ZIP CODE
		A-FUNERAL DIRECTOR OR PER DUCH MORTUARY		CALIF. LICENSE NUMBER —IF APPLICABLE	15035 PINTURA		
		SAN DIEGO, CA 9	2104	FD 480	BA. SIGNATURE OF APPLICA	NTPerson taking person, 8B. DA	TE SIGNED
ACKNOWLEDGMENT OF AP		cknowledge as applicant that the propos \$75 of the Houth and Safety Code, and wa			Kenneth Th	10mas   03/	28/199
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH PROPORTINA HEALTH AND SAFETY C TY FOR THE DISPOSITION SPECI O RIGHT OF DISPOSAL OUTSIDE OF CALFE	97.00	0 3 / 2 8	1995	FLOCAL REGISTRAR ISSUI	NG PERMIT
NY CHÂNGE IN DISPOSI- TIO TO CURES A NEW D SHOW FINAL POSITION	IF DEATH OCCURRE	ORDSP.O. BOX	85222		OF DISTRICT OF DISPOSITION OF IN ANOTHER DISTRICT IN C		
O KUTHORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS			FOR (	CORONER'S USE ONL	Y.
B. CREMATION		AINS OTHER	F. DISINTERMENT G. SHIP IN TO CALL H. TRANSIT TO OU			TON PENDING—REMAINS L nd Address)	OGATED A
BURIAL		DORESS OF CALIFORNIA CEI E CEMETERY ET STREET SAN	DIEGO, CA 9210	2 31/9.	to the signature of	PERSON IN CHARGE OF E	BURIAL
CREMATION		DDRESS OF CALIFORNIA CRI		12B. DATE CREMA	TED 12C. SIGNATURE OF	PERSON IN CHARGE OF CA	REMATION
SCIENTIFIC		ODRESS OF CALIFORNIA FAC	RECEIVING REMAINS	13B DATE RECE	VED 13C. SIGNATURE OF	PERSON IN CHARGE OF F	ACILITY
TRANSIT	REMAINS OR	DORESS IN RECEIVING STATE CREMATED REMAINS ARE TO A		148. DATE SHIPP		SIGNATURE OF PERSON IN THE CARRIER	CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	FICIENT TO IDE	REST POINT ON SHORELINE, CONTREY FINAL PLACE AND CA.		15B. DATE OF DISPOSITION	16C. SIGNATURE OF CHARGE OF DIS	POSITION OF CRE	MATED RE- DISPOSER PLICABLE

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 3/28/95

1a LINER	Funeral, date, time	7ni. 3/31/95 :
hurch, Chapel, Graveside Deliver	monly ide	mohrey Mortuary
Il Funeral cars must arrive before 3:30 p.m.	of regular work day o	or an extra charge of \$ 150.0
fill be applied and billed to undersigned.		
Var time veteran NO		
ot 65 Grave 8 Row_	Carrier 1	and the same of the
		The state of the s
irave space & Care Fund	-1078	
dditional spaces and care fund		
pening/Closing & Setup	******************************	375.0
urial Container		190.0
landling Fees	וחו	145.0
lower vases - Marker setting fee		-:
ecording and filing fee	1995	45,0
ales taxes		_13,3
MT. HOPE CI	EMETERY	768.3
CITY of SAN DI	EGO. CALIF B	-46060 768.
Paid	receipt number	A
		Balance due
hereby certify I am the not this is your authority to make disposition at I have the right to make this authorization by liability on account of said authorization in the sai	and I agree to hold I	of the above named decedent e indicated. I certify and represent Mt. Hope Cemetery harmless from
hereby authorize the interment in lot (	Tald	ust Coate
old under deed.	Signature // CTOLL	Chargane De
	Address AC N	Au sura es ord
greature of recorded holder of deed	VL916)	AMENTO, CA. 958 481-9130
- 12132	Invoice #	
/ork Order # E 12132	HIVOIDE II	

## 4

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1.4	NAME OF DECEDE	NT-FIRST (GIVEN)	18. MIDDLE	IC. LAST (FAMILY	VICK		DATE OF BIRTH ONTH DAY, YEAR 05/11/1921	3. DATE OF DEATH MONTH, DAY, YEAR 03/28/1995	4. SEX
5A	CITY OF DEATH	atee			San Diego	OF INFO		Son	ZIP CODE
76	Humphrey Ch	opess of California Vista Noz		N ACTING AS SUCH 7B.	CALIF. LICENSE NUMBER  IF APPLICABLE  7-964	1504 G	ladstone Drive ento CA 958		THE.
		I beneba	acknowledge as applicant that the proposed de	sanstion stated terem is one o		TAMER AS	THE OF APPLICANT	legal lating penal, 88. DA	7E SIGNED 19/1995
	PERMIT  UTHORIZATION OF OCAL REGISTRAR	THIS PERMIT IS ISS SIONS OF THE CALL AND IS THE AUTHOR IN THIS PERMIT.	5976 of the Hritin and Sahar Code, and was aud SUED IN ACCORDANCE WITH PROVI FORMIA HEALTH AND SAFETY OFFI TY FOR THE DISPOSITION SPECIFIED NO BIGHT OF DEPOSAL OUTSIDE OF CALFORNA	9A. AMOUNT OF FE	of the Health and Safety Code.	95043	SIGNATURE OF LO	CAL REGISTRAR ISSUI	NG PERMIT
AB	TO THE RESIDENCE OF THE PARTY O	BD. ADDRESS OF F	REGISTRAR OF DISTRICT OF DEA' RED IN CALIFORNIA BOX 85222 CA 92186-5222	The state of the s	ADDRESS OF REGISTRAL			RHILA	
	HORIZED DISP	OSITION(S) CHECK	APPLICABLE ITEMS			1	FOR COR	ONER'S USE ONL	Y
-	B. CREMATION	SE	ADDRESS OF CALIFORNIA CEMET	TOTAL STREET,		D 110.	(Name and A	PENDING REMAINS L ddress)	
	BURIAL		The state of the s	92102	17/31/92	51	Mais	b	
ABLE ITEMS	CREMATION	12A, NAME AND A	CONSTITUTE OF CALIFORNIA CREMA	TORY	128. DATE CREMA	12C.	SIGNATURE OF PER	SON IN CHARGE OF C	REMATION
ALL, APPLICA	SCIENTIFIC USE	N/A	ADDRESS OF CALIFORNIA FACILIT	TY RECEIVING REMAIN	S 13B DATE RECE	VED 13C.	SIGNATURE OF PER	SON IN CHARGE OF F	ACILITY
OMPLETE A	TRANSIT		ADDRESS IN RECEIVING STATE OF CREMATED REMAINS ARE TO B		14B. DATE SHIPP		ADDRESS AND SIGN OF PLACING WITH T	ATURE OF PERSON II HE CARRIER	N CHARGE
0	SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		AREST POINT ON SHORELINE, OR ( JENTIFY FINAL PLACE AND CA <u>DIST</u>		F. 158, DATE OF DISPOSITION		SIGNATURE OF PER CHARGE OF DISPOS	ITION   OF CRE	E NUMBER MATED RE- DISPOSER PLICABLE



#### MOUNT HOPE CEMETERY 527-3400

			Date:	2000		19
From Aldres and Co	ate Address: 15	4 Glade	How Dr.	. 100	7/08 =	docat
In Payment of	innital	maye 1	lich	ollars (\$ _	7.0011-2	
Lot Grave	8	_ Row	Section 1		Division	
Invoice No.	NOTVALID FOR PURPOSEST PAID' IN THIS SPACE.	TATED UNLESS STAMPED	CREDIT 20% Sales Care 60% Sales of Lots	67007 77184 ————————————————————————————————————		
W.O. <u>E-12132</u>	HOW IN		Opening/ Closing Burlal Containers	100 77181 —— 100 77182 ——	375	00
BALANCE DUE	E CONTRACTOR OF THE PARTY OF TH		Handling Fee Recording & Misc. Fees	77185 —— 100 77183 ——	145	99
Pre-need Lot At Need CO On Acct Pre-need Trust Cash Check	OR	unh -	Pre-Need Trust Sales Tax	63033 9022 60101 78390	13	30
AC-212 (Rev. 5-94) 3411	ISSUED BY		TOTAL PAID		768	30

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 3-28-95

	ubject to your rules and regulations, to inter the re	mains
or WILLIAMS, T		
Vastramer	Funeral, date, time FRI 3 31 11	AM
	Agnamiside CA Burialmo	
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge of \$ 15	0.00
will be applied and billed to undersigned. ±	Sayno Williams	_
War time veteran		
Lot 254 Grave 33 Row_	Section 2 Division/Block /	2
Grave space & Care Fund	79	5.0
Additional spaces and care fund		-
		5.0
Purial Container	25	
Uanding Sees	18	5.0
Flower vases - Marker setting fee		
	4:	5.00
Sales taxes		,50
	Total Due	7.5
Paid	receipt number <u>45062</u> 166	7.5
. 7.7	Balance due	2_
I hereby certify I am the Wufe	of the above named de	
and this is your authority to make disposition	n of remains as above indicated. I certify and rep n and I agree to hold Mt. Hope Cemetery harmles and interment.	resent is from
	Non in win	_
I hereby authorize the interment in lot I	Suple alledy	_
hold under deed.	1 (D) 19 Brandew CT	
Signature of recorded holder of deed	Jan Nias Ca 9	2114
	2 263-1192	Zip Code
	Talephone	
- 12133	Invoice #	
Work Order # E 1~100	Acct. #	
PY-593 (Rev. 8-92)		

E 12/33

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

A NAME OF DECEDE	NT—FIRST (GIVEN)   18. MIDDLE	1C. LAST (FAMILY)	(1)	2 DATE OF BIRTH 3. D. 03725719548 037	ATE OF DEATH 4. SEX
San Diego		SE COUNTY OF DEA	ATH—OUTSIDE CALIF	6. NAME, RELATIONSHIP, FULL MAILING PROPERTY WILLIAMS - WI	
	OBSESS OF CAUFORNIA FUNERAL DIRECTOR OR FEE Cremation & Burial Chapel	Same I	300	6019 Brandeis Court San Diego, CA 92114	
. 5602 El Ca	jon Blvd. San Diego, CA 92		PD 1357	BA. SIGNATURE OF ADPLICANT—Fertin be	ing permit BB. DATE SIGNED
ACKNOWLEDGMENT OF AF	PPLICANT I hereby schurwings as applicant that the process Section 10376 of the Health and Safety Code, and ear			· Hyla Cher	× 03/29/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PRISONS OF THE GALIFORNIA HEALTH AND SAFETY OF AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIN THIS PERMIT.  HOTE: THE PERMIT GHES NO BOST OF DISPOSAL OUTSIDE OF CALIFORNIA.	PIED 27 00	9B. DATE PERMIT 03/29/19 Kyle Cha	95 9504279	EGISTRAR ISSUING PERMIT
ANNICHANGE IN DISPOSI- TICH REQUIRES A NEW PERMIT TO SHOW PINAL DISPOSITION.	PD. ADDRESS OF REGISTRAR OF DISTRICT OF D IE PEATH OCCURRED IN CALIFORNIA.  VICAL RECORDS—P.O. Box & San Diego, CA 92186—5222	35222		OF DISTRICT OF DISPOSITION— UR IN ANOTHER DISTRICT IN CALIFORNIA	
THORIZED DISPO	OSITION(S) CHECK APPLICABLE ITEMS		MAGNET IN	FOR CORONER	R'S USE ONLY
B CREMATION		E. TEMPORARY EN		(Name and Address	NG REMAINS LOCATED AT
BURIAL	Mount Hope Cemetery, San Diego, CA	ETERY	131/95	D   11C. SIGNATURE OF PERSON IN	CHARGE OF BURIAL
CREMATION	- mutal right	71	12B. DATE CREMA	TED 12C. SIGNATURE OF PERSON IN	CHARGE OF CREMATION
SCIENTIFIC USE	13A NAME AND ADDRESS OF CALIFORNIA FAC	ILITY RECEIVING REMAINS	ISB. DATE RECEI	VED 19C. SIGNATURE OF PERSON IN	N CHARGE OF FACILITY
TRANSIT	14A. NAME AND ADDRESS IN RECEIVING STATE REMAINS OR CREMATED REMAINS ARE TO		14B, DATE SHIPP	ED 14C ADDRESS AND SIGNATURE OF PLACING WITH THE CA	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEAREST POINT ON SHORELINE, O FICIENT TO IDENTIFY FINAL PLACE AND CA		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	15D, LICENSE NUMBER OF CREMATED RE- MAINS DISPOSER —IF APPLICABLE

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA

#### MOUNT HOPE CEMETERY 527-3400

_	0	ev.	0	-
$\alpha$	ю.		м	2
20.0	v	No.	v	04

			Date:	3-29		19 95
From Elbertha Burts	Address:	710 Pegg	y DR. SON	Diego	· CA	92/14
sulecu hundioo	girly	Sever	and 39100 D	ollars (\$ .	1667. 3	10)
InPayment of	interment	of	William	No	duly	_
Lot 254 Grave	3	Row	Section 2		Division Block	12
Invoice No.	NOTVALID FOR PURPOSE "PAID" IN THIS SPACE.	ESTATED UNLESS STAMP	ED CREDIT 20% Sales Care	67007 77184 —	154	102
Acct. No.	PAID IN THIS SPACE.		80% Sains of Lots	100	636	23
10122	1000		Opening/ Closing	77181 -	375	00
W.O	CONTRACTOR OF THE PARTY OF THE		Burial Containers	77182	250	00
BALANCE DUE	V 2		Handling Fee	77185	185	00
			Recording & Misc. Fees	77183 -	475	00
Pre-Need Lot At Need On Acct Pre-need Trust Cook Cook			Pre-Noed Trust	63033 9022 —	- 14	100
Pre-need Trust Cash Check 5312	V	Balohlen	Sales Tax	60101 78390 —		30
AC-212 (Rev. 5-64)	ISSUED BY	PUBLIC BY SERVICE	TOTAL PAID	*	1567	50

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 3/30/95

in a	Funeral, date, time 3/31/95 F	ri-@ 1:30
Church, Chapel, Graveside Grav	eside : CA Sucial	Mortuary.
All Funeral cars must arrive before 3:3	p.m. of regular work day or an extra charge of	13 150°
will be applied and billed to undersigne		
War time veteran		
Lot_3435 Grave Ro	w_~ Section/_ Division/Bk	ock _ 9
Additional spaces and care fund		8_
Opening/Closing & Setup		125.0C
Burial Container	1,20	0
Handling Fees	1	0
Flower vases - Marker setting fee		0
Recording and filing fee		45.00
Sales taxes		0
Burial Will	Total Due	270.00
ng chick for	Paid receipt number 8-46670	370-0
If whom.	Balance due	
I hereby certify I am the and this is your authority to make disp that I have the right to make this authorizany liability on account of said authorizany liability.	of the above no osition of remains as above indicated, I certify ization and I agree to hold Mt, Hope Cemetery ation and interment.	and represent
hereby authorize the interment in lot I hold under deed.	Agence	
Signature of recorded holder of deed	Dity Telephone	Zip Code
<b>-</b> 12134	Invoice #	
Work Order # -	Acct. #	

E12134

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	18. MIDDLE	IC. LAST (FAMILY)		2. DATE OF BIRTH 3 DATE OF DEATH 4. SEX	
Khrysta Unique		White		037087Y994" 037257Y995" F		
A. CITY OF DEATH			58. COUNTY OF DEA		6. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE	
, San Diego			San Dieg	0	Krystal White-Mother	
Caliofrnia	Cremation	& Burial Chap		IF APPLICABLE	3860 Cherokee Avenue, Apt. 9 San Diego, CA 92104	
. 5602 E1 Ca		San Diego, CA		FD 1357	BA. SIGNATURE OF APPLICANT—Person taking person, BB. DATE SIGNED	
ACKNOWLEDGMENT OF A	Section 10	176 of the Health and Salety Code, and a	med disparation stated terms is one of the was authorized pursuant to Section 7100 of	he Health and Safety Code.	Mark a Chance 103/29/1995	
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	IED IN ACCORDANCE WITH F ORNIA HEALTH AND SAFETY Y FOR THE DISPOSITION SPE HIGHT OF DISPOSAL OUTSIDE OF CAL	e7 00	03/29/19 Kyle Cha	95 9504319	
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW POST TO SHOW FINAL SPOSITION.	Vital Rec	GISTRAR OF DISTRICT OF D IN CAUSOSHIA OTOS-P.O. BOX , CA 92186-522	85222		OF DISTRICT OF DISPOSITION— UR IN ANOTHER DISTRICT IN CALECRNIA	
HORIZED DISP	OSITION(S) CHECK A	PLICABLE ITEMS			FOR CORONER'S USE ONLY	
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US		AINS OTHER	#. DISINTERMENT G. SHIP IN TO CALIF	ORNIA SIDE OF CALIFORNIA	(Name and Address)	
BURIAL		pe Cemetery,  o, CA	EMETERY	118, DATE BURIE 13/31/95	D TIC. SIGNATURE OF PERSON IN CHARGE OF BURIAL	
CREMATION	TZA. NAME AND A	DRESS OF CALIFORNIA CE	REMATORY.	12B. DATE CREMA	TED 120 SIGNATURE OF PERSON IN CHARGE OF CREMATION	
SCIENTIFIC USE	13A. NAME AND AC	ODRESS OF CALIFORNIA FA	CILITY RECEIVING REMAINS	13B. DATE RECE	IVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY	
TRANSIT		DRESS IN RECEIVING STAT		146. DATE SHIPP	ED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, NTIFY FINAL PLACE AND CA	OR OTHER DESCRIPTION SUF- DISTRICT OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION OF CREMATED RE-MAINS DISPOSER — IF APPLICABLE	



# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

From: CA Burial Two Rundred In Payment of St	Address: 5880 El Co	Date: Bl.	819 92 billiars (\$ 270 1	95
Lot 3425 Grave	FlowSe	ection	Division 9	
Acct. No w.oE-13134	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers	67607 77184 100 77184 100 77181 100 77182	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 5-94)	ISSUED BY RUCK	Hundling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	100 77185 100 77183 83033 9022 60101 78390 \$ 2 7 0	00

## MT. HOPE GEMETERY INTERMENT ORDER

#### MIERMENT ONE

City of San Diego

Date 3/31/95

of	J	D:	THE	KPE			
na	1 10158	9		eral, date, ti	ma TUF	C 4/4	195011
	Vaunumer apel Gravesid						
STATE OF THE PARTY	· · · · · · · · · · · · · · · · · · ·						
All Funeral	cars must arriv	e before 3:	30 p. 10 of 1	egular work	day or an e	xtra charge	01\$ 100
will be appli	ed and billed to	undersign	ed.		PA		
War time ve	teran Ue	1/.		0	LI		
1105	8 Grave	/ "	- w	Luck	_	Division/B	not 10
.01/10	Grave _		- wo	Pecuon	-	DIVISIONE	CON I
Grave space	e & Care Fund	***************************************	W				995.0
Additional s	paces and care	e fund	1	05			0
Opening/Clo	osing & Setup.	Dal	5,	٧,	/		375.0
Burial Conta	einer	(Xh	15	/			190.0
landling Fe	1	7	5	/			11100 0
							4
	s – Marker se						115 0
Recording a	and filing fee						70.0
Sales taxes							13.30
					Total Due	4	1/633
			Paid rec	eipt number	H VIC	3#	4441.00
		/	)	,		Salance due	1322.3
hereby cer	tify I am the	11/1	wat.	Tes)	of	the above i	named deceder
and this is v	our authority the right to make	o make dis	position of	remains as	above indica	ited I certi	v and represe
	on account of				HOIG NO. PIO	pe Cemeter	y narmiess iro
				-	7	-1	
	horize the inte	rment in lot	1	Suprature	MAK	JE K	ves .
nold under d	Jeed.		1	V23	No.	1	exa
lianature of racco	ded holder of deed			Address of	n AU	eso.	(a. 931
	TO THE REAL PROPERTY.	/		8 / 10	1) 4/2	6-6-	1542 CO
		/		Telephone _	) ''		00/10
		-				0	
	40	1400		Investor a		15 74	122
Work Order	785,007	2135		Invoice #		2525	02

w.o. # E- 12135

### NOTE

\$ 1322.30	San Diego, California	march 31 1995
Thirty days after date for value received, the undersig	ned maker promises to pay	San Diego City Treasurer, or order at
3751 Market Street, San Diego, CA 92101, the sum of with interest from	Shirteen Hundre	on the unpaid principal
at the rate of 12 percent per annum, payable on dem	nand.	
Should this note not be paid when due, it shall the accrue at the rate indicated above. Principal and interwill be liable and consents to renewals, replacement maturity, and waives presentment, demand and properson who signs this note agrees that recourse maturity and herein. If any action be instituted on this may fix as attorney's fees.	rest are payable in lawful m ts and extensions of time t test and the right to assert ay be held against his/her	noney of the United States. The maker for payment hereof before, at or after any statute of limitations. A married separate property for any obligation
Part II, Chapter I, Article 2, Paragraph 752 authorizes the removal of any remains from a	28 of the State of Califor plot for which the purchase	nia Health and Safety Code e price is past due and uppaid.
ADDRESS 236 SO. SIENA S	T. S.D.	hum hours 44. 4. 92114
CALIFORNIA DRIVER LICENSE NUMBER 50397	/	570-74-2487

E 12135

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

14	JD DECEDE	NT-FIRST (GIVEN)	18. MIDDLE	1C LAST (FAMILY) Tharpe			2. DATE OF BIRTH	3. DATE OF DEATH	4. SEX
200	San Diego			58 COUNTY OF DEATH ENTER STATE San Diego	-OUTSIDE CALIF.,	Clad	ormand aye Tha	rpe-Daughter	ODE
			A FUNERAL DIRECTOR OR PERSON		0.000000	San	Reynolds S Diego, CA 9	2114	
	ACKNOWLEDGMENT OF A	thereby a	San Diego, CA 9211 cleowlodge as applicant that the proposed disp 176 of the Height and Safety Code, and was nother	osition stated been is one of the	dispositions authorized by Health and Safety Code.	BA SIGN	TUBE OF APPRICANT	100 pag parent, 88. DAT	/1995
	PERMIT UTHORIZATION OF OCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	ED IN ACCORDANCE WITH PROVI- ORNIA HEALTH AND SAFETY CODE Y FOR THE DISPOSITION SPECIFIED DIRECT OF DISPOSAL OUTSIDE OF CALFORNIA.	9A. AMOUNT OF FEE PA	03/31/19 Kyle Cha	95	9604414	CAL REGISTRAR ISSUI	NG PERMIT
AN	and the same of th	Vital Reco	GISTRAR OF DISTRICT OF DEATH D IN CAUCONNA OCAS-P.O. Box 8522 CA 92186-5222	9E. ADC			HET OF DISPOSITION— THER DISTRICT IN CALIFO	RNIA	
Ī.	IORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS				FOR COR	ONER'S USE ONL	Y
	6. CREMATION C DISPOSITION THAN IN A CE D. SCIENTIFIC US	OF CREMATED REM.	AINS OTHER	E TEMPORARY ENVA  F. DISINTERMENT  G. SHIP IN TO CALIFO  H. TRANSIT TO OUTS	RNIA		I DISPOSITION (Name and A	PENDING—REMAINS LI ddress)	OCATED AT
	GURIAL		oness of California CEMETE pe Cemetery, co, CA	RY.	4495	D   11C	SIGNATURE OF PER	SON IN CHARGE OF B	URIAL
BLE ITEMS	CREMATION	12A. NAME AND AD	oress of California Cremat metal scal		128. DATE CREMAT	ED   12C	SIGNATURE OF PERS	SON IN CHARGE OF CR	REMATION
LL APPLICA	SCIENTIFIC USE	13A. NAME AND AL	DRESS OF CALIFORNIA FACILITY	PRECEIVING REMAINS	13B. DATE RECEI	VED 13C	SIGNATURE OF PER	SON IN CHARGE OF F	ACILITY
OMPLETE A	TRANSIT		DORESS IN RECEIVING STATE OR CREMATED REMAINS ARE TO BE		14B. DATE SHIPP	ED 14G	ADDRESS AND SIGN OF PLACING WITH T	ATURE OF PERSON IN HE CARRIER	CHARGE
3	SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR O' NTIFY FINAL PLACE AND CA DISTR		15B. DATE OF DISPOSITION		SIGNATURE OF PER CHARGE OF DISPOS	SITION OF CREA	NUMBER MATED RE- DISPOSER PLICABLE



252502 04/10/95 084869 E-12135	SHARON TRAVIS 100 072 100 072 100 072 100 072 100 072 100 072 100 072 60101 67007	77181 000072 77182 000072 77183 000072 77184 000072 77185 000072 78390 77184	072227575
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1,322.30 0.00 PAID IN FULL

1,322.30 375.00 190.00 45.00 355.00 145.00 13.30 199.00

### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 3/31/95

You are hereby authorized and instructed, s	subject to your rules and regulations, to inter the remain
ol_ Lotucia 1	
ina liner	Funeral, date, time MON 4/3/95@ 11
Church, Chapel, Graveside Church +	marcide: Cal Burial Mortuary
All Funeral cars must arrive before 3:30 p.m	n. of regular work day or an extra charge of \$ 150
will be applied and billed to undersigned.	
, War time veteran	NL)
Lot 165 Grave 12 Row	Section / Division/Block /2
	795.0
Grave space & Care Fund	0
Additional spaces and care fund	2751
Opening/Closing & Selup.	Joh M
Burial Container	145 14
Handling Fees	175.0
Flower vases - Marker setting fee	44 1/500
Recording and filing fee	13 30
Sales taxes	15623016122
which by Sounds	Total Due
& Forey mundary on Paic	d receipt number R 46075 390.0
and the first the the	Balance due 1112
I hereby certify I am the Moth e and this is your authority to make disposition	of the above named deceden
that I have the right to make this authorization any liability on account of said authorization	on and I agree to hold Mt. Hope Cemetery harmless from
	v 0 .01 d
I hereby authorize the interment in lot I	Stephens
hold under deed.	K809 MARIORIE 92.
Bignature of recorded holder of deed	SAN Diego CA 92114
	£ 119 263 -3644 2000
	Telephon*
_ 12136	Invoice # 352008
Work Order # E	Acct. 084784
PY-593 (Rev. 8-92)	

## W.O. # E- 12136

### NOTE

	1172	.30		San Diego, California _	april 3,	19_9
3751 with	ty days after da Market Street, interest from	te for value rece , San Diego, CA	hand the undersions	ad maker promises to pe	San Diego City Treasu Lenuty Luo + 35 on the un	rer or order at
at th	e rate of 12 per	cent per annun	n, payable on demai	nd.		
will I matu pers cont	be liable and courity, and waive on who signs t	onsents to rene es presentment this note agrees f any action be	wals, replacements , demand and protes s that recourse may	and extensions of time st and the right to asse be held against his/he	money of the United State for payment hereof before any statute of limitation separate property for a comise(s) to pay such sur	ore, at or after ons. A married any obligation
					ornia Health and Safety se price is past due and u	
PRIN	TNAME MS	DOR'S H	UNTER	SIGNATURE	Dozis Hente	
ADDE	RESS 809	MARIORIE	78.	SD 92114		
		9	Uc 153856		N# 114-52-788°	1

## E 12136

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMILY)		2. DATE OF BIRTH		4. SEX	
Latisha SA. CITY OF DEATH San Diego		Yvette	58. COUNTY OF DEA	TH-OUTSIDE CALIF.,				
		A CONTRACTOR OF THE PARTY OF TH	RSON ACTING AS SUCH 78. C.	ALIF. LICENSE NUMBER HE APPLICABLE	809 Marjorie   San Diego, CA			
5602 E1 Ca	DOLUMENT   I hereby a		2115  ed disposition stated herein is one of the sufficient pursuant to Section 7100 of		BA. SIGNATURE OF ABILICAN	T-Person Laking person   88. DAT	1/1995	
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH PROPRIED IN ACCORDANCE WITH PROPRIED SPECIFIC OF THE DISPOSITION SPECIFICATION OF DISPOSAL OUTSIDE OF CALF	IFIED C	PAID SE DATE PERMIT	95 9504432	LOCAL REGISTRAR ISSUM	VG PERMIT	
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	Vital Rec	EGISTRAR OF DISTRICT OF DO IN CAUFORNIA BOX 00, CA 92186-522	85222		OF DISTRICT OF DISPOSITION UR IN ANOTHER DISTRICT IN CA			
HORIZED DISP	OSITION(S) CHECK A	The second secon			FOR C	ORONER'S USE ONLY	Y	
B. CREMATION C. DISPOSITION THAN IN A CI D. SCIENTIFIC US BURIAL	OF CREMATED REM. EMETERY SE	AINS OTHER  ODRESS OF CALIFORNIA CEI		WHO IN THE STATE OF THE STATE O	(Name an	ON PENDING REMAINS LO d Address)		
	San Diego			173/95	· Ma	D		
CREMATION	Transfer of the second	tal Man,	Will be a second of the second	129. DATE CREMA	TED 12C. DISNATURE OF P	erson in Charge of Cr	EMATION	
SCIENTIFIC	1SA. NAME AND AL	DORESS OF CALIFORNIA FA	CILITY RECEIVING REMAINS	13B. DATE RECE	IVED 13C. SIGNATURE OF	PERSON IN CHARGE OF F	ACILITY	
* TRANSIT	14A. NAME AND AI REMAINS OR	DDRESS IN RECEIVING STAT CREMATED REMAINS ARE T	E OR COUNTRY WHERE O BE SHIPPED	14B. DATE SHIPP	ED 14C ADDRESS AND S OF PLACING WIT	RIGNATURE OF PERSON IN H THE CARRIER	CHARGE	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEA FICIENT TO IDE	REST POINT ON SHORELINE, ENTIFY FINAL PLACE AND CA	or other description suf- district of disposition	15B. DATE OF DISPOSITION	15C. SIGNATURE OF DISI	POSITION   OF CREA	MATED RE-	



E-/3/36 DORIS HUNTER 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072	77181 000072 77182 000072 77183 000072 77184 000072 77185 000072 78390 77184	1,172.30 375.00 190.00 44.00 246.00 145.00 13.30 159.00
--	--	--

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

		Date:	4-3	
From: CA Burial	Address: 5880 ELG	ion Bl. &	19 9211	5
Three hundred nin	nety 9 ms/100		ollars (\$ 39)	0.00
In Payment of	Frank of Latie	ha Y. Ide	enter	
	,		- 60	7 11 11 11 11
tot /65 Grave	12 Row_	Section /	Divis	
Invoice No:	NOT VALID FOR PURPOSE STATED UNLESS STAMPS	ED CREDIT	67007	
	"PAID" IN THIS SPACE	20% Sales Care 80% Sales of Lots	77184 100 77184	90 00
Acct. No. = 13 136		Opening/ Closing	100 77181	
w.o		Burial Containers	77182	
BALANCE DUE		Handling Fee	77185	
		Recording & Misc. Fees Pre-Need	77183	
Pre-Need Lot At Need On Acct Pre-need Trust Cesh Check		Trust Sales Tax	63033 9022 60101	
Pre-need Trust Cash Check AC212 (Saw 5.04)	ISSUED BY A COURT	TOTAL PAID	78390	2000
AC-212 (Rev. 5-94)	ISSUEU BT	TOTALPAID	_ 3	1000

Haul all dust off &
MT. HO!
Chairs and ... INTE MT. HOPE CEMETERY INTERMENT ORDER City of San Diego

Date 4-3-95

O .	
You are hereby authorized and instructed, s	subject to your rules and regulations, to inter the remains
of andres Ca	crillo
in a Obl. Depth Crypt	Funeral, date, time July 4-4-95 @ B. NOO
Church, Chapet, Graveside	Evertheringel Mortuary.
All Funeral cars must arrive before 3:30 p.m	of regular work day or an extra charge of \$ 150
will be applied and billed to undersigned.	Durthe Carello
War time veteran	
Lot 7/ Grave 8 Row _	Section 2 Division/Block //
Grave space & Care Fund	e- Freed E-11559
Additional spaces and care fund	<u> </u>
	-need E-11559 0
Burial Container (PD) Lu-	Treed 8-11559 D
Handling Fees (RD PSM)	- need E-11559 D
Flower vases - Marker setting fee	
Recording and filing fee	Pre need E-11559 0
Sales taxes & &	Re- Med E-11559 D
Pre-need funds	Total Due
1-2- 4-12-95 Paid	receipt number
Dogugular	Julaus Balance due
I hereby certify I am the Annual and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization.	of the above named decedent of remains as above indicated. I certify and represent on and I agree to hold Mt. Hope Cernetery harmless from and interment.
I hereby authorize the interment in lot I hold under deed.	Bullio Carill
Signature of recorded holder of deed	X SANDIETO CA. 90119
	7 263-9193
<sub>E</sub> 12137	Invoice #
Work Order #	Acct. #
PY-593 (Rev. 8-92)	

E 12137

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

84

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	1	C. LAST (FAMILY)				DATE OF DEATH	
ANDRES		-	1	CARRILLO			647is/iei/6	1470171995	14
SA. CITY OF DEATH			58	CONTRACTOR OF THE PARTY OF THE	H-OUTSIDE CAUF.,	B. NAME	RELATIONSHIP, FULL MAIL	ING ADDRESS AND	ZIP CODE
National C	ity		1	San Dieg	0	Feet	neringill Mor	rtuary	
TAL TYPED NAME AND AD	DDRESS OF CALIFORNI	A FUNERAL DIRECT	OR OR PERSON ACTIV		LIF. LICENSE NUMBER	6322	El Cajon Bly	rd.	
FEATHERING	ILL MORTUAF	Y 6322 El San Dir	l Cajon Bl	vd.	1083		Diego, CA 921		TE SIGNED
ACKNOWLEDGMENT OF A		chinomicsign an applicant the 375 of the Health and Safety			e dispositions authorized by the Health and Safety Code.	·8.	Kilonstud	04/0	3/1945
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT NOTE: THIS PERMIT GIVES IN	ORNIA HEALTH AND Y FOR THE DISPOSIT	SAFETY CODE NON SPECIFIED	\$7.00	04/03/19 Edward Fe	95	GC SIGNATURE OF LOCAL 9504521	L REGISTRAA ISSU	AG PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL SPOSITION.	P. DOTE BOX CA 92186-5	85222, Sar	n Diego		DRESS OF REGISTRAF DISPOSITION IS TO OCC		ICT OF DISPOSITION— THER DISTRICT IN CAUFORNIA	*	Tal
THORIZED DISPO	OSITION(S) CHECK AF	PLICABLE ITEMS	WELL	-		1150	FOR CORON	VER'S USE ONL	Y
B. CREMATION		AINS OTHER	☐ F.	DISINTERMENT SHIP IN TO CALIF TRANSIT TO OUT:			I. DISPOSITION PE (Name and Addr		OCATED AT
BURIAL	Mt. Hope (	Cemetery	DRNIA CEMETERY		11B. OUTE BURIE	D   11C	SIGNATURE OF PERSON	N IN CHARGE OF I	BURIAL
CREMATION	12A. NAME AND AD		casked		12B, DATE CREMA	TED 120	SIGNATURE OF PERSON	IN CHARGE OF C	REMATION
SCIENTIFIC	13A. NAME AND AD	DRESS OF CALIFO	ORNIA FACILITY REC	CEIVING REMAINS	13B. DATE RECE	VED 13C	SIGNATURE OF PERSON	N IN CHARGE OF I	FACILITY
TRANSIT	14A. NAME AND AD REMAINS OR (	DORESS IN RECEIVING			14B. DATE SHIPP	ED 140	ADDRESS AND SIGNATURE OF PLACING WITH THE		N CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEAL FICIENT TO IDE	REST POINT ON SHO NTIFY FINAL PLACE			15B. DATE OF DISPOSITION		SIGNATURE OF PERSON CHARGE OF DISPOSITIO	ON OF CRE	E NUMBER MATED RE- DISPOSEN PLICABLE



## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date

You are hereby authorized and			
of		and Williams	
Vault/Liner			Total Control of the
Church, Chapel, Graveside		1	Mortuar
All Funeral cars must arrive before	ore 3:30 p.m. o	of regular work day o	r an extra charge of \$
will be applied and billed to unde	ersigned		
War time veteran			
Lot Grave	_ Row	Section	Division/Block
Grave space & Care Fund		***************************************	
Additional spaces and care fund	I		
Additional spaces and care fund Opening/Closing & Setup			<b>)</b>
Burial Container			/
Handling Fees		× / ,	
Flower vases - Marker setting to	No		
Flower vases - Marker setting to Recording and filing fee			
Sales taxes			
	1		Due
	Paid re	ceipt number	
			Balance due
I hereby certify I am the			_ of the above named deceder
and this is your authority to mak that I have the right to make this any liability on account of said a	authorization	of remains as above and I agree to hold M	indicated. I certify and represer
I hereby authorize the interment hold under deed.	in lot l	Signature	
		Address	
Signature of recorded holder of deed	W. Paris	City	Zip Cod
*		Talephdre	
- 121	3.8	Invoice #	
Work Order # E	00	Acct. #	
PV-593 (Rev. 8-92)		Control of the contro	

#### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

ot Ragael				, ,	
in a	Fu	neral, date, tim	10 Ju	w 4/4/9	5@ 20
Church Chapel Graveside	altan	weside_	Rag	dale	Mortuar
All Funeral cars must arrive before	3:30 p.m. of	regular work d	ay or an	extra charge o	15 /50
will be applied and billed to unders					
War time veteran	*1				
Lo13/29 Grave	David .	Continu	1	Division	9
Grave space & Care Fund					
Additional spaces and care fund					Printed in 1910
Opening/Closing & Setup		W / 2 /			
Burial Container					
Handling Fees	3/				
Flower vases - Marker setting fee	od/ox				_0
Recording and filing fee	気をみ	لإ			45.0
Sales taxes to brill	1 Kno			.,,	0
who son It. of	16 3		Total Due	Y	270,0
grave the	Paid rec	eipt number	R-4	6083	270.0
ream				Balance due	0
I hereby certify I am the V			0	f the above na	amed decede
and this is your authority to make that I have the right to make this a any liability on account of said aut	uthorization a	nd I agree to h	bove indi- old Mt. H	cated. I certify ope Cemetery	and represe harmless fro
hereby authorize the interment in	lot	k			
hold under deed.	1.N202.71	Signature			
		Address			
Signature of recorded holder of deed		City			Zip Co
		Telephone			
- 1213	0.0	Invoice #			
- 610	0	TITOTO W_			
Work Order # E		Acct.#			

= 12139

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

5 mas

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

A. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FAMILY)				THE OF DEATH 4. SEX
Raphael		Divine	Cooper		10/29	/1994 03	/23/1995 H
A. CITY OF DEATH			58 COUNTY OF DEATH	H-OUTSIDE CALIF.,	E. NAME, RELATION OF INFORMANT	SHIP, FULL MAILING	ADDRESS AND ZIP CODE
	ional Ckty	POLICE OF STREET	San Diego		Patricia	Waters, Fo	oster Mother
		IA—FUNERAL DIRECTOR OR PERSON	1 -1	F APPLICABLE	5121 Loga	n Ave.	
Anderson-Ra	San	.; 5050 Federal B Diego, CA	F-1	329	San Diego	CA 92114 APPLICANT—Fersion to	ing permit BB. DATE SIGNE
ACKNOWLEDGMENT OF A		echnomics)ec as applicant that the proposed disp 1376 of the Health and Safety Gode, and was autho			Mulfu	Wellen	04/03/196
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	DED IN ACCORDANCE WITH PROVI- CRINA HEALTH AND SAFETY CODE BY FOR THE DISPOSITION SPECIFIED IN MORE OF DEPOSAL OUTSIDE OF CALFORNIA.	9A. AMOUNT OF FEE P.	98. DATE PERMIT 04/03/19	CONTRACTOR OF THE PARTY OF THE	TURE OF LOCAL R	9504492
NY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	Vital Reco	EGISTRAR OF DISTRICT OF DEATH ED IN CALIFORNIA OTAS; P.O. Box 852 Can Diego, CA 9218	22	DRESS OF REGISTRAR DISPOSITION IS TO OCCU			
HORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS				FOR CORONE	R'S USE ONLY
B CREMATION C DISPOSITION THAN IN A CE D SCIENTIFIC US BURIAL	11A. NAME AND A	DURESS OF CALIFORNIA CEMETER Cemetery; 3751 Mar San Diego, CA	777			Name and Address	N CHARGE OF BURIAL
CREMATION	12A. NAME AND AL	DDRESS OF CALIFORNIA CREMATI	DRY	12B. DATE CHEMATI	12C. SANTATI	IRE OF PERSON IN	CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND A	DDRESS OF CALIFORNIA FACILITY	RECEIVING REMAINS	13B. DATE RECEIV	PED 13C. SIGNATI	RE OF PERSON I	N CHARGE OF FACILITY
* TRANSIT		DDRESS IN RECEIVING STATE OR CREMATED REMAINS ARE TO BE		14B, DATE SHIPPE		S AND SIGNATURE CING WITH THE CA	E OF PERSON IN CHARGE ARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR OT ENTIFY FINAL PLACE AND CA <u>DISTRI</u>		15B. DATE OF DISPOSITION		IRE OF PERSON I	N ISD. LICENSE NUMBER OF CREMATED RE- MAINS DISPOSER —IF APPLICABLE

## WHITE..... TO CUSTOMER CANARY CEMETERY PINK....... AUDITOR

Payment of \_\_\_\_\_\_

#### MOUNT HOPE CEMETERY 527-3400

Date:

Dollars

		-
10	9310	2
(\$	270.	09
	100	-
_ [	Division (	9
	20	00
	80	00
	125	00
	115	00

Lot 3129 Grave	Row Se	ction	
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	80% Sales of Lots Opening/ Closing Burist	87 77 77 77 77
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check  AC-212 (Rev. 5-94)	ISSUED BY Rouch	Handling Fee Recording & Misc. Fees Pre-Need Trust	77 65 67

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 4-4-95

na LINER	Funeral, date, time	Thu	es 4-6	IDAM
Church, Chapel, Graveside Chunch	Languard	Sugar	tulupan	(9 Mortuary
All Funeral cars must arrive before 3:30 p.m.	of regular work da	y or an e	xtra charge o	15 150.0
will be applied and billed to undersigned				
War time veteranNO				
Lot <u>124</u> Grave <u>2</u> Row_	Section	3	Division/Ble	rek_ 12
Grave space & Care Fund				795.6
Additional spaces and care fund			MANAGEMENT OF THE PARTY OF THE	
		************		375.0
Opening/Closing & Setup		11		190. oc
Burial Container	A	سلم		
Handling Fees	I wy	7	·······	145.0
Flower vases - Marker setting fee	262	4-		
Recording and filing fee	7-01			45.00
Sales taxes				13.30
4.4-	T.	atal Dua		1563.30
paid por significant paid	C	2 1 1 1	000	39210
Paid Paid	receipt number	-410	090	29910
Paid Paid	5 pos a	2-46	Balance due	11/15
hereby certify I am the + Lloc	Marlin	اوح	the above na	med deceder
and this is your authority to make disposition that I have the right to make this authorization	n and I agree to hol	d Mt. Ho	pe Cemetery	and represer harmless from
any liability on account of said authorization	and interment.			852.3
		10	100	7=
hereby authorize the interment in lot I hold under deed.	Signature	10	N VE	andre
Total diluti docu.	Address	SILA	Logo	in Da
Signature of recorded holder of dead	150	er d	iego	En
	City > FG	26 98	230	9311
	Telephone	0 10	97	151
19110	Invoice #		2525	7/3
F 12140	110000000000	1	0007	1
Nork Order # -	Acct. #	-	0701	

1	1		
•	1 2 3	ACPION: L : ACCOUNT OPEN & PAID INVOICES PO 1  ACPION: L : ACCOUNT: 084871  NAME: FLOR MARTINEZ SHORT NAME: MARTINEZ	2 2 3
•	5 6	#LAST PAYMENT*  BILL INV INV INV DUE STAT PART PAYMT APPL RECD  DEPT TYP NO DATE DATE AMOUNT CODE AMOUNT DATE DATE	5 6 7
•	7 6 9	072 GE 252513 041195 021298 852,30 REQUEST COMPLETED	11 12
•	11		13
•	13		18 19 20
•	17		22 23 24
•	20		26 27 28
•	23		30 31 32
•	26		34 35 36
•	29		38 39 40
•	32		42 44 40
•	35		45 67 68 40
•	39		50 51 52 53
•	41		55 00

#### ,MT. HOPE CEMETERY

PY-1012 (11-89)

W.O.# E 12140

### NOTE

•	Rever hus	udred severely one	30/100 San	Diego, California	4-	6 19.95
	3751 Market Stree with interest from	ate for value received, the it, San Diego, CA 92101, t May ercent per annum, payabl	he sum of	1171,		DOLLARS on the unpaid principal
	accrue at the rate i will be liable and maturity, and wait person who signs	ote not be paid when due, indicated above. Principal consents to renewals, reported presentment, demand this note agrees that record any action be instituted by's fees.	l and interest a placements and l and protest a course may be	re payable in lawfu d extensions of tin nd the right to ass held against his/h	ul money of the U ne for payment I sert any statute ner separate pro	United States. The maker hereof before, at or after of limitations. A married operty for any obligation
	authorizes	hapter I, Article 2, Parage the removal of any remains of the second of	ns from a plot fo	or which the purch	nase price is past	t due and unpaid.

# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

and the same of th			-MAKE NO ERASURES, W	THIE COURS ON OF		HATIONS	EXPERSION		
A. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FAMILY)			DATE OF BIRTH	3. DATE OF		4. SEX
VICTOR		HUGO	MERCADO-E	BELTRAN	1000	/13/1964	The state of the s	13/31/1995	
A. CITY OF DEATH			5B. COUNTY OF DEAT ENTER STATE	H-OUTSIDE CALIF., 6	OF INFORM	ATIONSHIP, FULL M	MAILING ADDRES		CODE
SAN DIEGO				AN DIEGO		MARTINEZ !		A-WIF	2
A Company of the Comp	ODRESS OF CALIFORNIA A MEM. CHAP		PERSON ACTING AS SUCH 7B. CA	F APPLICABLE		LOGAN AV			
2601 IMPER	TAL AVE., S	AN DIEGO, CA.	92102 FD-	-1425	BA SIGNATUR	RE OF APPLICANT-	Person taking permit	BB. DATE	SIGNED
"ACKNOWLEDGMENT OF A			oposed disposition studed herein is one of the d was authorized parsonal to Section 7100 of th		1	一文作	W-	04/04	/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF- AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH CORNIA HEALTH AND SAFET BY FOR THE DISPOSITION SP IN MIGHT OF DISPOSAL OUTSIDE OF C	Y CODE PECIFIED	2104/09574	- 195	SIGNATURE OF LO	XCAL REGISTR	AR ISSUN	3 PERMIT
NY CHANGE IN DISPOSI- TION RECURIES A NEW SERMIT TO SHOW FINAL DISPOSITION.	VITAL RECO	EGISTRAR OF DISTRICT OF D IN CAUPOINIA RDS., P.O. BO CA. 92185-52	x 85222	DRESS OF REGISTRAN O			DRNIA		
HORIZED DISP	OSITION(S) CHECK AF			The same of the same of		FOR COR	ONER'S US	SE ONLY	4
B. CREMATION			F. DISINTERMENT			-I (Name and A	goress)		
D SCIENTIFIC US	11A NAME AND AD	DDRESS OF CALIFORNIA	G. SHIP IN TO CALIFO  H. TRANSIT TO OUTS  CEMETERY  751 MARKERTST		11C. Sh	GNATURE OF PER	SON IN CHAR	GE OF BU	RIAL
D SCIENTIFIC US	TIA NAME AND AD MOUNT HOPE	DE CHARTERY, 3	H. TRANSIT TO OUTS DEMETERY 751 MARKERTST	IDE OF CALIFORNIA	-10	GNATURE OF PER			WWW.
D SCIENTIFIC US	TIA NAME AND AD MICENT HOPE SAN DIECO	DDRESS OF CALIFORNIA CA. 92102 DDRESS OF CALIFORNIA	H. TRANSIT TO OUTS DEMETERY 751 MARKERTST	118. DAPE BURIED	D 120 81	LA L	SON IN CHARG	SE OF CRE	MATION
BURIAL  - CREMATION  SCIENTIFIC	TIA NAME AND AD MOUNT HOP SAN DIECO	DORESS OF CALIFORNIA CA. 92102 DORESS OF CALIFORNIA DORESS OF CALIFORNIA	H. TRANSIT TO OUTS CEMETERY 751 MARKERTST. CREMATORY FACILITY RECEIVING REMAINS ATE OR COUNTRY WHERE	HIDE OF CALIFORNIA  11B. DATE BURIED  12B. DATE CREMATE	ED 13C SI	LA L	SON IN CHARG	GE OF FA	CILITY

ARGE OF DISPOSING OF THE CREMATED REMAINS.

E-12140

#### City of San Diego MEMORANDUM

File No .:

Date : August 29, 1995

To : Therese Balbo, Program Supervisor Treasurer's Office

From : JoAnn Waits, Cemetery Manager, Mt. Hope Cemetery

Subject: Endorsement of Check for Flor Martinez

This is a memo of release for check #62575249 from the Victim's Witness Program made payable to Mt. Hope Cemetery in the amount of \$852.30.

Please endorse the check for Flor Martinez. In checking the computer records, those records indicate that the entire amount of the burial has been paid in full for Invoice #252513. The final payment was made on 7-26-95 for the balance of \$852.30. The computer does not show that any other amounts are due to the City.

Thank you for your assistance in this matter. If you have any questions, please contact me at 527-3400.

Jellen

MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 4-4-95

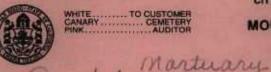
1/6/95 and the hear to each	You are hereb	y authorized and instructed, VICTOR HUGO MERC	subject to your rules and regula ADO+ BELTRAN	tions, to inter the remains	-
Af hom hom id t	ta a	LINER	Funeral, date, time Thus.	54-6 ICAM	-
B TO TO CT	Church, Chap	el. Graveside (*hunch	Lanonio Tollando	Capana Mortuary	1
2 0. H	All Funeral ca	rs must arrive before 3:30 p.n	ROSI GI	a charge of \$ 150.00	1
Flor ebtor the c	will be applied	and billed to undersigned	* FM		1
cus or or ce	War time vete	ran			I
iscussion w Flor Martin btor could he cemetery	VLOI 124	Grave 2 Row_	Section 3 c	ivision/Block12	ı
er con	Grave space	S Care Fund		795.00	ı
w/Jo. inėz d pay ry to can.					1
o An	CONTRACTOR CONTRACTOR			775 00	1
y 00°				100 -0	1
t 1 0 I				1115 -0	
UA STATE OF THE ST	W				1
reached ke Engl		-		115 00	
	Sales taxes			13 30	
someone ish. encouraged	. A.	332	Total Due	1642 30	-
eon	Man Dox	O Pai	d receipt number R-LIOC	0 900 - 0	-
HE QUESTION IS, AN I NOW GO INTO TH OMPUTER TO CHANGE HE DUE DATE?	that I have the any liability or I hereby autho hold under de	right to make this authorization account of said authorization prize the interment in lot I ed.	on of remains as above indicate on and I agree to hold Mt. Hope in and Interment.  V	Completely harmless from  18852.30  Martin  Lagan ave.  2000	
HEN IT WAS ENTERED,	AN EXTRA	_ 12140	-071	52513	
ERO MUST HAVE GOTTEN N THE "DAYS DUE" SPA	Wolf Cities w		Acct #O	94871	-
D IT BECAME 300 DAY	PY-593 (Rev. 8-9	2)			
ane	7 -			to the second of the second	-1-1
( )					
			The MERRY		
etal ACT	ION: L E: FLOR MARTIN	ACCOUNT	TOPEN & PAID IN 1 084871 SHOR	VOICES	EZ
		7	,	TO VIVIOUS SAME WAS AND ASSESSED.	2115
	ILL INV INV	INV BUE BATE DATE	AMOUNT	STAT PART PA	
(5)	EPT TYR NO	BATE DATE	PIPIOGNI	CODE MIC	77.53

Invoice No. Acct. No.

BALANCE DUE

Pre-Need Lot Pre-need Trust Cash

AC-212 (Rev. 5-94)



WHITE TO CUSTOMER CANARY CEMETERY RINK AUDITOR

Payment of Juntann on

Grave

At Need D On Acct D

☐ Check 4343

ISSUED BY

#### MOUNT HOPE CEMETERY 527-3400

NOT VALID FOR PURPOSE STATED UNLESS STAMPED

Date:	4-1	9210	95
no/100	Pollars (\$	392 cado-li	og Beltr
ection 3	E N	Division /	2
CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers	67007 77184 — 100 77184 — 100 77181 — 100 77182 —	392	00
Handling Fee Recording & Misc. Fees Pro-Need Trust Sales Tax	100 77185 — 100 77183 — 63033 9022 — 60101		
TOTAL PAID	78390 —	392	00

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

		Date:	4-10	
From: Flar Martine	Address: 2811 A 300	an an	e, San	Dugo.
Three hundred n	Insteam enopos	-00	ollars (\$ 319	00 942
In Payment of	insent of Victor	duas -	meroad	do-Beth
Ly .		30		
Lot 124 Grave	2 Row Se	ection 3	Divisio Block	12
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184	7500
Acct. No.		60% Sales of Lots Opening/	77184	4 00
w.o. E-12140	THE RESIDENCE OF THE PARTY OF T	Closing Boriel Containers	77181 100 77182	
BALANCE DUE # 852.30	STATE OF THE PARTY	Handling Fee	77185	
		Recording & Misc. Fees	77183	
Pre-Need Lot	00	Pre-Need Trust Sales Tax	63033 9022 60101	
AC-212 (Rev. 5-94)	ISSUED BY Mauch	TOTAL PAID	18390	900



WHITE TO CUSTOMER CANARY CEMETERY PINK ALDITOR

MOUNT HOPE CEMETERY

From Flor Marte	MOZ Address: 28/1 Logi	Date: 10:	18 193 150 92113 10 125,00,
Payment of His	igo mercod	ection 3	Division 12
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Acct Rev. 594)	ISSUED BY A LIDIAN OF	CREDIT 20% Sales Care 80% Sales 10 of Lots 7718 Opening/ Closing 8urial Containers 10 Handling Fee Recording & 30 Misc. Fees 7718 Pre-Need 1718 Sales Tax 6016 7839	000 34 30 31 30 30 30 30 30 30 30 30 30 30

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date#-5-95

or PERKINS, BA	Funeral, date, time FRI 417	11:00
Church, Chapel, Graveside Church	Conqueide CABunia	
All Funeral cars must arrive before 3:30 p.m.	(1	
will be applied and billed to undersigned.		
AND AND ENGINEERING AND	or the same period	
/		
Lot 368 Grave 11 Row_	Section Division/Blo	ock_12_
Grave space & Care Fund		795.00
Additional spaces and care fund		-
Opening/Closing & Setup		375.0
Burial Container		
Handling Fees		145.0
Flower vases - Marker setting fee		
Recording and filing fee		45.0
Sales taxes		122
	Total Due	1563,3
Paid	receipt number R-46088	390.0
	Balance due	1173,3
I hereby certify I am the X Suffer	of the above no	amed decedent
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization	n of remains as above indicated. I certify n and I agree to hold Mt. Hope Cemetery	and represent
	Lavi 4 - 500.	m
I hereby authorize the interment in lot I hold under deed.	Signature 3	
	410923 Tobago Rd	
Signature of recorded holder of deed	City,	92126 Zp Code
/	×693-9107	=:50290
10111	25 916	77
Work Order # E 12141	Invoice # 25249 Acct. # 084870	2
Work Order # -	Acct. # 084870	

	HIM	DE	OF BE	20.00	ED	v
MI.	HU	PE.	CEM		ER	T

PY-1012 (11-89)

W.O. # E-12141

### NOTE

1173.30	San Diego, California	4-5	19.95
Thirty days after date for value receive	ed, the undersigned maker promises to pay	San Diego City Treas	urer, or order at
3751 Market Street, San Diego, CA 92	2101, the sum of Elemen hund	red seventy-H	DOLLARS
with interest from	5-7-95	U	inpaid principal
at the rate of 12 percent per annum, p	payable on demand.		
accrue at the rate indicated above. Pri will be liable and consents to renewa maturity, and waives presentment, de person who signs this note agrees th	n due, it shall thereafter bear interest on the incipal and interest are payable in lawful maken and interest are payable in lawful maken and extensions of time the mand and protest and the right to assert at recourse may be held against his/her tituted on this note, the undersigned professional accounts and the right to assert the tituted on this note, the undersigned professional accounts and the right to assert the undersigned professional accounts and the right to assert the undersigned professional accounts and the right that the right	noney of the United Sta for payment hereof be t any statute of limitati separate property for	ates. The maker fore, at or after ions. A married any obligation
	Paragraph 7528 of the State of Califor remains from a plot for which the purchase		
PRINT NAME & EARLIE M. SI	PENCER SIGNATURE & EAST	lie de Spenn	وب
ADDRESS X 10923 Tubagu 7	d, S.D. CA 92126		
CALIFORNIA DRIVER LICENSE NUMBER *_	E0582 818 SSN	* 426-88-51	61

= 12141

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS 3. DATE OF DEATH 4. SEX 1A. NAME OF DECEDENT-FIRST (GIVEN) IB. MIDDLE 1C. LAST (FAMILY) 2. DATE OF BIRTH 04/01/1995 05/21/1942 Barbara J. Perkins 6. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE 5A CITY OF DEATH AB. COUNTY OF DEATH-OUTSIDE CALIF... OF NEORMANT Earlie Spencer-Daughter San Diego La Jolla 10923 Tobago Road 7A. TYPED NAME AND ADDRESS OF CALIFORNIA. FUNERAL DIRECTOR OR PERSON ACTING AS SUCH 7B. CALIF. LICENSE NUMBER California Cremation & Burial Chapel San Diego, CA 92126 5602 El Cajon Blvd. San Diego, CA 92115 BA. SIGNATURE OF APPLICANT—Persontating terroit, BB. DATE SIGNED FD 1357 I hereby acknowledge as apparent that the proposed disposition stated herein is one of the disposition authorized by ACKNOWLEDGMENT OF APPLICANT Section 10376 of the Health and Salety Code, and was authorized pursuant to Section 7105 of the Health and Salety Code THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS OF THE CAUFORNA HEALTH AND SAFETY CODE

BA. AMOUNT OF FEE PAID

98. DATE PERMIT IS 90. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT

9504689 PERMIT SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED 04/05/1995 AUTHORIZATION OF IN THIS PERMIT \$7.00 Kyle Chase NOTE: THIS PERMIT GIVES NO RIGHT OF DESPOSAL OUTSIDE OF CALIFORNIA. LOCAL REGISTRAR 9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH-9E. ADDRESS OF REGISTRAR OF DISTRICT OF DISPOSITION-ANY CHANGE IN DISPOSE IF DISPOSITION IS TO OCCUR IN ANOTHER DISTRICT IN CAUFORNIA EST RECORDS-P.O. Box 85222 TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION. San Diego, CA 92186-5222 FOR CORONER'S USE ONLY HORIZED DISPOSITION(S) CHECK APPLICABLE ITEMS A. BURIAL (INCLUDES ENTOMBMENT) E. TEMPORARY ENVAULTMENT I. DISPOSITION PENDING-REMAINS LOCATED AT (Name and Address) F. DISINTERMENT B. CREMATION C. DISPOSITION OF CREMATED REMAINS OTHER G. SHIP IN TO CALIFORNIA THAN IN A CEMETERY D SCIENTIFIC USE H. TRANSIT TO OUTSIDE OF CALIFORNIA 11A. NAME AND ADDRESS OF CALIFORNIA CEMETERY 11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL TIB DATE BURIED Mount Hope Cemetery. BURIAL San Diego, CA 12A NAME AND ADDRESS OF CALIFORNIA CREMATORY 12B. DATE CREMATED 12C. SIGNATURE OF PERSON IN CHARGE OF CREMATION CREMATION In u scaled 13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS 13B DATE RECEIVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY SCIENTIFIC USE 14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE 14B. DATE SHIPPED REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED OF PLACING WITH THE CARRIER TRANSIT ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUF-15B DATE OF 15C. SIGNATURE OF PERSON IN 15D. LICENSE NUMBER SCATTERING AT SEA OF CREMATED RE-FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT OF DISPOSITION DISPOSITION CHARGE OF DISPOSITION MAINS DISPOSER

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

DISPOSITION OTHER

THAN IN A CEMETERY

-IF APPLICABLE



WHITE.... TO CUSTOMER CANARY CEMETERY PINK. AUDITOR

MOUNT HOPE CEMETERY 527-3400

From: Earlie on Sam	Address Address	10923 T	Date:	4-5 SD	9313	1995
		to y Bank		Dollars (\$	390,00	)
Lot 3 68 Grave	11	Row	Section 2	1	Division Block	12
Acct. No	— PAIU IN THIS S	PURPOSE STATED UNLESS ST PACE.	20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 — 65033	390	00
	ISSUED BY	Rouch	Trust Sales Tax TOTAL PAID	9022 — 60101 76390 —	390	00

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date\_4-6-95

You are hereby authorized and instructed, subject to your rules	s and regulations, to inte	r the remains
of DAVIS, HAYWOOD	Thursd 4/13	2 p.M
in a ToP Seal Voult Funeral, date, time	e TUE 4/11	apm
Church, Chapel, Graveside Chapel & Gnanuside	Parkcrest	Mortuary.
All Funeral cars must arrive before 3:30 p.m. of regular work da	sy or an extra charge of	\$ 150.0
will be applied and billed to undersigned 1/12	wale	,
War time veteran A30	1	
Lot 75 Grave 2 Row Section	Division/Bloc	* 1 or
Grave space & Care Fund	~	895.00
Additional spaces and care fund		-
Opening/Closing & Selup.	/	375.00
Burial Container	/	250.00
Handling Fees		185.0
Flower vases – Marker setting fee		
		45.00
Recording and filing fee		17 5
Sales taxes		
1	O TILL OOL	11112
Paid receipt number	7-46091	442,00
4.0	Balance due /	335.
I hereby certify I am the and this is your authority to make disposition of remains as ab	of the above nan	ned decedent
that I have the right to make this authorization and I agree to ho	ld Mt. Hope Cemetery h	armless from
any liability on account of said authorization and interment.	/	7.
I hereby authorize the interment in lot I	Usses Ce	Re
hold under deed.	19 HARRA	
Address	2 10 corcas	0011
Bignature of recorded holider of dead	1 1000	Zip Code
Talephone	-7162	STORIES STORIES
12112	2=2/00	
_ 12142 Invoice #_	039644	
Work Order # Acct. #	084929	

PY-1012 (11-89)

W.O.# E-12142

### NOTE

1335.50	San Diego, California	4-6	1995
Thirty days after date for value received, the und 3751 Market Street, San Diego, CA 92101, the swith interest from		red twenty fi	
at the rate of 12 percent per annum, payable or	demand.		
Should this note not be paid when due, it she accrue at the rate indicated above. Principal and will be liable and consents to renewals, replace maturity, and waives presentment, demand an person who signs this note agrees that recour contained herein. If any action be instituted on may fix as attorney's fees.	d interest are payable in lawful mo ements and extensions of time fo d protest and the right to assert se may be held against his/her s	oney of the United States or payment hereof befany statute of limitation deparate property for a	tes. The maker fore, at or after ons. A married any obligation
Part II, Chapter I, Article 2, Paragrap authorizes the removal of any remains for			
ADDRESS 2163 Harris		al 9211	13
CALIFORNIA DRIVER LICENSE NUMBER X B 2	052977 SSN#	X715-10-4	597



### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS



USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMILY)			ATE OF DEATH 4. SEX
HAYWOOD		-	DAVIS			
SA. CITY OF DEATH			5B. COUNTY OF DEAT ENTER STATE	H-OUTSIDE CALIF., 6	NAME, RELATIONSHIP, FULL MAILING OF INFORMANT	ADDRESS AND ZIP CODE
SAN DIEGO			SAN DIEGO	) 3	PRESSES COLE FRI	END
	DORESS OF CALIFORNI	A-FUNERAL DIRECTOR OF	PERSON ACTING AS SUCH 78. CA	CARL CARLES AND A CARLES AND A	2168 HARRISON AV	110
				F APPLICABLE		
PARK CRES	T FUNERAL	HOME		- 3		1113
2441 UNIV	ERSITY AV			F. R. (10), N. F.	A. SIGNATURE OF ABOUT ANT-FERDIN LAND	ne demit BE. DATE SIGNED
ACKNOWLEDGMENT OF A			roposed disposition stated heron is one of the nd was authorized pursuant to Section 7100 of t		Past US	104/13/1983
TION REQUIRES A NEW PERMIT TO SHOW FINAL	AND IS THE AUTHORIT IN THIS PERMIT OVER W	OFINIA HEALTH AND SAFE Y FOR THE DISPOSITION S D RIGHT OF DESPOSAL OUTSIDE OF EGISTRAR OF DISTRICT OF D IN CALIFORNIA	CALFORNA \$7.00	SZABLEWS DRESS OF REGISTRAN O	SKI P 95050  SKI P 95050  SKIP 95050  SKIP STRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CALIFORNIA	
POSITION.	SAN DIEG	O. CA 9218	6-5222			
HORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS			FOR CORONER	'S USE ONLY
A. BURIAL (INCL)	IDES ENTOMBMENT)		E TEMPORARY ENV	MILTMENT	I I DISPOSITION PENNS	NG-REMAINS LOCATED AT
B CREMATION			F. DISINTERMENT		(Name and Address	
C DISPOSITION THAN IN A CI D SCIENTIFIC US		AINS OTHER	G. SHIP IN TO GALIFE	and the same of th		
	TIA. NAME AND AL	DRESS OF CALIFORNIA	CEMETERY	118, DATE BURIED	11C SIGNATURE OF PERSON IN	CHARGE OF BURIAL
BURIAL	MT HOPE SAN DIEG	CEMETERY O, CA		14/13/95	(DU)nt)	
NA CONTRACTOR		DRESS OF CALIFORNIA	CREMATORY	128. DATE CREMATE	D 12C SIGNATURE OF PERSON IN	CHARGE OF CREMATION
CREMATION	net	al seal	ers			
SCIENTIFIC USE	13A. NAME AND AD	DORESS OF CALIFORNIA	FACILITY RECEIVING REMAINS	13B. DATE RECEIVE	D 19C. SIGNATURE OF PERSON IN	CHARGE OF FACILITY
		DRESS IN RECEIVING S'	TATE OR COUNTRY WHERE E TO BE SHIPPED	148. DATE SHIPPED	14C ADDRESS AND SIGNATURE OF PLACING WITH THE CA	
TRANSIT				1 3		HE STELL
SCATTERING AT SEA			E. OR OTHER DESCRIPTION SUF-	16B DATE OF	15C. SIGNATURE OF PERSON IN	100, LICENSE NUMBER
OR DISPOSITION OTHER THAN IN A CEMETERY	FICIENT TO IDE	NTIFY FINAL PLACE AND	CA DISTRICT OF DISPOSITION	DISPOSITION	CHARGE OF DISPOSITION	OF CREMATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



252699 04/14/95 084929 TRESSES COLE 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072 77181 000072 77182 000072 77183 000072 77184 000072 77185 000072 78390 77184

1,325.50 375.00 250.00 45.00 274.00 185.00 17.50 179.00

1,325.50 PAID IN FULL

# MT, HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 4-6-95

or WOOD, ERNEST	- A. Ø	1 - 00
ina Ash Vault Fu	meral, date, time AY	D 4-7-95
Church, Chapel, Graveside	: Caring Cru	conatto Mortuary.
All Funeral cars must arrive before 3:30 p.m. of	regular work day or an extra cha	arge of \$
will be applied and billed to undersigned		
War time veteran YES.		
Lot 2 Grave 10 Row	Section Divisir	on/Block_ / /
Grave space & Care Fund		
Additional spaces and care fund		
		105.00
Opening/Closing & Setup.  Burial Container.	DAID	55.00
Handling Fees		60.00
Flower vases – Marker setting fee	APR 0 6 1995	-
Recording and filing tee		45.00
Recording and filing fee MT Sales taxes CITY	of SAN DIEGO, CALIF	3,85
	Total Due	568.85
Paid re	ceipt number R-4609	A CONTRACTOR OF THE PROPERTY OF THE PARTY OF
	Balance	^
I hereby certify I am the Repl		ve named decedent
and this is your authority to make disposition of that I have the right to make this authorization a any liability on account of said authorization and	f remains as above indicated. I o and I agree to hold Mt. Hope Cem	certify and represent
	Magn	11
I hereby authorize the interment in lot I	Spiners	rdeck
hold under deed.	913036 Roun	dup Ave
	Just 1	100 00 1
Signature of recorded holder of deed	SaN Dieg	0 (4 92/2)
Signature of recorded holder of dead	San Dieg 484-77	49 Ep Cook
Signature of recorded holder at deed	San Dieg City 484-77 Telephone	49
Signature of recorded holder of deed	Sq N 1) ( eq. 1) ( eq	49 Ep Code

E12143

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

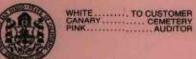
REFILE

1A. NAME OF DECEDE	ENT-FIRST (GIVEN)   18. MIDDLE	IC. LAST (FAMILY)	2. DATE OF BIRTH   3. DATE OF DEATH   4. SEX
ERNEST	ALLEN	WOOD	02/12/191002/20/1995 M
SA CITY OF DEATH		58. COUNTY OF DEATH—OUTSIDE CALIF	. IL NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMANT
SAN DIEGO	0	SAN DIEG	the state of the s
	DIRESS OF CALIFORNIA—FUNERAL DIRECTOR OR PERSON A REMATION SERVICES OF S.D.		13036 ROUNDUP AVE
	711036 S.D. CA 92171-997		SAN DIEGO, CA 92129
	I have a should be a suffered that the amount disease	1	BA. SIGNATURE OF APPLICANT—Person taking permit. BB. DATE SIGNED
ACKNOWLEDGMENT OF A	Section 18376 of the Health and Saliety Gode, and was authoric	nd pursuant to Section 7100 of the Health and Safety Code	104/03/193
PERMIT	SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE		AMIT ISSUED, 9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT
AUTHORIZATION OF	AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT.		NAVA :
LOGAL REGISTRAR	NOTE: THIS PERMIT GREEN ON RESET OF DESPONAL OUTSIDE OF CALIFORNIA.  9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH-		RAR OF DISTRICT OF DISPOSITION—
TION REQUIRES A NEW	IF DEATH OCCURRED IN CAUFORNIA		OCCUR IN ANOTHER DISTRICT IN CASIFORNIA
TO SHOW FINAL	P.O.BOX 85222 SAN DIEGO, CA 92186-52	33	
THORIZED DISP	OSITION(S) CHECK APPLICABLE ITEMS	66	FOR CORONER'S USE ONLY
X A BUFIAL UNCLU	UDES ENTOMBMENT)	E. TEMPORARY ENVAULTMENT	L DISPOSITION PENDING—REMAINS LOCATED AT
B. CREMATION		F. DISINTERMENT	(Name and Address)
C. DISPOSITION	OF CREMATED REMAINS OTHER	G. SHIP IN TO CALIFORNIA	
D. SCIENTIFIC U		H. TRANSIT TO OUTSIDE OF CALIFOR	NIA
	11A NAME AND ADDRESS OF CALIFORNIA CEMETER	Y TIB. DATE BL	IRIED   11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL
BURIAL	MOUNT HOPE CEMETERY		1 0/11
	3751 MARKET ST SAN DIEGO	CA 92102 17/19	5 Mait
EM.	12A. NAME AND ADDRESS OF CALIFORNIA CREMATO	RY 128 DATE CRE	MATED 12C STATURE OF PERSON IN CHARGE OF CREMATION
CREMATION	W/2		
N N N N N N N N N N N N N N N N N N N	N/A	i	12
SCIENTIFIC	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY	RECEIVING REMAINS 138. DATE HE	CEIVED 10C. SIGNATURE OF PERSON IN CHARGE OF FACILITY
USE	2.72		
2	N/A 14A, NAME AND ADDRESS IN RECEIVING STATE OR C	COUNTRY WHERE 14B DATE SH	IPPED 114C ADDRESS AND SIGNATURE OF PERSON IN CHARGE
-	REMAINS OR CREMATED REMAINS ARE TO BE S		OF PLACING WITH THE CARRIER
TRANSIT	at /a		
	N/A 15A: ADDRESS, NEAREST POINT ON SHORELINE, OR OTH	ER DESCRIPTION SUF- 15B. DATE OF	15C. SIGNATURE OF PERSON IN 13D. LICENSE NUMBER
SCATTERING AT SEA OR	FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRIC		
THAN IN A CEMETERY			—IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

CITY OF SAN DIEGO, CALIFORNIA

46093



#### MOUNT HOPE CEMETERY 527-3400

From John P. Murder	Address	13036 1 t 4 85/11	Saundup	Only, 210 9313 Only, 210 9313
In Payment of	Tment	of Ennes	t Wood	
Lot Grave	10	Row	Section/	Division //
Invoice No.	NOT VALID FOR PUT	RPOSESTATED UNLESS ST		67007 (A) 1
Acct. No.	- NOS CHICANOMICS		80% Sales of Lots Opening/	77184
w.o. <u>E-13143</u>	30		Closing Burial Containers	77181 55 00
BALANCE DUE	I WELL		Handling Fee	77185 60 00
Pre-Need Lot ☐ At Need ☐ On Acct ☐	The last of the la		Recording & Misc. Fees Pre-Need	77183 63033
Pre-need Trust  Cash Check	6	10-1	Trust Sales Tax	9022 60101 78390
AC-212 (Rev. 5-94) /600	ISSUED BY	Kouch	TOTAL PAID	568 85

## WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

		Date:	7-6	. 19/
From: Talsaco Cole	tu-tur 4 50/100	ricon	80 9311 ollars (\$ 443	3,00
In Payment of Q	Derment of Haywood	d Dan	onars (\$	
Lot 75 Grave	Row	Section	Division Block	12
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	20% Sales Care 80% Sales of Lofs Opening/ Closing Burial Containers Handling Fee Recording & Misc, Fees	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77185	2 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 5-94)	BSUED BY ROUL	Pro-Need Trust Sales Tax TOTAL PAID	69033 9022 60101 78390 \$ 443	200

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

Provide 6 Mares City of San Diego

4-7-95 Date

of GHARIA	SIAN	LITTLE	H	
ina Liner		Funeral, date, time	Tuesd 4-11;	12:00 NO
Church, Chapel, Graveside				
All Funeral cars must arrive before will be applied and billed to unders			or an extra charge of	\$ 150 0
War time veteran				
Lot 4813 Grave	Row	Section	Division/Plac	× 10
				1095.0
Grave space & Care Fund				-
Additional spaces and care fund				
Opening/Closing & Setup	************			100 0
Burial Container				11/2 0
Handling Fees				143:00
Flower vases - Marker setting fee				
Recording and filing fee				45.00
Sales taxes	***********			13.30
		To	otal Due	1863,3
	Paid	receipt number	46119	1863, 31
	0		Balance due	28
hereby certify I am the and this is your authority to make that I have the right to make this au	disposition uthorization	n of remains as abo	of the above name ve indicated. I certify a d Mt. Hope Cemetery h	and represent
any liability on account of said auth	TOTI E CE LI COTT	and interment.	0	
any liability on account of said auth hereby authorize the interment in hold under deed.		and interment.	L DEVION	
any liability on account of said auth		and interment.	a Deven	
any liability on account of said auth hereby authorize the interment in hold under deed.	lot I	Signature Signat	LEVEN KELTON AVE MESA, CA 91	942 Zp Code

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	ENT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST	(FAMILY)	100000000000000000000000000000000000000		2. DATE OF BIRTH	3. DATE OF D	
ZAREH		-	GHAF	RIBIAN			18170871916	04/06/19	195° M
SA CITY OF DEATH		-			OUTSIDE CALIF.,		RELATIONSHIP, FULL M		
· El Cajon			San	Diego			Devera, so		
A. TYPED NAME AND A	DDRESS OF CALIFORNIA	A-FUNERAL DIRECTOR	OR PERSON ACTING AS SU		LICENSE NUMBER	593	5 Kelton Ave		
FEATHERIN	GILL MORTUA		Cajon Blvd.	1 70	TUCABLE		Mesa, CA 919		
			go, CA 92115		083	BA. SIGN	ATURE OF APPLICANT—IN	rum taking permit, 8	B. DATE SIGNED
ACKNOWLEDGMENT OF A	Section 103	76 of the Health and Salety Co.	he proposed disposition stated here de, and was authorized gensuark to S	Section 7100 of the Ne	sith and Salety Code.	ND.	abansund	10	4/10/195
PERMIT	BIUNG OF THE CALIFO	JHNIA HEALTH AND SA	WITH PROVI- 9A. AMOUN	IT OF FEE PAID	98. DATE PERMI	T ISSUED	9C. SIGNATURE OF LOC	CAL REGISTRAR	ISSUING PERMIT
AUTHORIZATION OF	AND IS THE AUTHORITY	Y FOR THE DISPOSITION	N SPECIFIED \$7.0	00	Edward Fee	reall			
LOCAL REGISTRAR	The second secon	RIGHT OF DISPOSAL OUTSIDE	OF CALIFORNIA.				<b>&gt;</b>		
TION REQUIRES A NEW	90 ADDRESS OF RE	IN CALIFORNIA	A DATE CONTROL OF THE PARTY OF				FRCT OF DISPOSITION— OTHER DISTRICT IN CAUPOR	NIA	
POSITION		85222, San	Diego	1					
100000000000000000000000000000000000000	CA 92186-	7.00		1					
_	OSITION(S) CHECK AP	PLIGABLE ITEMS					FOR CORC	ONER'S USE	ONLY
A. BURIAL (INCLI	UDES ENTOMBMENT)		E TEMPO	HARY ENVAUL	TMENT				AINS LOCATED A
B. CREMATION			F. DISINTI	ERMENT			Olame and Ad	dress)	
C. DISPOSITION	OF CREMATED REMA	INS OTHER	G. SHIP II	N TO CALIFORN	IA				
D. SCIENTIFIC U	SE		H. TRANS	IT TO OUTSIDE	OF CALIFORNIA	CON			
		DRESS OF CALIFORN	NA CEMETERY	-	118 DATE BURIE	ED   110	SIGNATURE OF PERS	ON IN CHARGE	OF BURIAL
BURIAL	Mt. Hope	Cemetery		1.	41.	1	01,1	-11	
	San Diego	, CA			711195	TID	XIIn.	#	
- EM	12A. NAME AND AD	DRESS OF CALIFORN	NA CREMATORY		128. DATE CREMA	TED 120	SIGNATURE OF PERS	ON IN CHARGE	OF CREMATION
CREMATION		wol	el sealed			1	0		
		14.5.48	or seconder	1		-			
	13A. NAME AND AD	DRESS OF CALIFORN	NA FACILITY RECEIVING	REMAINS	138. DATE RECE	IVED 130	. SIGNATURE OF PERS	ON IN CHARGE	OF FACILITY
SCIENTIFIC				1		1			
USE						1			
	14A. NAME AND AD	DRESS IN RECEIVING	STATE OR COUNTRY W	HERE	14B. DATE SHIPP	ED 140	. ADDRESS AND SIGNA	TURE OF PERS	ON IN CHARGE
TRANSIT	REMAINS OR C	REMATED REMAINS	ARE TO BE SHIPPED	1			OF PLACING WITH TH	E CARRIER	
1						1			
SCATTERING AT SEA	15A. ADDRESS. NEAR	EST POINT ON SHORE	LINE, OR OTHER DESCRIP	TION SUF-	158. DATE OF	150	SIGNATURE OF PERS	ON IN 150 I	LICENSE HUMBER
OR	FICIENT TO IDEN	NTIFY FINAL PLACE AN	O CA DISTRICT OF DISPO	SITION	DISPOSITION		CHARGE OF DISPOSI	DON I C	OF CREMATED HE
DISPOSITION OTHER THAN IN A CEMETERY			1	i		1.			- F APPLICABLE
The state of the s								- 4	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



4-7-

# WHITE ...... TO GUSTOMER CANARY ...... CEMETERY PINK ...... AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

1	Paul Dev	IRO Address	20	35 Koldo	. 1	fur. s	DIAN
OIII.	lwesty	Three Address	70	lens	Oollars (\$	23.	70 ,
full	Payment of	custalla	hor of	Slower	Ca	47	
480	93 Grav	е	Row	Section		Division Block	10
oice No		NOT VALID FOR PUR	POSE STATED UNLESS STA	MPED CREDIT 20% Sales Care	67007 77184		1
t. No.		- Committee of the Comm		80% Sales of Lots Opening/	77184 ———		
	E- 12/4	4		Closing Burial	77181	10	00
ANCE DUE_	8			Containers Handling Fee	77182 ——— 100 77185 ———	13	00
				Recording & Misc. Fees	77183		-
Need Lot	At Need On Acc			Trust Sales Tax	63033 9022 60101		70
212 (Rev. 5-94)	7-10-10-10-10-10-10-10-10-10-10-10-10-10-	ISSUED BY	! Baloble	TOTAL PAID	78390	23	70

CITY OF SAN DIEGO, CALIFORNIA

46104



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

DEVERD

6/1021810H

Grave

On Acct

Check

Payment of

12/4/4

MOUNT HOPE CEMETERY 527-3400

HREE

Row.

NOT VALID FOR PURPOSE STATED UNLESS STAMPE "PAID" IN THIS SPACE

V.	Date:	4.		9 04
u	1 20/100 D	ollars (\$	1863	30 ,
Se	ction		Division Block	10
	CREDIT 20% Sales Care	67007 77184 —		30
1	80% Sales of Lots	100	8.76	00
ł	Opening/ Closing	100 77181 —	375	00
1	Burisi Containers	100 77182 —	190	00
ı	Handling Fee	77185 —	145	00
1	Recording & Misc. Fess	100 77163 —	45	00
	Pre-Need Trust	63033 9022 —		100.00
1	Sales Tax	60101 78399 —	13	30
	TOTAL PAID	*	1962	30

AC-212 (Rev. 5-94)

BALANCE DUE

Pre-Need Lot At Need

Pre-need Trust Cash Cash

Invoice No. Acct. No. \_

W.O.

CHERMON

ISSUED BY V Balotsky

#### MT. HOPE CEMETERY

### INTERMENT, ORDER

City of San Diego

Date 4-7-95

or TANNIHILL, A	LVIN	J. W.	13 /pen 1011:00 1
ina T. S. Vault	Funeral, date, ti	me word 4	3 HAM
Church, Chapel, Graveside Chapel - Q	raruida	Park Cr	Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work	day or an extra ch	narge of \$ 150.00
will be applied and billed to undersigned.	Iraa	y W.	Ence fee
War time veteran YES .			
Lot 22 Grave 5 Row_	Section	_15_ Divis	ion/Block_7
Grave space & Care Fund C -	5264	4	
Additional spaces and care fund	2000	Stall	<u> </u>
Opening/Closing & Setup	as Wi	200	375.00
Burial Container	A rod	والمال	250.00
Handling Fees	1000	A -	185.00
Flower vases - Marker setting fee	TO SE	y ms	
Recording and filing fee	de	ME	45.00
Sales taxes	auto at	00	_17.5
M	arter 1	Total Due	872,5
Paid	receipt number	B-4610	6 218.0
16	. ,	Markelland	e due 1684
I hereby certify I am the	N		ove named decedent
and this is your authority to make disposition that I have the right to make this authorization	n and I agree to	above indicated. I hold Mt. Hope Cer	netery harmless from
any liability on account of said authorization	and interment.		1 1
I hereby authorize the interment in lot I	10	xacy w	. Juna pur
hold under deed.	7 6	333 Co,	llege GLOUE
Signature of recorded holder of deed	X O	B. CAL	if 92-115
/	to 5	82-66	7/ Zip Code
	Telephone		0.00
10111	4.00049.0004	2526	97
<b>-</b> 12145	Invoice #	00000	

.1.511 EA

PY-1012 (11-89)

### w.o. # E-12145

### NOTE

\$654,50	San Diego, California	7 1970
3751 Market Street, San Diego, CA 921		pay San Diego City Treasurer, or order at  ###################################
at the rate of 12 percent per annum, pa	ayable on demand.	
<ul> <li>accrue at the rate indicated above. Prin will be liable and consents to renewals maturity, and waives presentment, der person who signs this note agrees that</li> </ul>	cipal and interest are payable in lawfu s, replacements and extensions of tim mand and protest and the right to ass at recourse may be held against his/h	the principal. Interest after maturity will I money of the United States. The maker be for payment hereof before, at or after ert any statute of limitations. A married er separate property for any obligation romise(s) to pay such sum as the Court
PRINT NAME X 6333 Co//8	98 GROUE WAY	Breey W. Jane fue.
CALIFORNIA DRIVER LICENSE NUMBER	30548772 ss	sn# x 562-76-5451

From: Tony Shanley
To: Dawn Jensen
Date: 4/9/98 2:07pm
Subject: Tannihill v. City

Dawn:

Thanks for checking with Mt. Hope on this.

In that the plot in which Mr. Tannihill's father is interred has been paid for, I do not think it is appropriate to pursue the balance on Mr. Tannihill' account. Mt. Hope has confirmed that the amount in question was for interment. services only--and it is uncontroverted that those services were improperly performed.

I do not think he owes us anything.

Tony

LESLIE E. DEVANEY
ANITA M. NOONE
LESLIE J. GIRARD
SUSAN M. HEATH
GAEL B. STRACK
ASSISTANT CITY ATTORNEYS

Anthony J. Shanley Senior Deputy City Attorney OFFICE OF

THE CITY ATTORNEY
CITY OF SAN DIEGO

Casey Gwinn

CIVIL DIVISION
1200 THIRD AVENUE, SUITE 1200
SAN DIEGO, CALIFORNIA 92101-4184
TELEPHONE (619) 533-5800
FAX (619) 533-5847

April 13, 1998

Dan Zeidman, Esq. Law Offices of Dan Zeidman 260 East Chase Avenue, Suite 201 El Cajon, California 92022-1238

Dear Mr. Zeidman:

Tracy Tannihill v. City of San Diego, et al San Diego Superior Court Case No. EC012657

Thank you for your letter of March 26 concerning the above-captioned matter.

I have discussed the status of Mr. Tannihill's account with City personnel at Mt. Hope Cemetery and the Treasurer's Office. Charges for the interment of Mr. Tannihill's father's remains will be canceled.

However, you should be aware of the following. At the time Mr. Tannihill arranged for his father's burial, he apparently agreed to pay the City for the placement of a marker to be provided by the Veteran's Administration. The marker has apparently been received by the cemetery, but will not be placed until the marker placement fee has been received. I am told Mr. Tannihill has been advised of this situation.

Sincerely,

CASEY GWINN, City Attorney

Rv

Senior Deputy City Attorney

AJS:hk:Civ ccs: Dawn Jensen JoAnn Waits

= 12145

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

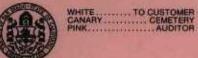
1A, NAME OF DECEDENT—FIRST (GIVEN) 18. MIDDLE ALVIN JOSEPH		IC. LAST (FAMILY)	TANNIHILL		2. DATE OF BIRTH 3. DATE OF DEATH 4. SE		
		TANNIHILL			10th/03/1959	101	
SPRING 'VA	LLEY		58 COUNTY OF DEAT	5B. COUNTY OF DEATH—OUTSIDE CALIF., 6. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CO			OP CODE
Delivery Arterior	DRESS OF CALIFORNIA		PERSON ACTING AS SUCH 78. CAI	F APPLICABLE	333 COLLEG G AN DIEGO, CA	ROVE WAY#E	19
Charles of the Control of the Contro	ERSITY AV	E. SAN DIE	GO . CA 92104. FE repeated dispussion states heren is one of the and was authorized pursuant to Section 7160 of the	dispositions authorized by	SIGNATURE OF APPLICANT P		E SIGNED
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIFI AND IS THE AUTHORIT IN THIS PERMIT	ED IN ACCORDANCE WITH DRINIA HEALTH AND SAFE Y FOR THE DISPOSITION S DESKIT OF DISPOSAL OUTSIDE OF	H PROVI- TY CODE PECIFIED 9A. AMOUNT OF FEE P	THE RESERVE AND ADDRESS OF THE PARTY OF THE	AND ADDRESS OF THE PARTY OF THE		IG PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW ESSENT TO SHOW FINAL POSITION.	PO BOX 8	AND THE WAY WAY			DISTRICT OF DISPOSITION— N ANOTHER DISTRICT BY CAUFO	RNIA	
THORIZED DISPO					FOR COR	ONER'S USE ONL	Y
B. CREMATION		NINS OTHER	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	DRNIA	I. DISPOSITION (Name and A	PENDING-REMAINS Li	OCATED AT
9URIAL		CEMETERY CO, CA	CEMETERY	118. DATE BURIED	110. SIGNATURE OF PER	SON IN CHARGE OF BI	URIAL
GREMATION	12A. NAME AND AD	tal n	m sealer	12B. DATÉ CREMATED	12G. SIGNATURE OF PERS	SON IN CHARGE OF CR	EMATION
SCIENTIFIC USE			FACILITY RECEIVING REMAINS	138. DATE RECEIVED	13C. SIGNATURE OF PER	SON IN CHARGE OF F	ACILITY
TRANSIT		DRESS IN RECEIVING S CREMATED REMAINS AR	TATE OR COUNTRY WHERE E TO BE SHIPPED	14B. DATE SHIPPED	14C. ADDRESS AND SIGN OF PLACING WITH T		CHARGE
SCATTERING AT-SEA OR DISPOSITION OTHER THAN IN A CÉMETERY			IE, OR OTHER DESCRIPTION SUF- CA DISTRICT OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PER CHARGE OF DISPOS	ITION   OF CREA	NATED RE- DISPOSER

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



CITY OF SAN DIEGO, CALIFORNIA

46106



MOUNT HOPE CEMETERY 527-3400

		Date	e: H	1	19 95
From TRACY W. TANNI	1114 Address: 1433	3 Callege and	ME # H	9. SD	9241
Two hundred is	stem & no/10	000	Dollars (	· 218.0	0)
n Payment of	terrent of a	Louin To	mishi	10	
	9				
ot 22 Grave	15 B	owSection_	15	Division Block	17
nvoice No.	NOT VALID FOR PURPOSE STATE	DUNLESSSTAMPED CREDIT	T 87007		
Acct. No.	"PAID" IN THIS SPACE	80% S	Sales Care 77184 - Sales 100 rts 77184 -		
No. E-12145	A CONTRACTOR	Open Closi	ning/ 100 ing 77181 -	218	00
Mail		Buria	ainers 77182 -		
BALANCE DUE #654.50			100 Wing Fee 77195 ording & 100		-
Pre-Need Lot At Need On Acct		Misc. Pre-N	Fees 77183 - 63033		-
Pre-need Trust  Cash Check	00	Trust Sales	9022 Tax 60101		
	ISSUED BY	406	78390 PAID \$	2.01	00

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date

01	1 PAOD	ORFF	MARIO		
ina	Vandthiner	F	funeral, date, time		
Church, Chape					Mortuary
All Funeral cars	s must arrive b	efore 3:30 p.m.	of regular work day or	an extra charge of \$	
will be applied	and billed to u	ndersigned.			
War time vetera	an	_			
Lot	Grave	Row	Section	Division/Block	
Grave space &	Care Fund				
Additional space	es and care fu	and			
Burial Containe	er				
Flower vases -	Marker setting	g fee	/ x		
Recording and	filing fee	1			1
Sales taxes		( )	1		
		1	) Total	Due	
	1	\ Paid n	eceipt number		1
		1		Balance due	
hereby certify	I am the	-		of the above name	
and this is your that I have the	r authority to n	nake disposition his authorization	of remains as above and I agree to hold M	indicated. I certify an	represen
any liability on	account of said	d authorization a	nd interment.		
	due the leature	and in last			
I hereby author hold under dee		entinioti	Signature		
			Address		
Signature of recorded t	holder of deed		Oily		Zip Code
			Telephone		
	100 5 575	(2)			
	101	116	Invoice #		
Work Order #	$E^{121}$	146	Invoice #		

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4-7-95

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upana Mortuary
charge of \$
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136.00
165.0
50.0
45.0
386.0
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bove named deceder
I certify and represe emetery harmless from
Zip Co
and the state of t
52688

Tax " core 3'/2" acros

### CITY OF SAN DIRGO, CALIFORNIA

# ACCOUNTS RECEIVABLE AUXILIARY INVOICE - PAYMENT FORM

	CUSTOMEN ACCOUNT NO. 000952
PA	AYMENT DATA
PAYMENT P.M. RECEIVED DATE _	9-6-1995
PAID BY (CIRCLE ONE)	CA CERT NF
PAYMENT REFERENCE NUMBER	04-883710
AMOUNT FAID 386.00	THEASURER VALIDATION
CUS	TOMER DATA
CUSTOMER ACCOUNT NAME  PAYOR NAME STREET THAN BUSTON  CUSTOMER (PAYOR) ADDRESS  E = 12147	
неманка	**
-	* *

TH-1501 (2-02)

INV. No. <u>a5a68</u>

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

	US	BE BLACK INK ONLY-MA	KE NO ERASURES, V	VHITEOUTS OR OT	HER ALTERATIONS	POUND
IA NAME OF DECEDE	ENT-FIRST (GIVEN)	IB. MIDDLE	ORTIZ-OBE	EGON	2. DATE OF BERTH MONTH, DAY, YEAR 08/15/1975	3. DATE OF DEATH 4. SEX MONTH, DAY, YEAR 05/19/1994 M
SAN DIEGO	0	Harry II	5B. COUNTY OF DEAT ENTER STATE SAN D		NAME, RELATIONSHIP, FULL MA OF INFORMANT PERFOCE BARR-DEPE	JUNE ADDRESS AND ZIP CODE
7A. TYPED NAME AND AL GUADALUPAN	DDRESS OF CALIFORNIA A MEM. CHAP	A-FUNERAL DIRECTOR OR PERSO PEL & MORT. SAN DIEGO, CA. 92	ON ACTING AS SUCH 78. CA	LIF LICENSE NUMBER	3201-A RUFFIN RD. SAN DIEGO, CA. 92	,
ACKNOWLEDGMENT OF A	anuceaux   I hereby ac	cknowledge as applicant that the proposal ( 376 of the Health and Safety Code, and was as	Seponthon stated berein is one of the	e dispositions authorized by	A SIGNATURE OF APPLICANT—FIL	- 04/12/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR  ANY CHANGE IN DISPOSITION REQUIRES A NEW PERMIT TO SHOW FINAL POSITION.	SIONS OF THE CALIFORNIA AND IS THE AUTHORITY IN THIS PERMIT, NOTE THE POWER CALS NO.  9D. ADDRESS OF RE  LEADY OCCURRE	THE DESCRIPTION OF THE DISPOSITION OF THE DISPOSITION SPECIFIES OF THE DISPOSITION SPECIFIES OF THE DISPOSITION OF THE DISPOSIT	\$ 7.00	04/12/199 ORESS OF REGISTRAR C	9505012	al registrar issuing permit
A. BURIAL ONCLU			E TEMPORARY ENV.  F DISINTERMENT  G. SHIP IN TO CALIFI  H. TRANSIT TO OUTS	ORNIA		PENDING REMAINS LOCATED AT dress)
URIAL	MT. HOME	DDHESS OF CALIFORNIA CEME CEMETERY, 3751 M		118. DATE BURIED	11C SIGNATURE OF PERSI	ON IN CHARGE OF BURIAL
CREMATION	12A. NAME AND AD	DDRESS OF CALIFORNIA CREM	ATORY	128. DATE CREMATE	D 12C SGNATURE OF PERSO	ON IN CHARGE OF CREMATION
SCIENTIFIC	13A. NAME AND AD	DDRESS OF CALIFORNIA FACILI	TY RECEIVING REMAINS	13B. DATE RECEIVE	ED 13C. SIGNATURE OF PERS	ON IN CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING STATE C CREMATED REMAINS ARE TO B		14B. DATE SHIPPEL	OF PLACING WITH TH	TURE OF PERSON IN CHARGE E CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	FICIENT TO IDE	REST POINT ON SHORELINE, OR NTIFY FINAL PLACE AND CA DIS	OTHER DESCRIPTION SUF- TRICT OF DISPOSITION	15B. DATE OF DISPOSITION	16C SIGNATURE OF PERSO CHARGE OF DISPOSIT	



#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4-7-95

You are hereby authorized and instructed, so or Juan Carlos made			
ina Liner			
Vaulbuner	:Gu	4	
All Funeral cars must arrive before 3:30 p.m.			
will be applied and billed to undersigned			
War time veteran			
MANAGEMENT OF THE PARTY OF THE	Section	Division/	12
Grave space & Care Fund			
Additional spaces and care fund			4 ///
Opening/Closing & Setup	***************************************		- 103,0°
Burial Container			
Handling Fees			
Flower vases - Marker setting fee			
Recording and filing fee			45.00
Sales taxes			40/
Lecco Barr	Total	al Due	386.0
n-ia	receipt number		
emicide assi)		Balance due	
I hereby certify I am the			amed decedent
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization.	n and I agree to hold I	indicated, I certif Vt. Hope Cemeter	y and represent y harmless from
I hereby authorize the interment in lot I hold under deed.	Signature		
	Address		
Signature of recorded holder of deed	City		Zip Code
	Telephone		-
10110	Invoice #	3526	68
Work Order # E 12148		20096	5 5
WORK CHOOL # Inc	Acct.#		100

#### CITY OF EAN DIEGO, CALIFORNIA

## ACCOUNTS RECEIVABLE AUXILIARY INVOICE - PAYMENT FORM

		CI	JETOMER AC	COUNT NO.	00095
	YME	IT DA	та		
PAYMENT P.M. RECEIVED DATE	9-	6-19	95	-	
PAID BY (CINCLE ONE)!	CA		<u>/ eн/</u>	NF	
PAYMENT HEFERENCE NUMBER		04-	-883710		
AMOUNT PAID 386.00			LUF AGU	LEH VALID	
" cus	IOME	R DAT		TER VALID	ATION
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HEMANKS	4.5%	"	**	•	_
4				*	

INV. NO. 352668

TH-1861 (2-82)

E12148

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

JUAN	NT-FIRST (GIVEN)	18. MIDDLE CARLOS	IC. LAST (FAMILY)			TE OF DEATH 4. SEX
SAN DIEGO	)	, Galdio	58. COUNTY OF DEAT	H-OUTSIDE CALIF., 6.	NAME, RELATIONSHIP, FULL MAILING /	
GUADALUP	IAL AVE.,	BAN DIEGO, C	A. 92102 FD	-1425	GUARDIAN, 5201-A RI SAN DIEGO, CA. 9212 A GROMATURE OF APPLICANT - PURSUI LINE	23
ACKNOWLEDGMENT OF A	TLEANI Section 10	376 of the Houlth and Salety Code,	proposed disposition stated hereig is one of the and was authorized pursuant to Section 7100 of t		Van Nost	04/11/1995
-	SIONS OF THE CALIF AND IS THE AUTHORIT IN THE PERMIT MOTE THE FRANT GIVES N FID. ADDRESS OF RI F DEATH OCCURRE	JED IN ACCORDANCE WE CORNIA HEALTH AND SAF TO FOR THE DISPOSITION.  TO IDDIT OF DISPOSAL OUTSIDE OF EGISTRAR OF DISTRICT	CALFORMA. S 7.00  CALFORMA. S 7.00  GREATH— SE. AD	04/12/199 DRESS OF REGISTRAR O	950 BENEFIL OF LOCAL REPOSITION— H ANOTHER DISTRICT IN CALIFORNIA	GISTRAR ISSUING PERMIT
POSITION.	SAN DIEGO,	CA. 92186-52				
B. CREMATION	OF CREMATED REM		E. TEMPORARY ENV.  F. DISINTERMENT  G. SHIP IN TO CALIF.  H. TRANSIT TO OUTS	DANIA	FOR CORONER*  L DISPOSITION PENDIN (Name and Address)	G-REMAINS LOCATED A
BURIAL	Mr. HOPE	CEMETERY, 3 CA. 92102	751 MARKET ST.	118. DATE BURIED	11C. SIGNATURE OF PERSON IN	CHARGE OF BURIAL
CREMATION	12A. NAME AND A	ODRESS OF CALIFORNIA	A CREMATORY	12B. DATE CREMATE	12C/SIGNATURE OF PERSON IN C	CHARGE OF CREMATION
SCIENTIFIC	13A. NAME AND AL	DDRESS OF CALIFORNIA	A FACILITY RECEIVING REMAINS	13B. DATE RECEIVE	D 13C. SIGNATURE OF PERSON IN	CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING S CREMATED REMAINS A	STATE OR COUNTRY WHERE RE TO BE SHIPPED	148. DATE SHIPPED	14C, ADDRESS AND SIGNATURE OF PLACING WITH THE CAR	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY			INE, OR OTHER DESCRIPTION SUF- CA DISTRICT OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	15D. LICENSE NUMBER OF CREMATED REMAINS DISPOSER —IF APPLICABLE

## MT. HOPE CEMETERY

City of San Diego

Date 4-7-1995

of1			MART		
na	Liner		Funeral, date, time	Wed 4-12;	10:00
Church, Chape	CONTRACTOR OF THE PARTY OF THE	Churco	h+65	MAYER	Mortuary
All Funeral can	s must arrive be	fore 3:30 p.m.	of regular work day	or an extra charge o	15 /50 0
will be applied	and billed to un	dersioned s	Maisa	Zabelin	skava
	an NO				
A CONTRACTOR OF THE PARTY OF TH					10
ot 7/12	Grave	Flow	Section	Division/8to	
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Additional space	ces and care fur	nd			
Opening/Closir	ng & Setup				375.0
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landling Fees		******			145 00
Recording and	filing fee				45.0
Sales taxes					13.30
			Te	otal Due	1863.3
		Daid	receipt number	46/19	1863. 3
		Palo	receipt number		100
	v	Dan	Alan	Balance due	
hereby certify and this is you	I am the r authority to m	ake disposition	of remains as abo	of the above na ve indicated, I certify d Mt. Hope Cemetery	med deceden and represen
hat I have the inv fiability on	right to make th account of said	is authorization	mand I agree to hole and interment.	d Mt. Hope Cemetery	harmless from
				120,7	
	rize the intermer	nt in lot I	Simature	Jules	
old under dee	d.		x 41	626 OH (	ostr.
ignature of recorded	books of dead		X SOM	Diego	92116
ignature of recorded	NOOM OF SPEED		City C	62-8911	Zip Cod
			Telephone	J. ONR	
		AND THE PARTY.			
	191	40	Invoice #		
Vork Order #	$E^{121}$	49	Invoice #		

E12149

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

	NAME OF DECEDE	NT-FIRST (GIVEN)	Gregoryevich	Tuniyants			74271900		OF DEATH	4. SEX
5/	CITY OF DEATH		Gregoryevich	SB. COUNTY OF DEAT		NAME, REL	ATIONSHP, FULL ANT abelinska	MAILING AD	DRESS AND 7	-
		ED NAME AND ADDRESS OF CALIFORNIA—FUNERAL DIRECTOR OR PERSON ACTING AS SUCH 7EL		ON ACTING AS SUCH TE. CA	LIF. LICENSE NUMBER 4	626 Oh an Die	io St. #1 go, CA 92	15 2116		TE SIGNED
•	ACKNOWLEDGMENT OF A		acknowledge as applicant that the proposed 1376 of the Realth and Safety Code, and was a		doposition authorized by	10	1		D4/10	/1995
	PERMIT UTHORIZATION OF OCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	JED IN ACCORDANCE WITH PRO- FORMIA HEALTH AND SAFETY CO TY FOR THE DISPOSITION SPECIFI TO BEHT OF DISPOSAL OUTSIDE OF CALFORN	\$7.00	04/10/199 James Hale	5 95	SIGNATURE OF LO	OCAL REGI	STRAR ISSUI	IG PERMIT
A		P.O. BOX 85	EGISTRAR OF DISTRICT OF DE	ATH- DE AC	DRESS OF REGISTRAR O	OF DISTRICT			126	
	THORIZED DISP	OSITION(S) CHECK A				- 1	FOR CO	RONER'S	USE ONL	v
	Samuel and the same				A STATE OF THE STA		AP IV EXELECTION	TO CHEST !		
	A BURIAL (INCL)	OF CREMATED REMEMETERY SE	DDRESS OF CALIFORNIA CEME		ORNIA	i 110. Si	I DISPOSITION (Name and A	Address)		OGATED A
BLE ITEMS	A. BURIAL (INCLU- B. CREMATION C. DISPOSITION THAN IN A CI D. SCIENTIFIC US	OF CREMATED REMEMETERY SEE	Cometery set St., San Dieconness of California Crea	F. DISINTERMENT G. SHIP IN TO CALIF H. TRANSIT TO OUTS ETERY O, CA	ORNIA SIDE OF CALIFORNIA	1	- (Name and	Address) RSON IN O	HARGE OF E	OCATED A
APPLICABLE ITEMS	A. BURIAL (INCLUMENTAL) B. CREMATION C. DISPOSITION THAN IN A CT D. SCIENTIFIC US BURIAL	OF CREMATED REMEMETERY SE  11A. NAME AND ALME. HODE  3751 Mark	DDRESS OF CALIFORNIA CEME Cemetery set St., San Dies	F. DISINTERMENT G. SHIP IN TO CALIF H. TRANSIT TO OUT: ETERY GO, CA MATORY SEG RES	ORNIA SIDE OF CALIFORNIA 118, OATE BURIED	D 120. SI	GNATURE OF PER	Address) RSON IN O	HARIGE OF E	OCATED A
OMPLETE APPLICABLE ITEMS	A. BURIAL (INCLU- B. CREMATION C. DISPOSITION THAN IN A C. D. SCIENTIFIC US BURIAL CREMATION SCIENTIFIC	OF CREMATED REMEMETRY SE  11A NAME AND AI ME. HODE  3751 Mark  12A NAME AND AI  13A NAME AND AI	cenetery set St., San Dies	F. DISINTERMENT G. SHIP IN TO CALIF H. TRANSIT TO OUTS ETERY O, CA MATORY SEC LES  LITY RECEIVING REMAINS OR COUNTRY WHERE	OFINIA SIDE OF CALIFORNIA 118, OATE BURIED 128, DATE CREMATE	ED 13C, SI	GNATURE OF PER	RSON IN CH	HARGE OF CH HARGE OF F	URIAL EMATION

CITY OF SAN DIEGO, CALIFORNIA

46119



WHITE......TO CUSTOMER CANARY CEMETERY PINK.....AUDITOR

From: ZABELINSKAYA , M.	Address.	4626 Ohi	0 St AP	7 15	5.0 (	9 95 71 92
in Jule Payment of	end sixty	Those	Tunt VA		1863.	
ot 47/2 Grave	8- 1-	RowSe	ection		Division Block	10
nvoice No.	NOTVALID FOR PURPOSE ST	ATED UNLESS STAMPED	CREDIT 20% Sales Core	67007 77184	219	00
	"PAID" IN THIS SPACE	The state of the s	80% Sales of Lots	100	876	00
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10		10000	Burial Containers	77182	190	00
ALANGE DUE	a Translive		Handling Fee	77185	145	00
	A LONG	194 140 S	Recording &	77183	45	00
re-Need Lot  At Need  On Acct		100	Pre-Need Trust	63033	10001	
re-need Trust D Cash D Check D		010	Sales Tax	60101 78390	13	30
IC-212 (Rev. 5-94)	ISSUED BY V. POLL	lobly	TOTAL PAID	•	1863	30

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 4-10-45

Ch, Chapel, Graveside DeC	_ Funeral, date, time .		TOUT - FT
ch, Chapel, Graveside Deci		Acres	
		The second second	
uneral cars must arrive before 3:30 p.m	n, of regular work day	or an extra charge of	5
e applied and billed to undersigned			
lme veteran			13
17 Grave 6 Row_	Section	Division/Block	k_12
e space & Care Fund			126.00
ional spaces and care fund			
ning/Closing & Setup			
l Container	Lines		50.00
ling Fees			
er vases - Marker setting fee			
rding and filing fee			
s taxes			
		tal Due	386,00
Paid	d receipt number		
		Balance due _	
by certify I am the	n of complex so obse	of the above name	ned decedent
have the right to make this authorization	on and I agree to hold	Mt. Hope Cemetery h	armless from
ability on account of said authorization	and interment.		
by authorize the interment in lot i			
under deed.	Signature		
	Address		
re of recorded holder of deed	City	-	Zip Code
	Telephone		
		The second second	- 4
- 12150	Invoice #	25968	5

BERRESS PAI KEY FOR NEXT SCREEN INVO:	CE TROUIRY			PG
INVOICE: 252686				
INV DATE: 04/14/95 INV TYPE	GE TYPE	CHG: TC	TREAS-REI	FERRAL! Y
DUE DATE: 05/14/95 NOTICES				
	DMER DATA			
ACCT: 000952 NAME: COUNTY OF SAI			SHORT NAME!	COUNTYOFS
ADDRESS:	1 (2000)		AND THE PARTY OF T	The supplier of the property of the supplier o
1) PUBLIC ADMINISTRATOR	2) 57	201 A RUFFIN	ROAD	
3)	, 4)			
CITY: SAN DIEGO ST	CA ZIP:	92123	COUNTRY	
BILLING DEPT: 072 CONTACT				Section 1
REFER NO. E-12150 . PHONE	619 527 340	00	REPARED BY:	VEB
DESCRIPTION OF CHA	ROE	OMOL	INT	
DOHN DOE PA\$1178296 SET	CONTRACTOR OF THE PARTY OF THE			
LOT17 GR6 SEC1 DIV12	Market Market	- 1	26.00	
OPENING/CLOSING			.65.00	
BURIAL CONTAINER	CARL STREET		50.00	Miles Eller
RECORDING FEES			45.00	
	STATE OF STATE OF			NE STATE
A STATE OF THE PARTY OF THE PAR				
	TAL DUE:		888.00	-12-11

#### CITY OF SAN DIRGO, CALIFORNIA

## ACCOUNTS RECEIVABLE AUXILIARY INVOICE - PAYMENT FORM

		CUSTOMER A	COUNT NO.	00093
	PAYMEN	T DATA		
PAYMENT F.M. HEGRIVED DATE		9/13/1995	-	100
PAID BY [CINCLE ONE]:	CA	<b>6</b> 8	NF	2,1
PAYMENT REFERENCE NUMBE	" —	04-902871	-	
				- 2
AMOUNT PAID 386.00	-			
		THEAST	HER VALID	HOITA
. с	USTOMER	DATA		
CUSTOMER ACCOUNT NAME	COUNTY	OF SAN DIE	GO	197
PAYOR NAME OTHER THAN OU	TOMEN A	(GEBUNTHAME)		
CUSTOMEN (PAYON) ADDRESS .	PUBLIC	ADMINISTRA	TOR	
	5201	A RUFFIN RD		
E-12150	SAN D	IEGO CA 921	23	
	***			
HEMANNS				
	21			St 14

TH-1861 (2-82)

INV. No. 252686

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

John	ENT—FIRST (GIVEN)   18. MIDDLE	IC. LAST (FAMILY)	2. DATE OF BIRTH S. DATE OF DEATH 4. SEX
5A. CITY OF DEATH POWAY	To The Property of the London	58. COUNTY OF DEATH—OUTSIDE CALIF.	B. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZP CODE POST MORNAND MINISTRATOR—L. James
	DORESS OF CALIFORNIA—FUNERAL DIRECTOR OR PERSO DATY, 2859 Adams Ave., San I	OF ARRIVED AND AND AND	SAN Diego, CA 92123
ACHNOWLEDGMENT OF A		aposition stated become in one of the dispusitions authorized borouse nursuant to Section 7100 of the Health and Salety Code.	" May 11/1995
93-2538 AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIES IN THIS PERMIT. INCIT. THE PERMIT GRES NO MOST OF DEPOSAL OUTSIDE OF CALEFORN	04/1	HIM ISSUED 9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW TO SHOW FINAL POSITION.	90. ADDRESS OF REGISTRAR OF DISTRICT OF DEA IF DEATH OCCURRED IN CALIFORNIA P.O. BOX 85222 San Diego, CA 92186-5222		RAR OF DISTRICT OF DISPOSITION— OCCUR IN ANOTHER DISTRICT IN CALIFORNIA
TO HORIZED DISE	OSITION(S) CHECK APPLICABLE ITEMS		FOR CORONER'S USE ONLY
B. CREMATION		E TEMPORARY ENVAULTMENT  F. DISINTERMENT  G. SHIP IN TO CALIFORNIA  H. TRANSIT TO OUTSIDE OF CALIFORNIA	I. DISPOSITION PENDING—REMAINS LOCATED AT (Name and Address)
BURIAL	Mt. Hope Cemetery 3751 Market St., San Diego	10/1	IRIED , 11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL
CREMATION	12A. NAME AND ADDRESS OF CALIFORNIA CREMA	YORY 128. DATE CRE	MATED 120. SANNATURE OF PERSON IN CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY	TY RECEIVING REMAINS 13B. DATE RE	CEIVED 13C, SIGNATURE OF PERSON IN CHARGE OF FACILITY
TRANSIT	14A NAME AND ADDRESS IN RECEIVING STATE O REMAINS OR CREMATED REMAINS ARE TO B		IPPED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	FICIENT TO IDENTIFY FINAL PLACE AND CA DIST		



#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4-10-95

or Doe, John	94-1505 DA# 1178334
na Linea	Funeral, date, time Wed 4-12; 1:00
Church, Chapel, Graveside Deliver	ry ouly: Wayer Mortuary
All Funeral cars must arrive before 3:30 p.m	n. of regular work day or an extra charge of \$
will be applied and billed to undersigned	
War time veteran	
lot 13 Grave 5 Bow	Section   Division/Block 12
Grave space & Care Fund	
Additional spaces and care fund	
	165.00
Burial Container	Liuez 50.00
Handling Fees	
Flower vases - Marker setting fee	
Recording and filing fee	45. a
	aid
Color Color Color Color	Total Due
Paid	d receipt number
	Balance due
I hereby certify I am the	of the above named deceden
and this is your authority to make disposition	on of remains as above indicated. I certify and represent on and I agree to hold Mt. Hope Cemetery harmless from
I hereby authorize the interment in lot I hold under deed.	Signature
	Address
Signature of recorded holder of deed	Cny Zip God
signature of recorded noticer of deed	
segnature of recursion notices of owner	Telephone
	Telephone OFAL DI
- 12151	Telephone Invoice # 252687

0



#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	18. MIDDLE	IC. LAST (FAMILY)			TE OF DEATH 4. SEX
Delzura			58. COUNTY OF DEAT	H-OUTSIDE CALF	B. NAME, RELATIONSHIP, FULL MAILING	ADDRESS AND ZIP CODE
		Adam Ave., S	an Diego, CA	24 CABLE	5201-A Ruffin Rd. San Diego, CA 92123 BA SIGNADURE OF APPLICANT—POPULA	
ACKNOWLEDGMENT OF A			propused disposition stated herein is one of the and was authorized pursuant to Section 7100 of th	dispositions authorized by	Tand Il	D4/11/1995
94-1505 AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	JED IN ACCORDANCE WIT FORMA HEALTH AND SAFE TY FOR THE DISPOSITION OF INTEREST OF DISPOSAL OUTSIDE OF	SPECIFIED \$7.00	0 4 / 1 2 /	1995 A	GISTRAR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL SPOSITION.	P.O.BOX 86	EGISTRAR OF DISTRICT ID IN CALIFORNIA 1222 CA 92188-52	, ,		OF DISTRICT OF DISPOSITION— E IN ANOTHER DISTRICT IN CALIFORNIA	
THORIZED DISP	DEITYON(S) CHECK A				FOR CORONER	'S USE ONLY
B. CREMATION	SE	DORESS OF CALIFORNIA	E. TEMPORARY ENV.  F. DISINTERMENT  G. SHIP IN TO CALIFI  H. TRANSIT TO OUTS	DRNIA	(Name and Address)	
BURIAL	Mt. Hope		CORPORATO CALL	4/12/95	111C. SIGNATURE OF PERSON IN	CHANGE OF BURIAL
CREMATION	12A, NAME AND AL	DORESS OF CALIFORNIA	CREMATORY	1 128. DATE CREMATI	ED 12C, SIGNATURE OF PERSON IN	CHARGE OF CREMATION
SCIENTIFIC	13A. NAME AND AL	DDRESS OF CALIFORNIA	FACILITY RECEIVING REMAINS	138. DATE RECEIV	ED 19C. SIGNATURE OF PERSON IN	CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING S CREMATED REMAINS AR	STATE OR COUNTRY WHERE RE TO BE SHIPPED	148. DATE SHIPPE	D 14C. ADDRESS AND SIGNATURE OF PLACING WITH THE CAP	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY			NE, OR OTHER DESCRIPTION SUF- CA <u>DISTRICT</u> OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	15D. LICENSE NUMBER OF CREMATED RE- MAINS DISPOSER OF APPLICABLE

HCRO7I		INVOICE	E TROL	JIRY		ACCUPATION OF	PG 1
INVOICE: 25268	200						
INV DATE:	04/14/95	INV TYPE:	GE	TYPE CHG:	TC TA	EAS-RE	FERRAL: Y
DUE DATE:	05/14/95	NOTICES:	Y	ENCLOSURE:	N EX	CEPTIO	N CODE!
		CUSTOM	ER DAT	TA			
ACCT: 000952	NAME: COUN	TY OF SAN	DIEGO		SHORT	NAME	COUNTYDESC
1) PUBLIC ADM	INISTRATOR			2) 5201 A	RUFFIN ROAL		Marine Santa
3)			4	4)			
CITY: SAN	DIEGO	STI	CA	ZIP: 92123	CO	UNTRY	
BILLING DEPT:	072	CONTACT:	JOANN	WAITS			
REFER NO:	E-12150 .	PHONE	619 51	27 3400	PREPAR	ED BY:	VEB
THE RESERVE TO SERVE	DESCRIPTIO	N OF CHARG	E	ASSET WAS LIVE AND	AHOUNT	S-41200 WATER	Paris I
	N BOE PA#11						
Lot	17 GR6 SEC1	DIV12			126.00		
OPE	NING/CLOSIN	3	-		165.00		
8UF	MIAL CONTAIN	ER			50.00		
REC	ORDING FEES				45.00		
		Contract of the Contract of th	1237				chons at A
THE PARTY NAMED IN							TO SHEET STATES
		TOT	AL DU		388.00	VIII PARKS	<b>可用的 的数字</b>

E 12151

#### CITY OF SAN DIREO, CALIFORNIA

## ACCOUNTS RECEIVABLE AUXILIARY INVOICE - PAYMENT FORM

		GUSTOMEN ACC	OUNT NO.	00095	2
	PAYMEN	f DATA	The same of the same		
PAYMENT F.M. RECEIVED DAT		9/13/1995			
PAID BY (CIRCLE ONE)	CA	04-902871	NF		
AMOUNT PAID 386.00					1
		THEASUIL	EII VALIU	TION	
*	CUSTOME	DATA			724
PAYON NAME THAN OU	STOMEN )	OF SAN DIEGO			
# E-19151	5201	RUFFIN RD			
E-101-1	SAN D	EGO CA 92123	1		
HEMARHS					
*		4			
			526	87	

TH-1861 (2-92)

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 4-10-95

You are hereby authorized and instructed, so of	bjest to your rules and regulations, to inter the remains
ina LINER Vertiliner	Funeral, date, time thur 4/13/95/
Church, Chapel, Graveside Church	+ shaw - Kngpdale Mornary
	of regular work day or an extra charge of \$ 150.0
will be applied and billed to undersigned.	mara Juylor
War time veteran 1/6.	
Lot 258 Grave 2 Row_	Section2 Division/Block/ 2
Grave space & Care Fund	795.0
Additional spaces and care fund	
Opening/Closing & Setup	375-00
Burial Container	190.00
Handling Fees	1 m ) 5 /45.00
Flower vases – Marker setting fee	200 11-9
Recording and filing fee	11-14 45.00
	122
Sales taxes J	16/33
tuche artal.	Total Due
Paid Paid	receipt number 13-46134 391.00
ans out	11/1/23 = 534.666
I hereby certify I am the Sis ICI	R of the above named deceden
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization	n of remains as above indicated. I certify and represent and I agree to hold Mt. Hope Cemetery harmless from and interment.
I hereby authorize the interment in lot I hold under deed.	Maria Jayla 1392 Gullle St
Signature of recorded holder of deed	San Drey CT 92/16
1	264-2170 Telephone
- 12152	Invoice #
Work Order # E	Acct. #
PY-593 (Rev. 8-92)	300000 10000 1000 1000 1000 1000 1000 1

A 4 500	10.00	-	general Contract	-	-	-	3.5
MT.	ж	91PJ	-	c = v	A = 1	ΕН	v
		9.	-	- In 11			жа

W.O. # E- 12/52

#### NOTE

	HOIL		
\$ 1172.30	San Diego, Califo	ornia 4-10	19.95
Thirty days after date for value receive 3751 Market Street, San Diego, CA 9	2101, the sum of blever the		-3//
with interest from	lay 13, 1995	on the unp	paid principal
at the rate of 12 percent per annum,	payable on demand.		
accrue at the rate indicated above. Pr will be liable and consents to renewa maturity, and waives presentment, d person who signs this note agrees the contained herein. If any action be insemay fix as attorney's fees.	als, replacements and extensions of demand and protest and the right that recourse may be held against	lawful money of the United State of time for payment hereof befo to assert any statute of limitation his/her separate property for a	es. The maker ore, at or after ns. A married ny obligation
	Paragraph 7528 of the State of remains from a plot for which the p		
PRINT NAME MARUA TAYL	SIGNATURE _	mara Duylor	
ADDRESS 7392 Suble	. St. San Diego, C	A 92114	
CALIFORNIA DRIVER LICENSE NUMBER	N5185398	SSN# 466-90-41 U	2

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

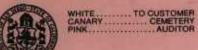
67

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE Dorothy	NT-FIRST (GIVEN)	18. MIDDLE Mae	IC. LAST (FAI	hack	2. I MO 06	NTH DAY VEAD	3. DATE OF DEA	EAR
SA. CITY OF DEATH	nal City	TO ATT	SB. COUNTY OF	DEATH—OUTSIDE CALIF TE ego	OF INFORM	ATIONSHIP, FULL MAI	LING ADDRESS AN	
Anderson-Ray 5050 Federa	gsdale Mort	uary;	OR PERSON ACTING AS SUCH	7B. CALIF LICENSE NUMBER —IF APPLICABLE  F-1329	7392 ( San D	Gribble St. Lego, CA 92 E OF APPLICANT—Per	114	DATE SIGNED
ACKNOWLEDGMENT OF AF	Section 10	376 of the Health and Sofety Co	the proposed disposition stated herein is o de, and was authorized pursuant to Section	7100 of the Healthland Safety Code:	Dull	ulhillen	104/	12/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	AND IS THE AUTHORIT IN THIS PERMIT.	ED IN ACCORDANCE ORNIA HEALTH AND SI Y FOR THE DISPOSITIO D MIGHT OF DISPOSAL OUTSIDE	N SPECIFIED \$7.00	04/12/19		SIGNATURE OF LOCA	9505035	SUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL ISPOSITION.	Vital Reca	GISTRAR OF DISTRIC D IN CAUFORNIA rds; P.O. B GO, GA 92186	ox 85222	RE ADDRESS OF REGISTRAR IF DISPOSITION IS TO OCC				
THORIZED DISPO	OSITION(8) CHECK A			THE RESERVE TO SERVE		FOR CORO	NER'S USE O	NLY
B. CREMATION		AINS OTHER	F. DISINTERME			L DISPOSITION PI (Name and Add	ENDING—REMAIN ress)	S LOCATED AT
BURIAL			NA CEMETERY 751 Warket St. Lego, CA	4//3/95	D   11C. 8	MATURE OF PERSO	N IN CHARGE O	F BURIAL
CREMATION	N/A	metal	Bealer	128. DATÉ CREMA	12C. S	CHATURE OF PERSO	N IN CHARGE OF	CREMATION
SCIENTIFIC USE	N/A	ODRESS OF CALIFORN	NA FACILITY RECEIVING REM	AINS 138. DATE RECEI	VED 13C. SI	SNATURE OF PERSO	N IN CHARGE O	F FACILITY
TRANSIT			STATE OR COUNTRY WHER	E 14B. DATE SHIPP		DRESS AND SIGNAT PLACING WITH THE		IN CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY			eline, or other description nd ca <u>district</u> of dispositio			SNATURE OF PERSO HARGE OF DISPOSITI	ON OF MAI	INSE NUMBER CREMATED RE- NS DISPOSER APPLICABLE

Character (	meen	Address: 3010 Qnu	Date: 5	10 00 500
Prima Bunds	A Company of the last of the l	- Address: 2016 1/10	The state of the s	ars (\$ 937.64)
In Pay	ment of 478	ment of Dors	thy Mucha	ski
Lot 358	Grave _ 2	Row	Section 2	Division Block
Invoice No.		OT VALID FOR PURPOSE STATED UNLESS!	BOOK STATES OF THE PERSON OF T	7007 /59 00
Acct. No		\$900 Cash check	80% Sales of Lots 7 Opening/	100 245 00
w.o. I-1315	2	37,64 and	Bunai	7181 - 3 /5 8 /- 4
BALANCE DUE	34.66			7182
			Recording &	100
Pre-Need Lot  At Need		100	Trust	9022
Pre-need Trust  Cash	9 Check 9	BUEDEN KOuch		8390
AC-212 (Rev. 5-94)	0=364	out of the same	TERME EMILE	45/104

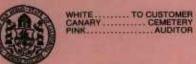
#### OFFICIAL RECEIPT



CITY OF SAN DIEGO, CALIFORNIA

364-3170 46133

From: Maria Tayla Two hundred t	hinty-four & 66		D 92114 mars (\$ 234,66
Lot 258 Grave	RowSe	ection	Division 1 >
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording &	67007 77184 100 77184 100 77181 100 77162 100 77165 100 77165 100 45 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Of AC-212 (Rev. 5-94)	ISSUED BY Rough	Trust	77183 9022 60101 78390 1 234 66



From Raspale Mortus	Address:	5050 Feder	Date:	190100 D	1993
In Payment of	wort	of Doroth			_
Lot 258 Grave	2	Row	Section 2	Division Block	12
Invoice No	NOT VALID FOR PURP "PAID" IN THIS SPACE	OBESTATED LINLESS STAMPE	90% Sales of Lots Opening/ Closing Burial	67007 77184 100 77184 100 77181 100 77182	100
Pre-Need Lot	ISSUED BY	Paux L	Recording & Minc. Fees Pre-Need Trust Sales Tax	100 77185 100 77183 83033 90022 60101 78390	60

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4-10-95

of	Buci	hanai	1 ,	Wen	RIC	K		
in a	Linea		Funera	l, date, time	Thu	usid 4	-13;	11:000
Church, Cha	pel, Graveside	01				BURIA		Mortuary.
All Funeral c	ars must arrive b	efore 3:30 p	.m. of regu	ılar work da	ay or an	extra charg	ge of \$_	150.
	ed and billed to un			-				
War time vet								
Lot 152	Grave	Pow_		Section _	1	Division	/Block_	12
Grave space	& Care Fund				*****		7	95.0
Additional sp	Paces and care fu	nd		*************				
Opening/Clo	sing & Setup						3	375.00
	iner							190. a
Handling Fee	0s						/	45.00
	s – Marker setting					ee	/	00.00
	nd filing fee							45.00
								13.30
				,	otal Du	<i>0</i>	/	663.3
		Pi	aid receipt	number	4	6121	40	42.0
						Balance d	ue 12	21.30
that I have th	ify I am the our authority to m be right to make then account of said	is authoriza	tion of rem	agree to ho	ove ind	of the above cated. I cel lope Cemet	named rtify and ery harm	decedent represent less from
hold under d		nt in lot I	1	Signeture × 5	262	Ridge		
Signature of record	9d holder of deed			City > 4	170-	6564	900	A , 921 Zip Code
Work Order	E 121	53		nvoice #	_	493	4	
PY-593 (Rev. 8-	1			SWOOD	00	11-		

W.O. # E- 12153

#### NOTE

twelve hu	noteeds twarty	048 / San	Diego, C	alifornia	4-12	19_4
hirty days after date	for value received, the	undersigned r	maker pro	nises to pay Sar	Diego City Treasu	rer, or order
751 Market Street, S	San Diego, CA 92101, ti	he sum of		1,221.	30	DOLLAR
		MAY	, 07	1005		

Should this note not be paid when due, it shall thereafter bear interest on the principal. Interest after maturity will accrue at the rate indicated above. Principal and interest are payable in lawful money of the United States. The maker will be liable and consents to renewals, replacements and extensions of time for payment hereof before, at or after maturity, and waives presentment, demand and protest and the right to assert any statute of limitations. A married person who signs this note agrees that recourse may be held against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promise(s) to pay such sum as the Court may fix as attorney's fees.

Part II, Chapter I, Article 2, Paragraph 7528 of the State of California Health and Safety Code authorizes the removal of any remains from a plot for which the purchase price is past due and unpaid.

PRINT NAME	×	BAR	BARA	CARTE	R_sig	NATURE	> Bus	lara	Cutu	
				ecrest						
			-	Y A 03/9					-60-2881	

Glynda Yombura 38-1-11-7



#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	18. MIDDLE	1C. LAST (FAMILY)			TE OF DEATH 4. SEX
Wenrick		Reynard	Buchanan		1271271960 647	18/1995 м
SA. CITY OF DEATH			58. COUNTY OF DEAT	DH-OUTSIDE CALIF., 8	NAME, RELATIONSHIP, FULL MAILING A	ADDRESS AND ZIP CODE
San Diego			San bieg		Barbara Carter-Mothe	
· California	Cremation	& Burial Chape:		IF APPLICABLE	262 Ridgecrest Drive San Diego, CA 92114	
5880 E1 Ca		an Diego, CA 9			A. SIGNATURE OF APPLICANT—Person toking	penit 8B. DATE SIGNED
ACKNOWLEDGMENT OF AP			sed disperation slabed herein is one of the an authorized purbased to Section 7100 of 6		Par Ul Am	04/11/1995
PERMIT AUTHORIZATION OF	SIONS OF THE CALIF	ED IN ACCORDANCE WITH PI ORNIA HEALTH AND SAFETY O Y FOR THE DISPOSITION SPEC	CODE	98. DATE PERMIT ! 04/11/199	9504969	GISTRAR ISSUING PERMIT
LOCAL REGISTRAR	NOTE: THIS PERMIT GIVES N	O BEGINT OF DESPOSAL OUTSIDE OF CALIF		Kyle Chas	The state of the s	
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	Vital Rec	egistrar of district of on a california cords-P.O. Box of CA 92186-522	85222		IF DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CALIFORNIA	
THORIZED DISPO	OSITION(S) CHECK A				FOR CORONER	S USE ONLY
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US	OF CREMATED REM. METERY	AINS OTHER	F. DISINTERMENT G. SHIP IN TO CALIF		I. DISPOSITION PENDING (Name and Address)	G-REMAINS LOCATED AT
BURIAL		pe Cemetery,	METERY	118. DATE BURIED	11C SIGNATURE OF PERSON IN	CHARGE OF BURNAL
CREMATION		etal seale		126. DATE CREMATE	D 12C. SIGNATURE OF PERSON IN C	CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND AL	DORESS OF CALIFORNIA FAI	CILITY RECEIVING REMAINS	13B. DATE RECEIVE	13C, SIGNATURE OF PERSON IN	CHARGE OF FACILITY
TRANSIT		DORESS IN RECEIVING STATI CREMATED REMAINS ARE TO		14B. DATE SHIPPEI	0 14C ADDRESS AND SIGNATURE OF PLACING WITH THE CAR	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, ( NTIFY FINAL PLACE AND GA	OR OTHER DESCRIPTION SUF- DISTRICT OF DISPOSITION	15B. DATE OF DISPOSITION	15C SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	15D. LICENSE HUMBER OF CREMATED RE- MAINS DISPOSER —IF APPLICABLE

## WHITE CANARY PINK

WHITE......TO CUSTOMER CANARY......CEMETERY PINK.....AUDITOR

				Date:	4-	12 .	19 7
rom: BARBARA	CAM	ER Address:	262 8	IdOJOCREST	De.	5.0.00	1 92
four	luna	dreds	forther	two -	Dollars (\$	442	00,
n hard Payme	ent of	intermen	+ 0/	Weyerct	90	chana	69
ot 152	Grave _	8	Row	Section/		Division Block	12
nvoice No.		NOT VALID FOR PURE	POSE STATED UNLESS S	CREDIT 20% Sales Care	67007 77184 —		
cot. No.			and the second	80% Sales of Lots	77184 — 100	442	00
1.0. E 1	2153		-	Opening/ Closing Burial	77181 —		
ALANCE DUE 122	1:300	4 Ment		Containers	77182 — 100 77185 —		
		198 -		Handling Fee Recording & Misc. Fees	100		
re-Need Lot At Need C				Pre-Need Trust	63033		
re-need Trust Cash C	Check		1. Baloble	Sales Tax	60101 78390 —	2 0.5	
C-212 (Rev. 5-94)		ISSUED BY	. June un	TOTAL PAID	*_	442	00

# P.A.

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4-10-95

01 / 100m 1 VO2 44-1	1922 P	4 117 843	13
Lines		THE RESERVE THE PARTY OF THE PA	
Vault/Linet	120	rickson-an	104.1
All Funeral cars must arrive before 3:30 p.m.			The state of the s
will be applied and billed to undersigned.		or arrestra charge o	
War time veteran  Lot 29 Grave 5 Row		1	10
		Division/Blo	
Grave space & Care Fund			126.00
Additional spaces and care fund			
Opening/Closing & Setup			165.0
Burial Container			50,0
Handling Fees			
Flower vases - Marker setting fee			
Recording and filing fee			45.0
Sales taxes			
		tal Due	
Paid	receipt number		
1000		Balance due	
		350000000000000000000000000000000000000	10
hereby certify I am the		of the above na	med deceden
hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization that I have the right to make this authorization in the liability on account of said authorization.	n and I agree to hold	of the above na re indicated. I certify Mt. Hope Cemetery	and represent
and this is your authority to make disposition hat I have the right to make this authorization	n and I agree to hold	e indicated. I certify	and represent
and this is your authority to make disposition hat I have the right to make this authorization any liability on account of said authorization hereby authorize the interment in lot I	n and I agree to hold and interment.	e indicated. I certify	and represent
nd this is your authority to make disposition nat I have the right to make this authorization ny liability on account of said authorization hereby authorize the interment in lot I old under deed.	n and I agree to hold and interment. Signature	e indicated. I certify	and represent harmless from
and this is your authority to make disposition that I have the right to make this authorization in liability on account of said authorization thereby authorize the interment in lot I hold under deed.	n and I agree to hold and interment.  Signature  Address  City	e indicated. I certify	and represent harmless from
nd this is your authority to make disposition nat I have the right to make this authorization ny liability on account of said authorization hereby authorize the interment in lot I old under deed.	n and I agree to hold and interment. Signature	e indicated. I certify	and represent harmless from
and this is your authority to make disposition hat I have the right to make this authorization any liability on account of said authorization hereby authorize the interment in lot I	n and I agree to hold and interment.  Signature  Address  City	e indicated. I certify	and represent

### CITY OF SAN DIEGO, CALIFORNIA 0.37 E 12

Make Remittance Payable to

San Diego, California 92112
Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

Received 2 5-9-95 TREASURERS

S USE ONLY-

PAYMENT DATE 5-8-95

PAYMENT REF NO 04-806636

AMT PAID: \$386.00

O4/21/95

PAYMENT DUE

PERTOD COVERED

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS

REF NOT E-12154

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMDUNT

JOHN DOE 94-1922 PA 1178423 LOT 29 GRAVE 5 SEC 1 DIV 12 OPENING/CLOSING

165-00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED, BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10, WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT LISTED ABOVE.

Note: Customer Copy \* Yellow-Remittance Copy

E 12 154

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

	US	SE BLACK INK ONL	Y-MAKE NO ERASURES, W	HITEOUTS OR OTH	HER ALTERATIONS FOR	IND
A. NAME OF DECEDE John	ENT-FIRST (GIVEN)	18. MIDDLE	IC. LAST (FAMILY)		2. DATE OF BIRTH 3. DATE MONTH, DAY, YEAR MONTH 10/	E OF DEATH 4. SEX
Camp Pendl	Leton	A I	SE COUNTY OF DEAT ENTER STATE San Diego	H-OUTSIDE CALIF., 6	NAME, RELATIONSHIP, FULL MAKING A OF INFORMANT San Diego County Pul	
Erickson-A	Anderson Mo	rtuary		FAPPLICABLE	administrator 5201 A Ruffin Bd San Diego, CA 92123	
ACKNOWLEDGMENT OF A	uni stant I felicity a		1941 FD proposed discoultest stated berein is use of the and was authorized pursuant to Section 7100 of the	dispositions authorized by	A. SIGNATURE OF APPLICANT—Fersion taking	04/13/199
PERMIT 94-1922 AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH COMMINIA HEALTH AND SAFETY FOR THE DISPOSITION SEED INSERT OF DISPOSAL OUTSIDE OF	SPECIFIED \$ 8.00		1995	GISTRAR ISSUING PERMIT
NY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FEMAL DISPOSITION.	IF DEATH OCCURRE	EGISTRAR OF DISTRICT D IN CAUFORNIA CA 92186-522	1 #1		OF DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CAUFORNIA	
A BURIAL (INCLU			E. TEMPORARY ENVA	DRINIA	FOR CORONER'S  I. DISPOSITION PENDING (Name and Address)	S USE ONLY 3—REMAINS LOCATED A
BURIAL	Mt. Hope San Diego	CHEST SECOND STATE OF THE PARTY	CEMETERY	118. DATE BURIED	11C SIGNATURE OF PERSON IN	CHARGE OF BURIAL
CREMATION	12A. NAME AND A	DORESS OF CALIFORNIA	CREMATORY	12B. DATE CREMATE	D 12C. SIGNATURE OF PERSON IN C	CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND AL	DDRESS OF CALIFORNIA	A FACILITY RECEIVING REMAINS	138, DATE RECEIVE	ED 13C. SIGNATURE OF PERSON IN	CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING S CREMATED REMAINS AR	STATE OR COUNTRY WHERE RE TO BE SHIPPED	14B. DATE SHIPPED	OF PLACING WITH THE CARI	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY			NE, OR OTHER DESCRIPTION SUF- CA <u>DISTRICT</u> OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	130. LICENSE NUMBER OF CREMATED RE- MAINS DISPOSER —IF APPLICASIE

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 4-11-95

s Smith,	Amanda		
na T.S Vauet	Funeral, date, time	FRIO 4-14.	1:30 P.1
Church, Chapel, Graveside Church	6.5	Pagsolale	Mortuary.
All Funeral cars must arrive before 3:30 p.m.			
will be applied and billed to undersigned.	xxler l	root	Jely C
Var time veteran	,,,,,,,	70,7	1
	020000000000000000000000000000000000000		in
_ot Row Row			
Grave space & Care Fund		E- 619	-8
Additional spaces and care fund			1 50
Opening/Closing & Setup		E-670	82
Burial Container			250.00
landling Fees		-	185.00
Flower vases - Marker setting fee			
Recording and filing fee			45.00
Sales taxes			17.50
		otal Due	497.50
Dalid	receipt number	46120	497.50
Paid	receipt number		b
House and	11	Balance due	
hereby certify I am the hand this is your authority to make disposition	of remains as abo	ve indicated. I certify a	and represent
hat I have the right to make this authorization my liability on account of said authorization	n and I agree to hok and interment.	Mt. Hope Cemetery h	armiess from
	21	2 1	-10
hereby authorize the interment in lot I	140	rhertos	netty
old under deed.	×51	O-SOE	CANS:
ignature of recorded holder of dead	Address	DIECTO	A 921
ignature of recurses usions at seed	City &	0 1420	Zip Code
	Telephone	712227	021
10155	Invoice #		
E 12155	The state of the s		
Vork Order #	Acct. #		-

## •

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

79

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE Amanda	NT-FIRST (GIVEN)	18. MIDDLE  Jones	IC. LAST (FAMLY) Smith		2. DATE OF BIRTH 3. DATE OF DEATH 4. SEX MONTH, DAY, YEAR 01/04/1916 04/08/1995 F
SA. CITY OF DEATH	an Niego		5B COUNTY OF DEATH ENTER STATE San Diego		NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMANT Orbert Smith - Hushand
		t.; 5050 Feder	PERSON ACTING AS SUCH 78. CAL	F APPLICABLE	10 S. Evans St.
Miner Soul-Re	Sa	n Diego, CA	F-2	1329 BA	SIGNATURE OF APPLICANT—From biling permi BB, DATE SIGNED
ACKNOWLEDGMENT OF AP	PUICANT Section 16	376 of the Health and Salety Code, and	posed dispection stated become a one of the twee authorized sprained to Section 7100 of the	e Health and Safety Code.	deble 4 belians 04/11/199!
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH ORNIA HEALTH AND SAFETY OF FOR THE DISPOSITION SPE DINGHT OF DISPOSAL OUTDING OF CA	* CODE \$7.00	04/13/199!	GUED, 9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT 9505052
ANY CHANGE IN DISPOSE TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	Vital Reco	GISTRAR OF DISTRICT OF D IN CALIFORNIA Tds; P.O. Box go, CA 92186-	85222		DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CAUPORNIA
THORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS			FOR CORONER'S USE ONLY
B. CREMATION		AINS OTHER	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	FINIA	L DISPOSITION PENDING—REMAINS LOCATED A (Nume and Address)
BURIAL		Cemetery; 375 San Diego,	Market St.	118. DATE BURIED	110. SIGNATURE OF PERSON IN CHARGE OF BURIAL
CREMATION		odress of California c		12B. DATE CREMATED	12C SGNATURE OF PERSON IN CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND ALL	ODRESS OF CALIFORNIA F	ACILITY RECEIVING REMAINS	138. DATE RECEIVE	D 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY
TRANSIT		DORESS IN RECEIVING STA CREMATED REMAINS ARE	ATE OR COUNTRY WHERE TO BE SHIPPED	14B. DATE SHIPPED	14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY			OR OTHER DESCRIPTION SUF- A <u>DISTRICT</u> OF DISPOSITION	ISB. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION OF CREMATED REMAINS DISPOSER IF AFFICABLE

CITY OF SAN DIEGO, CALIFORNIA

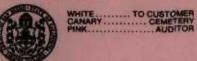
46120



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

			Date		r.r,	19
rom: Smith	Horben	Address: 5/0	S. EVANS	STE	SP. CA	92
four	howhen	e winely s	ruen 50/10	Dollars (\$	497	50)
Lull p	ayment of	CH ferment	of	_ sanda productive	10 15	
3	tuilh,	Amauda		1313	11/1/2/19	
ot 2761	Grave	Row_	Section	-187 - S	Division Block	10
voice No:		NOT VALID FOR PURPOSE STATED UNI	LESS STAMPED CREDIT	87007 les Care 77184 —	1000	-
oct. No.			80% Se of Lote Openir	7 + TT184-		-
.o	= 12155		Closing	100	1 250	00
ALANCE DUE	82		Contail	100	125	00
			Record Misc. F	ing & 100	45	00
	ed On Acct		Pre-Ne Trust	9022	177	50
e-need Trust Cash	The state of the s	ISSUED BY V Balobi	Sales 7	76390 —	207	50
C-212 (Rev. 5-04)		0001201	TOTAL		447	100

#### OFFICIAL RECEIPT



CITY OF SAN DIEGO, CALIFORNIA

rom: Herbert Smith one hundred two in full Payment of Mar	enty five and richer Ker installation for t	Date: VANS St. SAV  Dollars (\$	125.0	192 113
Lot 2701 Grave _	ROW SE NOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	ection 67007 Sales Care 77184 —	Division Block	10
Acct. No	"PAID" IN THIS SPACE.	20% Sales Gare 77184 — 80% Sales 100 of Lots 77184 — Opening/ 100 Closing 77181 — Burial 100 Containers 77182 —		
Pre-Need Lot		Handling Fee 77185 — Recording a 100 Misc. Fees 77183 — Pre-Need 63033 Trust 9022 —	125	08
Pre-need Trust Cash Check C	ISSUED BY atina Jungon	Sales Tax 60101 78390 — TOTAL PAID \$	125	00

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4-12-95

of				PA# 117	18229
	iner	Eur.	neral date time	Fer 4-14.	11:00 A.M
Church, Chapel, G	Vault/Liner /	Del wand	mules 1	2 enon - Ro	Rents
All Funeral cars mu	ust arrive before	e 3:30 p.m. of	regular work day	or an extra char	ge of \$
will be applied and	billed to under	signed			
War time veteran					
Lot 29 Gr		-			
Grave space & Car	re Fund				
Additional spaces a					
Opening/Closing &	Setup				165.00
Burial Container					
Handling Fees					
Flower vases - Ma					
Recording and filin	g fee				45.00
Sales taxes					
an			To	otal Due	386.00
E LE VIN	.01	Paid rec	eipt number		
IAM QUEBOL	ROWNEN			Balance d	ue
hereby certify I ar				A TOTAL CONTRACTOR	named decedent
and this is your and that I have the righ any liability on acco	thority to make t to make this a	uthorization ar	nd I agree to hole	ve indicated. I ce	rtify and represent
hereby authorize hold under deed.	the interment in	n lot I	Signature		
			Address		
	r of deed		City		Zip Code
Signature of recorded holder			4.5		
Signature of recorded holde			Totachana		
lignature at recorded holder			Telephone	2 32210	
lignature of recorded holder	1215	6	Telephone	25273	6
Work Order # E	1215	6		25273	6



## CITY OF SAN DIEGO CALIFORNIA

Make Remittance Payable to CITY TREASURER P O Box 2289 San Diego, California 92112

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

PAYMENT DATE: 6:9-45 | BY: CA CK IF

PAYMENT REF NOOH-8336991 AMT PAID: 386.00

O4/18/95

05/18/95

PERIOD COVERED

JOANN WAITS REF NO: E-12156
DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

JACKIE MOORE PA 1178229#SVCS
LOT 29 GRAVE 3 SEC 1 DIV 12
OPENING/CLOSING
LINER
RECORDING FEE

165.00 50.00 45.00

126.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10, WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT COLLECTIONS ABOVE White-Customer Copy • Yellow-Remittance Copy NO. 252736

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDENT—FIRST (GIVEN) 1B. MIDDLE					IC LAST (FAMILY) MOORE			2. DATE OF BIRTH 3. D	705/1995	4. SEX
5/	NATIONAL (	CITY			58 COUNTY OF D	SAN DIEGO	OF INF	RELATIONSHIP, FULL MAILING GRMANTE, DEPUTY-P		
	BERGE-ROB	ERTS HORTUA	RY			CALIF. LICENSE NUMBER —IF APPLICABLE	200000000000000000000000000000000000000	-A RUFFIN ROAD DIEGO, CA 9212	3	
0	ACKNOWLEDGMENT OF A	PPLICANT   BEVD	cknowledge at applicant that	the proposed dispusit	tion stated herein is one a	FD-284 If the dispositions authorized by of the Health and Safety Code.	1 /2	ATURE OF APPLICANT—PERSON TO	Delli	PASSIGNED
	PERMIT UTHORIZATION OF OCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE FORMA HEALTH AND T TY FOR THE DISPOSITI ID BIGHT OF DISPOSAL OUTSE	WITH PROVI SAFETY CODE ON SPECIFIED			and the Party of t	BC. SIGNATURE OF LOCAL R	EGISTRAR ISSUE	10.PERMIT 4978
1	NY CHANGE IN DISPOSI- TION REQUIRES A NEW FEMILT TO SHOW FINAL SPOSITION.	9D. ADDRESS OF RE P.O. BOX SAN DIEGO	D IN CALIFORNIA		9E	ADDRESS OF REGISTRAL IF DISPOSITION IS TO OCI		HICT OF DISPOSITION— HHER DISTRICT IN CALIFORNIA		
L.	ORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS					FOR CORONE	'S USE ONL	Y
Section Sec	B. CREMATION		AINS OTHER		E TEMPORARY E F. DISINTERMENT G. SHIP IN TO CA H. TRANSIT TO C	*		i. DISPOSITION PEND (Name and Address		OCATED AT
•	JURIAL	3751 HARKE	PRESSOR CALLED		), CA 9210	2 4/4/95	ED   110	SIGNATURE OF PERSON I	CHARGE OF B	URIAL
BLE ITEMS	CREMATION	12A, NAME AND AD	ODRESS OF CALIFOR	RNIA CREMATOR	RY	128. DATE CREMA	TED 120	SIBNATURE OF PERSON IN	CHARGE OF CR	EMATION
ALL APPLICABL	SCIENTIFIC USE	13A. NAME AND AD	ODRESS OF CALIFOR	RNIA FACILITY F	RECEIVING REMAIN	S 138. DATE RECE	IVED 13C	SIGNATURE OF PERSON II	CHARGE OF F	ACILITY
COMPLETE A	TRANSIT		ORESS IN RECEIVIN CREMATED REMAINS			148, DATE SHIPE	PED   140	ADDRESS AND SIGNATURE OF PLACING WITH THE CA		CHARGE
0	SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHOP INTIFY FINAL PLACE A			F 158 DATE OF DISPOSITIO		SIGNATURE OF PERSON II CHARGE OF DISPOSITION	OF CREA	AATED RE- DISPOSER



## MT. HOPE CEMETERY

### INTERMENT ORDER

P.A

City of San Diego

Date 4-12-95

of	Denes	. L. Sergio	PA# 1178288
in a		Funeral, date, time	R14-14 200PA
Church, Chape	Vaulificher  I. Graveside  Del	Every only: 6	wadaluphug Mortuary
All Funeral cars	A CALL MANAGEMENT		n extra charge of \$
	and billed to undersigned.	The state of the s	-
War time veter			
	Grave A Row	1.11	Division/Block /2
Lot	Grave How	Segoon /	THE RESERVE OF THE PARTY OF THE
Grave space &	Care Fund	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	126.0
Additional space	es and care fund	M. Zu	
Opening/Closin	g & Setup	2	165.0
Burial Containe	of Oppor		50.6
Handling Fees	1 2		
Flower vases -	Marker setting fee		
Recording and	filing fee		45.0
Sales taxes	1		
		Total D	386 D
	- P	Paid receipt number	
		AMERICAN PRODUCTION	Balance due
I hereby certify	I am the		of the above named deceder
and this is your that I have the	authority to make dispos	ation and I agree to hold Mt.	dicated. I certify and represer Hope Cemetery harmless from
I hereby author	ize the interment in lot I	Signature	
THE WINDER WEEK		Address	
Signature of recorded (	colder of deed	City	Ze Cor
Signature of recorded :	holder of deed	3	Zip Coo
Signature of recorded (		Telephone	7 8 1 G
Signature of recorded i	12157	3	2819

CITY OF SAN DIEGO, CALIFORNIA 0.32 GENERAL INVOICE



Please Return YELLOW Capy with Your Payment COUNTY OF SAN DIEGO

PUBLIC ADMINISTRATOR 5201 A RUFFIN ROAD

SAN DIEGO CA 92123 ACCT NO 000952

GERNAL STATASHERS USE ONLY

5,8-95 ( PAYMENT DATE

PAYMENT REF NO

AMT PAID:

INVOICE DATE 04/19/95

RECORDING FEE

NOTICE:

PAYMENT DUE 05/19/95

PERIOD COVERED MARCH

FOR INFORMATION CONCERNING YOUR BILLING CONTACT: JOANN WAITS REF NO: E-12157 DEPT: PROPERTY DEPT-NT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

SERGIO PEREZ PA 1178288 SVCS LOT 33 GRAVE 4 SEC 1 DIV/12 DPENING/CLOSING INFR

126.00 - 165.00

TOTAL DUE

PLEASE

386 400 REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE-LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT

LISTED ABOVE. INV NO. 252819 AC-22 (Rev. 2/92) White - Customer Copy . Yellow - Remittance Copy

E 12157

## APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

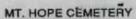
USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

ama ata	NT-FIRST (GIVEN)	IB. MIDDLE	1C. LAST (FAM	IILY)		2. DATE OF BIRTH 3. DA	THE OF DEATH	4. SEX
SERGIO		LUNA	PREEZ	DEATH—OUTSIDE CALIF	THE OWNER WHEN PERSON NAMED IN	MONDO 8AY 1 956 1899 RELATIONSHIP, FULL MAILING	Contract of the last of the la	M
SAN DIEG			ENTER STA	SAN DIEGO	RATE.	ERINE HOWARD-DE		
GUMALUPA	NA MEM. CHA	PEL & MORT.	OR PERSON ACTING AS SUCH	PB, CALIF, LICENSE NUMBER —IF APPLICABLE	SAN	DIAN, 5201-ARUE DIEGO, CA, 9212	23	
ACKNOWLEDGMENT OF M	ans sewart   I hereby a	SAN DIEGO, C	proposed disposition stated herein is in	e of the disposmons authorized by	BA. SIGNA	TURE OF APPLICANT - Person Libi	boa/1	E SIGNED
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.		SPECIFIED S 7_00		Secure Section 1	C SIGNATURE OF LOCAL RE	GISTRAR ISSUIN	G PERMIT
NY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	VITAL RECO	GISTRAR OF DISTRICT D IN CAUFORNIA RDS P.O E	XX 85222	NE. ADDRESS OF REGISTRAR ( IF DISPOSITION IS TO OCCUR				
MANUSED PURC	OSITION(S) CHECK A			A 1. 11 11 11 11	-	FOR CORONER	'S USE ONLY	
A BURIAL INCLU			E TEMPORARY	ENVAULTMENT		L DISPOSITION PENDIN		
A BURIAL (INCLU	OF CREMATED REMAINS METERY BE 11A, NAME AND AL MIT, HOPE SAN DIRGO	ODRESS OF CALIFORNIA CEMETISERY, 37 ), CA., 92102	F, DISINTERME G, SHIP IN TO H. TRANSIT TO A CEMETERY 751 MARKET ST.	VT	1	SIGNATURE OF PERSON IN	CHARGE OF BI	IRIAL
A BURIAL (INCLU	OF CREMATED REMAINS METERY BE 11A, NAME AND AL MIT, HOPE SAN DIRGO	ODNESS OF CALIFORNIA	F, DISINTERME G, SHIP IN TO H. TRANSIT TO A CEMETERY 751 MARKET ST.	NT CALIFORNIA OUTSIDE OF CALIFORNIA	1	(Hame and Address)	CHARGE OF BI	IRIAL
B. CREMATION  C. DISPOSITION  THAN IN A CE  D. SCIENTIFIC US  BURIAL	OF CREMATED REMARKETHY SE  11A. NAME AND AL MIT. HOPE SAN DIPOO	DORESS OF CALIFORNIA  CEMETISERY, 37  CA., 92102  DORESS OF CALIFORNIA	F, DISINTERME G, SHIP IN TO H. TRANSIT TO A CEMETERY 751 MARKET ST.	CALIFORNIA OUTSIDE OF CALIFORNIA 118. DATE BURIED 129. DATE CREMATE	ED 12C.	SIGNATURE OF PERSON IN	CHARGE OF BI	PRIAL.
B. CREMATION  C. DISPOSITION  THAN IN A CE  D. SCIENTIFIC US  BURIAL  CREMATION  SCIENTIFIC	OF CREMATED REMARKERY SE  11A. NAME AND ACMIT'S HOPE SAN DIFCO 12A. NAME AND ACMIT'S HOPE 13A. NAME AND ACMIT'S HOPE 14A. NAME AN	DORESS OF CALIFORNIA  ODRESS OF CALIFORNIA  DORESS OF CALIFORNIA	F. DISINTERME G. SHIP IN TO H. TRANSIT TO A CEMETERY 751 MARKET ST. A CREMATORY A FACILITY RECEIVING REMA	CALIFORNIA OUTSIDE OF CALIFORNIA  11B. DATE BURIED  12B. DATE CREMATE  13B. DATE RECEIVE	ED 12C	SIGNATURE OF PERSON IN	CHARGE OF CRI	IRIAL

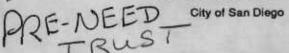
COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

252819 04/19/95 000952 COUNTY OF SAN DIEGO 100 072 100 072 100 072 100 072 67007

77181 000072 77182 000072 77183 000072 77184 04-806636 386.00 165.00 50.00 45.00 126.00 386.00 PAID IN FULL



#### INTERMENT ORDER



You are hereby authorized and instructed	enhicet to your rules and regular	ione to later the remains
ofGERTRUDE C CROWN	, subject to your rules and regular	oons, to mer the remains
in a TOP SEAL VAULT	Funeral, date, time	
Church, Chapel, Graveside		Mortuary.
All Funeral cars must arrive before 3:30 p	.m. of regular work day or an extr	a charge of \$
will be applied and billed to undersigned.		SOME SERVICE CONTRACTOR OF SERVICE CONTRACTO
War time veteran		
Lot 1085 Grave Row	Section 3 D	ivision/Blassex 8
Lot 1085 Grave Row Paid Grave space & Care Fund Paid	on B-821	
Additional spaces and care fund		
Opening/Closing & Setup	Jan Mary Strategic Strateg	375.00
Burial Container	JOX 109	250.00
Handling Fees	NO STA	185.00
Flower vases - Marker setting fee	700	
Recording and filing fee		8.75 <u>45.00</u>
Sales taxes	9	8.13 _17.50
	Total Due	872.50
Pi	aid receipt number	873,75
	Bal	ance due
I hereby certify I am the and this is your authority to make disposi that I have the right to make this authoriza any liability on account of said authorization	tion of remains as above indicate tion and I agree to hold Mt. Hope	a above named decedent d. I certify and represent Cernetery harmless from
hereby authorize the interment in lot I	Signature	Attilded
hold under deed.	*	
Signature of recorded holder or deed		
	*	Zip Code
1	Telephone	
- 12158	Invoice #	
Work Order # E 12100	Acct. # _	
PY-593 (Rev. 8-92)	AWAITS	CHECK & PRE-NEE
	MANAGER MAN	OHEON O LUE-MEE

MS CROWN. Jane 4/12/95 5/2/95 Left mag on



THE CITY OF

# SAN DIEGO

MT. HOPE CEMETERY \* 3751 MARKET STREET \* SAN DIEGO, CALIFORNIA 92102
Real Estate Assets Department
Business hours 8 a.m. to 4 p.m.
527-3400
Monday through Friday \* Gates open daily

August 7, 1996

Ms. Gertrude C. Crown 2602 Kim Place San Diego, CA 92123

Re: Pre-Need Trust

Dear Ms. Crown:

I am following up on our letter to you dated April 12, 1995 regarding the Pre-Need Trust for you.

Please give me a call by September 7, 1996 to let me know if you still wish to pursue this matter or if you have changed your mind. If we do not hear from you within a reasonable time we will void the paperwork.

Enclosed are copies of the letter and Interment Order previously sent to you.

If you have any questions please do not hesitate to contact me.

Sincerely,

Sue Shackelton Clerical Assistant II

Enclosures





THE CITY OF

# SAN DIEGO

MT. HOPE CEMETERY • 3751 MARKET STREET • SAN DIEGO, CALIFORNIA 92102
Real Estate Assets Department
Business hours 8 a.m. to 4 p.m.
527-3400
Monday through Friday • Gates open daily

April 12, 1995

277-2127

Ms. Gertrude C. Crown 2602 Kim Place San Diego CA 92123

Dear Ms. Crown:

Enclosed are the Interment Order (pre-need) and two copies of the Agreement for Pre-Need Trust.

Please complete the information on the Interment Order next to the four red X's. On the Agreement for Pre-Need Trust, please complete the portion on page 3 next to the two red X's and return these two forms to us with your check for \$218.00 (payable to Mt. Hope Cemetery). You may keep the extra copy of the Agreement for your records.

If we may be of further help, or if you have any questions, please do not hesitate to contact our office.

Sincerely,

Jane K. Rauch

Clerical Assistant II

jkr

Enclosures: Interment Order E-12158

Pre-Need Trust Agreement



Thereof A 5+3 m

## MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date H-13-95

	John Doe 94-1354 PAK 117
	Funeral, date, time FRI 414 19M  Ey Ouly: Mayer Mortua
All Funeral cars must arrive before 3:30 p.m.	. of regular work day or an extra charge of \$
will be applied and billed to undersigned	
War time veteran	
ot 5 Grave 74 Row	Section Division/Block
Grave space & Care Fund	196.
Additional spaces and care fund	1 6
Opening/Closing & Setup	11 14 1165
/	U) a\ / / =
Jurial Container	V   Y   / ==
landling Fees	6
Flower vases - Marker setting fee	
Recording and filing fee	45.
Sales taxes	231
Called well 17 bid Paid	Total Due
Rales taxes where 17 bid Paid Now Paid hereby certify I am the	receipt number
Mary 13" Itust	Balance due
hereby certify I am the	of the above named decede
and this is your authority to make disposition that I have the right to make this authorization	n of remains as above indicated. I certify and represe n and I agree to hold Mt. Hope Cemetery harmless fro
my liability on account of said authorization a	and interment
horoby suthorize the interment in let I	
	Signature
old under deed.	Signature
old under deed.	
old under deed.	Address
igneture of recorded holder of deed	Address City Zip Ci Talephone
hereby authorize the interment in lot I hold under deed.	Address Ony Zp C

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

E12159

1A. NAME OF DECEDE	ENT-FIRST (GIVEN)	18. MIDDLE	IG. LAST (FAMILY)	mileoors on o	2. DATE OF BIRTH   3. DATE	OF DEATH 4. SEX
John/Jane SA. CITY OF DEATH San Ysidr			SR. COUNTY OF DEAT ENTER STATE		6 NAME, RELATIONSHP, FULL MAILING AD OF INFORMANT PUBLIC Administrator,	DRESS AND ZIP CODE
		Diego, CA 9211	PERSON ACTING AS SUCH 7B. CA	LIF. LICENSE NUMBER IF APPLICABLE 1424	5201-A Ruffin Rd. Bin Diego, CA 92123  BA SENATURE OF APPLICANT - PERSON WARREST OF THE	april 88. DATE SIGNED
ACKNOWLEDGMENT OF A			posed disposition stated between is one of the was authorized perseast to Section 7,00 of t		· Och May	04/13/1995
4-135PMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	SED IN ACCORDANCE WITH ORINA HEALTH AND SAFETY IY FOR THE DISPOSITION SPE O RIGHT OF DISPOSAL DUTSING OF CA	CODE T.00	0 4 / 1 3 /	1995 A SIGNATURE OF LOCAL REGI	STRAR ISSUING PERMIT
TION REQUIRES A NEW PERMIT TO SHOW FINAL	P.O. BOX 85	EGISTRAR OF DISTRICT OF D. IN CAUFORNIA 1222 CA 92186-5222			OF DISTRICT OF DISPOSITION— UR IN ANOTHER DISTRICT IN CAUPORNIA	
	OSITION(S) CHECK A				FOR CORONER'S	USE ONLY
B. CREMATION	BE.		F. DISINTERMENT G. SHIP IN TO CALIF	DRNIA	(Name and Address)	REMAINS LOCATED A
BURIAL	San Diego,	CA.	Market St.	4/4/95	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	NAMES OF BURNAL
CREMATION		ndluand c	1 .	128. DATE CREMAT	TED 12C. SIGNATURE OF PERSON IN CH	HARGE OF CREMATION
- SCIENTIFIC USE	13A. NAME AND A	ODRESS OF CALIFORNIA F	ACILITY RECEIVING REMAINS	138. DATE RECEI	VED 19C. SIGNATURE OF PERSON IN C	HARGE OF FACILITY
TRANSIT TRANSIT		DDRESS IN RECEIVING STA CREMATED REMAINS ARE		148. DATE SHIPPI	ED 14C. ADDRESS AND SIGNATURE OF PLACING WITH THE CARRI	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE ENTIFY FINAL PLACE AND CA	OR OTHER DESCRIPTION SUF- DISTRICT OF DISPOSITION	158 DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	15D. LICENSE NUMBER OF CREMATED RE- MAINS DISPOSER —IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN WARGE OF DISPOSING OF THE CREMATED REMAINS.

CITY OF SAN DIEGO, CALIFORNIA

#### Make Remittance Payable to CITY TREASURER P O Box 2289 San Diego, California 92112

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

Rec'd 5/9/95 TREASURERS USE ONLY-

PAYMENT DATE 5-8-95 BY: CA CK IF

PAYMENT REF NO 04-806636 | AMT PAID: \$336.00

INVOICE DATE

PAYMENT DUE

PERIOD COVERED

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

DOANN WAITS

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

JANE/JOHN DOE SVCS PA 1178385
(ME 94-1354)
LOT 5 GRAVE 7A SEC 1 DIV 12
DPENING/CLOSING
RECORDING FEE

126.00 165.00 45.00

TOTAL DUE

336.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT
MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO

AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE

SUBJECT TO A COLLECTION FEE OF 10% OR \$10,

WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH
ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.

ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT

LIGHT TOD ABOVE White-Customer Copy Yellow - Remittance Copy NO. 252732

252732 04/18/95 000952 COUNTY OF SAN DIEGO 100 072 100 072 67007

77181 000072 77183 000072 77184

04-806636

336.00 165.00 45.00 126.00 336-00 PAID IN FULL

instanced Right Candea

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4-13-95

in a	You are hereby authorized and instruct of Stolp,	cted, subject to your rule	es and regul	1	or the remains
All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge of \$ 150 will be applied and billed to undersigned.  War time veteran	ina Ash Vault		- 64		12:00/10
War time veteran	Church, Chapel, Graveside 6/	raveside:	FA	MILY	Mortuary.
War time veteran	All Funeral cars must arrive before 3:3	0 p.m. of regular work	day or an ex	tra charge of	\$ 150.0
Grave space & Care Fund  Additional spaces and care fund  Opening/Closing & Setup  Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filing fee  Paid receipt number  Flower active to make this authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Flower deed  Flower vases – Marker setting fee  Balance due  Of the above named deceden and this is your authority to make disposition of remains as above indicated. I certify and represent that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Flower of recorded holder or deed  Invoice #  Invoice #  Invoice #  Invoice #		THE RESIDENCE OF THE PARTY OF T	1		
Additional spaces and care fund  Opening/Closing & Setup  Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filing fee  Sales taxes  Paid receipt number  Paid receipt number  Balance due  Of the above named deceden and this is your authority to make disposition of remains as above indicated. I certify and representant I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  F 12160  Invoice #  Invoice #  Invoice #	War time veteran	-/			
Additional spaces and care fund  Depring/Closing & Setup  Depring/Closing & Setup  Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filing fee  Sales taxes  Total Due  Paid receipt number  Paid receipt number  Balance due  Of the above named deceden and this is your authority to make disposition of remains as above indicated. I certify and representant I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.  F 12160  Invoice #  Invoice #  Invoice #  Invoice #	tot 30 Grave /O Ro	w Section	16	Division/Bloo	ok 7
Additional spaces and care fund  Opening/Closing & Setup  Burial Container  Handling Fees  Handling Fees  Flower vases – Marker setting fee  Recording and filing fee  Flower vases – Marker setting fee  Recording and filing fee  Flower vases – Marker setting fee  Recording and filing fee  Flower vases – Marker setting fee  Recording and filing fee  Flower vases – Marker setting fee  Recording and filing fee  Flower vases – Marker setting fee  Recording and filing fee  Flower vases – Marker setting fee  Glover vases – Marker setting fee  Flower vases – Marker setting fee  Flower vases – Marker setting fee  Glover vases – Marker setting fee					8
Dening/Closing & Setup				*******************	
Burial Container  Burial Conta					105.00
Flower vases – Marker setting fee  Recording and filing fee  Paid receipt number  Paid receipt number  Paid receipt number  Paid receipt number  Balance due  Of the above named deceden and this is your authority to make disposition of remains as above indicated. I certify and representant I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.  The second of the above named decedental authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.  The second of the above named decedental authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.  The second of the above named decedental authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and I agree to hold Mt. Hope Cemete	opening/closing a setup	Ach	Vault	t	THE RESERVE THE PERSON NAMED IN
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Paid receipt number 46/35 268 83  Paid receipt number 46/35 268 83  Balance due 6  Description of the above named decedent and this is your authority to make disposition of remains as above indicated. I certify and represent any liability on account of said authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and interment.  Total Due 688  Balance due 60  Of the above named decedent and represent any liability on account of said authorization and interment.  Thereby authorize the interment in lot I accorded holder or deed 7191  Accorded C. Character 4214  Talagnores 72160					200
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ignature of recorded holder at deed  Y Challa Usola C# 7/7/ Cey / 427-5623  Taleghore  F 12160  Invoice #	hereby authorize the interment in lot lold under deed.	) /	2503	trace	#214
+ 427-5623 Telephone  12160 Invoice #	Synature of recorded holder of deed	- +C			-
		4	427-	5623	Zip Code
	- 12160	Invoice #_			100
		Acct. #			



#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

REGORY	VT-FIRST (GIVEN) 18. MIDDLE	STOLP		2. DATE OF BIRTH		OF DEATH	4. SEX
A CITY OF DEATH		SE COUNTY OF DEATH		HAME, RELATIONSHIP, FUR AMERON BAILE	L MAILING AC		1000
	press of California funeral director or person Y, 2800-A S. MAIN, SANTA ANA		1280 s	SAN BERMARDING	O, CA.	Mark Control of the C	Annual Section of the Party of
ACKNOWLEDGMENT OF M	PLICANT   1 hereby acknowledge as applicant that the progozed desprised Section 10376 of the Health and Salvity Code, and was author			eff beaton	n	- þ8/25	/1991
PERMIT NUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI- SIONS OF THE CALIFORNIA HEALTH AND SAFETY GODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT.  HOTE: THE PERMIT UNIS NO HIGH OF DEPOSAL (AUTSDE OF CALIFORNA.	7.00	NO, 98. DATE PERMIT IS	FLOOD	LOCAL REG	STRAR ISSU	G PERMI
NY CHANGE IN DISPOSE	P. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH IF DEATH OCCURRED IN CAUPONNIA RCHD, P.O. BOX 7600, RIVERSI	DE,CA. SDO	PRESS OF REGISTRAR OF ISPOSITION IS TO OCCUR IS HID, P.O. BOX	DISTRICT OF DISPOSITION ANOTHER DISTRICT IN CA	WEEGO,	CA.	D
UTHORIZED DISPO	SITION(S) CHECK APPLICABLE ITEMS			FOR C	ORONER'S	USE ONLY	_
A. BURIAL (INCLU	DES ENTOMBMENT)	E. TEMPORARY ENVA	ULTMENT			-REMAINS LO	
B. CREMATION	OF CREMATED REMAINS OTHER METERY  11A. NAME AND ADDRESS OF CALIFORNIA CEMETER MT. HOPE MEM PARK,	F. DISINTERMENT G. SHEP IN TO CALIFO H. TRANSIT TO OUTS	RNIA		d Address)		CATED
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B. CREMATION  C. DISPOSITION  THAN IN A CE  D. SCHENTIFIC US  BURIAL	OF CREMATED REMAINS OTHER METERY  11A. NAME AND ADDRESS OF CALIFORNIA CEMETER MT. HOPE MEM PARK,  SAN D  12A. NAME AND ADDRESS OF CALIFORNIA CREMAT SECURE CREMATORIUM	F. DISINTERMENT G. SHEP IN TO CALIFO H. TRANSIT TO OUTS RY DIEGO, CA. TORY ANA, CA.	RNIA RDE OF CALIFORNIA 118. DATE BURIED	(Name and 11G. SIGNATURE OF 11	PERSON IN C	CHARGE OF B	JRIAL EMATION
B. CREMATION  C. DISPOSITION  THAN IN A CE  D. SCHENTIFIC US  BURIAL  CREMATION  SCIENTIFIC	OF CREMATED REMAINS OTHER METERY  11A NAME AND ADDRESS OF CALIFORNIA CEMETER MT. HOPE MEM PARK,  SAN D  12A NAME AND ADDRESS OF CALIFORNIA CREMAT SECURE CREMATORIUM 1020 N. FULLER ST., SANTA	F. DISINTERMENT G. SHEP IN TO CALIFO H. TRANSIT TO OUTS RY  DIEGO, CA. TORY  ANA, CA. Y RECEIVING REMAINS	RNIA  IDE OF CALIFORNIA  118. DATE BURIED  128. DATE CREMATED  128. DATE CREMATED	(Name and 11G. SIGNATURE OF 11	PERSON IN CO	CHARGE OF B	URIAL EMATION

RESPONSIBLE FOR COMPLETING AND FORWARDING THE PERMIT WITHIN 10 DAYS OF DISPOSITION TO THE REGISTRAR OF THE DISTRICT IN WHICH DISPOSITION OCCURRED OR THE DISTRICT NEAREST THE POINT WHERE THE CREMATED REMAINS WERE SCATTERED AT SEA. THE LOCAL

EGISTRAR MAY DESTROY ANY ORIGINAL OR DUPLICATE PERMIT AFTER ONE YEAR FROM ISSUE DATE.

#### CITY OF SAN DIEGO, CALIFORNIA

46125

#### MOUNT HOPE CEMETERY 527-3400

From Wilson, Jellrer	Address:	1250 514	Ave . "21	4 3	wolo Visi	19 73 60 CA
Luro windred	Sixtu	eight	15/ no	ollars (\$	The second second	ES ,
In Payment of	reference +	0/	GREG	ONY	Stol	1/2
Lot 30 Grave	10	_ Row	Section	6	Division Block	7
Invoice No.	NOT VALID FOR PURPOSES "PAID" IN THIS SPACE.	TATED UNLESS STAMP	20% Sales Care	67007 77184 —	March 19	_
Acct. No.			80% Sales of Lots Opening/	77184 — 100	105	00
w.o. <u>C - 12160</u>			Closing Burial	77181	58	00
BALANCE DUE			Containers Handling Fee	77182 — 100 77185 —	60	00
			Recording & Misc. Fees	100 77183 —	45	00
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐		0.01.	Pre-Need Trust Sales Tax	63033 9022 — 60101 78390 —	3	85
AC-212 (Rev. 5-84)	ISSUED BY	Buldoles	TOTAL PAID	*_	258	25

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4-14-95

1140		Many 4-	
na Liker Vadither	Funeral, date, time		
Church, Chapel, Graveside		Clarius	west Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day	or an extra charg	pe of \$
will be applied and billed to undersigned			
Var time veteran			
ot 37 Grave 5 Row_	Section	Division	/Block_12_
	- 00		
Grave space & Care Fund	1,1		126 00
Additional spaces and care fund	John		
Opening/Closing & Setup	Und		165.00
Burial Container y m	190		50.00
Handling Fees	91	/	
Flower vases - Marker setting fee			
Recording and filing fee			45.00
Sales taxes			
78103 18A04			386 00
Pald	receipt number		-
		Balance d	ue'
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hereby certify I am the	of samples on about	of the above	named decedent
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and this is your authority to make disposition hat I have the right to make this authorization any liability on account of said authorization hereby authorize the interment in lot I hold under deed.	and I agree to hold and interment.  Signature  Address  City  Telephone	re indicated. I ce	rtify and represent ery harmless from



#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

34

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE FRAN	NT—FRST (GIVEN)	18. MIDDLE DELANO	IC. LAST (FAMILY)	IOMAS	2. DATE OF BIRTH	3. MEIST DEATH 03/24/1995	4. SEX
SAN	DIEGO		58. COUNTY OF DEATH	Control of the last of the las	NAME, RELATIONSHIP, FULL NO INCOMENT HOWARD		
- 4	REMONT MOR	A-FUNERAL DIRECTOR OR PERSON ICLARY: ATTHY AVE., SAN DIE	-1	APPLICABLE S	201-A RUESIN ROLL AN DIEGO, CA 92 A SUMATURE OF APPLICANT—	123	'E SIGNED
ADMONIZEDGMENT OF A		cknowledge as applicant that the proposed disp G76 of the Health and Safety Gode, and was author			Victor me	~ 04/17/	/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	BIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH PROVI- CRIMA HEALTH AND SAFETY CODE. BY FOR THE DISPOSITION SPECIFIED IN MIGHT OF DEPOSAL OUTSIDE OF CALFORNIA.	9A. AMOUNT OF FEE PA 7.00	0 4 / 1 7 / 1	995 D SIGNATURE OF LO	GAL REGISTRAH ISSUIN	IG PERIMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERSON TO SHOW PINAL TOSITION.	P.O. BOX	EGISTRAR OF DISTRICT OF DEATH B D IN CALFORNIA 85222 CA 92186-5222			F DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CAUFO	AMA	
TO PRIZED DISPO	DSITION(S) CHECK A	PPLICABLE ITEMS			FOR COR	ONER'S USE ONLY	Y
B CREMATION C DISPOSITION THAN IN A CI	Œ	DORESS OF CALIFORNIA CEMETE	F. DISINTERMENT' G. SHIP IN TO CALIFO H. TRANSIT TO OUTS		(Name and A		URIAL
FRIAL	Laboration in the Control of the Con	T STREET, SAN DIE	30, CA 92102	11/1/95	. Uni	t)	
CREMATION	12A. NAME AND AC	DDRESS OF CALIFORNIA CREMAT	ORY	128. DAYE CHEMATEL	12C. SIGNATURE OF PER	SON IN CHARGE OF CR	EMATION
SCIENTIFIC USE	13A. NAME AND AD	ODRESS OF CALIFORNIA FACILITY	PRECEIVING REMAINS	13B. DATE RECEIVE	D 13C. SIGNATURE OF PER	ISON IN CHARGE OF FA	ACILITY
TRANSIT		DORESS IN RECEIVING STATE OR CREMATED REMAINS ARE TO BE		148. DATE SHIPPED	14C ADDRESS AND SIGN OF PLACING WITH		CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR O' ENTIFY FINAL PLACE AND CA <u>DISTR</u>		15B. DATE OF DISPOSITION	15C SIGNATURE OF PER CHARGE OF DISPO		NATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



# CITY OF SAN DIEGO, GALIFORNIA



COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

QOO952

Brown STATAREASURERS USE ONLY-

PAYMENT DATE 515-45

PAYMENT REF NO

04/18/95

INVOICE DATE

PAYMENT DUE

AMT PAID:

PERIOD COVERED

FOR INFORMATION CONCERNING YOUR BILLING CONTACES

JOANN WALTS

REF NO: E-12161

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

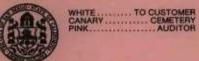
AMOUNT

FRANKLIN THOMAS PA 1177699
LOT 37 GRAVE 5 SEC 1 DIV 1218
OPENING/CLOSING
LINER
RECORDING FEE

165.00

126.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10%. OR \$10, WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT ACET ABOVE White - Customer Copy • Yellow - Remittance Copy NO. 252734



#### MOUNT HOPE CEMETERY 527-3400

The same of the sa	00	206. A \$ 510 % & Major CA			
Lot 3/7 Grave	5 Row Se	ection/	Division Block	2_	
Acct. No	MOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	20% Sales Care 77 80% Sales of Lots 77 Opening/ Closing 77 Burial	007 184 100 184 100 181 100 181		
Pre-Need Lot At Need On Acct		Handling Fee 77 Recording & 77 Misc. Fees 77 Pre-Need 83 Trust 93	100 185 100 183 133 133	00	
Pre-need Trust Gash Gheck AC-212 (Rev. 5-94)	ISSUED BY Rouch	Sales Tax 60 78 TOTAL PAID	101	40	

 $E = \frac{1216}{67007}$  COUNTY OF SAN DIEGO

77181 000072 77182 000072 77183 000072 77184 386.00 165.00 50.00 45.00 126.00 386.00 PAID IN FULL

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4-14-95

BI Romen		ALCOHOLD III	SR	
na T.S. Vault	Fune	eral, date, tim	· Tuesd 4-18	10:30
Church, Chapel, Graveside6	raves	ide :	Goodbody	Mortuary
All Funeral cars must arrive before 3:3	0 p.m. of re	gular work d	ay or/an extra charge of	\$ 150.0
will be applied and billed to undersigne	ed. X	BUK	- Ja	
War time veteran				
Lot Ro	w		Division/Bloc	k_ 10
Grave space & Care Fund			)-6867	8
Additional spaces and care fund				
Opening/Closing & Setup				
Burial Container				250.00
Handling Fees				185.00
Flower vases - Marker setting fee				
Recording and filing fee				45.00
Sales taxes				17.50
		90		872.50
	Paid rece	ipt number	46135	872.50
	-	/	Balance due	X
hereby certify I am the and this is your authority to make disp that I have the right to make this authoriany liability on account of said authoria	rization and i	I agree to he	of the above na pove indicated. I certify old Mt. Hope Cemetery I	and represen
hold under deed,		* 109	Cesile CA	+ Rd
arginature or recorded notices of deed		V619	1 443 1654	Zp God
		Old Sander		
- 12162		Invoice #_		

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	THE PERSON NAMED IN	18 MIDDLE DANTEL	IC. LAST (FAMILY)	ROMERO, SR.	2. DATE OF BIRTH	3. DATE OF DEATH	4. SEX
SAN DIE		- DENTALIS	SE COUNTY OF DEA	TH-OUTSIDE CALIF.,	A NAME, RELATIONSHIP, FULL I	MAILING ADDRESS AND ZIP	100
. GOODBOD	Y MORTUARY: CAJON BLVI	., SAN DIEGO,	CA 92115	LIF. LICENSE NUMBER FAPPLICABLE	332 ARROWHEAD DI SAN DIESO, CA 93 BA SIGNATURE OF APPLICANT	RIVE 2119 (Person taking person) 88, DATE	
ACRHOWLEDGMENT OF A	PPLICARI Section 10	376 of the Health and Salety Code, and a	sed disposition stated herein in one of the eas authorized pursuant to Section 7100 of	the Health and Salety Code:	Outere m	04/17/	
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	JED IN ACCORDANCE WITH P ORNIA HEALTH AND SAFETY BY FOR THE DISPOSITION SPEC BIBIN OF DISPOSAL OUTSIDE OF CALL	CODE CAFIED 7 00	04/17/19	製製 *9505T950° L 95 ト	OCAL REGISTRAR ISSUING	G PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL POSITION.	P.O. BOX		1 0		OF DISTRICT OF DISPOSITION— II IN ANOTHER DISTRICT IN CAUR		
HORIZED DISP	POSITION(S) CHECK A	PPLICABLE ITEMS			FOR COL	RONER'S USE ONLY	
B. CREMATION	11A NAME AND AN MOUNT HOP	DORESS OF CALIFORNIA CE	METERY	ORNIA SIDE OF CALIFORNIA	(Name and		
	3751 MARK	ET STREET, SAN	DIEGO, CA 92102	17/18/93	· War	1	
CREMATION	2	L Dealer	REMATORY	12B. DATE CREMATI	ED 12C. SIGNATURE OF PER	SON IN CHARGE OF CRE	MATION
SCIENTIFIC			CILITY RECEIVING REMAINS	13B. DATE RECEIV	ED 13C SIGNATURE OF PER	SON IN CHARGE OF FA	CILITY
TRANSIT		DORESS IN RECEIVING STAT CREMATED REMAINS ARE T		148. DATE SHIPPE	D 14C ADDRESS AND SIGN OF PLACING WITH	NATURE OF PERSON IN ( THE CARRIER	CHARGE
- SCATTERING AT SEA OR DISPOSITION OTHER	FICIENT TO IDE	REST POINT ON SHORELINE, ENTIFY FINAL PLACE AND CA	OR OTHER DESCRIPTION SUF- DISTRICT OF DISPOSITION	158, DATE OF DISPOSITION	15C. SIGNATURE OF PER CHARGE OF DISPO		HIMBED

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

From: B D ROWERD SE		powhead S.D.	CA. 9
eight lumbre	d seventy two 50,	100 Dollars (\$ 82.5	0,
In_fullPayment of	interment of Bor		
. 1751 Grave	Row Section	Division Block	10
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT	67007 Raies Care 77184	La Control
Acct. No.	80% 5 of Lot	Sales 100	
E - 12162	Openi	ing/ 100 375	00
W.O	Burial	100 250	00
BALANCE DUE	Conta	100 / 85	00
	5,00000	ling Fee 77185	
	Misc. Pre-N	50000	00
Pre-Need Lot	Trust	9022	50
5436	V. Raboble	78390	-
AC-212 (Rev. 5-94)	ISSUED BY TOTAL	PAID \$ 872	50

MT. HOPE CEMETERY
INTÉRMENT ORDER

Just for City of San Diego

· Sur o	
11 / /	subject to your rules and regulations, to inter the remains
of tearly	scalante
ina <u>Linek</u>	Funeral, date, time
Church, Chapel, Graveside	Mortuary.
All Funeral cars must arrive before 3:30 p	o.m. of regular work day or an extra charge of \$
will be applied and billed to undersigned.	
War time veteran	
Lot 103 Grave Row	Section Division/Diank 10
Grave space & Care Fund	Execut (20075)
Additional spaces and care fund	
Opening/Closing & Setup	DAID 373.00
Burial Container,	FAID 190.00
Handling Fees	MAY 1 6 1995 /45.00
Flower vases - Marker setting fee	A'
Recording and filing fee	MT. HOPE CEMETERY 45.00
Sales tangs AL WALLY D	CITY of SAN DIEGO, CALIF 13.30
where hill gtime!	Total Due 768. 30
la pearla give les p	Paid receipt number 46/34 283.30
we in the late of	R-46233 Balance due 85.00
I hereby certify am the	of the above named decedent
that I have the right to make this authorize	ition of remains as above indicated. I certify and represent ation and I agree to hold Mt. Hope Cemetery harmless from
any liability on account of said authorizati	ion and interment.
I have been such a dear that to be a second to be a	~
I hereby authorize the interment in lot I hold under deed.	611 So Home stead Dr.
Signature of recorded holiser of deed	Brixter 4456401
Paid in full	14) 218-829-6164 ZD COOK
5-16-95	(w) 218-829-2825
- 12163	Invoice #_
Work Order # E 12105	Acet.#
A CONTRACTOR OF THE PROPERTY O	

JOHN PAUL SULLIVAN R DARLENE SULLIVAN 4315 BETA ST (619) 264-7458 SAN DIEGO, CA 92113 Bank of America (619) 667-3220 National City Branch 0171 235 East 8th Street National City, CA 91950 Memo 11 2 2000 6 6 1 10 1 29 ... 0 1 7 1/2 0 60 27 11° mor S



THE CITY OF

# SAN DIEGO

MT. HOPE CEMETERY • 3751 MARKET STREET • SAN DIEGO, CALIFORNIA 92102

Real Estate Assets Department

Business hours 8 a.m. to 4 p.m.

527-3400

Monday through Friday • Gates open daily

May 18, 1995

John Sullivan 611 So. Homestead Drive Baxter, Mn 56401

Dear Mr. Sullivan:

We received your payment of \$485.00, check #0130, final payment on the pre-need trust for Pearl Escalante and have processed the paperwork.

Enclosed is your receipt for that payment, a copy of the receipt for the payment you made on April 17, 1995 at our office and a copy of the pre-need paperwork for her stamped "Paid In Full" for your records.

If you have any questions, or if we may be of any further assistance to you, please contact us again.

Sincerely,

Joann Waits, Cemetery Manager

enclosures



,	CIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR	CITY OF SAN DIEGO, CALIFORNIA  MOUNT HOPE CEMETERY 527-3400		462	23
F		ran Address: 4315 Beta hty-fine a no/1000 need trust for Rear		landings landings collars (\$ 485.00	95 921 8,
U	ot 103 Grave _	Row Se	ection	Division /C	)
					1
A W	1.0. E-12.16.3  ALANCE DUE	PAID A  MAY 16 1995	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burlal Containers Handling Fee Recording & Misc. Fees	67007 77184 100 77184 100 77181 100 77182 100 77182 100 77183 100 77183 63033 485	

E 12163

Pice Need for City of San Diego

Date 4-17-95

, fearl &	ocalante	1900
a Linek	Funeral, date, time	
hurch, Chapel, Graveside		Mortuary
Funeral cars must arrive before 3:30 p	.m. of regular work day or an ext	ra charge of \$
ill be applied and billed to undersigned.		
/ar time veteran		THE REAL PROPERTY.
ot/03 Grave	Section I	Division@ak 10
		10 1
rave space & Care Fund	effect (D-284	(d) _ (D_
dditional spaces and care fund		
pening/Closing & Setup	FAIR	37500
urial Container		190.00
		11/5/
andling Fees	MAY 16 1995	175.00
ower vases - Marker setting fee	//	
ecording and, filing fee	MT. HOPE CEMET	45.00
ales taxes AL WALVE D	CITY of SAN DIEGO, C	ALIE 1330
a Pollock The Ba	Total Due	768.30
when his got in head.	aid receipt number 4613	283 30
be all get in the P		UR5 (1)
w wh	R-46223 Ba	lance due 85.00
	of th	e above named deceden
nd this is your authority to make dispos at I have the right to make this authoriza	ation and I agree to hold Mt. Hope	ed. I certify and represent Cemetery harmless from
ny liability on account of said authorizati	on and interment.	1 Bal - 0
	at (x). 1)	()
hereby authorize the interment in lot I old under deed.	The Party	My Th
	151 So How	lestead Vr
gneture of recorded holder of deed	Faxter	MU5640
Paid in Sul	(H) 218-829-6	164 Ep Cos
5-16-95	(1) 518-829-	-2825
19169	Invoice #	-10010
E 14103	antones w	

OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR  From: La Julivari  In Payment of L	CITY OF SAN DIEGO, CALIFORNIA  MOUNT HOPE CEMETERY  527-3400  Address: 43/5 Deta  Address: 43/5 Deta  Address: 43/5 Deta  Address: 43/5 Deta	Sate: J	461 Souther 11 92113 collars (\$ 213.	136 IN 254U/ 1895
Lot/ Grave	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	ction	Division Block	10
Acct. No	"PAID" IN THIS SPACE.	20% Sales Care 80% Sales of Lots Opening/ Closing	77184 100 77184 100 77181	
BALANCE DUE		Burtal Containers Handling Fee Recording &	100 77182	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	V//>/	Misc. Fees Pre-Need Trust Sales Tax	77183 63033 9022 60101 78390	30
AC-212 (Rev. 504) 129	ISSUED BY (A) L	TOTAL PAID	-283	30

Mr. & Mrs. John P. Sullivan 611 South Homestead Drive Baxter, MN 56401 April 9th, 1994

Mt. Hope Cemetery 3751 Market Street San Diego, Calif. 92102

Pro-Need-Trust

Att: Norman Ferguson

Dear Mr. Ferguson:-

Per our phone call to you this date, we here send to you our check #0126 in the amount of \$485.00.

When we visited with you a week ago, at your office, you informed us that the costs for Lot #103, per copy attached would total \$768.30. You also informed us that if we paid \$200.00 down, the balance could be paid in 24 monthly installments. Our enclosed check for \$485.00 represents the \$200.00 down and a pre-payment for the next 12 months. This leaves a balance due of \$283.30.

Mrs. Sullivan's aunt, Pearl Escalante, the owner of Lot 103 Division 10, will be the user of your services for Lot 103 in the timing yet to be known.

Please acknowledge and verify to us. Thank you.

Phone (W) 218-829-2825

(H) 218-829-6164

200 DN

23.00 MO FOR 24 MO.

MT. HOPE CEMETERY
3751 MARKET STREET
SAN DIEGO, CA 92102

4-1-94 Date

NORMAN FEREUSON Estimate Given By:

\*\*The above charges are an estimate only. The figures shown reflect the current prices and are subject to change without notice.

200°C + 285°C 
48/95=

\$2833

#### OFFICIAL RECEIPT

From

Invoice No. \_



Payment of.

Grave

CITY OF SAN DIEGO, CALIFORNIA

### MOUNT HOPE CEMETERY

527-3400

Row

NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.

Address

ISSUED BY

Date: H	ollars (\$	2/3	. 1995
Section	92	Division Block	10
CREDIT	67007	Controlle	
20% Sales Care	77184 -		-
80% Sales	100		VIII.
of Lots	77184 -		
Opening/ Closing	77181 -		
Burial	100		
Containers	77182 -		-
100 Sept. 100 Se	100		1
Handling Fee	77185		
Recording & Misc. Fees	77183	-	
Pre-Need	63033	7/3	3
Trust	9022 -	-	-
Sales Tax	60101 78390 —		
TOTAL PAID	\$	283	30

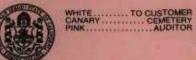
BALANCE DUE		-	
Pre-Need Lot  Pre-need Trust	At Need Cash	00	On Acct Check
AC-212 (Rev. 5-94)	1	2	9

T 1-711-9

CITY OF SAN DIEGO, CALIFORNIA

A STATE OF THE PARTY OF THE PAR

46223



#### MOUNT HOPE CEMETERY 527-3400

From John Ju Fales Rend	Min red sig	Address: 4315 Bita	Date:	ollars (\$	425.00	11.
Lot /03	Grave	Flow Se	action	- (3	Division / Ô	
Acct. No	3	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burtal Containers  Handling Fee Recording &	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 —		
Pre-Need Lot	On Acct Check	18SUED BY Dre Rouch	Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	77183 — 63033 9022 — 60101 78390 —	485 00	

	·
MT HO	PE CEMETERY
SOC MEED INTERM	ENT ORDER
PRE-NEED INTERM	LIVI ONDER
TRUST City	of San Diego Date 4-17-95
LOT CI	Date
You are hereby authorized and instructed, sut	bject to your rules and regulations, to inter the remain
OF GARCIA, INDA	
	Funeral, date, time
VeutVLiner	: Mortuan
	of regular work day or an extra charge of \$ 150.0
will be applied and billed to undersigned.	
War time veteran	
Lot 45 Grave 6 Row	Section3 Division/Black/_2_
Grave space & Care Fund	795.0
Additional spaces and care fund	
Opening/Closing & Setup. * Paul	un fuu * 375.0 14-94 190.0
Burial Container 5-7	4-97 190,0
Handling Fees	145.0
Flower vases - Marker cetting fee	naniza flower as
Recording and filing fee	Vase 45.
Sales taxes	
	Total Due
Paid o	ecelpt number B-46137 -587.0
/ 333	Balance due LOOO
I hambur and the land of San An.	of the above named deceder
and this is your authority to make disposition	of remains as above indicated. I certify and represer
any liability on account of said authorization a	and I agree to hold Mt. Hope Cemetery harmless from and interment.
	1 walls -
I hereby authorize the interment in lot I hold under deed.	Signetire
Tario di Noti Genta.	Address
Signature of recorded holder of deed	4177 Wightman
	584-4229
/	Telephone
- 12164	Invoice #
Work Order # E	Acct #

PY-593 (Rev. 8-92)

E-12164

Ramon Robles (for Indalecia Garcia)

NAME

ACCT. NO.

ADDRESS	177 Wightman St., SD 92105 RATING	LI	MIT							
DATE	ITEMS	DEBIT V		4	CREDI	T	BAL	ANC	E	
9	Opened Pre Need Lot & Trust (for mother)									
	Lot 95; Grave 6; Sec. 3; Div. 12	79	5	00				7	95	00
	Trust:									
	Opening/Closing; Liner; handling fees;	79	2	00				1 5	87	00
	recording fee; sales tax on liner; galvanized									
K.	flower vase.									
4-17 9	Receipt 46137		П		Т	5 87	00	100	0	00
5/8/9	5 Rec# 46197 Coupon 1					42	a	9	58	1
13 9		5	檢			42	00	9	16	
136 9	5 CAN 3 R-4647A	10				Ha	OD	8	74	1.
128 9	CPN # 4 R# 46561					42.	00	8	32	-
121 95	CPM # 5,6,7 R# 46831 to trust					126	00	1	DE	6
120 9	CAN# 8,9,10 R# 47107					126	157	3	80	1
23 90						84	400	4	90	1
9	11 13V 14 R-					81	00	4	12	0
	0 11 15,16,17 R-47827					126	2 10	2	80	11
5-14 9	7 "18,19,20,21,22,23,24 R-48574					250	The second		8	
	paid in fill	30								
AVERY FORM N	25-204 ROBLES, Ramon pre ne	ed lo	ot	& ti	cus	t	PR	INTED	NUS	A

AVERY

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY 527-3400

From Ramon Robles	Address: 4/77 Wigh	tman At	S.D. M 92101
in Part Payment of Pru	need trust and	Clar G	ollars (\$ 120.00 )
Lot 95 Grave	Le Row	Section 3	Division /2
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPER PAID IN THIS SPACE.	O CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee	67007 77104 100 77104 100 77787 100 77182 100 77185
Pre-Need Lot D At Need D On Acct D Pre-need Trust D Cash D Check D 478(	ISSUED BY Catina Durge	Recording & Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	100 77193 83033 9022 99101 78380 \$ 120 00

#### OFFICIAL RECEIPT

WHITE.....TO CUSTOMER
CANARY CEMETERY
PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA

#### MOUNT HOPE CEMETERY 527-3400

pamon Ro	HIA		4177 Win	h tmnn At	Dan Di	1600 77	19 10
to nuo mu	naved it	eghty DO	and no	100 mr	Dollars (\$	286	0)
95	ment of	ndallora	Garcia	3		Division	12
Invoice No	Grave	NOT VALID FOR PUTPAID IN THIS SPA	ROW	Section  CREDIT 20% Sale 20% Sale of Lots Opening Closing Burial Contains Handling	100 77184 — 100 77187 — 100 77182 — 100	_ Block	-
Pre-Need Lot At Need Pre-need Trust Cash AC-212 (Rev. 5-94)	On Acct On Check 9		itina Dur	Recordin Misc. Fee Pro-Need Toast	19 A 100 77183 — 63033 9022 — 8 90101 78390 —	280	00

# WHITE TO CUSTOMER CANARY CEMETERY AUDITOR

In Payment of Pre-need	Prust	Dollars (\$ 130100 )
	RowSection3	Division /2
Invoice No		57007 77164 100 77184 100 77181 100 77182 100 77185 100 77185 100 77185 60101 76390



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

			Date:	0 5	0	19 7
From Roman Robles	Address:	4177	Wightwon	St		92109
In part Payment of	me-held	Cot	and	Dollars (\$ _	1 Jon	
Lot 95 Grave	6	Row	Section	3	Division Block	12
Invoice No	NOT VALID FOR PURPOSE "PAID" IN THIS SPACE.	STATED UNLESS STA	AMPED CREDIT 20% Sales Care 80% Sales	67007 77184 —	42	00
Acct. No E- 12/64			of Lots Opening/ Closing Burist	77184 — 100 77181 —	ci.f.	
BALANCE DUE 832 00			Containers Handling Fee Recording &	77182 — 100 77185 —	1000	
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐			Misc. Fees Pre-Need Trust Sales Tax	77183 — 63033 9022 — 60101		
AC-212 (Rev. 6-94) 456/	ISSUED BY	alobles	TOTAL PAID	78390 —	42	00



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

		Date:	4-11		995
From Ramon Robbs	Address: HITT Wight	nan St.	San	Dirsos	AA
Fine hundred e	ighty-server & no/11	20-	ollars (\$ =	587.00	)
n cost Payment of Pro-	need lat a trust	for In	dale	ia Co	ncie
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ot 95 Grave	6 Row Se	ection. 3		Division /	2
nvoice No	NOT VALID FOR PLIPPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots	87007 77184 —— 100 77184 ——	587	00
N.O. E-13164 BALANCE DUE \$1000,00	Child The College	Opening/ Closing Burial Containers	77181 — 100 77182 — 100		
	The state of the state of	Handling Fee Recording & Misc. Fees Pre-Need	77185 — 100 77183 — 63033		
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	1 100 -1	Trust Sales Tax	9022 90101 78390		
AC-212 (Rev. 5-94)	ISSUED BY	TOTAL PAID	*_	587	00



WHITE. TO CUSTOMER CANARY CEMETERY PINK AUDITOR

				Date: _///	1000	, 19_7-	
From Ramon Ke	bles	Address:	4177 6	Vightman	1 43	t. 8.0.90	1/2
SIS ME	For	ty Swe	2 & 00/00		Dollars (\$	42.00	)
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Indoleció	Har	va	CI - CALL	0			3
Lot 95	Grave	le	Row	Section		Division Block	
Acct. No.  W.O. F- 12/14  BALANCE DUE # 95	8.00	NOT VALID FOR PURP "PAID" IN THIS SPACE	OSESTATED UNLESSS	CREDIT 29% Sales Care 80% Sales of Lots Opening/ Closing Buriat Containers Handling Feo Recording & Misc. Fees	67007 77184— 100 77184— 100 77181— 100 77182— 100 77185— 100 77185— 100 77185—		
Pre-Need Lot   At Need   Pre-need Trust   Cash   AC-212 (Rev. 5-94)	On Acct Check Check	ISSUED BY	clark	Pre-Need Trust Sales Tax TOTAL PAID	83033 9022 — 60101 78390 —	43,0	2

7-7

Date

From: P. P. J.	1001	Address:	419994	Shitmore	Dollars (\$	18, 90	
In Payment	t of	he med	Let Itres	st Indol	ALA:	Harri	4
Lot 9.5	Grave	6	Row_	Section		Division Block	12
Acct. No	4	NOT VALID FOR PURPI "PAID" IN THIS SPACE	DSESTATED UNLESS ST.	90% Sales of Lots Opening/ Closing Burial Containers Handling Fee	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 —	35 7	00
Pre-Need Lot	On Acct Check	ISSUED BY	melon	Recording & Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	100 77183 — 63033 9022 — 60101 78390 —	43	00



Invoice No. \_

BALANCE DUE

Pre-Need Lot

re-need Trust

212 (Rev. 5-94)

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

Payment of

At Need .

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Address: 4177 Wight	Date:	1 9	9 gard	1945		
Address: HI Wight		Dollars (\$ 42.00				
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- Janes	TOTAL PAID	-	42	00		



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

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11007 ISSUED BY WELLOWER TOTAL PAID 1 10/10	Acct. No	O LL O LA ARRO	20% Sales Care 7718 80% Sales 10 of Lots 7718 Opening/ 10 Closing 7718 Burial 10 Containers 7718 Handling Fee 7718 Recording & 10 Misc Fees 7718 Pre-Need 6303 Trust 9002 Sales Tax 6010 7839	/36 00

## OFFICIAL RECEIPT



WHITE TO CUSTOMER CANARY CEMETERY FINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA

#### MOUNT HOPE CEMETERY 527-3400

47327

		Date:						
From:	Address:	TITLE INCHES	MALI SI	-	CH 750	Chillian.		
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Pre-need Trust Cash Check	Marine Marine 1888	may Jung!	Sales Tax	60101 78390 —	275.	1		
AC-212 (Rev. 5.94)	ISSUED BY	-	TOTAL PAID		27	100		



WHITE.....TO CUSTOMER CANARY .....CEMETERY PINK .....AUDITOR

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STATE OF STREET	AMOUNT	30.73
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[3 Sheck (/) if you have a new address and please attach.	TOTAL	\$

# MT. HOPE CEMETERY

# INTERMENT ORDER

A. City of	San Diego	
econd a of doruble city of	Date 4/17	195
Burn ought.		
You are hereby authorized and instructed, subj	ect to your rules and regulations, to inte	r the remains
of Virginia	Candler	
in a dbl. Crept Fu	meral, date, time 4/21/95 F	71@1P
Church Chapel Graveside Through & G	nave. Rappalale	Mortuary.
All Funeral cars must arrive before 3:30 p.m. of		s 15000
will be applied and billed to undersigned.	0 110 0	
War time veteran		
Lot 86 Grave 3 Row	Section / Division/Bloc	12
60 0	neid (E-10042)	2
Grave space & Care Fund	a. W. C	~
Additional spaces and care fund	0 1/6 101-5	-
Opening/Closing & Setup	Othe-oped (5-11963)	0_
Burial Container	Bre- Deed (E-10042)	0
Handling Fees		0
Flower vases - Marker setting fee		0
Recording and filing fee	Pro-Dend (8-11963)	0
6-111		0
	Total Due	B
The second second		0
Paid rec	ceipt number	H
0	Balance due _	<del>y</del> _
I hereby certify I am the X Soviet and this is your authority to make disposition of that I have the right to make this authorization and liability on account of said authorization and	ind I agree to hold Mt. Hope Cemetery h	and represent
I hereby authorize the interment in lot I hold under deed.	Leroy Caroller	gr.
	Address	
Bignature of recorded holder of deed	City DIEYO CA T	2/02 Zp Code
	3 64-6470 Telephone	
<b>=</b> 12165	Invoice #	
Work Order # E 12100	Acct. #	
DV CON ID-11 A AN		

E12165

# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS 1A. NAME OF DECEDENT-FIRST (DIVEN) 1B. MIDDLE TC. LAST (FAMILY) 2. DATE OF BIRTH DATE OF DEATH 4. SEX 6471971949 Candler Virginia 8. NAME, RELATIONSHIP, FULL MAILWIS ADDRESS AND ZIP CODE 5A. CITY OF DEATH 58. COUNTY OF DEATH-OUTSIDE CALIF., OF INFORMANT ENTER STATE National City San Diego Leroy Candler, Jr. - Son 7A. TYPED NAME AND ADDRESS OF CALIFORNIA - FUNERAL DIRECTOR OR PERSON ACTING AS SUCH 78. CALIF, LICENSE NUMBER 4857 Lyon St. -IF APPLICABLE Anderson-Ragsdale Mort .: 5050 Federal Blvd. San Diego, CA 92102 San Diego, CA F-1329 BA. SIGNATURE OF APPLICANT—Person taking permit; BB. DATE SIGNED I hereby advanceding an applicant that the proposed disposition stated become a one of the dispositions authorized by 04/18/1995 ADDITIONAL EDGMENT OF APPLICANT Section 10376 of the Health and Safety Code, unit was authorized jurisment to Section 7100 of the Health and Safety Code THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI-WELLED. 9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT 9A. AMOUNT OF FEE PAID PERMIT SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE 9505463 AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED AUTHORIZATION OF IN THIS PERMIT \$7.00 LOCAL REGISTRAR NOTE: THIS PERMIT CIVES NO MIGHT OF DISPOSAL OUTSIDE OF CALIFORNIA. 9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH-ADDRESS OF REGISTRAR OF DISTRICT OF DISPOSITION-ANY CHANGE IN DISPOSE IF DEATH OCCURRED IN CALIFORNIA IF DISPOSITION IS TO OCCUR IN ANOTHER DISTRICT IN CALIFORNIA TION REQUIRES A NEW PERMIT TO SHOW FINAL Vital Records; P.O. Box 85222 DISPOSITION. San Diego, CA 92186-5222 HORIZED DISPOSITION(S) CHECK APPLICABLE ITEMS FOR CORONER'S USE ONLY A. BURIAL (INCLUDES ENTOMBMENT) E. TEMPORARY ENVALILTMENT I. DISPOSITION PENDING-REMAINS LOCATED AT (Name and Address) B. CREMATION F. DISINTERMENT DISPOSITION OF CREMATED REMAINS OTHER G. SHIP IN TO CALIFORNIA THAN IN A CEMETERY SCIENTIFIC USE H. TRANSIT TO OUTSIDE OF CALIFORNIA 11A. NAME AND ADDRESS OF CALIFORNIA CEMETERY DATE BURIED 11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL Mt. Hope Cemetery; 3751 Market St. BURIAL San Diego, CA 12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY 12B. DATE CREMATED 12C/RIGNATURE OF PERSON IN CHARGE OF CREMATION CREMATION N/A 13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS 13B. DATE RECEIVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY SCIENTIFIC N/A USE 14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE 14B. DATE SHIPPED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED OF PLACING WITH THE CARRIER TRANSIT N/A 15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUF-15B DATE OF 15C. SIGNATURE OF PERSON IN 15D. LICENSE NUMBER SCATTERING AT SEA FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT OF DISPOSITION CHARGE OF DISPOSITION OF CREMATED RE DISPOSITION MAINS DISPOSER DISPOSITION OTHER

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

THAN IN A CEMETERY

N/A

-IF APPLICABLE

#### INTERMENT ORDER

City of San Diego

Date 4/17/95

	subject to your rules and regulations, to inter	
of William	- William July Indian	3987
in a Madia just	Funeral, date, time Thus 4/a0/95	(W)
	A COLUMN TO THE PARTY OF THE PA	_ Mortuary.
All Funeral cars must arrive before 3:30 p.n	m. of regular work day or an extra charge of	13000
will be applied and billed to undersigned.	Ellip ada OG	suso_
War time veteran	(	
Lot 49 Grave // Row_	Section 3 Division/Block	12
Grave space & Care Fund		795.00
and the control of th		2
Additional spaces and care fund	P3 11	27519
Opening/Closing & Setup	- /-111/	MAM
Burial Container	DEC-3 0 2005	14510
Handling Fees	UEC 3 0 2005	DI DI
Flower vases - Marker setting fee	THOPE CEMETERY	1500
Recording and filing fee	HOPE CEMETERS	#12 20
Sales taxes	- "LICHY	10.30
	Total Due	1000.00
Pai	id receipt number 07 40/38	700.00
	Balance due	1163.30
I hereby certify I am the X 7 / Wolf	of the above nam	
that I have the right to make this authorizati	on of remains as above indicated. I certify a ion and I agree to hold Mt. Hope Cemetery has	armless from
any liability on account of said authorization	and interment.	
I hereby authorize the interment in lot I	X/10/a Ca Cruso	
hold under deed.	V (818 K Vorlana	St. IIIE
Signature of recorded holder at deed	solon AliniCa	92139
Gignature of recorded holder of deed	97/100 1175-5790	Zip Code
	Taispiline	
- 12166	Invoice # 252,843	
Work Order # E 12100	Acct. # 084977	
DV 500 (Day 0.00)	note # O D + + + 1	

W.O.# E-12166

MT. HOPE CEMETERY

# NOTE

s 1163.30	San Diego, Calif	ornia april 17	19.95
	the sum of Eleven homes , the sum of Eleven homes , 20, 1995	es to pay San Diego City Treaded Lixty Shru \$ 3	surer, or order at DOLLARS unpaid principal
Should this note not be paid when due accrue at the rate indicated above. Princip will be liable and consents to renewals, no maturity, and waives presentment, demanders on who signs this note agrees that recontained herein. If any action be institut may fix as attorney's fees.	e, it shall thereafter bear inter oal and interest are payable in eplacements and extensions nd and protest and the right ecourse may be held against	lawful money of the United S of time for payment hereof b to assert any statute of limita his/her separate property for	tates. The maker before, at or after ations. A married or any obligation
Part II, Chapter I, Article 2, Par authorizes the removal of any remainder of the Part Name 128 Viola & Gus Address 1818 Doci authorizes Number 1818 CALIFORNIA DRIVER LICENSE NUMBER 1818			

E 12166 CITY OF SAN DIEGO, CALIFORNIA OFFICIAL RECEIPT AT-NEED PURCHASE WHITE ..... TO CUSTOMER 59521 CEMETERY MOUNT HOPE CEMETERY (619) 527-3400 -30 -05 Washing TON Oregon 619 255-8601 4575 From: Address: Dollars (\$ 163.00 INVOKED (1995 Payment of in. Blk/ Row 69 ACCT# Div Sec Lot Grave 084977 E-12166 Invoice No. NOT VALID FOR PURPOSES STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT -67007 Acct. No. 20% Sales Care 80% Sales 77184 100 W.O. of Lots 77184 DEC 3 0 2005 Opening/ 100 BALANCE DUE Closing 77181 Burial 100 Containers 77182 MOUNT HOPE ( 100 Handling Fee Money Order 77185 Recording & 100 163 00 Charge Misc. Fees 77183 Sales Tax 60101 - Check 78390 163 00 AC-212A (11-05) TOTAL PAID

This information is available in alternative formats upon request





#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

A. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMILY)			E OF DEATH 4. SEX
William		Eugene	Wash		0010114340 011	12°/1995" H
SA. OTTY OF DEATH			EB. COUNTY OF DEAT	H-OUTSIDE CALIF. B.	NAME, RELATIONEMP, FULL MAILING A	DORESS AND I'V CODE
San Diego		San Diego		Flora Guss- Moth	er	
			PERSON ACTING AS SUCH 7B. CA	C ADDITION D	818 Dorlana ST.	
		a & Burial Cha	pel	12011/1000055	San Diego, CA 92139	
5880 E1 C		San Diego, CA			SIGNATURE OF APPLICANT POSICE LAND	
ACKNOWLEDGMENT OF A	Section 10	376 of the Health and Safety Code, an	opened disputation stated herein a one of the of was authorized oursume to Section 7100 of the	ir Health and Safety Code.	Markal Jardur	04/18/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT, NOTE: THIS PERMIT GIVES IN	ORNAL HEALTH AND SAFET TY FOR THE DISPOSITION SP O RIGHT OF DISPOSAL OUTSIDE OF C	ECIFIED \$7.00	M. Sanders 04/18/1995	9505269	GISTRAR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERSONS O SHOW FINAL POSITION.	Vital Rec	EGISTRAR OF DISTRICT OF IN CALIFORNIA COTOS—P.O. BOX 0, CA 92186—\$2	85222		DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CAUFORNIA	
HORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS		72 740	FOR CORONER'S	S USE ONLY
B. CREMATION		ANS OTHER	E. TEMPORARY ENVA	RNIA	I DISPOSITION PENDING (Name and Address)	3-REMAINS LOCATED AT
BURIAL		Cemetery, San		400 As	11C. SIGNATURE OF PERSON IN	CHARGE OF BURIAL
CREMATION		vetal y	un dealer	128. DATE CREMATED	12C. EMNATURE OF PERSON IN C	CHARGE OF CREMATION
	THE MALE AND AL	A STATE OF THE PARTY OF THE PAR			I are supplywing as pencent by	
SCIENTIFIC USE	- 13A. 16AME AND AL	DORESS OF CALIFORNIA I	FACILITY RECEIVING REMAINS	13B. DATE RECEIVE	TIG. SIGNATURE OF PERSON IN T	CHARGE OF FACILITY
The state of the s	14A. NAME AND AE		ATE OR COUNTRY WHERE	13B. DATE RECEIVED	14C ADDRESS AND SIGNATURE COF PLACING WITH THE CARE	OF PERSON IN CHARGE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



#### CITY OF SAN DIEGO, CALIFORNIA

# MOUNT HOPE CEMETERY

46138

From: Handle Handle	Address: 4818 Diena	Date:	1115 10 92
In Payment of	and to a willing	Dollar	(\$ 400.00 )
Lot 109 Grave	//RowS	ection	Division Block
Acct. No.  M.O. F- 121140  BALANCE DUE 11113 20  Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 7718 80% Sales Care 7718 80% Sales Care 7718 00 pening/ 11 Closing 7718 Closing 7718 Containers 7718 Handling Fee 7718 Recording & 10 Misc. Feea 7711 Pre-Need 6300 Trust 900 Sales Tax 6010	000
NC-212 (Rev. 5-94)	ISSUED BY	TOTAL PAID	400.00

#### INTERMENT ORDER

	OPE CEMETERY
₽ INTERN	MENT ORDER
Asherson center INTERN	of San Diego
beaut, c	Date 4/18/95
, pidt.	
You are hereby authorized and instructed, s	ubject to your rules and regulations, to inter the remains
of Emma B.	Neumann & 4-204
ina ash vault	Funeral, date, time / this week) A. Y. D.
Church, Chapel, Graveside	: Family Mortuary
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge of \$
will be applied and billed to undersigned.	
War time veteran	The production of the latest the
1	- Section / Division/Black /2
Lot 4 Grave 4 Bow	Olicion Division allouit
Grave space & Care Fund	e-Dard E-6219 D
Additional spaces and care fund	AID O
Opening/Closing & Setup	AID 105.00
Burial Container	55.00
Handling Fees APR	18 1995 60.00
Flower vases - Marker setting lee	OF OFMETERY OF
Recording and filing fee	AN DIEGO, CALIF 45.00
Sales taxes	385
	Total Due 268.85
Deld	receipt number 811# 46139 268.85
·	~
negce Tour	Colobart Balance due
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization.	n of remains as above indicated. I certify and represent n and I agree to hold Mt. Hope Cemetery harmless from and interment.
	· To Willahat
I hereby authorize the interment in lot I hold under deed.	Signature X. Xuvull
INIU MINUSI UESU.	15200 Marks Kd
Signature of recorded holder of deed	- Columbia Station C
/	14-238-7436 249
- 12167	Invoice #
Work Order # E	Acct. #
PY-583 (Rev. 8-92)	

E 12167

(Controlled Spirits)

OHIO DL# QB776656 Ex: June 95

# WELLS FARGO BANK

THE PERSON NAME OF PERSON PARTY OF PERSON

1244 10-04 1220(7)

H DIESIO, CA 90100

1220(7)

19.9

ANY TO THE ONCERCH OF MIT. & Spe Cemetry

EMMA B. NEUMANN PH. 619-299-5849 1614 CYPRESS AVE. SAN DIEGO, CA 92103

MEMO

The state of the s

CLEEDO SUFFEE DESE PROSONE



#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE B.	IG. LAST (FAMIL	o Name	2. DATE OF BIRTH 3. DATE OF DEATH 4. St MONTH, DAY, YEAR MONTH, DAY, YEAR 12/12/1894 01/22/1995 F
SA. CITY OF DEATH	SINTION		5B COUNTY OF D ENTER STATE	CELLO	6. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMANT SALESAL BURNE, BRIDGERAL DIRECTORS
	ERKLEY-HITCHE	THE RESERVE OF THE PROPERTY OF	RSON ACTING AS SUCH 78.	—IF APPLICABLE	CLEVELAND, OR 44144
ACKNOWLEDGMENT OF A	TO seems 1 hereby a	N DIEGO, CA 92103 chrowledge as applicant that the propos			8A. SIGNATURE OF ASPLICANT—Person taking permit, 8B. DATE SIGN
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE GALIF AND IS THE AUTHORIT IN THIS PERMIT	\$76 of the Health and Saleth Code, and wo WED IN ACCORDANCE WITH PR ORMAN HEALTH AND SAFETY C Y FOR THE DISPOSITION SPECI DIRECT OF DEPOSAL OUTSEX OF CALFF	PA. AMOUNT OF FE	E PAID 98. DATE PERM 04/17/1994	
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW TO SHOW FINAL LPOSITION.	IF DEATH OCCURRE	GISTRAR OF DISTRICT OF I D IN CAUPORNIA 22, SAN DIEGO, CA	Contraction of the Contraction o		AR OF DISTRICT OF DISPOSITION— CCUR IN ANOTHER DISTRICT IN CALIFORNIA
A. BURIAL (INCLU			E TEMPORARY E  F DISINTERMENT  G SHIP IN TO CA  H TRANSIT TO C		FOR CORONER'S USE ONLY  I. DISPOSITION PENDING—REMAINS LOCATED (Name and Address)
BURIAL		DORESS OF CALIFORNIA CER INSERV, 3751 MAJOCHY CA		118. DATE BURE	SED 11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL
CREMATION	12A NAME AND AC	DDRESS OF CALIFORNIA CRI	EMATORY	2B. DATE CREMA	ATED 12C. SIGNATURE OF PERSON IN CHARGE OF CREMATIC
SCIENTIFIC USE	13A, NAME AND AC	DORESS OF CALIFORNIA FAC	CILITY RECEIVING REMAIN	S 138. DATE RECE	EIVED 130. SIGNATURE OF PERSON IN CHARGE OF FACILITY
TRANSIT		DORESS IN RECEIVING STATI CREMATED REMAINS ARE TO		14B. DATE SHIPF	PPED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGO OF PLACING WITH THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, ONTIFY FINAL PLACE AND GA		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION OF CHEMATED RIMANS DISPOSER IF APPLICABLE

OPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN LARGE OF DISPOSING OF THE CREMATED REMAINS.

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY 527-3400

om: Faye debart  July Hundred  Payment of	Address: 1500 1 Sixty Eight & 8/10 Interment of Em	- Dollars	(66 mela) 15 268 85 ,
ot *4 Gra	ve	Section/_	Division 12
voice No.	NOTVALID SE PURPOSE STATED DILESS STAM	80% Sales 100	
o E-12/67	APR 1 8 1995	of Lots 77184 Opening/ 100 Closing 77181 Burial 100	35 4 F 115 mm
ALANCE DUE	MT. HOPE CEMETERY	Containers 77182 100 Handling Fee 77185 Recording & 100	6/2 00
	CITY of SAN DIEGO, CALIE	Misc. Fees 77183 <i>Pre-Need 63033</i> Trust 9022	
e-need Trust Cash Check	ISSUED BY M. Clark	Sales Tax 80101 76390 TOTAL PAID \$	268 85



Invoice No. Acct. No.

BALANCE DUE

Pre-Need Lot Pre-need Trust Cash

AC-212 (Rev. 5-94)

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

Payment of\_

Grave

On Acct

Check

MOUNT HOPE CEMETERY 527-3400

527-3400	- 1	18	. 95
Sixty Eight & William	Date: Log	to Colons	119 Eta Sta 119
nternet of Som	311	Division	10
NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.  Chock returned pre-rued was in previously ld.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee	67007 77184 100 77184 100 77181 100 77182 100 77182	5 00
previously Pd. in south of the last	Recording a Misc. Feet Pre-Need Trust Sales Tax TOTAL PAID	100 77183 63033 9022 60101 78390	8 85

#### INTERMENT ORDER

City of San Diego

Date 4/18/95

0	, subject to your rules and regulations, to inter the remain
of Umelia Brya	
ina lines	_ Funeral, date, time THURS 4/20/95 EIIA
Church, Chapel, Graveside gnaves	cide: Numphrey Mortuary
All Funeral cars must arrive before 3:30 p	m. of regular work day or an extra charge of \$ 150 00
will be applied and billed to undersigned.	
War time veteran mol.	^()
/ / / /	- 10
Lot Grave H Row_	Section Division/Block _/2
Grave space & Care Fund	793.0
Additional spaces and care fund	1 26
Opening/Closing & Setup	9,00 / 375.00
Burial Container	1,90.00
Handling Fees	) / 145.00
Flower vases - Marker setting fee	
Recording and filing fee	15.00
Sales taxes	/3.30
outo laneo	Total Due 1563-30
P.	aid receipt number Re #46140 391.00
	Balance due 1/72.3
	1-1
I hereby certify I am thex and this is your authority to make disposit that I have the right to make this authorization any liability on account of said authorization.	of the above named description of remains as above indicated. I certify and representation and I agree to hold Mt. Hope Cemetery harmless from on and interment.
	Mouse the D Proper
I hereby authorize the interment in lot I hold under deed.	x minute & sorrect
Hora drider deed.	KGJIS Valler Way
Signature of recorded holder of deed	San Diego 9013
1	R 474-8419
10100	Invoice # 353842
Work Order # E 12168	Acct 084978
PV.503 (Bay 8.03)	AGE 00 1 1 10

PY-1012 (11-89)

W.O. # E-12168

# NOTE

\$ 1172.30	_ San Diego, California April 18 1995
3751 Market Street, San Diego, CA 92101, the sun	n of Eleven Hundred Swenty Two \$ 39,00 DOLLARS on the unpaid principal
Should this note not be paid when due, it shall accrue at the rate indicated above. Principal and in will be liable and consents to renewals, replacementarity, and waives presentment, demand and person who signs this note agrees that recourse	thereafter bear interest on the principal. Interest after maturity will sterest are payable in lawful money of the United States. The maker ents and extensions of time for payment hereof before, at or after rotest and the right to assert any statute of limitations. A married may be held against his/her separate property for any obligation is note, the undersigned promise(s) to pay such sum as the Court
authorizes the removal of any remains from	7528 of the State of California Health and Safety Code na plot for which the purchase price is past due and unpaid.
ADDRESS 4215 Valner M CALIFORNIA DRIVER LICENSE NUMBER N441	1743 San Diego CA 92139  1743 San 1949-74-5437

E 12168

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FAMILY)	-E-51/6-	2. DATE OF BIRTH MONTH DAY YEAR	3. DATE OF DEATH 4. SEX
SA. CITY OF DEATH	Chula Vista	MINGLES	SE. COUNTY OF DEAT ENTER STATE	H-OUTSIDE CALIF.	NAME, RELATIONSHIP, FULL MA OF INFORMANT HENRIETTA R. ROMAN	ILING ADDRESS AND ZIP CODE
7A, TYPED NAME AND ADDRESS OF CALIFORNIA FUNERAL DIRECTOR OR PER Bumphrey Chula Vista Mortuary 855 Broadway Chula Vista CA 91911			N ACTING AS SUCH 78. CALIF. LICENSE NUMBER —IF APPLICABLE		son taking permit, BB. DAJTE SIGNED	
* ACKNOWLEDGMENT OF AF			ed disposition stated horse is one of the as authorized pursuant to Section 7100 of th	ne Health and Salety Cade	> Sello Hille	1 104/19/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH PEOPING HEALTH AND SAFETY OF FOR THE DISPOSITION SPECIOUS OF DISPOSAL OUTSIDE OF CALF	S7.00	AD 98 04/19/1995	9505387	AL REGISTRAR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW PINAL DISPOSITION		EGISTRAR OF DISTRICT OF I			OF DISTRICT OF DISPOSITION— IF IN ANOTHER DISTRICT IN CAUFORD	NA.
HORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS			FOR CORO	NER'S USE ONLY
A BURIAL (INCLU	OF CREMATED REM METERY SE	DORESS OF CALIFORNIA CE	E. TEMPORARY ENV.  F. DISINTERMENT  G. SHIP IN TO CALIFO  H. TRANSIT TO OUTS  METERY	DRNIA	Chame and Adv	
BURIAL	Ht. Hope Cer 3751 Harket	THE RESERVE AND THE PARTY OF TH	92102	4/20/95	1. Ollant	· -
CREMATION	Design Britaine Street	etal real		128, DATE CREMAT	ED 12C. SIGNATURE OF PERSO	ON IN CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND AL	ODRESS OF CALIFORNIA FAI	CILITY RECEIVING REMAINS	138, DATE RECEIV	ED 13C SIGNATURE OF PERSO	ON IN CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING STATI CREMATED REMAINS ARE TO		14B. DATE SHIPPE	D 14C. ADDRESS AND SIGNA OF PLACING WITH TH	TURE OF PERSON IN CHARGE E CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A GEMETERY		REST POINT ON SHORELINE, ( ENTIFY FINAL PLACE AND CA		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSICHARGE OF DISPOSIT	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY

From Harrietta Remer	address: 1315 Values	Way 2	D. CA 9	19 90
nPayment of	terment of amelia	Brya	lars (\$	00
Lot Grave		ction	Division Block	12
Acct. No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	80% Sales of Lots Opening/ Closing Surfar Containers Handling Fee Recording & Misc. Fees	67007 77184 100 77184 100 77184 100 77181 100 77182 100 77183	D
Pre-Need Lot	ISSUED BY TO CLOCK	Trust	83033 9022 — — — — — — — — — — — — — — — — — —	00

252842 04/20/95 084978 E-12168	HENRIETTA R ROMERO 100 072 100 072 100 072 100 072 100 072 100 072 60101 67007	77181 000072 77182 000072 77183 000072 77184 000072 77185 000072 78390 77184	1,172.30 375.00 190.00 45.00 245.00 145.00 13.30	1,172.30 PAID IN FULL
-----------------------------------	--	--	--	-----------------------

#### INTERMENT ORDER

City of San Diego

Date 4-18-95

ina T. S. Vault	Fi	meral, date, time	hi. 4/21	IPM
Church, Chapel, Graveside				Mortuan
All Funeral cars must arrive before				
		//-	r an extra charge or a	150.0
will be applied and billed to unders	iigned^_	1198		
War time veteran		/		
Lot 1733 Grave	Row	Section	Division/Black	10
Grave space & Care Fund	E-	11185		
Additional spaces and care fund				
Opening/Closing & Setup		11185		
Burial Container				
Handling Fees				
10-10-00-00-00-00-00-00-00-00-00-00-00-0		.A.T		
Flower vases - Marker setting fee				
Recording and filling fee	1 =	11183		
Sales taxes.	L -			
100.00		Tota	Due	0
. APR 1 8 1995	Paid re	celpt number		
			Balance due	0
MT. HOPE CEMETERY!	GNSE	AVATTO	of the shove name	ad decede
and mis is your aumonly to make	disposition o	remains as above	indicated. I certify as	nd represe
that I have the right to make this at any liability on account of said auth	MINITEGRATION C	nin i adiae in linin M	IL Hope Cemetery na	irmiess troi
		11	- 1	4-
I hereby authorize the interment in	lot I	Signature	-y fa	um
hold under deed.		1294	FSF	
Signature of recordad holder of deed		J'EHUH	AVISTA	CA 21
		9 H2	2 2087	Zip Co
		Telephone		
ned DP to		desembly.		

E 12169

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE Vivian	Chancellor		2. DATE OF BIRTH MONTH, DAY, YEAR 01/11/1902	3. DATE OF DEATH MONTH, DAY, YEAR 04/14/1995	4. SEX
5A. CITY OF DEATH	San Diego		58. COUNTY OF DEATH ENTER STATE	m Diego	AME, RELATIONSHIP, FULL N F INFORMANT EN PATTON - Conse	MAILING ADDRESS AND ZI	P CODE
	Humphrey Chul	A-FUNERAL DIRECTOR OR PERSON  NISTA HORTURY  Chula Vista CA 91911	-IF	APPLICABLE C	94 F St. Imila Vista CA 919 SIGNATURE OF APPLICANT		E SIGNED
ACKNOWLEDGMENT OF A		cknowledge as applicant that the proposed disp 376 of the Health and Safety Code, and was autho		Health and Salmy Code.	Killex HII	my cult	9/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	THE DESCRIPTION OF THE DESCRIPTION OF THE DISPOSITION SPECIFIED OF THE DISPOSAL OUTSIDE OF CALFORMA.	9A. AMOUNT OF FEE PA \$7.00	LA Hance	9505352	CAL REGISTRAR ISSUIN	IG PERMIT
TION REQUIRES A NEW PERMIT TO SHOW FINAL	9D. ADDRESS OF RE IF DEATH OCCURRE VITAL RECORDS San Diego CA	GISTRAR OF DISTRICT OF DEATH D IN CALIFORNIA P.O. BOX 85222 92186-5222			DESTRICT OF DISPOSITION— AMOTHER DISTRICT IN CALIFO	RNIA	E.
TORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS	1000		FOR COR	ONER'S USE ONLY	1
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC U	OF CREMATED REM.	AINS OTHER [	E. TEMPORARY ENVA F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO DUTS	RNIA	L DISPOSITION (Name and A	PENDING—REMAINS LO	OCATED AT
URIAL	Ht. Hope Cer	odress of California Cemeter notery St. San Diego CA 92		118. DATE BURIED 4/21/95	► OLDA 2	SON IN CHARGE OF BI	JRIAL
CREMATION	The state of the s	ital Alalia	ORY	169. DATE CREMATED	12G. SMINATURE OF PER	SON IN CHARGE OF CRI	EMATION
SCIENTIFIC USE	13A, NAME AND AD	DDRESS OF CALIFORNIA FACILITY	RECEIVING REMAINS	13B. DATE RECEIVED	19C. SIGNATURE OF PER	SON IN CHARGE OF F	ACILITY
TRANSIT		DORESS IN RECEIVING STATE OR CREMATED REMAINS ARE TO BE		14B. DATE SHIPPED	14C. ADDRESS AND SIGN OF PLACING WITH 1		CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		rest point on shoreline, or ot ntify final place and ca <u>distr</u>		15B. DATE OF DISPOSITION	ISG. SIGNATURE OF PER CHARGE OF DISPOS		MATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



#### INTERMENT ORDER

City of San Diego

	Date 4/1	19   95
	Delivery	only.
You are hereby authorized and instructed, so	the state of the s	Inter the remains
of Men Proff	tt/	
ina lines	Fuperal, date, time mon 4/6	14/45 @ 1130
Church, Chapel, Graveside	ide Lewis Col Be	A STATE OF THE PARTY OF THE PAR
All Funeral cars must arrive before 3:30 p.m.		The second second
will be applied and billed to undersigned. $X$		
War time veteran K MO.		
		10
Lot 4442 Grave Row		/Block-/D
Grave space & Care FundRL X	eed C-9011	
Additional spaces and care fund		0
Opening/Closing & Setup	- Dud C-9011	0
	- Treed C-9011	-0
Handling Fees		0
Flower vases - Marker setting lee	ID	D
Recording and filling fee	1995	45.00
Salae tavae		0
MT. HOPE C	THE POPULATION OF THE POPULATI	45.00
CTTV of SAN D	IEGO, CALIF Total Due	45.80
V SAM	Balance d	VALUE AND ADDRESS OF THE PARTY
I hereby certify I am the X and this is your authority to make dispositior that I have the right to make this authorization any liability on account of said authorization	n of remains as above indicated. I cen n and I agree to hold Mt. Hopê Cemet	named decedent rtify and represent ery harmless from
I hereby authorize the interment in lot I hold under deed.	gayly st	LVED BI
	Abdress 10 1 5	0 1000
Signature of recorded holder of deed	(909)594-	1916 Ep Code
- 12170	Invoice *	
Work Order # E	Acct.#	
PY-593 (Rev. 8-92)		

E12170

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

TA. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FA	MILY)			DATE OF DEATH	4. SEX
GLENN		E.	P	ROFFITT		10/14/1910	54/19/1995	M
SAN DIEG	0		ENTER ST	F DEATH—OUTSIDE GALIF., OTEGO	OF INE	PELATIONSHIP, FULL MAIL ORMANT RLOTTE C. PROI		
LEWIS COL	ONIAL/BENBO	A-FUNERAL DIRECTOR OR F UGH MORTUARY AN DIEGO, CA		7B. CALIF. LICENSE NUMBER —IF APPLICABLE  PD 480	SAN	DIEGO, CA 92	105	ATE SIGNED
ACKNOWLEDGMENT OF AF		chrowledge as applicant that the prop 176 of the Health and Safety Gode, and			1	Ow Ida	04/	20/199
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	THE OF THE DISPOSITION SPECIAL THE DISPOSITION SPECIAL THE DISPOSITION SPECIAL OUTSIDE OF CALL	CODE \$7.00	0 4 / 2 0 /	1995	GC. SIGNATURE OF LOCAL	L REGISTRAH ISSU	NG PERMIT
ANY CHANGE IN DISPOSH- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	IF DEATH OCCURRE	ORDSP.O. BO	X 85222	9E. ADDRESS OF REGISTRAF IF DISPOSITION IS TO OCC		RCT OF DISPOSITION— THEE DISTRICT IN CALIFORNIA		
10. AUTHORIZED DISPO			66-66		100	FOR CORON	ER'S USE ON	Y
B. CREMATION DISPOSITION THAN IN A CE SCIENTIFIC US	EMETERY SE 11A. NAME AND AL	DRESS OF CALIFORNIA C	H. — Leading Section 19 (A) 10	Section Section 1	D   110	(Name and Addr		BURIAL
BURIAL	3751 MARK		DIEGO, CA 9	2102 4/54/9	51	Mait		
CREMATION	12A. NAME AND AL	N/A	mematory metal sealer	128 DATE CHEMA	TED 12C	SIGNATURE OF PERSON	I IN CHARGE OF C	REMATION
SCIENTIFIC	13A, NAME AND AL	N/A	ACILITY RECEIVING REM	AINS ISB DATE RECE	IVED 13C	SIGNATURE OF PERSON	N IN CHARGE OF	FACILITY
TRANSIT		DORESS IN RECEIVING STA CREMATED REMAINS ARE		E 14B. DATE SHIPP	ED 140	ADDRESS AND SIGNATURE OF PLACING WITH THE		CHARGE
SCATTERING AT SEA OR OSITION OTHER IN A CEMETERY		REST POINT ON SHORELINE, INTIFY FINAL PLACE AND CA N/A				SIGNATURE OF PERSON CHARGE OF DISPOSITIO	ON OF CHE	E HUMBER EMATED RE- DISPOSER PPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY

		Date: #	/ 19 75
rom: Dary Broffitt	Address: 8/2 /2 5/ 5	ilver Fir	Rd. Walnut
Forty	leur foro	Dollars	(\$ 45 DD ) TI
n Payment of	terment of day	Proffitte	LEGISLAND !
		10	Annual second
ot 4443 Grave	RowSe	ection	Division /O
nvoice No.	NOT YALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 57007 20% Sales Care 77184	
Acct. No.		80% Sales 100 of Lots 77184	
N.O. E-12170	THE RESERVE	Opening/ 100 Closing 77181 Burial 100	
BALANCE DUE	Carried Marie	Containers 77182 100 Handling Fee 77185	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Recording & 100 Misc. Fees 77183	45 W
Pre-Need Lot At Need On Acot	THE RESERVE OF THE PARTY OF	Pre-Need 63033 Trust 9022	
Pre-need Trust Cash Check	ISSUED BY	Sales Tax 60101 78390 TOTAL PAID \$	
IC-212 (Rev. 5-94)	100UEU BY	TOTALPAID	- 45 00

#### INTERMENT ORDER

City of San Diego

Date 4/20/95

of EUGENIO, ET	WARD USAWI	w. Ilean
in a	Funeral, date, time Mon 4	
Church, Chapel, Graveside dulu	very only: El Cajon	Mortua
All Funeral cars must arrive before 3:3	0 p.m. of regular work day or an extra charg	ge of \$X —
will be applied and billed to undersigne	ed.	
War time veteran		
Lot 78 Grave 8 Ro	w — Section 3 Division	Block 12
Grave space & Care Fund	1.12	795
Additional spaces and care Jund		0
Opening/Closing & Setup	· m· b	375.0
110	ol 105	1901
Burial Container	,1191	1450
Handling Fees	51	
Flower vases - Marker setting fee		- F
Recording and filing fee		12 21
Sales taxes		15/2
org	Total Due	2011
note	Paid receipt number 1/3/7	<u> 371.0</u>
	Balance d	ue ///dic
	osition of remains as above indicated. I ce rization and I agree to hold Mt. Hope Cemet	
hereby authorize the interment in lot hold under deed.	18150 Lemon C	ive. # 21
Signature of recorded holder at deed	- ( & Mera, CA 9	912 2pg
	Telephone	
19/71	Invoice # 2529/4	1

W.O. # E-12171

# NOTE

1172.30	San Diego, California	april 20 1995
Thirty days after date for value received, the is 3751 Market Street, San Diego, CA 92101, the with interest from	ne sum of Eleven Hundred	
Should this note not be paid when due, it accrue at the rate indicated above. Principal will be liable and consents to renewals, replimaturity, and waives presentment, demand person who signs this note agrees that recontained herein. If any action be instituted may fix as attorney's fees.	t shall thereafter bear interest on the and interest are payable in lawful m lacements and extensions of time f and protest and the right to assert ourse may be held against his/her	oney of the United States. The maker or payment hereof before, at or after any statute of limitations. A married separate property for any obligation
Part II, Chapter I, Article 2, Parag authorizes the removal of any remain	S HAM SIGNATURE A	price is past due and unpaid.
ADDRESS 8150 Gemon aren	ue, #215, La Mesa	CA 91941-6401_

1217/

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS 2. DATE OF BIRTH 1A. NAME OF DECEDENT-FIRST (GIVEN) 1C. LAST (FAMILY) 3. DATE OF DEATH 4. SEX 1B. MIDDLE 07/12/1918 0471971995 Edward Eugenio SA CITY OF DEATH 58. COUNTY OF DEATH-OUTSIDE CALIF. 6. NAME RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE ENTER STATE San Diego OF INFORMANT San Diego Josephine Eugenio - Wife 7A. TYPED NAME AND ADDRESS OF CALIFORNIA FUNERAL DIRECTOR OR PERSON ACTING AS SUCH 7B. CALIF, LICENSE NUMBER 1120 Pepper Dr #4 El Cajon Mortuary -IF APPLICABLE El Cajon, CA 92021 684 S Mollison Ave - El Cajon, CA 92020 FD-1022 MA\_SIGNATURE OF APPLICANT—Person taking permit, 88. DATE, SIGNED I hereby acknowledge an applicant that the proposed disposition stated begins in one of the dispositions authorized by ACRINOWLEDGMENT OF APPLICANT Section 10376 of the Health and Safety Code, and was authorized pursuant to Section 7100 of the Health and Safety Code THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVIDE DA. AMOUNT OF FEE PAID 9B. DATE PERMIT ISSUED 9C SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE PERMIT 9505470 AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED \$7.00 AUTHORIZATION OF IN THIS PERIMIT Phyllis Dell LOCAL REGISTRAR NOTE: THIS PERMIT GIVES NO HIGHT OF DISPOSAL OUTSIDE OF CALFORNIA 9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH-BE ADDRESS OF REGISTRAR OF DISTRICT OF DISPOSITION-ANY CHANGE IN DISPOSE P.O. BOX 85222 IF DISPOSITION IS TO OCCUR IN ANOTHER DISTRICT IN CALIFORNIA TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION. 92186-5222 San Diego, CA 10...AUTHORIZED DISPOSITION(S) CHECK APPLICABLE ITEMS FOR CORONER'S USE ONLY BURIAL (INCLUDES ENTOMBMENT) E. TEMPORARY ENVAULTMENT 1. DISPOSITION PENDING-REMAINS LOCATED AT (Name and Address) # CREMATION F. DISINTERMENT C. DISPOSITION OF CREMATED REMAINS OTHER **B. SHIP IN TO CALIFORNIA** THAN IN A CEMETERY D. SCIENTIFIC USE H. TRANSIT TO OUTSIDE OF CALIFORNIA 11A. NAME AND ADDRESS OF CALIFORNIA CEMETERY 118 DATE BURIED 11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL Mount Hope Cemetery/3751 Market St BURIAL San Diego, CA 92102 12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY 128 DATE CREMATED 12C. SQNATURE OF PERSON IN CHARGE OF CREMATION CREMATION WOODE H/A 13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS 13B. DATE RECEIVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY SCIENTIFIC USE N/A 14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE 14B. DATE SHIPPED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED OF PLACING WITH THE CARRIER TRANSIT N/A 15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUF-15B. DATE OF 15C. SIGNATURE OF PERSON IN 15D. LICENSE HUMBER SCATTERING AT SEA

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

DISPOSITION

CHARGE OF DISPOSITION

FIGIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT OF DISPOSITION

DISPOSITION OTHER

THAN IN A CEMETERY

N/A

OF CREMATED RE-

-IF APPLICABLE

252914 04/24/95 085013 E-12171	PATRICIA J WALSINGHAM 100 072 100 072 100 072 100 072 100 072 60101 67007	77181 000072 77182 000072 77183 000072 77184 000072 77185 000072 77185 78390 77184	1,172-30 375-00 190-00 45-00 245-00 145-00 13-30 159-00
-----------------------------------	--	--	--

1.172.30 PAID IN FULL

#### INTERMENT ORDER

City of San Diego

Date 4/30/95

of James D. W.	
ina lines	Funeral, date, time MDN 4/24/95@ IPM
Church Chapel Graveside Church & G	naveside Ragadale Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge of \$ X /5000
will be applied and billed to undersigned. $X$	
War time veteran	
Lot 2/45 Grave 2 Bow -	- Section 3 Division/Block /3
Text - Indiana -	nor -
Grave space & Care Fund	
Additional spaces and care fund	200 00
Opening/Closing & Setup	
	190.00
	145.00
Flower vases - Marker setting fee	
Recording and filing fee	45.00
Sales taxes	/3.30
	Total Due
Paid	receipt number R-H6151 1563-30
	Balance due
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization is	of the above named decedent of remains as above indicated. I certify and represent and I agree to hold Mt. Hope Cemetery harmless from and interment.
I hereby authorize the interment in lot I hold under deed.	X Dlove Chlerende X 9061 Henrico DR 41
Signature of recorded holder of deed	City 462-7941 Zip Code X Telephone
- 12172	Invoice #
Work Order # E + ~ 1 · ~	Acct. #

# NOTE

\$ 1163.30	San Diego, Californi	a 4-21-	1995
Thirty days after date for value received, the 3751 Market Street, San Diego, CA 92101,	, the sum of Eleven Re	indred sixty-the	LE DOLLARS
	MAY 24, 1995	on the un	paid principal
at the rate of 12 percent per annum, payar	ble on demand.		
Should this note not be paid when due accrue at the rate indicated above. Princip will be liable and consents to renewals, rematurity, and waives presentment, demar person who signs this note agrees that recontained herein. If any action be institute may fix as attorney's fees.	al and interest are payable in law eplacements and extensions of t and and protest and the right to a ecourse may be held against his	rful money of the United Stati ime for payment hereof beforesert any statute of limitation /her separate property for a	tes. The maker ore, at or after ons. A married any obligation
Part II, Chapter I, Article 2, Para authorizes the removal of any rema	ains from a plot for which the pure		
PRINT NAME X KEN IN D WEIGHT	T SA SIGNATURE	- 1	->8"
ADDRESS X 285 Lightons7 Dave	5.6. 92114		)
CALIFORNIA DRIVER LICENSE NUMBER		SSN# X 553-95-90	98
PY-1012 (11-88) Customer did not &	lane his		

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

	NT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMILY)		2 DATE OF BIRTH	3. DATE OF DEATH	
James		Mathaniel	Wzight,	Jr.	01/07/1961	04/17/1995	M
A CITY OF DEATH  Spr:	ing Valley		SB. COUNTY OF DEA'		NAME, RELATIONSHIP, FULL N OF INFORMANT LOTIA J. Alexa		
A. TYPED NAME AND AI nderson-Rage	sdale Mort.	; 5050 Federa an Diego, CA	The state of the s	LIF. LICENSE NUMBER 91	061 Kenwood Dr pring Valley. SIGNATURE OF APPLICANT	CA 92977	
ACKNOWLEDGMENT OF A			agosof disposition stated hereio is one of the diversity of pursuant to Section 7100 of		Ochbullhelle	04/	20/199
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	MED IN ACCORDANCE WITH ORNIA HEALTH AND SAFET BY FOR THE DISPOSITION SE DIRECT OF DISPOSAL DUTSING OF CO.	Y CODE PECIFIED \$7.00	98. DATE PERMIT ISS 04/21/1995	SUED 9C. SIGNATURE OF LO	9505489	NG PERMIT
INV CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL SPOSITION.	Vital Reco	GISTRAR OF DISTRICT OF DISTRIC	x 85222		DISTRICT OF DISPOSITION— N ANOTHER DISTRICT IN CAUPO	RNIA	
HORIZED DISP	DSITION(S) CHECK A	The second secon			FOR COR	RONER'S USE ONL	Y
X A. BURIAL (INCL)	ALTER ENTLIMENTENTY		E. TEMPORARY ENV	AULTMENT	I I DISPUSITION		OCATED A
B. CREMATION	OF CREMATED REMA EMETERY SE	DERESS OF CALIFORNIA CEMETERY; 37	F, DISINTERMENT G. SHIP IN TO CALIF		(Name and A	Address)	
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US BURIAL	OF CREMATED REMARKED SE  11A. NAME AND AS HOPE  12A. NAME AND AS	DERESS OF CALIFORNIA CEMETERY; 37	F. DISINTERMENT G. SHIP IN TO CALIF H. TRANSIT TO OUT: CEMETERY 51 Market Sat. 1830. CA	DRNIA BIDE OF CALIFORNIA	(Name and A	Address) ISON IN CHARGE OF E	BURIAL
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US BURIAL CREMATION SCIENTIFIC USE	OF CREMATED REMARKS METERY SE  11A. NAME AND AD ME. Hope  12A. NAME AND AD	Cemetery: 37. Ban D DDRESS OF CALIFORNIA	F. DISINTERMENT G. SHIP IN TO CALIF H. TRANSIT TO OUT: CEMETERY 51 Market Sat. 1830. CA	ORNIA SIDE OF CALIFORNIA 11B. DATE BURIED 12B. DATE CREMATED	11C. SIGNATURE OF PER	Address)  ISON IN CHARGE OF I	BURIAL REMATION
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COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.





WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

		Date:	07 ,1945
from Anderson - Racadas	Address: 5050 Fede	ral Bl. I	19 92102
Fifteen hundred six	tu-three 2.30/100	Dollars	(\$ 1563.30)
nPayment of	20 1 Whight	is termer	t
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ot 245 Grave	Row_S	Section	Division / >
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Acct. No.	PAID IN THIS STAGE.	80% Sales 10 of Lots 7716	0 1031-00
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	The Heat Later of the Later of	Recording & 10 Misc. Fees 7718 Pre-Need 6303	3
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	0	Trust 902 Sales Tax 6010	2
1150	ISSUED BY DONE ROLLER	TOTAL PAID	1513
C-212 (Rev. 5-94)		13 Inc. Ale	1-10-01 30

#### INTERMENT ORDER

1/	thurial was	City of Sa	n Diego	Date_	4-20	0-95
	( You are hereby authorized and insoft NOGNAN .	COMPANY OF STREET	to your rules	and regula	ations, to int	er the remains
	ina Liner	Funer	al data timo	Diens	4/24	IIAm
	Church, Chapel, Graveside					2.00
	All Funeral cars must arrive before				0	
- 1	will be applied and billed to unders	1	A Secretary	4		
	War time veteran NO					
1	Lot 49 Grave 6	Row	Section	1	Division/Ble	ek [/
V	Grave space & Care Fund			1000		_
						_
	Additional spaces and care fund					27 EM
	Opening/Closing & Setup					190.00
	Burial Container					
	Handling Fees					145.00
	Flower vases - Marker setting fee			***************************************		
	Recording and filing fee					
	Sales taxes					13.30
						768.30
		Paid receip	t number 4	614	7	768.30
					alance due	Q
	I hereby certify I am the	N		of th	ne above na	med decedent
	and this is your authority to make that I have the right to make this a any liability on account of said aut I hereby authorize the interment in hold under deed.	uthorization and in horization and in	agree to hole	ove indicated Mt. Hope	ed. I certify e Cemetery	and represent
	Signature of recorded holder of deed	3	City 9/6 Tulephone	686	986	Zin Code
	Work Order # E 1211		Acct. #			

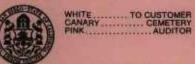
E12173

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

AMNIE	ENT—FIRST (GIVEN)	18. MIDDLE	IC. LA	ST (FAMILY) NOONAN		2. DATE OF BIRTH MONTH DAY YEAR 10/21/1910	3. DATE OF DEATH MONTH, DAY, YEAR 04/19/1995	4. SEX
LA JO	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW		EN	UNITY OF DEATH—OUTSIDE C	RYC	ME, RELATIONSHIP, FULL M INFORMANT CHARD NOOMAN, SOI	1	P CODE
	MERKLEY-MITC	HELL MORTUARY SAN DIEGO, CA		SUCH 78. CALIF. LICENSE N —IF APPLICABLE FD-119	ELI	IZ EMERALD OAK DI C GROVE, CA 9562 GNATURE OF APPLICANT⇒	24	E SIGNED
ACKNOWLEDGMENT OF A				heres is one of the dispositions authorities (and Section 7300 of the Health and Salet)		itours mit	thell 104/21/	1995
PERMIT  AUXHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	DED IN ACCORDANCE CORNIA HEALTH AND SI TY FOR THE DISPOSITION D HIGHT OF DEPOSAL OUTSIDE	AFETY CODE ON SPECIFIED \$7	.00 04/21	E PERMIT ISSUE 1/1995 MITCHELL	9505521	OCAL REGISTRAR ISSUM	G PERMIT
HIP CHANGE IN DISPOSI- TION REQUIRES A NEW EMAIT TO SHOW FINAL DISPOSITION.	IF BEATH OCCURRE		or of DEATH—	IF DISPOSITION IS		STRICT OF DISPOSITION— MOTHER DISTRICT IN CALIFO	RHEA	
. AUTHORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS				FOR COR	ONER'S USE ONLY	
						(Name and A	ddenes	
D SCIENTIFIC US	5E	DDRESS OF GALIFOR	G, SHIF	NTERMENT IN TO CALIFORNIA NSIT TO OUTSIDE OF CALIF	H95	IIC. SIGNATURE OF PER	SON IN CHARGE OF BI	
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C. DISPOSITION THAN IN A CE D. SCIENTIFIC US BURIAL CREMATION SCIENTIFIC	TIA NAME AND ALL MT. HOPE C SAN DIEGO,  12A. NAME AND ALL MAME AND ALL	DDRESS OF CALIFOR	G. SHIF H. TRA  NIA CEMETERY MARKET STREET,  NIA CREMATORY  WOOD	IN TO CALIFORNIA NSIT TO OUTSIDE OF CALIF 11B. DATE 12B. DATE	CREMATED CREMATED	IC. SIGNATURE OF PER	SON IN CHARGE OF CRI	MATION

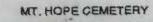
CHARGE OF DISPOSING OF THE CREMATED REMAINS.



#### MOUNT HOPE CEMETERY 527-3400

			Date:	19	40
From Richard No Moo	nam Addres	55: 9712 Emura	ld Ook Dr.	Elk Grase B	A95
leven sisty-in	t 4 30	1100	Dolla	rs (\$ 768.30	) ,
In Payment of	Turnert	t of annie	m. noone	m	
		0		1 -7 / 10	
Lot 49 Grave	6	Row	Section	Division //	
Invoice No.	NOT VALID FOR PA	URPOSESTATED UNLESS STAMPER	D CREDIT 67	007	
Acct. No.	- There in the the	NATIONAL DESIGNATION OF THE PROPERTY OF THE PR	80% Sales of Lots 77	100	
w.o. E-12173			Closing 77	100 375	20
BALANCE DUE Q			Containers 77	100 /45	00
			Recording &	100 45	00
Pre-Need Lot At Need On Acct			Pre-Need 63	033	
Pre-need Trust Cash Check C	3	12 1	Sales Tax 60 78	1310	30
AC-212 (Rev. 5-94)	ISSUED BY	March	TOTAL PAID	1768	30





#### INTERMENT ORDER

City of San Diego

And the second second		
PRE-NEED	Tourt	m
T 1977-MPHOTA	1 / Was	

Pate April 20, 1995

David F. Bard		_
naash_vault	Funeral, date, time	
Church, Chapel, Graveside	1	Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge of	s
will be applied and billed to undersigned		
War time veteran X		
Lot 59 Grave 7 Row	Section MAS Division/Bloc	k 0
Grave space & Care Fund Pd . P	re-Need (1910) . A.K.	0
Additional spaces and care fund	· MAIL IN IN INV	0
Opening/Closing & Setup	60011270	105-00
Burial Container	id at Ch	55.00
Handling Fees	Mushing a	60,00
Flower vases - Marker setting fee	2 KING HILLING	0_
Recording and filing fee	2 19.7	45.00
Sales taxes	E Luga.	3.85
	210 Total Due	
Paid	receipt number	
	Balance due	
hereby cartify I am the	of the above na	med decedent
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization	n and I agree to hold Mt. Hope Cemetery I	
hereby authorize the interment in lot I	X Signature	
hold under deed.	X	
Signature of recorded holder of deed	Address	
	City X Telephone	Zip Code
- 12174	Invoice #	
Work Order # E 12114		

E 12174 DAVID F. BARD 2322 MAHUCK Bertely Co 94704 apt. 415 (510) 849-4179 Send Pretect for Prenton



THE CITY OF

# SAN DIEGO

MT. HOPE CEMETERY • 3751 MARKET STREET • SAN DIEGO, CALIFORNIA 92102
Real Estate Assets Department
Business hours 8 a.m. to 4 p.m.
527-3400
Monday through Friday • Gates open daily

April 21, 1995

David F. Bard 2322 Shattuck Ave. Berkeley, CA 94704

Dear Mr. Bard:

Enclosed is the paperwork you requested for a pre-need trust which includes: O/C, an ash vault, handling fee, recording fee, and tax on the vault. Please sign and fill out the appropriate information where indicated, and return the original copy to us along with a check for the full amount. Upon receiving this paperwork from you, we will process it and return to you a copy of the interment order and a receipt of payment.

If you have any questions, do not hesitate to contact us at 527-3400.

Sincerely,

Michele L. Clark Clerical Asst. II

Muchele L. Clark

enclosure





THE CITY OF

# SAN DIEGO

MT. HOPE CEMETERY • 3751 MARKET STREET • SAN DIEGO, CALIFORNIA 92102

Real Estate Assets Department

Business hours 8 a.m. to 4 p.m.

Monday through Friday • Gates open daily

August 8, 1996

David F. Bard 2322 Shattuck Ave., Apt. 415 Berkeley, CA 94704

Re: Pre-Need Trust

Dear Mr. Bard:

I am following up on our letter to you dated April 21, 1995 regarding the Pre-Need Trust for you.

Please give me a call by September 8, 1996 to let me know if you still wish to pursue this matter or if you have changed your mind. If we do not hear from you within a reasonable time we will void the paperwork.

Enclosed are copies of the letter and Interment Order previously sent to you.

If you have any questions please do not hesitate to contact me.

Sincerely,

Sue Shackelton

Clerical Assistant II

Ine Shickliton

Enclosures



# PRE-NEED NTERMENT ORDER City of San Diego Da

Date 4-20-1995

	la Liner	Funeral, date, time	
yee	thurch, Chapel, Graveside  Ill Funeral cars must arrive before 3:30 p.m.  will be applied and billed to undersigned.	of regular work day or an extra char	1 3 L 1 T 1 L 1 L 1 L 1 L 1 L 1 L 1 L 1 L 1
or.	War time veteran		
no z	Lot 3731 Grave Row	Section Division	/8/88k 10
	Grave space & Care Fund		
	Opening/Closing & Setup		
	Burial Container	Ŋ	190.00
	Burial Container	V	145.00
	Flower vases - Marker setting fee		
	Recording and filing fee	······	45.00
	Sales taxes parties	Boury	13.30
	The Laboration works there paid	f receipt numberBalance o	
	I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization	on of remains as above indicated. I ce	e named eccedent ertify and represent teny harmless from
1.00			
	I hereby authorize the interment in lot I hold under deed.	Signature	
		Address	
•	Signature of recorded holder at deed	City **Telephone	Zip Code
	- 12175	Invoice #	
	Work Order # E 12113	Acct #	



THE CITY OF

### SAN DIEGO

MT. HOPE CEMETERY • 3751 MARKET STREET • SAN DIEGO, CALIFORNIA 92102
Real Estate Assets Department
Business hours 8 a.m. to 4 p.m.
527-3400 Monday through Friday • Gates open daily

April 21, 1995

7 Phone: 510-746-0706

Paul Peck Oakmount Mortuary 609 Gregory Lane, Ste. 220 Pleasant Hill CA 94523

Dear Mr. Peck:

To follow up your phone call of April 20th, enclosed is the Pre Need Interment Order for Mr. Sherman Thornsberry. Please ask him to complete the four lines marked with red X's and return this form to us along with his check in the amount of \$768.30.

His setting up a pre need trust at this time will guarantee the cost of burial when the time comes. There will be no other cemetery cost.

I've also enclosed our Regulations for Memorial Decorations and the business cards for three monument companies in San Diego. I made a visual check and found that there is a granite marker for Daisy L. Thornsberry.

If we may be of further help, please do not hesitate to contact us.

Sincerely,

Jane K. Rauch

Clerical Assistant II

ikr

Enclosures: Pre Need Interment Order (E-12175)

Regulations, and business cards

ane K. Kauch





THE CITY OF

### SAN DIEGO

MT. HOPE CEMETERY • 3751 MARKET STREET • SAN DIEGO, CALIFORNIA 92102
Real Estate Assets Department
Business hours 8 a.m. to 4 p.m.
527-3400
Monday through Friday • Gates open daily

August 7, 1996

Paul Peck Oakmount Mortuary 609 Gregory Lane, Ste 220 Pleasant Hill, CA 94523

Re: Pre-need Trust for Sherman A. Thornsberry

Dear Mr. Peck:

I am following up on our letter to you dated April 21, 1995 regarding the Pre-Need Trust for Sherman A. Thornsberry.

Please give me a call by September 7, 1996 to let me know if you still wish to pursue this matter or if you have changed your mind. If we do not hear from you within a reasonable time we will void the paperwork.

Enclosed are copies of the letter and Interment Order previously sent to you.

If you have any questions please do not hesitate to contact me.

Sincerely,

Sue Shackelton

Clerical Assistant II

Enclosures



#### OPE CEMETERY RMENT ORDER City of San Diego Date eby authorized and instructed, subject to your rules and regulations, to inter the remains Funeral, date, time Much Church Chapel Graveside All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge of \$ will be applied and billed to undersigned. Way War time veteran 405 Lot 3950 Grave Division/Bleek // Row Grave space & Care Fund ... open ing/closing & SHUO Onening/Closing & Setup...... 55.00 Burial Container..... 60.00 Handling Fees Flower vases - Marker setting fee 20 Recording and Wing Sales taxes Total Due 1111 05 1995 Paid receipt number MT. HOPE CEMETERY Balance due CITY of SAN DIEGO, CALIF of the above named decedent and this is your authority to make disposition of remains as above indicated. I certify and represent that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and interment. I hereby authorize the interment in lot I hold under deed. Signature of recorded holder of deed 12176 Invoice # Work Order # Acct. # PY-593 (Rev. 8-92)

OK to place ashes under marker.

for husband a wife to witness wife to witness as askes.

### MT. HOPE CEMETERY

NTI	RMENT ORDER		0	3/1/2/1
	City of San Diego		683	500
	Date 4/2	1/95	<b>4</b> 5	12/2
You are hereby authorized and instruct	ed, subject to your rules and regulations, to in	ter the remains		130
	raer & Therma Wolden	1 1 1	1	12 3 3
	Funeral, date, time	and the second	5	32 8
Church, Chapel, Graveside And 2	AND ADDRESS OF THE PARTY OF THE	Mortuary.	2	1 B 3
	p.m. of regular work day or an extra charge of			20/2 8
will be applied and billed to undersigne			<b>\$</b>	# 401/1
War time veteran 465 Ashn	2 , ,			1600
		10		(223)
7/6/95		e	a A	(11 2/1)
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	was written down back in	0	EM	1000
April when the Interment O	rder was written up.	10.00 0.00	DIEGO, C DPE CE 527-3400	5/12/1
We are holding your cash r		20.00	DIE OP	8 70
safe in a white envelope w Total tax should have been			CITY OF SAN DIEGO, CALIFORNIA MOUNT HOPE CEMETERY 527-3400	1 1 1 m
Total tax should have been	\$1.10. 400.00.	10.00	N N	E 12
Sorry for any inconvenience	e. Lb Ral	40-1019	₩ P P	3 7
	Jane Rauch	6.60		133
		56.60		2 16 2
		8	65±	199
*		decedent	AETOM DTIOL	334
that I have the right to make this authori	such or remains as above moleated. I certify ration and I agree to hold Mt. Hope Cernetery	harmless from		1 7 E
any liability on account of said authoriza	tion and interment.			THE PER
I hereby authorize the interment in lot I	x (kg) Colfer			S 4 5
hold under deed.	+ 4764 CHICKARH	2	ECEIP ANARY NK	M
Bignature of recorded holder of deed	- X STU EXTEGO, C	(1166)	G 30€	1663
	+ 219- 273-476	Zip Code	A COMP	18-11
	Telephone	9	OFFICIAL	From:
- L 12176	, Invoice #		O	표   트
Work Order # E	Acct. #	-	( )	
PY-593 (Rev. 8-92)				

45334 75 50.99	Block
IRV  IRV  Date: F15  WEAVER POULATS (S.	Section  CREDIT 20% Sales Care 77194  20% Sales Care 77194  20% Sales Care 77194  100 Closing 100  Closing Burial 77182  Burial 77182  Nacording & 77185  Nacording & 77185  Nacording & 77185  Nacording & 77185  Sales Tax 80003  TOTAL PAID 6
MOUNT HOPE CEMETERY SZ7-3400  Address: HTHHH	NOT VALID FOR PURPOSE STATED UNLESS STAMPED TPAID' IN THIS SPACE. ISSUED 84 DOLL MILESS STAMPED
PECEIPT  WHITE  CANARY  CANARY  CENETERY  PINK  AUDITOR  Payment of COM  Payment of COM  PAYMENT OF MEST  PA	At Need Con Acct Cost
From: AGIII Pa	Invoice No.  Acct. No.  W.O.  BALANCE DUE  Pre-Need Lot  At Nee Pre-need Trust  Cash

#### MOUNT HOPE CEMETERY 527-3400

De a lill for	1111 1111111111111111111111111111111111	Date:	F. W	That -	15
From: 7011 114 16 18 18 18 1	Address: Address:	1 Lange	12.00	1200	U2 27
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In Payment of	MY THERMONE	gense	Little .		_
-4		P. Comment	1	702	
Lot 3950 Grave	Row Se	ection		Division Block	10
Cotave	The second secon		The same	- Brock	
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184 —		_
Acct. No.	Million Co.	80% Sales of Lots	77184 —		
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w.o. = - 18/76	the Table Printers of Persons	Closing	100	110	00
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Pre-need Trust  Cash Check	Marshey 1	Sales Tax	80101 78390 —		170
AC-212 (Rev. 5-94)	ISSUED BY	TOTAL PAID	5 8	537	70
Victoria Victoria de la Companya de					The same of

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

74

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IMELMA	NAME OF DECEDENT—FIRST (GIVEN) 1B. MIDDLE FAY					3	DATE OF BIRTH	SEP.27	ATH Y502	F. SEX
Modesto			58. COUNTY OF D ENTER STATE		John	Wolfenbe	erger - H			
Allen Mor	tuary	urlock, Ca.	PERSON ACTING AS SUCH 78.	A32	Modes	Prescott   to, Ca. 9	5350			
ACKNOWLEDGMENT OF A	normany   1 hereby a	cknowledge as applicant that the	proposed disposition stated herein is use and was authorized pursuant to Section FLO	of the dispositions authorized by	A. SIGNATE	IRE OF APPLICANT—	Person taking permit   ISE	A DATE	SIGNED	
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	JED IN ACCORDANCE WIT CORNIA HEALTH AND SAFE TY FOR THE DISPOSITION S ID BIGHT OF DISPOSAL DUTSIDE OF	TY CODE PECIFIED \$7_00	SEP 2 9		W. E. T	CAL REGISTRAR	ISSUING	PERMIT	
CONTRACTOR OF THE PARTY OF THE	Stants laus	Co. Health I	Dept.	ADDRESS OF REGISTRAR ( IF DISPOSITION IS TO OCCUR  N/A			ORNIA .	0		
ORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS				FOR COR	RONER'S USE	ONLY		
B. CREMATION	IDES ENTOMBMENT)		F DISINTERMENT		1	(Name and A	PENDING RÉMA (dress)	MS TOU	WATER WAY	
THE RESERVE OF THE PARTY OF THE	OF CREMATED REM. EMETERY SE		G. SHIP IN TO CA	LIFORNIA JUTSIDE OF CALIFORNIA						
DISPOSITION THAN IN A CE	OF CREMATED REM. EMETERY SE		G. SHIP IN TO CA	LIFORNIA	11G. S	SIGNATURE OF PER	SON IN CHARGE	OF BURI	IAL	
D. SCIENTIFIC US	OF CREMATED REM. IMETERY SE  11A. NAME AND AC	DDRESS OF CALIFORNIA	G. SHIP IN TO CA	LIFORNIA  JUTSIDE OF CALIFORNIA  118. DATE BURIED  128. DATE CREMATE		SIGNATURE OF PER		AN 21200 N		
D. SCIENTIFIC US	OF CREMATED REM. IMETERY SE  11A. NAME AND AC  12A. NAME AND AC  12A. NAME AND AC  247 No. 1	DDRESS OF CALIFORNIA	G. SHIP IN TO CA  H. TRANSIT TO C  CEMETERY  CREMATORY	LIFORNIA  JUTSIDE OF CALIFORNIA  JUTSIDE OF CALIFORNIA  118. DATE BURIED  128. DATE CREMATE	D 12C 8	SIGNATURE OF PER	SON IN CHARGE O	OF CREM	MATION	
D. SCIENTIFIC US	OF CREMATED REM. IMETERY SE  11A. NAME AND AC  12A. NAME AND AC  247 No.  13A. NAME AND AC  14A. NAME AND AC	DDRESS OF CALIFORNIA DDRESS OF CALIFORNIA DDRESS OF CALIFORNIA	G. SHIP IN TO CA  TH. TRANSIT TO CO  CEMETERY  CREMATORY  OTY  OTY  FACILITY RECEIVING REMAIN	LIFORNIA  JUTSIDE OF CALIFORNIA  JUTSIDE OF CALIFORNIA  118. DATE BURIED  128. DATE CREMATE	ED 13C 8	SIGNATURE OF PER	SON IN CHARGE OF PERSON IN CHARGE	OF CREM	MATION	

COPY 3 OF THE PERMIT IS TO BE RETURNED TO THE COUNTY OF DEATH WHEN THE REMAINS ARE DISPOSED OF IN ANOTHER DISTRICT. IF NOT APPLICABLE, COPY 3 MAY BE DISCARDED. THE LOCAL REGISTRAR MAY DESTROY ANY ORIGINAL OF DUPLICATE PERMIT AFTER ONE YEAR FROM SUE DATE.

сору з

The original of this form was not supplied to Mt. Hope Cemetery.

VS9 (REV. 6/91)

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#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

John	ENT-FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FAMILY) Wolfenberge	er	M	DATE OF BIRTH BONTH, DAY, YEAR 08/17/1913	3. DATE OF DE MONTH, DAY, 1	EAR
SA. CITY OF DEATH	Enci	nitas	58. COUNTY OF DEAT	SEC.	6 NAME, R	ELATIONSHIP, FULL M	IAILING ADDRESS A	
. Humphi	rey Chula Vist	A-FUNERAL DIRECTOR O a Mortuary Vista CA 91911	17 33	# APPLICABLE	San I	Chickasaw Ct. Diego CA 92117 URE OF APPYCANT		DATE SIGNED
ACKNOWLEDGMENT OF A	PPLICANT   Derety	ecknowledge as apprecant that the 1376 of the Health and Salety Code	proposed disposition stated herein is one of the and was nutherized pursuant to Section 7100 or	e dispositions authorized by	► X00	Vie Litter	100 08	25/199
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSI SIONS OF THE CALIF AND IS THE AUTHORI' IN THIS PERMIT. NOTE: THIS PERMIT CHES N	JED IN ACCORDANCE WIT FORNIA HEALTH AND SAFE TY FOR THE DISPOSITION S IN RIGHT OF DISPOSAL DUTSIEE OF	PROVIDE SPECIFIED S7.00	PAID 98. GATE PERMIT O4/25/1995	2 1	9505672	CAL REGISTRAR I	SSUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL OSITION.	Vital Reco	EGISTRAR OF DISTRICT DIN CALFORNIA Drds P.O. Box 85 CA 92186-5222	1 #	DISPOSITION IS TO OCCU	IR IN ANOTH	HER DISTRICT IN CALIFO	RNIA	
	HOES ENTONOMENT		E. TEMPORARY ENV	AULTMENT		L DISPOSITION (Name and A	PENDING-REMAI	NS LOCATED /
X A BURIAL (INCL. X B. CREMATION C. DISPOSITION THAN IN A C. D. SCIENTIFIC U	OF CREMATED REM	AINS OTHER	F. DISINTERMENT G. SHIP IN TO CALIF			— (Name and A	odress)	*
B. CREMATION C. DISPOSITION THAN IN A C	OF CREMATED REM EMETERY SE	DDRESS OF CALIFORNIA	G. SHIP IN TO CALIF  H. TRANSIT TO OUT  CEMETERY	ORNIA SIDE OF CALIFORNIA	0 1110.	SIGNATURE OF PER		OF BURIAL
B. CREMATION  C. DISPOSITION  THAN IN A C  D. SCIENTIFIC U	OF CREMATED REM EMETERY USE  11A NAME AND A Mt. Hope Cem 3751 Market  12A NAME AND A Pacific Crem	DDRESS OF CALIFORNIA	G. SHIP IN TO CALIF H. TRANSIT TO OUT CEMETERY CA 92102 CREMATORY	SIDE OF CALIFORNIA	5		SON IN CHARGE	
B. CREMATION C. DISPOSITION THAN IN A C D. SCIENTIFIC U  URIAL  CREMATION  SCIENTIFIC USE	OF CREMATED REMEMETERY SE  11A NAME AND A Mt. Hope Cen 3751 Market  12A NAME AND A Pacific Crem 571 J' Cran	DDRESS OF CALIFORNIA METERY St. San Diego DDRESS OF CALIFORNIA MATERIAL TO THE ST. Lake Els	G. SHIP IN TO CALIF H. TRANSIT TO OUT CEMETERY CA 92102 CREMATORY	11B. DATE BURIEF	ED 12G.	SIGNATURE OF PER	SON IN CHARGE O	F CREMATION
B. CREMATION C. DISPOSITION THAN IN A C D. SCIENTIFIC U	OF CREMATED REMEMETERY SE  11A NAME AND A Mt. Hope Cen 3751 Market  12A NAME AND A Pacific Crem 571 'J' Cram  13A NAME AND A N/A	DORESS OF CALIFORNIA DETERMINENT OF CALIFORNIA LATORIUM, Inc. LE St. Lake Els	G. SHIP IN TO CALIF  H. TRANSIT TO OUT  CEMETERY  CA 92102  CREMATORY  INOTE CA 92530  A FACILITY RECEIVING REMAINS	11B. DATE BURIEF	ED 12C.	SIGNATURE OF PERS	SON IN CHARGE OF PERSON IN CHARGE	OF PACILITY

### MT. HOPE CEMETERY INTERMENT ORDER

#### WITE THE STATE OF 
City of San Diego

Date 4-21-95

or BALANCIER.	bject to your rules and regulations, to inter the remains
	Funeral, date, time Loter Date
Church, Chapel, Graveside Luitnes	
	of segular work day or an extra charge of \$ 150.00
The state of the s	
will be applied and billed to undersigned.	Thurse f. foreson
War time veteran	
Lot 5 Grave 6 Row	Section 2 Division/Block 12
Grave space & Care Fund	300.00
Additional spaces and care fund	
Opening/Closing & Setup	105.00
Burial Container	55.00
Handling Fees	V 60.00
Flower vases – Marker setting fee	D 3
Recording and filing fee	45.00
Sales taxes	3.85
	Total Due 5 68.85
Paid	receipt number
	Balance due
I hereby certify I am the	of the above named decedent of remains as above indicated. I certify and represent
that I have the right to make this authorization any liability on account of said authorization	and I agree to hold Mt. Hope Cemetery harmless from
any maniny on account of said authorization is	0000
I hereby authorize the interment in lot I	A ubie for packson
hold under deed.	24889 OCEAN VIEW BIU
Signature of recorded holder of deed	Son Diego CA 92113
,	\$262-1227 PPC000
/	Telephone
- 12177	Invoice #
Work Order # E Tall	4.4.1
PY-593 (Rev. 8-92)	When insurance
	thick comes in,
	lurial will

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4-24-95

or Bell,	William	HOWAR	D
ina Top of daylele dept	Funeral, date, time	Wed 4-26:	1:00 P.H
Church, Chapel, Graveside		Ragsdal	
All Funeral cars must arrive before 3:3		an extra charge	of \$ 150.00
will be applied and billed to undersigne	A	sell	
War time veteran YES.	Live		
Lot 154 Grave 8 Ro	w Section	Division/Bt	ock II
	MULLE 3	The state of the s	A
Grave space & Care Fund	1,55		
Additional spaces and care fund	, , , , , , , , , , , , , , , , , , , ,		375.00
Opening/Closing & Setup	5680		213.00
Burial Container	- 5680		
Handling Fees	، ، سعار ق		150.0
Flower vases - Marker setting lee	date	fec -	150.0
Recording and filing fee	5680 paid	5-5-9	5 40,0
Sales (xe) A			420.0
1 / 10	To	tal Due	1000
APR 2 4 1995	Paid receipt number	-46150	420.0
	11.111.	Balance due	
I hereby certify I am the and this is your authority to make disp	position of remains as above	ve indicated. I certify	amed decedent and represent
that I have the right to make this authorized	rization and 1 agree to hold	Mt. Hope Cemetery	harmless from
hereby authorize the interment in lot	× In	ez Bell	
nold under deed.	× 9.5	50 payme	1
Signature of recorded holder of deed	- X San	Dugo (	h. 92
The state of the s	Dity /19-	239-17/	H Zip Code
	Transition .		
./	relightione		
12178	Invoice #_C	253028	
Work Order # E 12178	Invoice #_ c	253028	

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

86

IA. NAME OF DECEDE	ENT—FIRST (GIVEN)   18. MIDDLE	IC. LAST (FAMILY)	110000000000000000000000000000000000000		DATE OF DEATH 4. SEX	
William	William Howard Taft OF DEATH San Diego		n Noward Taft Bell		03/04/1909 0	4/19/1995 M
				NAME, RELATIONSHIP, FULL MAIL OF INFORMANT nez C. Bell - Wi		
A. TYPED NAME AND A	poress of California Funeral Director or Person and San Diego, CA		APPLICABLE Sa	O S. Payne St. n Diego. CA 9211	3	
ACKNOWLEDGMENT OF A	Think of the Southed had the second for	ration stated hereon is one of the d	apositions authorized by	SIGNATURE OF APPLICANT—Person	04/21/199	
PERMIT AUTHORIZATION OF LECAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT. MOTE THIS PERMIT GIVES NO MIGHT OF DISPOSAL OUTSIDE OF CALIFORNIA.			SUED 90. SIGNATURE OF LOCA	THE OWNER OF THE OWNER, THE OWNER	
THON REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	DADDRESS OF REGISTRAR OF DISTRICT OF DEATH F DEATH OCCURRED IN CALIFORNIA  Vital Records; P.O. Box 852  San Diego, CA 92186—	22		DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CAUFORNA	Α:	
O. AUTHORIZED DISP	OSITION(S) CHECK APPLICABLE ITEMS			FOR CORON	IER'S USE ONLY	
B. CREMATION		F. DISINTERMENT G. SHIP IN TO CALIFOR H. TRANSIT TO OUTSIG	INIA	Name and Addr		
BURIAL	Mt. Hope Cemetery; 3751 Mar San Diego, Ca		4/26/95	Wast		
CREMATION	12A. NAME AND ADDRESS OF CALIFORNIA CREMATO		128, DATE CREMATED	120 SIGNATURE OF PERSON	IN CHARGE OF CREMATION	
SCIENTIFIC USE	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY  N/A	RECEIVING REMAINS	13B. DATE RECEIVED	13C. SIGNATURE OF PERSON	N IN CHARGE OF FACILITY	
TRANSIT	14A. NAME AND ADDRESS IN RECEIVING STATE OR REMAINS OR CREMATED REMAINS ARE TO BE N/A		14B. DATE SHIPPED	14C ADDRESS AND SIGNATE OF PLACING WITH THE		
SCATTERING AT SEA OR OSITION OTHER IN A CEMETERY	15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTH FICIENT TO IDENTIFY FINAL PLACE AND GA DISTRIC		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON CHARGE OF DISPOSITION		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



### CITY OF SAN DIEGO, CALIFORNIA

Make Remittance Payable to CITY TREASURER P O Box 2289 San Diego, California 92112

Please Return YELLOW Copy with Your Payment

INEZ BELL 250 S PAYNE ST SAN DIEGO CA 92113 SAN DIEGG CA 92113 ACCT NO 085042

TREASURERS USE ONLY-

PAYMENT DATE 5-5-95

PAYMENT REF NO 21-3133681071 ANT PAID: \$ 150.00

O4/27/95

PAYMENT DUE

PERIOD COVERED

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:
JOANN WAITS REF NO: E-12178
DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

WILLIAM HOWARD TAFT BELL SVCS

150-00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT LISTED ABOVE White-Customer Copy Yellow-Remittance Copy

253028 04/27/95 085042 INEX BELL 672

77183 000072 CA 213133681

150.00

150.00 PAID IN FULL

#### CITY OF SAN DIEGO, CALIFORNIA

46152

#### MOUNT HOPE CEMETERY 527-3400

From: Payment of Jan	Address: 5	20/100 y wm	- Howard	ollars (\$	420.0	13
Lot Grave	8	Row	Section/		Division Block	_
Invoice No.	NOT VALID FOR PURPOSE "PAID" IN THIS SPACE.	ESTATED UNLESS STA	MPED CREDIT 20% Sales Care	67007 77184 —		
Acct. No.	-		80% Sales of Lots Opening/	77184 — 100	27.5	00
W.O. E-13178	THE PLAN		Closing Burnal Containers	77181 — 100 77182 —	0/3	00
BALANCE DUE			Handling Fee	77185 —		-
Pre-Need Lot At Need On Acct	5		Recording & Misc. Fees Pre-Need	77183 — 63033	45	00
Pre-need Trust Cash Check			Trust Sales Tax	9022 — 60101 78390 —		
NC-212 (Rev. 5-94)	ISSUED BY	auch	TOTAL PAID	1_	420	00)

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4-24-95

You are hereby authorized and instructed, su	The company of the co	nter the remains
ina DBL DEPTH ORYPT I	100	LIAM
Church, Chapel, Graveside CHAPEL + G	RAVESTOE ROADdale	Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge	
will be applied and billed to undersigned.	Gullyn J. Dea	n_
War time veteran No		
Lot 101 Grave 8 Row_	Section 2 Division/Bi	ook_12_
Grave space & Care Fund		895.00
Additional spaces and care fund		-
Opening/Closing & Setup		n-FN
Burial Container		
Handling Fees		
Flower vases - Marker setting fee		
Recording and filing fee		
nonh-Ragodale will living \$510.00. Paids	Total Due	2041.60
Paid to FIO.00 Paid	eceipthumber R-46162	510.00
ing \$ 510.00	- D	1531.60
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization a	of fremains as above indicated. I certify and I agree to hold Mt. Hope Cemetery and interment.	amed decedent y and represent harmless from
I hereby authorize the interment in lot I hold under deed.	* Guelyn L.	Bean
Parly & Grand Stranger	San Diego-CA	1 92114 En Com
- 12179	Invoice #_ 253088	
Work Order #	ACCL # 085045	

5/30/95

Mrs. Brain called - paid she did not receive the ms. & yet. She'll call Mrs. Roapdale to see if she van get ins. co. number to speep up payment. Dance

E 12179

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

TA. NAME OF DECEDE Dorothy	ENT-FIRST (GIVEN)	18. MIDDLE Jean	IC. LAST (FAMILY) Wilder		2. DATE OF BIRTH	3. DATE OF DEATH 4. SEX
	Diego		San Diege	0	OF INFORMANT Evelyn Bean, Mo	MAILING ADDRESS AND ZIP CODE
7A. TYPED NAME AND AL Anderson-Rag	sdale Mort.	San Diego	, CA F	-1329	337 Recrest Dr. San Diego, GA 9	Total Control of the
ACKNOWLEDGMENT OF A	PPISCANT   I hereby a Section 10	cknowledge as applicant that the 376 of the Health and Salety Code	proposed disposition stated berson is one of and was authorized pursuant to Section 7100 of	the dispositions authorized by the Houte and Safety Code.	Mibber Well	an : 04/25/199
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	JED IN ACCORDANCE WI ORNIA HEALTH AND SAF Y FOR THE DISPOSITION O RIGHT OF DEPOSAL OUTSIDE DI	SPECIFIED \$7.00	04/25/199		9505609
	Vital Reco	COSTRAR OF DISTRICT DIN CALIFORNIA TOS, P.O. BOX Diego, CA	85222	SECRETARIA DE CONTRA DE CO	OF DISTRICT OF DISPOSITION— R IN ANOTHER DISTRICT IN CALIFO	AIMSC
HORIZED DISP	OSITION(S) CHECK A	PLICABLE ITEMS		100 100 100	FOR COR	RONER'S USE ONLY
B. CREMATION	11A. NAME AND AL	ORESS OF CALIFORNIA			(Name and A	PENDING—PIEMAINS LOCATED A (ddress)
CREMATION	12A. NAME AND AL	utal Re	CREMATORY	12B. DATE CREMATE	ED 12C. PICHATURE OF PER	SON IN CHARGE OF CREMATION
SCIENTIFIC	13A NAME AND AD	DRESS OF CALIFORNIA	A FACILITY RECEIVING REMAINS	13B. DATE RECEIV	ED 19C; SIGNATURE OF PER	RSON IN CHARGE OF FACILITY
TRANSIT		DRESS IN RECEIVING : CREMATED REMAINS A	STATE OR COUNTRY WHERE RE TO BE SHIPPED	14B. DATE SHIPPE	D 14C. ADDRESS AND SIGN OF PLACING WITH 1	NATURE OF PERSON IN CHARGE THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY			NE. OR OTHER DESCRIPTION SUF- CA <u>DISTRICT</u> OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PER CHARGE OF DISPOS	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

PY-1012 (11-69)

### W.O. # F-12179

### NOTE

1531.60	Sa	n Diego, California	april	24 1995
Thirty days after date for value recei-			Annual Control of the	
3751 Market Street, San Diego, CA with interest from	92101, the sum of 3.		0	the unpaid principal
at the rate of 12 percent per annum	, payable on demand	L.		
Should this note not be paid who accrue at the rate indicated above. It will be liable and consents to renew maturity, and waives presentment, person who signs this note agrees contained herein. If any action be it may fix as attorney's fees.	Principal and interest vals, replacements ar demand and protest that recourse may be	are payable in lawful n nd extensions of time and the right to asser e held against his/her	noney of the Unit for payment her t any statute of I separate proper	ted States. The maker eof before, at or after imitations. A married rty for any obligation
Part II, Chapter I, Article : authorizes the removal of an				
PRINT NAME XEVELYAL	BEAN	_SIGNATURE X 6	nelyn	L. Bean
ADDRESS X337 KEACK	ESTDRIVE	- SANDI	Egoca	ly 92114
CALIFORNIA DRIVER LICENSE NUMBER	×N568153	34 ssn	* × 429	144.0619



WHITE.....TO CUSTOMER CANARY CEMETERY PINK.....AUDITOR

MOUNT HOPE CEMETERY 527-3400

		Date:	4-27	, 19 95
From Rapdal minte	1011 Address: 5050 7	ederal.	19 9211	12
Time hundred	teri a no/100	Do	ollars (\$ 5/0.	od,
n Payment of	mark of Day	they will	der	
	0	0	WITTEN ST	
Lot Grave	8 Row	Section 3	Division Block-	12
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAME	PED CREDIT	67007	1
Acct. No.	NAST NICHTSON	90% Sales of Lots	77184 5/6	00
W.O. E-13179		Opening/ Closing Buriel	77181 100	+
BALANCE DUE	- A 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Containers Handling Fee	77182 100 77185	
	State of the State	Recording & Misc. Fees	77183	
Pre-Need Lot  At Need  On Acct  Pre-need Trust Cash Check	00	Pre-Need Trust Sales Tax	63033 9022 60101	
1-1-97	ISSUED BY MOUCH	TOTAL PAID	78390	00
IC-212 (Rev. 5-94)	V	TO MENT MADE	2010	

E 12179

This service arrived at 3:36 P.M.

Jane K. Rauch Inichile L. Clark Balebly

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 4-24-94

ina DBL DEOTH C				11:30
Church, Chapel, Graveside @	HURCH,C	BRAVESIDE F	BAGSPALE	Mortuary.
All Funeral cars must arrive be				
will be applied and billed to un	A STATE OF THE PARTY OF THE PAR	Clercy	a norm	m.
War time veteran YES	<u> </u>	U		
Lot 1780 Grave	Row	Section	Division/Blook	10
Grave space & Care Fund	E-8	171		6
Additional spaces and care fun	nd			-
Opening/Closing & Setup	E-8	3171		6
Burial Container				0
Handling Fees	E-8	3171		-
Flower vases - Marker setting	fee	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Recording and filing fee	E-8	171		6
Sales taxes	E-8	17.1		0
		Tota	Due	0_
	Paid re	eceipt number		
			Balance due	
I hereby certify I am the	WIFE		of the above name	
and this is your authority to ma that I have the right to make the any liability on account of said	ake disposition is authorization	and I agree to hold M	Indicated, I certify and It. Hope Cemetery han	represent mless from
I hereby authorize the intermer	nt in lot I	Witness with the	ey a Nar	
THE STREET SQUARE		Antenna	H.ILTOP	
			15-man 1010	97143
Signature of recorded holder at deed		YSAN D	1690,CA	Zip Code
Signature of recorded holder of deed		YSAN D Cay KG19 - Temphone	2648787	Zip Code
Signature of recorded holder of deed	80	YSAN D cty KG19 - Temphone Invoice #	2648787	Zip Code



#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEI	DENT-FIRST (GIVEN)	1B. MIDDLE Leonard	Norman, St		2. DATE OF BIRTH MONTH, DAY, YEAR 01/07/1922	3. DATE OF DEATH MONTH, DAY, YEAR 04/22/1995	4. SEX
5A CITY OF DEATH	ional City	T VARIABLE TO	SB. COUNTY OF DEATH ENTER STATE San Diego	C	IAME, RELATIONSHIP, FULL NOF INFORMANT LETBY NOTHAN -	MARINE THE PROPERTY OF THE PARTY OF THE PART	P CODE
	agsdale Mort	San Diego, CA	Brvd.	F APPLICABLE S  1329 8A	011 Hilltop Dr an Diego, CA 9 SIGNATURE OF APPLICANT	2102	E SIGNED
ACKNOWLEDGMENT OF			of disposition stated furris is one of the is authorized pursuant to Section 7100 of th	e Health and Safety Code.	Debbu like	A Company of the last of the l	5/199
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH PROTOINA HEALTH AND SAFETY CITY FOR THE DISPOSITION SPECION SPECIAL OUTSIDE OF CALIFO	FIED \$7.00	04/27/1995	UED 9C. SIGNATURE OF LC	9505749	IG PERMIT
ANY CHANGE IN DISPOSITION REQUIRES A NEW PERMIT TO SHOW FINAL SPOSITION.	IF DEATH OCCURRE	EGISTRAR OF DISTRICT OF CONTROL OF CONTROL OF CAMPORNA OTAS; P.O. Box Can Diego, CA	85222		DISTRICT OF DISPOSITION— N ANOTHER DISTRICT IN CAUSE	PINIA	
HORIZED DIS	POSITION(S) CHECK A				FOR COR	ONER'S USE ONLY	γ
B. CREMATION	N OF CREMATED REM	AINS OTHER	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	FINIA	Oisposition (Name and A	PENDING—REMAINS LO	OCATED AT
BURIAL	Ht. Hope	Cemetery; 3751 San Diego	Market St.	4/57/95	11C. SIGNATURE OF PER	SON IN CHARGE OF BU	URIAL
CREMATION  CREMATION  SCIENTIFIC	CONTROL OF THE PARTY OF THE PAR	etal Real	#0000000000000000000000000000000000000	128. DATE CREMATED	12C. MONATURE OF PER	SON IN CHARGE OF CR	EMATION
SCIENTIFIC USE	13A NAME AND A	DORESS OF CALIFORNIA FAC	CILITY RECEIVING REMAINS	13B. DATE RECEIVED	13C. SIGNATURE OF PER	SON IN CHARGE OF FA	ACILITY
TRANSIT		DDRESS IN RECEIVING STATE CREMATED REMAINS ARE TO		14B. DATE SHIPPED	14C. ADDRESS AND SIGN OF PLACING WITH 1		CHARGE
SCATTERING AT SE OR DISPOSITION OTHE THAN IN A CEMETER	R N/A	REST POINT ON SHORELINE, C ENTIFY FINAL PLACE AND CA (		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PER CHARGE OF DISPOS		AATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



#### OFFICIAL RECEIPT



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA

#### MOUNT HOPE CEMETERY 527-3400

47260

From: Olerey A- NOIMAN	Address: 5011 HILHOD	Dete: 4/4	10. CA 9910
In FULL Payment of JUSTON	HATILLY FOR FOREY	Dollars (\$ _	758.78, and
Lot 1780 Grave	Row S	ection	Division   D
Acct. No.  W.O	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID: IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 — 80% Sales 100 of Lots 77184 — Opening/ 100 Closing 77181 — Burisl 100 Containers 77182 — Handling Fee 77185 — Recording & 100 Misc. Fees 77185 — Pre-Need 83033	148 60
Pre-Need Lot	ISSUED BY MAIN DUME	Pre-Need 63033 Trust 9022  Sales Tax 60101 78390  TOTAL PAID \$	158 70

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4-25-95

You are hereby authorized and instruc-	ted, subject to your rules and regulations, to in	nter the remains
0.0	t- Funeral, date, time Thi- 4/28	1:30
Church, Chapel, Graveside Church	00 0 11	
	0 p.m. of regular work day or an extra charge	
will be applied and billed to undersign		
War time veteran NO.	The state of the s	
Lot 3314 Grave Ro	Sedion Division/Bi	lock 10
Grave space & Care Fund	- 3340	-
Additional spaces and care fund	11,05	- 4
Opening/Closing & Setup	\	375.00
Burial Container	5	380.00
Handling Fees		320.00
Flower vases - Marker setting fee		
Recording and filing fee		45.00
Sales taxes		a6.60
	Total Due	1146.60
	Paid receipt number R-4(ol 56	Ba87.0
	Balance due	859.6
I hereby certify I am the HUSB and this is your authority to make disp that I have the right to make this authorizany liability on account of said authoriza	of the above no position of remains as above indicated, I certification and I agree to hold Mt. Hope Cemeters	amed decedent
I hereby authorize the interment in lot hold under deed.	+ 962 about IT	aen_
Signature of recorded holder of deed	- 15an Rospo 13 9	2114 Zip Code
- 12181	Invoice # 35313	5
Work Order # E 12101	Acct : 085050	1
PY-593 (Rev. 8-92)	- No. 1 - D D D D D D	

#### MT. HOPE CEMETERY

PY-1012 (11-89)

w.o. # E-12181

### NOTE

\$ 859.60	San Diego, California	Aprila 1995
Thirty days after date for value received 3751 Market Street, San Diego, CA 92 with interest from at the rate of 12 percent per annum, p	ed, the undersigned maker promises to p 2101, the sum of Eight fufty-	pay San Diego City Treasurer, or order at
accrue at the rate indicated above. Pr will be liable and consents to renews maturity, and waives presentment, do person who signs this note agrees the	in due, it shall thereafter bear interest on incipal and interest are payable in lawfurals, replacements and extensions of time temand and protest and the right to associate recourse may be held against his/histituted on this note, the undersigned protest and the right to associate recourse may be held against his/histituted on this note, the undersigned protests and the right to associate the right to a second the	I money of the United States. The maker e for payment hereof before, at or after ert any statute of limitations. A married er separate property for any obligation
	Paragraph 7528 of the State of Calif remains from a plot for which the purcha	5311 (ASC) (ACC) (
PRINT NAME X 20 Ellie H Flows	SIGNATURE X 4	Tillie HHenberton
ADDRESS X 962 alsin St.		
CALIFORNIA DRIVER LICENSE NUMBER	180 5820 ss	N# X 429-12-1747

E12181

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

TA. NAME OF DECEDE	NT-FIRST (GIVEN)	18. MIDDLE	IG. LAST (FAMILY		2. DATE OF BIRTH		SEX
Essie		Lee	Henders	Henderson		8 04/22/1995	F
TY OF DEATH	onal City		58 COUNTY OF D		OF INFORMANT	L MAILING ADDRESS AND ZP CO	ODE
7A. TYPED NAME AND AI Anderson-Rag		FOE0 - 1	OR PERSON ACTING AS SUCH 78	CALIF. LICENSE NUMBER —IF APPLICABLE	962 Alvin St. San Diego. CA		IGNED
ACKNOWLEDGMENT OF A		cknowledge as applicant that the	le proposed disposition stated herein is one of de, and was authorized paravant to Section 7100	the dispositions authorized by	All will	Cam 04/25/1	
PERMIT  ANTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	JED IN ACCORDANCE V ORNIA HEALTH AND SA TY FOR THE DISPOSITION O RIGHT OF DISPOSAL OUTSIDE	WITH PROVI- FETY CODE N SPECIFIED \$7.00	AND DESCRIPTION OF THE PARTY OF		LOCAL REGISTRAR ISSUING PE 9505636	ERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION	Vital Reco	EGISTRAR OF DISTRIC D IN CAUFORNIA TOS; P.O. Bo IN Diego, CA	ox 85222		OF DISTRICT OF DISPOSITION IN ANOTHER DISTRICT IN CA		
10. AUTHORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS		A STATE OF THE	FOR C	ORONER'S USE ONLY	
B. CREMATION		AINS OTHER	E. TEMPORARY E  F. DISINTERMENT  G. SHIP IN TO CA  H. TRANSIT TO O			ON PENDING—REMAINS LOCAT d Address)	ED AI
BURIAL	The state of the s	Cemetery; 3	751 Market St.	11B DATE BURIES	11C SIGNATURE OF	PERSON IN CHARGE OF BURIA	
CREMATION	N/A	netal	non soale	128. DATE CREMAT	ED 12C. SIGNATURE OF F	ERSON IN CHARGE OF CREMA	TION
SCIENTIFIC USE	N/A	ODRESS OF CALIFORN	IIA FACILITY RECEIVING REMAINS		PED 13C SIGNATURE OF I	PERSON IN CHARGE OF FACILI	TY
TRANSIT		DORESS IN RECEIVING CREMATED REMAINS	STATE OR COUNTRY WHERE ARE TO BE SHIPPED	14B. DATE SHIPPE	D 14C ADDRESS AND S OF PLACING WIT	IGNATURE OF PERSON IN CHA H THE CARRIER	RGE
SCATTERING AT SEA OR OSITION OTHER IN A GEMETERY			LINE, OR OTHER DESCRIPTION SUI ID CA <u>DISTRICT</u> OF DISPOSITION	158. DATE OF DISPOSITION	15G SIGNATURE OF DIS		D RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



#### CITY OF SAN DIEGO, CALIFORNIA GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P O Box 2289

San Diego, California 92112

Please Return YELLOW Copy with Your Payment

WILLIE H HENDERSON 962 ALVIN ST SAN DIEGO CA 92114 SAN DIEGO CA 92114 ACCT NO 085050

TREASURERS USE ONLY

BY: CA

нини

HHHH

INVOICE DATE 05/01/95 --- 05/31/95

PAYMENT DUE

PERIOD COVERED APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT: JOANN WAITS REF NO. E-12181 DEPT: PROPERTY DEPT-HT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

ESSIE LEE HENDERSON SERVICES OPENING/CLOSING DOUBLE DEPTH CRYPT HANDLING FEES TAX ON CRYPT RECORDING FEE LESS PAYMENT ON R-46156

375.00 380.00 320.00 26-60 45.00 287-00-

TOTAL DUE 859-60 NOTICE: PLEASE REMIT PAYMENT PROMPTLY PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10%, OR \$10, WHICHEVER IS GREATER, INTEREST OF 18 PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT ACT ST. T. A BOVE White - Customer Copy . Yellow - Remillance Copy NO.

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# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

		Date:	4-3	>	197 -
Two hundred eight part Payment of Int		D		287.0	0 ,
Lot 3314 Grave	RowSe	ection	-0.19	Division /	0
Acct. No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED - PAID' IN THIS SPACE	CREDIT 20% Sales Care 80% Sales of Lota Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77185 100 77183 63033 9022 60101 78390	287	00
AC-212 (Rev. 5-04)	ISSUED BY COLUCTO	TOTAL PAID	1	287	00

77181 000072 77182 000072 77183 000072 77185 000072 78390 1130 859.60 88.03 380.00 45.00 320.00 26.60 859.60 PAID IN FULL

P.A. Burial

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

FER NANDEZ

Date 4-25-95

		tions, to inter the rema
OF CORONA-DERNA	NDEZ, Marie	A. PA 11790
ina Liner	_ Funeral, date, time Wood 5	13: 11:00 A
	yorly: May	
All Funeral cars must arrive before 3:30 p.	0	-2 1144
will be applied and billed to undersigned.	CONTRACTOR AND CONTRACTOR OF THE PARTY OF TH	
War time veteran		
Lot 37 Grave 10 Row		Nision/Block 12
Lot 10 How How	Section D	
Grave space & Care Fund	we	126.0
Additional spaces and care fund		
Opening/Closing & Setup	105	165.
Burial Container / Nava	/ /	50.0
Handling Fees		
Flower vases - Marker setting fee		
Recording and filing fee	***************************************	45.
Sales taxes		
threen pa	Total Due	386.
Pa Pa	id receipt number	0
3000	Ba	lance due
I hereby certify I am the	of th	e above named decede
and this is your authority to make dispositi that I have the right to make this authorizat	ion of remains as above indicate ion and I agree to hold Mt. Hope	ed. I certify and represe
and this is your authority to make dispositions that I have the right to make this authorization in the properties of authorization in the properties of the interment in lot I	ion of remains as above indicate ion and I agree to hold Mt. Hope	ed. I certify and represe
and this is your authority to make dispositi that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I	ien of remains as above indicate ion and I agree to hold Mt. Hope n and interment.	ed. I certify and represe
and this is your authority to make dispositions that I have the right to make this authorization liability on account of said authorization liability authorize the interment in lot I hold under deed.	ion of remains as above indicate ion and I agree to hold Mt. Hope in and interment.  Signature  Address	ed. I certify and repres- Cernetery harmless fro
and this is your authority to make dispositi that I have the right to make this authorizati any liability on account of said authorizatio	ion of remains as above indicate ion and I agree to hold Mt. Hope n and interment.  Signature  Address  City	ed. I certify and represe
and this is your authority to make dispositional that I have the right to make this authorization liability on account of said authorization I hereby authorize the interment in lot I hold under deed.	ion of remains as above indicate ion and I agree to hold Mt. Hope in and interment.  Signature  Address	ed. I certify and repres- Cernetery harmless fro
and this is your authority to make dispositions that I have the right to make this authorization liability on account of said authorization I hereby authorize the interment in lot I hold under deed.	ion of remains as above indicate ion and I agree to hold Mt. Hope n and interment.  Signature  Address  City	ed. I certify and repres- Cernetery harmless fro

12/82

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

Alberto	ENT-FIRST (GIVEN)	Mario	Corona-Fern	andez		TE OF DEATH 4. SEX
Diego			San Diego	P	NAME RELATIONSHIP, FULL MAILING A OF INFORMANT UDLIC AGBINISTRATOR	ODRESS AND ZIP CODE
		Adams Ave., San		24 S	201-A Ruffin Rd. an Diego, EE 92123 A SIGNATUS OF APPLICANT—PURE	Mill 8B. DATE SIGNED
ACKNOWLEDGMENT OF A	PFLICANT   1 bereby Section 1	acknowledge as applicant that the proportion of the Health and Salety Code, and se	ged dispraction stated herein is one of the as authorized pursuant to Section 7100 of the	dispositions authorized by the Health and Solisty Code.	DAS HE	- 05/02/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALL AND IS THE AUTHORI IN THIS PERMIT.	SLED IN ACCORDANCE WITH PR FORMA HEALTH AND SAFETY O ITY FOR THE DISPOSITION SPEC NO BIGHT OF DISPOSAL OUTSIDE OF CALIF	\$7.00 \$FED \$7.00	0 5 / 0 2	1995 A SIGNATURE OF LOGAL REC	SISTRAB ISSUING PERMIT
TICH RECYMPES A NEW	P.O.BOX 85	REGISTRAR OF DISTRICT OF I ED IN CALIFORNA 222 CA 92186-5222			F DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CALIFORNIA	
10. AUTHORIZED DISP				100	FOR CORONER	S USE ONLY
B. CREMATION	SE 11A, NAME AND A	ADDRESS OF CALIFORNIA CEI Osmetery, 3751		DRINIA	I DISPOSITION PENDIN (Name and Address)	G-REMAINS LOCATED AT
CREMATION	Residence of the last of the l	ADDRESS OF CALIFORNIA CR	EMATORY	128. DATE CREMATE	D 12C SIGNATURE OF PERSON IN (	CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND A	ADDRESS OF CALIFORNIA FAC	CILITY RECEIVING REMAINS	ISB. DATE RECEIVE	ED ISC. SIGNATURE OF PERSON IN	CHARGE OF FACILITY
TRANSIT TRANSIT		ADDRESS IN RECEIVING STATE CREMATED REMAINS ARE TO		148. DATE SHIPPED	OF PLACING WITH THE CAR	
SCATTERING AT SEA OR OSITION OTHER		AREST POINT ON SHORELINE, O		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	150, UCENSE NUMBER OF CREMATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.





#### GENERAL INVOICE

#### Make Remittance Payable to CITY TREASURER P O Box 2289

San Diego, California 92112
Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO-PUBLIC ADMINISTRATOR 5201 A RUFFIN ROAD SAN DIEGO CA

ACCT NO 000952

-16-9-95 T

04-833 699 | AMT PAID:

386.00

OS/03/95

PAYMENT DAPE

PAYMENT DUE

PERIOD COVERED

FOR INFORMATION CONCERNING YOUR HILLING CONTACT:

JOANN WAITS

REF NO: E-12182

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

FERNANDEZ PARILITYOZO
LOT 37 GRAVE 10 SEC 1 DIV 12
OPENING/CLOSING
LINER
RECORDING FEE

165.00 50.00 45.00

126.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS MILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT CORRESPONDED TO THE CONTACT 
A+-NEED

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4/25/95

of	Daber	a for	rata	5	
na <u>lu</u>	nes	Funeral, da	te, time FRI	- \$15	195 0114
Church Chapet Gra	veside CHAPE	I GRAVES	as -	CABUR	AL Mortuar
	st arrive before 3:30				
vill be applied and b	illed to undersigne	a X Alla	ug E	norso	
Var time veteran _	no.				
ot 182 Gra	ve 4 Roy	y — Se	ction /	Division/Bt	rek 12
Grave space & Care	Fund			-23000000000000000000000000000000000000	795.D
Additional spaces ar					
and the second second second					375. W
	Setup	THE RESERVE THE PERSON NAMED IN	ID	7	190.00
		PA	(ID	3	145.0
landling Fees		MAN 1	0		10.0
	ker setting fee	The same of the sa	3.1995		IK ND
lecording and filing	fee	MT, HOPE	CEMETER	·	1224
ales taxes	<u>t</u> c	TTY OF SAN	DIEGO, CAL	IF.	15/2 3
Prid "			Total Due	n_	3010
Paid in		Paid receipt num	ber //	H	1200
1	Two.	-11-	Pd. 5/191	Balance due	11/10
hereby certify I am	the Authority to make dispo	sitianlot remains	C 01	the above na	amed decede
nat I have the right	to make this authorized	ization and I agre	e to hold Mt. Ho	pe Cemetery	harmless fro
ily maomy on accor	an or said admoniz	anon and intenne		Bal	-0
hereby authorize th	ne interment in lot I	X	Maria	En	1000
old under deed.		47	17 EH	+ s+	#901
gnuture of recorded holder of	of dead	- 1	adrena	2 Crty	C# 919
	/	City	263-3	210	Zip Co
	/	Things	on.		
	12183	Invoi	00 # a5	350	7
Vork Order # E	12100	Acct	. 085	5112	
Y-593 (Rev. 8-92)					

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MAT	ыо		CEM	136 1	EDV
	110	-	OF 14		Eni

W.O. # E-12183

		NOTE	
\$	1172.30	San Diego, California	may 1 19.9
3751 Mark	ket Street, San Diego, CA 9210	une 5, 1995	pay San Diego City Treasurer, or order
accrue at will be lial maturity, person who contained	the rate indicated above. Princi ble and consents to renewals, and waives presentment, dema ho signs this note agrees that	ipal and interest are payable in lawfu replacements and extensions of tin and and protest and the right to ass recourse may be held against his/h	the principal. Interest after maturity will: ul money of the United States. The maker ne for payment hereof before, at or after sert any statute of limitations. A married her separate property for any obligation promise(s) to pay such sum as the Court
Ps	art II Chapter I Article 2 Pa	grantanh 7528 of the State of Call	fornia Health and Safety Code

authorizes the removal of any remains from a plot for which the purchase price is past due and unpaid. C0595262 CALIFORNIA DRIVER LICENSE NUMBER

marion L Blank 683-5 DIV8

F12183

#### CITY OF SAIL DIRECT, CALIFORNIA CITY THEASURER

#### ACCOUNTS RECEIVABLE AUXILIARY INVOICE - PAYMENT FORM

	CUSTOMEN ACC	OUNT NO. L	1821
	PAYMENT DATA	7111111	
	PAYMENT P.M. MECHIVED DATE 5-19-95	5	
	PAID BY (CINCLE ONE)	NF	
	PAYMENT REFERENCE NUMBER		
	··· 6 11 7 3 7A		
18		•	4
	" CUSTOMER DATA	IEH VALIDA	ION
	CUSTOMER ACCOUNT NAME MOVIE MOVE	)A	
	PAYOR NAME STREET THAN GUSTOMAN ACCOUNT NAME)		
	CUSTOMER [PAYON] ADDRESS		
	7		
	пемапия		
			-
	*	2535	07

THEIRE ( 1881) Space Property

= 12183

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDI	ENT-FIRST (GIVEN)	1B. MIDDLE	IC LAST (FAMILY	7	2. DATE OF BIRTH   3. DATE OF DEATH   4. SEX
Gabina		-	Porrata		8971871913 8473071955 F
of Diego	Marie Co.		SE COUNTY OF DE	EATH-OUTSIDE CALIF.	6 NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF RECOMMANT Maria Novoa-Daughter
California	Cremation	& Burial Chape	RSON ACTING AS SUCH 78	GALIF LICENSE MUMBERIF APPLICABLE	817 Eta Street National City, CA 91950
5880 El Ca		San Diego, CA 9		FD 1357	BA. SIGNATURE OF ARPLICANT—Ferror taking permit. BB. DATE SIGNED
ACKNOWLEDGMENT OF A		chrowledge as applicant that the propo 376 of the Health and Safety Code, and v			Fr 60 Chese 05/03/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH F ORNIA HEALTH AND SAFETY TY FOR THE DISPOSITION SPEC 0 MOHT OF DISPOSAL OUTSIDE OF CALL	CODE	05/03/19 Kyle Cha	95 9506024
ANY CHANGE IN DISPOSI- TIGN REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION	Vital Rec	EGISTRAR OF DISTRICT OF D IN CALFORNIA COTES-P.O. BOX O. CA 92186-522	85222		R OF DISTRICT OF DISPOSITION— UR IN ANOTHER DISTRICT IN CAUFORNIA
10. AUTHORIZED DISP	Control of the last of the las		1		FOR CORONER'S USE ONLY
B. CREMATION		AINS OTHER	G. SHIP IN TO CAL		I DISPOSITION PENDING—REMAINS LOCATED AT (Name and Address)
BURIAL	Mount Ho	ope Cemetery,	METERY	118. DATE BURIE	D   11C SIGNATURE OF PERSON IN CHARGE OF BURIAL
CREMATION		DORESS OF CALIFORNIA CF TO NOW	A	12B. DATE CREMA	TED 12C MONATURE OF PERSON IN CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND AL	ODRESS OF CALIFORNIA FA	CILITY RECEIVING REMAIN	S 13B. DATE RECE	IVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING STAT CREMATED REMAINS ARE 1		14B. DATE SHIPF	PED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER
SCATTERING AT SEA OR OSITION OTHER IN A CEMETERY	FICIENT TO IDE	REST POINT ON SHORELINE, ENTIFY FINAL PLACE AND CA		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION OF CREMATED REMAINS DISPOSER —IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

253507 05/05/95 085112 MARIA NOVOA

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05/19/95 CK 1001 77181 000072 77182 000072 77183 000072 77184 000072 77185 000072 78390 77184 1,172.30 375.00 190.00 45.00 245.00 145.00 13.30 159.00

1,172.30 PAID IN FULL

### MT. HOPE CEMETERY INTERMENT ORDER

mit.	INT - OFHER PELL		
/ INTER	MENT ORDE	R	
- pell ci	ty of San Diego		
e god ci		Date agri	125,95
You are hereby authorized and instructed,		d regulations, to ir	iter the remains
or Urthur Ho			
in a	_ Funeral, date, time _		
Church, Chapel, Graveside		_	Mortuary.
All Funeral cars must arrive before 3:30 p.	THE RESERVE OF THE PARTY OF THE	or an extra charge	of \$
will be applied and billed to undersigned.	_		
War time veteran			
Lot 13 Grave 9 Row_	- Section	Division/Bi	ock /2
Grave space & Care Fund			
Additional spaces and care fund			
Opening/Closing & Setup			
Burial Container			
Handling Fees			
Flower vases - Marker setting fee			
Recording and filing fee			
Sales taxes			004
		il Due	
Pa	id receipt number	c 46159	274.0
		Balance due	# 721.0
hereby certify I am the		of the above n	amed decedent
and this is your authority to make disposit that I have the right to make this authorization any liability on account of said authorization	tion and I agree to hold I	indicated. I certif Mt. Hope Cemeter	y and represent y harmless from
	VANA	1 , 21 .	. ()
hereby authorize the interment in lot I	Synature	as How	and 10
MINERAL MANUEL	X 6/04	Thewras	ele fl
Signature of recorded holder of deed	X Sau )	Thego C	1 929/4
A STATE OF THE STA	X6191	266-40	10
	Telephone	-	
- 12184	Invoice #		
Work Order # E	Acct. #		

PY-593 (Rev. 8-92)

DO NOT MAIL ENTIRE BOOK

ACCOUNT No. E-12184 Pre-Need Lot

Howard, Arthur

6104 New Castle Place

San Diego, CA 92114

(13-9-1-12)

Month and Day Due Indicated Below

ĺ	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN
					10							

Amount due when paid on, or before, due date above.

4

Amount due if paid more than \_\_\_\_\_days after due date above.

Amount Received

S

30.00

NAME

ADDRESS

CITY STATE

☐ check ( ) if this is new address

DO NOT MAIL ENTIRE BOOK

ACCOUNT No. E-12184 Pre-Need Lot

Howard, Arthur

6104 New Castly Place San Diego, CA 92114

(13-9-1-12)

Month and Day Due Indicated Below

APR	MAY	_	AUG	MARKET SHAPE		-	Name and Address of the Owner, where	FEB	MAR
	1		10				( )		

Amount due when paid on, or before, due date above.

\$ 30.00

Amount due if paid more than \_\_\_\_\_days

5\_\_\_\_\_

NAME ARTHUR AMOUNT HECEIVED \$ 30.60 ADDRESS 6104 NEWCASTLE PI.

CITY SAN DIEGO STATE CA ZIP

5

ACCOUNT No. E-12184 Pre-need Lot Howard, Archur 6104 New Castle Place Sem Diego, CA 92114 (13-9-1-12)

Month and Day Due Indicated Below

	Month and Day Due Indicated Below											
MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	
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Amount due when paid on, or before, due date above

s 30.00

Amount due if paid more than days after due date above.

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Amount Received

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NAME

**ADDRESS** 

CITY STATE

ZIP

check ( / ) if this is new address

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CITY						STAT			ZIP		
			heal	11	) if t	his is	new :	add	Iress		

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Pre-need Lot

ACCOUNT No. E-12184 Howard, Archur 6104 New Custle Place

San Diago, CA 92114

(13-9-1-12)

Month and Day Due Indicated Below

JUL	AUG	SEP	DCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
				10							

เรียงร

Amount due when paid on, or before. due date above.

30,00

Amount due if paid more than, after due date above.

Amount Received S

NAME

**ADDRESS** 

STATE

CITY □ check ( / ) if this is new address DO NOT MAIL ENTIRE BOOK

ACCOUNT No. 8-12184 Pre-Need Lot

Howard, Arthur

6104 New Castle Place

San Diego, GA 92114

(13-9-1-12)

Month and Day Due Indicated Below AUG SEP OCT NOV DEC JAN FER MAR APR MAY JUN 10

Amount due when paid on, or before. due date above.

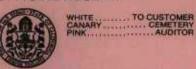
30.00

Amount due if paid more than days after due date above.

HOWARD\$ 30.00 ADDRESS 6104 NEWCASTLE

CITY SAN DIES STATE CA ZIP 31

Invoice No.



MOUNT HOPE CEMETERY 527-3400

Row

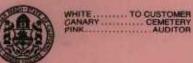
NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.

Rolle Pl	)-5 ., S	D 931	195
	oliars (\$	Division /	2
ection		_ Block	-
CREDIT 20% Sales Care	67007 77184 —		-
90% Sales of Lots	100 77184 —	30	00
Opening/	100 77181 —		-
Closing	100		
Containers	77182 -		-
A CONTRACTOR OF THE PARTY OF TH	100 77185 —		
Handling Fee	100		
Recording & Misc. Fees	77183 -		-
Pre-Need	63033		
Trust	9022 — 60101		
Sales Tax	78390 -	-	
TOTAL PAID		30	00

Grave

## WHITE TO GUSTOMER CANARY CEMETERY PINK AUDITOR

From: Arthu Ibward	Address: 6/04 NEWCOO	Date:	Diego.	Ca 904/4	5
In Payment of Pro	Ned al Trust		ollars (\$ _	3000	
Lot B Grave	Of Row S	ection		Division / 2	
Acct. No W.OBALANCE DUE	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Herodling Fee Recording & Misc. Fees	87007 77184 100 77184 100 77181 100 77182 100 77182 100 77185 100 77183	300	0
Pre-Need Lot At Need Con Acct Pre-need Trust Cash Check CASh AC 212 (Rev. 5-94)	ISSUED BY HATHER BOX	Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 60101 78390	300	0



Oatland Warrand	1 Jan Loury Mauri	Date:	- O	1940
From Orthur Howard Thirty & rollow In Payment of 19	Address: Address	COLL SOLL SOLL SOLL SOLL SOLL SOLL SOLL	30.00	2
Lot 13 Grave	9 Row Se	ection/	Division /	2
Acct. No	NOTVALIDEOR PLIRPOSE STATED INLESS STAMPED "PAID" IN THIS SPACE	20% Sales Cere 80% Sales of Lota Opening/ Closing Burial Containers Thendling Fee Misc. Feen Pre-Need Trust Table	7007 7184 100 7184 100 7181 100 7182 100 7185 100 7185 100 7183	00
Pre-need Trust Cash Check C	ISSUED BY Raush		\$ 30	00

9-7



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

Thirty & no/100	Address: 6104 New A	Date:	S (\$	30,00	14
Lot 13 Grave	7RowSe	ection/		Division /	2
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CPEDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers  Handling Fee Recording &	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100	30	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check C	ISSUED BY Rough	Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	77183 — 63033 9022 — 60101 78390 —	30	00

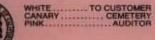


WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

From: Arthur I page	nd Address 10 1847 ew (	Date: 7	SD 95	194
Lot 13 Grave	9 RowS	ection/	Division /	a
BALANCE DUE 631.00  Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees Pro-Need Trust Sales Tax	67007 77184 100 77184 100 77181 100 77182 100 77183 63033 8022 60101	00
AC-212 (Rev. 5-94)	ISSUED BY COUCK	TOTAL PAID	1 30	00

CITY OF SAN DIEGO, CALIFORNIA

46327



From Arthur Howard	Address: 4104 /	Vow Castle Pl	9.D 90114
InPayment ofF	Bre- Tred Lot	D	pollars (\$ <u>30,00</u> )
Lot Grave	9 Row_	Section /	Division /2
Acct. No	NOTVALID FOR PURPOSE STATED UNL	CREDIT 20% Sales Care 80% Sales Care 80% Sales of Leta Opening/ Closing Burial Containers  Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77183 63033 9022 60101 78390
AC-212 (Rev. 5-94)	ISSUED BY	TOTAL PAID	30.00

CITY OF SAN DIEGO, CALIFORNIA

46159



WHITE TO GUSTOMER CANARY CEMETERY PINK AUDITOR

		Date:	uru .	15	19 75
From Charles Howard	Address: 4104 Dew C	astle 1	ollars (\$ _	2740	114
InPayment of	Jud Lot				
Lot 13 Grave	9 Row — Se	ection /	1300	Division Block	12
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording &	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 —	874	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check CASh Check Ac-212 (Rev. 5-94)	ISSUED BY Jn Clark	Misc. Feet Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 60101 78390	274	X

# 

From Arthur Howard	Address: 6104 her	Date: The Date: Dolla	10 19 92 3.0.90 14
Payment of B	9 Row	_ Section/	Division /2
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	NOT VALID FOR PURPOSE STATED UNLESS STAN "PAID" IN THIS SPACE.  ISSUED BY DO CLOUK	80% Sales of Lots 77 Opening/ Closing 77 Burial Containers 77 Handling Fee 77 Recording & Miss. Fees 77 Pre-Need 63 Trust 9	007 184 100 100 181 100 181 100 182 100 183 003 003 100 100 100 100 100 10



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

Fran Orthur Howard	1 Address: 6104 New	Date:/	0-3 ,19	95
Thirty & no 10	Address: GIOST 1860	Dollar	s is 30-00	)
Lot 13 Grave _	9 Bow	ection/	Division /	2
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		of Lots 771 Opening/ 1 Closing 771 Burial 1 Containers 771 Handling Fee 771	184 184 190 181 190 191 190 191 191 191 191 19	
AC-212 (Rev. 5-94)	ISSUED BY	TOTAL PAID	: 30	00

NAME Howard, Arthur

ACCT. NO.



DATE	04 New Castle P1. S.D. 92114 RATING	LIMIT V	CREDIT	BALANCE
4-25- 95	Opened Pre-Need Lot			
	· · · · · · · · · · · · · · · · · · ·			
	Lot: 13-9-1-12	995.00		995.
4-25- 95	Downpayment Rec# 46159		274.00	721.
			30	
14/95-	Coupon / Rec# 44183		30.00	691
19/95	Coupon #2 Rec # 46327		30.00	661
13: 95	NO CPN - R-46385		3000	631
17 95	EPN#4 R-46503		3000	601
5 95			3000	571
3 95			3000	541
1695	The state of the s		30 00	
19/8 95	CPN 8 R. 46875		30 00	4810

### CITY OF SAN DIEGO

### Mt. Hope Cemetery

### Notice of Cancellation and Forfeiture

To Arthur	Howa	rd						
Address	6104	New	Castle	P1.	San	Diego,	CA	92114
								607

You and each of you are here by notified that because of default in payments on that Agreement for the purchase of a before need Lot 13, Grave 9, Row, Section 1, Block/Division 12 in Mt. Hope Cemetery, entered into on April 25, 19 96, by and between Mt. Hope Cemetery and Arthur Howard that at the end of 30 days from date below, all rights you may have thereunder will be and are by this notice cancelled and forfeited.

Dated this 28 day of August , 19 96

CITY OF SAN DIEGO Mt. Hope Cemetery

By: Catina Turgeon
Clerical Assistant II

2-14-86

### AGREEMENT FOR BEFORE-NEED CREDIT LOT SALE

This Agreement entered into this 25 day of 2011, 19 95, between ARTHUR HOWARD, herein known as "Purchaser," and the City of San Diego, Mt. Hope Cemetery, herein known as "Seller."

That Purchaser agrees to purchase and that Seller agrees to sell the exclusive right of interment in: Lot 13, Grave 9, Row —, Section 1, Block/Division 12, located in Mt. Hope Cemetery, for and in consideration of a total purchase price of \$ 995 00, payable as follows: \$ 214.00 cash herewith, the receipt of which is hereby acknowledged; \$ 00 on the 10 day of 19 95; and the balance in installments of \$ 30.00 or more, payable at the office of Mt. Hope Cemetery, on the 10 day of each month thereafter until the total sum of said purchase price is fully paid in cash. YOU, THE PURCHASER, MAY CANCEL THIS TRANSACTION AT ANY TIME PRIOR TO MIDNIGHT OF THE FIFTH CALENDAR DAY AFTER THE DATE OF THIS TRANSACTION, PROVIDED NO INTERMENT OR SUBSTANTIAL SERVICE OR MERCHANDISE HAS BEEN PROVIDED HEREUNDER. TO CANCEL, DELIVER OR MAIL WRITTEN NOTICE OF YOUR INTENT TO "MT. HOPE CEMETERY, 3751 MARKET STREET, SAN DIEGO, CALIFORNIA 92102." THE ABOVE-STATED PRICE CONVEYS INTERMENT FEES IN THE ABOVE-DESCRIBED PROPERTY. COST OF BURIAL SERVICES OPENINGS AND CLOSINGS OF THE GRAVE, CEMENT BURIAL LINER, CRYPT OR VAULT, AND RECORDING FEE - WILL BE CHARGED AT THE TIME OF BURIAL AND ARE NOT INCLUDED IN THE ABOVE-STATED PRICE. SEPARATE TRUST ARRANGEMENTS CAN BE MADE BEFORE NEED FOR SERVICE CHARGES TO OPEN AND CLOSE GRAVE, CONCRETE BURIAL CONTAINERS, RECORDING FEE, ETC.

Twenty percent (20%) of all money received for the grave will be deposited into Cemetery's Perpetuity Fund. This Perpetuity Fund provides income for the care and maintenance of all portions of the Cemetery.

This Agreement and the Deed hereafter agreed to be given for the above-described exclusive right of interment are made subject to all rules, regulations, conditions and restrictions now existing or which hereafter may be adopted governing Mt. Hope Cemetery, which rules and regulations are on file in the Cemetery office, and subject to examination by Purchaser, and which are hereby incorporated and made a part of this Agreement as if set forth in full.

At the time the purchase price is fully paid, Seller agrees to execute and deliver to Purchaser, or party designated as shown herein by Purchaser, a Deed evidencing said exclusive right of interment.

Time is expressly made of the essence of this Agreement, and if the Purchaser fails to pay any one installment when due, the Seller, by giving thirty (30) days' written notice by deposit of a letter in the United States mail addressed to the Purchaser, or to his heirs or executors or administrators or assigns at the address stated above, or as stated on the books of the Cemetery, or at any other address requested in writing by the Purchaser, may declare this Agreement cancelled and all rights of Purchaser in and to the interment space herein described forfeited. Upon such

cancellation, the Seller shall be released from all obligations both at law and in equity to convey such interment space and property to Purchaser, or to repay to said purchaser any of the money heretofore paid hereunder. The acceptance of overdue payments, or the waiving of any term or condition of the Agreement by the Seller, shall not constitute a waiver of any subsequent payment or subsequent breach of any other term, condition or provision hereof.

Upon cancellation of this Agreement, the Seller shall give to Purchaser a "Certificate of Credit" for the amount of money already paid by Purchaser. This "Certificate of Credit" represents the net equity in the cancelled memorial property and services purchased and may be used towards the cash purchase of an exclusive right of interment at the current or prevailing rate, provided such purchase is made within two years of the date of the certificate.

No right shall pass to Purchaser and no interment shall be made in the property herein described, nor any memorial placed thereon, until the purchase price shall be fully paid.

Seller will positively not resell or attempt to resell for the Purchaser any or all of said right of interment herein described. No assignment, either voluntary or involuntary, may be made of this Agreement or the right of interment purchased hereunder without the consent of the Seller, in writing, which consent will not be unreasonably withheld.

The Seller expressly reserves the right at any time that if it finds itself unable to fulfill this Agreement owing to invasion, insurrection, riot, war, order of any military or civilian authority, order of court, or by any other unforeseen contingency, or because of mistake, misrepresentation or fraud in the procuring of same, to return to the Purchaser all monies that may have been paid hereunder, and this Agreement shall thereupon become null and void.

Purchaser hereby consents and agrees that Seller may conduct any activity within Mt. Hope Cemetery boundaries which is incidental or convenient to either or both the care or memorializing of the deceased.

Any oral or written statement made in connection with the Agreement by Seller or by his agent shall not be binding upon Seller unless reduced to writing, signed by an officer of Seller and attached to this Agreement.

It is mutually agreed that the provisions of this Agreement shall apply to and bind the heirs, executors, administrators and assigns of the Purchaser.

It is further agreed that when this Agreement is signed by more than one Purchaser, each of such Purchasers becomes jointly and severally bound and liable hereunder.

WITNESS our hands this day and year above written.

Deed to be issued to:

\$ 995.00 \$ 274 00 daunpayment \$ 72100 balance A3 payments @\$ 20.00 24 th (last) payment @ \$31.00

X	Arthur	Wendel1	Howard	
		Name		

6104 Newcastle Place

X San Diego, Ca. 92114

PURCHASER

ARTHUR W HOWARD

6104 Newcastle Place Street Address (Mail)

City Diego, Ca. 9211 State

CITY OF SAN DIEGO Mt. Hope Cemetery

By: Jn. Clark

SLW:st(62-1)

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 4-26-95

1,400	MICHAEL 95-0634 PAH11789
na LINER	Funeral, date, time Thur 4/27 1000
VaultUner Church, Chapel, Graveside	CONRAID Mortuar
All Funeral cars must arrive before 3:	:30 p.m. of regular work day or an extra charge of \$
vill be applied and billed to undersign	
Var time veteran	
ot 33 Grave 6 R	Now Section Division/Block 12
	126.00
Brave space & Care Fund	W 196.60
dditional spaces and care land	M 1 1/5-1
pening/Closing & Setup	165.00
Jurial Container	50.00
landling Fees	
	45.
ales taxes	-01
	Total Due
	Paid receipt number
	Balance due
hereby certify I am the	of the above named deceder
and their in control of the control of the	sposition of remains as above indicated. I certify and represent
nd this is your authority to make dis	onzation and Lagree to hold Mt. Hope Cemetery harmess iron
nd this is your authority to make dis	rization and interment.
nd this is your authority to make dis nat I have the right to make this auth ny liability on account of said author	rization and interment.
nd this is your authority to make dis	rization and interment.
nd this is your authority to make dis nat I have the right to make this author ny liability on account of said author hereby authorize the interment in lot old under deed.	rization and interment.
nd this is your authority to make dis nat I have the right to make this auth ny liability on account of said author hereby authorize the interment in lo	t I Signature
nd this is your authority to make dis nat I have the right to make this author ny liability on account of said author hereby authorize the interment in lot old under deed.	t I Signature
nd this is your authority to make dis nat I have the right to make this author ny liability on account of said author hereby authorize the interment in lot old under deed.	t I Signature  Audress  City Zp Co



## CITY OF SAN DIEGO, CALIFORNIA

CITY TREASURER
P O Box 2289
San Diego, California 92112
Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

-TREASURERS USE ONLY-

PAYMENT DATE 6-9-95
BY: CA (CH) IF

PAYMENT REF NOOH-8336991 AMT PAID: 386.00

O4/28/95

05/28/95

PERIOD COVERED

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS

REF NO: E-12185

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527.3400

DESCRIPTION OF CHARGES

AMOUNT

MICHAEL HANIFEN PA 1170962 SVC LOT 33 GRAVE 6 SEC 1 DIV 12 OPENING/CLOSING LINER RECORDING SEE

165.00 165.00 50.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10, WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT LISTED ABOVE White-Customer Copy • Yellow-Remittance Copy

# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS E 1218 5

LISE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

Michael	NT—FIRST (GIVEN) 18. MIDDLE	lanifen	2. DATE OF BIRTH 3. POURS DEATH 08/75/748 03/31/1995				
Oceanside		SHIP DYES		8 NAME RELATIONSHP, FULL MAKING ADDRESS AND ZIP CODE San Diego County Medical Examiner			
CONRAD LEMO	DORESS OF CALIFORNIA FUNERAL DIRECTOR OR PERSON ACT	i	—IF APPLICABLE	5555 Overland Avenue San Diego, California 92123			
	VAY — LEMON GROVE, CA 91945-1		FD-941	BA SIGNATURE OF APPLICANT—Person being permit, BB, DATE SIGNED			
ACKNOWLEDGMENT OF A	Section 10376 of the Health and Safety Code, and was authorized	pursuant to Section 7100	of the Hesith and Safety Code.	Northwarm Mariens			
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI- SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT.  MOTE: THIS PERMIT ONES NO MIGHT OF DISPOSAL DITSIDE OF CALIFORNIA.	\$7.00	0 4 / 2 7	TISSUED 9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT			
ANY CHANGE IN DISPOSH	od. Address of registrar of district of death— CO "OF SANDITECO DEPT: OF HEALTH SE VITAL RECORDS BOX 85222 SAN DIEGO, CA 92186—5222			R OF DISTRICT OF DISPOSITION— CUR IN ANOTHER DISTRICT IN CAUFORNIA			
	OSITION(S) CHECK APPLICABLE ITEMS	1	1000 140	FOR COHONER'S USE ONLY			
B. CREMATION	OF CREMATED REMAINS OTHER	E TEMPORARY E F DISINTERMENT G SHIP IN TO CA H TRANSIT TO O	•	I. DISPOSITION PENDING—REMAINS LOCATED A (Name and Address)			
BURIAL	11A HOME THE HOPPES CREET STREET SAN DIEGO, CA 92102		11B. DATE BURNE	5 NO DOLLARSE OF BURIAL			
CREMATION	12A NAME AND ADDRESS OF CALIFORNIA CREMATOR' N/A WOOD		128. DATE CREMA	TED 12C SGNATURE OF PERSON IN CHARGE OF CREMATION			
SCIENTIFIC USE	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RENAME.	CEIVING REMAIN	S 13B. DATE RECE	IVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY			
TRANSIT	14A, NAME AND ADDRESS IN RECEIVING STATE OR CO- REMAINS OR CREMATED REMAINS ARE TO BE SH N/A		14B. DATE SHIPP	PED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER			
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER PICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT		F- 15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION OF CREMATED RE-MAINS DISPOSER			

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



### MT. HOPE CEMETERY

### INTERMENT ORDER

natainer sine:	MENT ORDER
14" Aquate 21.5"L	of San Diego Ong Date 4-26 95
	ubject to your rules and regulations, to inter the remains
of Jane/ John D	De 94-1040; PA #1178407
alna NONE	Funeral, date, time Hours 4/37, 1797
Church, Chapel, Graveside	: CONROD Mortday
*All Funeral cars must arrive before 3:30 p.m	of regular work day or an extra charge of \$
will be applied and billed to undersigned.	
War,time veteran	
Lot 5 Grave 7L Row_	Section / Division/Block 12
Grave space & Care Fund	136,00
Additional spaces and care fund	00 08
Opening/Closing & Setup	1119 . 10 165.00
Burlai Container	011,110,
1 1 1	
Handling Fees	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Flower vases – Marker setting fee	00 V / 115 m
Recording and filing fee	73.00
Sales taxes	Total Due 336.00
Paid	receipt number
	Balance due
I hereby certify I am the	of the above named decedent
and this is your authority to make disposition	n of remains as above indicated, I certify and represent in and I agree to hold Mt. Hope Cemetery harmless from
I hereby authorize the interment in lot I hold under deed.	Signature
	Address
Signature of recorded holder at deed	City Op Code
	Telephone
	45212-
_ 12186	Invoice # 255127
Work Order # E	Acct # 000952
PY-593 (Rev. 8-92)	

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

John/Jane 18, MIDDLE		Doe	1C. LAST (FAMILY)  Doe  2. DATE OF BIRTH  DAY YEAR  DO 705719					Unk.	
y of DEATH			SAHED		Saff M	RELATIONSHIP, FULL M	Medical	SS AND ZE	iner
CONRAD LENG	in grove mo	KIUAKI	R OR PERSON ACTING AS SUC	7B. CALIF. LICENSE NUMBE —IF APPLICABLE FD—941	Dan IV.	iego, Calife	ormia 3		E CIGNED
ACANOWLEDGMENT OF A	PLICANT I hereby	acknowledge as applicant that 1176 of the Health and Safety C	the proposed disposition stated ferring ode, and was authorized parsuant to Sect	is one of the dispusitions authorized b ion 7100 of the Health and Safety Code.	2000 Dec 2000	ren War	ant	04/27/	1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISS SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT NOTE: THIS PERMIT WHEN I	UED IN ACCORDANCE FORMIA HEALTH AND S TY FOR THE DISPOSITI WO RIGHT OF DISPOSAL OUTSIE EGISTRAR OF DISTRI	WITH PROVI- LAFETY CODE ON SPECIFIED \$7.00	O 4 / 2 7	/ 1995	. 14	CAL REGISTR	IAR ISSUM	G PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	O OF BASEDY TTAL RECOR AN DIEGO,	CA 92186-52	HEALTH SERVICES IX 85222 22	F DISPOSITION IS TO O	CCUR IN ANO	THER DISTRICT IN CAUFO	FENILA		
10. AUTHORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS				FOR COR	ONER'S US	SE ONLY	
B. CREMATION		IAINS OTHER	F. DISINTER	NRY ENVAULTMENT MENT TO CALIFORNIA TO OUTSIDE OF CALIFORN	liA.	I. DISPOSITION (Name and A		EMAINS LO	CATED AT
BURIAL	3751 MA	OPESCEMENTER RKET STREET GO, CA 9210		5/1/53	RIED 11C	SIGNATURE OF PER	SON IN CHAR	IGE OF BU	FIAL
CREMATION  CREMATION  SCIENTIFIC	N/A	Wood -	outh co	128. DATE CRED	MATED   12C	SONATURE OF PERS	ON IN CHARG	SE OF CRE	MATION
SCIENTIFIC USE	13A. NAME AND A	DDRESS OF CALIFOR	RNIA FACILITY RECEIVING RE	MAINS 13B. DATE RE	CEIVED 13C	SIGNATURE OF PER	SON IN CHAR	RGE OF FA	CILITY
TRANSIT			G STATE OR COUNTRY WHE	ERE 148 DATE SHE	PPED 14G	ADDRESS AND SIGN OF PLACING WITH T		ERSON IN	CHARGE
TTERING AT SEA OR OSITION OTHER LIN A CEMETERY			IELINE, OR OTHER DESCRIPTION OF DISPOSIT			SIGNATURE OF PERI CHARGE OF DISPOS		OF CREM MAINS DI —IF APPL	ATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



## CITY OF SAN DIEGO, CALIFORNIA

De to the second

Make Remittance Payable to CITY TREASURER P O Box 2289 San Diego, California 92112

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT 00095

----TREASURERS USE ONLY---

PAYMENT DATE -6-9-95
BY: CA O IF

PAYMENT REF NO 04-833649 | ANT PAID: 336.0

OS/01/95

05/31/95

PERIOD COVER

JOANN WALTS

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 34

DESCRIPTION OF CHARGES

AMOUNT

JOHN/JANE DOE ME 94-1040

PA LL78407

LOT 5 GRAVE 7L SEC 1 DIV 12

DPENING/CLOSING

RECORDING FEE

126.0

45.0

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMEN MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TAVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10, WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH

ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT COLORS ARGVE White - Customer Copy • Yellow - Remittance Copy NO. 2531

Idonar Quard INTERMENT ORDER

11/21/95

Burun 190	Jan 17	3
You are hereby authorized and instructed, s	4 4 44	
	w Albert Chope	10:30
ina liner	Funeral, date, time Fr. 4/28	15 Cart 30
Church Chapel, Graveside Chap PE	gravecide (Chirmon	Mortuary.
All Funeral cars must arrive before 3:30 p.m		rge of \$
will be applied and billed to undersigned.	siegnan . mops	_
War time veteran 423		
Lot 80 Grave 3 Row_	Section 3 Divisio	n/Block /2
Grave space & Care Fund	$\overline{}$	795·ac
Additional spaces and care fund		
Opening/Closing & Setup		375.00
Burial Container	1,000	190.00
Handling Fees	W 1/2,	145.00
Flower vases - Marker setting fee	1 31	
Recording and filling fee	W /	45.00
Sales taxes X 0 M	10,0	13.30
don't	Total Due	1563.30
pate Pair	receipt number VISA	781.65
Die	Balance	7816
a +1	Aux	Rop. 781.6.
I hereby certify I am the and this is your authority to make disposition	on of remains as above indicated. I c	ve harned decedent ertify and represent
that I have the right to make this authorization any liability on account of said authorization	on and I agree to hold Mt. Hope Cem and interment.	etery harmless from
	21 / 0	-1
I hereby authorize the interment in lot I	stephen P.	Chope
hold under deed.	+ 26839 Dix	boro Rd.
	Touth Lyon	mi 48178
Signature of recorded holder of deed	City	152 Ep Code
	Telephone Telephone	
49497	Invoice # 2531	24
F 12187	00=0	5
Work Order # E	Acct. # 0000	2/

## W.O. # E-12187

### NOTE

\$	781.65	San Diego, California _	april	26 19	95
	y days after date for value received, the und	ersigned maker promises to pa	ay San Diego Ci		
3751	Market Street, San Diego, CA 92101, the s		d Eighty &	me & DOLL	ARS
with i	interest from May a	18, 1995		on the unpaid princ	cipal
at the	e rate of 12 percent per annum, payable on	demand.			
will b matu perso conta	Should this note not be paid when due, it should the rate indicated above. Principal and be liable and consents to renewals, replace rity, and waives presentment, demand and on who signs this note agrees that recours ained herein. If any action be instituted on fix as attorney's fees.	d interest are payable in lawful ements and extensions of time d protest and the right to asse se may be held against his/he	money of the Ui for payment he rt any statute our r separate prop	nited States. The mereof before, at or f limitations. A majority for any obligations.	after rried ation
	Part II, Chapter I, Article 2, Paragrap authorizes the removal of any remains fr				
PRINT	NAME NENITAB. Chope	SIGNATURE	nenite	B. Chopse	
ADDR	ESS 8008 Reach Birthe	San Diego, CH	92126	, /	
CALIF	ORNIA DRIVER LICENSE NUMBER 1	252, B090 1 ss	** 550-c	33-7709	
PY-1012	Wilita	ry ID			

E12187

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

	NT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAI	THE REAL PROPERTY OF THE PARTY		2. DATE OF BIRTH MONTH DAY, YEAR		OF DEATH DAY, YEAR	4. SEX
MATTHEN	į.	ALBERT		CHOPE		03/05/1948	04/21	/1995	M
OF DEATH			58, COUNTY O	F DEATH—OUTSIDE CALIF.,	OF IN	RELATIONSHIP, FULL M	TO STATE OF THE PARTY OF THE PA	DRESS AND 2	OP CODE
SAN DIE				SAN DIEGO	- REPRODUCTION	CHOPE: DAUG	GHTER		
VED NAME AND AS	ODRESS OF CALIFORN	A-FUNERAL DIRECTOR OR	PERSON ACTING AS SUCH	7B. CALIF. LICENSE NUMBER —IF APPLICABLE	10730	CAMINITO AI			
		Y AVE., SAN D		F-1126		ATURE OF APPLICANT—	92126 Person taking pe	mit, 88. DA	TE SIGNED
ACKNOWLEDGMENT OF A	PPLICANT I Section 10	canowindge as applicant that the pr 376 of the Health and Salety Code, at	ropesed disposition stated become in o not was authorized pursiont to Section.	are of the dispositions authorized by 7100 of the Health and Safety Code.	>0	eller m	100	04/20	11993
PERMIT	SIONS OF THE CALIF	ED IN ACCORDANCE WITH ORNIA HEALTH AND SAFET Y FOR THE DISPOSITION SE	Y CODE PECIFIED	PEE PAID VICTORIA	Meza	9505775	CAL REGIS	TRAR ISSUE	NG PERMIT
AUTHORIZATION OF LOCAL REGISTRAR	IN THIS PERMIT, NOTE: THIS PERMIT GNES IN	D NIGHT OF DISPOSAL CUTSIDE OF C	ALFORMA. 7.00	04/27/19	995	>	1		
TION REQUIRES A NEW PERMIT TO SHOW FINAL	P.O. BOX 8	GISTRAR OF DISTRICT OF IN CALIFORNIA 5222	DE DEATH-	9E. ADDRESS OF REGISTRAL # DISPOSITION IS TO OCC			MPHA .		
DISPOSITION	SAN DIEGO,	CA 92186-522	2						
O AUTHORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS		160		FOR COR	ONER'S	USE ONL	Y
_		SISTERIOR WILLIAM CONTROL		-					
A. BURIAL (INCLU	IDES ENTOMBMENT)		F. DISINTERME	Education and a second		L DISPOSITION (Name and A		REMAINS L	OGATED A
A. BURIAL (INCLU	OF CREMATED REM		F. DISINTERME	ENT"				REMAINS L	OGATED A
A. BURIAL (INCLE B. CREMATION C. DISPOSITION THAN IN A CE	OF CREMATED REMEMBERRY SE	OORESS OF CALIFORNIA	F. DISINTERME	CALIFORNIA D OUTSIDE OF CALIFORNIA 11B. DATE BURIL			ddress)		
A. BURIAL UNCLU  B. CREMATION  C. DISPOSITION  THAN IN A CE  D. SCIENTIFIC US	OF CREMATED REMEMETERY SE  11A. NAME AND ALL MOUNT HOPE 3751 MARKE	ODRESS OF CALIFORNIA CEMETERY: T STREET, SAN	G SHIP IN TO H TRANSIT TO CEMETERY  DIEGO, CA 921  CREMATORY	CALIFORNIA D OUTSIDE OF CALIFORNIA 11B. DATE BURIL	ED   110	(Name and A	SON IN CH	HARGE OF E	URIAL
A. BURIAL UNCLU  B. CREMATION  C. DISPOSITION  THAN IN A CE  D. SCIENTIFIC US	OF CREMATED REMEMETERY SE  11A. NAME AND ALL MOUNT HOPE 3751 MARKE	ODRESS OF CALIFORNIA CEMETERY:	G SHIP IN TO H TRANSIT TO CEMETERY  DIEGO, CA 921  CREMATORY	CALIFORNIA D OUTSIDE OF CALIFORNIA 118. DATE BURIL	ED   110	Name and A	SON IN CH	HARGE OF E	URIAL
A. BURIAL ONCLU  B. CREMATION  C. DISPOSITION  THAN IN A CE  D. SCIENTIFIC US  CREMATION  SCIENTIFIC  USE	OF CREMATED REMEMETERY SE  11A. NAME AND ATMOUNT HOPE 3751 MARKE	ODRESS OF CALIFORNIA CEMETERY: T STREET, SAN DORESS OF CALIFORNIA	G SHIP IN TO H TRANSIT TO CEMETERY  DIEGO, CA 921  CREMATORY	CALIFORNIA D OUTBIDE OF CALIFORNIA 11B. DATE BURIL	AYED 120	Name and A	SON IN CH	HARGE OF E	URIAL
A. BURIAL CHICLE  8. CREMATION  C. DISPOSITION  THAN IN A CE  D. SCIENTIFIC US  CREMATION  CREMATION	OF CHEMATED REMEMETERY SE  11A. NAME AND AI MOUNT HOPE 3751 MARKE 12A. NAME AND AI	ODRESS OF CALIFORNIA CEMETERY: T STREET, SAN DDRESS OF CALIFORNIA DDRESS OF CALIFORNIA	F. DISINTERME G. SHIP IN TO H. TRANSIT TO CEMETERY  DIEGO, CA 921  CREMATORY  FACILITY RECEIVING REM	CALIFORNIA D OUTBIDE OF CALIFORNIA 11B. DATE BURIL 12B. DATE CREMA	ATED 120	SIGNATURE OF PERS	SON IN CH	HARGE OF E	DRIAL SEMATION ACILITY

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

253124 05/01/95 085051 NENITA B CHOPE 100 072 100 072 100 072 072

77181 000072 77182 000072 77183 000072

781.65 375.00 190.00 45.00 781-65 PAID IN FULL

### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 4-26-95

or CALVARIO, SERGIO	Funeral, date, time FRI	4124 10A
Church, Chapel, Graveside Grave	side only Guada	Lugana Mortuary.
All Funeral cars must arrive before 3:30 p.	m. of regular work day or an ex	<i>t</i> //
War time veteran NO.		0
Lot 102 Grave 12 Row	Section 3	Division/Bleck 12
Grave space & Care Fund	(1)	795.00
Additional spaces and care fund	1105	375 1
Opening/Closing & Settip	all	190.00
Burial Container		······································
Handling Fees		145.00
Flower vases - Marker cetting fee		
Recording and filing fee		45.00
Sales taxes		13.30
Wadalupana (Rosse	Total Due.	1563.3
will bring about for pe	iid receipt number Rec 4	6/65 410.00
8410.00	. / 8	alance due/ 153.30
I hereby certify I am the hand this is your authority to make disposithat I have the right to make this authorization any liability on account of said authorization.	tion of remains as above indication and I agree to hold Mt. Hop	the above named decedent sted. I certify and represent se Cemetery harmless from
I hereby authorize the interment in lot I hold under deed.	Elipsaure X12425 O	ak Knoll R)
Bignature of recorded holder of deed	1600 A 9 1486 - 69	CA 92004
1		
	2.5	3123
E 12188	Invoice # 25	3123

E12188

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

The second second	RGIO	1B. MIDDLE	CALVARIO			ONTE OF BIRTH	3. DATE OF		4. SEX
SA_CITY OF DEATH  Coour d' Alene				ATH-OUTSIDE CALIF., B.	NAME, R	ELATIONSHIP, FULL N	MAILING ADDRE	ss and zir	CODE
GUA	DATUPANA M	EMORIAL CHAP	AZZ & MORTHARY	ALIF LICENSE NUMBER 4	160 I	Villamette iego, <b>C</b> a,¶21	Ave		
ACKNOWLEDGMENT OF A	pet state   I feetily a	denowledge as applicant that the	290, CA, 92102 F the proposed disposition stated hereic is une of the and was authorized pursuant to Section 7100 o	the dispositions sufferized by	aligner,	URE OF APPLICANT	sarate round hazer	04/28	
PERMIT UTHORIZATION OF OCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT		WITH PROVI- FETY CODE N SPECIFIED 9A. AMOUNT OF FEE	THE RESIDENCE OF THE PARTY OF T	3/1	505822 OF LO	OCAL REGISTR	AR ISSUIN	2 PERMIT
TY CHANGE IN DISPOSI- ION REQUIRES A NEW RMIT TO SHOW FINAL DISPOSITION.	9D. ADDRESS OF RE IF DEATH OCCURRE	GISTRAR OF DISTRIC	VI	ADDRESS OF REGISTRAR O	"PYNOD	50 85 2522°			
AUTHORIZED DISPO	OSITION(S) CHECK A	PLICABLE ITEMS	i on	N DAEAG CHIA	CHUTA	The second secon	ONER'S US	E ONLY	
A. BURIAL (INCLU B. CREMATION	IDES ENTOMBMENT)		E. TEMPORARY EN	VAULTMENT		(Name and A			CATED A
B. CREMATION	OF CREMATED REMARKS SE  11A. NAME AND AD MOUNT HOPE	DRESS OF CALIFORN	F. DISINTERMENT G. SHIP IN TO CALL H. TRANSIT TO OU		110		ddresa)		
B, CREMATION G. DISPOSITION THAN IN A CE D, SCIENTIFIC US	OF CREMATED REMARKS SE  11A. NAME AND AD MOUNT BOP! 3751 MARKS	DRESS OF CALIFORN	F. DISINTERMENT G. SHIP IN TO CALL H. TRANSIT TO OU  IIA CEMETERY  IBGO, CA, 92102	FORNIA TSIDE OF CALIFORNIA	1	☐ (Name and A	SON IN CHAR	GE OF BU	RIAL
B. CREMATION G. DISPOSITION THAN IN A CE D. SCIENTIFIC US	OF CREMATED REMARKS  11A. NAME AND AD  MOUNT HOPE  3751 MARKS  12A. NAME AND AD	DRESS OF CALIFORN CEMETERY, IT ST, SAN DI DRESS OF CALIFORN	F. DISINTERMENT G. SHIP IN TO CALL H. TRANSIT TO OU  IIA CEMETERY  IBGO, CA, 92102	TSIDE OF CALIFORNIA  118 DATE ETHIED  128. DATE CREMATE	120.	SIGNATURE OF PER	SON IN CHAR	GE OF BU	RIAL
B. CREMATION G. DISPOSITION THAN IN A CE D. SCIENTIFIC US BURIAL CREMATION SCIENTIFIC	OF CREMATED REMIEMETERY SE  11A. NAME AND AC MOUNT HOPI 3751 MARKE 12A. NAME AND AC 13A. NAME AND AC	DRESS OF CALIFORN T ST, SAN DI DRESS OF CALIFORN DDRESS OF CALIFORN	F. DISINTERMENT  G. SHIP IN TO CALL  H. TRANSIT TO OU  IIIA GEMETERY  IIIA CREMATORY  IIIA CREMATORY  IIIA FACILITY RECEIVING REMAINS  STATE OR COUNTRY WHERE	TSIDE OF CALIFORNIA  118 DATE ETHIED  128. DATE CREMATE	12C.	SIGNATURE OF PER	SON IN CHARG	GE OF CRE	MATION CILITY

#### OFFICIAL RECEIPT

WHITE......TO GUSTOMER CANARY CEMETERY PINK.....AUDITOR

CITY OF SAN DIEGO, CALIFORNIA

#### MOUNT HOPE CEMETERY 527-3400

From Aldonia Lanos Un hundred true In Full Payment of Sott	Address: 4160 Willa	Date: G	190 , 1998 Dung ( 6 99/17) *(\$ 195.00 )
Lot 100 Grave	1QRow	ection_3	Division 14
No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	of Lots 771 Opening/ 1 Obering 771 Burial 1 Containing 771 Handling Fee 771	84 00 84 00 85 00
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐ AC-212 (Rev. 5-94)	ISSUED BY Planya Bulk	Pre-Nepd 630 Trust 90 Sates Tax 601 783 TOTAL PAID	01

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### MOUNT HOPE CEMETERY

527-3400

From Juadalupana	Address	26011	mousial A	10 57	5. 9an	19.1
InPayment of		tog Si	White the stand	Pollars (\$ _	410-6	0
Lot 102 Grave _	12	Row	Section 3		Division /	2
Pre-Need Lot  At Need On Acct Pre-need Trust Cash Check		POSESTATEDUNLESS ST	AMPED CREDIT 20% Sales Cere 80% Sales of Lota Opening/ Closing Burist Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77185 100 77183 63033 9022 86101 78390	410	00
AC-212 (Rev. 5-94)	ISSUED BY	· Clark	TOTAL PAID	78390 —	410	00

	La Contracto		The state of the	-
MT.		0-1	-	•
88 1				

PY-1012 (11-89)

E-12188 W.O. #\_\_\_\_

### NOTE

. \$_	1153.30	San Diego, California _	april	28 19 95
	ty days after date for value received, th			
	Market Street, San Diego, CA 92101, interest from	1 ay 28, 1995	0 1 0	the unpaid principal
at th	e rate of 12 percent per annum, payal	ble on demand.		
will mate pers	Should this note not be paid when due the rate indicated above. Princip be liable and consents to renewals, reurity, and waives presentment, demands on who signs this note agrees that retained herein. If any action be institute fix as attorney's fees.	al and interest are payable in lawful eplacements and extensions of time and protest and the right to asse ecourse may be held against his/he	money of the Unite for payment here art any statute of li ar separate proper	ed States. The maker eof before, at or after mitations. A married ty for any obligation
		agraph 7528 of the State of Califo ains from a plot for which the purcha		COCOTT REPUBLICATION CONTRACTOR
PRIN	TNAME Antonia Ava	105 SIGNATURE ANT	tomia are	rlos
ADDI	RESS 4160 willame	He rue San	Diego	CA 92117
	FORNIA DRIVER LIGENSE NUMBER (CA.	3357466 ssn I.D.1)	1# 606-	12-6174

253123 05/01/95 085052 ANTONIA AVALOS 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072	77181 000072 77182 000072 77183 000072 77184 000072 77185 000072 78390 77184	1,153.10 374.93 189.97 44.99 225.96 144.97 13.30 158.98
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1,153.30 PARTIAL PAYMENT

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 4 | 36/95

ina Linux Funer	al, date, time TUE 5/2 MAM
Church, Chapel, Graveside Church & G	a PAGED
All Funeral cars must arrive before 3:30 p.m. of reg	ular work day or an extra charge of \$ 150-00
will be applied and billed to undersigned.	enly L. Smith
War time veteran NO	
Lot 39 Grave 2 Row	Section 3 Division/Block / 2
Grave space & Care Fund	795.00
Additional spaces and care fund	
Opening/Closing & Setup	
Burial Container	
Handling Fees	
Flower vases - Marker setting for Galmani	ged
Recording and filing fee	45.00
Sales taxes	_13.3
Large	Total Due
7 Paid receip	number 80 # 46163 1583 12397.0
	Balance due 111000
I hereby certify I am the \$\\ 5/5\TER\\ and this is your authority to make disposition of rei	of the above named decedent
that I have the right to make this authorization and in any liability on account of said authorization and in	agree to hold Mt. Hope Cemetery harmless from
any identity on account of said authorization and in	1 10
I hereby authorize the interment in lot I	Sury K. Anits
hold under deed.	June Komit
Bigneture of recorded holder of dead	5069 St. RITA PLS. B.CA
	266-2726 Epcode
/	Telephone
- 12189	Invoice #
Work Order # E	Acct. #

w.o. # E-12189

### NOTE

\$1190.00	San Diego, California	april 26 1	9.5
Thirty days after date for value received	d, the undersigned maker promises to pay	y San Diego City Treasurer, or or	derat
3751 Market Street, San Diego, CA 92	101, the sum of Elinen hundre	drinity 1 ro/100 DOLI	ARS
with interest from	2 June 1995	on the unpaid prin	cipal
at the rate of 12 percent per annum, p	ayable on demand.		
accrue at the rate indicated above. Prir will be liable and consents to renewal maturity, and waives presentment, de person who signs this note agrees that	due, it shall thereafter bear interest on the ncipal and interest are payable in lawful news, replacements and extensions of time mand and protest and the right to assert at recourse may be held against his/her lituted on this note, the undersigned pro-	noney of the United States. The n for payment hereof before, at or t any statute of limitations. A ma separate property for any oblig	after arried ation
	Paragraph 7528 of the State of Califor emains from a plot for which the purchas		
PRINT NAME & July 1. S.	SIGNATURE 47	EARLY SMITH	
ADDRESS 45069 59. Z	TA A. S.D. CA. 95	1/3	
CALIFORNIA DRIVER LICENSE NUMBER	(PA, NY50452) SSN	+ > 571-02-6768	

F12189

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

NAME OF DECEDE	NAME OF TAXABLE PARTY.	IR MIDDLE	4C LAST WEARIN	V)	0.0	ATE OF BIRTH			4. SEX
NAME OF DECEDENT—FIRST (GIVEN) 18, MIDDLE @ Rochalle					2471959R		OF DEATH	F	
Y OF DEATH San Dieggo		ENTER STATE	58. COUNTY OF DEATH—OUTSIDE CALIF., S. NAME, RELATIONSHP, FULL MAILING ADD OF INFORMANT Tracy Smith — Sister				P CODE		
	gadale Mort	s.; 5050 Feder San Diego, Ca	PERSON ACTING AS SUCH 75	S. CALIF. LICENSE NUMBER 5	069 St	Rita P	lace 2113		re signed
ACKNOWLEDGMENT OF A			roposed disposition stated hersin is one nd was approximated gurnment to Section 71		Kelt	es whell	Cum	04/2	7/1995
PERMIT LITHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN AGCORDANCE WITH CORNIA HEALTH AND SAFET TY FOR THE DISPOSITION SI ID HISHT OF DISPOSAL DUTSIDE OF	PECIFIED \$7.00	05/01/1995	SUED 9C. S	IIGNATURE OF L	950	STRAR ISSUI	IG PERMIT
NY CHANGE IN DISPOSI- TION REQUIRES A NEW ERMIT TO SHOW FINAL DISPOSITION.	Vital Reco	rds; P.O. Box	85222	E ADDRESS OF REGISTRAR OF IF DISPOSITION IS TO OCCUR I					
AUTHORIZED DISP		n Diego, CA S	92186-5222		1	FOR CO	RONER'S	USE ONL	v
THE REPORT OF THE PARTY OF THE	SHORT THREE DOORS AND A		The resentation	FAMILIA TARRES	911-	- Carrier Control	A CONTRACTOR OF THE PARTY OF TH	25440.000000	
B. CREMATION	SE TIA. NAME AND A	DDRESS OF CALIFORNIA	CEMETERY 751 Market St.	Ť	110. SIG	I. DISPOSITION (Name and	Address)	REMAINS L	OCATED AT
B. CREMATION C. DISPOSITION THAN IN A CO	OF CREMATED REMEMETERY SE  11A. NAME AND ALL Mt. Hope	DDRESS OF CALIFORNIA	G. SHIP IN TO C H. THANSIT TO CEMETERY 751 Market St. CA CREMATORY	T ALIFORNIA OUTSIDE OF CALIFORNIA	. (	I (Name and	Address)	CHARGE OF E	OCATED AT
B. CREMATION C. DISPOSITION THAN IN A CE O. SCIENTIFIC US BURNAL	OF CREMATED REMEMETERY SE  11A. NAME AND AL Mt. Hope  12A. NAME AND AL N/A	DDRESS OF CALIFORNIA Cometery; 37 San Diego; DDRESS OF CALIFORNIA metal Re	G. SHIP IN TO C H. THANSIT TO CEMETERY 751 Market St. CA CREMATORY	ALIFORNIA OUTSIDE OF CALIFORNIA  118. DATE BURIED  128. DATE CREMATED	120. 312	NATURE OF PER	Address) RSON IN C	CHARGE OF E	OCATED AT
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US BURIAL CREMATION SCIENTIFIC	OF CREMATED REM IMETERY SE  11A. NAME AND AI ML. HOPE  12A. NAME AND AI N/A  13A. NAME AND AI N/A	DDRESS OF CALIFORNIA Cometery; 37 San Diego; DDRESS OF CALIFORNIA DDRESS OF CALIFORNIA	F. DISINTERMEN G. SHIP IN TO C H. TRANSIT TO CEMETERY 751 Market St. CA CREMATORY  ALC FACILITY RECEIVING REMAIN	ALIFORNIA OUTSIDE OF CALIFORNIA  118. DATE BURIED  128. DATE CREMATED	12C. 363	NATURE OF PER	Address)  RSON IN CHARGON IN CHAR	HARGE OF CA	OCATED AT

PY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN ARGE OF DISPOSING OF THE CREMATED REMAINS.

STATE OF CALIFORNIA, DEPARTMENT OF HEALTH SERVICES, OFFICE OF STATE REGISTRAR

527-3400



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY

		Date: Upr	40/1	9 7
From Dacy RSmith	Address: PO Box 74	10310 5.0.	CA 92	174
Fiften Hundred	Eighting Seven & 9	Dollars (	s 1587.6	0,
nPayment of	teliment of Jam	mie 1/a	wis &	4
on galvanu	xd flower can.			
ot 39 Grave	2 Row So	ection	Division /	2
Invoice No.	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184	159	00
Acct. No.		80% Sales 100 of Lots 77184	436	20
W.O E- 12189	The Late of the la	Opening/ 100 Closing 77181 Burist 100	200	00
BALANCE DUE	1 12 12 12 12 12 12 12 12 12 12 12 12 12	Containers 77182	158	170
	A THE REAL PROPERTY.	Handling Fee 77185 Recording & 100 Misc. Fees 77183	45	00
Pre-Need Lot  At Need  On Acct		Pre-Need 63033 Trust 9022	-	
Pre-need Trust  Cash Check	motal !	Sales Tex 60101 78390		00
AC-212 (Rev. 5-94) 1921	ISSUED BY	TOTAL PAID \$	1587	00

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 4/26 /95

You are hereby authorized and instructed, su	bject to your rules and regulations, to inter the remains
of Wille X. J	hompson (F)
Vaulitysiek	Funeral, date, time Mon. Way 18 11
Church Chapet Graveside Church	: Magnale Modulary.
All Funeral cars must arrive before 3:30 p.m.	01-1 8 1
will be applied and billed to undersigned.	Sharlene pare
War time veteran X	00
Lot 16.5 Grave 12 Row	Section Division/Black_12
Deve space & Care Fund Pre	THE E- 700 0
Additional spaces and care fund	cité //
Opening/Closing & Setup	2 93 / 375.00
Burial Container	190 to 300.00
Handling Fees 5	145.00 -320.00
Flower vases - Marker setting fee .)	
Recording and filing fee	45.00
Sales taxes	13.30 26.10
1 De Consession de la c	Total Due 768.34 1146.10
Variable of 16	0-11/118 #3000
the way of the	1 Balance dug 44830
the state of the s	Balance due 4.68.33
I hereby certify I am the Analysis and this is your authority to make disposition	of remains as above indicated. I certify and represent
that I have the right to make this authorization any liability on account of said authorization a	and I agree to hold Mt. Hope Cemetery harmless from
	( Sails a belle
hereby authorize the interment in lot I	Signature Signature
noid under deed.	+ 5039 Lyon M
Signature of recorded holder of deed	x f. D. 92/00
	1619-262-8841
	Telephone
- 12190	Invoice # 253/26
Work Order # E	Acct # 085059
PY-593 (Rev. 8-92)	

	DAME AND ADDRESS.		
N. Street	HODE	CEMET	
DATE I	HEIPE	LEMEI	PER Y
		Chairman I	

W.O. # E- 12190

## NOTE

	468.30	NOT	E			
as_	859-60	San Di	ego, California	Aune	1	1995
3751	ty days after date for value receive Market Street, San Diego, CA 92 interest from	d, the undersigned mak	ser promises to pay	fifty n		OLLARS
at th	e rate of 12 percent per annum, p	ayable on demand.				
accr will i matu pers cont	Should this note not be paid when ue at the rate indicated above. Printle liable and consents to renewal urity, and waives presentment, de on who signs this note agrees the ained herein. If any action be instituted fix as attorney's fees.	ncipal and interest are p ls, replacements and ex mand and protest and at recourse may be he	payable in lawful m extensions of time f the right to assert ld against his/her	oney of the Uni or payment her any statute of separate prope	ted States. The state of before, a limitations. A limitations of the state of the s	he maker at or after A married obligation
•	Part II, Chapter I, Article 2, authorizes the removal of any r	remains from a plot for v	which the purchase			
ADDF	RESS 5039 Z	Syon ST 6064708	GNATURE - SUN	Luce 546	-5-0-	17/2
4	11, 2, 30					

E12190

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

14

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	ENT-FIRST (GIVEN)	18. MIDDLE Louise	Thompson	-		2. DATE OF BIRTH	3. DATE OF DE/	
	DDRESS OF CALIFORN	A-FUNERAL DIRECTOR OR PERSO 5050 Federal B	-	LIF. LICENSE NUMBER 5	039	RELATIONSHIP, FULL MA ORMANT B Lene Waker, I Lion St. 1ego, CA 921	aughter	ND ZIP CODE
	I I banks	San Diego, CA	F	1329		ATURE OF APPLICANT-Per	nun taking permit   BB.	DATE SIGNED
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THES PERMIT IS ISSUED OF THE CALIFAND IS THE AUTHORIT IN THIS PERMIT.	1376 of the Health and Salety Code, and was as JED IN ACCORDANCE WITH PROV O'GRINA HEALTH AND SAFETY COC TY FOR THE DISPOSITION SPECIFIE TO BEHLT OF DISPOSAL OUTSIDE OF CALIFORNIA	9A. AMOUNT OF FEE P		SSUED	9C SIGNATURE OF LOC	AL REGISTRAR IS	PHONES PRODUCED
	9D. ADDRESS OF RE	EGISTRAR OF DISTRICT OF DE- ED IN CALIFORNIA OTOS; P.O. BOX 8: San Diego, CA 9:	5222 BE AD	DRESS OF REGISTRAR ( DISPOSITION IS TO OCCUR	CONTRACTOR OF THE PARTY OF THE	RICT OF DISPOSITION— OTHER DISTRICT IN CAUPORI	NIA.	NE L
B. CREMATION	OF CREMATED REM EMETERY SE		E. TEMPORARY ENVA	DRINIA	1110			NS LOCATED A
BURIAL		Cemetery; 3751 Mars San Diego, CA		5/1/95		Whit	4	
CREMATION SCIENTIFIC		etal non-	NINTALL.	128. DATE CREMATE	D 120	SIGNATURE OF PERSO	ON IN CHARGE O	F CREMATION
SCIENTIFIC USE	N/A	DDRESS OF CALIFORNIA FACILI	ITY RECEIVING REMAINS	138. DATE RECEIVE	ED 130	SIGNATURE OF PERS	ON IN CHARGE (	OF FACILITY
TRANSIT		DDRESS IN RECEIVING STATE O CREMATED REMAINS ARE TO E		14B. DATE SHIPPEI	140	ADDRESS AND SIGNA OF PLACING WITH TH		N IN CHARGE
ATTERING AT SEA OR POSITION OTHER N IN A CEMETERY	PICIENT TO IDE	JREST POINT ON SHORELINE, OR ENTIFY FINAL PLACE AND CA <u>DIS</u>		15B. DATE OF DISPOSITION	150	SIGNATURE OF PERSO CHARGE OF DISPOSIT	TION   OF	ENSE NUMBER CREMATED RE- INS DISPOSER F APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



### CITY OF SAN DIEGO, CALIFORNIA GENERAL INVOICE

Make Remittance Pavable to CITY TREASURER P O Box 2289 San Diego, California 92112 Please Return YELLOW Copy with Your Payment

CHARLENE BAKER 5039 LYON ST SAN BIEGO CA 92102 SAN DIEGO CA 92102 ACCT NO 085059

TREASURERS USE ONLY ---

PAYMENT DATE CAD (CK Hand delivered

PAYMENT REF NO

INVOICE DATE 05/01/95 PAYMENT DUE 05/31/95

PERIOD COVERED APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT: JOANN WAITS RFF NO: E-12190 DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMBUNT

WILLIE L THOMPSON SERV DPENING/CLOSING LINER HANDLING FEE TAX ON LINER RECORDING FEE LESS PAYMENT ON R-46 CITY OF SAN DIEGO, CALIF

MAY 23 1995

MT. HOPE CEMETERY

190.00 145.00 13-30 45.00 300.00-

375-00

TOTAL DUE 468 - 30 NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL 85 SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER. INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT A B O V - White - Customer Copy . Yellow - Remittance Copy NO.

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

46168

From: Andream - Rago	naturary 5050 7 oder	Date:	5-1	A 9210	22
In part Payment of	Payment of   Division   Divisio				
Lot Grave	/ 2 Row	ection/			12
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	20% Sales Care 80% Sales	100		
W.O. E - 13190		Opening/ Closing Burlai	77181 — 100	300	00
BALANCE DUE 446 X + 30		Handling Fee Recording &	77185 — 100		
	001	Pre-Need Trust	63033 9022 60101		
AC-212 (Rev. 5-94) 675/	ISSUED BY // CO. CA.	TOTAL PAID	5	300	00

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 4/26/95

You are hereby authorized and instructed, s	subject to your rules and regulations, to inter the remains
of mario Corona	- Fernandez PA # 1179020
ina lines	Funeral, date, time Fri 4/28/95 @ 10m
Church Chapel Graveside deliver	y only: mayor (gim) Mortuary.
All Funeral cars must arrive before 3:30 p.m	of regular work day or an extra charge of \$
will be applied and billed to undersigned	
War time veteran	
Lot Grave Row	Section Division/Block
Grave space & Care Fund	
Additional spaces and care fund	
Opening/Closing & Setup	
Burial Container	
Handling Fees	
Flower vases - Marker setting fee	
Recording and filing fee	1/09/210
Sales taxes	0/2/0
	Total Due
Paid	receipt number
	Balance due
I hereby certify I am the	of the above named decedent n of remains as above indicated. I certify and represent on and I agree to hold Mt. Hope Cemetery harmless from and interment.
I hereby authorize the interment in lot I hold under deed.	Signature
	Address
Signature of recorded holder of deed	City Ztp Code
	Telephone
_ 12191	Invoice #
Work Order # E	Acct. #

### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 4-27-95

of LONGFIELD,	FRI 31	138
ina Linux	Funeral, date, time MOAD	7 LAN
Church, Chapel, Graveside	ury only mayor	Mortuary
All Funeral cars must arrive before 3:30 p	o.m. of regular work day or an extra charge	of \$
will be applied and billed to undersigned.		-11/4
War time veteran	^	
Lot 108 Grave 10 Row.	Section 2 Divisional	Hock 12
Grave space & Care Fund	E-1/337	0-
Additional spaces and care fund		
Opening/Closing & Setup	E-11337	
Burial Container	E-1/33/	
Handling Fees	E-11337	
Flower vases - Marker setting fee		
Recording and filing fee	E-11337	
Sales taxes	E-1/337	
nank Hostatter	Total Due	
94-2953 P	aid receipt number	
211 021-	Balance du	
I hereby certify I am the and this is your authority to make disposithat I have the right to make this authorization and liability on account of said authorization.	ition of remains as above indicated. I cert	named deceden ify and represen ry harmless from
hereby authorize the interment in lot I	Signature	
hold under deed.		
hold under deed.	Address	
	Address	Zip Cod
hold under deed. Signature of recorded holder of deed		Zip Cod
	City	Zip Cos

E12192

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

lattie	ENT—FIRST (GIVEN)	IB. MIDDLE	Longfiel		2. DATE OF BIRTH 02/24/1908	3. DATE OF DEATH 04/22/1995	4. SEX
onal Cit	ty		58. COUNTY OF DE	EATH OUTSIDE CALF. 8.	NAME, RELATIONSHIP, FULL M	ator-M. Host	cooe
		dams Ave., S	an Diego, CA	1424PLICABLE S	201-A Raffin Ro an Diego, CA 92 SIGNATURE OF APPLICANT	2123	E SIGNED
ACADIOMASSIKANENS OF SI			proposed disposition stated herein is one of and was authorized purposet to Section 7100	the dispositions authorized by	Court-	04/27	A STATE OF THE PARTY OF THE PAR
PERMIT NUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	UED IN ACCORDANCE WITFORNIA HEALTH AND SAFE TY FOR THE DISPOSITION OF DISPOSAL OUTSIDE OF	SPECIFIED \$7.00	98. DATE PERMITS 04/27/199 James Hale	A CONTRACTOR OF THE PARTY OF TH	CAL REGISTRAR ISSUIN	G PERMIT
all and the second of the seco	P.O. BOX 85	EGISTRAR OF DISTRICT 1222 CA 92186-52			F DISTRICT OF DISPOSITION- IN AMOTHER DISTRICT IN CAUPO	RNIA	
A BURIAL (INCL)	UDES ENTOMBMENT)		E. TEMPORARY E	NVAULTMENT	I DISPOSITION	PENDING—REMAINS LO	CATED A
B. CREMATION	SE	100000000000000000000000000000000000000		UTSIDE OF CALIFORNIA			
B. CREMATION C. DISPOSITION THAN IN A CE	IIA. NAME AND A	DORESS OF CALIFORNIA	G. SHIP IN TO CAL		11C. SIGNATURE OF PER		IRIAL
B. CREMATION C. DISPOSITION THAN IN A CI D. SCIENTIFIC US	IIA NAME AND A Mt Hope C 3751 Mark	DORESS OF CALIFORNIA	G. SHP IN TO CAI  H. TRANSIT TO O	118. DATE BURIED	11C. SIGNATURE OF PERS	SON IN CHARGE OF BU SON IN CHARGE OF CRI	EMATION
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US	11A. NAME AND A Mt Hope O 3751 Mark 12A. NAME AND A WOOD (	DORESS OF CALIFORNIA  EMPLOY  St., San I  DORESS OF CALIFORNIA	G. SHP IN TO CAI  H. TRANSIT TO O	118. DATE BURIED	11C. SIGNATURE OF PER	SON IN CHARGE OF BU SON IN CHARGE OF CRI	EMATION
B. CREMATION C. DISPOSITION THAN IN A CI D. SCIENTIFIC US BURIAL CREMATION SCIENTIFIC	ITA. NAME AND ALL ME HODE CO. 3751 Mark.  12A. NAME AND ALL WOOD CO. 13A. NAME AND ALL MANE AND	DORESS OF CALIFORNIA  BET St., San I  DORESS OF CALIFORNIA  DORESS OF CALIFORNIA	G. SHIP IN TO CAI  H. TRANSIT TO OF  CEMETERY  CREMATORY  CREMATORY  FACILITY RECEIVING REMAINS  STATE OR COUNTRY WHERE	118. DATE BURIED	11C. SIGNATURE OF PERS	SON IN CHARGE OF CRI	CRITY

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 4/28/95

You are hereby authorized and instructed, su	bject to your rule	s and regulations, to	inter the remain:
of stiarganua	6.00	Will.	5/3
ina 1.5 Vault	Funeral, date, tim	ne 277077 5XL	195@ 11
Church Chapel, Graveside Church	side :	Humpbre	4 Mortuary
All Funeral cars must arrive before 3:30 p.m.	of regular work of	lay or ar extra charge	ors 150°
will be applied and billed to undersigned. $\underline{\chi}$	KIN C	8	
War time veteran 200.			
-Lot 1036 Grave Row	Section .	Division/E	Block 10
Grave space & Care Fund		***************************************	995.a
Additional spaces and care fund			
Opening/Closing & Setup.	חו		375.0
Burial Container	(ID		2500
Handling Fees MAY -	1 1995		185.0
Flower vases - Marker setting fee			
MT. HOPE	CEMETERY DIEGO: CALI		45 ac
Sales taxes	DIEGO, CALI		17.50
W		Total Due	18/17.5
de de	receipt number _	PH WISA	4107.0
NA.	receipt number _	44 6 641	1400 5
0.		Rep Balance du	la lilon
I hereby certify I am the 50 V		of the above	named deceden
and this is your authority to make disposition that I have the right to make this authorization	n and I agree to h	old Mt. Hope Cemete	ry harmless from
any liability on account of said authorization a	and interment.	,,	Trivia de la constitución de la
	R	4 / In	
I hereby authorize the interment in lot I hold under deed.	Signature	010	
(No dines deed.	35	O BAY LEAF	OK
Signature of recorded holder or dead	CH	ula VISTA	CA 9/91-
/	City 62	22.6934	Zip Goo
	Telephone	->-0/-/	
19109	Invoice #		
Work Order # E 12193	a variable of		
PY-593 (Rev. 8-92)	Acct. #		

the fire section 1		-			CONTRACTOR AND
MT.	$\omega \alpha n$		-		
na s	HUP	-	- P IM	-	
		_		_	

PY-1012 (11-89)

w.o. # €-12193

## NOTE

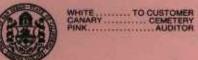
\$ 14	00,50		3	San Diego,	California	Up	ul .	18	19_4
3751 Market with interest	Street, San Die from f 12 percent per	go, CA 92101	, the sum of	Fourt	en Hung		ifty.		DLLARS
accrue at the will be liable maturity, and person who contained he	this note not be parate indicated a and consents to display which waives present signs this note erein. If any actitorney's fees.	above. Princip o renewals, r tment, dema agrees that r	pal and intere replacements and and prote recourse may	st are paya and extens st and the be held ag	ble in lawful m sions of time f right to assert ainst his/her	oney of the or payment any status separate p	e United at hereof te of limit property f	States. The before, at ations. A or any ob-	e maker or after married ligation
Part auth	II, Chapter I, A orizes the remov	al of any rem	ains from a p					CONTRACTOR DESCRIPTIONS	
PRINT NAME	ROBERT	C. 60	PEL	SIGNAT	TURE 10	10	Les .		
ADDRESS	350 BAY	cent e	DR. CH	uala u	1121 0	919	10		15.1
CALIFORNIA D	RIVER LICENSE N	UMBER EC	0009346	9.	SSN #	548	86-4	567	

E12193

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

HARGARITA	NT—FIRST (GIVEN)	18. MIDDLE CASTAMARES	IC. LAST (FAMILY)		2. DATE OF BIRTY MONTH, DAY, YE 02/22/1918		4. SEX
San Diego			58. COUNTY OF DEA ENTER STATE San Diego	TH-OUTSIDE CALIF., 6.	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER, THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN CO	L MAILING ADDRESS AND Z	P CODE
Rusphrey	Chula Vista M		RISON ACTING AS SUCH 7B. G.	HF APPLICABLE	350 Bay Leaf Chula Vista, CA		TE SIGNED
ACKNOWLEDGMENT OF A	PPERCANT   nereby of Section 10	acknowledge as applicant that the proper 1376 of the Health and Safety Code, and s	Red disposition stated herein is one of these authorized cursuant for Section 7100 of	the Health and Safety Code.	Willella Co	Jan Duly	1505
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	AND IS THE AUTHORI'	UED IN ACCORDANCE WITH FORMIA HEALTH AND SAFETY BY FOR THE DISPOSITION SPECIFIC OF DISPOSAL OUTSIDE OF CALL	AFIED 67.00	98. DATE PERMIT IS 05/02/199	SUED 9C SIGNATURE OF 9505961	LOCAL REGISTRAR ISSUIN	IG PERMIT
NY CHANGE IN DISPOSI- TION REQUIRES A NEW TERMIT TO SHOW FINAL DISPOSITION.	Vital R	ecords P.O. Box	85222		F DISTRICT OF DISPOSITION IN AMOTHER DISTRICT IN CA		
D. AUTHORIZED DISP	OSITION(S) CHECK A	GO CA 92186-5222 PPLICABLE ITEMS	1		FOR C	ORONER'S USE ONL	Y
B. CREMATION C. DISPOSITION THAN IN A CI D. SCIENTIFIC US	ITA NAME AND AS	DDRESS OF CALIFORNIA CE	- And John College	ORNIA SIDE OF CALIFORNIA 11B. DATE BURIED		PERSON IN CHARGE OF B	URIAL
-					January	ERSON IN CHARGE OF CR	-
CREMATION	12A. NAME AND A	DDRESS OF CALIFORNIA CE	tal seale	128L DATE CREMATER	120 MIGNATURE OF P	ERSON IN CHANGE OF CH	EMATION
CREMATION  SCIENTIFIC USE		M/A YOU DORESS OF CALIFORNIA FA	tal seale	À		PERSON IN CHARGE OF F	
SCIENTIFIC	13A. NAME AND AI	M/A Y	CILITY RECEIVING REMAINS	À	D 13C. SIGNATURE OF I	PERSON IN CHARGE OF F	ACILITY



#### MOUNT HOPE CEMETERY 527-3400

		S. S.	Date:	Very	1	9 0
From Kobert C Lup	Address:	350 Ray	steaf Dr.	Mil	a Vista	c 9 A
Fourteen Hund	red Twenty	100	1 29100 00	illars (\$ .	1,424	20
InPayment of	later men	+ 101	Margarite	0	Epzen &	The state of
galvanud	Moures 1	an	4		. 0	
Lot 10210 Grave	/ -	_ Row	Section	W.	Division Blook	10
Invoice No.	NOT VALID FOR PURPOSE	STATED UNLESS S	TAMPED CREDIT 20% Sales Care	57007 77184	199	00
Acct. No.			60% Sales of Lots	77184	329	00
wo. E-12193			Opening/ Closing Buriel	77181	260	172
BALANCE DUE			Containers Handling Fee	77182 — 100 33185 —	198	00
	THE PARTY OF THE P		Recording & Minc. Fees	100 77183 —	45	00
Pre-Need Lot At Need On Acct			Pre-Need Trust Sales Tax	63033 9022 — 60101	12	20
Pre-need Trust Cash Check AC-212 (Rev. 5-94)		elnak	TOTAL PAID	78390	11/2/	20
AC-212 (Rev. 5-94)	133000		, STAL PAID	-	1,404	100

#### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 4-28-95

of ZOHNSON	instructed, subject to	A STATE OF THE PARTY OF THE PAR	egulations, to in	ter the remains
ina Liner	Funeral	i, date, time (1)	1513	1:00
Church, Chapel, Graveside	hapel & Con	supide 1	Rapadal	Mortuary.
All Funeral cars must arrive be	fore 3:30 p.m. of regu	lar work day of a	n extra charge	01\$ 150,00
will be applied and billed to unc	toreigned XS9	wron Ja	hnsox	,
		~	TI BANK	
War time veteran NO				
Lot 135 Grave 10	Row	Section 3	Division/Bi	ock 13_
Grave space & Care Fund				795.00
Additional spaces and care fun				
Opening/Closing & Setup				375.00
Burial Container		AL		190.00
		AID	1	145.00
Handling Fees	CONTRACTOR OF THE PARTY OF THE	00		145,00
Flower vases - Marker setting	leeAPK	20 1995		11 = . 3
Recording and filing fee		OF OF O		45,00
Sales taxes	CITY of SA	PE CEMETEI IN DIEGO, CA	RY I	13,30
		Total D	ue	1563-3
	Paid receipt	number R-4	6166	1563,30
			Balance due	-0_
I hereby certify I am the and this is your authority to ma that I have the right to make thi any liability on account of said	ake disposition of rem s authorization and I	nains as above inc agree to hold Mt.	dicated. I certify	amed decedent y and represent y harmless from
I hereby authorize the intermer hold under deed.	nt in lot I	6 34 arm	Claha 5000	era ext.
Signature of recorded holder of deed	7	Shullu × 281- Telephone	1376	. 95/05 Zp Cade
	You	entreporte		
F 12	104	Invoice #		
Work Order # PY-593 (Rev. 8-92)		Acct. #		

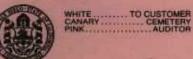
-E12194

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	ENT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMILY)			Z. DATE OF BIRTH	3. DATE C	
_ George		-	Johnson,	Jr.	0	1970271946	047267	1995
OF DEATH	an Diego		SE COUNTY OF DEATH ENTER STATE San Diego		OF INFO	HELATIONSHIP, FULL MANT	West of the Control o	THE OWNER OF THE PARTY OF THE P
		A-FUNERAL DIRECTOR OR PERSON A	ACTING AS SUCH 7B. CAL	IF. LICENSE NUMBER	Department of the	52nd St.		
Anderson-R	agsdale Mor	t.; 5050 Federal E	Blvd.	APPLICABLE		dego, CA 92	105	
-		n Diego, CA		329		TURE OF APPLICANT P		No. of the Control of
ACKNOWLEDGMENT OF A		cknowledge as applicant that the proposed dispo- 376 of the Health and Safety Gode, and was authors			All	Lubbelle	41	04/28/19
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	DED IN ACCORDANCE WITH PROVI- ORNIA HEALTH AND SAFETY CODE Y FOR THE DISPOSITION SPECIFIED DIRRHT OF DEPOSIA OUTSIDE OF CALFORNIA.	\$7.00	98. DATE PERMIT	995 P	C. SIGNATURE OF LO		RAR ISSUING PER
The Charles of the Ch	90 ADDRESS OF RE	GISTRAR OF DISTRICT OF DEATH	22			CT OF DISPOSITION— HER DISTRICT IN CALIFOR	ENIA	
ID AUTHORIZED DISP				THE PART OF	- 1	FOR CORE	ONER'S U	ISE ONLY
B. CREMATION C DISPOSITION THAN IN A CE SCIENTIFIC US	SE /	AINS OTHER	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS		D . 11C	(Name and Ac		POF OF BURNA
BURIAL		San Diego, CA		5/3/95	1	Vini	0	
CREMATION	N/A	netal no-	seeler	12B. DATE CREMA	TED 12C.	SIGNATURE OF PERS	ON IN CHAP	IGE OF CREMATIC
SCIENTIFIC USE	N/A	DDRESS OF CALIFORNIA FACILITY	RECEIVING REMAINS	138. DATE RECEI	VED 13G.	SIGNATURE OF PERS	SON IN CHA	RIGE OF FACILITY
TRANSIT		DORESS IN RECEIVING STATE OR C CREMATED REMAINS ARE TO BE		148 DATE SHIPP	ED 14G.	ADDRESS AND SIGNA OF PLACING WITH TH		
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR OTH NTIFY FINAL PLACE AND CA DISTRIC		158 DATE OF DISPOSITION		SIGNATURE OF PERS CHARGE OF DISPOSI		5D. LICENSE HUMBE OF CREMATED R MAINS DISPOSER —IF APPLICABLE

OPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN ARGE OF DISPOSING OF THE CREMATED REMAINS.



#### MOUNT HOPE CEMETERY 527-3400

From Sharp John Shifteen from Sharp John Sha	ist three & solioo	Date: 4-2	8 ,1995 12 93105 1563,30,
Lot /35 Grave	/ O Row	Section 3	Division / >
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPE "PAID" IN THIS SPACE.	ED CREDIT 67007 20% Sales Care 77184 - 80% Sales 100	159 00
Acct. No.		of Lots 77184 - Opening/ 100 Closing 77181 -	375 00
w.o. <u>E 18194</u>	The state of the s	Buriel 100 Containers 77182 -	19000
BALANCE DUE		Handling Fee 77185 - Recording & 100	45 00
Pre-Need Lot At Need On Acct		Misc. Fees 77183 - Pre-Need 63033 Trust 9022 -	
Pre-need Trust Cash Check C	1/0 04	Sales Tax 60101 78390 -	13 BA
AC-212 (Rev. 5-04)	ISSUED BY TOUR	TOTAL PAID \$	1565 30

MT. HOPE CEMETERY INTERMENT ORDER City of San Diego

OPEN ALBTI

Date May 1, 1995

You are hereby authorized and instructe	ed embiant to your miles	and regulations to i	nter the remains
of Chustal	Odom	and regulations, to	ritor bio remains
ina Pines	Funeral, date, time	Thurs 5/	4/95/209
Church Chapel, Graveside Church	11	4 - 4	Mortuary.
All Funeral cars must arrive before 3:30	. 0	dr an extra charge	ors 15000
will be applied and billed to undersigned	10:30am	ww Non	n
War time veteran			
Lot 255 Grave 3 Row	Section	2 Division/B	lock/2
Grave space & Care Fund		50 234 -	795.00
Additional spaces and care fund			
Opening/Closing & Setup			375.00
Burial Container			190.00
Handling Fees	راب .	we -	145.00
Flower vases - Marker setting fee	id my		4
Recording and filing fee	27	ા લુ	45.00
Sales taxes	11.0.		13 30
	To	otal Due	1563.30
	Paid receipt number	46175	400.00
- 11		Balance due	1163 .30
I hereby certify I am the	zation and I agree to hole	ve indicated. I certi	named decedent fy and represent y harmless from
I hereby authorize the interment in lot I hold under deed.	Seriative 412		OKE Or.
Signature of recorded holder of deed	X SHU 2 280	DIE60, CA -1581	72105 Zp Code
- 12195	Invoice #	35347	
Work Order # E	Acct. #	385097	
PY-593 (Rev. 8-92)			

## W.O. # E-12195

### NOTE

_ ;	
	hirty days after date for value received, the undersigned maker promises to pay San Diego City Treasurer, or order at
-	751 Market Street, San Diego, CA 92101, the sum of Eleven Hundred Sively Three \$3000 DOLLARS with interest from on the unpaid principal the rate of 12 percent per annum, payable on demand.
	Should this note not be paid when due, it shall thereafter bear interest on the principal. Interest after maturity will occue at the rate indicated above. Principal and interest are payable in lawful money of the United States. The maker will be liable and consents to renewals, replacements and extensions of time for payment hereof before, at or after naturity, and waives presentment, demand and protest and the right to assert any statute of limitations. A married terson who signs this note agrees that recourse may be held against his/her separate property for any obligation ontained herein. If any action be instituted on this note, the undersigned promise(s) to pay such sum as the Court may fix as attorney's fees.
	Part II, Chapter I, Article 2, Paragraph 7528 of the State of California Health and Safety Code authorizes the removal of any remains from a plot for which the purchase price is past due and unpaid.
	RINT NAME JAMES ODOM SIGNATURE JAME Non
	DDRESS 4123 SYCAMORE Dr. SD 8CA 92105
	ALIFORNIA DRIVER LICENSE NUMBER CAORY711 SSN # 547-98-558
,	P-1012 (11-66) +

CITY	CALIFORNIA					920168
			GEPARTMENT!	Mag	1Call	7-279
Cusan	d two	hundi	ed nin	ity-pu	X 08/10 CEN	15 \$1296.0
nes	Edon	m		ADDRESS:		
1# 8	23/6/					
			RECEIVED BY	2	<u> </u>	
K	Ŋ.	ASH		Min	is all holy	to
			(1)			AMENT
PARTMENT	ORGANIZATION	ACCOUNT	JOB ORDER	FACILITY		STRIBUTION: WHITE - CUSTOMER
	4			2		INK -THEASURER
	OFFIC Mar	california OFFICIAL RECEI Wand two ness Eclas # 823/6/	official receipt  wand two hunds  res Eclom  # 823161	OFFICIAL RECEIPT  OFFICIAL RECEIPT  Wand two hund red pollar  THE Eclam  H 823/6/  CASH  RECEIVED BY	CALIFORNIA  OFFICIAL RECEIPT  Wand two hundred politans  PLES Eclasa  RECEIVED BY:  K  CASH  CAS	CALIFORNIA  OFFICIAL RECEIPT  I CASH  RECEIVED BY:  RECEIVED BY:  ADDRESS:  RECEIVED BY:  ARTMENT ORGANIZATION ACCOUNT JOB ORDER FACILITY AMOUNT  RECEIVED BY:  RECEIVED B

Yames

255

From:

Payment of

1163.30

Odow

anudres

Grave

On Acct

MOUNT HOPE CEMETERY

Row.

NOT VALID FOR PURPOSESTATED UNLESS STAMP

ISSUED BY V Balothy

Address:

CHERMANI

CA	Date:	5	0.00	1995
	Chaystat	ollars (\$	odour	00 ,
Se	ction		Division Block	12
ED	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees	67007 77184 — 100 77184 — 100 77181 — 100 77185 — 100 77185 — 100 77185 —	400	00
3	Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 — 80101 78390 —	400	00

BALANCE DUE
Pre-Need Lot C
AC-212 (Rev. 5-94)

Acct. No. \_\_

E12195

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

CONTROL SECTION AND PROPERTY.	NT-FIRST (GIVEN)	18 MIDDLE	1	C. LAST (FAMIL)	0		2. DATE OF BIRTH	3. DATE OF		4. SEX
Crystal		Nicole		Odom				041 271	1723	. F
Y OF DEATH			51		EATH-OUTSIDE CALIF.		RELATIONSHIP, FULL MA		SS AND ZIF	CODE
In Diego				San Die		10000000	es Odom-Fath			
California	Cremation	NA FUNERAL DIRECTO	Chapel	NG AS SUCH 7B.	CALIF LICENSE NUMBER —IF APPLICABLE	2000	3 Sycamore D Diego, CA 9			
5880 El Ca	E. JOSEPH STREET, STRE	San Diego,	and the second second second second		FD 1357	BA. SIGN	ATURE OF APPLICANT-FE	asym taking permit	BB. DATE	SIGNED
ACKNOWLEDGMENT OF A	PLICANT I heraty Section	admowledge as applicant that 0.176 of the results and Salety (	t the proposed disposition Code, and was authorized p.	stated herein is one of erseart to Section 7100	the dispositions authorized by of the Health and Safety Code.	> fe	al ach	m	05/02	/199
PERMIT JTHORIZATION OF	AND IS THE AUTHOR IN THIS PERMIT.	HORNIA HEALTH AND S KTY FOR THE DISPOSITS	ION SPECIFIED	\$7.00	05/03/19	995	9506008	CAL REGISTS	RAA ISSUING	PERMI
OGAL REGISTRAR	STATE OF THE PROPERTY OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS N	NO RIGHT OF DISPOSAL OUTSE REGISTRAP OF DISTR			ADDRESS OF REGISTRAL	THE RESERVE AND ADDRESS OF THE PARTY OF THE	DICT OF DISDOSITION			
Y CHANGE IN DISPOSI- ON REQUIRES A NEW		COTOS-P.O. 1		1			OTHER DISTRICT IN CALIFOR	RNIA		
RAIT TO SHOW FINAL DISPOSITION		o, GA 92186-					-			
	CONTROLLED TO THE OWNER.	ADDITION F ITEMS					FOR COR	ONER'S U	SE ONLY	
B. CREMATION C. DISPOSITION	DES ENTOMBMENT)		į,	TEMPORARY E DISINTERMENT SHIP IN TO CA			I. DISPOSITION (Name and Ad		EMAINS LO	CATED /
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PLEASE RETURN THIS COPY - COMPLETED AT BOTTOM.

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

PRE-NEED

PY-593 (Rev. 8-92)

City of San Diego

of MILDRED NO	YES	
ina Liner	Funeral, date, time	
Church, Chapel, Graveside		Mortuary.
All Funeral cars must arrive before 3:	30 p.m. of regular work day or an extra charg	e of \$
will be applied and billed to undersign	ned	
War time veteran		
Lot 69 Grave R	ow Section 1 Division/	B16666 8
Grave space & Care Fund	E-1621	0
Additional spaces and care fund		
Opening/Closing & Setup		\$375.00
Burial Container	PAID	190.00
Handling Fees		145.00
Flower vases - Marker setting fee	MAY - 8 1995	
Recording and filing fee	MT. HOPE CEMETERY	45.00
Sales taxes	CITY of SAN DIEGO, CALIF	13,30
	Total Due	\$768.30
	Paid receipt number R-46202	768,30
	Balance di	ne
I hereby certify I am the and this is your authority to make dis that I have the right to make this author any liability on account of said author	position of remains as above indicated. I cer orization and I agree to hold Mt. Hope Cemet	tify and represent
I hereby authorize the interment in lot hold under deed.	× 4/81 Low Str	et _
Signature of recorded holder of deed	* La Mesa, CA  City  XW.299-4770-4-4  Telephone	163-2912
1219	6 Invoice #	

# 10



#### MOUNT HOPE CEMETERY 527-3400

Seven hudnred sixty-eight & 30/100   Dollars (\$ 768.30			Date:	
Payment of				
Not valid for Purpose stated unless stamped   Credit   67007   20% Sales Care   77184   80% Sales   100	InFull : Payment of Pre-	-Need Trust portion for HILDS		
### PAID IN THIS SPACE  20% Sales Care 77:84  80% Sales Care 77:84  90% Sales Care 77:84  Opening/ 100  Closing 77:81  Burisl 100  Containers 77:82  Pre-Need Lot	Lot69 Grave	RowS	ection1	Division 8
Acct. No	Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 —	
W.O	Acct. No.		of Lots 77184 —	
BALANCE DUE	w.o. E-12196		Closing 77181 —	
Pre-Need Lot  At Need  On Acct  Misc. Fess  7783  768  30  Pre-need Trust  Cash  Check  Sales Tax  60101  78390  768  30	BALANCE DUE -0-		Containers 77182 — 100	
Pre-Need Lot  At Need  On Acct  Pre-Need  Frust  Cash  Check  Sales Tax  On Acct  On			Recording & 100	
Pre-need Trust Cash Check Sales Tax 60101 78390 768 30	Pre-Need Lot  At Need  On Acct			768 30
I DISCIPITATE AND A STATE OF THE STATE OF TH	Pre-need Trust Cash Check	161	Sales Tax 60101	
		ISSUED BY LUCK	TOTAL PAID \$_	768 30

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 5-2-95

	subject to your rules and regulations, to inter the remains
of Miller, Hatrick	WLuke PA 1179039
ina Liner	Funeral, date, time
Church, Chapel, Graveside Doline	ery only: Mayer Mortuary.
All Funeral cars must arrive before 3:30 p.	m. of regular work day or an extra charge of \$
will be applied and billed to undersigned.	
War time veteran	
Lot Grave Row_	Section Division/Slock
Grave space & Care Fund	126.00
Additional spaces and care fund	1 - HU /-
Opening/Closing & Setup.	165,00
Burial Container	50.00
Handling Fees	
Flower vases - Marker setting toe	
Recording and filling fee	4500
Sales taxes	
Sales laxif	Total Due
Dec	id receipt number
ra	
None and Carly Cour	Balance due
I hereby certify I am the and this is your authority to make dispositi that I have the right to make this authorizati any liability on account of said authorization	of the above named decedent on of remains as above indicated. I certify and represent ion and I agree to hold Mt. Hope Cemetery harmless from and interment.
I hereby authorize the interment in lot I hold under deed.	Signature
	Address
Signature of recorded holder at deed	City Zp Code
	Telephone
- 12197	Invoice #
Work Order # E	Acct. #
PY-593 (Rev. 8-92)	

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

5-12-95

You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains Funeral, date, time Church, Chapel, Graveside Mortuary. All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge of \$ will be applied and billed to undersigned. War time veteran Division/Block Grave space & Care Fund . Additional spaces and care fund Opening/Closing & Setup Burial Container .... Handling Fees .... Flower vases - Marker setting fee 45.00 Recording and filing fee ..... Sales taxes .... Total Due... Paid receipt number Balance due I hereby certify I am the of the above named decedent and this is your authority to make disposition of remains as above indicated. I certify and represent that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and interment. I hereby authorize the interment in lot I Signature hold under deed. Signature of recorded holder of deed Zip Code 12198

Work Order # \_ PY-590 (Rev. 8-92)

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS found 1A. NAME OF DECEDENT-FIRST (GIVEN) 1B. MIDDLE IC. LAST (FAMILY) 2. DATE OF BIRTH A BLATE OF DEATH 4. SEX Casteel Y2771577193ff Brigar Wayne м 5A. CITY OF DEATH 5B. COUNTY OF DEATH-OUTSIDE CALIF... 6. NAME, RELATIONSHIP, FULL MAJEING ADDRESS AND ZIP CODE OF INFORMANT Public Administrator - L. Jamme San Diego 7A. TYPED NAME AND ADDRESS OF CALIFORNIA-FUNERAL DIRECTOR OR PERSON ACTING AS SUCH 7B. CALIF LICENSE NUMBER 5201-A Ruffin RD. IF APPLICABLE Mayer Mortuary San Diego, CA 92123 1424 2859 Adams Av. San Diego, CA 92116 8A BIGNATURE OF APPLICANT-Person blow pernit, 8B. DATE SIGNED I hereby acknowledge as applicant that the proposed disposition stated herein is one of the dispositions authorized by Section 10376 of the Health and Safety Code, and was authorized pursuant to Section 7100 of the Health and Safety Code. ACKNOWLEDGMENT OF APPLICANT THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI-9A. AMOUNT OF FEE PAID . 9B. DATE PERMIT STUED . 9C. SIGNATURE OF LOGAL REGISTRAR ISSUING PERMIT PERMIT SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED AUTHORIZATION OF IN THIS PERMIT 7.00 NOTE: THIS PERMIT GIVES NO HIGHT OF DISPOSAL OUTSIDE OF CALIFORNIA. LOCAL REGISTRAR 9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH-9E. ADDRESS OF REGISTRAR OF DISTRICT OF DISPOSITION-ANY CHANGE IN DISPOSI-P.O. BOX 85222 IF DISPOSITION IS TO OCCUR IN ANOTHER DISTRICT IN CALIFORNIA TION REQUIRES A NEW TO SHOW FINAL POSITION San Diego, CA 92186-5222 ID SUTHORIZED DISPOSITION(S) CHECK APPLICABLE ITEMS FOR CORONER'S USE ONLY A. BURIAL (INCLUDES ENTOMBMENT) E TEMPORARY ENVAULTMENT L DISPOSITION PENDING-REMAINS LOCATED AT (Name and Address) B. CREMATION F. DISINTERMENT C. DISPOSITION OF CREMATED REMAINS OTHER G. SHIP IN TO CALIFORNIA THAN IN A CEMETERY H TRANSIT TO OUTSIDE OF CALIFORNIA D. SCIENTIFIC USE TIA WAME AND ADDRESS OF CALIFORNIA CEMETERY 11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL 11B. DATE/BURIED BURIAL 3751 Market St. San Diego, CA 92102 12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY 128. DATE CREMATED SIGNATURE OF PERSON IN CHARGE OF CREMATION 120 CREMATION NO0. ISA. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS 13B. DATE RECEIVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY SCIENTIFIC USE 14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE 14B, DATE SHIPPED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED OF PLACING WITH THE CARRIER TRANSIT 15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUF-15B. DATE OF 15C. SIGNATURE OF PERSON IN **ESD. LICENSE NUMBER** SCATTERING AT SEA CHARGE OF DISPOSITION FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT OF DISPOSITION OF CREMATED RE-DISPOSITION MAINS DISPOSER

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS



DISPOSITION OTHER

THAN IN A CEMETERY

ALE

COMPLETE

# APPLICABLE



# CITY OF SAN DIEGO, CALIFORNIA GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P O Box 2289 San Diego, California 92112

San Diego, California 92112
Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

PAYMENT DATE 6-9-95

PAYMENT REF NUOH-833699 | AMT PAID: 386.00

DS/23/95

06/22/95

PERIOD COVERED
APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JUANN WAITS

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

TANDUNT

WAYNE CASTEEL PA #1178733 SVCS
LOT 81 GRAVE 6 SEC 1 DIV 12

OPENING/CLUSING
LINER

RECORDING FEE

165-00 50-00 45-00

126.00

TOTAL DUE

386.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT
MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO

AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE
SUBJECT TO A COLLECTION FEE OF 10% OR \$10,

WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH
ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.

ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT

Addresding Applicable Contact

Addresding Applicable Penalties.

254035 05/23/95 000952 COUNTY OF SAN DIEGO EILIGO 072 100 072 100 072 100 072 67007

77181 000072 77182 000072 77183 000072 77184

386.00 PAID IN FULL

386.00 165.00 50.00 45.00 126.00

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date May 3, 1995

na Imil	Fimeral	date time M.O.	5/8/9	5 10:3
Church Chapel, Graveside	1		Frederic	Te
All Funeral cars must arrive before 3	1/)			
will be applied and billed to undersig			lad singe of	412010
	ned.	4 13 am	* -	
War time veteran	· M			12
Lot 79 Grave 5 F	Now	Section	_ Division/Ble	H-10
Grave space & Care Fund	10- Alon	E-1116	7 Bal:	320.
Additional spaces and care fund	', "			
Opening/Closing & Setup	Λ'			375.00
Burial Container	9	/	**********	19000
Handling Fees				14500
Flower vases - Marker setting fee				
Recording and iling fee				4500
Sales taxes				13,30
		Total Du	e	1088.3
	Paid receipt r	number Rec#	46192	272.
	A	ux Inv.	Balance due	816.3
	us 18m	idot.	of the above na	med deceder
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and this is your authority to make dig hat I have the right to make this author any liability on account of said author hereby authorize the interment in lo hold under deed.	rization and inte	ignee to hold Mt. Himment.  Mary  Ignature  Ig	Braid	87 9 9210 9 2000

DO NOT MAIL ENTIRE BUUN mach cumitmess ACCOUNT NO. PRE NEED LOT COUPON Robert Culver E-11462 435 E. Renette Ave. E12199 El Cajon, Ca. 92020 Month and Day Due Indicated Below FER MAR APR MAY JUN JUL AUG SEP OCT HOV DEC X AMOUNT \$ 25.00 (2) Check (,/) if you have a new address and please attach.

Shind or bring one coupon with each remitturing. DO NOT MAIL ENTIRE BOOK ACCOUNT No. PRE NEED LOT COUPON Robert Culver E-11462 435 E. Renette Ave. El Cajon, Ca. 92020 Month and Day Due Indicated Below APR MAY JUN JUL AUG SEP OCT NOV DEC JAN FEB

AMOUNT \$ 25.00

Check (, / ) if you have a new address and please attach

TOTAL RECEIVED \$ 25.00

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TOTAL RECEIVED \$ 25 00

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☐ check ( ✓ ) if this is new address	CITY	-			All Contracts				_		

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

4. SEX 1A NAME OF DECEDENT-FIRST (CIVEN) 1B. MIDDLE 1C. LAST (FAMILY) DATE OF BIRTH 3. DATE OF DEATH ROBERT G. CULVER SA CITY OF DEATH 5B. COUNTY OF DEATH-OUTSIDE CALIF. 8. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE ENTER STATE OF INFORMANT HOLA SAN DIEGO BRAIDOT -BACON STREET D NAME AND ADDRESS OF CALIFORNIA -FUNERAL DIRECTOR OR PERSON ACTING AS SUCH 17B. CALIF LICENSE NUMBER --- IF APPLICABLE PARIS-FREDERICK MORTUARY N DIEGO, CA 9210 374 N. MAGNOLIA AVE., EL CAJON, CA 92020 FD-795 MAY SIGNATURE OF APPLICANT MISSES tolong permit, 8B. DATE SIGNED I hereby advantable as applicant that the proposed disposition stated herein is one of the dispositions authorized by Section 10376 of the Health and Solots Code, and was authorized pursuant to Section 7100 of the Health and Solots Code. 05/04/1995 ACKNOWLEDGMENT OF APPLICANT THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI- BA. AMOUNT OF FEE PAID. 9B. DATE PERMIT ISSUED. 9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT PERMIT SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE 9506114 AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED 05/04/1995 \$7.00 **AUTHORIZATION OF** IN THIS PERMIT SANDRA HEAT LOCAL REGISTRAR NOTE. THIS PERMIT CIVES NO RIGHT OF DISPUSAL ORTSIDE OF CALIFORNIA 9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH-DE. ADDRESS OF REGISTRAR OF DISTRICT OF DISPOSITION-ANY CHANGE IN DISPOSI IF DISPOSITION IS TO OCCUR IN ANOTHER DISTRICT IN CALIFORNIA TION REQUIRES A NEW FERMIT TO SHOW FINAL SAN DIEGO, CA 92186-5222 DÉPOSMON. FOR CORONER'S USE ONLY 10 AUTHORIZED DISPOSITION(S) CHECK APPLICABLE ITEMS A BURIAL (INCLUDES ENTOMBMENT) E. TEMPORARY ENVAULTMENT L DISPOSITION PENDING-REMAINS LOCATED AT (Name and Address) B. CREMATION F. DISINTERMENT C. DISPOSITION OF CREMATED REMAINS OTHER G. SHIP IN TO CALIFORNIA THAN IN A CEMETERY D. SCIENTIFIC USE H. TRANSIT TO OUTSIDE OF CALIFORNIA 11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL **CE\_CALIFORNIA CEMETERY** 11B. DAFE BURIED AURIAL 51 MARKET CA 92102 12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY 12B. DATE CREMATED 12C. SIGNATURE OF PERSON IN CHARGE OF CREMATION CREMATION APPLICABLE 13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS 13B. DATE RECEIVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY SCIENTIFIC USE 14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE 14B, DATE SHIPPED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE COMPLETE REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED OF PLACING WITH THE CARRIER TRANSIT 15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUF-15C. SIGNATURE OF PERSON IN 15B: DATE OF 15D. LICENSE NUMBER CATTERING AT SEA OF CREMATED RE-FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT OF DISPOSITION DISPOSITION CHARGE OF DISPOSITION MAINS DISPOSER REHTO NOITIEG -- IF APPLICABLE IN A CEMETERY

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

10

W.O. # E- 12199

## NOTE

_	816.30		_ San Diego,	California	Tray	5	19 93
3751 with	Market Street, San Di	er annum, payable on d	signed maker proof 21944 A	romises to pay S	an Diego City T	reasurer, or	r order at OLLARS
will b matu perso conta	ue at the rate indicated be liable and consents rity, and waives prese on who signs this not	e paid when due, it shall labove. Principal and in to renewals, replacementment, demand and p e agrees that recourse tion be instituted on th	iterest are paya ents and extens rotest and the may be held ag	ble in lawful mor sions of time for right to assert a painst his/her se	ney of the Unite payment hered ny statute of lin parate propert	d States. The of before, a nitations. A y for any of	he maker t or after married bligation
	authorizes the remo	Article 2, Paragraph oval of any remains from	a plot for which	h the purchase p	rice is past due	and unpaid	
PRINT	NAME MARY	BRAIDOT BACON S	SAN	DIEGO	1 180010 CA 92	107	
		NUMBER N332		1 2 5			

ACCT. NO.



PATE	5 E. Renette Ave., El Cajon 92020ATING	DEBIT	J CHEDIT	BALANCE
4-15-94	Opened Pre-need Lot.			
	Lot 79; Grave 5; Section 3; Division 12	\$795.00		\$795.00
4-15-94	Receipt #44862 20% = \$159		\$ 200.00	595.00
03991	Coupon, June # 45/69		25,00	570. a
7-26 94	confin &; ree \$ 45270		25:00	545.00
110 90	Conjun 3; net \$ 45846		85,00	520.00
9-6 94	Coupon #4 R.# 45405		25.00	4950
10/4 94	Corpon 5 P# 45528		25.00	770.0
11/9 94	Coupon G R # 45645		25.00	445. a
12/7 94	Coupon le R # 45645 Coupon 7 R# 45725		25,00	420 00
11-95	0 1 1 1001		2500	395.
9,95	Coupon 10 Rec# 46031		2500	8700
3-16-95	Coupon 10 Rec# 46031		3500	345 a
4-6 95	DON 11 R-4 LOIDO		2500	320 00

NAME Culver, Robert

# AUXILIARY INVOICE - PAYMENT FORM CUSTOMER ACCOUNT NO. 085/29 PAYMENT DATA PAID BY [CINCLE ONE] PAYMENT HEFERENCE NUMBER AMDUNT PAID 816.30 TREASURER VALIDATION CUSTOMER DATA CUSTOMER ACCOUNT NAME Mary Braidet EUSTOMEN [PAYOR) ADDRESS 2152 /2 Bacon St. San Dugo, CA 92107 MEMARIE Michele L. Clark ..

TH-1981 (2-82)

CASHIER

INV. NO. 253573

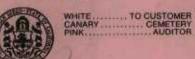
WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA

4 27	12199
591	
931	0

		Date: 02/10	,19.95
From Lyaluli Fland In Payment of	Ring Address 335 la ot	Dollars (\$	921B 62.00 1
Lot 5038 Grave	Row	_ Section	Division /D
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAME "PAID" IN THIS SPACE	PED CREDIT 67007 20% Sales Care 77764 — 80% Sales 100 of Lots 77184 — Opening 100 Closing 77181 — Burtal 100 Containers 77182 — Handling Fee 77185 — Recording 8 100 Misc. Fees 77183 —	42 00
Pre-Need Lot		Pre-Need 53033 Prust 9022 — Sales Tax 60101 78390 — TOTAL PAID \$	02 00

#### OFFICIAL RECEIPT

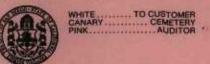


#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 527-3400

From Kithert Culver  Duesty-file (	Address: 435 F. Rener	Date:	#C//ps 9	1904
Lot 49 Grave	5 Rows	Section 3	Division Block	12
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Carn 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need Trust	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77185 100 77183 63033 9022	\w
Pre-need Trust Cash Check MAC 212 (Rev. 1-91)	ISSUED BY Lat	Sales Tax TOTAL PAID	90101 78380 \$	w

CITY OF SAN DIEGO, CALIFORNIA

45405



From: Sheet C	port of	Address	435 1	- Penette	Are.	E/ Co rs (\$ 25.00	- 6:
Lot. 70	Grave	3	Row	Section	3	Division Block	12
Acct. No	2	NOTVALIDEOR PURP "PAID" IN THIS SPACE	OSESTATED UNLESS	20% 00% of Lo Oper Closs Buris Cont	Sales Its 77 Ing/ Ing 77 It alners 77	007 184 100 184 100 181 100 181 100	00
Pre-Need Lot At Need C Pre-need Trust Cash C		ISSUED BY	1/shell		rding &	165 100 183 0033 022 1101 390	2



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

From Polite Cultur	Address: 435 £ Ro	Date: 2 -	4 1995 41 Chion 90
In point Payment of	The second	Dollars (\$	35.00
Lot 79 Grave		ection 3	Division Block
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 77184 - 80% Sales 100 of Lots 77184 - Opening/ 77181 - Burist 100 Containers 77185 - 8ecording & 100 Misc. Fees 77185 - Pro-Need 63033 Trust 9022 -	25 00
Pre-need Trust Cash Check AC212 (Rev. 5-04)	ISSUED BY / Couch	Sales Tax 50101 78390 - TOTAL PAID \$	25 00

#### CITY OF SAN DIEGO, CALIFORNIA

# MOUNT HOPE CEMETERY

527-3400

4	24	pu.	ñ	-	и
D.	13	Э	2	8	
-	*	200	200	v	

From: Color Culsor	Address: 435 E.	Date:	104	25.00
InPayment of	mont lot	D	ollars (\$	
Lot 79 Grave _	Row S	ection 2		Division Block
Acct. No	NOTVALID FOR PURPOSESTATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burisi Containers	67007 77184 — 100 77184 — 100 77181 — 100 77182 —	21 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	100 77185 — 100 77183 — 83033 9022 — 60101 78390 —	
AC-212 (Rev. 5-94) /23	ISSUED BY	TOTAL PAID		25 00

CITY OF SAN DIEGO, CALIFORNIA

From Robert Culver	Address:	435 E	Reno He	7	Arr &	19 E @g/a
1 1	wenty	five for	Do	illars (\$ _	25.	00
	pre- ne	Robert			Districts	
Lot 79 Grave _	5	Row 8	Section3	-	Division Block	12
Invoice No.	NOT VALID FOR PURPOSE "PAID" IN THIS SPACE.	ESTATED UNLESS STAMPED	CREDIT 29% Sales Cure	67007 77184 —		
Acct. No.			90% Sales of Lots	77184	25	00
w.o. E 11462	Late Be Kin fi		Opening/ Closing Burial	77181 — 100	1000	
BALANCE DUE 445. 00	10.574- 0		Containers	77182		
	FEB. S.		Handling Fee Recording & Misc. Fees	77185 — 100 77183 —		
Pre-Need Lot At Need On Acct	THE WATER OF		Pre-Need Trust	63033 9022	35	===
Pre-need Trust Cash Check 143		balahlus	Sales Tax	60101 78390		-
AC-212 (Rev. 5-94)	ISSUED BY	Alexand and	TOTAL PAID	*	-25	00

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA

I PM	ma	14	- M	8
69	12	b	12	

From: POBERT OUVER Trainty-fine Sy Pr	Address: 435 E. RENE	Date: Au. E	(A) 35.00	1994 CA 9,20.
Lot 19 Grave	5 Row So	ection 3	Division Block	12
Acct. No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 80% Sales 100 of Lots 77184 Opening/ 100 Closing 77181 Burisl 100 Containers 100 Handling Fee 77185 Recording & 100 Miss. Fees 77185	25	00
Pre-Need Lot	ISSUED BY Meric High	Pre-Need 83033 Trust 9022 Sales Tax 60101 78390 TOTAL PAID 3		00

MOUNT	HOPE	CEMETER
	527-3	400

CONTRACT OF THE PARTY OF THE PA				Date: UTIL	21(4)	100	19
From Robert	alver	Addres	435 F	Renette Ave	Ell	ajon 9	2020
InPay	ment of Pr	- trud	Let		ollars (\$	-3-2	
Lot	Grave	5	Row	Section 3		Division Block	12
Invoice No.		NOTVALID FOR PU	RPOSE STATED UNLESS S ICE.	TAMPED CREDIT 20% Sales Care 80% Sales	67007 77184 — 100	25	00
Acct. No	2	HER		of Lots Opening/ Closing Burial	77184 — 100 77181 — 100		
BALANCE DUE # 3	45.00			Containers  Handling Fee Recording & Misc. Fees	77182 — 100 77185 — 100 77183 —		
Pre-Need Lot At Need	On Acct			Pre-Need Trust Sales Tax	63033 9022 — 60101 78390 —		
AC-212 (Rev. 5-94)	194	ISSUED BY	o. clark	TOTAL PAID	\$	25.	40

AC-212 (Rev. 5-94)

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA

MOUNT HOPE CEMETERY

527-3400

From Robert G Culs	Len Address: 435 E. Ren	Oate: Av.	8100	19 G S
InPayment of PAG	need lat	Dolla	rs (\$	
Lot 7 9 Grave _	5 Row Se	ection 3	Division Block	12
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.		184	
Acct. No.	THE PERSON	of Lots 77 Opening/	100 184 100 181	00
w.o. <u>5 - 11 4 16 3</u>		Burtel Containers 77	182	
BALANCE DUE	THE RESIDENCE	Handling Fee 77 Recording &	100 185 100	
Pre-Need Lot At Need On Acct		Pre-Need 63 Trust 9	183 033 022	
Pre-need Trust Cash Check	1777	Sales Tax 60	101	

TOTAL PAID

ISSUED BY\_



		Date: 377	an	5	1999
rom: Mary & Braids	+ Address: 2152.5 Bac	o. 5t. 3	95	92101	7_
- Iwo Huro	hed Jeverty Lung	9/10 Dol	llars (\$	272.	00)
Payment of	Tement of Kolert	- Culve			-
ot 79 Grave	Row	ection 3		Division Block	2
nvoice No.	NOTVALIDFOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales	67007 77184 160 77184	111	OD
N.O. <u>F- /2199</u>	Late September 197	Opening/ Closing Burist	100 77181 ——————————————————————————————————		
BALANCE DUE # 8/6, 40	· 100 100 100 100 100 100 100 100 100 10	Recording & Misc. Fees	77185 —— 100 77183 ——		
re-Need Lot	In About	Trust Sales Tax	63833 9022 60101 78390		
C-212 (Rmy 5.04)	ISSUED BY	TOTAL PAID	3 _	272	100

253573 05/09/95 085129	MARY BRAIDOT	05/31/95 CK 1563	816.30	816.30 0.00
E-12199	100 072 100 072 100 072 100 072 100 072 60101	77181 000072 77182 000072 77183 000072 77184 000072 77185 000072 78390	375.00 190.00 45.00 48.00 145.00 13.30	PAID IN FULL

#### MT. HOPE CEMETERY

### INTERMENT ORDER

20,05,36 City of San Diego

Jones,	Sarah	10.000
na Linea	Funeral, date, time Scat 5-6;	1,000
Church, Chapel, GravesideChub	16.5 GREENWOOD	Montuan
All Funeral cars must arrive before 3:30	p.m. of regular work day or an extra char	ge of \$ 150.c
will be applied and billed to undersigned	Alterin frisk	v
War time veteran <u>NO</u> .	550	
ot 175 Grave Row	Section 100F Division	VBlock 10
Same annual & Care Daniel	NO 1-2015	80
Grave space & Care Fund	W S	
Opening/Closing & Setup	9 E-10907	10
Burial Container	militari minimum minim	, kg
	FLOCIOS	80
landling Fees	Saturday OT Fees	
lower vas Dirager setting	E-10003	100
Refording and filips ne	J 19757	100
MAY - 4 1995		600.
	Total Due	
MT. HOPE CEMETERY	aid receipt number 17 - H 60 ( 0 3	600.
CITY of SAN DIEGO, CAME	Balance of	lue
hereby certify I am the hind this is your authority to make dispondent I have the right to make this authorizatiny liability on account of said authorizatiny liability on account of said authorizatiny liability on account of said authorizating liability on account of said authorization account of said authori	sition of femains as above indicated. I ce zation and I agree to hold Mt. Hope Ceme	e named deceder rtify and represer tery harmless from
hereby authorize the interment in lot i lold under deed.	Boo3 Sura a	·
ignature of recorded holder of deed	- Sten Diego C.G.	92117
	(619) 276-42	F (



From Massin Fishe	1_ Address: 3003 d.m	Date:	5-4	921	17
Six hundred a	no/1000 fu (Sat) interme	nt of &	ollars (\$ 4		رفا
Lot (75 Grave	RowS	ection / AO	<b>=</b> {	Division Block	10
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers	67007 77154 100 77164 100 77161 100 77182 100		
Pre-Need Lot At Need Mar On Acct Pre-need Trust Cash Check Mar	001	Handling Fee Recording & Misc. Fees Pre-Meed Trust Sales Tax	77185 ————————————————————————————————————	600	00
AC-212 (Rev. 8-94)	ISSUED BY JOUCh	TOTAL PAID	78390	600	00

E-1220

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

94

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MOOLE	IC. LAST (FAMILY)		2. DATE OF BIF MONTH, DAY,	
SARAH		JEWEL		JONES	09/19/19	
SAN D	IBGO	3	58. COUNTY OF DEATH ENTER STATE	SAN DIEGO	OF INFORMANT	ULL MAILING ADDRESS AND ZIP CODE
GREEN	MOOD MORTUR	A-FUNERAL DIRECTOR OR PERSON RY: AVENUE, SAN DIRECTOR	-	LIF, LICENSE NUMBER F APPLICABLE F-843	3003 LINA AV SAN DIRGO, C	ENUE
ACKNOWLEDGMENT OF A	per years	ctronledge as applicant that the proposed dis 376 of the Health and Safety Code, and was aut	specition stated herein is one of the	dispositions potherized by the Handh and Safety Code.	· Cutor	me 105/05/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSE SIONS OF THE CALF AND IS THE AUTHORIC IN THIS PERMIT.	JED IN ACCORDANCE WITH PROVI FORMA HEALTH AND SAFETY CODE BY FOR THE DISPOSITION SPECIFIED DISPIT OF DISPOSAL OWISIDE OF CALIFORNIA	9A. AMOUNT OF FEE P			OF LOCAL REGISTRAR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TION REGURES A NEW PERMIT TO SHOW PINAL DISPOSITION.	P.O. BOX	EGISTRAR OF DISTRICT OF DEAT B5222 CA 92186-5222			OF DISTRICT OF DISPOSIT UR IN ANOTHER DISTRICT IN	
O. AUTHORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS			FOR	CORONER'S USE ONLY
B. CREMATION C. DISPOSITION THAN IN A CE SCIENTIFIC US	SE .	AINS OTHER	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS		(Name	TTION PÉNDING—REMAINS LOCATED À and Address)
BURIAL	MOUNT HOP	E CEMETERY:	DIEGO, CA	5/4/95	- De	et
CREMATION	12A. NAME AND A	cobher sew	0 1	128. DATE CREMA	TED 12C, SIGNATURE OF	PERSON IN CHARGE OF CREMATION
SCIENTIFIC	13A. NAME AND A	DORESS OF CALIFORNIA FACILIT	Y RECEIVING REMAINS	138, DATE RECE	VED 13C. SIGNATURE OF	PERSON IN CHARGE OF FACILITY
TRANSIT		ddress in receiving state of Cremated remains are to be		148. DATE SHIPP		SIGNATURE OF PERSON IN CHARGE WITH THE CARRIER
SCATTERING AT SEA OR OSITION OTHER IN A CEMETERY		REST POINT ON SHORELINE, OR C ENTIFY FINAL PLACE AND CA <u>DIST</u> I		15B. DATE OF DISPOSITION	15C, SIGNATURE OF D	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE RERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date May 4, 1995

0.	y Brown	uneral, date, time 7/1	566011:20	
n aVarigina	1)	*		
Onurch Chapet Gravesic	Church & go	auside: CA	BURIAL	Mortua
All Funeral cars must arri	ve before 3:30 p.m. o	f regular work day or a	n extra charge of \$	150
will be applied and billed			homas	A THE STATE OF THE
will be applied and blied	to undersigned.	Amary a	1011013	
War time veleran				
of 95 Grave	8 Pm -	Section 2	Division/Black	11
COL 70 CHAVE	O now	3608011	DIVISION DIOUN	7000
Grave space & Care Fund	d			175
Additional spaces and ca	re fund	Tan N		
		WHENCH THE PROPERTY OF THE		75
Opening/Closing & Setup		. 1		20.0
Burial Container		٧٠/	L	40-
Handling Fees		-WYC	/	45
Flower vases – Marker se		1 m 63	1110111000	
	Unit	7.3	77	~ 00
Recording and filing fee	7.0		<u>4</u> 2	2
Sales taxes		5	<i>L</i>	3.
		Total D	15	233
		0	WILL 1011 1	and o
	Paid re	ceipt number	40184 1	000.0
			Balance due	703.
1 A	daught	200		
hereby certify I am the and this is your authority	to make disposition (	Tremains as above in	of the above named dicated. I certify and	1 represe
hat I have the right to ma	ke this authorization a	and I agree to hold Mt.	Hope Cemetery har	miess tro
any liability on account of	said authorization an	o interment.	all	
		VII	1	- 1 0
on we various ##	compant in lot !	10km	do	rva
hereby authorize the inte	erment in ior i	Signatura		
hereby authorize the introled under deed.	C C III III III III	X30	Nencon	St.
hereby authorize the inte old under deed.	E I I I I I I I I I I I I I I I I I I I	X30	MASON	St.
nold under deed.		X SD	Ne nom	St.
nold under deed.		X 6/9\ =	Ne nson HENSON G	
nold under deed.	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Ne nson Herzo 9 163-1828	
hereby authorize the introded under deed.	12201	Invoice # 2	Ne nson HENDER 9 63-1828	St. 204

#### MT. HOPE CEMETERY

W.O. #\_ E-12201

## NOTE

\$ 543.30	San Diego, California	may 4 1995
Thirty days after date for value received,	the undersigned maker promises to pay 5	San Diego City Treasurer, or order
3751 Market Street, San Diego, CA 921	01, the sum of Five Hundled	Livy Three Topollars
with interest from	June 9, 1995	on the unpaid principal
at the rate of 12 percent per annum, pa	yable on demand.	
will be liable and consents to renewals, maturity, and waives presentment, dem person who signs this note agrees that	cipal and interest are payable in lawful mo , replacements and extensions of time for nand and protest and the right to assert a trecourse may be held against his/her signed on this note, the undersigned prom	r payment hereof before, at or after any statute of limitations. A married eparate property for any obligation
authorizes the removal of any re	aragraph 7528 of the State of Californ mains from a plot for which the purchase	price is past due and unpaid.
PRINT NAME SUSOA TAL (KNDY	da JONIAS) SIGNATURE FRO	nda memas
ADDRESS 130 /VISON ST	SD 92114	
CALIFORNIA DRIVER LICENSE NUMBER	C4283548 SSN#	554-08-7548



From: Rhanda Shoma	1 Address: 130 Hen	Date: May	D.CA	9214
In Payment of	sterment of mas	y Braus	1000.0	<u>O</u> ,
Lot 95 Grave	8 Row_se	ction_2	Division	11
Pre-Need Lot At Need On Acct Pre-need Trust Cash	NOT VALIDFOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 — 80% Sales 100 of Lots 77184 — Opening/ 100 Closing 77181 — Buriel 100 Containers 77182 — 100 Handling Fas 77185 — Recording & 100 Misc. Fees 77183 — Pre-Need 63033 Trust 9022 — Sales Tax 60101 78360 —	159 10310 205	00
AC-212 (Rev. 5-04)	IBSUED BY M. Clark	TOTAL PAID #	wo.	00

# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS E-1220

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

	NT—FIRST (GIVEN)	1B. MICOLE	IC. LAST OFAMIL	n		2. DATE OF BIRTH	S DATE OF DEA	TH 4. SED
OF DEATH		Pearline	58. COUNTY OF D ENTER STATE San Die	EATH-OUTSIDE CALIF.		MONTH DAY 1940 01/20/1940 RELATIONSHIP, FULL M ORMANT da Thomas—D		D ZIP CODE
California	Cremation	6 Burial Chape	RSON ACTING AS SUCH 7B.	CALIF. LICENSE NUMBER —IF APPLICABLE	130 San	Henson Stre Diego, CA 9	et 2114	
5880 K1 Ca	1 heroles a	San Diego, CA 9 classifies as applicant that the proper	ed disposition stated become is one o	FD 1357 of the dispositions authorized by	8A. SIGNA	TUBE OF PLICANT		DATE SIGNE /05/199
PERMIT	THIS PERMIT IS ISSU	376 of the Health and Salety Ceds, and w JED IN ACCORDANCE WITH PF ORNIA HEALTH AND SAFETY O Y FOR THE DISPOSITION SPEC	BOVI- DODE 9A. AMOUNT OF FE	DE PAID 88. DATE PERMIT		9C. SIGNATURE OF LO	The state of the s	
UTHORIZATION OF	IN THIS PERMIT.	D MONT OF DESPOSAL DETSIDE OF CALIF	100	Kyle Cha		>		
TY CHANGE IN DISPOSI- ION REQUIRES A NEW ERMIT TO SHOW FINAL DISPOSITION.	Vital Reco	GISTRAR OF DISTRICT OF I D IN CAUCUSA D T CAUCUSA D T CA 92186-5222	5222	ADDRESS OF REGISTRAR IF DISPOSITION IS TO OCCU			RNIA	
. AUTHORIZED DISP	OSITION(S) CHECK A	Control of the Contro			-	FOR COR	ONER'S USE O	NLY
B. CREMATION C. DISPOSITION THAN IN A CI		AINS OTHER	F. DISINTERMENT G. SHIP IN TO CA			(Name and A	(Idreas)	
SCENIFIC O	11A. NAME AND AD	DORESS OF CALIFORNIA CEI	- AND I WANTED	UTSIDE OF CALIFORNIA	D   110.	SIGNATURE OF PER	SON IN CHARGE O	F BURIAL
BURIAL	11A. NAME AND AD	pe Cemetery,	- AND I WANTED		D 11C.	SIGNATURE OF PER	son in charge o	F BURIAL
	San Diego	pe Cemetery,	METERY			SIGNATURE OF PER	H	
BURIAL	11A. NAME AND AL Mount Hop San Diego 12A. NAME AND AL — Musical	pe Cemetery, o, CA DORESS OF CALIFORNIA CRI	EMATORY .	11B. DATE BURIE 5/9/95 12B. DATE CREMA	TED 12C.	Uni	SON IN CHARGE OF	CREMATION
BURIAL  CREMATION  SCIENTIFIC	11A. NAME AND AE HOURT HOT SAR Diego 12A. NAME AND AE - JNCA 13A. NAME AND AC -	pe Cometery, o, CA poriess of California Cri (al - Seal	EMATORY  CILITY RECEIVING REMAIN	11B. DATE BURIE 5/9/95 12B. DATE CREMA	TED 12C.	SIGNATURE OF PERS	SON IN CHARGE OF	CREMATION

#### CITY OF SAN DISHO, CALIFORNIA DITY TREASURER

E-12201

### ACCOUNTS RECEIVABLE AUXILIARY INVOICE - PAYMENT FORM

	PAYMENT DATA			
PAYMENT P.M. RECEIVE	ED BATE _5-13	-95		
PAID BY (CIRCLE ONE)	#363.30	#1960	NP	
···				-
*56	3,30		120	- 30
AMBUNT PAID			90 <b>0</b> 8	in a
		1 REASUNE	SIL VALIDA	ION
	CUSTOMER DATA	il.	The statement	*
PAYOR HAME WILL	RHONDA	THO		3.30 ATHOR
H-C	SHIPLEY	NT NAME (S	HOND	
PAYON HAMP WILL	E SHIPLEY	MANAGE P	HOND	
PAYOR HAMP CUICE	HAN BUTTOMEN ACCENT	MANAGE P	HOND	
PAYOR HAMP LUICE	HAN BUTTOMEN ACCENT	MANAGE P	HOND	
PAYOR HAMP CUICE	130 Hon	MANAGE P	HOND	
PAYOR HAMP CUICE	130 Hon	MANAGE P	HOND	
PAYOR HAMP CUICE	130 Hon	MANAGE P	HOND	
PAYOR HAMP CUICE	130 Hon	MANAGE P	HOND	5.30 AIHOM
PAYOR HAMP CUICE	130 Hon	AT NAME OF	HOND	AIHOM

TO TO H	\$ 700.00	- 0% DOLLAPS	0 .00.00 10	1000 P
WILLIE C. SHIPLEY, JR. P. O. BOX 152532 290-4807 SAN DIEGO, CA 92195	三角豆	d and	MICIPAL Street 239 A \$2171-9069	13 2 2 28 1 54 91:000008 10 6 64 2 21" 1
WILLIE C. S P. O. BOX 152 SAN DIEGO	PAYER THE MT. H	Two-hundra	SAM DIESD W CREDIT UNION BOSS Midral P.C. Box 179 San Diego. D	C3 5 5 5 B 1 5 4 9 15 C

towarded meaner a

TH-1861 (2-62)

253632	05/10/95 08	5141	RHONDA	THOMAS
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78390	

563-30 170-00 190-00 45-00 145-00 13-30

563.30 PAID IN FULL

### MT. HOPE-CEMETERY

# PREED

# INTERMENT ORDER

City of San Diego

Date 5-4-95

of CHURCH, A	ma 4	WILLI	AM
Ina <u>diner</u>	Funeral, date, ti	me	
Church, Chapel, Graveside	1	·	Mortuan
All Funeral cars must arrive before 3:3	0 p.m. of regular work	day or an extr	a charge of \$
will be applied and billed to undersigns	ad		
War time veteran			
Lot 118 Grave 5 Ro	w_ ~ Section		ivision/Block(
Grave space & Care Fund	(1) 111-11 - 1-20-11 - 1-20-11   1-2	second dutte a con-	895.
Additional spaces and care fund		***************************************	81001M1011 -
Opening/Closing & Setup			200 220 23 GOVERNOR NO.
Burial Container			190.0
Handling Fees			145.0
Flower vases - Market acting the	alreanize	d	23.
Recording and filing fee			
Sales taxes			
		Total Due	1687.0
	Paid receipt number	VISA	423.
		Bal	ance due 1a 65.
I hereby certify I am the and this is your authority to make disp that I have the right to make this autho any liability on account of said authoria	rization and I agree to	above Indicate	above named deceder d. I certify and represer Cemetery harmless fron
I hereby authorize the interment in lot hold under deed.	X 63	45.7	Phurch
Bignature of recorded horizer of deed	City 6	19,565	6.4454 2000
<b>-</b> 12202	Invoice #	ii	
- 4416			

\$52 x 23 = 1196 \$69 last

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NAME

ADDRESS

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Amount due if paid more than days   \$ 52.00  Amount due if paid more than days   \$ 52.00					-10		10		100	U0 =	2771	- 7
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#### OFFICIAL RECEIPT



CITY OF SAN DIEGO, CALIFORNIA

#### MOUNT HOPE CEMETERY 527-3400

47252

nom: Olma Church	Address: 6346 tament	to Basil	iollars (\$ 1	00.40	1211
Payment of Ru	red drt & Trust			Division	11
cct. No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/	67007 77184 — 100 77184 — 100 77181 —	Shork.	
ALANCE DUE 121.00		Buriel Containers Handling Fee Recording & Misc. Fees Pre-Need	77182 — 77185 — 77186 — 100 77186 — 63033	104	0.0
re-Need Lot At Need On Acct On	resues a Shillet	Trust Sales Tax TOTAL PAID	9022 — 60101 78390 —	104	00

# WHITE CAMARY .....

From: Afma Church	Address: 6346 tamen	to Basilio	1000 CO.	9211
In part payment of Rr.  Lot 118 Grave	Lent to the bush of	1	104.00	<u> </u>
Invoice No	ROWS  NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 — 80% Sales 100 of Lote 77164 — Opening/ 100 Closing 77161 Burial 100 Containers 77182 — Handling Fee 77185 — Flecording & 100 Misc. Fees 77183 —	Block	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-	ISSUED BY D. Mulden	Pre-Need 63033 Trust 9022 — Sales Tax 60101 78390 — TOTAL PAID \$	104	00

#### OFFICIAL RECEIPT CITY OF SAN DIEGO, CALIFORNIA 47051 WHITE..... TO CUSTOMER CANARY...... CEMETERY MOUNT HOPE CEMETERY PINK.....AUDITOR 527-3400 Date: Division Grave Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT Invoice No. 20% Sales Care 80% Sales 100 Acct. No. of Lots 77184 Opening/ Closing 77181 Buriel Containers 100 77182 **BALANCE DUE** 100 77185 Hundling Fee Recording & 100 Mec. Fees 77183 Pre-Need Pre-Need Lot At Need OF Acct 83033 9022 Trust Pre-need Trust Cash Check Sales Tax 80101 ISSUED BY 2 TOTAL PAID AC-212 (Rev. 5-94)

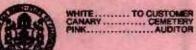


WHITE..... TO CUSTOMER CANARY...... CEMETERY PINK...... AUDITOR

	Trus			
ie	ction/		Division Block-	1/
	CREDIT	67007		
	20% Sales Care 80% Sales	77184		
	of Lots	77184 -		-
	Opening/	100		
	Closing Burial	77181		
	Containers	77182 -		
	12000200200	100		
	Handling Fee	77186		
	Recording & Misc. Fees	77183 -		
	Pre-Need	63033	1114	00
	Trust	9022 —	101	
ı	Sales Tax	60101 78390 —		
ı	TOTAL PAID		1011	00

Lot 1/8	Grave _	5	Row
Invoice No.		NOTVALID FOR PURI "PAID" IN THIS SPACE	POSESTATED UNLESS S
Acct. No.	22.00		
w.o & -/	3202		
BALANCE DUE	433.00		
Pre-Need Lot At N	lead C On Acat C		
Pre-need Trust Car			110:00
AC-212 (Rev. 5-94)	10971	ISSUED BY	lleisne

#### OFFICIAL RECEIPT



#### CITY OF SAN DIEGO, CALIFORNIA

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T	v	-	v	

From: Alma Church	Address: 10346 (Gmm	16 Pu	19/5	Pun Dreges	16 901
In part payment of In	E Need 1 of Trues		Dollars (\$ _	10420	
Lot 1/8 Grave	5 Rows	ection_/	381	Division /	_
No. E 1900)  BALANCE DUE  Pre-Need Lot At Need On Acct	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burist Containers Handling Fee Recording & Misc, Fees Pre-Need Trust	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 — 68033 9022 — 100	1041	
Pre-need Trust 2 Cash Check C	ISSUED BY LAKEN BAK	Sales Tax TOTAL PAID	60101 78390	104	00



From: Alma & Wm. Church	h Address 6346 Chain I	Date:	11-6 SD	93111	995
Grahmdred four	no/100 need lat a trust		ollers (\$ ,	04.00	<u> </u>
Lot 11 9 Grave _	5	ection		Division /	1
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burlai Containers	67007 77184 — 100 77184 — 100 77181 — 100 77182 —		
Pre-Need Lot At Need C On Acct C		Handling Fee Recording & Micc. Fees Pro-Need Trust	100 77185 — 100 77183 — 83083 9022 —	104=	00
Pre-need Trust \$1 Cash Check \$2 AC-212 (Rev. 5-94) 1093.1	ISSUED BY Rauch	Sales Tax TOTAL PAID	60101 78390	104	00

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

one hundred for part payment of Pa	ur & no/100 -	Dete: 10 Dollars (1	SD 9	95 211 -
ot 118 Grave		etionl	Division	
nvoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 67007 20% Sales Care 77184 -	46 0	00
No. E-12202	••	of Lots 77184 - Opening/ 100 Closing 77181 -		
BALANCE DUE		Buriel 100 Containers 77182 - 100 Handling Fee 77185 -		
¥		Recording & 100 Misc. Fees 77183 -	50	20
Pre-Need Lot 129 At Need On Acct Ore-need Trust 137 Cash Ocheck Of	OR I	Pre-Need 83033 Trust 9022 - Sales Tax 80101 78390 -	30	_
C212 (Rev. 504) 10898	ISSUED BY JOUCK	TOTAL PAID	104 0	00

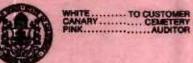


From: Olma 15 Churc	1 1		y- ilio	104.0	9311
InPayment of Page	red let a trust	- 0.00	Mars (\$ .		
Lot 118 Grave	5 Row 8	ection /		Division /	1
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Cars 80% Sales of Lots Opening/ Closing Burial Conteiners Handling Fee Recording & Misc. Fees	87007 77184 — 1000 77184 — 1000 77182 — 1000 77185 — 1000 77185 —	104	00
Pre-Need Lot X At Need On Acct Pre-need Trust X Cash Check X  AC-212 (Rev. 5-9) 10878	ISSUED BY Rouch	Pro-Need Trust Sales Tex TOTAL PAID	63033 9022 60101 78390	104	00

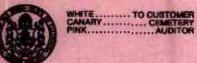
From: alma Church  One Rundred for  In part Payment of Po			7 ,1995 1, 20 9211 (\$104.00)
Lot 118 Grave	5	oction/	Division //
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT	
AC-212 (Rev. 5-04) 10860	ISSUED BY Kauch	TOTAL PAID \$	104 00



From: alma Cherre	A Address: 6346 amini	to Basilia	1.0. 9211
In Payment of	e-need fot y	Erust Dollars	* _/07,00_)
Lot 118 Grave	5 Row Se	ection/	Division //
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 60% Sales 100 of Lots 77184 Opening/ 100 Closing 77181 Burist 100 Containers 77182	104 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Ac-212 (Rev. 594)	ISSUED BY Caroline	Handling Fee 77185 Recording & 100 Miss. Feet 77183 Pra-Need 63033 Trust 8022 Sales Tax 60101 78390 TOTAL PAID \$	104 00



From: alma & Delliam Ol	week week lamin	Date: Ju	me 8	03111
From: Will The Hund	and four dollars & 3	MOO D	ollars (\$ 104	1.00
In Payment of Pre	Ricerding Lee Ja	· o/c;	lines,	*
Lot Grave	200	ction/	Olvis Blos	
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 30% Sales of Lots Opening/ Closing Buriel Containers Handling Fee Recording &	67007 77184 100 77184 100 77181 100 77182 100 77185	04 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 5-94)	ISSUED BY In. Clark	Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	77183 77183 9022 60101 78390	04 00



From Alma Christon I	Address to 346 Cament	lier & a	Dollars (\$	121.00	196
In July Payment of RA	5   Row 8	action \		Division Block	ii .
Invoice No  Acct. No  W.OE - R202  BALANCE DUE	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Buriel Containers Handling Fee Recording & Misc. Fees	100 77184— 100 77181— 100 77182— 100 77185— 100 77185—		
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	1 10 114	Pre-Need Trust Sales Tex	63033 9022 — 60101 76390 —	13.1	00
AC212 (Rev. 5-04) 1062	BSUED BY M. ALLUNDIA	TOTAL PAID	150	121	00

#### MT. HOPE CEMETERY INTERMENT ORDER

. , .1.

City of San Diego

Date May 4, 1995

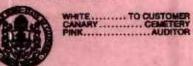
	ubject to your rules and regulations, to inter the remains
ofmuriam.	Staravic
ina abl. Crupt	Funeral, date, time WES 5/10/95@// AM
Church, Chapel, Graveside Gnange	de Alexander Mortuary
en er og er en ander an en anderskannen over rennere en	of regular work/defi or an extra charge of \$ _/30=
will be applied and billed to undersigned. $\underline{C}$	Nyunu ()
ar time veteran	
Lo <u>13/447</u> Grave Row	Section Division/Block / D
Grave space & Care Fund	Pr- need 1-9236 D
Additional spaces and care fund	_&_
Opening/Closing & Setup	Δ   <u>375.</u> α
Burial Container	71D 380∞
Handling Fees	/-9 1995 330.00
Flower vases - Marker setting fee	_&_
Recording and filing fee CITY of SA	PE CEMETERY 45.00
Sales taxes	26.60
Varia3	Total Due
CUS CATIES	receipt number 44186 287.00
750	Balance due 859.60
I hereby certify I am the Daug Will	of the above named decedant
and this is your authority to make disposition	n of remains as above indicated. I certify and repeasent in and I agree to hold Mt. Hope Cemetery harmess from
I hereby authorize the interment in lot I hold under deed.	Signature Bill or Bi 5
Signature of recorded holder of deed	City 220 112 2pcode
/	739-1617
- 12203	Invoice #
Work Order # E 12200	Acct #
PY-593 (Rev. 8-92)	

#### MT. HOPE CEMETERY

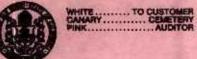
W.O. # E- 12203

## NOTE

859.60	San Diego, California _	may 4 19 95
Thirty days after date for value recei	ved, the undersigned maker promises to pa	ay San Diego City Treasurer, or order at
3751 Market Street, San Diego, CA	92101, the sum of Eight Hundred	fifty nine & GOV DOLLARS
with interest from	June 18 , 1995	on the unpaid principal
at the rate of 12 percent per annum	, payable on demand.	H ROWEN OF CORRECT CORP. BASSAGAR I MERCEGAR SE MENON
accrue at the rate indicated above. F will be liable and consents to renew maturity, and waives presentment, person who signs this note agrees	en due, it shall thereafter bear interest on terincipal and interest are payable in lawful wals, replacements and extensions of time demand and protest and the right to asset that recourse may be held against his/henstituted on this note, the undersigned pro-	money of the United States. The maker e for payment hereof before, at or after ert any statute of limitations. A married er separate property for any obligation
	2, Paragraph 7528 of the State of Californian Repairs from a plot for which the purchase STAR CEVIC	
PRINT NAME	at a side of the s	7-103
ADDRESS 3316 B	31 30 07	4210 2
CALIFORNIA DRIVER LICENSE NUMBER	NO 614684 ssr	N# 554,06,0252



From: Study Davis Struck	ch_ Address:	Date: 5-	10	1995
Eight hundre		ud 69/00 Dollars (\$	859	60,
reymont or	Reviel	TELLE	000	
Lot	Row	_ Section	Division Block	10
Invoice No.	NOTYALID FOR PURPOSE STATED UNLESS STAMPAID IN THIS SPACE.	20% Sales Care 77184 80% Sales 100		-
Acct. No		of Lots 77184 - Opening/ 100 Closing 77181 -	88	00
w.o. <u>E - 12203</u>	ENTERNATION OF THE PARTY OF	Glosing 77161 — Burisl 100 Containers 77182 —	380	00
BALANCE DUE		Handling Fee 77185 -	320	00
		Recording & 100 Miso. Fees 77183 -	45	00
Pre-Need Lot At Need On Acct		Pre-Need 63033 Trust 9022		
Pre-need Trust Cash Check	, , , , (,	Sales Tex 80101 78390 —	26	60
AC-212 (Rev. 5-94) 1/2/	DESUED BY V. Baloblu	TOTAL PAID \$	859	60



From: Susance Starceri	Address: 3316 # B.S	Date: DD	92102	19.95
nPayment of	terment of muse		llers (\$ 287.0 arcuvic	0,
ot 31047 Grave _	- Row Se	ection	Division /	2
nvoice No	NOT VALID FOR PURPOSE STATED LINLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales	67007 77184 100	
N.O E- 12203		of Lots Opening/ Obsing Burisl	7184 100 7181 287	00
BALANCE DUE # 859.60		Containers Handling Fee	77162	
Pre-Need Lot At Need De On Acct		Recording & Misc. Fees Pre-Need Trust	100 77183 63033 8022	
Pre-need Trust Cash Check	ISSUED BY In Clark	Sales Tax TOTAL PAID	* 287.	-
IC-212 (Rev. 5-91)	WASSESS OF THE PARTY OF THE PAR	12000	_001.	

E-12203

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

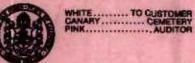
1A. NAME OF DECEDE MIRIAM		18. MOOLE KREVANS	1C. LAST (FAMILY)	ric		OF DEATH 4. SEX
5A CITY OF DEATH	San Di	lego	5B. COUNTY OF DEAT ENTER STATE	H-outside calif., San Diego	8. NAME, RELATIONSHIP, FULL MAILING AD OF INFORMANT SUSSING P. STATCEVIC	T0356459453010075009458.500
7A. TYPED NAME AND A Bumphicy 855 Broad	way Chula	Vista CA 9191	1   1	P-964	1225 Madison Avenue San Diego CA 92116 BA. SIGNATURE OF APPLICANT—Propr taking p	Season Countries
ACKNOWLEDGMENT OF A	PPLICANT I hereby a Section 19	cknowledge as applicant that the proposes 376 of the Health and Salety Gods, and was	d disposition stated herein is one of the authorized sursuant to Section 7100 of the	dispositions authorized by to Hosita and Safety Code.	Swarth Extens	05/09/1995
PERMIT AUTHORIZATION OF LOGAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	MED IN ACCORDANCE WITH PROPORTINA HEALTH AND SAFETY CO TY FOR THE DISPOSITION SPECIF IS NOW OF DISPOSIL OUTSIDE OF CALIFOR	FIED \$7.00	05/05/19 QEXX	TISSUED 9C SIGNATURE OF LOCAL REGIONS	STRAR ISSUING PERMIT
ANY CHANGE IN DISPOSE TION REQUIRES A NEW PERMIT TO SHOW PINAL DISPOSITION.	90. ADDRESS OF REVIEW VILLE EA		x 85222		() of district of disposition— tur in amother district in Caufornia	
10, AUTHORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS		34	FOR CORONER'S	USE ONLY
B. CREMATION		AINS OTHER	F. DISINTERMENT  G. SHIP IN TO CALIFO  H. TRANSIT TO OUTS	ORNIA	DISPOSITION PENDING- (Name and Address)	-REMAINS LOCATED A
BURIAL	Ht. Hope ( 3751 Marks			5/10/95	ED   11C. SIGNATURE OF PERSON IN C	HARGE OF BURIAL
CREMATION	12A. NAME AND AL	DDRESS OF CALIFORNIA CRE	MATORY Jood	128. DATE CREMA	TED 12C. SCHATURE OF PERSON IN CH	ARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND AD	DDRESS OF CALIFORNIA FAC	ILITY RECEIVING REMAINS	138. DATE RECE	IVED 13C. SIGNATURE OF PERSON IN CI	HARGE OF FACILITY
TRANSIT		DORESS IN RECEIVING STATE CREMATED REMAINS ARE TO		148. DATE SHIPE	OF PLACING WITH THE CARRI	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		rest point on shoreline, o entify final place and ca <u>d</u>		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	15D. LICENSE HUMBER OF CREMATED RE- MAINS DISPOSER —IF APPLICABLE

2Y 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN ARGE OF DISPOSING OF THE CREMATED REMAINS.

#### MT. HOPE CEMETERY

### INTERMENT ORDER City of San Diego

	MT. HOPE CEME	TERY	
2) Pre- neds/ 11	NTERMENT C	RDER	
O o Sull	City of San Die	IGO	
2) Ere with		Date 7/	2015 AG
dest		Date 111	ing .
You are hereby authorized and in	structed, subject to you	r rules and regulations	, to inter the remains
of Mola & go	Amnie Ri	chardson	
ina lines	Funeral, dat	e, time	-
Church, Chapel, Graveside		3	Mortuary
All Funeral cars must arrive before	e 3:30 n m of regular w	orte day or an extra ch	2 200 A.C. TALES C.
		—	mide oi a
will be applied and billed to under	signed.	<del>- 30</del> e=	
War time veteran 45/101	mile	SPANSON MANAGEMENT	
V Lot 97 Grave 11518	How A Por	on Divisi	on/Bleck_/2
Grave space & Care Fund	PAI	795	1590.0
Additional spaces and care fund.		- 1	III.
Opening/Closing & Setup	MAY - 5 199	375	750.00
Burial Container	200	THEO	390.0
and the second second	MT. HOPE SEEC	CAUTY 5	290.0
Handling Fees	II Y OL JO	······································	= 1 - 9
Flower vases - Marker setting fee		\$ 45	90 00
Recording and filing fee	2x 3	# <sub>13.30</sub>	20.00
Sales taxes		10,00	212/10
		Total Due	30 3101 15
	Paid receipt numi	ber 100 # 461°	10 3126.Ca
		Balance	due 🔎
I hereby certify I am the		of the ab	ove named decedent
and this is your authority to make that I have the right to make this a	authorization and I agree	to hold Mt. Hope Con	certify and represent aptery harmless from
any liability on account of said au	thorization and intermer	Warla B	elload
	STATE STATE	36 O Reice	20,2-
I hereby authorize the interment in hold under deed.	HEMLOCK) VIS	Sucallana	PORST.
عرها	Thomas and the same		S ( 10 10 10 10 10 10 10 10 10 10 10 10 10
Signature of recorded holder of deed	مواق	MANICARC	A 9341
	XO	14 LGHS	12/4.
2223	E 82	NOW!	
F 1220	)4 Invoid	ce #	
Work Order # -	Acct.	*	
PY-593 (Rev. 8-92)			



		Date:	my 5	19_70
From Viola & Johnny Richa	inden Address: 3848 Hem	lock 31	- 5. D. CA 9.	2113
- Shirty One Hus	died Swenty Six &	60/100 D	ollars (\$ 3/24.	60,
InPayment of By	- Dud Lats (2) an	d trus	ts (a) i (a)	00/c
(2) liners; (2) Handl	ma feet; (2) Ric. 4	les ; \$12	Janon &	liners
Lot 97 Grave	1/5/2 ROW - 8	ection 3	Division Diock	12
Invoice No.	NOTVALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 20% Sales Care	67007 3/8	100
Acct. No.		90% Sales of Lots	7184 /272	00
W.O. E- 12204		Opening/ Closing Buriel	77181 100	55%
BALANCE DUE		Containers Handling Fee	77182 100 77185	60
		Recording & Misc. Fees	100 77163	00
Pre-Need Lot At Need On Acct		Pre-Need Trust Sales Tax	63033 /536	60
Pre-need Trust Cash Check	ISSUED BY In Clark	TOTAL PAID	78390	1
AC-212 (Rev. 5-94) #726-144		- Aller Chie	: 3126	100

MT. HOPE CEMETERY
3751 MARKET STREET
SAN DIEGO, CA 92102
264-3151
527-3400

E-122.04

5-1-95 Date

Estimate Given By:

97 11812 3 12 Lot Gr. Row Sec. Blk/Div	\$795×2=1590
Opening and Closing	\$ 37512 = 750
Vault (iner Double Crypt/Ash Vault	\$ 190 x 2 = 380
Recording and Filing Fee	\$ 4572 = 90
Marker Setting Fee	\$
Flower Vase and Installation	<u> </u>
Miscellaneous Charges Tax	\$ 13-30 ×2=26.60
HANDLING FICS	\$ 145 × 2-290.
	<u>\$</u>
TOTAL	\$ 1563.30 x2=3126
Recording and Filing Fee  Marker Setting Fee  Flower Vase and Installation  Miscellaneous Charges Tax  HANDLING FICS	\$ 4572 = 90 \$ \$ 13-30 × 2= 26.6 \$ 145 × 2=240.

\*\*The above charges are an estimate only. The figures shown reflect the current prices and are subject to change without notice.

#### CITY OF SAN DIEGO, CALIFORNIA MOUNT HOPE CEMETERY





#### OWNERSHIP AND INTERMENT PRIVILEGES

TO_Viola & Johnnie	Richardso	n		fo	r the sum of \$	1590.00	(DOLLARS)
LEGAL DESCRIPTION L	ot 97; Gr	aves 11 &	12;	Section	3; Division	12	
AS DESCRIBED ON PURCH	HASE ORDE	R NUMBER	E-12	204			
According to a map of said Cem endowed care. Subject to all ru essentials for care and operatio consent of the Cemetery Author	les and regula n of the Ceme	ations now in f etery. The right	orce or ts herel	may hereaf by conveyed	ter be adopted, inc for interment priv	luding the right to ileges shall not be r	ingress and egress with elinquished without the
It is expressly understood howestone, vaults or other improvements to assumed by legal owner or a vandalism and natural causes Cemetery. The following type of	ents of like no representative of deteriorati	ature that is al es of plot. In no ion, but reserv	ready, o case ves the	or may here: will the Cem	after be erected or setery Division be	placed on said lot or responsible for dam	plot. Cost of same shall age, malicious mischief,
Regula	tion Mark	er Size i	s: 1	2 X 24,	Flat Marker	Only	
Cemeter	a W	aits			Rea	L Su Estato Assets Dir	rector
PY-584 (Rev. 4-95)		This information is	s aveilabi	le in alternative	formats upon request.	0	



# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date MAY 5, 1995

a hiner	Funeral, date, time Mon 5 1:00
hurch, Chapel, Graveside Chape	d. Maruside A Burial Mortuary.
Il Funeral cars must arrive before 3:	30 p.m. of regular work day or an extra charge of \$150.0
rill be applied and billed to undersign	
Var time veteran _NO .	
0.	40 ×
ot 41 Grave 4 R	tow Section Division/Block
irave space & Care Fun	795.8
dditional spaces and care and	
pening/Closing & Selup	M 37500
Jurial Container	190.00
landling Fees	145,00
lower vases Marker setting fee	y
lecording and filing fee	45,00
36,00	13.30
ales taxes	Total Due
	791.00
	Paid receipt number
	Balance due 11/3/100
hereby certify I am the X	The position of remains as above indicated. I certify and represent
nat I have the right to make this auth	orization and I agree to hold Mt. Hope Cemetery harmless from
ny liability on account of said author	azadon and interment.
hereby authorize the interment in lo	1 Xah 811 5
old under deed.	KITISGO / WOOD AVE
AND THE WAY TO SEE THE PROPERTY OF THE PROPERT	Action Danhama Co 9/7/2
gnature of recorded holder of deed	CIN 1-03/17/2 Be Code
/	Telephone C & S   1   S
V	M20100 NO.029
	invoice #
ork Order # E 1220	0

#### MT. HOPE CEMETERY

# W.O. # E-12205

### NOTE

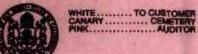
\$ 1172,30	San Diego, California	MAY 5 1995
	ed, the undersigned maker promises to pay	
3751 Market Street, San Diego, CA 9 with interest from	12101, the sum of Elinen hundr 8 JUNE 1995	on the unpaid principal
at the rate of 12 percent per annum,	payable on demand.	
accrue at the rate indicated above. Pr will be liable and consents to renew maturity, and waives presentment, of person who signs this note agrees t	in due, it shall thereafter bear interest on the rincipal and interest are payable in lawful mo als, replacements and extensions of time for lemand and protest and the right to assert hat recourse may be held against his/her so stituted on this note, the undersigned prom	oney of the United States. The maker or payment hereof before, at or after any statute of limitations. A married separate property for any obligation
	Paragraph 7528 of the State of Californ remains from a plot for which the purchase	
PRINT NAME NO IN	MANUE SIGNATURE X	
ADDRESS X 1/360ELW	dod AME PEMONA (	h 91768
CALIFORNIA DRIVER LICENSE NUMBER	£ssn#	x 457-79-57485
PY-1012 (11-89) BARBARA 90	9-6231173	457-72-7485

## MT. HOPE CEMETERY INTERMENT ORDER

	-(1)	Only of Carr Diogo	
D.	1977		Date
You are h	ereby authorized and ins	ructed, subject to your rules	and regulation
of	, W. DK	et Ritche	4 FR
ina /	LIDER -	Funeral, date, time	Thin

You are hereby authorized and instructed, so	Ritchell	42 15.
	Funeral, date, time 776667	#
VadaCiner .	1 10. 66	Manufacture of
Church, Chapel, Graveside ( )	ide : Kagadhie	Mortuar
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge	ors 150.
will be applied and billed to undersigned		
War time veteran		
Lot 4857 Grave - Aow -	Section Division/	× 10
- Dr. 11	-1/D- V228	11
Grave space & Care Fund	rea ( ) o o o o o	4
Additional spaces and care fund		DHC.
Opening/Closing & Setup		515.00
Burlal Container		190.00
Handling Fees		45.00
Flower vases - Marker setting fee	. Oll	
Recording and filing fee	rid in for	45.00
Sales taxes		13.30
191 MAY 46	Total Due 7	1. 1 30
agodale to living checks. Paid	0 111-210	768.3
checks. Paid	receipt number <u>R-46318</u>	168.0
	Balance due	<u>8</u>
I hereby certify I am the	of the above na	amed deceder
and this is your authority to make disposition that I have the right to make this authorization	of remains as above Indicated. I certify	and represer
any liability on account of said authorization	and interment.	naumiess noi
hereby authorize the interment in lot I	Signature	
hold under deed.	5-26-100W	
20 - W - 120 to 1 0 - 0 - 0	Address	
Signature of recorded holder of deed	City	Zip God
	Telephone	
- 12206	Invoice #	
Work Order # E 12200	1.17.08.03.03.01.00.00.00.00.00.00.00.00.00.00.00.00.	
Work Orger # L	Acct. #	

PY-593 (Rev. 8-92)



### MOUNT HOPE CEMETERY 527-3400

From Diane Ritchey an	drews 348 Olivie & Ty-eight W 30/100	t., Inl		768.30	95
InPayment oft	enment of W. Berr	t. Ritco	hey	Division	<u> </u>
Invoice No.  Acct. No.  W.O. E-/2206  BALANCE DUE  Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Market No.  AC-212 (Rev. 5-94)	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	87007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77185 — 100 7185 — 100 700 700 700 700 700 700 700 700 700	375 190 145 45 13 768	80 80 80 30

E-12206

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	ENT-FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FAMILY)		2. DATE OF I		E OF DEATH	4. SEX
Willia	196	Bert	Ritches		6371871	908 057	0771995	M
SA. CITY OF DEATH  El Cl	jon		5B. COUNTY OF DEATH ENTER STATE San Diego	-OUTSIDE CALIF.,	6. NAME, RELATIONSHIP OF INFORMANT Diane Ritche	Complete State Sta		
	gedale Mor	A—FUNERAL DIRECTOR OR PE t.; 5050 Federa Diego, CA	1 Blvd.	IF LICENSE NUMBER FAPPLICABLE 1329	1476 Cactus San Diego, C	Ridge St A 92105		
ACKNOWLEDGMENT OF A	ne many   ] hereby	atmosfedge as applicant that the propo-	set disposition stated herein is one of the es authorized pursuant to Section 7100 of th	Aspositions sufficient by	Achte 11	Allen		0/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISS SIONS OF THE CALI AND IS THE AUTHOR! IN THIS PERMIT.	UED IN ACCORDANCE WITH P PORNIA HEALTH AND BAFETY I TY FOR THE DISPOSITION SPEC ID MISHT OF DISPOSIL OUTSIDE OF CALIF	9A. AMOUNT OF FEE P		TISSUED BC. SIGNATUR	E OF LOCAL REG	95064	IG PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW SPOSITION.	Vital Reco	EGISTRAR OF DISTRICT OF ED IN CALIFORNIA TOS; P.O. BOX S an Diego, CA 92	5222		OF DISTRICT OF DISPOS UR IN ANOTHER DISTRICT I			
B. CREMATION		AINS OTHER	E. TEMPORARY ENVA	PRNIA	[Nam	OSITION PENDING e and Address)	<del>- R</del> emains Lo	DGATED A
BURIAL		DDRESS OF CALIFORNIA CE Cemetery; 3751 San Diego,	Market St.	5/12/91	11C. SIGNATURE	OF PERSON IN	CHARGE OF B	URIAL
CREMATION	12A, NAME AND A	poress of california cr	mon-seall	128. DATÉ CREMA	TED 12C. MANATURE	OF PERSON IN C	HARGE OF CR	EMATION
SCIENTIFIC	13A. NAME AND A	DORESS OF CALIFORNIA FA	CILITY RECEIVING REMAINS	13B. DATE RECE	VED 13C. SIGNATURE	OF PERSON IN (	CHARGE OF F	ACILITY
TRANSIT		DORESS IN RECEIVING STAT CREMATED REMAINS ARE T		148, DATE SHIPP		ND SIGNATURE C WITH THE CARE		CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	FICHENT TO ID	JREST POINT ON SHORIELINE, ENTIFY FINAL PLACE AND CA		15B. DATE OF DISPOSITION	15C. SIGNATURE CHARGE OF	OF PERSON IN DISPOSITION		MATED RE- DISPOSER

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Qu-Bud Lot

Date May 8, 1995

of surrene o	myers (mr: Patricia
	Funeral, date, time
Valliner	
MCS-ISCHOS-7/1-9/41/MFPOCKLPS-CISSIC-TS-RIGO-	Mortual
All Funeral cars must arrive before 3:30	p.m. of regular work day or an extra charge of \$
will be applied and billed to undersigned	
War time veteran	
	Section 3 Division/Black 12
Grave space & Care Fund	<u> 795.</u>
Additional spaces and care fund	
Onening/Closing & Setup	aid in stud
Burial Container	and in
Handling Fees	4-2-96
Flower vases - Marker setting fee	4-2-10
Recording and filing fee	S
Sales taxes	
	Total Due
	11/107 000
	Balance due 55.0
I hereby certify I am the	of the above named decede
and this is your authority to make dispo-	ation of remains as above indicated. I certify and represe tation and I agree to right Mt. Hope Cemetery harmless fro
that I have the right to make this authoriz	
that I have the right to make this authoriza any liability on account of said authoriza	tion and interment.
that I have the right to make this authorize any liability on account of said authorize	tion and interment
any liability on account of said authoriza	tion and interment alue f. Myers
that I have the right to make this authorize any liability on account of said authorize I hereby authorize the interment in lot I hold under deed.	Son and interment alege f. Myers
any liability on account of said authoriza I hereby authorize the interment in lot I hold under deed.	Starley 1. Myers  Signature S. D. 192102
any liability on account of said authoriza hereby authorize the interment in lot i hold under deed.	Signature of Myers  Signature of Myers  Agree 5 1 D. 92102
any liability on account of said authoriza hereby authorize the interment in lot i hold under deed.	Signal Agree 5. Myers  Signal 10 Raver St 92102
any liability on account of said authoriza	Signature 1. Myers  Signature 1. Myers  April Signature 1. Mye
any liability on account of said authoriza hereby authorize the interment in lot i hold under deed.	Signal Agree 5. Myers  Signal 10 Kaven St 92102

MARKER IS 12X30 FOR A
DOUBLE DEPTH. WHEN TRUST IS
PURCHASED IT MUST BE FOR A
DOUBLE DEPTH.

E-1330

AC	COUNT	No.	W.	120	007	30		MT	20.00	1000	
	1er				207		re-	Nee	d L	ot	
710	) Ra	TE I	iyer	S							
	ı Di				00	100					
	6-1				92	.102					
	/U-1				y Du	e Inc	dicate	ed B	elow		
FEB	MAR	APR		41.7	JUL		SEP	OCT	NOV	DEC	JAN
				100	10						
	nt due ale abo		aid on	, or be	fore.		<b>&gt;</b> s	25	.00	l)	
	nt due l			nan	da	ys	<b>s</b>				
						7	5				
				UAS-	00 F36430W		Š.				
MAM	E			An	nount f	Receive	d \$				
ADD	RESS										
CITY	-										
					V	STAT		_	ZIP	ij.	
and or	bring	one co	 upon w	 rith ea		his is	new		lress 		1
DO AC Da:	NOT COUN rlei	MAIL T No. 1e l	E- iyen St	-12:	eh rem OK 207	his is — — ittanca	CO P)	OUP	ON		<b>1</b>
DO AC Da: 710	NOT COUN rler O Ra	MAIL T No. ne l nven	E- fyen Stor, (	enth each E BO	eh rem OK 207	his is — — ittanca	CO P)	OUP	ON		1 ot
DO AC Da: 710	NOT COUN rlei	MAIL T No. ne laver lego	E- fyen Sto, (3-12	## ea RE 80 -12: rs 	 ch rem 0K 207	his is  ittance	CO Pa	OUP	ON Veed	i Lo	<b>1</b>
DO AC Da: 710	NOT COUN rler O Ran D Di	MAIL T No. ne l never lego 1-3	E- fyer a St b, (3-12)	E BO	eh rem OK 207	his is   ittance  2102	P)	OUP	ON Veed		1 ot
DO AC Da: 710 San (10	NOT COUN rler O Ran D Di	MAIL T No. ne l never lego 1-3	E- fyer a St b, (3-12)	E BO	eh rem 0K 207 92	his is   ittance  2102	P)	OUP	ON		
DO AC Da: 710 San (10	NOT COUN rler O Ran D Di	MAIL T No. 1e 1 1e 1 1ego Mon Mar	ENTIR E-fyen a St o, (3-12 th ar	E BO	eh rem OK 207 92 ny Di Jun	his is   ittance  2102	P)	OUP	ON	l Lo	
DO AC Da: 710 San (10	NOT COUNT Plet O Ran Di O6-1	MAIL T No. 1e I 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	E-riyer and St.	E BO -12: Ca. Ca. MAY	eh rem OK 207 92 ny Di Jun	his is in a second seco	P)	OUP	ON Need	l Lo	
DO AC Da: 710 San (10	v bring s NOT COUN' rlei O Ran Di DO6-1	MAIL T No. 1e I 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	E-riyer and St.	E BO -12: cs -2: Da. MAY	eth resm OK 207 92 By Di JUN 10	his is in a second seco	P)	OUP	ON Need	l Lo	
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710 Raven St.	
San Diego, Ca. 92102	
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NAME	
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WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### MOUNT HOPE CEMETERY 627-3400

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4	b		9	24

From: Mislene P. Myer	1 Address: 710 Rave		. B. C	8 A 921 200.0	102
	Died Sot	0		Dt delan	
Lot Grave		ction		Block	2
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE.	CREDIT 20% Sales Care BOW Sales of Lots Opening/ Closing Buries Containers Hendling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77184 100 77184 100 77181 100 77182 100 77182 100 77183 8022 60101 78360	<i>30</i> 0.	00
AG-212 (Rev. 6-94)	ISSUED BY M. Clark	TOTAL PAID	i	200	(8)

### OFFICIAL RECEIPT



CITY OF SAN DIEGO, CALIFORNIA

### MOUNT HOPE CEMETERY 527-3400

47220

	527-3400		~	91
from Darline myers	Address: 8.710 Rown		90. 45105	, 19 16
They Hundred	Tre had dat	D	ollars (\$ 300.00	)
Lot 106 Grave	)\	ection 3	Division Block	13
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Surial Containers Handling Fee Pecording & Misc. Fees	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77185	60
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	ISSUED BY I. Wille	Pre-Need Trust Seles Tex TOTAL PAID	63033 9022 60101 78390 3 0 0	00

## OFFICIAL RECEIPT



CITY OF SAN DIEGO, CALIFORNIA

#### MOUNT HOPE CEMETERY 527-3400

47264

From: Daylone Myrs NINTY FIRE	Address: 710 Rave	Date: 4 E	CA 93102 ( 95.00)
In f(1) Payment of PIC	-) and 10+	Section 3	Division /
Acct. No. 4. 12207.  W.O. 4. 12207.  BALANCE DUE 4. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	NOT VALID FOR PURPOSE STATED UNLESS ST "PAID" IN THIS SPACE.		95 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 544)	(attna III. Durg	Trient 0000	THE PERSON NAMED IN COLUMN



Invoice No. Acct. No.

WHITE ...... TO CUSTOMER CANARY ...... CEMETERY

#### MOUNT HOPE CEMETERY 527-3400

Bow

NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.

ISSUED BY MI Clark

Address:

Payment of Pry - Dued Lot

Grave

	Date: gu			19 95
Kaven S		210a ollars (\$	0000	0,
)w Se	ection 3		Division /	2
1 447	Misc. Fees Pre-Need Trust Sales Tax	67007 77164 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77185 — 100 77185 — 100 77185 — 100 77185 — 100 77185 — 100 77185 — 100 77185 — 100 77185 —	200	00
AC.	TOTAL PAID	. \$	200	00

BALANCE DUE				
Pre-Need Lot A	At Need Cash	DX	On Acct	00
AC-212 (Rev. 5-94)				

## MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 5/8/95

of , KUBERI	LANE	200
ina Linek	Funeral, date, time 200 5/15/95	@IL
Church, Chapet, Graveoide delle	weren ordy: MAYER (Jim) M	ortuar
All Funeral cars must arrive before 3	:30 p.m. of regular work day or an extra charge of \$	
will be applied and billed to undersig	ned:	
War time veteran		
of 4/ Grave 3	Row Section / Division/Blank	12
	/2/	
Grave space & Care Fund	124	
Additional spaces and care fund	73.	0
Opening/Closing & Setup	()	7.6
Burial Container	P0000 3	0.6
Handling Fees	1,14	20
Flower vases - Marker setting fee	Jon 192	
101	1 1d 0(-10 45	12)
Recording and filing feet of fall.		
1940 1/101		
Sales taxes Chis John	50	1 2
Recording and filing fee.	0 1001	0.0
Salos taxos Chis John Salos taxos Chis Sa	Total Due500	0.0
sportering to the sport of the state of the sport of the	0 1001	0.0
Latterine Harine	Paid receipt number R-46336 50 Balance due	0.0 0.0
hereby certify I am the	Paid receipt number R-46336 50  Balance due 6  of the above named de sposition of remains as above indicated. I certify and re	prese
hereby certify I am the and this is your authority to make dishat I have the right to make this auth	Paid receipt number R-46336 50  Balance due	prese ss fro
hereby certify I am the	Paid receipt number R-46336 50  Balance due	prese ss fro
hereby certify I am the and this is your authority to make dishat I have the right to make this authory liability on account of said authory hereby authorize the interment in lo	Paid receipt number R-46336 50  Balance due 6  of the above named desposition of remains as above indicated, I certify and reportation and I agree to hold Mt. Hope Cemetery harmle rization and interment.  Usum Typed 5/28/95	prese ss fro
hereby certify I am the	Paid receipt number R-46336 59  Balance due	prese ss fro
hereby certify I am the make dishat I have the right to make this authory liability on account of said author hereby authorize the interment in locald under deed.	Paid receipt number R-4633650  Balance due 6  Of the above named disposition of remains as above indicated, I certify and reportization and I agree to hold Mt. Hope Cemetery harmle rization and interment.  Como Typed 5/28/95	prese ss fro
hereby certify I am the make dishat I have the right to make this authory liability on account of said author hereby authorize the interment in locald under deed.	Paid receipt number R-4633659  Balance due S  Gof the above named desposition of remains as above indicated. I certify and reportation and I agree to hold Mt. Hope Cemetery harmle rization and interment.  Como Typed S/28/95  Address	prese ss fro
hereby certify I am the	Paid receipt number R-46336 50  Balance due 6  of the above named desposition of remains as above indicated. I certify and reportation and lagree to hold Mt. Hope Cemetery harmle rization and interment.  Council Typed 5/28/95  Address  City  Telephone	prese ss fro



### MOUNT HOPE CEMETERY 527-3400

From County of land	Address: 5201-A Ruff	Date: 6	SIS	9ai 500.0	23,
Lot 41 Grave	3 Row Se	etion		Division Block	2
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 30% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	57007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77185 — 100 77183 — 63033 9022 — 60101 75360 —	139	00000
AC212 (Par. 501) 136030	ISSUED BY ROUCK	TOTAL PAID		500	$ \infty $

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	NT-FIRST (GIVEN)	18. MIDDLE	IC. LAST (FAMILY)		2. DATE OF BIRTH   3. DATE	E OF DEATH   4. SEX
Robert	OTTO ACTION AND MINE	- 1	Lane			871995 м
SA. CITY OF DEATH			58. COUNTY OF DEAT	H-OUTSIDE CALIF.,	6. NAME, RELATIONSHIP, FULL MAILING AL	DORESS AND ZIP CODE
La Mesa			San Daego		Public Ministrator	-K. Howard
ZA. TYPED NAME AND AL	DORESS OF CALIFORN	IA-FUNERAL DIRECTOR OR PER	RSON ACTING AS SUCH 7B. CA	LIF. LICENSE NUMBER	5201-A Ruffin Rd.	
Mayer Mortua	ry, 2859 A	dams Ave., San	Diego, CA	424	San Diego, CA 92123	88. DATE SIGNED
ACKNOWLEDGMENT OF A			sed disposition stated herein is one of the as authorized pursuant to Section 7100 of the		· aus/l	05/11/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALL AND IS THE AUTHORI IN THIS PERMIT.	UED IN ACCORDANCE WITH PR FORMA HEALTH AND SAFETY O TY FOR THE DISPOSITION SPECI ID NIGHT OF HISPOSIL DIFFSIZE OF CALLEY	\$7.00	6 / 1 1	195 SIGNATURE DE LOCAL REG	ISTRAR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PENMIT TO SHOW FINAL DISPOSITION.	P.O.BOX 85	222			OF DISTRICT OF DISPOSITION— UR IN ANOTHER DISTRICT IN CAUPORNIA	
	OSTTION(S) CHECK A	CA 92186-5222		-	FOR CORONER'S	HEE ONLY
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US	SE .			SIDE OF CALIFORNIA		
BURIAL	Mt. Hope	DDRESS OF CALIFORNIA CEI Constery Det St., San Die		5/15/7	D 11C. SIGNATURE OF PERSON IN C	HARGE OF BURIAL
CREMATION	12A. NAME AND A	ddress of California Cri	1	12B. DATE CREMA	TED 12C. SIGNATURE OF PERSON IN C	HARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND A	ddress of California Fac	CILITY RECEIVING REMAINS	13B, DATE RECE	VED 13C. SIGNATURE OF PERSON IN C	CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING STATI CREMATED REMAINS ARE TO		14B, DATE SHIPP	ED 14C. ADDRESS AND SIGNATURE OF PLACING WITH THE CARP	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		AREST POINT ON SHORELINE, O ENTIFY FINAL PLACE AND CA		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	15D. LICENSE NUMBER OF CREMATED BS- MAINS DISPOSER —IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



# P.A. # 1179713

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 2004 8, 1995

of	-)alva	don o	Murino	- Kelang
ln a	VauAlUner	F	uneral, date, time	0
	hapel, Graveside		Pa	k- Crest Mortuary
All Funera	al cars must arrive befo	ore 3:30 p.m. d	of regular work day or	an extra charge of \$
will be app	plied and billed to unde	ersigned.	a troute de la constant de la consta	25.04 94.04 22.00.0 <del>9</del> .0.05.20
	veteran	3915531417753170	_	
Lot	Grave	_ Row	Section	Division/Block
Grave spa	ace & Care Fund		سند	<u> </u>
Additional	spaces and care fund	L	6	<u> </u>
Opening/C	Closing & Setup	$\sim$		J /
Burial Con	ntainer		1 73,	
Handling i	Fees		1 70	
	ses – Marker setting f	$\sim$ 1	1/1/1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Recording	and filing fee	111	1 1	
F. S. Martin Annie	95	11,	. U	
	1 1	UL	_()	Due
		Paio	ceifft number	
		1		Balance due
hereby o	ertify ( am the	9		of the above named decedent
and this is that I have	your authority to make	authorization	of remains as above i and I agree to hold M	ndicated. I certify and represent t. Hope Cemetery harmless from
l hereby a	uthorize the interment	lo lot I		
hold under		ill lot i	Signature	
		43	Address	
Signature of rec	corded holder of deed		Cey	Zip Coch
			Telephone	
Work Ords	- 122	nα	Invoice #	

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

You are hereby authorized and instructed, subject to your rules and regulations, to it Funeral, date, time Church, Chapel, Graveside Mortuary All Funeral cars must arrive before 3:30 p.m. of regular work day or at will be applied and billed to undersigned. War time veteran 126.00 Grave space & Care Fund ..... Additional spaces and care fund 165.00 Opening/Closing & Setup...... 50.00 MT. HOPE CEMETERY Flower vases - Marker setting feeting of SAN DIEGO: CALIF 45.00 Recording and filing fee ..... 386.00 Total Due Paid receipt number Balance due I hereby certify I am the of the above named decedent and this is your authority to make disposition of remains as above indicated. I certify and represent that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and interment. I hereby authorize the interment in lot I Signature hold under deed. nature of recorded holder of deed Zin Code 12210 Invoice # Work Order #

PY-593 (Rev. 8-92)

CITY OF SAN DIEGO, CAMIFORNIA

GENERAL INVOICE

Make Remittance Payable to

CITY TREASURER

E-12210

CITY TREASURER
Box 2289
San Diego, California 92112

Please Return YELLOW Copy with Your Payment

Transe Return TELLOW Copy With Tour Paymen

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

PAYMENT DATE 13-5-90 | AMT PAI

AMT PAID: \$ 380.00

PERIOD COVERED

SEPTEMBER

INVOICE DATE PAYMENT DUE 10/04/95 11/03/95

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JANE RAUCH REF NOS E-12210
DEPT: PROPERTY DEPT-NT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES AMOUNT

SALVADOR MERINO-PELAEZ SERVICE PA 1179711 LOT 38 GRAVE 2 SEC 1 BIV 12 OPENING/CLOSING

126.00 165.00 50.00

45-00

LINFR RECORDING FEE

TOTAL DUE 386.00
NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT
MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO
AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE
SUBJECT TO A COLLECTION FEE OF 10% OR \$10,
HHICHEVER IS GREATER, INTEREST OF 1% PER MUNITH
ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.

ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT (LISTED) A BOVE White - Customer Copy · Yellow - Remittance Copy NO. 259382

E-12210

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

8 🕸 🔭	US	SE BLACK INK ONLY	-MAKE NO ERASURE	S, WHITEOUTS OR C	OTHER ALTERATIONS	Found
1A. NAME OF DECEDE	NT—FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAN		2. DATE OF BIRT	EAR MONTH, DAY, YEAR
Salmador	-0.05		Merino-		03/18/195	
BA. CITY OF DEATH			5B. COUNTY OF	DEATH-OUTSIDE CALIF.,	8. NAME, RELATIONSHIP, FU	LL MAILING ADDRESS AND ZIP CODE
Escondido			ENIER SIA	San Ditego		ublic Administrator
			PERSON ACTING AS SUCH		5201A Ruffin R	oad
Park Crest 1	Funeral Hou	e	i i	IF APPLICABLE	San Diego, CA	92123
2441 Univer	sity Ave Sa	in Diego CA 92	2104	FD-12507	BA. SIGNATURE OF APPLICA	Person taking permit, 8B. DATE SIGNED
ACKNOWLEDGMENT OF A			reposed disposition stated herein is or and was authorized pursuant to Section 1		1	09/28/199
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	UED IN ACCORDANCE WITH FORMIA HEALTH AND SAFE TY FOR THE DISPOSITION S IO RIGHT OF DISPOSAL OUTSIDE OF	PECIFIED \$ 7 00	98. DATE PERM		FLOCAL REGISTRAR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL SPOSITION.	P.O. Box 6 SD CA 9218	5222	OF DEATH—		R OF DISTRICT OF DISPOSITIO CUR IN ANOTHER DISTRICT IN CA	N
IL NUTHORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS			FOR C	CORONER'S USE ONLY
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US		AINS OTHER	G. SHIP IN TO		a de la constante de la consta	nd Address)
	11A. NAME AND AD	DDRESS OF CALIFORNIA	CEMETERY	11B. DATE BURN	ED   11C. SIGNATURE OF	PERSON IN CHARGE OF BURIAL
BURIAL	Mt Hope 3751 Mar	Cemetery ket St S.D.C	92102	1-109	5 4003	t
CREMATION	12A, NAME AND A	ddress of California	CREMATORY	12B. DATE CREMA	ATED 12C. SIGNATURE OF	PERSON IN CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND AC	ODRESS OF CALIFORNIA	FACILITY RECEIVING REMA	INS 138. DATE RECE	IVED 13C. SIGNATURE OF	PERSON IN CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING S' CREMATED REMAINS AR	TATE OR COUNTRY WHERE E TO BE SHIPPED	148. DATE SHIP		SIGNATURE OF PERSON IN CHARGE TH THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY			ie, or other description ca <u>district</u> of disposition		15C. SIGNATURE OF CHARGE OF DIS	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

## MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date May 9, 1995

of <u>Marion</u> Blankins	ship (MT. L)
Voted bore	ate, time 74UR5/11/95/0 9 a
Ghurch Chape Gravestie Chapel & Withness	
All Funeral cars must arrive before 3:30 p.m. of regular	work day or an extra charge of \$ 150
will be applied and billed to undersigned. X	
War time veteran X	72
	action 5 Division/Bleck 8
Grave space & Care Fund Pre - Treed	18-4047 B
Additional spaces and care fund	
Opening/Closing & Setup	375,0
Burial Container	1 1995 \ 90.0
Handling Fees	145.00 ANDECO 45.00
Flower vases ~ Marker setting fee	E CENTO COLOR
The same and	NADIS US OF
Recording and filing fee	12 20
Sales laxes,	70,30
Service will arrive	Total Due
Wound Ilam. Paid receipt nun	mber KIL # 462/4 108.3
Nov At 909 LOSS-9497 Fax	# 4585000 Balance due _ OT
I hereby certify I am the X	of the above named deceder
and this is your authority to make disposition of remains that I have the right to make this authorization and I agree any liability on account of said authorization and intermediate.	s as above indicated. I certify and represer se to hold Mt. Hope Cemetery harmless from
I hereby authorize the interment in lot I hold under deed.	11000
Auditor Signature of recorded holder of deed	
2	Zip Cox
Teleph	non4
- 12211 Invo	ice #
_   //	(2) (4) (1) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4

## MT HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date May 9, 1995

	P
You are here as authorized and instructed subject to your rules and regulations to inter the remains	· · ·
of Marion Blankinskip (MT. L)	1
in a X series Funeral date, time THURS 5/11 195 60 9 am	m
	89:54
All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge of \$ 15000	12
will be applied and billed to undersigned. X	H
War time velorar X	   
Lot 1083 Grave Row Section 5 Druston Blees 8_	HAGE
CHRISTIAN OF CHRISTIAN AND AND AND AND AND AND AND AND AND A	
Additional spaces and care fund	Ĭ
Opening/Closing & Setup.	CEMETER
Burial Container MAY 1 1 1995	70
Handing Fees	
Flower vases - Market setting fee MT. HOPE CEMETERY  Recording and filling fee CITY of SAN DIEGO. CALIF	Ħ
Recording and filing fee	
Sales laxes	5
Service well arrive Top 141 211 200	
around 11am Paid receipt number Rec #46214 168.30	
Mort 9. # 909 658-9497 Fax# 6585.	
heroty certify I am the X SON at the above named decedent and this is your authority to make disposition of remains as above indicated. Licentify and represent that I have the right to make this authorization and Lagree to hold MI. Hope Cemelarly namiless from any liability on account of said authorization and interment.	
After the Pan Braker	,
held under deed Y PO Box 275	į
X PO BOX 275 V SALVER NT 59523	Š
\$ CIMOOK, MT 59523 \$ 406-357-3872	Dat
1 •) · · · invo-ce #	
Anna E Land L	

PY-503 (Rev. 8-92)

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MOUNT HOPE CEMETERY 527-3400

From Mc Wave Family F	und Sixtu Ficht &	Jaconto.	ay 11 St. Auna Hars (\$ 7/108.	1995
	terment of marie	on Bland	Division Chart	
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	20% Sales Care 80% Sales of Lots Opening/ Closing Buriel Containers Handling Fee Pacording &	87007 77184 100 77184 100 77182 100 17182 100 17182 100 17182 100 17182 100 17182 100 17182	8888
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check A	ISSUED BY An Clark	Pre-Noed Trust	77183 69033 9022 60101 78380 8 7768	30



### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS **#736298** 4. SEX 1A. NAME OF DECEDENT-FIRST (GIVEN) 18. MIDDLE 1C. LAST (FAMILY) 2. DATE OF BIRTH 3. DATE OF DEATH 0272271907 0570871995 Marion Blankinship SA CITY OF DEATH 5B. COUNTY OF DEATH-OUTSIDE CALIF... 6. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMANT RIVERSTATE Riverside Stuart G. Blankinship, Son 7A. TYPED NAME AND ADDRESS OF CALIFORNIA FUNERAL DIRECTOR OR PERSON ACTING AS SUCH 7B. CALIF, LICENSE NUMBER P.O. Box 265 Chinook, Rr. 59523 -IF APPLICABLE McHane Family Funeral Home 350 N. San Jacinto St., Hemet, CA 92543 FD998 BA. SIGNATURE OF APPLICANT—Person taking permit. BB. DATE SIGNED I hereby acknowledge as applicant that the proposed disposition started herein is one of the dispositions authorized by Section 10376 of the Health and Safety Code, and was authorized pursuant to Section 7100 of the Health and Safety Code. 05/09/1995 ACKNOWLEDGMENT OF APPLICANT THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI-SIONS OF THE CALIFORMA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED 9A. AMOUNT OF FEE PAID 9B. DATE PERMIT ISSUED 9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT PERMIT AUTHORIZATION OF IN THIS PERMIT ▶ Bredley P. Gilbert, M.D. BY: 7.00 05/09/1995 NOTE: THIS PERMIT GHES NO MIGHT OF DISPOSAL OUTSIDE OF CALIFORNIA LOCAL REGISTRAR 9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH-9E. ADDRESS OF REGISTRAR OF DISTRICT OF DISPOSITION-ANY CHANGE IN DISPOS IF DEATH OCCURRED IN CALIFORNIA IF DISPOSITION IS TO OCCUR IN ANOTHER DISTRICT IN CALIFORNIA EQUIRES A NEW TO SHOW FINAL POSITION. P.O. Box 7600, Riverside, CA 92513 P.O. Box 5222, San Diego, CA 92186 10. AUTHORIZED DISPOSITION(S) CHECK APPLICABLE ITEMS FOR CORONER'S USE ONLY E. TEMPORARY ENVAULTMENT A. BURIAL (INCLUDES ENTOMBMENT) I. DISPOSITION PENDING-REMAINS LOCATED AT (Name and Address) B CREMATION F. DISINTERMENT C. DISPOSITION OF CREMATED REMAINS OTHER G. SHIP IN TO CALIFORNIA THAN IN A CEMETERY D. SCIENTIFIC USE H. TRANSIT TO OUTSIDE OF CALIFORNIA 11A. NAME AND ADDRESS OF CALIFORNIA CEMETERY 118. DATE BURIED 11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL BURIAL Mt. Hope Cametery Sam Diego, CA 12C. SIGNATURE OF PERSON IN CHARGE OF CREMATION 12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY 12B. DATE CREMATED CREMATION N/A 13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS 13B DATE RECEIVED 13C SIGNATURE OF PERSON IN CHARGE OF FACILITY SCIENTIFIC N/A USE 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE 14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE 14B. DATE SHIPPED REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED OF PLACING WITH THE CARRIER TRANSIT 15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUF-15B. DATE OF 15C. SIGNATURE OF PERSON IN 15D. LICENSE NUMBER SCATTERING AT SEA CHARGE OF DISPOSITION OF CREMATED BE-FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT OF DISPOSITION DISPOSITION MAINS DISPOSER DISPOSITION OTHER N/A -IF APPLICABLE THAN IN A CEMETER

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



## MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date May 9, 1995

	00 <i>dS</i> Funeral, date, time <u>8at 5/13</u> 1PM
7 Vantation /	manuale Roandale Mortuan
, sincial, citapat, anatosias	(magy)
All Funeral cars must arrive before 3:30 p.m.	Collegia work day or an extra coarse or 5 15 016
will be applied and billed to undersigned.	market perces
War time veteran NO	0
ot 137 Grave Flow -	Section V Division/Block /2
	895
3rave space & Care Fund	1 0
Additional spaces and care fund	7050
Opening/Closing & Setup	375.a
Burial Container	
landling Fees	145.00
lower years to have been seen to be	Saturday pe 600.0
Recording and filing fee	45.00
Sales taxes	13.30
ALES MAES	Total Due 3363/3
\$ 50° 170	0-14 222 / 44
Paid	receipt number 1<-4622 600.0
0. 0	Har Balance due 1 9 0 7
hereby certify I am the X X	of the above named deceder
hat I have the right to make this authorization	of remains as above Indicated. I certify and represent and I agree to hold Mt. Hope Cemetery harmless from
my llability on account of said authorization a	and interment
20V 52	x 3/4 01.04 - X01
hereby authorize the interment in lot I hold under deed.	Signed 12 2 9 1 8
59.453000.00000	Address of Manager
ignature of recorded holder of deed	City 20057-17
1	×213 56419744
	(Telephone
-12212	Invoice * 253966
	NUMBER OF STREET
Nork Order # E 12212	Acct. # 085243

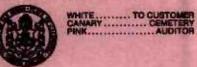
CITY OF SAN DIEGO TREASURER'S DEPARTMENT CASHIER ID : J 02:39 PM A:06-22-1995 \$1,663.30 5000 INVOICE 233%6 E-1 2212 TOTAL DUE \$1,663.30 RECEIVED FROM: W BELTON \$150.00 CHECK \$1,513.30 CHECK TOTAL TENDERED \$1,663.30 CHANGE DUE \$0.00

BAT	HARE	OFFICE	FOY
mı.	HUPE	CEMET	CR I

w.o. # E-12212

## NOTE

	NOTE			
\$1663.30	San Diego, C	alifornia	ĵ- <i>Ι</i> Δ	19.9.5
Thirty days after date for value received 3751 Market Street, San Diego, CA 9 with interest from		hundred si		OOLLARS
at the rate of 12 percent per annum,	payable on demand.			
Should this note not be paid when accrue at the rate indicated above. Provided the liable and consents to renew maturity, and waives presentment, or person who signs this note agrees to contained herein. If any action be in may fix as attorney's fees.	rincipal and interest are payable als, replacements and extension demand and protest and the rig that recourse may be held agai	e in lawful money ons of time for pay that to assert any s nst his/her separa	of the United States. ment hereof before tatute of limitations ate property for any	The maker at or after A married obligation
	, Paragraph 7528 of the State y remains from a plot for which t		그림 그 교육에 하이어지는 사람이 있었다면 뭐 하십시오. 하늘에 있는 이 수 없는 때 아니라 아니라 하나?	
PRINT NAME XWILLCHENIA	Be How SIGNATU	RE X Thill	nerfoldo	<u></u>
ADDRESS X 11328 Zamon	a Ave 637	L. A. 0	90059-1	730
CALIFORNIA DRIVER LICENSE NUMBER	K E0443331	SSN #_X	559-66-069	/



### MOUNT HOPE CEMETERY 527-3400

From Anderson - Ragida		BL, JO	92102	
In past Payment of Int	erment of bladys We		ollars (\$ LaCC	
Lot 137 Grave	RowSe	ection /	Division Block	12
Invoice No.  Acct. No.  W.O. F-12212  BALANCE DUE #1663.30  Pre-Need Lot At Need F On Acct	NOTYALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burisi Containers Handling Fee Recording & Misc. Fees Pre-Need Trust	67007 77184 100 100 17164 100 17185 100 17185 100 17185 100 17183 8002	0 00
Pre-need Trust Cash Check AC-212 (Rev. S-24)	ISSUED BY ROUCH	Sales Tax TOTAL PAID	* (OC)	000



## APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-12213

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

A. NAME OF DECEDE	NT-FIRST (GIVEN)	18. MIDDLE	1C. LAST (FAMIL	n		ATE OF BIRTH	3. DATE OF DE	
Gladys		Lee	Woods		1000	/09/1921	05/06/19	20.75.55577
SA. CITY OF DEATH		A		EATH—OUTSIDE CALIF.,		ATIONSHIP, FULL M.	AILING ADDRESS	AND ZIP CODE
San D	iego		San Die	22	OF INFORM		Wdaaa	
A TYPED NAME AND A	DDRESS OF CALIFORN	IA-FUNERAL DIRECTOR OR PER	RSON ACTING AS SUCH 7B.	CALIF. LICENSE NUMBER		Stevenson	- wrece	
Anderson-Ray	gsdale Mort	.; 5050 Federal	Blvd.	IF APPLICABLE	Language Control of the Control of t	eak St.	112	
• · · · · · · · · · · · · · · · · · · ·	San	Diego, CA		-1329	SA. SIGNATUR	E OF APPLICANT—P	erson taking permit 86	B. DATE SIGNE
* ACKNOWLEDGMENT OF A	PPLICANT   heraby a Section 10	acknowledge as applicant that the proposi 1376 of the Health and Safety Code, and wa	ed disposition stated herein is one o is authorized oursuant to Section 7100	of the Health and Sefety Code:	Mille	chille	Contract Constitution of the Constitution of t	5/11/19
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	UED IN ACCORDANCE WITH PR FORMA HEALTH AND SAFETY O TY FOR THE DISPOSITION SPECI ID NIGHT OF BESPESAL ONTSIDE OF CAUSE	FIED \$7.00	05/12/19		SIGNATURE OF LO	95064	
APPLICATION CONTRACTOR CONTRACTOR	90. ADDRESS OF RI IF DEATH OCCURRE Vital Reco	EGISTRAR OF DISTRICT OF D	9E.	ADDRESS OF REGISTRAR IF DISPOSITION IS TO OCCU			INIA	
HORIZED DISP	OSITION(S) CHECK A					FOR COR	ONER'S USE	ONLY
B. CREMATION C. DISPOSITION THAN IN A CI D. SCIENTIFIC U	OF CREMATED REM EMETERY SE	AINS OTHER			D : US SK	(Name and Ad		
BURIAL		Cometery; 3751 San Diego, CA	Market St.	5/13/95	I.C	Wait	7	20.00
CREMATION	12A. NAME AND AL	ddress of California Cre	EMATORY	12B. DATE CREMAT	ED 12C. S4	NATURE OF PERS	ON IN CHARGE (	OF CREMATION
SCIENTIFIC USE	T/A	DDRESS OF CALIFORNIA FAC	CILITY RECEIVING REMAIN	S 138, DATE RECEI	VED 13C. SI	SNATURE OF PERS	BON IN CHARGE	OF FACILITY
TRANSIT		DORESS IN RECEIVING STATI CREMATED REMAINS ARE TO		14B. DATE SHIPP		DRESS AND SIGN. PLACING WITH TO		ON IN CHARG
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		AREST POINT ON SHORELINE, C ENTIFY FINAL PLACE AND CA		IF. 15B. DATE OF DISPOSITION		GNATURE OF PERS MARGE OF DISPOS	TION   9	ICENSE NUMBER OF CREMATED RE- MAINS DISPOSER OF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



CITY OF SAN DIEGO, CATTORNIA

0.32

Make Remittance Payable to

E-1001

San Diego, California 92112

Please Return YELLOW Copy with Your Payment

WILHELMINA BELTON
11328 ZAMORA AVE #637
LOS ANGELES CA 90059-1730
LOS ANGELES CA 90059

ACCT NO 085243

PAYMENT REF NO \$ 1943

AMT PAID: 4/663.30

OS/22/95

PAYMENT DUE

PERIOD COVERED
APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JUANN WAITS
REF NO: E-12212
DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

DENING/CLOSING PAID

LINER

TAX ON LINER

HANDLING FEE

RECORDING FEE & SAT FEE (400)

PAYMENT RECEIVE MENHOPE GEMETERY

CITY OF SAN IN EGO. CALIF

895.00 375.00 190.00

> 145.00 645.00 600.00-

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10, WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT ACCRETATED ABOVE WHITE CONTACT ACCRETATED ABOVE WHITE CONTACT ACCRETATED ABOVE WHITE CONTACT ACCRETATED ACCRETATED TO THE CONTACT ACCRETATED ABOVE WHITE CONTACT ACCRETATED TO THE CONTACT ACCRETATED ACCRETATED TO THE CONTACT ACCRETATED

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4. -1.

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date May 9, 1995

	,
You are hereby authorized and instructed, s	subject to your rules and regulations, to inter the remains
1 willer	TO Que The b
na wasing of O	Funeral, date, time FRI @ IIAM 5/13/9.
church Chapa, Gravesid Chapel &	gnaveside: Ragidale Mortuary.
All Funeral cars must arrive before 3:30 p.m	n. of regular work day or an extra charge of \$
vill be applied and billed to undersigned. 🖉	( Callerio L'accido
Var time veteran	
ot <u>92</u> Grave <u>4</u> Row_	Section3 Division/Bleek/2
Brave space & Care Fund	
Additional spaces and care fund	- <del>0</del>
pening/Closing & Setup	375
burlal Container	190
landling Fees	ach for \$ 1063,30 140
lower vases - Marker setting fee	me from Ragedale, &
Recording and filing fee	to this Smith 15.00
Sales taxes at Ca	lections MS 606 C 13.30
7-12	Total Due
Paid	d receipt number <u>VISA</u> <u>500, DC</u>
0	Balance due / 0/03.30
hereby certify I am the X	of the above named decedent
hat I have the right to make this authorizate	on of remains as above indicated. I certify and represent on and I agree to hold Mt. Hope Cemetery harmless from
ny liability on account of said authorization	and interment.
	× (Klaud Chrob
hereby authorize the interment in lot I old under deed.	8951 JANOCHU POON
State 100 (500000) 20000 200 250	Source ( 10 May 10 91977
ignature of recorded holder of deed	24 //6 2 - 5 3 50/ Zp Code
1	Telephone Telephone
10010	Invoice * 253962
F 12213	096363
Vork Order #	Acct # _ 0850000
1 9	IN LD#

HOP	 	EUV
 HUE		

PY-1012 (11-89)

w.o.#\_ E-12213

## NOTE

	St. 100 - 100 - 201 A . 10 10	
- 10le 3.30	San Diego, California _	May 9 1995
Thirty days after date for value received, the 3751 Market Street, San Diego, CA 92101,	undersigned maker promises to p	ay Şan Diego City Treasurer, or order at
	une 12, 1995	on the unpaid principal
Should this note not be paid when due, accrue at the rate indicated above. Principa will be liable and consents to renewals, rematurity, and waives presentment, demand person who signs this note agrees that recontained herein. If any action be instituted may fix as attorney's fees.	I and interest are payable in lawful placements and extensions of time d and protest and the right to asse course may be held against his/he	e for payment hereof before, at or after ert any statute of limitations. A married er separate property for any obligation
Part II, Chapter I, Article 2, Paragather authorizes the removal of any remain PRINT NAME LESIER BAOWN	그렇게 많아 들어보다 ( ) [12] 20일 [12]	ji 8 ki 1982 (1985년) 18 ki 1982 (1985년) 18 ki 1985년 (1985년) 18 ki 1985년 (1985년) 18 ki 1982년 (1985년) 18 ki 1982
	E. PM AZVOBUL	2856 N#555527535

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE REACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS.

1A. NAME OF DECEDE	ENT—FIRST (GIVEN) ! 1B. MIDDLE	1C. LAST (FAMILY)	STEEL SPINSTER CONTRACTOR	2. DATE OF BIRTH	3. DATE OF DEATH	4. SEX
Willie	HIR	Woods		12/14/1919	MONTH, DAY, YEAR	M
SA. CITY OF DEATH	A 22.554:	58. COUNTY OF DEATH	-OUTSIDE CALIF., 8.	NAME, RELATIONSHIP, FULL M		P CODE
LOS ANGELE	S	TOS ANGELES		FRANCIS WOODS,	DAUGHTER	
7A. TYPED NAME AND A	DORESS OF CALIFORNIA—FUNERAL DIRECTOR OR PET		IC THOUSENED AND MARKET	5150 WHITEMAN D	The later of the l	
NDERSON-RAG	SDALE MORTUARY 5050 FEDER	VONCENTIAL CARROLL SAID SOURCE PROPERTY SAID SAID SAID SAID SAID SAID SAID SAID		SAN, DIEGO, CA. 9		
SAN DIEGO, C		170	4.74	SIGNATURE OF APPLICANT	Person taking permit 88. DAT	SIGNED
ACKNOWLEDGMENT OF A	PPLICANT I hereby advanceding as applicant that the proposi- Section 10376 of the Health and Safety Code, and we			Hartwell Ko	stale 5/	195
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THES PERMIT IS ISSUED IN ACCORDANCE WITH PE SIONS OF THE CALIFORNIA HEALTH AND SAFETY C AND IS THE AUTHORITY FOR THE DISPOSITION SPECI IN THIS PERMIT. MOTE TIME FRIME SINCE IN MIGHT OF DEPOSAL OUTSIDE OF CRUF	FIED 7 00	98. DATE PERMIT IS 05 / 10 / 19		Mass D	
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL SPOSITION.	9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH OCCURRED IN CALIFORNIA  313 N. FIGURROA ST. L.A.C.	j 16 i	ISPOSITION IS TO OCCUR	DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CAUFO	5000000	
HORIZED DISP	OSITION(S) CHECK APPLICABLE ITEMS	12.00		and the second of the second o	ONER'S USE ONLY	,
B. CREMATION C. DISPOSITION THAN IN A CI D. SCIENTIFIC U		F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	37.40%	☐ (Name and A	ddress)	
BURIAL	MT. HOPE CEMETERY 3751 M SAN DIEGO, CA		5/12/95	I 11C. SIGNATURE OF PER	SON IN CHARGE OF BE	URIAL
CREMATION	metal socier	EMATORY	128. DATE CREMATED	12C. SANATURE OF PER	SON IN CHARGE OF CR	EMATION
SCIENTIFIC	13A. NAME AND ADDRESS OF CALIFORNIA FAC	CILITY RECEIVING REMAINS	13B. DATE RECEIVE	D 13C. SIGNATURE OF PER	SON IN CHARGE OF F	ACILITY
TRANSIT	14A. NAME AND ADDRESS IN RECEIVING STATS REMAINS OR CREMATED REMAINS ARE TO		14B. DATE SHIPPED	14C. ADDRESS AND SIGN OF PLACING WITH T		CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEAREST POINT ON SHORELINE, O FICIENT TO IDENTIFY FINAL PLACE AND CA		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PER CHARGE OF DISPOS		NATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

F-12213



THE CITY OF

### SAN DIEGO

MT. HOPE CEMETERY • 3751 MARKET STREET • SAN DIEGO, CALIFORNIA 92102
Real Estate Assets Department • Business hours 8 a.m. to 4 p.m.
527-3400 Monday through Friday • Gates open daily

2775	19 95	\$ 1,063.30	DOLLARS	
чяу	July 10,	<del>9</del>	8	A A
ANDERSON-RAGSDALE MORTUARY	DEGO, CA 92102	873 O C78		11.53 PRODE 10
AND BIB	San	Hope Cemetery	lie Hue Woods	SI" 1: 12 200049 LENE 0000 1 9 1 5 1 1 1 2 5 1 1 1 2 5 1 1 1 2 5 1 1 1 2 5 1 1 1 2 5 1 1 1 2 1 2
	PAY		Intermen	11 OO 2.7 7 5 III
- E	-	III 3	Moint Seed & Feerna Seed & East Avena on Diago, CA 221	

7/12/95

Check received from Anderson Ragsdale on July 11, 1995.

Has been sent to the Treasurer's Collections Department, Mrs. Smith, at 533-3800.

Jane Rauch



7/11/95

JoAnn, this check came in today. The account was turned over to collections on 7/4/95, but Mark (ragsdale) called Treas on 7/3 and they said Ragmsdale

buld send us the check.

oth Mark and Mr. Ragsdale

are hoping we will accept this
check. Mark said the family
does not have the money and
they are doing them a favor.

MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

hey are doing	them a favor. Date My 9,	1995
Jane -	You are hereby authorized and instructed, subject to your rules and regulations, to inter the	e remains
•	of Willie Woods	- Tonionio
	in a limes Funeral, date, time FRI @ IIAm 5	713.PS
	Value of O/ 1 O- 1	Mortuary.
	All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge of \$	CIL
	will be applied and billed to undersigned. X ( NONO, DOUG)	1400
12	/ War time veteran MO	18
	Lot 93 Grave 4 Row — Section 3 Division/Block	13
	Grave space & Care Fund	95
5	Additional spaces and care fund	<i>e</i> :
	Opening/Closing & Setup.	75°
	Burial Container	0
	Handling Fees	1500
	Flower vases - Marker setting fee	<u>e</u> _
	Recording and filing fee	:00
	Sales taxes	3.30
	Total Due	13.30
<b>S</b> .,	Paid receipt number VISA 50	10.00
	Balance due / C/L	3.30
	I hereby certify I am the X MUGATE of the above named and this is your authority to make disposition of remains as above indicated. I certify and that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harm any liability on account of said authorization and Interment.	represent
5.606°C	I hereby authorize the interment in lot I	- 4
.06	hold under deed.	1000 95
6.00	Signature of recorded holder of deed Spring Valley OF	9197)
	X" 2/63-5330'	21p Code
	Telegrane	
	- 12213 Invoice - 253962	
	Work Order # E 12213 Acct. # 085252	

City of San Diego

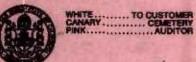
Date 5-9-95

ina Line	<u>م</u>	uneral, date, time	10:-5/12	apm
Church, Chapel, Gravesid			andale	. Mortuary.
All Funeral cars must army	14		mark	LONDON SERVICE
			an extra charge	oi \$
will be applied and billed t			30 - 2	
War time veteran				
Lot Grave	Row	Section	Division/B	lock
Grave space & Care Fund	l			
Additional spaces and car	e fund	ş	$\bigcap$	
Opening/Closing & Setup.		1 (> 1		88 -
Burial Container	-,		£	
Handling Fees		V	# !!**\*********************************	
Flower vases – Marker se	tting fee	4	********************	
Recording and filing fee			***(111)***********	N
Sales taxes		J	****	
		Tota	l Due	
	Paid re	ceipt number		
	70 V		Balance due	8
I hereby certify I am the	1		of the above n	amed decedent
and this is your authority that I have the right to mai	ke this authorization :	and I agree to hold M	Indicated, I certif It. Hope Cemeter	y and represent y harmless from
any liability on account of	sald authorization an	d interment.		
( barrier steady 11 - 1 - 1			<b>*</b>	28
I hereby authorize the inte hold under deed.	ment in lot i	Bignatura		
100 200000 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 -	•	Address		
Bignature of recorded holder of Beed	40	( City	**	Zip Code
~ 10	200	Telephone	*	
V	0014			
water F	2214	Invoice #	3	
Work Order #	8	Acct. #		

City of San Diego

Date May 10, 1995

0	ubject to your rules and regulations, to inter the remains
of Beatrice Hogi	1 1
in a White	Funeral, date, time MON 5/15/95@ 1PM
Church Chapel Graveside Chapel \$9	paveside: Patific Black Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge of \$ 150
will be applied and billed to undersigned. $\chi$	plean allan
War time veteran 200 .	0
Lot 249 Grave 2 How	Section GAR Division/Bleek 2
	Trud 6-4829 8
Additional spaces and care fund	8_
Opening/Closing & Setup	375.00
Burial Container	190.00
Handling Fees	145.00
Flower vases - Marker setting fee MAY	1 1 1995
	HE CO
	N DIEGO, CALIF 13.30
CITY OF SA	Total Due 768, 30
Paris.	receipt number & Co. # 46215 768.30
Palo	A)
12 12	Balance due
	of the above named decedent in of remains as above indicated. I certify and represent on and I agree to hold Mt. Hope Cemetery harmless from and interment.
	406 CH2
I hereby authorize the interment in lot I hold under deed.	Signapole Comments (1)
	Allow Cottonia Way
Signature of recorded holder of seed	POWRY CA 92064
./	X 419 486 3054
- 12215	Invoice #
Work Order # E	Acct. #
DV-502 (Day 9.02)	POWER DATE OF THE PARTY OF THE



#### MOUNT HOPE CEMETERY 527-3400

From JoANN allan (dang	Address: 13104 Conor	Date: 17	play Collars (\$	11 10 30 TO 8 30	95
InPayment of The	terment of Beat	+ 1	rie_	3. 42	
Lot 249 Grave		ction_ GH	R	Division Block	2_
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Cure	57007 77184 —		
Acct. No.		of Lots Ottoping/	77184 — 100	275	00
w.o. <u>E-12215</u>		Opening/ Closing Buriel Containers	77181	190	00
BALANCE DUE		Handing Fee	77162 — 100 77185 —	145	00
D		Recording & Misc. Fees Pre-Need	100 77183 — 63033	45	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	1	Truet Sales Tax	80101	13.	30
AC-212 (Rev. 5-94) # 5537	ISSUED BY In Wark	TOTAL PAID	78390	768	30

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE BRATRICE	NT—FIRST (GIVEN)	18. MIDDLE HATHLIE	IC, LAST (FAMILY) HAGUE		2. DATE OF BIRTH MONTH, DAY, YEAR 05/30/1915	3. DATE OF DEATH MONTH, DAY, YEAR 05/09/1995	4. SEX
POWAY			58. COUNTY OF DEATH	AN DIEGO	6. NAME, RELATIONSHIP, FULL I OF INFORMANT MARSHA JO ANN		MUNESCASION AND AND AND AND AND AND AND AND AND AN
PACIFIC BE	LACH MORTUAL		7040	F APPLICABLE	13104 CORONA WAR	17 54	
ACKINOWLEDGMENT OF M	PPLICANT   hereby ac Section 103	twoveledge as applicant that the propose 76 of the Health and Safety Code, and was	d disposition stated herein is one of the s authorized cursuant to Section 7100 of th	dispositions authorized by	Marrellathe	The second secon	0/199
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIFI AND IS THE AUTHORIT IN THIS PERMIT.	ED IN ACCORDANCE WITH PR PRINIA HEALTH AND SAFETY C Y FOR THE DISPOSITION SPECIA INSHIT OF DISPOSAL OUTSIDE OF CILIFO	PIED \$7 00	05/13/	1995 SIGNATURE OF LO	CAL REGISTRAR ISSUE	IG PERMIT
THE GURES A NEW O SHOW FINAL POSITION.	VITAL RECO	GISTRAR OF DISTRICT OF D O IN CALIFORNIA DEDS, P. O. BOX CA 92186-522	85222		OF DISTRICT OF DISPOSITION— R IN ANOTHER DISTRICT IN CALIFO	WINIA	,
10. AUTHORIZED DISPO	OSITION(S) CHECK AP	PLICABLE ITEMS	12000		FOR COR	ONER'S USE ONLY	Y
B. CREMATION		INS OTHER	E. TEMPORARY ENVA	DRNIA	I. DISPOSITION (Name and )	PENDING—REMAINS LO	ogated a
BURIAL	MOUNT BOX	ORESS OF CALIFORNIA CENTER CEMETERY, 37: SAN DIEGO, CA	51 MARKET	5/15/95	11C. SIGNATURE OF PER	SON IN CHARGE OF BI	URIAL
CREMATION	12A, NAME AND AD	DRESS OF CALIFORNIA CRE	enatory Utal Scaled	128. DATE CREMAT	ED 12C. SANATURE OF PER	SON IN CHARGE OF CA	EMATION
SCIENTIFIC	13A. NAME AND AD	DRESS OF CALIFORNIA FAC	ILITY RECEIVING REMAINS	13B. DATE RECEIV	ED 13C. SIGNATURE OF PER	SON IN CHARGE OF F	AGILITY
TRANSIT		DRESS IN RECEIVING STATE CREMATED REMAINS ARE TO		14B. DATE SHIPPE	D 14G. ADDRESS AND SIGN OF PLACING WITH		CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORIELINE, O NTIFY FINAL PLACE AND CA <u>D</u>		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PER CHARGE OF DISPOS	SITION   OF CREA	NATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

City of San Diego

Date May 10, 95

Mar 12	Hipson 12
na Lines	_ Funeral, date, time Fri @ // Am 5 0
Church Chapel Graveside Chapel	Egzanside CABurial Morte
All Funeral cars must arrive before 3:30 p	o.m. of register work day or an extra charge of \$ 150
will be applied and billed to undersigned.	funtain IV laste
War time veteran 200	The second secon
Lot 159 Grave 12 Row	- Section 2 Division/Blook /
	<b>1995</b>
TO THE OWN PROPERTY OF VALUE OF THE PROPERTY O	<u>00</u>
Additional spaces and care fund	205
Opening/Closing & Setup	100
	140.0
LA HERO BOOK RECORDER SANDER COMPANION DE CONTRACTOR DE CO	195.0
Flower vases - Marker setting fee	1100 5
Recording and filing fee	12 2
Sales taxes	13.3
	Total Due
Pi	Paid receipt number 400 / 330
, /	(a lunghlex) Balance due 813.
that I have the right to make this authoriza	ithe above named dece- ition of remains as above Indicated. I certify and repre- ation and I agree to hold ML Hope Cemetery harmless I
any liability on account of said authorizati	ion and interment.
	X (sotton R. Martin
I hereby authorize the interment in lot I hold under deed.	x Coulton R. Martin
I hereby authorize the interment in lot I hold under deed.	x Golf Benson ave
I hereby authorize the interment in lot I	X Cynthia R. Martin 200919 Benson ave X Jan Diego 95
I hereby authorize the interment in lot I hold under deed.	- X Jan Diego 95
I hereby authorize the interment in lot I hold under deed.	- X Jan Diego 95

### E-12216

CITY OF SAN DI TREASURER'S DEPAR REG/RCPT : 02-58300 CASHIER ID : J 02:41 PM	TMENT C: 06-21-1995
5000 INVOICE 253963	\$813,30
TOTAL DUE RECEIVED FROM: CASH PAYER	\$813.30
CASH	\$813.30
TOTAL TENDERED	<b>*813.30</b>
CHANGE DUE	\$0.00

MIT	HO	DE	CEM	ET	EDY	ř
	по	rE	UEM			r

W.O.# E-12216.

### NOTE

\$ 8/3,30	San Diego, Cali	fornia <u>may 10</u> 1995
		ses to pay San Diego City Treasurer, or order
3751 Market Street, San Dieg	o, CA 92101, the sum of Eight Hun Qune 12, K	995 on the unpaid principal
at the rate of 12 percent per	0	on the dripald principal
accrue at the rate indicated a will be liable and consents to maturity, and waives present person who signs this note a	bove. Principal and interest are payable in o renewals, replacements and extensions tment, demand and protest and the right agrees that recourse may be held agains	rest on the principal. Interest after maturity will in lawful money of the United States. The maker is of time for payment hereof before, at or after it to assert any statute of limitations. A married it his/her separate property for any obligation gned promise(s) to pay such sum as the Court
	rticle 2, Paragraph 7528 of the State of all of any remains from a plot for which the	purchase price is past due and unpaid.
ADDRESS 6919 L	TENSON AVE. S.D.	92114
CALIFORNIA DRIVER LICENSE NU	IMBER A-3019384 Eq 1-9	16 SSN# 554-08-8482



### CITY OF SAN DIEGO, CALIFORNIA

GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P O Box 2289

San Diego, California 92112 Please Return YELLOW Copy with Your Payment

CYNTHIA R MARTIN 6919 BENSON AVE SAN DIEGO CA 92114 SAN BIEGO CA 92114

ACCT NO 085247

USE ONLY. -TREASURERS 6-21-05 PAYMENT\_DATE (CA CK PAYMENT REF NO

INVOICE DATE . 05/22/95

PAYMENT DUE 06/21/95

PERIOD COVERED APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT: REF NO: E-12216 JOANN WALTS DEATS PROBERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

CURTIS GIPSON SERVICES LOT 159 GRAVE 1 DOPEING/CLOSING LINER JUN 21 1995 HANDLING FEE TAX ON LINER ATT. HOPE CEMETERY RECORDING FEE LESS PAID ON R.

372-00 190,00 145.00 13.30 45.00 850.00-

-895-00

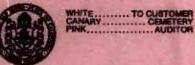
TOTAL DUE 813,30 NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER. INTEREST OF 1% PER HONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT Marie Town ABOVE White Customer Com . Yellow - Remittance Chy NO. 253963

# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)   1B. MIDDLE	IC. LAST (FAMILY)			OF DEATH   4. SEX
Curtis	Lee	Gipson		16/31/1946 05/67	1995 M
SA, CITY OF DEATH		68. COUNTY OF DEATH-	-OUTSIDE CALIF.,	6. NAME, RELATIONSHIP, FULL MAILING ADD	RESS AND ZIP CODE
San Diego		San Diego	1/1	Eunice Gipson-Wife	
California	ORESS OF CALFORMA FUNERAL DIRECTOR OR PERSON A Cremation & Burial Chapel	CTING AS SUCH 7B. CALI	LICENSE NUMBER APPLICABLE	6919 Benson Avenue San Diego, CA 92114	
5880 E1 Ca	jon Blvd. San Diego, CA 9211	5 70	1357	MA. SIGNATURE OF ASPILICANT—Person taking per	mit 88. DATE SIGNED
ACHMOWLEDGMENT OF A	PERCANT I hereby acknowledge as applicant that the proposed disport Section 10376 of the Health and Salety Code, and was author	ation stated besein is one of the di and pursuant to Section 7100 of the	Expositions authorized by Health and Safety Code,	KA alden	05/10/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI- SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT. HOTE: THIS PERMIT GRES NO BIGHT OF DISPOSAL QUITSING OF CALIFORNIA.	9A. AMOUNT OF FEE PAI \$7.00	98. DATE PERMIT 05/10/19 Kyle Cha	95 9506392	TRAR ISSUING PERMIT
TION REQUIRES A NEW PROSET TO SHOW FINAL SPOSITION.	P. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH OF CHIRCH IN CAMECAND.  NOTES RECORDS F. O. Box 8522.  San Diego, CA 92186-52222	9E 4000		OF DISTRICT OF DISPOSITION— UR IN ANOTHER DISTRICT IN CAUFORNIA	
THORIZED DISPO	DISTION(S) CHECK APPLICABLE ITEMS			FOR CORONER'S	USE ONLY
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US	BE .	F. DISINTERMENT G. SHIP IN TO CALIFOR H. TRANSIT TO OUTSIC	E OF CALIFORNIA	(Name and Address)	
BURIAL	11A. NAME AND ADDRESS OF CALFORNIA CEMETER Mount Hope Cemetery, San Diego, CA	Υ.	5/12/95	D 11C. SIGNATURE OF PERSON IN CH	ARGE OF BURIAL
CREMATION	- Mulai- no	Rale	12B. DATE CREMA	TED 12C. SIGNATURE OF PERSON IN CHA	ARGE OF CREMATION
SCIENTIFIC	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY	RECEIVING REMAINS	13B. DATE RECEI	VED 13C. SIGNATURE OF PERSON IN CH	ARGE OF FACILITY
TRANSIT	14A. NAME AND ADDRESS IN RECEIVING STATE OR I REMAINS OR CREMATED REMAINS ARE TO BE	COUNTRY WHERE	14B. DATE SHIPP	ED 14C. ADDRESS AND SIGNATURE OF OF PLACING WITH THE CARRIE	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTH- FICIENT TO IDENTIFY FINAL PLACE AND CA DISTREC	ER DESCRIPTION SUF- T OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	150. LICENSE NUMBER OF CREMATED RE- MARIS DISPOSER —IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



#### MOUNT HOPE CEMETERY 627-3400

From: Cynthia R. Mar	tin Address: 1919 Benso	Date: May	92114
Eight Hund	red fifty & 00/100 -	Dollars (	850.00
Lot 159 Grave	/2 Row	ection 3	Division /2
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 77184 - 80% Sales 100 of Lots 77184 - 100 Closing 77181 - 80rial 100 Containers 77182 - 100 Handling Fee 77185 - Recording & 100	134 00 716 00
Pre-Need Lot At Need Con Acct Pre-need Trust Cash Check A	ISSUED BY Jn. Clark	Misc. Feen 77183- Pre-Need 83033 Trust 8022- Sales Tax 80101 78390- TOTAL PAID \$	850 m

F-12216

253963	05/22/95 08524 E1216	100 100 100 100 60101	MARTIN 072 072 072 072
		67007	

77181 77182 77183 77185 78390 77184	000072 000072 000072 000072 000072	CA	
--	--	----	--

813.30	
375.00	
190.00	
45-00	
145.00	
13.30	
45.00	

PAID IN FULL

City of San Diego

Date 5-10:45

BARBARA G. MELL  BARBARA G. MELL  LINER # 7 Funeral date, time		pm
Church, Chapel, Graveside Church + Gnaruside	Paridala	
		ortuary.
All Funeral cars must arrive before 3:30 p.m. of regular work day of	r an extra charge of \$	30.0
vill be applied and billed to undersigned. Sulvata Un	atmen - 180	en
Yar time veteran _NOO		
ot 45 Grave 6 Row Section 6	Division/Block	11_
Grave space & Care Fund	TREE) 89	5.0
Additional spaces and care fund		-
Opening/Closing & Setup		15,0
Buriel Container Linea #7	22	0.00
landling Fees		. 00
lower vases - Marker setting fee		0.00
Recording and filing fee		5.00
sales taxes	10	40
The state of the s		15.4
Paid receipt number R		34.0
Paid receipt number		71.4
1 Vaughter	Balance due \$ 1 2	
hereby certify I am the XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	of the above named d indicated. I certify and re	present
hat I have the right to make this authorization and I agree to hold I my liability on account of said authorization and interment.	It. Hope Cemelery harmle	ess from
0.1	Md .	4.
hereby authorize the interment in lot I	Marien !	nee
old under deed.	Clan //will	stud
Contract Con	Viego (a	9211
ignature of recorded holder of deed		200 0000
ignature of recorded holder of deed Sun A	266-8389	
Telegricans	266-8389	-
Telegricans	266-8389 53964	_
Telegricans	966-8389 53964 85247	
- 12217 Invoice #_ 2		

Sing trap my

-20017 100/4/80

#### MT. HOPE CEMETERY

W.O. # F-12217

### NOTE

1271.40	San Diego, California	MAY 10 1995
	ed, the undersigned maker promises to pay 2101, the sum of Twelve hunds 12 June 1995	
at the rate of 12 percent per annum,	payable on demand.	
accrue at the rate indicated above. P will be liable and consents to renew maturity, and waives presentment, of person who signs this note agrees to	n due, it shall thereafter bear interest on the rincipal and interest are payable in lawful me als, replacements and extensions of time for lemand and protest and the right to assert hat recourse may be held against his/her so stituted on this note, the undersigned prom	oney of the United States. The maker or payment hereof before, at or after any statute of limitations. A married separate property for any obligation
	Paragraph 7528 of the State of Californ remains from a plot for which the purchase man-Green signature Liew Blvd #3 5.D.  B5396916 SSN	

# WHITE..... TO CUSTOMER CANARY CEMETERY PINK....... AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

From: Anita Chatman- Faur hundred tu in part Payment of Int	C. It a	View B	nay 10 L#3 SD Mars (\$ 434.	
Lot 45 Grave	CONTRACTOR A STATE OF THE PARTY	action 2	Division Stock	11
Acct, No.	NOT VALID FOR PURPOSE STATED UNILESS STAMPED PAID' IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots	77184 100 77184 4 24	100
w.o. = 12217		Opening/ Closing Burlat Containers	77181 ——————————————————————————————————	
BALANCE DUE \$1271,40		Handling Fee Recording & Misc. Fees	100 77185 100 77183	
Pre-Need Lot	00001	Pro-Need Trust Sales Tax	65033 8022 90101 78360	
AC-212 (Rev. 5-94)	ISSUED BY COUCH	TOTAL PAID	• 484	- 00

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

52

Barbara	NT—FIRST (GIVEN) 18. MIDDLE Jean	1C. LAST (FAMILY) Mellon		and the second		DATE OF DEATH 3707/1995	4, SEX
A. CITY OF DEATH	lonal City	58. COUNTY OF DEA ENTER STATE San Diego		OF INF	RELATIONSHIP, FULL MAILE ORMANT 1 Green — Daug		IP CODE
W. San Tarabana and American	ODRESS OF CALIFORNIA—FUNERAL DIRECTOR	10021125111 CC	ALIF LICENSE NUMBER	4910	Oceanview Blv	d. Apt. 3	
inderson-Rag	sdale Mort.; 5050 Fede	ral Blvd.			iego, CA 9211		
*	San Diego, CA	7-	1329	A. SIGNA	TURE OF APPLICANT-Person	taking permit BB. DA	E SIGNED
ACKNOWLEDGMENT OF A	PLICANT I hereby acknowledge as applicant that the Section 10376 of the Health and Safety Code	e proposed disposition stated herein is one of the and was authorized pursuant to Section 7100 of	the Health and Safety Code.	All	by While		1/199
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WISIONS OF THE CALLEPORNIA HEALTH AND SAF AND IS THE AUTHORITY FOR THE DISPOSITION IN THIS PERMIT ONES NO DIGHT OF DISPOSAL DUTSIDE O	FETY CODE I SPECIFIED	85/12/199	SSUED 1	OC. SIGNATURE OF LOCAL	9506472	IG PERMIT
NY CHANGE IN DISPOSI- TION REQUIRES A NEW TO SHOW FINAL SPOSITION.	9D. ADDRESS OF REGISTRAR OF DISTRICT IF DEATH OCCURRED IN CALIFORNIA Vital Records; P.O. Bo San Diego, CA 92	x 85222	DDRESS OF REGISTRAR ( DISPOSITION IS TO OCCUR		ICT OF DISPOSITION— THER DISTRICT IN CALIFORNIA		5
THORIZED DISP	OSITION(S) CHECK APPLICABLE ITEMS	CONTRACTOR - III			FOR CORON	ER'S USE ONL	Y
B. CREMATION C. DISPOSITION THAN IN A CI D. SCIENTIFIC US BURIAL		A CEMETERY 1751 Market St.	SIDE OF CALIFORNIA	1110	(Name and Addre	200.50	URIAL
MANAGOO.	Dent wwofo!	CA	110/10		VIA MILLE	7	
CREMATION	12A. NAME AND ADDRESS OF CALIFORNI	IA CREMATORY	12B. DATE CREMATE	D 12C	SIGNATURE OF PERSON	IN CHARGE OF CR	EMATION
SCIENTIFIC	12A. NAME AND ADDRESS OF CALIFORNI	non sealer	128. DATE CREMATE		SIGNATURE OF PERSON		
CREMATION  SCIENTIFIC USE  TRANSIT	12A. NAME AND ADDRESS OF CALIFORNI  13A. NAME AND ADDRESS OF CALIFORNI	IA CREMATORY  A CALL  IA FACILITY RECEIVING REMAINS  STATE OR COUNTRY WHERE		ED 13C	<i>V</i> .	I IN CHARGE OF F	ACILITY

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

City of San Diego

Date 5-10-95

or Woods	Glad	Lip	L		
in a	Funeral	date, time	Sat	. 5/13	IPM
Church, Chapel, Graveside	Gnan	uide.	Ragar	dale	Mortuary
All Funeral cars must arrive before 3:3					
will be applied and billed to undersigne	TDS		· Contract Contract		
War time veteran	essiste.				
Lot Grave Ro		Section		Division/Blo	ck
**************************************	1000	ADMINISTRATION OF			OVAL
Grave space & Care Fund					
Additional spaces and care fund					
Opening/Closing & Setup	***************************************				
Burial Container	***************************************				
Handling Fees	***************************************				
Flower vases - Marker setting fee					
Recording and filing fee					
Sales taxes					寸
					NI
	Paid receipt r	MARKSON AND AND AND AND AND AND AND AND AND AN		١	103
	/ au receipt i		2000		<b>V</b>
			10.55	alance due	- V
hereby certify I am the and this is your authority to make disp that I have the right to make this author	osition of rema	gree to ho	ove indica	ted. I certify	med decedent and represent harmless from
any liability on account of said authoriz	ation and inter	ment.			
any liability on account of said authorize thereby authorize the interment in lot I	tation and inter	gnature			
any liability on account of said authorize thereby authorize the interment in lot I	ation and inter	#3045800 			
any liability on account of said authorize the interment in lot I nold under deed.	eation and inter	gnature			Zip Code
ny liability on account of said authoriz hereby authorize the interment in lot i nold under deed.	Ration and Inter	gnature ddress			Zip Code
hereby authorize the interment in lot I hold under deed.  Bignature of recorded holder of deed	Ration and Inter	gnatura ddress			Zip Code

City of San Diego

Date 5-12-95

in a	Funeral, dat	e, time	
Church, Chapel, Graveside		Bina	2-Roberto Mortuar
All Funeral cars must arrive before 3:30			Jerren
will be applied and billed to undersigne		STREET STREET OF	300 200 00 <b>30</b> 0 00 00 00 <del>20</del>
War time veteran	SWACE		
Lot Grave Ro	w Sec	tion	Division/Block
Grave space & Care Fund	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Additional spaces and care fund			
Opening/Closing & Setup			
Burial Container			
Handling Fees	************************		PER DESTRUCTION FOR THE
Flower vases - Marker setting fee			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Recording and filing fee			
Sales taxes			
			9
41		Total Dra	
nb			( x )
nhe	Paid receipt num		( x )
#W53	Paid receipt num		( x )
1 hereby certify I am the		ber	Balance due
I hereby certify I am the and this is your authority to make disport that I have the right to make this author any liability on account of said authoriz	osition of remains rization and I agre- ation and interme	as above ind	Balance due
I hereby certify I am the and this is your authority to make disp that I have the right to make this author	osition of remains rization and I agre- ation and interme	as above indi to hold Mt. H	Balance due
I hereby certify I am the and this is your authority to make dispithat I have the right to make this authorizeny liability on account of said authorizes I hereby authorize the interment in lot I hold under deed.	osition of remains rization and I agree ation and interme	as above indi to hold Mt. H	Balance due
I hereby certify I am the and this is your authority to make disposed that I have the right to make this authorizany liability on account of said authorizal I hereby authorize the interment in lot I	osition of remains ization and I agre- ation and intermed	as above indi to hold Mt. H	Balance due of the above names decede cated, I certify and represe ope Cemetery harmless fro
I hereby certify I am the and this is your authority to make dispithat I have the right to make this authorizeny liability on account of said authorizes I hereby authorize the interment in lot I hold under deed.	osition of remains rization and I agree ation and intermed Signals	as above indi to hold Mt. H	Balance due of the above name: decede cated, I certify and represe ope Cemetery harmless fro
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Jerry of Berge-Roberts called, said the family had \$1200 for this burial, for what amount can we do it? I said I'd have to ask and call him back. I called the County and learned that there was actually \$1400. I told Mark at the County's office I was shocked. Very soon after this call, Jerry called back and said he was sorry, he'd made a mistake, that there was \$1400 for the burial. I told him we'd need \$1000 for the burial. He said he'd call back, but has not called back by 2:00 p.m. 5/12/95.

City of San Diego

Date 5-12-95

IIIABB 47	Funeral, date, time Mov	5/15-19:30,40
in a LINER 47  Vendeliner Church, Chapel, Graveside Del 6	Funeral, date, time P	gi Coloni al Monuary
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All Funeral cars must arrive before 3:30 p.m.	. or regular work day or an e	xtra charge or \$
will be applied and billed to undersigned		
War time veteran		U = 10
Lot 41 Grave 12 Row_	Section	_ Division/Block _ / 2
Grave space & Care Fund	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 <u>a6.0</u> 0
Additional spaces and care fund		
Opening/Closing & Setup		
Burial Container	size 400 ths	#7 <u>50.0</u>
Handling Fees		
Flower vases - Marker setting fee		
Recording and filing fee		45.0
Sales taxes		
	Total Due	386.0
near Paid	receipt number	SOURCE TO SECURITION OF THE SE
,	CONSUMER CONSUMER CONTRACTOR	Balance due
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I hereby authorize the interment in lot I hold under deed.	Address Cay	3970

SAN DIEGO

CITY OF SAN DIECO, CALIFORNIA

GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P O Box 2289

CA 92123

San Diego, California 92112
Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO PUBLIC ADMINISTRATOR 5201 A RUFFIN ROAD ACCT NU 000952

PAYMENT REF NO 4-859568 ANT P

MT PAID: 386-00

INVOICE DATE 05/22/95 PAYMENT DUE

PERIOD COVERED

FOR INFORMATION CUNCERNING YOUR BILLING CUNTACT:

JOANN WAITS

REF NO: E-12220

DEPT: PROPERTY DEPT-MT HUPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

Trupma

RUSSELL GIVNEY PA 1179691 SVCS
LOT 41 GRAVE 12 SEC 1 DIV 12 126.00
UPENING/CLUSING 163.00
LINER 50.00
RECORDING FEE 45.00

NOTICE: PLEASE REMIT PAYMENT PRUMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER. INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT CONTACT.

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMILY	)	2. DATE OF BIRTH	3. DATE OF DEATH	4. SEX
RUS	sķīj.	E.	GI	VREY	11/05/1930	05/07/1995	M
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LEWIS COL	ONIAL/BENDO	A—FUNERAL DIRECTOR OR PERSON NUCH MORTUARY NAM DIRGO, CA 9210	ACTING AS SUCH 7B.		5201-A RUFFIN R SAN DIEGO, CA 9 BA. SIGNATURE OF APPLICANT	2123	e signed
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COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

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City of San Diego

Date 5-12-95

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Signature
Address
City
Telephone



#### CITY OF SAN DIEGO, CALIFORNIA

GENERAL INVOICE

#### Make Remittance Payable to CITY TREASURER P O Box 2289

E-12221

San Diego, California 92112
Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

PAYMENT DATE 6-9-95 |
BY: CA CR IF

PAYMENT REF NO 04-833699 | ANT PAID: 386.00

INVOICE DATE

PAYMENT DUE

PERIOD COVERED
APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS

REF NO: E-12221 -
DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

MARY ADAMS PA#1179519 SERVICES
LOT 87 GRAVE 6 SEC 1 DIV 12
OPENING/CLUSING
LINER
RECORDING FEE

126.00 165.00 50.00

45.00

TOTAL DUE

JAG. DO

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT
MUST BE RECEIVED BY THE DUE DATE LISTED AROVE TO

AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE
SUBJECT TO A COLLECTION FEE OF 10% OR \$10,
WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH
ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.

ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT

DESCRIPTION ABOVEWhile-Customer Copy & Yellow-Remillance Copy No. 25404

E-12221

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	ENT-FIRST (GIVEN)	18. MIDOLE MATTLEDA	IC. LAST (FA	ADAMS	MONTH DAY, YEAR MA	DATE OF DEATH 4. SEX				
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manparey G	MIS AISES		20 i	78. CALIF. LICENSE NUMBER —IF APPLICABLE B-964	5201-A Ruffin Road San Diego CA 92123					
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COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



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# Pre-need

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 5-12-95

ina Danlele-de	oth _	Funeral, date, time		
Church, Chapel, Graveside		1		Mortuary
All Funeral cars must arrive be	fore 3:30 p.m.	of regular work day or	an extra charge o	of \$
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NAME JAMES	& LEOLA HUNTER, E-1222	E-12222 ACCT. NO.		۰	2782 41153
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#### one coupon with each remittance COUPON

DO NOT MAIL ENTIRE BOOK

ACCOUNT No. E-12222 (Pre-Need Trust)

James & Leola Hunter

3904 Florence St.

San Diego CA 92113 (Lot 5156 Div. 10)

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From: Janus - Jerly Hand	MOUNT HOPE CEMETERY 527-3400  to address: 3904 When	7-8-7 8-7 0 R TR	92113	96
Lot 5156 Grave	Row_ \$	ection	Division (	2
Invoice No.  Acct. No.  W.O. E - 1222  BALANCE DUE 474.00	NOTYALID FOR PURPOSE STATED UNLESS STAMPED TPAID" IN THIS SPACE.	of Lots 771 Opening/ 1 Closing 771 Burist 771 Containers 771 Handling Fos 771 Pleoording & 771 Misc. Foss 771	54 00 54 00 51 00 62 00 66 00 66	
Pre-Need Lot At Need On Acct Pre-need Trust Cash At Check AC-212 (New, 8-96)	BELLED BY J. Welletten	Pre-Need 530 Trust 50 Sales Tax 601 TOTAL PAID	53	00

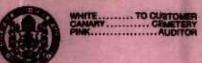
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	7-11-11	Date: 4	14 197
From James   Leola Hurter	Address: 3904 Fluxe		33.0D)
In_ Yutt Payment of P	ve Need Trust		
Lot 5156 Grave	RowSe	ection	Division /O
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 80% Sales 100 of Lois 77184 Opening/ 100 Closing 77181 Burisi 1180	
Pre-Need Lot - At Need - On Acct		Containers 77182 100 Handling Fee 77185 Recording & 100 Milec, Fees 77183 Pre-Need 63033 Trust 9022	53 (2)
Pre-need Trust P Cash VE Check   AC-212 (Rev. 5-99)	10000 BY Kann Est	Seles Tax 60101 78390 TOTAL PAID 8	53 00

	To the state of th
74	WHITE TO CUSTOMER CANARY CEMETERY PINK

PINKAUDITOR	MOUNT HOPE CEMETERY 527-3400	Dette: 3	15	1097
Prom James de Luis Hun In Part Payment of Ph	hier address: 3904 Fluxer hier 00/60 Noed Trust	ice St	San No oliers (\$ 53	050Ca 92
Lot 5156 Grave _		etion	Divis Stool	ion /O
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	20% Bales Care 80% Sales of Lots Opening/ Closing Burial	77184 — 100 77184 — 100 77181 — 100	
BALANCE DUE 103,00		Containers Hendling Fee Recording & Misc. Fees Pre-Need	77185 — 100 77185 — 100 77185 — 2	8 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 8-96)	House Kangatak	Sales Tax	9022	3 00



	ned Trust mes a decla Muster		Dollars (\$	9 open ( 53.00	19 7 / P.
Lot 5156 Grave	The State of the S	ection		Division Block	10
Invoice No	MOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CRECIT 20% Sales Care 80% Sales of Lote of Lote Opening/ Closing Buriel Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77185 — 100 77185 — 100 77185 — 100 77185 — 100 77185 — 100 77185 —	83	00
AC-212 (Rev. 5-94)	ISSUED BY 8. AMANUTES	TOTAL PAID		23	00



PINKAUDITOR	527-3400	Dete: 10-	-4	1994
FIFTY three	and 10/160 Florence	ce st. s	an Dugo	9211
InPART Payment of PIC	- ROW_S	ection	Division	10
Invoice No	HOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lote Opening/ Closing Burtal Containers Handling Fee Piecording & Misc. Fee	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77185	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check O	18SUED BY CATURA QUIGON	Pre-Need Trust Seles Tex TOTAL PAID	60022 60022 78380 5 53	00



WHITE TO CUSTOMER CANADAY CEMETERY AUDITOR

From Janes & Sede Hund	ter Address: 3904 Albren	Date: 7-5	30	92113	196
in 5156 grave	1 Row S	ection		Division Block	0
Pre-Need Lot At Need On Acct	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burtel Containers Handking Fee Recording & Misc. Fees Pre-Need Trust	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 — 83033 8022 —	83	00
Pre-need Trust Cash Check C	BSUED BY J. Middle	Sales Tax TOTAL PAID	80101 78390 \$	53	00



From James & Leola Hung	er Address: 3904 Florenc	est s	7 D. Ca.921	1990
. Fifty three and	notion -nerd trust for Ja		colors (\$ 53, 0)	Her
Lot 5/50 Grave _	RowS	oction	Division	10
Acct. No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/	87007 77184 100 77184 100	=
W.O. E-12222 BALANCE DUE 1933, (1)		Opening/ Closing Buriel Containers Handling Fee	77161 100 77182 190 77185	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	ISSUED BY CATION a Durge on	Recording & Misc. Fees Pre-Need Trust Sales Tax	100 77183 68033 9022 60101 78390	00
AC-212 (Nev. 5-04)	ISSUED BY CHILD OUT OF THE	TOTAL PAID	* 53	00

### OFFICIAL RECEIPT



CITY OF SAN DIEGO, CALIFORNIA

MOUNT HOPE CEMETERY

47249

rom knnesaleole Hunter	527-3400 Address: 3904 F101 C110	Date: 4/3	CA 9211	.19 <u>9</u> 0
FIFTY three a	na notico	Dol	llars (\$ 53.1	
ot 5/5/0 Grave	Row S	ection	Division	10
Pre-Need Lot   At Need   On Acct   Pre-need Trust   Cash   Check	MOTVALIDFOR PURPOSE STATEDUNLESS STAMPED "PAID" IN THIS SPACE.	20% Sales Care 80% Sales of Lots Opening/ Closing Buriel Containers Handling Fee Recording & Misc. Fees	67007 77184 100 77184 100 77181 100 77182 100 77182 100 77183 63033 9022 60101 75380	000000000000000000000000000000000000000

### OFFICIAL RECEIPT 47137 CITY OF BAN DIEGO, CALIFORNIA WHITE ...... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY PINK.....AUDITOR Division | Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT 67007 Invoice No. 20% Sales Care 77184 80% Sales of Lots Acct. No. Opening/ Closing 100 Burlal 100 Containers 77182 BALANCE DUE 100 Handling Fee 77185 Recording & 100 Misc. Fees 77183 50 Pre-Need Lot . At Need . On Acct Pre-Need 53033 9022 Truet Pre-need Trust Sales Tax 60101 78390 TOTAL PAID AC-212 (Rev. 5-94)



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

2 2 3	Follars (\$	hunt	èn
		Division 1	0
lon	-	_ Block	_
CREDIT	67007	was the	-
20% Sales Care	77184 -		-
80% Sales of Lots	77184 -		10-
SECURITION OF THE PARTY OF THE	100	and the second	-
Opening/ Closing	77181 -		_
Buriel	100	Contract of	
Containers	77182 —		
Handling Fee	77185 —		200
Recording & Misc. Fees	100		77 - 0
	77183 -	27	
Pre-Need	63033	55	00
Truet Sales Tax	80101		
Seles 183	78390 -		

In fact Payment of Sa	100 herd trust for	Dollars	1 53.00 Hu	ter
Lot 5156 Grave	Row8e	ction	Block	10
Invoice No	MOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 77184 80% Sales 100 of Lots 77184 Opening/ 100 Closing 77181 Burial 100 Containers 77185 Handling Fee 77185 Recording & 100 Misc. Fees 77185		
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	0 11 110	Pre-Need 83033 Truet 9022 Seles Tax 80101 78390	5	3 00
IC-212 (Rev. 5-94)	ISSUED BY J. Muhilla	TOTAL PAID	_ 5	3 00

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From: Sementury  Tifty  In Part Payment of	ter Address: 3904 Flore	Date: L	ollars (\$ 5	77 9	96
Lot 5/56 Grave	Row Se	etion		vision	10
Invoice No	MOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees	57007 77184 100 77184 100 77181 100 77182 100 77185 100 77185	50	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (New, 5-94)	18SUED Weisner	Pre-Need Trust Seles Tax TOTAL PAID	63033 9022 60101 76390	53	00

MOUNT HODE CEMETERY

PINKAUDITOR	527-3400			
From James Hu	nter 30904 Flo	rence st	SD 921	95
Fifty-Phree-	- need Dru	st Dollars	153.00	),
James & Lool	Aunter som so	ection	Division /	0
invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 77184 80% Sales 100 of Lots 77184 Opening/ 100 Closing 77181 Burial 100 Containers 77182 Handling Fee 77185 Recording & 100 Misc. Fees 77185		
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Check	ISSUED BY . Weiner	Pre-Need 83033 Trust 9022 Sales Tax 60101 78390 TOTAL PAID	25	00

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	527-3400	Name of the last o	11-6	95
From James Hunte	andress: 3904 Flore	ence St	SD 92	113
Fifty-9h	- 10 · · · +	Do	llars (\$ .53.0	40,
In Payment of Payment of	Po sla then	tar		
Lot 5/56 Grave	RowSe	ction	Division Stock	10
Invoice No.	HOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	20% Sales Care 80% Sales	57007 77184 100	
Acct. No. P-/2222		Opening/	77184 100 77181	-
BALANCE DUE 951.00		Containers	77182	
Pre-Need Lot At Need On Acct		Recording & Misc. Fees Pre-Need Trust	100 77188 63033 8022 5	300
Pre-need Trust Cash Check C	Q.(1) 20 anno	Sales Tax	8022 80101 76390	100
AC-212 (Rev. 6-91)	ISSUED BY J' COLONOL.	TOTAL PAID	州 5	500

## OFFICIAL RECEIPT

CITY OF SAN DIEGO, CALIFORNIA

46672

	527-3400		1	,	-
From Janus Hunter	- Address: 39047 love	Date:	SD	921	1995
. 7 ifty-three			Dollars (\$	53.00	)
in part Payment of 10.	need treat				-
Lot 5156 Grave _	RowSe	ection	Q A	Division Block	10
Acct. No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing	67007 77184 — 100 77184 — 100 77181 —		
BALANCE DUE \$ 1001,00		Burle) Containers Handling Fee Recording & Miso. Fees	100 77182 — 100 77185 — 100 77183 —	F 2	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	OPanol 1	Pre-Need Trust Sales Tax	63033 9022 80101 78390	53	0
AC-212 (Rev. 5-94)	ISSUED BY	TOTAL PAID	The state of the s	53	00

### OFFICIAL RECEIPT

WHITE ..... TO CUSTOMER CANARY ..... CEMETERY

### CITY OF SAN DIEGO, CALIFORNIA

46500

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PINKAUDITOR	527-3400	Dete:	1/7		15
From Standard Payment of Standard Stand	- need for		SD 9 3	3.00 4 Le	- ol
Lot 5156 Grave	(Priest)	ction		Division /O	
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Buriel Containers	67007 77184 100 77184 100 77181 100 77182 100 77185		
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check  AC-212 (Rev. 5-94)	ISSUED BY J. Weines	Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	77183 77183 63033 9022 60101 78390	53 0	0



			Date:	6-5		19 95
From James Hunter	Address:	3904	Florence	51	5.01	A 9211
fifty three				Dollars (\$	53.	00,
n bor F Payment of	pre-	need	trust	-		
for James	and	Leola	Hunder			
ot 5156 Grave _		Row	Section		Division Block	10
Acct, No	ACT VALID FOR PURPLY PAID IN THIS SPACE	DSE STATEDUMLERS STA	20% Sales Car 20% Sales of Lois Opening/ Closing Burisi Containers Handling Fee Recording & Misc. Fees Pre-Need	100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 — 83033	53	03
Pre-need Trust Cash Check C	SSUED BY V.	Baloblu	Trust Sales Tex TOTAL PAID	9022 — 80101 78390 — \$	53	00

# WHITE TO CLISTOMER CANARY CEMETERY PINK. AUDITOR

		Date:5	-/3		1995
	ER Address: 3904 Flance		119	931	13
Three hundred			ollars (\$	300.	(00)
in Cost Payment of POS	need trict				
		-70 1381			
Lot 5156 Grave	RowSe	etion		Division Block	0
Invoice No.	MOTIVALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 20% Sales Care	67007		
Acct, No.		80% Sales of Lots	100 77184		
w.o. E-12222	是 医牙骨骨炎 医毒性	Opening/ Closing Buriel	77181 — 100		
BALANCE DUE \$ 12 66.00	<b>新作用</b>	Containers Handling Fee	77182 100 77185	2000	
		Recording &	100		
Pre-Need Lot At Need On Acct	00	Pre-Need Trust	63033 9022	300	60
Pre-need Trust 10 Cash 10 Check	1880160 BY Rouch	Sales Tex TOTAL PAID	60101 78390 —	300	_
AC-212 (Rev. 5-94)	The state of the s	TOTAL PAID		300	60

WHITE TO CUSTOMER CAMARY CEMETERY PINK AUDITOR

From ames Hunter  7 - ity - Hhr  In part Payment of pro	ee a no/100 -	Date: C	7- 5 L, S oliars (\$	D 9- 53.0	1.95 2113 200,
Lot 5/56 Grave _	Row Se	ection		Division Block	10
Invoice No.  Acct. No.  E-1222  BALANCE DUE  Pre-Need Lot	HOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE.	CREDIT 20% Sales Care 20% Sales of Lots Opening/ Closing Burlat Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 — 63033 — 9022 — 80101	53	00
AC-212 (Rev. 5-94)	ISSUED BY Cluck	TOTAL PAID	78390 —	53	00

AC-212 (Play, 5-94)

TOTAL PAID



	527-3400	Date: 13-	9	, 15	96
From: James Hunter	Address 3704 Florence	山北	m Diego	921	13
the Payment of	Pre hed Trust	0	ollars (\$ 53	.00	)
Lot 5156 Grave	RowSe	ciion	Divi		2
Pre-Need Lot At Need On Acct Pre-need Trust Cash E Check	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE.	CREDIT 20% Sales Care 20% Sales of Lote Cosning/ Closing Burist Containers Handling Fee Pecording & Misc. Fees Pre-Meed Trust Sales Tax	57007 77184 100 77184 100 77181 100 77182 100 77185 100 77183 63033 81022 80101	33	00
AC-212 (Rev. 5-00)	ISSUED BY J. Mulilla	TOTAL PAID	80101 78360	53	00

# OFFICIAL RECEIPT

CITY OF SAN DIEGO, CALIFORNIA

WHITE
P194K

	827-3400	E.	- 5	97
From James Hunter	Address: 3904 F	Florence St.	San Diego	92113
Forty Seven a	na horio		Dollars (\$ 47.10	
In Tull Payment of Tre	s and Leola	Hunter		
Lot 5150 Grave	Row	Section_	Division Block	10
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS PAID IN THIS SPACE.	20% Sales Care 80% Sales of Lots Opening/ Closing Burtel Containers Hendling Fee Recording & Miles. Fees	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77185 100 77185 100 77185	00
Pre-need Trust X Cash X Check C	Lasues & Catina Jun	Sales YEX TOTAL PAID	90101	00

# MT. HOPE CEMETERY

# INTERMENT ORDER

City of San Diego

Date 5-12-95

All Funeral cars must arrive before 3:30 p.m. of regular work day of an extra charge of \$150 will be applied and billed to undersigned.  War time veteran  Lot 10.5 Grave 2 Row Section 3 Division/Bleek 10 To Section 3	runeral, date	time FRI	5/19 11	00
will be applied and billed to undersigned.  War time veteran  Lot 10.5 Grave 2 Row Section 3 Division/Bleek 15  Grave space & Care Fund 79.5  Additional spaces and care fund 90.5  Opening/Closing & Setup 90.5  Burial Container 190.5  Handling Fees 145.  Flower vases – Marker setting fee 90.5  Recording and filing fee 90.5  Sales taxes 13.  Paid receipt number 40.41 39.0  Paid receipt number 40.41 39.0  I hereby certify I am the 10.4 Fund April 90.0  Balance due 8117  I hereby certify I am the 10.4 Fund April 90.0  I the above named dece and this is your authority to make disposition of remains as above indicated, I certify and represents that I have the right to make this authorization and I agree to hold ML hope Cermetery harmless any liability on account of said authorization and interment 10.0  I hereby authorize the interment in lot I hold under deed.  Senature of recorded holds of deed 9.41  Senature of recorded holds of deed 9.41  Senature of recorded holds of deed 9.41	side Church & granes	dea Bus	ial	Mortuary
War time veteran	ırrive before 3:30 p.m. & regular wo	rk day dran extra	a charge of \$	150.0
Corave space & Care Fund	ed to undersigned.			
Additional spaces and care fund  Opening/Closing & Setup  Opening/Closing & Setup  Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filing fee  Sales taxes  Paid receipt number  Flower and this is your authority to make disposition of remains as above indicated. I certify and repretated his is your authority to make this authorization and I agree to hold Mi. Hope Cernetery harmless any liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.				
Additional spaces and care fund  Opening/Closing & Setup  Burial Container  Handling Fees  Flower vases – Marker setting fee  Recording and filing fee  Sales taxes  A Burial 90.00  Paid receipt number  Paid receipt number  Balance due \$117  Balance due \$117  Balance due \$117  I hereby certify i am the that is authorization and interment that I have the right to make this authorization and interment.  I hereby authorize the interment in lot I hold under deed.		on_3_ D		ia
Burial Container  Handling Fees  Hecording and filing fee  Recording and filing fee  Hecording and filing fee  Handling Fees  Harker setting fee  Hecording and filing fee  Handling Fees  Handling Fees  Harker setting fee  Handling Fees  Harker setting fee  Handling Fees  Hand	und		7	45.0
Burial Container.  Handling Fees  Hecording and filing fee  Hecording	care fund			_
Burial Container.  Handling Fees  Flower vases - Marker setting fee  Recording and filling fee  Sales taxes  Flower vases - Marker setting fee  Recording and filling fee  Flower vases - Marker setting fee  Recording and filling fee  Flower vases - Marker setting fee  Flower vases - Marker settin	up		3	75.0
Handling Fees  Flower vases - Marker setting fee  Recording and filling fee  Sales taxes  Flower vases - Marker setting fee  Recording and filling fee  Flower vases - Marker setting fee  Paid receipt number 45 34 39 0  Balance due 8117  Balance due 8117  Balance due 8117  Balance due 8117  I hereby certify I am the Sunday of the above named dece and this is your authority to make disposition of remains as above indicated, I certify and representation in the same of the above named dece and this is your authority to make disposition and I agree to hold Mt. Hope Cernetery harmless any liability on account of sald authorization and interment.  Thereby authorize the interment in lot I hold under deed.				
Recording and filing fee				
Sales taxes	setting fee			
hereby certify I am the Sundian of the above named dece and this is your authority to make disposition of remains as above Indicated. I certify and repretent that I have the right to make this authorization and I agree to hold Mt. Hope Cernetery harmless any liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.  Senature of recorded holder of deed.				45.0
I hereby certify i am the Canadian of the above named dece and this is your authority to make disposition of remains as above indicated. I certify and represent that I have the right to make this authorization and I agree to hold Mt. Hope Cernetery harmless any liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Separature of recorded holise of deed.				13.3
I hereby certify i am the Canadian of the above named dece and this is your authority to make disposition of remains as above indicated. I certify and represent that I have the right to make this authorization and I agree to hold Mt. Hope Cernetery harmless any liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Separature of recorded holise of deed.	00.0	Total Due		63:
I hereby certify i am the Canadian of the above named dece and this is your authority to make disposition of remains as above indicated. I certify and represent that I have the right to make this authorization and I agree to hold Mt. Hope Cernetery harmless any liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Separature of recorded holise of deed.	Paid receipt numb			90.6
I hereby certify i am the Canadian of the above named dece and this is your authority to make disposition of remains as above indicated. I certify and represent that I have the right to make this authorization and I agree to hold Mt. Hope Cernetery harmless any liability on account of said authorization and interment.  I hereby authorize the interment in lot I hold under deed.  Separature of recorded holise of deed.	110	. Balt	ance due 🐉 /	173.
hold under deed.  X3146 Clay St.  Adams  X814 DINCO 9211	ity to make disposition of remains a make this authorization and I agree	of the	above name	d deceder
	interment in lot I	46 Clay	fil	2//2
Telephone	** X 874	th Dies	6	ZIP Cod

# MT. HOPE CEMETERY

W.O.# E-12223

# NOTE

\$ 1173.30	San Diego, California	19 may 1995
Thirty days after date for value received, the un		
with interest from	19 JUNE 1995	on the unpaid principal
at the rate of 12 percent per annum, payable	on demand.	
Should this note not be paid when due, it is accrue at the rate indicated above. Principal a will be liable and consents to renewals, repla maturity, and waives presentment, demand a person who signs this note agrees that reconcentained herein. If any action be instituted of may fix as attorney's fees.	nd interest are payable in lawful m cements and extensions of time f nd protest and the right to assert urse may be held against his/her	oney of the United States. The maker or payment hereof before, at or after any statute of limitations. A married separate property for any obligation
Part II, Chapter I, Article 2, Paragra authorizes the removal of any remains	무슨 사람이 그 아무슨 그들이 다른 사람이 얼마나 아내는 아이를 하는 것이 되었다. 그리고 아이를 가지 않는데 아이를 되었다.	[2] 1 - [2] 1
PRINT NAME X Sheli- Cample	CLL SIGNATURE X	heli Caphero
ADDRESS X.3146 (164 (	106	
CALIFORNIA DRIVER LICENSE NUMBER 🗡 / 🗸	ONE SSN #	X565-72-1326



From CA Burial	Address: 5880 El Caj		50	9211	95 5 2
Three kundred nin part payment or Inte		un In	ollars (\$	390.0	
ot 105 Grave	RowS	ection 3	1	Division /	2
M.O. E-/323 BALANCE DUE #1173.30	NOT YALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Cars 80% Sales of Lots Opening/ Closing Burisl Containers Handling Fee Recording & Misc, Fees	87007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 —	390	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Start AC212 (New 544)	ISSUED BY Rauch	Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 — 60101 78390 —	390	00

# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS 17

LISE BLACK INK ONLY-MAKE NO EPASURES WHITEOUTS OR OTHER ALTERATIONS

		OF DEVOK HAY ONE!	MARKE NO ENAGONES,	MINICODIO ON O	THEN THE PENTITIONS
. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMILY		2. DATE OF BIRTH 3. DATE OF DEATH 4. SE
Deshawn		Maurice	Smith		1270471977 0571271995 M
CITY OF DEATH		W			B. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE
San Diego			San Die	go	Sheila Campbell-Legal Guardian
a construction of the cons		ia furial chap San Diego, CA		CALIF, LICENSE NUMBER —IF APPLICABLE  TD 1357	3146 Clay Avenue San Diego, CA 92113 8A SIGNATURE OF APPLICANT POUR LINE POINT, 8B. DATE SIGNE
"ACKNOWLEDGMENT OF A		acknowledge as applicant that the grop 0375 of the Health and Salety Code, and			My Cachese 105/18/199
PERMIT UTHORIZATION OF OCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	UED IN ACCORDANCE WITH F FORMA HEALTH AND SAFETY TY FOR THE DISPOSITION SPE TO MIGHT OF REPORT, OUTSIDE OF CALL	CODE	98. DATE PERMIT 05/18/19 Kyle Chas	
CONTRACTOR AND COMPANY OF COLUMN TWO	Vital Rec	EGISTRAR OF DISTRICT OF ED IN CALIFORNIA COTAS-F.O. BOX CA 92186-522	85222	ADDRESS OF REGISTRAR	OF DISTRICT OF DISPOSITION— IF IN ANOTHER DISTRICT IN CALIFORNIA
- MANBERS NEED	OSITION(S) CHECK A	AND THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO I			FOR CORONER'S USE ONLY
B. CREMATION	11A, NAME AND A	DDRESS OF CALIFORNIA C	— M. Massim (15.5)		L DISPOSITION PENDING—REMAINS LOCATED (Name and Address)  D   11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL
BURIAL	Mount No	ope Cemetery, go, CA		5/19/95	Wait
CREMATION	12A. NAME AND A	poress of california ci	rematory Led	126. DATE CREMAT	ED 12C. SIGNATURE OF PERSON IN CHARGE OF CREMATION
SCIENTIFIC	13A. NAME AND A	DORESS OF CALIFORNIA F/	ACILITY RECEIVING REMAINS	138. DATE RECEIV	VED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY
-, TRANSIT		DORESS IN RECEIVING STA CREMATED REMAINS ARE		14B. DATE SHIPPI	D 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER
	THE RESERVE OF THE PARTY OF THE		OR OTHER DESCRIPTION SUF	15B, DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN 150. LICENSE NUMBER CHARGE OF DISPOSITION OF CREMATED RE-

COPY 2

# MT. HOPE CEMETERY

# INTERMENT ORDER

City of San Diego

Date 5-12-95

Vous are hereby suthorized and instructed as	ubject to your rules and regulations, to inter the remains
DARLEC -	10 PA 1177400
ina Limer.	Funeral, date, time TUE 5/16 HTT5
Church, Chapel, Graveside delines	only Maner Mortuary.
All Funeral cars must arrive before 3:30 p.m.	O O O JOHN
will be applied and billed to undersigned.	PROTESTA WAS AN PERSON OF THE STATE OF THE S
/ War time veteran	
Lot 93 Grave 6 Row_	Section     Division/Block   12
Grave space & Care Fund	136.00
Additional spaces and care fund	
* Opening/Closing & Setup	165.∞
Burial Container	50.00
Handling Fees	
Flower vases - Marker setting fee	<u> </u>
Recording and filing fee	45.00
Sales taxes	
37	Total Due 386.00
Paid	receipt number
	Balance due
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization	of the above named decedent n of remains as above indicated. I certify and represent n and I agree to hold ML Hope Cemetery harmless from and interment.
I hereby authorize the interment in lot I hold under deed.	Signature
noo shack sees.	Address
Signature of recorded holiter of deed	City Zip Code
	Telephone
- 12224	Invoice # 254036
Work Order # E	Acct # 000952
PY-593 (Rev. 8-92)	

E-12220

# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

20 USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS 1A NAME OF DECEDENT-FIRST (GIVEN) IB. MIDDLE IG LAST FAMEY 2. DATE OF BIRTH 3. DATE OF DEATH 4. SEX 0470871974 Robles Julio Cesar М SA. CITY OF DEATH 58. COUNTY OF DEATH-OUTSIDE CALIF. 8. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE emen statean Diego Public Administrator - L. Jamme San Diego 7A. TYPED NAME AND ADDRESS OF CALIFORNIA-FUNERAL DIRECTOR OR PERSON ACTING AS SUCH! 78. CALIF. LICENSE NUMBER 5201-A Ruffin Rd. -IF APPLICABLE Mayer Mortuary San Diego, CA 92123 2859 Adams AVe. San Diego, CA 92116 1424 BA. SIGNATURE OF APPLICANT Form taking parties 88. DATE SIGNED Thereby accordings as applicant that the proposes disposition stated hower to one of the dispositions authorized is Section 19376 of the Health and Safety Code, and was authorized paramet to Section 7180 of the Health and Safety Code. 05/15/1995 ACCURONS FOCUSERT OF APPLICANT THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI- 9A. AMOUNT OF FEE PAID 9B. DATE PERMIT ISSUED 9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT PERMIT SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE 9506566 05/15/1995 AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED AUTHORIZATION OF IN THUS PERMIT. 7.00 John Mayer MOTE: THAT PERSON GRES NO RECEIT OF DESPOSAL CHRISDE OF CALIFORNIA LOCAL REGISTRAR 90. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH-9E. ADDRESS OF REGISTRAR OF DISTRICT OF DISPOSITION-ANY CHANGE IN DISPOS P.O.BOX 85222 IF DISPOSITION IS TO OCCUR IN ANOTHER DISTRICT IN CAUFORNIA TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION. San Diego, CA 92186-5222 THORIZED DISPOSITION(S) CHECK APPLICABLE ITEMS FOR CORONER'S USE ONLY A BURIAL (INCLUDES ENTOMEMENT) E. TEMPORARY ENVAULTMENT I I DISPOSITION PENDING-REMAINS LOCATED AT (Name and Address) B. CREMATION DISINTERMENT C. DISPOSITION OF CREMATED REMAINS OTHER SHIP IN TO CALIFORNIA THAN BY A CEMETERY D. SCIENTIFIC USE H. TRANSIT TO OUTSIDE OF CALIFORNIA 11A. NAME AND ADDRESS OF CALIFORNIA CEMETERY 11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL 1 118. DATE BURIED Mt. Hope Cemetery BURIAL 3751 Market St. San Diego, CA 92102 TEM8 12C. SHENATURE OF PERSON IN CHARGE OF CREMATION 12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY 128 DATE CREMATED CREMATION APPLICABLE -13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS 138. DATE RECEIVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY SCIENTIFIC USE 14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE 14B. DATE SHIPPED COMPLETE OF PLACING WITH THE CARRIER REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED TRANSIT 15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUF-158. DATE OF 15C. SIGNATURE OF PERSON IN 15D. LICENSE MUMBER SCATTERING AT SEA OF CREMATED RE-CHARGE OF DISPOSITION FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT OF DISPOSITION DISPOSITION MAINS DISPOSER DISPOSITION OTHER -W APPLICABLE THAN IN A CEMETER

COPY . Q

GISTRAR MAY DESTROY ANY ORIGINAL OR DUPLICATE PERMIT AFTER ONE YEAR FROM ISSUE DATE.

COPY 1 OF THE PERMIT ACCOMPANIES THE REMAINS TO THE STATED PLACE OF DISPOSITION. THE PERSON IN CHARGE OF DISPOSITION IS RESPONSIBLE FOR COMPLETING AND FORWARDING THE PERMIT WITHIN 10 DAYS OF DISPOSITION TO THE REGISTRAR OF THE DISTRICT IN WHICH DISPOSITION OCCURRED OR THE DISTRICT NEAREST THE POINT WHERE THE CREMATED REMAINS WERE SCATTERED AT SEA. THE LOCAL



# CITY OF SAN DIEGO, CALIFORNIA GENERAL INVOICE

Make Remittance Payable to CITY TREASURER

P O Box 2289 San Diego, California 92112

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

PAYMENT DATE 6 7 75 BY: CA (CK) IF

T PAID: 386.00

-122

INVOICE DATE

PAYMENT DUE

PERIOD COMMED

JOANN WALTS
DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3409;

DESCRIPTION OF CHARGES

AMOUNT

JULID ROBLES PA #LL77400 SVCS LOT 93 GRAVE 6 SEC 1 DIV 12 OPENING/CLUSING LINER RECORDING FEE

126.00 165.00 50.00

45.00

TOTAL DUE

386.00

NOTICE: PLEASE REMIT PAYMENT PRUMPTLY. PAYMENT

MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO

AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE

SUBJECT TO A COLLECTION FEE OF 10% OR \$10,

WHICHEVER IS GREATER, INTEREST OF 1% PER MUNTH

ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.

ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT

ACELSALIED ABOVEWHITE Customer Copy \* Yellow-Remittance Edity NO. 254036

06/09/95 CK 04-833699 000072 000072 254036 05/23/95 000952 COUNTY OF SAN DIEGO
100 072
100 072
100 072 386.00 165.00 50.00 45.00 386.00 PAID IN FULL 77181 77182 77183

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date

ol	Mo	TRRINO	RICCI	A.	PA	1178717
ina	Linen		Funeral, date, tim	•	- 3	
Church, C	hapel, Graveside	Delivery	ouly .	Claren	cont	Mortuary.
All Funera	l cars must arrive t		6			
will be app	olied and billed to u	indersigned	SE CHEMICAL SAN LICENSE DE LOS T			
War time v	veteran	¥i				
Lot	Grave	Row	Section _	Dh	dslon/Blo	ock
Grave spa	ice & Care Fund					
Additional	spaces and care f	und		<b></b>		
Opening/C	Josing & Setup		<u>, , , , , , , , , , , , , , , , , , , </u>			
Burial Con	stainer	2016	1 <sub>0</sub> 3'	/		
Handling I	Fees\	10'	1111			
Flower vas	/ nittee settin — ses	Ada le				
Recording	and filing fee	409				
Sales taxe	s	SC-				
MEINE		•6	864	otal Due		
ew ard		Dale :	receipt number			
OWW		Paul	ecerpt number			
				Bala	nce due	
and this is that I have	ertify I am the	this authorization	of remains as ab and I agree to ho	ove indicated	. I certify	amed decedent and represent harmless from
I hereby a hold under	uthorize the interm	ent in lot 1	Signature			
			Address			
Signature of rec	parded holder of deed	•	CHy			Zip Code
			Telephone			
	_ 19	225	Invoice #_			
Work Orde	10 single-ph/9000	220	Acct #			-
PY-593 (Rev.					- 8	

# MT. HOPE CEMETERY

# INTERMENT ORDER

PRE-NEED City of San Diego

ina T.S. Vault	Funeral o	iste time		
Vault/Liver				
All Funeral cars must arrive before 3:3				ANTON POLICE
will be applied and billed to undersigne	STATES AND THE SALE WAS HARD	0.665/0.505/0.505		1
War time veteran _ NO	350			
Lot 2150 Grave Ro		ection	Division Block	10
Grave space & Care Fund			1	95,0
Additional spaces and care fund			39893 245000000000000000000000000000000000000	1
Opening/Closing & Setup			CONTRACTOR OF THE PARTY OF THE	175,0
- N - 1252 - 1251 - 1251 - 1252 - 125				
Burial Container				25.0
Handling Fees			L	ABIG
Flower vases - Marker setting fee				
Recording and filing fee				45
Sales taxes				117.3
		Total Di	ı1 J	67.
	Paid receipt nu		-	4107.
	Paio receipt nu	moer	Balance due	100.5
			March Company Company	
hereby certify I am the and this is your authority to make disp	socition of comai	ne se aboue inc	of the above fame	ed deceders
that I have the right to make this autho	rization and I ag	ree to hold ML h	lope Cemetery ha	rmless from
any liability on account of said authori:	zation and intern	ient		)
	4		- // /	/
			74 / 7	-
I hereby authorize the interment in lot hold under deed.	l Sign	abure \	11 1	
	Sign ✓	- )	()×	
	— ¥		03	J
hold under deed.	Sign ✓		00	P 20 C00
hold under deed.	+ Add		177	N Zip Coq
hold under deed.	Sagn		977	<b>ل</b> *
hold under deed.	Sagn		9 2000 9 2000	<b>₩</b> zp Ce

# MT, HOPE CEMETERY

# INTERMENT ORDER

City of San Diego

Date 5-15-95

d	Wilcox	, GLE	N 7	HURS 5	5/18/95
na Double	Depth Ca	Funeral, date, 1	me <del>To</del>	105 TH	1001
Church, Chapel, Graveside	chap+	6.5	Lat	eside /s	a what Mortus
All Funeral cars must arrive	before 3:30 p.m.	of regular work	day or ar		12 - 500
will be applied and billed to			0.0000000000000000000000000000000000000	PAGEORIA VICTORIA SA	
War time veteranYE,	STATE OF STA	1000000			
ot 1844 Grave	Bow	Section	<b>C</b>	Division/t	10
	15970200				095
Grave space & Care Fund	200200000000000000000000000000000000000	2000/00/00/00/2012/2012/2012/2012/2012/	SECTION AND ADDRESS OF	27.7308.01956800401108	- 715
Additional spaces and care Opening/Closing & Setup	tund	7.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Burial Container	***************************************				380.0
landling Fees					320.0
lower vases – Marker sett	ing fee	que gi	elv.		23.7
Recording and filing fee				,	45.0
ales taxes				***************************************	26.60
				Je	MILE S
	Paid	eceipt number	MAST	ER CARD	2165.3
	(Translation	000000000000000000000000000000000000000		Balance du	10
hereby certify I am the hand this is your authority to hat I have the right to make any liability on account of s	make disposition this authorization	of remains as	above inc	of the above licated. I cert	named deced
hereby authorize the inter- old under deed.	ment in lot l	Bignature ¥ 9	233	MARA	IDA B
ignature of recorded holder of geed		City X (	619-	449-5	784 30
Vork Order # E 1	2227	Invoice #			

13227

# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	NT—FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMI	LY)	2. DATE OF		E OF DEATH 4, SEX
GLEN		LEE	WILC		6171671		.2/1995 M
SA. CITY OF DEATH			58. COUNTY OF ENTER STATE	DEATH—OUTSIDE CALIF.,	6. NAME, RELATIONSHIP OF INFORMANT	, FULL MAILING AL	DDRESS AND ZIP CODE
SANTEE			SAN	DIEGO	CARRIE HA	VERTY (D	AUGHTER)
	DORESS OF CALIFORN SANTER F.C.	IA—FUNERAL DIRECTOR OR PER	ISON ACTING AS SUCH 7	IF APPLICABLE	SANTEE, C		
9840 MAI	NE AVE. L	KESIDE, CA.	î	FD-997	84 SHATURE OF APR	LICANT—Person taking	permit 88. DATE SIGNED
ACKNOWLEDGMENT OF A	Section 10	acknowledge as applicant that the propose 1376 of the Health and Safety Code, and was	s authorized pursuant to Section 71		Ilas Mo	ustin	05/16/199
PERMIT AUTHORIZATION OF	SIONS OF THE CALIF	UED IN ACCORDANCE WITH PR FORMA HEALTH AND SAFETY O TY FOR THE DISPOSITION SPECIE	ODE FIED	BB. DATE PERM	and the second control of the second control		ISTRAR ISSUING PERMIT
LOCAL REGISTRAR		O MENT OF DEPOSAL OUTSIDE OF CALIFO	\$7.00	05/18/1	995		
ANY CHANGE IN DISPOSI- EQUIDES A NEW TO SHOW FINAL SPOSITION.	P.O. BOX  SAM DIEGO	85222	1	E. ADDRESS OF REGISTRA IF DISPOSITION IS TO OC	R OF DISTRICT OF DISPO CUR IN ANOTHER DISTRICT	TO SECURE OF THE SECURITY OF T	
10. AUTHORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS			FO	R CORONER'S	USE ONLY
B. CREMATION		AINS OTHER	F. DISINTERMEN G. SHIP IN TO C	Т	☐ (Nan	OSITION PENDING ne and Address)	REMAINS LOCATED A
BURIAL	MOUNT I	DORESS OF CALIFORNIA CEN BOPE CEMETERY		5/19/06	ED 11C. SIGNATURE	OF PERSON IN C	CHARGE OF BURIAL
			san <b>sen</b> go, ca		- Juli	111	
CREMATION	12A. NAME AND A	DORESS OF CALIFORNIA CRE	BMATORY	12B. DATE CREM	ATED 120 SIGNATURE	OF PERSON IN CI	HARGE OF CREMATION
SCIENTIFIC	13A. NAME AND AL	DORESS OF CALIFORNIA FAC	ILITY RECEIVING REMAI	NS 13B. DATE REC	EIVED 13C. SIGNATURE	OF PERSON IN C	CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING STATE CREMATED REMAINS ARE TO		14B. DATE SHIP		IND SIGNATURE O B WITH THE CARR	F PERSON IN CHARGE INER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		vrest point on shoreline, o entify final place and ca <u>d</u>		UF- 15B. DATE OF DISPOSITIO	15C. SIGNATURE CHARGE OF	OF PERSON IN DISPOSITION	150. LICENSE NUMBER OF CREMATED RE- MAINS DISPOSER —IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 5-15-95

	0643 PAL180142	-8
nalmes_	Funeral, date, time MON 5/22/95	DIA
Church, Chapel, Graveside	- idumphrey	_ Mortuar
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge of \$	
will be applied and billed to undersigned	en 17 euro 24 f. 18 europago <u>- 3 men 3 europ</u> ago - 18 europago - 18 eur	
War time veteran		
.ot <u>149</u> Grave <u>5</u> Row_	Section Division/Block	12
Grave space & Care Fund		126.00
Additional spaces and care fund		
Opening/Closing & Setup		165,00
Burial Container		50.00
Handling Fees		
Flower vases - Marker setting fee		
Recording and filing fee		45.00
Sales taxes		
X 15 00	Total Due	386_00
Paid	receipt number	
zorr	Balance due	
I hereby certify I am the	of the above name	d deceder
and this is your authority to make disposition	n of remains as above indicated. I certify an in and I agree to hold Mt. Hope Cemetery ha	d represer
that I have the right to make this authorization any liability on account of said authorization		
	Signature	
any liability on account of said authorization  I hereby authorize the interment in lot I		
any liability on account of said authorization thereby authorize the interment in lot i	Signature	Zp Co
any liability on account of said authorization hereby authorize the interment in lot I hold under deed.	Signature Addresa	<b>Ж</b> р Со
any liability on account of said authorization hereby authorize the interment in lot I hold under deed.	Signature Address City	Zip Co

CITY OF SAN DIEGO, CALIFORNIA

GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P O Box 2289

E-12228

San Diego, California 92112, Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

PAYMENT DATE 7-17-95

PAYMENT REF NO 04-859568 | AMT PALD: 386.00

INVOICE DATE

PAYMENT DUE

PERIOD COVERED

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS REF NO: E-12228

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

TRUDMA

JOHN DOE PA#1180142 SERVICES LOT 149 GRAVE 5 SEC 1 DIV 12 OPENING/CLOSING LINER

145.00

LINER RECORDING FEE 50.00

NOTICE: PLEASE REMIT PAYMENT PRUMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10, WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT LISTED ABOVE White - Customer Copy 's Yellow - Remittance Loby NO. 25405.

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS UNIX

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

	JOHN	FIRST (GIVEN)	1B. MIDDLE	•	IC. LAST (FA	DOE DOE	Į,	2. DATE OF BIRTH MONTH, DAY, YEAR UNKNOWN	MPOON!	OF DEATH Y. YEAR 1995	4. SEX
5A. CITY OF	DEATH		Jasul	ic.	5B. COUNTY O	F DEATH—OUTSIDE CALIF., ATE San Diego	OF INF	RELATIONSHIP, FULL A ORMANT CCA BATT-Pu			
CL STATE OF STATE	rey Chu				ACTING AS SUCH	7B. CALIF. LICENSE NUMBER —IF APPLICABLE  P-964	5201	-A Ruffin R			
78.5						ose of the dispositions authorized by	BA SIGNA	TURE OF APPLICANT	Person balak per	76 12 20 20	
ACKNOWLEDG	CHENT OF APPLIC	Avri Section 10	1376 of the Health and Sa	dely Code, and was authori	ized pursuant to Section	7100 of the Health and Safety Code.	Tu	aun ex	ing		6/1995
PERMI AUTHORIZATI LOCAL REGI	ION OF IN	ONS OF THE CALIF D IS THE AUTHORY THIS PERMIT.	FORMA HEALTH AN TY FOR THE DISPO	8ITION SPECIFIED	\$7.00	5 FEE PAID 98. DATE PERM 0 5 / 17		C. SIGNATURE OF LC	STATE OF	TBAR ISSUIN	PERMIT
ANY CHANGE IN TION REQUIRES PERMIT TO SHO DISPOSITIO	S A NEW OW FINAL		ED IN CALIFORNIA	STRICT OF DEATH .O. Box 85 186-5222		9E. ADDRESS OF REGISTRAL IF DISPOSITION IS TO OCC			XI-BA		
HORIZ	ZED DISPOSI	TION(S) CHECK A	PPLICABLE ITEMS	8)	10.			FOR COR	ONER'S	USE ONLY	0
B. CREE	MATION	GREMATED REM	AINS OTHER		F. DISINTERM G. SHIP IN TO	The file	V.	L DISPOSITION (Name and A		REMAINS LO	CATED AT
BURIA	AL M	it. Hope (		FORNIA CEMETER	CA 92102	118. DATE BURI	ED   11C.	SIGNATURE OF PER	SON IN CH	ARGE OF BU	JRIAL
CREMAT	TION	A NAME AND A	COND	FORNIA CREMATO	ORY	128. DATE CREMA	TED 12C.	SEMATURE OF PER	SON IN CHA	RGE OF CR	EMATION
SCIENT	IFIC	A, NAME AND A	DDRESS OF CAL	FORNIA FACILITY	RECEIVING REM	IAINS 138. DATE RECE	IVED 13C.	SKINATURE OF PER	ISON IN CH	ARGE OF FA	CILITY
TRANS	SIT			IVING STATE OR C		E 148. DATE SHIPI	ED 14C.	ADDRESS AND SIGN OF PLACING WITH T			CHARGE
SCATTERING OR DISPOSITIO THAN IN A C	N OTHER	A. ADDRESS, NEA FICIENT TO IDE	REST POINT ON S ENTIFY FINAL PLA	SHORELINE, OR OTH CE AND CA <u>DISTRIC</u>	HER DESCRIPTION TOF DISPOSITION	SUF- 15B, DATE OF DISPOSITIO		SIGNATURE OF PER CHARGE OF DISPOS		ISD. LICENSE OF CREM MAINS D —# APP	ATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 5-15-95

	95-0509 PA (180169
ina -lines -	Funeral, date, time /// 5/82/95 @ 191
Church, Chapel, Graveside	: Idum phrey Moran
All Funeral cars must arrive before 3:30	p.m. of regular work day or an extra charge of \$
will be applied and billed to undersigned	
War time yeteran	
Lot +63 Grave +6 Row	Section Division/Block 12
Grave space & Care Fund	
Additional spaces and care fund	
Opening/Closing & Setup	165.0
Burial Container	
Handling Fees	19/4
Flower vases - Marker setting (ee	
Recording and filing fee	
Sales taxes	
1,,,,,,	Total Due386.0
Barr	Paid receipt number
Barc	Balance due
hereby certify I am the	of the above named deced sition of remains as above indicated. I certify and repres zation and I agree to hold Mt. Hope Cemetery harmless fr
that I have the right to make this authorize	tion and interment.
that I have the right to make this authoriza any liability on account of said authoriza I hereby authorize the interment in lot I	tion and interment.
that I have the right to make this authorize any liability on account of said authorize I hereby authorize the interment in lot I	ition and interment.
that I have the right to make this authoriza any liability on account of said authoriza I hereby authorize the interment in lot I hold under deed.	ation and interment.
that I have the right to make this authoriza any liability on account of said authoriza I hereby authorize the interment in lot I hold under deed.	Signature Address
and this is your authority to make disport that I have the right to make this authorization in the property of said authorization in the interment in lot I hold under deed.  Signature of recorded holder of dised.	Signature Address City 29:1



# CITY OF SAN DIEGO, CALIFORNIA

GENERAL INVOICE

Make Remittance Payable to
CITY TREASURER
P O Box 2289
San Diego, California 92112

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

PAYMENT DATE 6-9-95

PAYMENT REF NIGH-833699 AMT PAID: 386.00

INVOICE DATE 05/23/95 PAYMENT DUE

PERIOD COVERED

APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS REF NO: F=12229

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

11-1101

JUHN DUE PARTIBOIGS SERVICES

LUT 25 GRAVE 8 SEC 1 DIV 12

126.00

UPENING/CLUSING

LINER

RECORDING FEE

45.00

TUTAL DUE

386.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT
MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO

AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE
SUBJECT TO A COLLECTION FEE OF 10% OR \$10,
WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH
ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.

ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT

Adaption of the contact of th

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS UNITED

USE BLACK INK ONLY-MAKE NO FRASURES WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE JOHN	NT—FIRST (GIVEN)	18. MIDDLE	IC. LAST (FAMILY)	DOK	2. DATE OF BIRTH MONTH, DAY, YEAR Unknown		
SA. CITY OF DEATH	San Diego		58, COUNTY OF DEAT ENTER STATE		6. NAME, RELATIONSHIP, FULL OF INFORMANT	03/14/1995   M MALMG ADDRESS AND ZP CODE   Public Administrat	
Humphrey (		Mortuary Vista CA 9191		LIF. LICENSE NUMBER F APPLICABLE 7-964	5201-A Ruffin I San Diego CA	loed 92123	
and broads					BA. SIGNATURE OF APPLICANT-	Posen Jahre permit 88. DATE SIGNED	
. ACHNOMIZEDGMENT OF M	Section 10	channeledge as applicant that the propose 37% of the Hessib and Safety Code, and wa	a patherized pursuent to Section 71(0) of \$	e Health and Safety Code.	· quain Co	tang   05/16/1995	
AUTHORIZATION OF	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	DEPARTMENT OF DEPOSIT OF CALFO	97.00	05 / 1		REGISTRADUSSUING PERMIT	
		GISTRAR OF DISTRICT OF D D IN CALIFORNIA COTES P.O. BO	EATH-   BE. AD		OF DISTRICT OF DISPOSITION- UR IN ANOTHER DISTRICT IN CALLS		
HORIZED DISPO	OSITION(S) CHECK A	PLICABLE ITEMS			FOR CO	RONER'S USE ONLY	
A. BURKAL (INCLU B. CREMATION C. DISPOSITION ( THAN IN A CE D. SCIENTIFIC US	OF CREMATED REM/	UNS OTHER	E. TEMPORARY ENV.  F. DISINTERMENT  G. SHIP IN TO CALIFO  H. TRANSIT TO OUTS	JANKA .	L DISPOSITION (Name and	N PENDING-REMAINS LOCATED AT Address)	
BURIAL	Ht. Hope 3751 Mark	ORES OF CALIFORNIA CEM Cemetery et St. San Die	BO CA 92102	5 Balas	D 11C. SIGNATURE OF PE	RSON IN CHARGE OF BURIAL	
CREMATION	N/A	ORES OF CALIFORNIA CRE	MATORY	128. DATE CREMA	TED 12C. ARGINATURE OF PE	RSON IN CHARGE OF CREMATION	
SCIENTIFIC USE	13A. NAME AND AC	ORESS OF CALIFORNIA FAC	ALITY RECEIVING REMAINS	138, DATE RECE	IVED 13C. SIGNATURE OF PE	RSON IN CHARGE OF FACILITY	
TRANSIT		DORESS IN RECEIVING STATE CREMATED REMAINS ARE TO		148. DATE SHIPP	D 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER		
SCATTERING AT SEA OR DISPOSITION OTHER	15A. ADDRESS, NEA FIGIENT TO IDE	REST POINT ON SHORELINE, O NTIFY FINAL PLACE AND CA D	R OTHER DESCRIPTION SUF- INSTRICT OF DISPOSITION	158, DATE OF DISPOSITION	15C. SIGNATURE OF PE CHARGE OF DISPO		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

E-12229

254051 05/23/95 000952 COUNTY OF SAN DIEGO 77181 000072 77182 000072 77183 000072 77184	165.00 50.00 45.00 126.00	PAID IN FULL
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# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 5-15-95

or staken Dag	95-0368	PA	1180	150
ina Limer	Funeral, date, time,	mon 5	1/22/95	10 ion
Church, Chapel, Graveside	The state of the s	ump	E. Je	Mortuary
All Funeral cars must arrive before 3:30 p		0	U	
	or regular work day	Of all bane	r chaige or	
will be applied and billed to undersigned.				- 20
War time veteran		26.7		
Lot = 76 Grave - 4 Row_	Section	_ l p	ivision/Bloci	_12
Grave space & Care Fund	$\langle \ \ \rangle$	········		126.00
Additional spaces and care fund	, JX	)		
Opening/Closing & Setup	<u> </u>	/ 		165.00
Burial Container	1.105			KO 00
Handling Fees	141			20100
Flower vases - Marker setting fee	4			
Recording and filing fee				42 00
Sales taxes	1115-1017-1017-1017-1017-1017-1017-1017-		-	45.00
84	Т.	al Dua		
elucca Barr		lai Dua		306.00
<b>P</b>	ald receipt number	10441040		60/
		Bala	ance due _	10
			THE RESERVE WAS CHARLES	and the second second
I hereby certify I am the	tion of compine on the		above nam	
and this is your authority to make disposithat I have the right to make this authorize	tion and I agree to hold	e Indicate	d. I certify a	nd represent
and this is your authority to make disposi	tion and I agree to hold	e Indicate	d. I certify a	nd represent
and this is your authority to make disposi that I have the right to make this authorize any flability on account of said authorization	tion and I agree to hold	e Indicate	d. I certify a	nd represent
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and this is your authority to make disposi that I have the right to make this authorize any liability on account of said authorization. I hereby authorize the interment in lot I	ition and I agree to hold on and interment.	e Indicate	d. I certify a	nd represen
and this is your authority to make disposithat I have the right to make this authorization and liability on account of said authorization.  I hereby authorize the interment in lot I hold under deed.	ation and I agree to hold on and interment.	e Indicate	d. I certify a	nd represent armless from
and this is your authority to make disposi that I have the right to make this authorize any liability on account of said authorization. I hereby authorize the interment in lot I	ation and I agree to hold on and interment.	e Indicate	d. I certify a	nd represent
and this is your authority to make disposithat I have the right to make this authorization of said authorizati	ation and I agree to hold on and interment.  Signature  Address  City  Telephone	e Indicate	d. I certify a	nd represent armless from
and this is your authority to make disposithat I have the right to make this authorization and liability on account of said authorization.  I hereby authorize the interment in lot I hold under deed.	ation and I agree to hold on and interment.  Signature  Address	e Indicate	d. I certify a	nd represent armless from

# CITY OF SAN DIEGO, CALIFORNIA

### GENERAL INVOICE

Make Remittance Payable to
CITY TREASURER
PO Box 2289
Con Policy College (College)

San Diego, California 92112
Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO ;
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGU CA 92123

ACCT NO 000952

-TREASURERS USE ONLY-

PAYMENT DATE 6-9-95

PAYMENT REF NO 4-833699 | ANT PAID: 386,00

1NVOICE DATE

PAYMENT DUE 06/22/95 PERIOD COVERED
APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS REF NO: E-12230 \*\*

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

JUHN DOE PARTIBOTSO SERVICES LOT 76 GRAVE 4 SEC 1 DIV 12 OPENING/CLOSING LINER RECORDING FEE

126-00

45.00

TOTAL DUE 386.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT
MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO
AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE
SUBJECT TO A COLLECTION FEE OF 10% OR \$10.
WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH
ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.
ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT
Adulated States ABOVEWhite - Customer Copy • Yellow - Remittence Edity NO. 25405

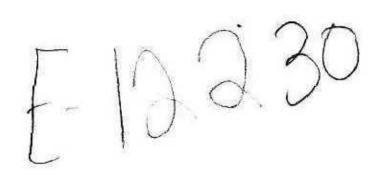
# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE JOHN	NT—FIRST (GIVEN) 18. MIDDLE	1C. LAST GAMILY	DOE	MONTH, DAY, YEAR MONTH	TE OF DEATH 4. SEX
6A. CITY OF DEATH	Jamil.	58. COUNTY OF DE	ATH-outside calif.,	6. NAME, RELATIONSHIP, FULL MAILING A OF INFORMANT Rebecca Barr - Publ	DORESS AND ZIP CODE
	Chala Vista Hortusty Chala Vista Hortusty	100	CALIF. LICENSE NUMBER  —IF APPLICABLE  7-964	5201-A Ruffin Road San Diego GA 9212	
800 Bros				8A, SIGNATURE OF APPLICANT Person toking	
ACKNOWLEDGMENT OF A	PPLICART I hereby acknowledge as applicant that the proposed dispe Section 10376 of the Health and Safety Code, and was anihor	oftion stated horein is one of ized mersenet to Section 7100 (	the dispositions authorized by of the Health and Safety Code.	Judith Exting	05/16/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS OF THE CALIFORNIA NEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT CRES NO MIGHT OF DISPOSAL OUTSIDE OF CALIFORNIA.	9A. AMOUNT OF FEE \$7.00		T ISSUED 9C. SIGNATURE OF LOSSO REC	SISTRAR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH IF DEATH OCCUMED IN CAUFGRINA VITAL RECORDS San Diego CA 92186-522	85222		R OF DISTRICT OF DISPOSITION— CUR IN ANOTHER DISTRICT IN CALIFORNIA	2
ORIZED DISP	OSITION(S) CHECK APPLICABLE ITEMS		22	FOR CORONER'S	S USE ONLY
A. BURIAL (INCLU	OF CREMATED REMAINS OTHER			(Name and Address)	REMAINS LOCATED AT
BURIAL	Mt. Hope Cemetery 3751 Market St. San Diego	CA 92102	5/20/90	VDat	OFFICE OF BOTTINE
CREMATION	12A. NAME AND ADDRESS OF CALIFORNIA CREMATO	ORY	128. DATE CREMA	TED 12C AGNATURE OF PERSON IN C	CHARGE OF CREMATION
SCIENTIFIC	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY	RECEIVING REMAINS	138. DATE RECE	IVED 13C, SIGNATURE OF PERSON IN	CHARGE OF FACILITY
TRANSIT	14A. NAME AND ADDRESS IN RECEIVING STATE OR REMAINS OR CREMATED REMAINS ARE TO BE		148. DATE SHIPP	DED 14C. ADDRESS AND SIGNATURE COPPLACING WITH THE CARP	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTH FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICE.  M/A		158. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	15D. LICENSE NUMBER OF CREMATED RE- MAINS DISPOSER —IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.





14053 05/23/95	000952	COUNTY OF	SAN DIEGO	77181	000072 CK	04-833699	386.00 165.00	386.00	PATD IN FULL
£ 12	7.6.	100 100 67007	072 072	77162 77163 77164	000072 000072		50.00 45.00 126.00		ALD IN FOLL

# 28 Jordan

# MT. HOPE CEMETERY

# INTERMENT ORDER

City of San Diego

Date 5-15-95

Vasitiner Vasitiner	Funeral, date, time 7 5/1	9 1PM
hurch, Chapel, Graveside 6	anside Ragodale	Mortuary.
Il Funeral cars must arrive before	3:30 p.m. of regular work day or an extra charge	18150.0
rill be applied and billed to unders	signed	
Var time veteran $\sim$ $\circ$	e:	
ot <u>3 253</u> Grave	Row Section Division/Bl	rek_ <u>9</u>
irave space & Care Fund		100.00
dditional spaces and care fund		-
pening/Closing & Setup		125.00
urial Container		
landling Fees		
lower vases – Marker setting fee		er av tolsam to
lecording and filing fee	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	45.00
ales taxes		-
	Total Due# 4/6232	68.00
	Paid receipt number # 70000	1020
v M	Aux / Balance due	
hereby certify I am the \( \frac{\frac{1}{2}  \gamma \) I have the right to make this a	disposition of remains as above indicated. I certify uthorization and I agree to hold Mt. Hope Cemetery	amed decedent y and represent y harmiess from
ny liability on account of said aut	horization and interment. $6/1/95 - 6$	al:4102.C
hereby authorize the interment in	* Bollamy Har	,
old under deed.	Signatury 4439 84:6 St	45
	X San Diego	92116
The second second second second second		
ignature of recorded holder of deed	V 584-7981	Zip Code

# MT. HOPE CEMETERY

PY-1012 (11-89)

w.o. # F-12231

# NOTE

Á	<b>■</b> 202,00	San Diego, California	15 may	1995
	Thirty days after date for value received, the undersign		y San Diego City Treasure	
	3751 Market Street, San Diego, CA 92101, the sum of	Two hundred	two a no/100-	DOLLARS
	with interest from 19 JUNE	1995	on the unpa	aid principal
	at the rate of 12 percent per annum, payable on dema	nd.		
<b>(3)</b>	Should this note not be paid when due, it shall ther accrue at the rate indicated above. Principal and intere will be liable and consents to renewals, replacements maturity, and waives presentment, demand and prote person who signs this note agrees that recourse may contained herein. If any action be instituted on this not may fix as attorney's fees.	est are payable in lawful n and extensions of time est and the right to asser be held against his/her	noney of the United States for payment hereof before t any statute of limitations separate property for an	t. The maker e, at or after s. A married y obligation
4	Part II, Chapter I, Article 2, Paragraph 7528 authorizes the removal of any remains from a p		아이지 않는데 얼마 아이는 아니까 아이지가 안 하시지 않는데 사람들이 아니는데 어느 없는데 얼마나 없다.	
	PRINT NAME & Bethany HARRIS ADDRESS & 4439 Ohio St 45	S.D. CA	9211/6	6
	CALIFORNIA DRIVER LICENSE NUMBERX 185965	540 ssn	*x 552-08-59	59

E-19031

### CITY OF SAN DIRGO, CALIFORNIA CITY TREASURER

# ACCOUNTS RECEIVABLE AUXILIARY INVOICE - PAYMENT FORM

	PAYMENT DATA
PAYMENT P.M. HEGEIVED	Hand deliver
PAID BY [CINCLE ONE]:	MBSR # 1607
AMOUNT PAID \$ 100.	00_
·	TREASUREN VALIDATION
•	CUSTOMER DATA
PAYOR HAME SAY	Bethany Harris  TENEDERHARD ST #5
841	9.6.CA. 92116
	le L. Clark
HEMARKS Muchel	

TH-1861 (2-82)

•	US	ICATION AND PERM SE BLACK INK ONLY—MAKE	NO ERASURES, W			HOR THREE GROUP CHARGOST	1866 Still
A. NAME OF DECEDE	ENT-FIRST (GIVEN)	18. MIDDLE	1C. LAST (FAMILY)		2		TE OF DEATH 4. S
Dalle	11	Nathaniel	Harris			05/11/1995 05	/1111995 H
A. CITY OF DEATH	22		5B. COUNTY OF DEATH ENTER STATE	OUTSIDE CALIF.,	6. NAME, F	RELATIONSHIP, FULL MAILING	ADDRESS AND ZIP COD
A. TYPED NAME AND A	dale Mott.	- FUNERAL DIRECTOR OR PERSON A 5050 Federal Blv Diego, CA	d. ¦ ⊸"	IF LICENSE NUMBER FAPPLICABLE	4439 San	any Harris, Mot Ohio St. #5 Diego. CA 92110 TURE OF APPLICANT—Person take	5
ACKNOWLEDGMENT OF A	on many I hereby a	cknowledge as applicant that the proposed disper	oftion stated herein is one of the	dispositions authorized by	1	11116	05/15/1
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT. NOTE: THIS PERMIT CALES ME	176 of the Health and Spirity Code, and was author ED IN ACCORDANCE WITH PROVI- ORNIA HEALTH AND SAFETY CODE Y FOR THE DISPOSITION SPECIFIED DISBIT OF DISPOSAL OUTSIDE OF CALFORNIA.	9A. AMOUNT OF FEE PA	98. DATE PERMIT	95	C. SIGNATURE OF LOCAL RE	A STATE OF THE PARTY OF THE PAR
NY CHANGE IN DISPOSI- TION REQUIRES A NEW TO SHOW FINAL SPOSITION.	Vital Reco	GISTRAR OF DISTRICT OF DEATH o in California rds; P.O. Box 8522 San Diego. CA 9218	2 ***	DRESS OF REGISTRAR DISPOSITION IS TO OCCU		CT OF DISPOSITION— HER DISTRICT IN CALIFORNIA	
B. CREMATION		UNS OTHER	E. TEMPORARY ENVA F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	PRNIA		I. DISPOSITION PENDIN (Name and Address)	
BURIAL		ORESS OF CALIFORNIA CEMETER Cametery; 3751 Ma San Diego,	rket St.	11B. DATE BURIE	D 110.	SIGNATURE OF PERSON IN	CHARGE OF BURIAL
CREMATION	12A. NAME AND AD	ODRESS OF CALIFORNIA CREMATO	PRY	128. DATE CREMA	TED 12C.	SENATURE OF PERSON IN	CHARGE OF CREMATIC
SCIENTIFIC USE	13A. NAME AND AD	DRESS OF CALIFORNIA FACILITY	RECEIVING REMAINS	13B. DATE RECEI	VED 13C.	SIGNATURE OF PERSON IN	CHARGE OF FACILITY
TRANSIT		DRESS IN RECEIVING STATE OR C CREMATED REMAINS ARE TO BE		148. DATE SHIPP		ADDRESS AND SIGNATURE OF PLACING WITH THE CAP	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR OTH INTIFY FINAL PLACE AND CA <u>DISTRIC</u>		15B. DATE OF DISPOSITION		SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	15D. LICENSE NUMBER OF CREMATED R MAINS DISPOSER —IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.





From: Kimberly Diggs	Address: 1629 Penterest Way #2 S.D. 9210 Switch Eight & 2/100 - Dollars 15 168 00					
InPayment of	iteling of Dan	ill Na	thanul	thris		
Lot 3253 Grave	Row So	ection/	Division Block	9		
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007			
Acct. No.		80% Sales of Lote Opening/	77184 100	8 00		
w.o. F-12031		Closing Buriel	77181			
BALANCE DUE 202 00		Containers Handling Fee	77182 — 100 77185 — —			
		Hetording & Misc. Fees Pre-Need	100 77183			
Pre-Need Lot ☐ At Need 전 On Acct ☐ Pre-need Trust ☐ Cash ☐ Check 및		Trust Seles Tex	9022			
AC-212 (Rev. 5-94) #685	ISSUED BY M. Clark	TOTAL PAID	1 68	00		

E-12231

253977 05/22/95 085275 E- 12231	BETHANY HARRIS 100 072 100 072 100 072 67007	77181 000072 77183 000072 77184 000072 77184	100.00 202.00 102.00 61.85 PARTIAL PAYMENT 22.28 5.94 9.90
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# MT. HOPE CEMETERY

# INTERMENT ORDER

foot of the

PY-593 (Rev. 8-92)

City of San Diego

at or	(8	- AG	s. 5=	15-05
grave.	26		Date	275
You are hereby authorized and instri	ucted, subject to	your rules	and regulations, to k	nter the remains
######################################	ita.	KEI	80	
ina Ash Vault	Z Funera	l, date, tim	Wed 5-17.	11:00 A.M
Church, Chapel, Graveside	16-165		dewis Col	CW/4Mortuary.
All Funeral cars must arrive before 3	,		ay or an extra charge	ots /5000
will be applied and billed to undersig	/^	A)	Mecodicetori desellati accioni≇ina	(CAST MANAGEMENT ST.)
War time veteran			* = *	
Lot 42/1 Grave	nw.	Section	Division/Bi	nck /0
ACCOUNT OF THE PROPERTY OF THE	0.1228.4	^	9290	OK
Grave space & Care Fund				
Additional spaces and care fund				The second secon
Opening/Closing & Setup				
Burial Container			***************************************	(S)
Handling Fees				60.a
Flower vases - Marker setting fee				
Recording and filing fee				45.00
Sales taxes				
		1	otal Due	
	Paid receipt	number	46226	268 35
			Balance due	Q
I hereby certify I am the and this is your authority to make dithat I have the right to make this authority in the authority on account of said authority in the interment in lo hold under deed.  Segnature of recorded holder of deed	sposition of rem norization and i rization and inte	ains as ab agree to ho	Of the above nove indicated, I certified ML Hope Cemeler  CALLY   y and represent	
Work Order # E 1223	(158)	nvoice #		



		Date:	1 - 13		19 42
From Shalow Asakanon	Cr.	1	Bon	-	. 919
two windred	sixty eight "s	100 0	ollars (\$	268	85,
In Payment of	inserment of	Totala		EI	
Lot 42// Grave	Row S	ection	A SE	Division Block	10
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT	67007		
	"PAID" IN THIS SPACE.	20% Sales Care 50% Sales of Lots	77184	Burnett B	
Acct No	1000年8月 · 1000年1	Opening/ Closing	100	105	00
W.O		Burial Containers	77181 — 100	55	00
BALANCE DUE		Handling Fee	77182 — 100 77185 —	60	00
		Recording &	100	45	00
Pre-Need Lot At Need On Acct		Pro-Need Trust	63033	HELINE	
Pre-need Trust Cash Check D		Sales Tax	80101 78390 —	3	85
AG-212 (Rev. 5-04)	ISSUED BY V balobly	TOTAL PAID	1	268	85

# OFFICIAL RECEIPT



WHITE..... TO CUSTOMER CANARY CEMETERY PINK. AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA

F 1	00	2~4	62	27
-	22	2		

			Date:	5-15		19 95
From: Charon Asakawa	Address:	3466 MI		BONIA	a CA.	9190
twenty three	and	70/100		Collars (\$	23.	70
in full Payment of	custallat	ton 1	of gali		flower	VR_
can	for	Tokida	Kez	18		N.
Lot 4211 Grave		_ Row	Section		Division Block	10
Invoice No.*	NOT VALID FOR PURPOSES PAID IN THIS SPACE.	STATED UNLESS STAM	IPED CREDIT 20% Sales Care	87007 77184 —	- 00	1
Acct. No.			80% Sales of Lots	77184 —	The state of	-
w.o. E 12232		1 artis	Opening/ Closing Buriel	77181 — 100	10	100
BALANCE DUE &			Containers	77162 — 100	13	00
			Handling Fee Recording & Misc. Fees	77185 — 100 77183 —		
Pre-Need Lot At Need On Acct			Pre-Need Trust	63033 9022 —		1
Pre-need Trust   Cash   Check   Check	1	Bahoble	Sales Tax	80101 78390 —		70
AC-212 (Rev. 5-84) 546	ISSUED BY	Dunnigen	TOTAL PAID		23	70

F-12232 LEVIS COLONIAL

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

A. NAME OF DECEDE	ENT-FIRST (GIVEN) 18. I	MODLE	1C. LAST (FAM	William Company of the Company of th	2. DATE OF BIRTH MONTH, DAY, YEA 09/23/1895	3. DATE OF DEATH 4. SEX
A. CITY OF DEATH  MATIO	WAL CITY	1.33	58. COUNTY OF ENTER STAT SAN DIE		The second secon	MAILING ADDRESS AND ZIP CODE
LEWIS COLO	DORESS OF CALFORNA-FUR MIAL/BENBOUGH JOH BLVD SAN D	MORTUARY		'B. CALIF. LICENSE NUMBER —IF APPLICABLE FD 480	P.O. BOX 219 BOWITA, GA 919	
ACKNOWLEDGMENT OF A			ned disposition stated herein is on as authorized coround to Section 7	e of the dispositions authorized by 100 of the Health and Safety Code.	Den Ide	05/15/199
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN SIONS OF THE CALIFORNIA AND IS THE AUTHORITY FOR IN THIS PERMIT CHES NO MUST IN	HEALTH AND SAFETY OF THE DISPOSITION SPEC	\$7.00	98. DATE PERM 0 5 / 1 5		LOCAL REGISTRAR ISSUING PERMIT
TION REQUIRES A NEW PERMIT TO SHOW FINAL	9D. ADDRESS OF REGISTR VITAL RECUERS: SAN DIEGO, CA	ALIFOPMO. BOX	85222		R OF DISTRICT OF DISPOSITION CUR IN ANOTHER DISTRICT IN CAU	
THORIZED DISP	OSITION(S) CHECK APPLICA	BLE ITEMS	-		FOR CO	RONER'S USE ONLY
D. SCIENTIFIC U	OF CREMATED REMAINS O	S OF CALIFORNIA CEI	F. DISINTERMEN G. SHIP IN TO C H. TRANSIT TO	CALIFORNIA OUTSIDE OF CALIFORNIA 11B. DATE BURI	(Name and	N PENDING—REMAINS LOCATED A Address).
CREMATION	12A. NAME AND ADDRESS CYPRESS VIEW 3953 IMPERIAL	CREMATORY/M	Ausoleum	3 5/16/5	12C. SIGNATURE OF PE	RSON IN CHARGE OF GREWATION
SCIENTIFIC USE	13A. NAME AND ADDRESS	s of california fac S ASIL Vau	170574	INS 138 DATE FECE	IVED 13% SIGNATORE OF PI	ERSON IN CHARGE OF FACILITY
TRANSIT	14A. NAME AND ADDRESS REMAINS OR CREMA	S IN RECEIVING STATI TED REMAINS ARE TO		148. DATE SHIP	PED 14C. ADDRESS AND SIG OF PLACING WITH	3NATURE OF PERSON IN CHARGE THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEAREST F FICIENT TO IDENTIFY		or other description : <u>District</u> of disposition		N 15C. SIGNATURE OF PI CHARGE OF DISP	

COPY 3 OF THE PERMIT IS TO BE RETURNED TO THE COUNTY OF DEATH WHEN THE REMAINS ARE DISPOSED OF IN ANOTHER DISTRICT. IF NOT APPLICABLE, COPY 3 MAY BE DISCARDED. THE LOCAL REGISTRAR MAY DESTROY ANY ORIGINAL OF DUPLICATE PERMIT AFTER ONE YEAR FROM ISSUE DATE.

#### MT. HOPE CEMETERY

### INTERMENT ORDER

Pre-need

City of San Diego

Date 5-15-95

in a C	Funeral, date, time
Church, Chapel, Graveside	i Mortuar
All Funeral cars must arrive before 3:30 p.	.m. of regular work day or an extra charge of \$
will be applied and billed to undersigned.	
War time veteran NO.	
Lot 95 Grave ID Row	Section Division/@leck_ / /
	895
landling Fees	
- Delication Properties - Park Visited Prope	
	1991 Join Die + 895.0
	aid receipt number R-46228 = 306.0
Pa	
Pa O.	
90 .	la ful Balance due 470
hereby certify I am the Alassa	Balance due 470.  Balance due 470.  of the above named decede
I hereby certify I am the Alassa and this is your authority to make disposite that I have the right to make this authorizate	Balance due 470.  Balance due 470.  of the above named decede the december of the above named decede the december of the above named second the above named second the above named second the december of the above named second the
hereby certify I am the Alband this is your authority to make disposition that I have the right to make this authorization is a light to make the authorization	Balance due 470.  Balance due 470.  of the above named decede the december of the above named decede the december of the above named second the above named second the above named second the december of the above named second the
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I hereby certify I am the Alassa	Balance due 470 of the above named deced door okremains as above indicated. I certify and repres
hereby certify I am the Alband this is your authority to make dispositional I have the right to make this authorization liability on account of said authorization hereby authorize the interment in lot i	Balance due 470.  Balance due 470.  of the above named decede the december of the above named decede the december of the above named second the above named second the above named second the december of the above named second the
hereby certify I am the Alexand this is your authority to make disposition that I have the right to make this authorization liability on account of said authorization hereby authorize the interment in lot I hold under deed.	Balance due 470.  Balance due 470.  of the above named decede the december of the above named decede the december of the above named second the above named second the above named second the december of the above named second the

	ATT AND THE	MAIL	Same			illanc	CC	OUP	ON		1
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3	San	Die Die	go	. Ca	ı.	92	114		7	ς +	
IAN	FER	MAR					AUG				DEC
, m	11.50		5.5,16,	2888	10	STEE.	1.02	6.97.00A	1	,	150000
due di	ate abo	when pove.	nore th		ore,	ys	<b>S S</b>		20.	00_	
NAM ADD	E (	باح	02	2	nount F	Marry 2	s L	17	5		
CITY			00	40		STAT	E		ZIF	91 =	
			heck	(1)	) if t	nis is	new	/ add	iress		

77.000	NOT	- Table 1	35 S S S S S S S S S S S S S S S S S S S			illenc	C	OUP	ON		2	
AC	COUNT	Γ No.	E-	-12	233		3	Pre	-Ne	ed 1	Lot	
	Juai 350 San (95-	La: Die	s Fi	lord , Ca	es ' A	[er	raco L4	е				
FEB	MAR								NOV	DEC	JAN	
due di	nt due ate abo nt due due dan	ve. If paid i	moreti	\$90) = 18	(MANUTO)	rys )	> s		20.	00		
	E C					TT.	45	n.g				
CITY		-			. 14 .	STAT			ZIP			
			neck	· IV	1111	his is	new	v add	ress			

CITY OF SAN DIEGO, CALIFORNIA

46306

WHITE..... TO CUSTOMER CANARY ..... CEMETERY

MOUNT HODE CEMETERY

PINKAUDITOR	MOONT	527-3400				6
Slova Oll -		200 0	Date:	6/6		1995
From Juanita alkins	Cixty do	clars & 9	140-0	Ma (\$		2
In Payment of Plu	- Trud fe	1+ '				
Lot 95 Grave	10	Row 8	Section	2	Division Block	1/_
Invoice No.	NOT VALID FOR PURPO "PAID" IN THIS SPACE.	SE STATED UNLESS STAMPED	CREDIT 20% Sales Care 80% Sales of Lots	67007 77184 — 100 77184 —	60	00
w.d. E-12233			Opening/ Closing Buriel Containers	77181 — 100 77182 —		
BALANCE DUE # 970.00			Hendling Fee Recording & Misc. Fees Pre-Need	100 77185 — 100 77183 — 63033		F
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check A		m. clark	Trust Sales Tax	9022 — 60101 78390 —	10	
AC-212 (Rev. 5-94)	ISSUED BY		TOTAL PAID	-	60	100

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date May 16, 1995

You are hereby authorized and instructed, so	ubject to your rules and regulations, to inter the remains
of Aohn Doe 19	15-0313) PA# 1180185
ina lines	Funeral, date, time, 5/18/95 @ 10:3000 TA
Church, Chapel, Graveside deliner	4 order Glen Abbers Moreuary
es Francisco	of regular work day or an extra charge of \$
Contract the contract of the second of the s	. of regular work day or an extra charge of \$
will be applied and billed to undersigned	
War time veteran	
Lot 41 Grave 5 Row_	Section 1 Division/Black 12
Grave space & Care Fund	126.00
Additional spaces and care fund	111
Opening/Closing & Setup	165.00
Burial Container	50.00
Handling Fees	Φ /
1 (4)	
Flower vases - Marker setting lea	45 00
Recording and filing fee	<u> </u>
Sales taxes	
	Total Due
Paid	receipt number
	Balance due
N 12 6	The second secon
hereby certify I am the	of the above named decedent n of remains as above indicated. I certify and represent n and I agree to hold Mt. Hope Cemetery harmless from and interment.
hereby authorize the interment in lot i	Signature
	Address
Signature of recorded holder of deed	City Zg Code
	NEW COLUMN COLUM
	Talephone
- 12234	Invoice # 254039
Work Order # E 12234	Acct # 100 952
PY-593 (Rev. 8-52)	

# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

A. NAME OF DECEDE	NT—FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMILY)	DOK	MONTH	OF BIRTH S	02/13/1993	4. SEX
SA. CITY OF DEATH	MA BRACE		58. COUNTY OF DEAT ENTER STATE	H-OUTSIDE CALIF.	OF INFORMANT		ING ADDRESS AND Z	2000
GLEN AND 3838 BOR	ITA BOAD,	A—FUNERAL DIRECTOR OR PERSON I T; / BOULTA, CA 91902 classificity as applicant that the proposed disput	- 1	F-1371	5201-A RI SAN DINGS	. CA 921	23 on taking permit 8B. DA	
ACHNOWLEDGMENT OF A	Section 10	376 of the Health and Salety Code, and was author	ional pursuant to Section 7100 of	he Health and Safety Code.	· Oses	ne	05/1	Charles and the second
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	AND IS THE AUTHORITI	JED IN ACCORDANCE WITH PROVI- ORNIA HEALTH AND SAFETY CODE BY FOR THE DISPOSITION SPECIFIED DIRECT OF DEPOSAL ONTERS OF CALFORNIA.	Constitution and Constitution	0 5 / 17/	A December of Barbanas and Lance	ATURE OF LOCA	A REGISTRAR ISSUIT	NG PERMIT
INY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL POSITION.	P.O. BOX			DRESS OF REGISTRAR DISPOSITION IS TO OCC			A.	8
HORIZED DISP	DISTION(S) CHECK A			77		FOR CORO	NER'S USE ONL	Y
B. CREMATION  G. DISPOSITION  THAN IN A CE  D. SCIENTIFIC US	OF CREMATED REM METERY SE 11A. NAME AND A	AINS OTHER  DORESS OF CALIFORNIA CEMETER  PE CEMETERY;  EXT STREET, SAN DI	Y			(Name and Adds	NDING—REMAINS L (988) N IN CHARGE OF B	
CREMATION		DORESS OF CALIFORNIA CREMATO		126, DATE CREMA	TED 12C. SWANA	TURE OF PERSON	N IN CHARGE OF CR	REMATION
SCIENTIFIC USE	13A. NAME AND A	DORESS OF CALIFORNIA FACILITY	RECEIVING REMAINS	13B. DATE RECE	IVED 19C. SIGNA	TURE OF PERSO	ON IN CHARGE OF F	ACILITY
TRANSIT		DDRESS IN RECEIVING STATE OR CREMATED REMAINS ARE TO BE		148. DATE SHIPP		SS AND SIGNAT ACING WITH THE	URE OF PERSON IN CARRIER	CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR OT ENTIFY FINAL PLACE AND CA <u>DISTRI</u>		158. DATE OF DISPOSITION		Ture of Perso Se of Dispositi	ON OF CRE	E NUMBER MATED RE- DISPOSER PLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



#### CITY OF SAN DIEGO, CALIFORNIA

GENERAL INVOICE

#### Make Remittance Payable to CITY TREASURER

P O Box 2289 San Diego, California 92112

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO

PAYMENT DATE 6-9-95

PAYMENT REF NUO4-833699 | ANT PAID: 386.00

DS/23/95

PAYMENT DUE

PERIOD COVERED
APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS REF NO: E-12234

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

TOTAL DUE

186.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT

MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO

AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE

SUBJECT TO A COLLECTION FEE OF 10% OR \$10,

WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH

ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.

ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT

MODIFICATION ABOVEWhite-Customer Copy • Yellow-Remittance Copy NO. 254037

E-12234

.

254039 05/23/95 000952 E 11-2-321	COUNTY OF SAN DIEGO 100 072 100 072 100 072 67007	77181 000072 77182 000072 77183 000072 77184	04-833699	386.00 165.00 50.00 45.00	356.00	PAID IN FULL
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## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date May 16, 1995

in a	Funeral, date, time THURS 5/18	195 @10:3
Church, Chapel, Graveside delinery	only bun Housey	Mortuary
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge	e of \$
will be applied and billed to undersigned		
War time veteran		
Lot 91 Grave 4 Row_	Section <u>3</u> Division/	Block 2
Grave space & Care Fund		12400
Additional spaces and care fund		
Opening/Closing & Setup		165.00
Burial Container / O. V	C7)	500
Handling Fees	a)	
Flower vases - Marker setting lea		
Recording and filing fee		45.00
Sales taxes		TATO E
<b>Value</b> 10.000	Total Due	386.6
Text to		
Paid	receipt number	P
	Balance du	H H
I hereby certify I am the	n of remains as above indicated. I cer n and I agree to hold Mt. Hope Cemete	named deceder lify and represer ery harmless from
that I have the right to make this authorization	and interment.	
that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I	and interment.	
that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I		
that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I hold under deed.	Signature	Zip Cod
that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I hold under deed.	Signature Address	Zip Cod
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization.  I hereby authorize the interment in lot I hold under deed.  Bignature of recorded holder of deed.	Signature Address City	<u>700</u> € 600

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

A. NAME OF DECEDE	DONAL PROPERTY OF THE PROPERTY OF THE PARTY	18. MIDDLE	IC. LAST (FAMILY)	DOE (	2. DATE OF BIRTH 3. D	DEATH 4. SEX
A. CITY OF DEATH	PERIAL BEAC		58. COUNTY OF DEATH ENTER STATE SA	HOUTSIDE CALIF.	8. NAME, RELATIONSHIP, FULL MAILING	
GLEN ARE	EX MORTUARY	IA—FUNERAL DIRECTOR OR PERSON 13. 10 WITTA, CA 91902		IF. LICENSE NUMBER APPLICABLE -1371	5201-A RUFFIN NOAD SAN DIEGO, CA 92123 8A. SIGNATURE OF APPLICANT—PERSON DA	
" ACKNOWLEDGMENT OF A	ments     bereby i	acknowledge as applicant that the proposed di 1376 of the Health and Selety Code, and sea aut		dispositions authorized by	· Westeren mez	J 95/17/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	UED IN ACCORDANCE WITH PROVI FORMA HEALTH AND SAFETY CODE TY FOR THE DISPOSITION SPECIFIED ID RENT OF DISPOSAL OUTSIDE OF CRUFORMS	7 00	05/17	ISSUED SC. SIGNATURE OF LOCAL R	EGISTRÀR ISSUING PERMIT
THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	P.O. BOX	EGISTRAR OF DISTRICT OF DEA ED IN CALIFORNIA 85222 CA 92106-5222			OF DISTRICT OF DISPOSITION— IR IN ANOTHER DISTRICT IN CALIFORNIA	117
HORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS		50	FOR CORONER	'S USE ONLY
B. CREMATION	11A. NAME AND AI	DDRESS OF CALIFORNIA CEMET CEMETRIX; ET STREET, SAN DI		DRNIA IDE OF CALIFORNIA  118 DATE BURIEL	(Name and Address	
CREMATION		DDRESS OF CALIFORNIA CREMA	THE RESERVE OF THE PARTY OF THE	128. DATE CREMAT	ED 12C. SIGNATURE OF PERSON IN	CHARGE OF CREMATION
SCIENTIFIC USE	13A, NAME AND A	DORESS OF CALIFORNIA FACILIT	TY RECEIVING REMAINS	138. DATE RECEIV	/ED 13C, SIGNATURE OF PERSON IN	CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING STATE OF CREMATED REMAINS ARE TO B		14B. DATE SHIPPS	THE OF PLACING WITH THE CA	
SCATTERING AT SEA OR DISPOSITION OTHER		VREST POINT ON SHORELINE, OR C ENTIFY FINAL PLACE AND CA DIST		158. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	150, LICENSE NUMBER OF CREMATED RE- MAINS DISPOSER

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.





### CITY OF SAN DIEGO, CALIFORNIA

#### GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P O Box 2289

E-12235

San Diego, California 92112

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

PAYMENT DATE 6-9-95

PAYMENT REF NOO4-833699 AMT PAID: 386.00

INVOICE DATE

PAYMENT DUE

PERLUD CUVERED
APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

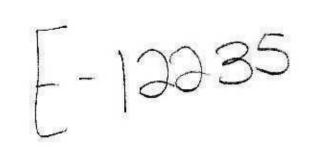
JOANN WALTS

REF NO: E-12235

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 613 527 3400

DESCRIPTION OF CHARGES	THUUMA
is st-brut	•
JOHN DOE PARTIBOL77 SERVICES	20
LOT 91 GRAVE 4 SEC 3 DIV 12	126.00
OPENING/CLUSING	155.00
LINER	50.00
RECORDING FEE	45.00

NOTICE: PLEASE REMIT PAYMENT PRUMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10, WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT ADMINISTRAL ABOVEWRITE-Customer Copy • Yellow-Remittance Copy No. 254046



254042	05/23/95 000952	COUNTY	OF	SAN	DIEGO
	12 235	100	58	072	-1-00
	E-BASE	100	9	072	

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77182 77183	000072 000072		
77184			

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12	6.	00	

386.00 PAID IN FULL

The state of the s

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## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date May 16, 1995

	Funeral, date, time THURS 5 /18 /95@ 10:3
Church, Chapel, Graveside delivery	
All Funeral cars must arrive before 3:30 p.m	n. of regular work day or an extra charge of \$
will be applied and billed to undersigned.	
War time veleran	
	1 2
Lot 100 Grave 6 Row_	Section Division/Block!
Grave space & Care Fund	126.00
Additional spaces and care fund	
Opening/Closing & Setup	165.00
	***************************************
Flower vases - Marker setting lee	
Recording and filing fee	
Sales taxes	
	Total Due
Paid	receipt number
	A SECOND CONTRACTOR OF THE PROPERTY OF THE PRO
	Balance due
I hereby certify I am the	of the above named decedent
and this is your authority to make dispositio that I have the right to make this authorization	of the above named decedent on of remains as above indicated. I certify and represent on and I agree to hold Mt. Hope Cemetery harmless from
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization. I hereby authorize the interment in lot I	of the above named decedent on of remains as above indicated. I certify and represent on and I agree to hold Mt. Hope Cemetery harmless from
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization. I hereby authorize the interment in lot I hold under deed.	of the above named decedent on of remains as above indicated. I certify and represent on and I agree to hold Mt. Hope Cemetery harmless from and interment.
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization. I hereby authorize the interment in lot I hold under deed.	of the above named decedent of remains as above indicated. I certify and represent and I agree to hold Mt. Hope Cemetery harmless from and interment.
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization. I hereby authorize the interment in lot I hold under deed.	of the above named decedent of remains as above indicated. I certify and represent and I agree to hold Mt. Hope Cemetery harmless from and interment.
and this is your authority to make dispositio	of the above named decedent on of remains as above indicated. I certify and represent on and I agree to hold Mt. Hope Cemetery harmless from and interment.  Signature  Address  City 2p Code

CITY OF SAN DIEGO, CALIFORNIA

GENERAL INVOICE

#### Make Remittance Payable to CITY TREASURER P O Box 2289 San Diego, California 92112

E-12236

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO PUBLIC ADMINISTRATOR 5201 A RUFFIN ROAD SAN DIEGO CA 92123 ACCT NO 000952

PAYMENT DATE TO TE CA (CK) IF

REF NO 04-859568

AMT PAID:

386,00

INVUICE DATE

PAYMENT DUE

PERIOD COVERED
APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JUANN WAITS REF NO: E-12236 \_\_

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

PGS OFFI

JOHN DOE PARTIBOLES SERVICES

LUT 100 GRAVE 6 SEC 1 DIV 12 126.00

OPENING/CLUSING 165.00

LINER 50.00

RECORDING FEE 45.00

TOTAL DUE

386.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT
MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO

AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE
SUBJECT TO A COLLECTION FEE OF 10% OR \$10.

WHICHEVER IS GREATER. INTEREST OF 1% PER MONTH
ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.

ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT

Adazana Paris Above Maite-Customer Copy • Yellow-Remittance Edity NO. 25404

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

1004

23

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS 1A. NAME OF DECEDENT-FIRST (GIVEN) 18. MIDDLE IC. LAST (FAMILY) 2. DATE OF BIRTH 3. DATE OF DEATH 4. SEX MONTH DAY DOE 6. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE 5A. CITY OF DEATH 5B. COUNTY OF DEATH-OUTSIDE CALIF., ENTER STATE MANUE: PUBLIC ADMINISTRATOR SAN DIRCO SAN DIEGO 7A. TYPED NAME AND ADDRESS OF CALIFORNIA-FUNERAL DIRECTOR OR PERSON ACTING AS SUCH 78. CALIF. LICENSE NUMBER 5201-A RUFFIN ROAD -IF APPLICABLE GLEN ARMEY MORTUARY: SAN DIEGO. CA 92123 3838 BOWITA ROAD. BONITA, CA 91902 F-843 BA. SIGNATURE OF APPLICANT—Forson taking parmit, 8B. DATE SIGNED I hereby acknowledge as applicant that the proposed disposition stated herein is one of the dispositions authorized by Section 10376 of the Health and Salety Code, and was authorized pursuant to Section 7100 of the Health and Salety Code. ACKNOWLEDGMENT OF APPLICANT THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI-SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE COLAL REGISTRAR ISSUING PERMIT 9A. AMOUNT OF FEE PAID 9B. DATE PERMIT ISSUED 9C. SIGNATURE OF PERMIT AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED **AUTHORIZATION OF** IN THIS PERMIT. LOCAL REGISTRAR HOTE: THIS PERMIT CIVES NO RIGHT OF DISPOSAL OUTSIDE OF CHLFORNIA 9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH-9E. ADDRESS OF REGISTRAR OF DISTRICT OF DISPOSITION-ANY CHANGE IN DISPOSI P.O. BOX 85222 IF DISPOSITION IS TO OCCUR IN AMOTHER DISTRICT IN CALIFORNIA TION REQUIRES A NEW PERMIT TO SHOW FINAL SPOSITION AN DIEGO, CA 92186-5222 HORIZED DISPOSITION(S) CHECK APPLICABLE ITEMS FOR CORONER'S USE ONLY A. BURIAL (INCLUDES ENTOMBMENT) E. TEMPORARY ENVAULTMENT I. DISPOSITION PENDING-REMAINS LOCATED AT (Name and Address) B. CREMATION F. DISINTERMENT C. DISPOSITION OF CREMATED REMAINS OTHER G. SHIP IN TO CALIFORNIA THAN IN A CEMETERY D. SCIENTIFIC USE H. TRANSIT TO OUTSIDE OF CALIFORNIA 11A. NAME AND ADDRESS OF CALIFORNIA CEMETERY 11B., DATE BURNED 11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL MUNIT HOPE CEMETERY: BURIAL 3751 MARKET STREET, SAN DIEGO, CA 92102 2 12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY 126. DATE CREMATED ATURE OF PERSON IN CHARGE OF CREMATION 12C. SIG CREMATION 138. DATE RECEIVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY 13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS SCIENTIFIC USE 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE 14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE 14B DATE SHIPPED REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED OF PLACING WITH THE CARRIER TRANSIT 15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUF-158. DATE OF 15C. SIGNATURE OF PERSON IN 15D. LICENSE NUMBER SCATTERING AT SEA CHARGE OF DISPOSITION DISPOSITION OF CREMATED RE-FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT OF DISPOSITION MAINS DISPOSER DISPOSITION OTHER -IF APPLICABLE THAN IN A CEMETERY COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN

CHARGE OF DISPOSING OF THE CREMATED REMAINS

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date May 16, 1995

1100-	Marino PA# 1178917	110-
in a Validation	_ Funeral, date, time <u>FK1 5/19/95 @</u>	HAM
Church, Chapel, Graveside delivery	ionly : clarement	Monuary
All Funeral cars must arrive before 3:30 p.	m. of regular work day or an extra charge of \$_	=
will be applied and billed to undersigned.		8 3
War time veteran		395
Lot 100 Grave 9 Row_	Section Division/Block	12
Grave space & Care Fund		14.00
Additional spaces and care fund	$\overline{}$	-
Opening/Closing & Setup		w.a
Burial Container	m;0 /	50.0
Handling Fees	;•\@ /	_
Flower vases - Marker setting fel	/!·/	
Recording and filing fee		5.00
Sales taxes		
	Total Due52	86.a
thrynd Pa	id receipt number	
il au Xu	Balance due	3
11000		daradaa
I hereby certify I am the	of the above named	
and this is your authority to make disposit	ion of remains as above indicated. I certify and tion and I agree to hold Mt. Hope Cemetery harm	represen
and this is your authority to make disposit that I have the right to make this authorizat	ion of remains as above indicated. I certify and tion and I agree to hold Mt. Hope Cemetery harm	represen
and this is your authority to make disposit that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I hold under deed.	ion of remains as above indicated. I certify and tion and I agree to hold Mt. Hope Cemetery harm on and interment.	represen
and this is your authority to make disposit that I have the right to make this authorization any liability on account of said authorization. I hereby authorize the interment in lot I	ion of remains as above indicated. I certify and tion and I agree to hold Mt. Hope Cemetery harm and interment.	represen
and this is your authority to make disposit that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I hold under deed.	ion of remains as above indicated. I certify and tion and I agree to hold Mt. Hope Cemetery harmon and interment.  Signature	represen less from
and this is your authority to make disposit that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I hold under deed.	ion of remains as above indicated. I certify and tion and I agree to hold Mt. Hope Cemetery harmon and interment.  Signature  Address  City	represen less from



### CITY OF SAN DIEGO, CALIFORNIA

GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P O Box 2289 San Diego, California 92112

E-122-37

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO

PAYMENT DATES USE ONL
BY: CA (C) IF

386.00

INVOICE DATE

PAYMENT DUE

PERIOD COVERED

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS REF NO: E-12237

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

RICCL A MARINO PA 1178717 SVCS
LOT 100 GRAVE 9 SEC 1 DIV 12 126.00
UPENING/CLOSING 165.00
LINER 50.00
RECORDING FEE 45.00

TOTAL DUE

386.00

NUTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT COMMANDED ABOVE White-Customer Copy \* Yellow-Remittance 600 NO. 25397

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-12037

#### USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	ENT-FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FAMILY)		2. DATE OF BIRTH 3.	DATE OF DEATH 4. SEX
RICCI		ALLEN		MARINO	04/20/1959 04	715/1995 M
SA. CITY OF DEATH		7.		ATH-OUTSIDE CALIF.,	6. NAME, RELATIONSHIP, FULL MAILIN OF INFORMANT	G ADDRESS AND ZIP CODE
SAN I	DIRGO	G	ENTER STATE	AN DIEGO	KATHERINE HOMARD:	DEPUTY PA
7A. TYPED NAME AND A	DORESS OF CALIFORN	IA-FUNERAL DIRECTOR OR P	ERSON ACTING AS SUCH 78.	CALIF. LICENSE NUMBER	5201-A MUFFIN ROAD	
	MONT MORTU T. ABERNAT	ARY: HY AVE., SAN D	SANDEN CORNE	F-1126	SAN DIBGO, CA 9212 BA. SIGNATURE OF APPLICANT—PERSON	
ACKNOWLEDGMENT OF A	PPLICANT I hereby a Section 10	echnerologie as applicant that the prop 1376 of the Health and Safety Code, and	osed disposition stated herein is one of mas putherwood persoant to Section 7100 o	the dispositions authorized by of the Health and Safety Code.	· Ouctore me	~ 05/16/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH I FORMA HEALTH AND SAFETY ITY FOR THE DISPOSITION SPE ID MIGHT OF REPOSAL OUTSIDE OF CAL	7.00	0 5 / 1	7 / 1995	REGISTRAR ISSUING PERMIT
	90. ADDRESS OF R P.O. BOX B SAN DIEGO,	EGISTRAR OF DISTRICT OF 5222 CA 92186-522			OF DISTRICT OF DISPOSITION— UR IN ANOTHER DISTRICT IN CALIFORNIA	i
HORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS		79	FOR CORONE	R'S USE ONLY
B. CREMATION		ains other	F. DISINTERMENT' G. SHIP IN TO CAL H. TRANSIT TO OL	44	I. DISPOSITION PEN (Name and Addres	OBNG—REMAINS LOCATED AT
BURIAL	MOUNT HOP	DORESS OF CALIFORNIA CO E CEMETERY: ET STREET, SAI	EMETERY N DINGO, CA 921	02 3/19/95	11C. SIGNATURE OF PERSON	IN CHARGE OF BURIAL
CREMATION	12A. NAME AND A	DORESS OF CALIFORNIA C	REMATORY	128. DATE CREMA	TED 12C SIGNATURE OF PERSON	IN CHARGE OF CREMATION
SCIENTIFIC	13A. NAME AND A	DORESS OF CALIFORNIA FA	ACILITY RECEIVING REMAINS	13B. DATE RECE	VED 19C. SIGNATURE OF PERSON	IN CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING STA CREMATED REMAINS ARE		14B. DATE SHIPP	ED 14C. ADDRESS AND SIGNATUR OF PLACING WITH THE C	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		IREST POINT ON SHORELINE, ENTIFY FINAL PLACE AND CA	OR OTHER DESCRIPTION SUF DISTRICT OF DISPOSITION	15B. DATE OF DISPOSITION	16C. SIGNATURE OF PERSON CHARGE OF DISPOSITION	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

E 12237 100 072 77183 000072 126.00	253979 05/22/9	n 100 072 771	06/09/95 CK 04-833699 000072 000072 000072	386-00 386-0 165-00 50-00 45-00 126-00	PAID IN FULL
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#### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 3724 16, 1995

이 2018년 2월 2월 2일 1일	ct to your rules and regulations, to inter the remains
of my Clyde C	noum
ina T.S. Vault Fun	eral, date, time
Church, Chapel, Graveside	, Mortuary.
All Funeral cars must arrive before 3:30 p.m. of r	regular work day or an extra charge of \$
will be applied and billed to undersigned.	
War time veteran	
Lot 12 Grave 2 Row	
Grave space & Care Fund Pu-Day	rd 5-7476 0
Additional spaces and care fund	
Opening/Closing & Setup	375.00
Burial Container	<u> 250.00</u>
Handling Fees	185.00
Flower vases – Marker setting fee Pour Recording and filing fee	w 1,5 93 B
Recording and filing fee	45.00
Sales taxes	<u>/7.50</u>
	Total Due
Paid rec	eipt number <u>R-46345</u> <u>872.5</u> 0
(if	Balance due
I hereby certify I am the SELF and this is your authority to make disposition of that I have the right to make this authorization ar	of the above named decedent remains as above indicated. I certify and represent and I agree to hold Mt. Hope Cemetery harmless from
any liability on account of said authorization and	interment 1 1 m Brau
I hereby authorize the interment in lot I hold under deed.	1371 1st Avenue
Bignature of recorded holder of deed	(SAN) DIELO, CA. 92103
ž	K 619-295-6643
~	THE SAME AND THE S
<sub>E</sub> 12238	Invoice #
Work Order #	Acct. #
PY-593 (Rev. 8-92)	4.1.70

The total smount of \$872.50

WAS SENT 6-7-95 in the form of A

Wills Fargo Cashiers cheek + personal
Cheek.

1200 mae mae 1200 = 120

Acres 6

.95

1-15



#### MOUNT HOPE CEMETERY 527-3400

In Saule Payment of Pag-	need thust for mis.	Clyde	Grac	un
Lot 13 Grave	Row So	ection 17		Division 7
Pre-Need Lot At Need On Acct Pre-need Trust Cash Checks Accts (Rw. 544)	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Cere 80% Sales of Lots Opening/ Closing Buriel Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	67007 77184 — 100 77184 — 100 77181 — 100 77185 — 100 77185 — 100 77183 — 63033 9022 — 60101 78390 —	375 250 185 45 17 872

# MT. HOPE CEMETERY INTERMENT ORDER

1.41	MT. HOPE CEMETERY	
Warder Links	ERMENT ORDER	3 2
pranger INT	City of San Diego	5/17/95
of or	Webbak	7
You are hereby authorized and instru	cted, subject to your rules and regul	ations, to inter the rec
of To: Victor	A HILL	AV.
in a	Funeral, date, time	
Church, Chapel, Graveside		Mor
All Funeral cars must arrive before 3:	30 p.m. of regular work day or an ex	tra charge of \$
will be applied and billed to undersign	ned.	577 19030-
War time veteran .		
10 10:13	low Section 2	Divisions Time
Lot Grave/ #/3_ R	owsection	DIVISION STATES
Grave space & Care Fund	will D	MIN
Additional spaces and care fund	wild the	AIU
Opening/Closing & Setup	pland pro 1.	N 6 1995
Burial Container		11 0 1933
Handling Fees	мт. н	OPE CEMETER
Flower vases - Marker setting fee	ICITY of S	AN DIEGO, CAL
Recording and filing fee July	fu Gee	45
Sales taxes	y 	
	Total Due	45.
	Paid receipt number R-H6	304 45.
	В	alance due
I hereby certify I am the	off	he above named dec
and this is your authority to make dis that I have the right to make this auth any liability on account of said author	sposition of remains as above indica orization and I agree to hold Mt. Hop	ted. I certify and repr
	V 1000	19 11.
I hereby authorize the interment in lo hold under deed.	Signal D	a D. A
INTERNITOR WOOD,	X S 73 3 Ca	sperde ar
Signature of recorded holder of deed	- X Trouts 1 to	Clywood 4
	1 7 8 8 8 7 76	3-1177
	Telephone	to Souther

PY-593 (Rev. 8-92)



PY-584 (Rev. 4-95)

#### CITY OF SAN DIEGO, CALIFORNIA MOUNT HOPE CEMETERY



#### OWNERSHIP AND INTERMENT PRIVILEGES

то	VICTORIA HILL	for the sum of \$ 45.00	(DOLLARS)
LEGAL DESCRIPTION	N Lot 19 Graves 10 &	12 Section 2 Division 7	
AS DESCRIBED ON	PURCHASE ORDER NUMBER	E-12239	S.
endowed care. Subject essentials for care and	to all rules and regulations now in force operation of the Cemetery. The rights he	unty Recorder of San Diego County. To be held fo or may hereafter be adopted, including the righ reby conveyed for interment privileges shall not ust be recorded in the office of Mount Hope Ceme	t to ingress and egress with be relinquished without the
stone, vaults or other in be assumed by legal ov vandalism and natural	nprovements of like nature that is alread oner or representatives of plot. In no cas	n does not undertake or agree to make any repa y, or may hereafter be erected or placed on said k e will the Cemetery Division be responsible for the right to remove any object that detracts from	ot or plot. Cost of same shall damage, malicious mischief.
	SEE CEMETERY MANAGER FOR I	WHAT IS ALLOWED IN THIS AREA.	
	lea Writer	L T. S	was
	Cemetery Manager	Real Estate Assets	Director

This information is available in alternative formats upon request.

MT. HOPE CEMETERY • 3751 MARKET STREET •, SAN DIEGO, CALIFORNIA 92102

Real Estate Assets Department 527-3400 Business hours 8 a.m. to 4 p.m. Monday through Friday \* Gates open daily

17, 1995

F-12239

Mr. Reginald Hill 5933 Carpenter Avenue No. Hollywood, Ca. 91607

Dear Mr. Hill:

We are in receipt of the Quitclaim Deed wherein you have given your grave spaces to Victoria J. Hill.

Enclosed, for your signature, is paperwork required by our office to facilitate your request. Please sign enclosed form by the red "x's" and return the form is.

Also, there is a Transfer of Ownership fee of \$45.00 required by the cemetery in order to change all of the cemetery records to reflect the new owner of the property.

Hope Cemetery in the above mentioned amount and the styned form so we may process this information and update our records.

After our records have been updated, we will issue a new deed to Victoria Hill showing her as the owner of these graves. 'We will send you a receipt for the payment and a copy of all the paperwork you signed.

If you have any questions, please contact us at the above listed address or phone number.

Sincerely,

nn Waits,

etery Manager

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1-- 5

#### MOUNT HOPE CEMETERY 527-3400

10 1 1111		Date:	19.75
Tody-Line 220	/100 Address: 5033 Co	CONTRACTOR OF THE PARTY OF THE PARTY.	11ars (\$ 45.00,9160
n Payment of Tho			
ot . / 9 Grave _	10 a 12 Row_	Section2	Division 7
nvoice No.	NOT VALID FOR PURPOSE STATED UNLESS STATED IN THIS SPACE.	80% Sales	67007 77184 100
v.o. E-1239		of Lots Opening/ Closing Buriel	77184 100 77181 100
BALANCE DUE		Containers Handling Fee	77182 100 77185
re-Need Lot At Need On Acct		Recording & Misc. Fees Pre-Need Trust	77183 63083 9022
Pre-need Trust Cash Check S		1100000	60101 78390
IC-212 (Rev. 544) 083/	Issued BY COLOR	TOTAL PAID	45 00

E-12239 JAW

Manage: What Hope Cemetery april 28. 1995

Dear Sir, Enclosed is a Zuitclaim bleed for two lots in not ) tope Cemeting. I would appricate your recording of this deal grand Changing your records accordingly. Your Very July

Regunded & Shell

RECORDING REQUESTED BY Victoria J. Hill 5933 Carpenter ave. No. Hollywood Ca. MAIL TAX STATEMENTS TO THIS LINE FOR RECORDER'S USE Individual Quitclaim Deed THIS FORM FURNISHED BY TICOR TITLE INSURERS The undersigned grantor(s) declare(s): Documentary transfer tax is \$\_ ( ) computed on full value of property conveyed, or ( ) computed on full value less value of liens and encumbrances remaining at time of sale. ( ) Unincorporated area: ( ) City of. FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, Reginald L. Hill hereby REMISE(S), RELEASE(S) AND FOREVER QUITCLAIM(S) to Victoria J. Hill the following described real property in the County of State of California: Mt. Hope Cemetery, San Diego, California Lot 19, Graves 10 and 12, Section 2, Division ? Dated Opril 26. 1995 STATE OF CALIFO before me, the undera Notary Public in and for said State, personally appeared REGINACO L. HILL PROVED ON SATIS FACTORY EVIDENE 15 subscribed to the within DIANE E. PREISLER instrument and acknowledged that.... COMM. #998086 WITNESS my hand and official seal. OTARY PUBLIC - CALIFORNIA ITI LOS ANGELES COUNTY Comm. Expires JUNE 23, 1997 (This area for official notarial seal) Title Order No. Escrow or Loan No. MAIL TAX STATEMENTS AS DIRECTED ABOVE

#### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 5-17-95

	Linea -	elee Putrick	Thur 5-18:	1:000
ina	Valle	187		
Church, C	Chapel, Graveside	belivery only	Mayer	Mortuary.
All Funera	al cars must arrive befor	e 3:30 p.m. of regular work day	or an extra charge of	•
will be app	plied and billed to under	signed.		
War time	veteran			
Lot <u>0</u>	7 Grave 9	Row Section	Division/Block	×_12_
Grave spa	ace & Care Fund		<u></u>	ale. U
Additional	spaces and care fund.	العال		
Opening/0	Closing & Setup	(,,,,,)	)	65. D
Burial Cor	ntainer	1 dies		50.00
Handling I	Fees	10791	/	
Flower va	ses - Marker setting fe	, U '		
				45.00
Sales taxe	99			18,000
		To	tal Due	86.00
		Paid receipt number	and construction of the co	
			Balance due _	0
l harahy o	ertify I am the		of the above nam	ed decedent
and this is that I have	your authority to make the right to make this a	disposition of remains as about authorization and I agree to hold thorization and interment.	ve indicated. I certify a	nd represent
	utherine the lets	n lot I Signature		_
l hereby a hold unde	uthorize the interment is r deed.	2300330		
		Address		
hold unde		Andrew Color		Zip Code
hold unde	r deed.	Address		Zip Code
hold unde	r deed. corded holder of deed	Address City Telephone	35UA2-	Zip Code
hold unde	r deed. corded holder of deed	Address City Telephone	a5403	Zip Code



### CITY OF SAN DIEGO, GALIFORNIA

GENÊRAL INVOICE

Make Remittance Payable to CITY TREASURER

P O Box 2289 San Diego, California 92112

San Diego, California 92112 Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

PAYMENT DATE 6-9-95 |
BY: CA CK IF

PAYMENT REF NOOH-833699 ANT PAI

386.00

INVOICE DATE PAYMENT DUE PERIOD COVERED 05/23/95 O6/22/95 APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:,

JOANN WAITS REF NO: E-12240

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

T: PROPERTY DEPT-MT HOPE CEMETERY 619 527 1400

PATRICK MILLER PA\$1179039 5VCS LUT 107 GRAVE 9 SEC 1 DIV 12 OPENING/CLUSING

DESCRIPTION OF CHARGES

126.00

AMUUNT

LINER RECORDING FEE 30.00 45.00

NOTICE: PLEASE REMIT PAYMENT PRUMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% DR \$10. WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT AND ABOVEWHITE-Customer Copy . Yellow-Remittance Copy No. 25403

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	ENT-FIRST (GIVEN)   18. MIDDLE	1C. LAST (FAMILY)			ATE OF DEATH 4. SEX	
Patrick	luice	Miller		09702/1975 02	72171995 M	
SA. CITY OF DEATH	· ·	58. COUNTY OF DEATH-OUT		6. NAME, RELATIONSHIP, FULL MAILING		
San Diego		San Diego		Public Ministrator-R. Barr		
	DORESS OF CALIFORNIA FUNERAL DIRECTOR OR PERSON AC					
Mayer Mortu	ary, 2859 Adams Ave., San Die	70, CA 1424	A.A.oce	San Diego, CA 92123		
. ' '	A CONTRACTOR OF THE CONTRACTOR			BA. SIGNATURE OF APPLICANT THIS OF		
- ACKNOWLEDGMENT OF A	Section 18376 of the Pennith and Salety Code, and was authorite	d personnt to Section 7100 of the Health	and Safety Code.	- Constant	<b>— 05/17/1995</b>	
PERMIT	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI- SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE		A SALES AND ADDRESS OF THE PARTY OF THE PART	ISSUED, 9C. SIGNATURE OF LOCAL F	REGISTRAR ISSUING PERMIT	
AUTHORIZATION OF	AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT.	\$7.00	5/17/199	95 9506687		
LOCAL REGISTRAR	NOTE: THE PERSON COSTS NO MIGHT OF BESTELL OUTSIDE OF CALIFORNIA.		3496 12	re '>		
ANY CHANGE IN DISPOSI-	90. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH— P.O. BOX 05222			OF DISTRICT OF DISPOSITION— UR IN ANOTHER DISTRICT IN CAUFORNIA		
PERMIT TO SHOW FINAL	The state of the s		HOUSE CHIPMONICAL	CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR ACCUSAGE		
	San Diego, CA 92186-5222				NO 1107 ONLY	
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B. CREMATION	`` <b>_</b>	F. DISINTERMENT	V 4	Assure our vivines	200	
THAN IN A CI	EMETERY	G SHE IN TO CALIFORNIA	a graduit	desir of the street of the street	Alternative Participation	
D. SCIENTIFIC U	SE ∫ ∐	H. TRANSIT TO OUTSIDE O	F CALIFORNIA			
	11A NAME AND ADDRESS OF CALIFORNIA CEMETERY	111	B. WATE BURNE	D   11C. SIGNATURE OF PERSON I	N CHARGE OF BURIAL	
BURIAL	Mt. Hope Cemetery	!5	1106-	- 1 1/1/2 4		
	3751 Market St., San Diego,	CA 92102	18/90	Mait		
	12A. NAME AND ADDRESS OF CALIFORNIA CREMATOR	125	DATE CREMAT	TED 12C. SIGNATURE OF PERSON II	CHARGE OF CREMATION	
		ì		i "		
CABLE	The Committee of the Co			¦ <b>&gt;</b>		
	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY F	ECEIVING REMAINS 13	B. DATE RECEI	VED 13C. SIGNATURE OF PERSON	N CHARGE OF FACILITY	
SCIENTIFIC USE	52.4 Sept. 215 215 215 215 215 215 215 215 215 215	10	1. 00	i		
₹ 08€		10.00	1	- i b		
Office and the second s	14A. NAME AND ADDRESS IN RECEIVING STATE OR C	OUNTRY WHERE 14	B. DATE SHIPP	ED 14C. ADDRESS AND SIGNATUR		
TRANSIT	REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED		: Us	OF PLACING WITH THE CARRIER		
TRANSIT			11)	•		
SCATTERING AT SEA	15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTHE		B. DATE OF	15C. SIGNATURE OF PERSON		
OR	FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRICT	OF DISPOSITION	DISPOSITION	CHARGE OF DISPOSITION	MARKS DISPOSER	
DISPOSITION OTHER THAN IN A CEMETERY		1		16	-IF APPLICABLE	
and the second s	A Company of the Comp				500	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.





E- 12240 100 072 100 072 100 072 100 072 100 072 100 072 100 072	77181 000072 77182 000072 77183 000072 77184	386.00 3 165.00 50.00 45.00 126.00	PAID IN FULL
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+):

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 5-17-95

of	John	Dee	PA #	1180	061
ln a	Linea	Funeral, date, time	FRI	5-19:	LODAH
Church, Ch	vaather napel, Graveside	Delivery .	Ma	wen	Mortuary
All Funeral	cars must arrive before	3:30 p.m. of regular work day	or an ext	ra charge o	of \$
will be appi	ied and billed to unders	signed.	1 896 1 28 109 17 1 1090	37.23.147.33E-881.347	
War time v	eleran	18			
Lot_114	Grave 9	Row Section	1	Division/Bk	ock 12
Grave spac	ce & Care Fund				126.0
Additional s	spaces and care fund	Buly	1	***************************************	One-Meaninemen
Opening/Cl	losing & Setup	16 FU			165.
Burial Cont	tainer	1019/	1	*****	50.
landling F	eesY	101 "W" 101	/	************	
Flower vas	es - Marker setting lee		*************		-
Recording	and filing fee				45.
Sales taxe:	S				literatura de la composición dela composición de la composición de la composición dela composición dela composición dela composición dela composición de la composición de la composición dela composición
		To	tal Due		386.2
		Paid receipt number			
		12E	Ве	alance due	B
hereby ce	rtify I am the		of th	e above na	amed deceden
hat I have	the right to make this as	disposition of remains as abo athorization and I agree to hold norization and interment.	ve indicat i Mt. Hope	ed. I certify Cemetery	and represent harmless from
hereby au old under	thorize the interment in deed.	lot I Signature			
	MATA	Address			
ignature of reco	orded holder of deed	City			Zip Cod
		Telephone			C-2000
	1004	1 Invoice #	25	397	8
Work Orde	$_{\star}$ E $^{1224}$	Acct. #	200	952	L
PY-593 (Rev.	_	7000	700	100	



### CITY OF SAN DIEGO, CALIFORNIA

GENERAL INVOICE

#### Make Remittance Payable to CITY TREASURER P O Box 2289 San Diego, California 92112

E-12241

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

PAYMENT DATE 4-9-95

PAYMENT REF NOUN-833699 | AMT PAID: 386.00

10V01CE DATE 05/22/95 PAYMENT DUE 06/21/95

PERIOD COVERED

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS REF NO: E-12241

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

JOHN DGE PA 1180061 SVCS.
LUT 114 GRAVE 9 SEC 1 DIV 12
UPENING/CLSUING
LINER
RECORDING FEE

126.00 165.00 50.00

45.00

TOTAL DUE

386.00

NUTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT

MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO

AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE

SUBJECT TO A COLLECTION FEE OF 10% OR \$10,

WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH

ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.

ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT

ACERSIAND ABOVEWAITE-Customer Copy • Yellow-Remiliance Edipy NO. 253976

# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

INK

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

John.	NTFIRST (GIVEN)	IB. MIDDLE	*	DOG		0.60	2. DATE OF BIRTH MONTH, DAY, YEAR	APPEN O	VEAD
CITY OF DEATH				58. COUNTY OF DEAT	H-OUTSIDE CALIF.,		RELATIONSHIP, FULL M	AILING ADDRES	S AND ZIP CODE
San Diego	41-00		V	San bilego		Age China 13 - Ben arm	C"Ministr	COLUMN TO SECULO	Jame
				ACTING AS SUCH 78. CA	LIF. LICENSE NUMBER	CARTON ALTONOMY	A Ruffin Rd	Carlot Co. C.	
Mayer Mortu	ary, 2859	Adams As	re.,,San Di	.ego, CA 14	24PLICABLE		dego, CA 92 Tugé of applicant—n		BD DATE ON
ACKNOWLEDGMENT OF M	PLICANT I hereby a	closedades as applicated of the Health and	cent that the proposed dispo o Salety Code, and was author	cation stated herein is one of the rised pursuant to Section 7100 of the	dispositions authorized by the Health and Solety Code.	-00	hy May	The second secon	5/18/199
UTHORIZATION OF	THIS PERMIT IS ISSE SIONS OF THE CALLY AND IS THE AUTHORI IN THIS PERMIT, NOTE: THIS PERMIT GIVES IN	TY FOR THE DIS	AND SAFETY CODE POSITION SPECIFIED	\$7.00	SELECTION OF CHESTOCK	/ 1995 ,	C. SIGNATURE OF U	CAL REGISTRA	R ISSUING PERM
ON REQUIRES A NEW SRAIT TO SHOW FINAL	OD. ADDRESS OF R IF DEATH OCCURR P.O. BOX 85 San Dilego,	222					CT OF DISPOSITION— HER DISTRICT IN CAUPO	RIVELA	
	OSTTION(S) CHECK A						FOR COR	ONER'S US	E ONLY
							10.000.000.000.000		
	-	, constant	-	T E TEMPODADY ENV	ALE TAKEN				
A. BURIAL ONCLU	IOES ENTOMEMENT)	, 50.5.1	Ē	E. TEMPORARY ENV.	AULTMENT		I. DISPOSITION		MAINS LOGATED
A. BURIAL (INCLU B. CREMATION				F, DISINTERMENT	SERGINES S				MAINS LOGATEE
A. BURIAL (INCLU B. CREMATION C. DISPOSITION : THAN IN A CE	OF CREMATED REM			F, DISINTERMENT G. SHIP IN TO CALIF	ORNA				MAINS LOGATED
A. BURIAL ONCLU B. CREMATION C. DISPOSITION	OF CREMATED REM			F, DISINTERMENT G. SHIP IN TO CALIF	SERGINES S				MAINS LOGATEL
A. BURIAL (INCLU B. CREMATION C. DISPOSITION : THAN IN A CE	OF CREMATED REM IMETERY SE 11A. NAME AND A Mt. Hope	AINS OTHER	ALIFORNIA CEMETER	F, DISINTERMENT G. SHIP IN TO CALIFF H. TRANSIT TO OUTS	ORNA			ddress)	
A. BURIAL (INCLU B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US	OF CREMATED REMEMETERY SE 11A. NAME AND A Mt. Hope 3751 Mark	DURESS OF CONSTRUCT	ALIFORNIA CEMETER	F, DISINTERMENT G, SHIP IN TO CALLE H, TRANSIT TO OUTS RY CA 92102	ORNIA SIDE OF CALIFORNIA	ED   11C.	☐ (Name and A	ddress) son in charc	GE OF BURIAL
A. BURIAL ONCLU B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US BURIAL	OF CREMATED REMEMETERY SE  11A. NAME AND A  Mt. Hope  3751 Hazk	DORESS OF CO	ALIFORNIA CEMETER  San Dilego,  ALIFORNIA CREMATO  ALIFORNIA CREMATO	F, DISINTERMENT G, SHIP IN TO CALLE H, TRANSIT TO OUTS RY CA 92102	ORNIA SIDE OF CALIFORNIA 11B. DATE BURIS 12B. DATE CREMA	ED   11C.	SIGNATURE OF PERS	SON IN CHARG	GE OF BURIAL E OF CREMATIO
A. BURIAL (INCLU- B. CREMATION C. DISPOSITION : THAN IN A CE D. SCIENTIFIC US BURIAL CREMATION SCIENTIFIC	OF CREMATED REM METERY SE  11A. NAME AND A  Mt. HOPE  3751 Mark  12A. NAME AND A  13A. NAME AND A	DORESS OF CO	ALIFORNIA CEMETER  San Dilego,  ALIFORNIA CREMATO  ALIFORNIA CREMATO	F. DISINTERIMENT G. SHIP IN TO CALLE H. TRANSIT TO OUTS RY CA 92102 ORY RECEIVING REMAINS	ORNIA SIDE OF CALIFORNIA 11B. DATE BURIS 12B. DATE CREMA	ATED 12C.	SIGNATURE OF PERS	SON IN CHARG	GE OF BURIAL  E OF CREMATIO  GE OF FACILITY

E 1227

253978 05/22/95 000952 E INH!	COUNTY OF SAN D 100 072 100 072 100 072 67007	77181 000072 77182 000072 77183 000072 77184	04-833699	386.00 165.00 50.00 45.00	366.00	PAID IN FULL
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# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 5-17-95

of		John	Doe	DA # 1	180028
na	Lner		_ Funeral, date, time	twes 5-18	1:20 P
Church, C	hapel, Graveside _	Deliv	eny :	Mayer	Mortuary
M Funera	i cars must arrive b	efore 3:30 p.	m. of regular work day	or an extra charge	of \$
will be app	olied and billed to ur	dersigned.			
War time v	veteran				
Lot 10	F Grave 6	Row_	Section	Division/Bi	ock_12_
Grave spa	ce & Care Fund	/		1	126-01
Additional	spaces and care fu	ng/	عورا	<u> </u>	101
Opening/0	Closing & Setup/	/	~ K /		165.00
Burial Con	ntainer	01.	193		50.00
Handling I	Fees	100	41.		
Flower vas	ses – Marker setang	fee			
Recording	and filing fee			***************************************	45.00
Sales taxe	9 <b>5</b>				
			То	tal Due	386. a
		Pa	id receipt number		-
				Balance due	<u> </u>
I hereby o	ertify I am the	ata Maasat		of the above n	amed deceden
that I have	the right to make the y on account of said	ris authorizat	tion of remains as about tion and I agree to hold to and interment	Mt. Hope Cemetery	harmless from
290 <b>4</b> 0000000					
I hereby at	uthorize the interme	ent in lot I	Signature		
under			Addess		
Signature of rea	corded holder of deed		Cay		Zip Code
			Telephone		
		0.40	1925.00922679-0	35403	8
	$_{F}$ F $^{12}$	242	Invoice #	2000	5
Work Orde	er# <u>L</u>		Acct. # _C	2070	d



# CITY OF SAN DIEGO, CALIFORNIA

GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P O Box 2289

San Diego, California 92112
Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN RUAD
SAN DIEGO CA 92123

ACCT NO 000952

-,,-,		-,,	-TREASUR	ERS	USE	ONLY-
PAYM	ENT	DATE	6-9 1F	-95	2 1	
BY:	CA		IF		Ĭ	
		200-0-17	5500W 3200M		-	

PAYMENT REF NIGH-833699 | ANT PAID: 386.00

D5/23/95

PAYMENT DUE

PERIOD COVERED
APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS

REF NO: E-12242

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 327 3400

DESCRIPTION OF CHARGES

AMOUNT

JOHN DUE PA#1180088 SERVICES LOT 107 GRAVE 6 SEC 1 DIV 12 OPENING/CLOSING

125.00

LINER
RECORDING FEE

50.00 45.00

TOTAL DUE

3A6.00

NOTICE: PLEASE REMIT PAYMENT PRUMPILY. PAYMENT

MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO

AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE

SUBJECT TO A COLLECTION FEE OF 10% OR \$10,

WHICHEVER IS GREATER, INTEREST OF 1% PER MUNIH

ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.

ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT

COLLECTION OF Yellow-Remittance Copy NO. 254036



USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

A. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FAMILY		2. DATE O	F BIRTH 3 DAT	FOF DEATH	4. SEX
John .			Doe		dalaho	m 03710	77995	M
A. CITY OF DEATH				ATH-OUTSIDE CALIF.,	6. NAME, RELATIONS			ZIP CODE
Imperial Bea	ach	*	San Diago	\		inistrator	-M. HOS	e ce
	AND THE REAL PROPERTY OF THE PARTY OF THE PA	IA-FUNERAL DIRECTOR OR PE		CALIF. LICENSE NUMBER				
Mayer Mortua	ary, 2859 1	dams Ave., San	Diego, CEA	1424		CA 92123		
			i i		BA. SIGNATIONE OF A	PPLICAND DO SOLUTION		
ACKNOWLEDGMENT OF A	PLICANT Section 16	ecknowledge as applicant that the propo 1376 of the Health and Sefety Code, and a	used disposition stated hereia is one of sas authorized pursuant to Section 7100	the dispositions authorized by of the Heelth and Safety Code.	your	11	05/17	7/1995
	SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	UED IN ACCOMPANCE WITH P FORMA HEALTH AND SAFETY ITY FOR THE DISPOSITION SPEC ID NIGHT OF PICRUSAL CUITAGE OF CALL	97.00		frissued' 9C. SIGNAT 7 / 1995 ↓►	URE OF LOCAL REC	ASTRAR ISSUM	NG PERMIT
NY CHANGE IN DISPOSI- TION REQUIRES A NEW PEWAIT TO SHOW PINAL PROSITION.	P.O.BOK 8	EGISTRAR OF DISTRICT OF ED. IN CALIFORNIA \$222 CA 92186-5222		ADDRESS OF REGISTRA IF DISPOSITION IS TO OC		CONTROL OF THE PROPERTY OF THE		2 %
HORIZED DISPO	DSITION(S) CHECK A		·			OR CORONER'S	S USE ONL	Y
B. CREMATION C. DISPOSITION ( THAN IN A CE D. SCIENTIFIC US	SE 11A. NAME AND A	DORESS OF CALIFORNIA CE		IFORNIA ITSIDE OF CALIFORNIA 11B. DATE BURI	A ON	SPOSITION PENDING ame and Address)		
BURIAL	Mt. Hope (	et St., San Die	go, CA	5/18/9	51.04	at		
CREMATION	12A. NAME AND A	DORESS OF CALIFORNIA CR	REMATORY	12B. DATE CREM	ATED 12C. SIGNATUR	HE OF PERSON IN C	HARGE OF CR	REMATION
SCIENTIFIC USE	13A. NAME AND A	DORESS OF CALIFORNIA FA	CILITY RECEIVING REMAINS	138. DATE REC	EIVED 13C. SIGNATUR	RE OF PERSON IN	CHARGE OF F	ACILITY
TRANSIT		DORESS IN RECEIVING STAT CREMATED REMAINS ARE 1		148, DATE SHIP		AND SIGNATURE ON MITH THE CAR		CHARGE
TRANSIT  SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, ENTIFY FINAL PLACE AND CA		16B, DATE OF DISPOSITIO		RE OF PERSON IN OF DISPOSITION	1 MAINS	E HUMBER MATED RE- DISPOSER PLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



E-12242

254038	E 12241	100 100 100 100 67007	SAN 072 072 072	DIEGO
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77181 77182 77183 77184	000072 000072 000072	CK	04-833699
77184	000072		

386.00 165.00 50.00 45.00 126.00

PAID IN FULL

.

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 3704 17,95

ina lines	Funeral, date, time	UES 5/	23 @ BI
Church, Chapel, Graveside	mer	kley-or	7 Hechael
All Funeral cars must arrive before 3:30 p.m.	of regular work day or	an extra charge	of \$
will be applied and billed to undersigned	NACONTEST DESCRIPTION ASSESSMENT ASSESSMENT OF THE PROPERTY OF		
War time veteran			
Lot 17 Grave S Row_	Section 1	Division/E	3lock 12
Grave space & Care Fund	(		126.
Additional spaces and care fund		PATTACE WAY THAT THE	
Opening/Closing & Setup			
Burial Container			
Handling Fees			
Flower vases - Marker setting fee			.,
Recording and filing fee			<u> 45-</u>
Sales taxes		************	
m y	Total I	Oue	386
Paid	receipt number		
Hono	ACTVACE DOSC 1034-BORG	Balance du	e
I hereby certify I am the		of the above	named decede
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization a	and I agree to hold Mt.	ndicated. I certi Hope Cemeter	ify and represe ry harmless fro
I hereby authorize the interment in lot I hold under deed.	Signature		
	Address		
	07-3575-31.50		
Signature at recorded holder of deed	Cay		Zip Co
Signature at recorded holder of deed	59.5		Zip Co

# CITY OF SAN DIEGO, CALIFORNIA GENERAL INVUICE Make Remittance Payable to

Make Remittance Payable to CITY TREASURER Box 2289 San Diego, California 92112

F-10043

Please Return YELLOW Copy with Your Paymen

COUNTY OF SAN DIEGO

ACCT NO 000952

PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

PAYMENT DATE 7-17-95
BYS CA CR IF
PAYMENT REF NO 04-859568 ANT P.

AHT PAID: 386.00

OS/26/95

PAYMENT DUE

PERIOD COVERED
APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

NOANN MAITS

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

JOHN DOE ME#95-Q469 PAI180126 LOT 17 GRAVE 8 SEC 1 DIV 12 OPENING/CLOSING LINER

126.00 165.00 50.00

RECORDING FEE

45-00

TOTAL DUE

186.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT
MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO
AVOID ADDITIONAL CHARGES. UNPAID BILLS HILL BE
SUBJECT TO A COLLECTION FEE OF 10% OR \$10,
WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH
ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.
ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT
LISTED ABOVE

100. 254236

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

JOHN	NT—FIRST (GIVEN)	18. MIDDLE	-	1C, LAST (FAMIL	DOE		DATE OF BIRTH CONTH, DAY, YEAR	3. DETECT DEATH MOS/08/1995	4. SEX
A. CITY OF DEATH SAN DIEGO					SAN DIEGO	OF INFO	RMANT	MAILING ADDRESS AND	
arante mi	HERKLEY-MITCH	CLL MORTUARY		CTING AS SUCH 78	CALIF. LICENSE NUMBER —IF APPLICABLE		MUFFIN ROAD EGO, CA 9212	23	100027555
The second second second	FTH AVEILE, S			Non-related basels to our	FD-119 of the dispositions authorized by	BA SIGNA	TURE OF APPLICANT-		TE SIGNED 19/1995
MCHNOWLEDGMENT OF M	Section 10	1376 of the Health and Sales	y Code, and was authoriz	ed pursuant to Section 710	0 of the Health and Safety Code.	500	green .		
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSI SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT. MITE: THIS PERMIT CHES II	FORNIA HEALTH AND TY FOR THE DISPOSI	TION SPECIFIED	9A. AMOUNT OF F	0 5 / 1 9 /	1995	C. SIGNATURE OF LO	OCAL REGISTRAR ISSU	NG PERMIT
NY CHANGE IN DISPOSI- TION REQUIRES A NEW PERAUT TO SHOW FINAL DISPOSITION.	9D. ADDRESS OF RI IF DEATH OCCURRE P.O. BOX 65		COTO CON STANCE		ADDRESS OF REGISTRAR IF DISPOSITION IS TO OCC			ORMA	
ORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS					FOR COL	RONER'S USE ONL	Y
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC U	11A. NAME AND A	DDRESS OF CALIF		ean mathematical locker es		D   11C.	(Name and	PENDING—REMAINS I Address)	
	SAN DIEGO, (	75.0			128. DATE CREMA	-   b	flait	SON IN CHARGE OF C	DELLA PION
	12A. NAME AND A	DDRESS OF CALIF	DHNIA CHEMATO	RT	128. DATE CHEMA	1 200	SAME OF PER	SON IN CHANGE OF C	
CREMATION	Bres.	1- BOU	ud		1				HEMATION
SCIENTIFIC	PALL .	L- BOO DDRESS OF CALIF	ORNIA FACILITY	receiving Remain	IS 138, DATE RECE	VED 13G.	SIGNATURE OF PER	rson in Charge of	
SCIENTIFIC	14A, NAME AND A	DORESS OF CALIF	ING STATE OR C	OUNTRY WHERE	IS 198, DATE RECE			NATURE OF PERSON I	FACILITY

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

	-1	11/
	4	. Dr
NOR	victor,	VP.
K	Mr.	5

PY-593 (Rev. 8-92)

At Alichar Wille	Date May 17, 9
	ted, subject to your rules and regulations, to inter the remai
1, 1,	# 94 - 1907 Pp# 1/80096
of Johan Dec	
in a Vaulitiner	10000,000,000
Church, Chapel, Graveside	Markley Mitchalle
All Funeral cars must arrive before 3:30	D p.m. of regular work day or an extra charge of \$
will be applied and billed to undersigne	d
War time veteran	
Lot 129 Grave 7 Ro	
Grave space & Care Fund	19 Paid 126.0
Additional spaces and care fund	/ Wara \ -
Opening/Closing & Setup	105 1 1 165.0
Burial Container	19 0 - 50.0
Handling Fees	( )
Flower vases - Marker setting fee	m / 1802
12 Teles (12 11 12 12 12 12 12 12 12 12 12 12 12 1	100 450
Recording and filing fee	Z ATTUL /
Sales taxes	201
mr. g g	DIS TOTAL TO
M. March	Paid receipt number
Low	Balance due
I hereby certify I am the	of the above named decede
that I have the right to make this author any liability on account of said authoriz	osition of remains as above indicated. I certify and represe ization and I agree to hold Mt. Hope Cemetery harmless fro ation and interment.
I hereby authorize the interment in lot I	Signature
hold under deed.	Address
Signature of recorded holder of deed	100000 TO 10000 TO 100000 TO 10000 TO 10000 TO 10000 TO 100000 TO 10000 TO 10
en eenst verst Aliteit in 1954 van de menne verste in 1950 fan 1957.	City Zip C
	Telephone
Work Order # E 12244	Invoice # 254056
Work Order # E 12244	ACCL 000952
TION CIUOI W	HULF CO



## CITY OF SAN DIEGO, CALIFORNIA GENERAL INVOICE

Make Remittance Payable to E 3244
CITY TREASURER
PO Box 2289

San Diego, California 92112

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN RUAD
SAN DIEGO CA 92123

ACCT NU 000952

PAYMENT DATE 4-9-95 | BY: CA CK IF

PAYMENT REF NOQ4-833699 | AMT PAID: 386.00

INVOICE DATE

PAYMENT DUE 06/22/95

PERIOD COVERED
APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS

REF NO: E-12244

DEPT: PRUPERTY DEPT-MT HOPE CEMETERY 619 327 3400

DESCRIPTION OF CHARGES

AMUUNT

JOHN DOE PA#1180096 SERVICES LOT 129 GRAVE 7 SEC 1 DIV 12 OPENING/CLUSING

126-00

LINER RECORDING FEE

50.00

TOTAL DUE

145.00

NUTICE: PLEASE REMIT PAYMENT PRUMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ARDVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A CULLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT ACCORDANCE OF ABOVEWHITE-CUSTOMER COPY. \* Yellow-Remittance Loby NO. 254056

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

JOHN	ENT—FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FAMIL	DOE		ATE OF DEATH 4.	, SEX
SAN DIEGO			58. COUNTY OF D	SAN DIEGO	8. NAME, RELATIONSHIP, FULL MAILING OF INFORMANT PUBLIC ADMINISTRATOR, KA		
and the same of th	HERKLEY-HITCH		PERSON ACTING AS SUCH 78.	CALIF. LICENSE NUMBER —IF APPLICABLE FD-119	5201A RUFFIN ROAD SAN DIEGO, CA 92123 BA. SIGNATURE OF APPLICANT—Person ba		<b>1</b> 2
ACKNOWN.EDGMENT OF A	PPLICANT I hereby a Section 10	chambridge as applicant that the pro- 376 of the Houth and Safety Code, and	poord disposition stated herein is one i was authorized auraumit to Section 7100	of the dispositions authorized by of the Health and Safety Code.	Ved Level	05/19/	1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH ORBIA HEALTH AND SAFETY TY FOR THE DISPOSITION SPE IN MINIST OF MINISTER OF CA	CODE SCIFIED 7.00			EGISTRAR ISSUING P	ERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW PINAL DISPOSITION.	IF DEATH OCCURRE	EGISTRAR OF DISTRICT OF D IN CAUFORNA 222, SAN DIEGO, C			OF DISTRICT OF DISPOSITION— UR IN ANOTHER DISTRICT IN CALIFORNIA		-
B. CREMATION	11A. NAME AND AS NT HOPE CEM	DDRESS OF CALIFORNIA CETERY, 3751 MARKET	EMETERY				ASSERTATION A
CREMATION	SAN DIEGO, I	odress of California C	REMATORY	128. DATE CREMA	TED 12C SIGNATURE OF PERSON IN	CHARGE OF CREMA	ATION
SCIENTIFIC USE	13A. NAME AND A	DORESS OF CALIFORNIA F	ACILITY RECEIVING REMAIN	IS 138. DATE RECE	IVED 13C. SIGNATURE OF PERSON II	I CHARGE OF FACIL	LITY
TRANSIT	14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED			14B. DATE SHIPP	OF PLACING WITH THE CA		ARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	FICIENT TO IDE	REST POINT ON SHORELINE ENTIFY FINAL PLACE AND CA	OR OTHER DESCRIPTION SU DISTRICT OF DISPOSITION	F- 15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON II CHARGE OF DISPOSITION	ISO. LICENSE NUM OF CREMATE MAINS DISPO	ED RE- CISTER

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

254056 05/23/95 000952 COUNTY OF SAN DIEGO

06/09/95 CK 04-833699

386.00

386-00

0.00

# MT, HOPE CEMETERY INTERMENT ORDER

City of San Diego

Data May 17, 95

of John Doe	" 42-0019 AH	1180118
ina liner	Funeral, date, time MON	5/23 10:30
Vaulfuner Church, Chapel, Graveside	Merkley	Mitchellowary
All Funeral cars must arrive before 3:30 p.r	1	
will be applied and billed to undersigned		
War time veteran		
Lot 121 Grave 4 Row	Section Divi	sion/Block_12_
Grave space & Care Fund	· 100 \	196.0
Additional spaces and care fund		
Opening/Closing & Setup	(", ", ", ", ", ", ", ", ", ", ", ", ", "	165.0
Burial Container	0,99	_50.0
Handling Fees	,4'	
Flower vases - Marker setting fee		
Recording and filing fee		45.0
Sales taxes	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
your d	Total Due	386,0
7 Lavo	id receipt number	
9.	Balan	ce due
I hereby certify I am the	on of remains as above indicated.	bove named decedent I certify and represent emelery harmless from
and this is your authority to make dispositi that I have the right to make this authorization any liability on account of said authorization	ion and I agree to hold Mt. Hope Co n and interment.	
that I have the right to make this authorizati	ion and I agree to hold Mt. Hope Ce n and Interment.	
that I have the right to make this authorization any liability on account of said authorization.  I hereby authorize the interment in lot I	n and interment.	
that I have the right to make this authorization any liability on account of said authorization.  I hereby authorize the interment in lot I	n and interment.	90.00
that I have the right to make this authorization any liability on account of said authorization.  I hereby authorize the interment in lot I hold under deed.	n and interment.  Signature	Zip Code
that I have the right to make this authorization any liability on account of said authorization.  I hereby authorize the interment in lot I hold under deed.	Signature Address City	30 H 20 M



INVOICE DATE

05/23/95

# CITY OF SAN DIEGO, CALIFORNIA

GENERAL INVOICE



San Diego, California 92112 Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO PUBLIC ADMINISTRATOR 5201 A RUFFIN ROAD SAN DIEGO CA 92123 ACCT NO 000952

PERIOD COVERED

APRIL

6-9-95 PAYMENT DATE CA PAYMENT REF NUCH-533E991 AMT PAIDE

PAYMENT DUE

06/22/95

TREASURERS USE ONLY---

FOR INFORMATION CONCERNING YOUR BILLING CONTACT: JOANN WALTS REF NO: E-12245

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 1400 DESCRIPTION OF CHARGES AMUUNT

F 95-101/12 JOHN DOE PAGILBOLIS SERVICES LOT 121 GRAVE 4 SEC 1 DIV 12 126-00 UPENING/CLOSING 165.00 ITNER 50.00 RECORDING FEE 45-00

TUTAL DUE 386-00 NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER, INTEREST OF 14 PER MONTH ON THE UNPAID BALANCE. AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT Adaption ABOVEWhite - Customer Copy . Yellow - Remillance Loby NO. 254057 E-12245

9,351.00

NUMBER OF INVOICES PAID TOTAL AMOUNT PAID

612245	NTY OF SAN DIEGO 100 072 100 072 100 072 67007	77181 000072 77182 000072 77183 000072 77184	04-833699	386.00 165.00 50.00 45.00 126.00	386.00	PAID IN FULL
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## MT. HOPE CEMETERY

## INTERMENT ORDER

MT	, HOPE CEMETERY		
INTE	RMENT ORDE	ER	
need	City of San Diego		
Ne Jud INTE		Date May	17.9
80.		-0	32
You are hereby authorized and instructs	ed, subject to your rules a	nd regulations, to it	nter the remain
of Mary B	alry		
in a	Funeral, date, time		
Church, Chapel, Graveside			Mortuan
All Funeral cars must arrive before 3:30	p.m. of regular work day	or an extra charge	of \$
will be applied and billed to undersigned			AND A CONTRACT
War time veteran	W-377		98
Lot 109 Grave 7 Row	vSection	/ Division/B	11
Lot U-7 Grave How	/Section	/ Division/	0060
Grave space & Care Fund			075
Additional spaces and care fund			
Opening/Closing & Setup			
Burial Container	***************************************		
Handling Fees			
Flower vases - Marker setting fee			
Recording and filing fee			
Sales taxes			
		tal Due	Das a
	Paid receipt number	e + 4/0236	6000
	Paid receipt number 222	Balance due	295
W 15 1 805 -W			974
I hereby certify I am the and this is your authority to make dispo	sition of remains as abov	of the above n	v and represen
that I have the right to make this authorizany liability on account of said authoriza	zation and I agree to hold ation and interment.	Mt. Hope Cemeter	y harmless from
	1000	0 1	
	X MA	MB. S	Jung
I hereby authorize the interment in lot I	MAN	7	
I hereby authorize the interment in lot I hold under deed.	335	Dura.	n#50
hold under deed.	X3356	Dura.	9211-
	3356 - 3356 - 3372	Duras	9211-
hold under deed.	23356 - 23356 - 2312 - 2519	Dura (2)	7211- 7423
hold under deed.	Blanca A 335	Duro.	1428 1428



PY-584 (Rev. 4-95)

#### CITY OF SAN DIEGO, CALIFORNIA MOUNT HOPE CEMETERY



#### OWNERSHIP AND INTERMENT PRIVILEGES

70	MARY B. IVY	for the sum of \$ 895.00	(DOLLARS)
LEGAL	DESCRIPTION Lot 69,	Grave 7, Section 1, Division 11	
AS DES	CRIBED ON PURCHASE ORDER NUM	MBERE-12246	_
endowed essential:	care. Subject to all rules and regulations n s for care and operation of the Cemetery. The	ce of the County Recorder of San Diego County. To be held now in force or may hereafter be adopted, including the rights hereby conveyed for interment privileges shall no case and must be recorded in the office of Mount Hope Cer	th to ingress and egress with the relinquished without the
stone, var be assum vandalism	ults or other improvements of like nature the led by legal owner or representatives of plo	tery Division does not undertake or agree to make any re nat is already, or may hereafter be erected or placed on said at. In no case will the Cemetery Division be responsible for treserves the right to remove any object that detracts fr mitted:	l lot or plot. Cost of same shall r damage, malicious mischief,
	REGUL	ATION MARKER SIZE IS 12" X 24", FLAT 1	MARKER ONLY
-	Cemetery Manager	Real Estate Assa	ets Director

This information is available in alternative formats upon request.

NAME

E-12246 ACCT. NO.



ADDRESS 3	352 Durant St. S.D. 92113 RATING	LIMIT /	CREDIT	BALANCE
DATE	II EMS	DESIT V		- ALLANCE
5-17- 95	Opened Pre-Need Lot	895.00		
9	Lot: 69-7-1-11			
5-17- 95	Downpayment Rec#46236		600.00	295.00
7/18/95	Payment Check# 1/20	225.00		10
4/				
	100			-

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

From Inary long		Date:	5/17	. 19 7-
InPayment of	Address:	0	Dollars (\$ 600	00,
Lot 69 Grave	7 Row Se	ection /	Division Block	11
Invoice No.  Acot. No.  W.O.   E - 19946  BALANCE DUE # 295.00  Pre-Need Lot # At Need   On Acot	MOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Feee Pre-Need Trust	67007 77164 100 77184 100 77181 100 77182 100 77182 100 77183 63033 9022	0
Pre-need Trust Cash Check AC-212 (Rev. 594)		Seles Tex TOTAL PAID	\$ (oOC	00



WHITE...... TO CUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY 527-3400

rom Dary B. July	Address: 33520 urg	Date: 7/1	5.0. 91/1
nPayment of	Rumolke Al minety	Dollars (\$	495.00,
ot 69 Grave	7 Row Se	action /	Division //
NO	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 77184 — 80% Sales 7100 of Lots 77184 — 100 Closing 77181 — 8urts 100 Containers 77182 — 100	179 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Co.	ISSUED BY Carolyn	Hendling Fee 77185 — Recording & 100 Misc. Fees 77185 — Pre-Need 83033 Trust 9022 — Sales Tax 80101 78390 — TOTAL PAID \$	395 00

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

, NIC

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE JUHN	ENT—FIRST (GIVEN) 1B. MIDDLE	IC. LAST (FAMILY)		2. DATE OF BIRTH 3. DATE OF DEATH 4. SEX MONTH, DAY, YEAR 03/26/1995 M
SA. CITY OF DEATH PINE VA	No.	58. COUNTY OF DEATH ENTER STATE SAM	DIEGO	6. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMANT PUBLIC ADMINISTRATOR, KATHERINE HOMARD
	DDRESS OF CALIFORNIA FUNERAL DIRECTOR OR PERSON AS MERICLEY-MITCHELL MORTUARY FTH AVENUE, SAN DIEGO, CA 92103	-	F. LICENSE NUMBER APPLICABLE -119	5201A RUFFIN ROAD  SAN DIEGO, CA 92123  BA. SIGNATURE OF APPLICANT—Person lating permit. BB. DATE SIGNED
ACKNOWLEDGMENT OF A	PPLICANT I hereby acknowledge an applicant that the proposed disposit Section 10376 of the Health and Safety Code, and was authorize	tion stated herem is one of the ed pursuant to Section 7100 of the	dispositions authorized by Health and Safety Code.	Ed Leach   05/19/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI- SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT.	9A. AMOUNT OF FEE PA	0 5 / 1 9	
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	90. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH- IF DEATH OCCURRED IN CAUFORNIA P.O. BOX 85222, SAN DIEGO, CA 9218	IF D		OF DISTRICT OF DISPOSITION— UR IN ANOTHER DISTRICT IN CALIFORNIA
	OSITION(S) CHECK APPLICABLE ITEMS			FOR CORONER'S USE ONLY
A. BURIAL ONCLU B. CREMATION C. DISPOSITION THAN IN A CI D. SCIENTIFIC U	OF CREMATED REMAINS OTHER EMETERY SE	E. TEMPORARY ENVAL F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS!	RNIA DE OF CALIFORNIA	
BURIAL	AT HOPE CEPETERY, 3751 MARKET STREE SAN DIEGO, CA		5/22/95	11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL
CREMATION	12A. NAME AND ADDRESS OF CALIFORNIA CREMATOR	RY	12B. DATE CREMA	TED 12C. MGMATURE OF PERSON IN CHARGE OF CREMATION
SCIENTIFIC	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY I	RECEIVING REMAINS	13B, DATE RECE	IVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY
TRANSIT	14A. NAME AND ADDRESS IN RECEIVING STATE OR C REMAINS OR CREMATED REMAINS ARE TO BE S		14B, DATE SHIPF	PED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	FICIENT TO IDENTIFY PINAL PLACE AND CA DISTRIC		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION OF CREMATED REMAINS DISPOSER —IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



# MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date May 18, 1995

You are hereby authorized a			gulations, to inter the remain
ol	Iella Si	taten	Size of the size o
in a	— Fu	neral, date, time	<u> </u>
Church, Chapel, Graveside			Mortuary
All Funeral cars must arrive t	sefore 3:30 p.m. of	regular work day or an	extra charge of \$
will be applied and billed to u	ndersigned		
,War time veteran	2000		
Lot 174 Grave 8	Row	Section/	_ Division/Block / 2
Grave space & Care Fund			195.a
Additional spaces and care to	ınd		
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Burial Container	1	AID	1900
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Flower vases - Marker settin	TTA	VICTORIAL PROPERTY	115 17
Recording and filing fee	CITY of S	AN DEGO CALIF	12.25
Sales taxe			13.30
V. M. N. U	V	Total Du	1563.3
pour, is	DPaid rec	eiptnumber Pd V	1SA 391.0
1 Y M	1-9-0		Balance due 1172.3
I hereby certify I am the	,~\ ` }	,	of the above named de
and this is your authority to r that I have the right to make I any liability on account of sai	his authorization ar	remains as above ind nd I agree to hold Mt. I	icated. I certify and represen
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Signature of recorded holder of deed	B	SIRHORA	CLIFF IN YIY
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APR	MAY	Mon	th at	AUG							MAF
due da Amou	nt due ale abo nt due due das	ve. If paid	moret	n, or be	30.00	nys )	> s > s		.9.	00	
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CITY						STAT	E		719	7	

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ue da	ite abo	ve	paid on	MC201-234			S		49.	.00	
	nt que fue da		more t	nan	8	lys	5		1		7
	E			A	mount	Receiv		8	= 81		
NAM											
V.SACK	RESS	<u> </u>									

Section 1

Send or bring one coupon with each remittance COUPON DO NOT MAIL ENTIRE BOOK ACCOUNT No. E-12247 re-Mand Lot & Valia Stateu Trust. 204 M. Brazel Ave Marional City, 64 91950 (174-2-12) Month and Day Due Indicated Below AUG SEP APR IUN JUL OCT NOV DEC JAN FEB MAR MAY Amount due when paid on, or before, 49,90 due date above Amount due if paid more than... days after due date above. Amount Received NAME ADDRESS STATE 7IP CITY

check ( / ) if this is new address

Amount du	Mon	th ar								
Amount du			nd De	y D	ue In	dicat	ed B	elow		
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due date ab Amount du after due d	ove.	moreti	100000000	100 E	ys	> s > s		49.	.60	
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AC	NOT	MAIL T No.	ENTII Entii	RE BO	OK 47	ittano	re-	2 000	d i	AST THE	4
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ifter i	due da	te abo	vē.			3.	\$		-8		
NAM	E			A	mount	Receivi	ed \$		-		
									200		
	RESS	4									

Send or bring one coupen with each remittance COLIPON DO NOT MAIL ENTIRE BOOK ACCOUNT No. THE SHAPE WATER Vella Statut Prest 204 N. Drewel Ava Mational City. (174-2-1-12 Month and Day Due Indicated Below FEB MAR APR MAY JUN JUL SEP OCT NOV DEC JAN AUG in Amount due when paid on, or before. due date above Amount due if paid more than. days after due date above Amount Received NAME ADDRESS ZIP STATE CITY

□ check ( / ) if this is new address

Send or bring one coupen with each remittence COUPON DO NOT MAIL ENTIRE BOOK ACCOUNT No. E-12247 Valla Staten Trust 204 M. Sremel Ave Mactonal City, & 6174-2-1-12 Month and Day Due Indicated Below AUG OCT NOV DEC JAN FER MAR APR MAY HIM HILL SEP 16 Amount due when paid on, or before. due date above. days Amount due if paid more than after due date above. Amount Received NAME ADDRESS **ZIP** CITY STATE

check ( / ) If this is new address

DO ACI	NOT COUN La	MAIL T No.	ENTIR CAR	1 4	OK 43	PI	750	OUP	ON ad a	2 demo	3
		Mon	th as	nd Di	ay De	ue in	dical	ed E	lelow	6	
NOV	DEC	JAM	FEB	MAR	APR 10	MAY	JUN	JUL	AUG	SEP	OCT
due da	nt due		moret	h, or be	fore,	lys	> s		49	.00	
NAM	E RESS	V.		An	nount l	Receive	ed S				
YEAR ST	100000	90%				VANCE DAYS	200		200	100	

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ADD	-		-	-		STAT	-	-	ZIP		-

#### OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA

arr or the bibat, order order

46788

MOU	H TV	OPE	CEM	ETER
		527-3	400	

Vella Glaten	nue orlow	pate: 11/ xel /ve ,	Dolaral (	11900	2195 1
n Payment of Pi	elved lot of Trus	400	DIV	Della ision 12	
nvoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots	67067 77184 100 77184	49 00	2
N.O. E 18247		Opening/ Closing Burisi Containers Handling Fee Recording & Misc. Fees	100 77181 ——————————————————————————————————		
Pre-Need Lot At Need On Acct Ore-need Trust Cash Check O	ISSUED BY HUNGING	Pre-Need Trust Salee Tax "YOTAL PAID	63033 9022 e0101 76390	49 01	

Acct. No. ...



From: Vella Staten

#### MOUNT HOPE CEMETERY 527-3400

Row.

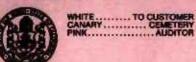
NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.

ISSUED BY In Clark

	Date: Ju	ne	6	10.95
-	of Ave. N	41.0	49. 0	950
7		ollers (\$	49. W	2_1
-				
	,		Division	10
k	ection/	10	- Block -	12
1	CREDIT 20% Sales Care	67007 77184 —		
1	50% Sales of Lots	100	49	00
١	Opening/ Closing	100 77181 —	A. Land	
1	Burial Conteiners	100 77182 —		-
١	Handling Fee	77185-		-
١	Recording & Misc. Fees	77183 -		-
ı	Pre-Need Trust	63033		
١	Sales Tex	60101 78390		
ı	TOTAL PAID	A	416	m

ALANCE DUE			
re-Need Lot 📮	At Need Cash	000	Check J
>212 (Rev. 5-94)			4807

Grave



From: Vella Stater address: 204 n. Drepel are, national Josty-riese & no/100 Dollars (\$ 49.00)					
Lot_174 Grave	2. Row Se	ection	Division 15		
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 – 80% Sales 100 of Lots 77184 –	49 00		
W.O E - 12 247		Opening/ 100 Closing 77161 – Burlel 100 Containers 77162 – 100			
Pre-Need Lot At Need On Acct		Handling Fee 77185 - Hecording 6 100 Mileo, Feee 77183 - Pre-Nied 53233 Trust 8022 -			
Pre-need Trust Cash Check Sy	ISSUED BY Rough	Below Tax 60101 78390 - TOTAL PAID \$	49 00		

CITY OF SAN DIEGO, CALIFORNIA

46402

# WHITE TO GUSTOMER CANARY CEMETERY PINK AUDITOR

From: Wella Staten	Address: 204 4/. 10	Dete: 1-	Hatura Pet
In Payment of	Forty-nine	Dollars (\$	49.00
Lot 1944 Grave	2 Row Se	ction/	Division /2
Invoice No.	NOTYALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE.	CREDIT 87007 20% Salos Care 77184 — 80% Salos 100	49 00
W.O. E-12347		of Lots 77184 — Opening/ 100 Closing 77181 — Burlel 100 Containers 77182 —	
BALANCE DUE		Handling Fee 77185 — Recording & 100 Misc. Fees 77185 —	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		Pre-Need 63003 Trust 9022 — Sales Tax 60101	
AC-212 (Rev. 544) # 4528	ISSUED BY BARBURY	TOTAL PAID \$	49 00



From: Villa Staten	Address: 204 M. Drege	Date:	ational C	19.95 4.CA9
In part payment of pre-		Doll	lars (\$ <u>49.00</u>	<u>S</u>
Lot 174 Grave	2 Row Se	ection/	Division 1	2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	80% Sales	87007 77184 100 49	00
w.o. E-13247		Opening/ Closing 7 Buriel	100 17181 100 17182	
BALANCE DUE		Recording & Misc. Fees	100 77186	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		Salos Tax	8022 8022 90101 76390	
AC-212 (Rev. 594) 4888	ISSUED BY	TOTAL PAID	* 49	00

#### OFFICIAL RECEIPT

CITY OF BAN DIEGO, CALIFORNIA

46584



From: Vella Staten	Address: 204 N Dre	Date:	Chula Vis	1095
Forty-nine &			re (\$ <u>49.00</u>	
Lot 174 Grave	2 Row Se	ection	Division /	2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	20% Sales Care 77 80% Sales	1007 100 100 100 104	00
W.O. E-12347		Opening/ Closing 77 Burist	100 181 100 182	
BALANCE DUE		Handling Fee 77	100	
Pre-Need Lot At Need On Acct On Pre-need Trust Cash Cash Check Of		Sales Tax 80	033 022 101 380	
AC-212 (Rev. 5-64) 4 8 74	ISBUED BY JOUCE	TOTAL PAID	* 49	00

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

	110	527-3400		-		
From Tella Staton	Address: 2	OH WA. D	revel 0	-4	ottei.	9195
Forty- nine -	7	0 +0	, (I)	ollars (\$ .	49.00	2_,
In Naviat. Payment of Pay	- need	- XOC9	Maus	t	1000	
Lot 174 Grave _	2	Row	Section/		Division Block	12
Invoice No.	NOT VALID FOR PURPOS "PAID" IN THIS SPACE.	ESTATED UNLESS STAMPED	CREDIT 20% Sales Care 80% Sales	67007 77184 —	49	00
Acct. No	and the same		of Lots Opening/ Closing	77184 — 100 77181 —		
BALANCE DUE			Burtal Containers	77182 — 100		
They will be not placed			Recording & Misc. Fees	77165 — 100 77163 —		
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	1 07.1	NAME OF STREET	Pre-Need Trust Sales Tax	65053 9022 — 00101 76390 —	OF PERSON	
AC212 (Rev. 694) 4966	ISSUED BY	eloner.	TOTAL PAID	Card.	49	00

### OFFICIAL RECEIPT

WHITE..... TO CUSTOMER CANARY ..... CEMETERY PINK...... AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA

46873

MOUNT	HOPE	CEME	TERY
	527-3	400	

	527-3400	10/10	or
From: Vella Staten	Address DY N. Droxe	Date: 12/6 1 Are Natana	Cc+1 Cn 91950
Forty nine o	2/07)	Dollars	(s 49.00)
In_ Part Payment of PMC	Needlot of Trust		
Lot 174 Grave	A8	Section /	Division 12
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID! IN THIS SPACE.	CREDIT 6700 20% Sales Care 7718 80% Sales 10	4
Acet. No.	of and product of	of Lots 7718 Opening/ 10	- //   -
W.O. E 199417		Ciceling 7718 Burial 10	
BALANCE DUE		Containers 7718 10 Handling Fee 7718	
		Recording & 10	0
Pre-Need Lot 3 At Need 0 On Acct 0	1	Pre-Need 8303 Trust 902	
Pre-need Trust/ Gash Gheck G	Show hall -	Sales Tax 8010 7839	1/0
AC-212 (Rev. 6-04)	ISSUED BY TWO WAY	TOTAL PAID	4900

OFFICIAL RECEIPT  WHITE TO CUSTOMER CANADAY CEMETERY PINK AUDITOR  From: Vella Staten	CITY OF SAN DIEGO, CALIFORNIA  MOUNT HOPE CEMETERY 527-3400  Address: 204 1. Dru	plan	Notes (\$ 4	mal E	96	9195
In_Payment of Property of Prop	ROWSE  MOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 50% Sales of Lots		Division Block	17 00	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 8-94)	IBBUED BY J. Dudth	Opening/ Closing Buriel Containers Hearding Fee Recording & Misc. Fees Pro-Need Trust Sales Tax	100 77181 100 77182 100 77185 100 77185 100 77183 63033 8022 60101 78300	37	00	

J

CITY OF SAN DIEGO, CALIFORNIA

47127



From: Vella Staten	Address 204 North Dr	edel and	Lat cita	91951
Sint Linkow House	On a 100	0	ollars (\$ 731.30	
In July Payment of I	Vella States		00992	7_
Lot 174 Grave	RowSe	ection	Division Block	13
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Seles Care 80% Seles of Lots	67007 77184 100 77184	
W.O. E - 12247		Opening/ Closing Buriel Containers	100 77161 100 77182	
BALANCE DUE		Handling Fee Recording & Misc. Fees	77165	
Pre-Need Lot At Need On Acct	and the state of t	Pre-Need Trust	63033 73	30
AC-212 (Rev. 5-94) Cash Check 3909	rathfull . L va causes	Sales Tax TOTAL PAID	78390 731	30

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 5-18-95

lines Kuts	
na Vadeliner	Funeral, date, time TUES 5 3 175 17
Church Chapel, Graveside Church	tgraveside: Kagadale Mortuary
All Funeral cars must arrive before 3:30 p	o.m. of regular work day or an extra charge of \$ 150
will be applied and billed to undersigned.	& title of englin
War time veteran Kmo	0
Lot 55 Grave 3 Row	- satisful 2 Division/Bleek //
How .	7959
Grave space & Care Fond	
Additional spaces and eare fund	WW /
Opening/Closing & Setup	375°°
Burial Containe	1900
Handling Feet	145°°
Flower vases Marker setting fee	
Recording and filing lea	4500
Sales taxes	13.36
66600002 == 101	Total Due
	raid receipt number Rec # 410242 1000-00
$\sim$ '	5/22/2/
(4)	Lic 446257 \$13.30
hereby certify I am the	of the above named dependent itigat of remains as above indicated. I certify and represent
hat I have the right to make this authorized any liability on account of said authorized	ation and I agree to hold Mr. Hope Cemetery harmless from
sty liability on account of said autionizati	
hereby authorize the interment in lot I	x toher dilingen
nold under deed.	5960 D Monday hour
	199114
THE PARTY CONTRACT OF	Car Leg CL SII
signature of recorded neight of deed	
reginatures at recurratio notions of detail	X67-527-1727
Bigmakure of recorded holder of dead	X 6 7-507-1707
Nork Order # E 12248	falsphore #

#### MT. HOPE CEMETERY

PY-1012 (11-89)

## w.o. #\_ E- 12248

## NOTE

V- 5	563.30	San Die	go, California	May	19	1995
51 Market Street, Sa h interest from	n Diego, CA 9210	the sum of Fin June 23	e Hundred :	Suxty Three	\$ 39/100 DO	OLLARS
crue at the rate indic I be liable and cons turity, and waives p rson who signs this ntained herein. If an	ated above. Principents to renewals, reresentment, dema note agrees that repairs agrees that repairs agrees that repairs action be institu-	pal and interest are pare pare pare pare pare pare pare	ayable in lawful mor tensions of time for he right to assert a d against his/her se	ney of the Unit r payment here ny statute of li sparate proper	ed States. The of before, at mitations. A ty for any ob	e maker t or after married oligation
authorizes the NT NAME PATE	removal of any rem	ains from a plot for w	hich the purchase p			
֡֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜	the rate of 12 percent should this note not be liable and construity, and waives pron who signs this note in the rate indicated	th interest from	inty days after date for value received, the undersigned make at Market Street, San Diego, CA 92101, the sum of Fighth interest from August 23 the rate of 12 percent per annum, payable on demand.  Should this note not be paid when due, it shall thereafter be true at the rate indicated above. Principal and interest are particularly, and waives presentment, demand and protest and it is son who signs this note agrees that recourse may be held intained herein. If any action be instituted on this note, the y fix as attorney's fees.  Part II, Chapter I, Article 2, Paragraph 7528 of the authorizes the removal of any remains from a plot for what the particular of the particular and the particular of the payable of the payabl	In Market Street, San Diego, CA 92101, the sum of Fire Humania.  The interest from June 23, 1995  The rate of 12 percent per annum, payable on demand.  Should this note not be paid when due, it shall thereafter bear interest on the partie at the rate indicated above. Principal and interest are payable in lawful mole be liable and consents to renewals, replacements and extensions of time for turity, and waives presentment, demand and protest and the right to assert a son who signs this note agrees that recourse may be held against his/her sentained herein. If any action be instituted on this note, the undersigned promity fix as attorney's fees.  Part II, Chapter I, Article 2, Paragraph 7528 of the State of California authorizes the removal of any remains from a plot for which the purchase part of the state of the	intry days after date for value received, the undersigned maker promises to pay San Diego City of Market Street, San Diego, CA 92101, the sum of Further Landard Surty Thrue the interest from	intry days after date for value received, the undersigned maker promises to pay San Diego City Treasurer, or in Market Street, San Diego, CA 92101, the sum of Furthundrid Surty Thrue 3/100 Decided in Interest from



From Patricia Leverator	- Address: 5960 DA	Date: III	rous	25 dane	8.9
- Five Hundre	of Sixty Street 39/10	en Ru	ollars (\$ _	563.	30,
Lot 50 Grave	3 Row S	ectione	2	Division /	7
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing	87007 77184 — 100 77184 —	170	m
W.O		Buriel Containers Handling Fee Recording &	77181 — 100 77182 — 100 77185 —	190	888
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check A	ISSUED BY Fn. Clark	Miso. Fees Pre-Need Trust Salas Tax	77183 — 63033 9022 — 60101 76390 —	13	30
AC-212 (Rev. 604) # 165477	ISSUED BY 211 CECOCI	TOTAL PAID		563	30



		Date:	5-19	1	95
rom: Helen Fralley	Address: 1401 99+h	St. S.D	.9216	12	
On	. Showard & alion	D	ollars (\$ 4	av.a	0,
Payment of	nterment of Hel	in Ku	ch to	d	
					La long
ot 50 Grave	3 Row — Se	sction		Division /	_
wolcê No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184	159	00
ect. No.		60% Sales of Lots Opening/	77184 ———	10 30	8
1.0. E-12248		Closing Burial	100	200	
MALANCE DUE # 563.30		Containers Handling Fee	77182		
		Recording & Misc. Fees Pre-Need	100 77183 ———		_
re-Need Lot At Need On Acct re-need Trust Cash Check		Trust Sales Tax	9022		
C212 (Rev. 544) 0787W1289	ISSUED BY In. Clark	TOTAL PAID	78390	1,00	100
			-	,	

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE Helen	NT-FIRST (GIVEN) 18. MIDDLE Ruth	1C. LAST (FAMILY)	CUS Hamilio Denhara C. 2000	2. DATE OF BIRTH 3. DAT 03/02/1923 05/	TE OF DEATH 4. SEX
SA. CITY OF DEATH	lego	58. COUNTY OF DEATH ENTER STATE San Diego		NAME, RELATIONSHIP, FULL MAILING A OF INFORMANT ATTICLE A. LIVINGST	DORESS AND ZIP CODE
TA. TYPED NAME AND A	poress of california—funeral director or presented Mort.; 5050 Federa. San Diego. CA	TRISON ACTING AS SUCH 78. CAL	F. LICENSE NUMBER APPLICABLE	960 Old Memory Lane San Diego. CA 92114  A SIGNATURE OF APPLICANT—Person BANG	
<ul> <li>ACKNOWLEDGMENT OF A</li> </ul>	I beenly adventates as addited that the new	osed disposition stated herein is one of the	dispositions authorized by	Rebbeld Sline	05/19/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH F SIONS OF THE CALIFORNIA HEALTH AND SAFETY AND IS THE AUTHORITY FOR THE DISPOSITION SPECIAL THIS PERMIT.  NOTE: THIS PERMIT GIVES NO MIGHT OF DISPOSAL OUTSIDE OF CALL	\$7.00	857457495 All	SUED BC. SIGNATURE OF LOCAL REC	9506796
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	9D. ADDRESS OF REGISTRAR OF DISTRICT OF F DEATH OCCURRED IN CALIFORNIA Vizal Records; P.O. Box San Diego, CA 9218	85222 F D		F DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CALIFORNIA	
B. CREMATION		E. TEMPORARY ENVAL	RNIA	i. DISPOSITION PENDING (Name and Address)	9—REMAINS LOCATED A
BURIAL	11A NAME AND ADDRESS OF CALIFORNIA CE Mt. Hope Cemetery; 375 San Diego, CA		118. DATE BURIED	11C. SIGNATURE OF PERSON IN	CHARGE OF BURIAL
CREMATION	12A. NAME AND ADDRESS OF CALIFORNIA CE	Dall	128. DATE CREMATE	120 SIGNATURE OF PERSON IN C	CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND ADDRESS OF CALIFORNIA FA	CILITY RECEIVING REMAINS	13B. DATE RECEIVE	D 13C. SIGNATURE OF PERSON IN	CHARGE OF FACILITY
TRANSIT	14A. NAME AND ADDRESS IN RECEIVING STAT REMAINS OR CREMATED REMAINS ARE 1		148. DATE SHIPPED	14C. ADDRESS AND SIGNATURE OF PLACING WITH THE CARE	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEAREST POINT ON SHORELINE, FICIENT TO IDENTIFY FINAL PLACE AND CA		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	15D. LICENSE NUMBER OF CREMATED REMAINS DISPOSER —IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

# Casket Size

PY-593 (Rev. 8-92)

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date May 19, 95

	as PH# 1114099 GNFA
n a	Funeral, date, time TUES 5/23 @2:30g
	14 only thenwood Moreus
All Funeral cars must arrive before 3:30 p.r	m. of regular work day or an extra charge of \$_150
will be applied and billed to undersigned.	A SAMO ROSSO CONTRACTOR CONTRACTO
War time veteran	
Lot	Section 5 Division/Block 7
Grave space & Care Fund	.40-
Additional spaces and care fund	
Opening/Closing & Setup	
Burial Container	
Handling Fees	
Flower vases - Marker setting fee	
Recording and filing fee	45
Sales taxes	
	Total Du (310.00) 3 1. (
Pai	id receipt number
	Balance due
hereby certify I am the	of the above named deceder
and this is your authority to make dispositi	on of remains as above indicated. I certify and represe ion and I agree to hold Mt. Hope Cemetery harmless fro
and this is your authority to make dispositi hat I have the right to make this authorization any liability on account of said authorization hereby authorize the interment in lot I	on of remains as above indicated. I certify and represe ion and I agree to hold Mt. Hope Cemetery harmless fro
and this is your authority to make dispositi hat I have the right to make this authorization any liability on account of said authorization hereby authorize the interment in lot I	on of remains as above indicated. I certify and represei ion and I agree to hold Mt. Hope Cemetery harmless from and interment.
and this is your authority to make dispositi hat I have the right to make this authorization any liability on account of said authorization hereby authorize the interment in lot I hold under deed.	on of remains as above indicated. I certify and represei ion and I agree to hold Mt. Hope Cemetery harmless from and interment.  Signature
and this is your authority to make dispositi hat I have the right to make this authorization any liability on account of said authorization hereby authorize the interment in lot I hold under deed.	on of remains as above indicated. I certify and represei ion and I agree to hold Mt. Hope Cemetery harmless from and interment.  Signature
and this is your authority to make dispositi that I have the right to make this authorizati	on of remains as above indicated. I certify and represeition and I agree to hold Mt. Hope Cemetery harmless from and interment.  Signature  Address  Cay Zp Co.

CITY OF SAN DIEGO, CALIFORNIA "

GENERAL INVOICE

Make Remittance Payable to CITY TREASURER

P.O.Box 2289 an Diego California 92112

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO PUBLIC ADMINISTRATOR 5201 A RUFFIN ROAD SAN DIEGO CA 92123 ACCT NO 000952

USE ONLY TREASURERS 7-17-9 BY: PAYMENT REF NO Q4-859568

INVOICE DATE 05/26/95

PAYMENT DUE 06/25/95

PERIOD COVERED APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT: JOANN WAITS REF NO: E-12249 DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3

DESCRIPTION OF CHARGES

AMOUNT

LANI CASILLAS PARII76099 SVCS LOT 79 GPAVE 13 SEC 5 DIV 7 OPENING/CLOSING RECORDING FEE

75-00

90.00

TOTAL DUE 210.00 PLEASE REMIT PAYMENT PROMPTLY. NOTICE: PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER. INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE. AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT ABOVE White - Customer Copy . Yellow - Remittance Copy

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	ENT-FIRST (GIVEN)	1B, MIDDLE	1C. LAST (FAMILY)	sillas		13/1995 F
SA CITY OF DEATH	ego		68. COUNTY OF DEATH	H-OUTSIDE CALIF., 8.	NAME, RELATIONSHIP, FULL MAILING OF THE HOWARD: D	
' Greenwo	od Mortuary		1/4	F APPLICABLE 9	201-A Ruffin Road To Diego, GA 92123 SIGNATURE OF APPLICANT—Physical Lab	<u> </u>
*ACKNOWLEDGMENT OF A			ed disposition stated hereis is one of the as authorized pursuant to Section 7100 of th	dispositions authorized by	mac Moste	05/22/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	ED IN ACCORDANCE WITH PROBING HEALTH AND SAFETY OF FOR THE DISPOSITION SPECIAL DISPOSITION OF CALFO	9A. AMOUNT OF FEE P.	05/22/	SUED, 9C. SIGNATURE OF LOCAL RE	EGISTRAR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL POSITION.	P.O. BOX	GISTRAR OF DISTRICT OF DESCRIPTION O			DISTRICT OF DISPOSITION— N ANOTHER DISTRICT IN CALIFORNIA	7
HORIZED DISP	OSITION(S) CHECK A	PLICABLE ITEMS			FOR CORONER	'S USE ONLY
A. BURIAL (INCL)	LIDES ENTOMBMENT)		I E TEMPOHARY ENVA			
B. CREMATION	Ht. NAME AND A	ORESS OF CALIFORNIA CEN		ANA by	I. DISPOSITION PENDIN (Name and Address)	
B. CREMATION C. DISPOSITION THAN IN A C D. SCIENTIFIC U	of CREMATED REMEMETERY SE 11A NAME AND A Ht. Hope C 3751 Marke	ORESS OF CALIFORNIA CEN	F. DISINTERMENT G. SHIP IN TO CAUFO H. TRANSIT TO OUTS METERY  Diego, CA 92102	IRMIA I	11C. SIGNATURE OF PERSON IN	CHARGE OF BURIAL
B. CREMATION C. DISPOSITION. THAN IN A C	OF CREMATED REMEMERY SE  11A NAME AND AL  Mt. Hope C  3751 Marke	oress of California Ceremetery t Street, San I	F. DISINTERMENT G. SHEP IN TO CALIFO H. TRANSIT TO OUTS METERY Diego, CA 92102 EMATORY	IDE OF CALIFORNIA  118. DATE BURNED  128. DATE CREMATED	11C. SIGNATURE OF PERSON IN	CHARGE OF BURIAL CHARGE OF CREMATION
B. CREMATION C. DISPOSITION. THAN IN A C D. SCIENTIFIC U  BURIAL  CREMATION SCIENTIFIC	OF CREMATED REMEMETERY SE  11A. NAME AND AL  12A. NAME AND AL  13A. NAME AND AL  14A. NAME AND AL	DRESS OF CALIFORNIA CEN EMELETY E Street, San I DRESS OF CALIFORNIA CRE	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS METERY  Diego, CA 92102  EMATORY  CILITY RECEIVING REMAINS  E OR COUNTRY WHERE	IDE OF CALIFORNIA  118. DATE BURNED  128. DATE CREMATED	11C. SIGNATURE OF PERSON IN 12C. SIGNATURE OF PERSON IN	CHARGE OF BURIAL  CHARGE OF CREMATION  CHARGE OF FACILITY  OF PERSON IN CHARGE

DPY 2

м	T. HOPE CEME	TERY		:4
INTI	ERMENT O	RDER		
second burial of	City of San Die	go		
the Crypt first burial 1989	7	Date_	may	19,199
		university and the second of the second		ate con a cross various
You are hereby authorized and instruc	11	Communicate seculiare	ations, to inter	ine remains
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All Funeral cars must arrive before 3:3	The second secon		A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
will/be applied and billed to undersigne	CONTRACTOR OF THE PROPERTY OF THE PERSON OF	orn only or union	an armige of t	
War time veteran X	u. <u></u>			~
A 200				10
Lot 5070 Grave Ro			Division/Block	10
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Additional spaces and care fund			_	B
Opening/Closing & Setup	ere- Tree	d E-82	92)_	0
Burial Container.	re- treed	E-82	76	0
Handling Fees			1-1 	0
Flower vases - Marker setting fee	******************************			0
Recording and filing fee	re-Freed	1 E-86	92	0
Sales taxes				S
nterfund Transfe	n	Total Due		Ø
Ptyped 5/26/	Paid receipt numb		alance due	0
I hereby certify I am the_ 5	· 24 –	of U	ne above name	d decedent
and this is your authority to make disp that I have the right to make this authoriany liability on account of said authoriz	rization and I agree	to hold Mt. Hope	ed. I certify an e Cemetery har	d represent rnless from
	V	Treel a	110	0
I hereby authorize the interment in lot i hold under deed.	Bignatur	The y	14-2	
	Address	825	West	FF
Signature of recorded holder of deed	- X1	AMS	5A	70 Cou
	Telephor	466-	-917	9
- 12250	Invoic	xe #		
Work Order # E	Acct.	#_ 15		

PY-593 (Rev. 8-92)

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMILY)			E OF DEATH 4. SEX
LAWRENCE	GIS SIGNATURE STATE OF	LESLEY	HOLDEN		05/18/1909 05/1	18/1995 M
SA. CITY OF DEATH			68. COUNTY OF DEAT	H-OUTSIDE CALIF., 6	NAME, RELATIONSHIP, FULL MAILING A	DDRESS AND ZIP CODE
EL CAJON			SAN DIEGO		THEODORE J. HOLDEN	SON
		A—FUNERAL DIRECTOR OR PE JARY , EL CAJON, CA	92020 E		5825 WOLFE COURT LA MESA, CA 91942 A SKINSTURE OF APPLICANT	pegni, 68, DATE SIGNED
ACKNOWLEDGMENT OF AF	PLICANT I bereby a Section 10	cknowledge as applicant that the propo 175 of the Health and Safety Code, and v	used disposition stated herein is one of the mas authorized pursuant to Section 7100 of th	dispositions authorized by the Health and Safety Code.	Jundra Ha	₹ 05/20/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	MED IN ACCORDANCE WITH P ORNIA HEALTH AND SAFETY Y FOR THE DISPOSITION SPEC DIRECT OF DISPOSIAL OUTSIDE OF CALL	CODE CIFIED 7 00	98. DATE PERMIT I 05/22/199 BENDRA HE		ISTRAR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TO SHOW FINAL YOSITION.	PO BOX 852		1 **		OF DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CALIFORNIA	
10. AUTHORIZED DISPO					FOR CORONER'S	S USE ONLY
B. CREMATION C. DISPOSITION ( THAN IN A CE D. SCIENTIFIC US	SE .	ODRESS OF CALIFORNIA CE	E. TEMPORARY ENVA	ORNIA .	(Name and Address)	CHARGE OF BURIAL
BURIAL		T ST., SAN DIE	60. CA	303/95	1. Ollait	
CREMATION	The second secon	DORESS OF CALIFORNIA CE	The state of the s	12B. DATE CREMATE	D 12C. SIGNATURE OF PERSON IN C	HARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND AC	DORESS OF CALIFORNIA FA	CILITY RECEIVING REMAINS	13B. DATE RECEIVE	13C. SIGNATURE OF PERSON IN	CHARGE OF FACILITY
TRANSIT		DORESS IN RECEIVING STAT CREMATED REMAINS ARE 1		14B. DATE SHIPPE	14C. ADDRESS AND SIGNATURE CO. OF PLACING WITH THE CARE	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, ENTIFY FINAL PLACE AND CA	OR OTHER DESCRIPTION SUF- DISTRICT OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	150. LICENSE NUMBER OF CREMATED RE- MAINS DISPOSER —IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

#### MT. HOPE CEMETERY

## INTERMENT ORDER

You are hereby authorized and of Pam_Mitch					
in a					
Church, Chapel, Graveside					
All Funeral cars must arrive bek					The state of the s
will be applied and billed to under			STATE OF THE STATE OF		
90% of 500 cm					
War time veteran			1020		(20)
Lot 352 Grave	Row	Section	3	_ Division/BIS	as <u>8</u>
Grave space & Care Fund			*******		\$300.00
Additional spaces and care fund	l				
Opening/Closing & Setup		·			
Burial Container					
Handling Fees					
Handling Fees					
Flower vases - Marker setting for	<b></b>				
Flower vases - Marker setting for Recording and filing fee					
Flower vases - Marker setting for Recording and filing fee					1
Flower vases - Marker setting for Recording and filing fee					1
Flower vases - Marker setting for Recording and filing fee			Total Due	0276	1
Flower vases - Marker setting for Recording and filing fee			Total Due		1
Flower vases – Marker setting for Recording and filling fee	Paid  re dispositios authorizatio	receipt number	Total Due	P27(P Balance due	\$300.00
Flower vases – Marker setting for Recording and filling fee	Paid  re dispositios authorizatio	receipt number	Total Due	P27(P Balance due	\$300.00
Recording and filing fee	Paid  e disposition authorization	receipt number	Total Due	P27(P Balance due	\$300.00
Recording and filing fee	Paid  e disposition authorization	receipt number	Total Due	P27(P Balance due	\$300.00 300.00  Remed decedent and represent harmless from
Flower vases – Marker setting for Recording and filing fee	Paid  e disposition authorization	receipt number	Total Due	P27(P Balance due	\$300.00
Recording and filing fee	Paid  e disposition authorization	receipt number	Total Due	P27(P Balance due	\$300.00 300.00  Remed decedent and represent harmless from
Flower vases – Marker setting for Recording and filling fee	Paid  e disposition authorization	receipt number	Total Due	P27(P Balance due	\$300.00 300.00  Remed decedent and represent harmless from
Flower vases – Marker setting for Recording and filing fee	Paid  ce disposition authorization uthorization	n of remains as n and I agree to and interment	Total Due  R - 40  above Indichold Mt. Ho  R 10a  Cay	P27(P Balance due	\$300.00 300.00  Remod decedent and represent harmless from



From: Para Mutchell Three Rendred In Tell. Payment of Pre-	111101	/	30,1945 Caion 017 920 10(\$ 300.00)
Lot 353- Grave _	RowSe	ction_3	Division 8
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	20% Sales Care 77 80% Sales of Lots 77 Opening/ Closing 77 Burial Containers 77 Handling Fee 77 Recording & Misc. Fees 77	1007 (60 00 100 2 4 0 00 100 100 100 100 100 100 100 100
Pre-Need Lot Of At Need On Acct Pre-need Trust Cash Check Of AC-212 (Rev. 504)	ISSUED BY Rauch	Trust 9	300 00





THE CITY OF

## SAN DIEGO

MT. HOPE CEMETERY • 3751 MARKET STREET • SAN DIEGO, CALIFORNIA 92102

Real Estate Assets Department Business hours 8 a.m. to 4 p.m.
527-3400 Monday through Friday • Gates open daily

August 8, 1996

Pam Mitchell 538 Danny Street El Cajon, CA 92021

> Re: Pre-need Lot for Patricia Gaddis E-12251

Dear Mrs. Mitchell:

I am following up on our letter to you dated May 30, 1995, regarding the pre-need Lot you purchased for Patricia Gaddis, Lot 352; Section 3; Division 8.

Our records show that we have not received the original Internment/Purchase Order with your signature on it. Please sign it and return it back to us.

If you have any questions, please do not hesitate to write or contact me at (619) 527-3400.

Sincerely,

Catina M. OWGEN

Clerical Assistant II

Enclosures



F-12251



THE CITY OF

## SAN DIEGO

MT. HOPE CEMETERY • 3751 MARKET STREET • SAN DIEGO, CALIFORNIA 92102
Real Estate Assets Department
Business hours 8 a.m. to 4 p.m.
527-3400
Monday through Friday • Gates open daily

May 30, 1995

Pam Mitchell 538 Danny Street El Cajon CA 92021

Dear Mrs. Mitchell:

Enclosed is the receipt for the pre-need lot you purchased for Patricia Gaddis.

Also enclosed is the original copy of the Pre-Need Interment Order for your signature by a red X at the bottom. Would you please sign this and return it to us.

Thank you.

Sincerely,

Jane K. Rauch

Clerical Assistant II

jkr

Enclosures



## L-34 W-14 Duth-121

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date May 23,95

	Funeral, d	ate, time	Wod	5/24	200
Shurch Chapel Graveside Charles					Mortuan
All Funeral cars must arrive before 3:	30 p.m. of regular	work day	or an e	ctra charge o	13/50
<ul> <li>will be applied and billed to undersign</li> </ul>					C.80*******
War time veteran	11/8=		= 77		
Lot 2799 Grave Ro			1		. 0
Lot Z/17 Grave A	sws	ection		Division/Bi	- Stranger -
Grave space & Care Fund					100,00
Additional spaces and care fund					
Opening/Closing & Setup					125.00
Burial Container					
Handling Fees				ommonement.	
Flower vases - Marker setting fee			************	********	
Recording and filing fee					45.00
Sales taxes					
					ma-
	Paid receipt nu		4624		270.0
	r and receipt no			salance due	82
I hereby certify I am the K Fa	Llagge		2.5		10
and this is your authority to make dis- that I have the right to make this author	vization and I agr	ee to hold	e indica	ted. I certify	arned deceder and represer harmless from
any liability on account of said authori	V	ent Set	12	2	
any liability on account of said authori hereby authorize the interment in lot hold under deed.	V	81 1179	E,	MAdis	0203 010 NO
any liability on account of said authori I hereby authorize the interment in lot hold under deed.	V	8 1 1179 ≥ 2 C 6	E, jor	MAdis CA Sqqq	920 Z

## WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

two hundred	RA Address: 1	1179, EAST	Modison,	1200, L	22- 240.0	
full Payment of	inserment.	9	Levi	Heras	PRQ	
2799 Grave		_ Row	Section	1	Division Block	9
oicé No.	NOT VALID FOR PURPOSES	TATEDUNLESS STAN	PED CREDIT 20% Sales C	67007 Care 77184 —	20	100
	PAID IN THIS SPACE		80% Sales of Lots	100	80	00
E 12252			Opening/ Closing	100 77181 —	125	00
) E 1222			Buriel Containers	100 77182 —	100	
LANCE DUE			Handling Fi	100		
			Recording a		45	00
Need Lot At Need On Acct			Pre-Need Trust	63033 9022 —	SUPPLIES.	
need Trust Cash Check	1/ R	0.10	Sales Tax	60101 78390 —	511	
212 (Rev. 5-94)	ISSUED BY V. 120	eloplu	TOTAL PAID		270	00

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	STANCE INVOLVE	IC. LAST (FA	MILY)		esocreti ve	2. DATE OF BIRTH		OF DEATH	4. SEX
LEVI		-			ERRERA			03/05/1995	05/18/	1995	M
SAN DIEGO				58. COUNTY		OUTSIDE CALIF.,		RELATIONSHIP, FULL EOGUANT LAGO HERRERA-		ress and zi	P CODE
7A. TYPED NAME AND AD MEDTURE:	DORESS OF CALIFORN					PPLICABLE	1179 EL (	9 E MADINON AVI CAJON, CA 920: MATURE OF APPLICANT—	E #1 21	at SR DAT	E SIGNED
ACKHOWLEDGMENT OF A	enument   I hereby a	cknowledge as applicant t 375 of the Health and Safe	hat the proposed dispos	ition stated herein is	one of the disp	ositions authorized by		aneldeen	1		/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	AND DESCRIPTION OF THE PARTY OF	JED IN ACCORDANC ORMA HEALTH AND Y FOR THE DISPOS	DE WITH PROVI- D SAFETY CODE ITION SPECIFIED		CONTRACTOR OF THE PARTY OF THE	CONTRACTOR OF STREET	000000000000000000000000000000000000000	9C. SIGNATURE OF LA 9506983	OCAL REGIST	RAR ISSUIN	G PERMIT
ANY CHANGE IN DISPOSH- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	90. ADDRESS OF RI IF DEATH OCCURRE PO BOX 8522	D IN CALIFORNIA	RICT OF DEATH-		CONTRACTOR OF THE PARTY OF THE			RICT OF DISPOSITION OTHER DISTRICT IN CAUF			
HORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS	200-2					FOR CO	RONER'S L	JSE ONLY	•
B. CREMATION C. DISPOSITION THAN IN A CE O, SCIENTIFIC US	OF CREMATED REM EMETERY	AINS OTHER		F. DISINTERM G. SHIP IN TO H. TRANSIT 1	IENT CALIFORN		ř	L DISPOSITION (Name and		REMAINS LC	XGATED A
BURIAL	NT NOPE CEI 3751 MARKET	ETERY		92102		5 DATE BURIL	ED   116	C. SIGNATURE OF PE	rbon in Chi	VRGE OF BU	FIAL
CREMATION	12A. NAME AND A	odress of Calif	ORNIA CREMATO	RY		128. DATÉ CREMA	TED   120	C. SENATURE OF PER	ISON IN CHA	RGE OF CRI	EMATION
SCIENTIFIC USE	13A. NAME AND A	DDRESS OF CALIF	ORNIA FACILITY	RECEIVING REI	MAINS	13B. DATE RECE	IVED 130	C. SIGNATURE OF PE	rson in Cha	VRGE OF FA	CILITY
TRANSIT	14A. NAME AND AI REMAINS OR B/&	DDRESS IN RECEN CREMATED REMAI			RE	14B. DATE SHIPF	PED 140	C. ADDRESS AND SIG OF PLACING WITH			CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEA FICIENT TO IDE	REST POINT ON SH ENTIFY FINAL PLACE				15B. DATE OF DISPOSITION		C. SIGNATURE OF PEI CHARGE OF DISPO		15D. LICENSE OF CREM MAINS D —IF APPR	ATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 5/22/95

You are hereby auth					O TO
of	Inter	ne 0	exour (	1100) (50	no5.)
ina	mild iver	F	uneral, date, time	- 2	,
Church, Chapel, Gra				Ragnal	Mortuary.
All Funeral cars mus	st arrive before	3:30 p.m. o	f regular work day	or an extra charg	ge of \$
will be applied and b	illed to unders	signed		e mannsadaeimin	
War time veteran		1544 - 1777- 16 - 17			
Lot Gra	ve	Row	Section	Division	/Block
Grave space & Care	Fund			**********************	
Additional spaces ar					
Opening/Closing & S				9990000000	\
Burial Container	67.51 •••••••••••••••••			10	
Handling Fees				ر رورو	
Flower vases - Mari	ker setting fee	/		$\sigma$	
Recording and filing	fee		6-1		12h
Sales taxes	the	disposition	eceipt number	Balance d	ue decedent
that I have the right i any liability on accou				mt. Hope Geme	ery namiess irom
I hereby authorize th hold under deed.	ne interment in	lot I	Signature		200
Signature of recorded holder of			Address		
Signature or recorded holder of			City		Zip Code
			Telephone		
N=2/	1225	3	Invoice #		
Work Order # E	1~~0		Acct #		
PY-593 (Rev. B-92)					

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 5/22/95

of	John	_ Doe	95-00	067	PA# 1	180/34
in a	Lines	Fu	neral, date, time	THUK	\$ 5/25/9	5 @
MMS-SH	oel, Graveside	2/8 32	And the property of the said			Mortuar
Service and the service of the servi			100,000	Mary Control of Control	10.	7. (12.10)
	urs must arrive befor					ors
	d and billed to under			-		
\$530.55	eran			102		320
Lot_45_	Grave 10	Row	Section	_/	_ Division/Bi	lock /2
Grave space	& Care Fund					106
Additional spe	aces and care fund .					0
Opening/Clos	ing & Setup			************		165
Burial Contain	ner		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			50
	9					
Flower vases	- Marker setting fee	e				
Recording and	d filing fee				,,	45
Sales taxes		*****************				
•			17	otal Due		386.0
11:25		Paid rec	elpt number			ic see a
Leins		500000	alpt ridillor		Dalaman din	
	9450 (226)					
hereby certif	ur authority to make right to make this	disposition of authorization authorization and	f remains as ab nd I agree to ho	ove indic	ated. I certif	amed decede y and represe y harmless fro
that I have the	account or said au					
that I have the any liability or hereby autho	orize the interment i	n lot I	Signature			
that I have the any liability or hereby autho	orize the interment i	n kot l	No.			
that I have the any liability or hereby autho hold under de	orize the interment i ed.	n kot I	Signature			2ър Со
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that I have the any liability or	orize the interment i ed.	/	Signature Address City	254	4238	≵p Co

CITY OF SAN DIEGO, CALIFORNIA
GENERAL INVOICE

Make Remittance Payable to

to

-12254

CITY TREASURER

White Company of the 
Please Return YELLOW Copy with Your Paymen

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

PAYMENT DATE 7-17-45-

PAYMENT REF NO GH=850568 I ANT PAID: 386,00

INVOICE DATE

PAYMENT DUE

PERIOD COVERED
APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS REF NO: E-12254

DEPT: PROPERTY DEPT-NT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

JOHN DGE ME95-0667 PA1180134 LOT 45 GRAVE 10 SEC 1 DIV 12 OPENING/CLOSING LINER RECORDING FEE

126.00 165.00 50.00

45.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE. AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT LISTED ABOVE. White-Customer Copy \* Yellow-Remittance Copy



APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	1C. LAS	T (FAMILY)			TE OF BIRTH	3.	DEATH	4. SEX
John			Doe			Unk	H, DAY, YEAR	04/04/	1995EAR	M
SA. CITY OF DEATH		20			OUTSIDE CALIF.,	6. NAME, RELAT	IONSHIP, FULL M	MILING ADDR	ess and z	P CODE
San Diego			San	Diego			County		1 Exam	iner
CONRAD LENG	IN GROVE MO	A-FUNERAL DIRECTOR OF RTUARY M GROVE, CA S		⊣FA	LICENSE NUMBER PPLICABLE 941	San Dieg	rland Ave o, Califo of APPLICANT—	ornia 9	STANCE OF STREET	Ę SIGNED
ACKNOWLEDGMENT OF M	PPLICANT   1 hordey a Section 10	cheenfolgs as applicant that the p 376 of the Houlth and Safety Code.	proposed disposition stated he and was authorized pursuent to	rein is one of the dis Section 7100 of the H	positions authorized by selth and Selety Code.	Kane	~Wan	ant	05 25	11995
PERMIT	SIONS OF THE CALIF	JED IN ACCORDANCE WITH ORNIA HEALTH AND SAFE	TY CODE	INT OF FEE PAID	98. DATE PERM	IT ISSUED, 9C. SI	GNATURE OF LO	CAL REGIST	RAR ISSUIN	G PERMIT
AUTHORIZATION OF LOCAL REGISTRAR	IN THIS PERMIT.	TY FOR THE DISPOSITION S D NORT OF DISPOSAL OUTSIDE OF	7/.	00	5/25	/ 1995	£4	K	u,	N (N)
ANY CHANGE IN DISPOSH	94'XI \\	EGISTRAR OF DISTRICT OF RES	Service and the service and th	and the second second	ESS OF REGISTRA POSITION IS TO OC			RO-MA		
HORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS		-5			FOR COR	ONER'S U	SE ONLY	
B. CREMATION		AINS OTHER	F. DISIN'	ORARY ENVAUL TERMENT* IN TO CALIFORI SIT TO OUTSIDE	46	.	i. DISPOSITION (Name and A		REMAINS LC	CATED A
BURIAL	3751 MAE	O, CA 92102	CEMETERY		5 05/9	ED 11C. SIGN	LATURE OF PER	SON IN CHA	RGE OF BL	IRIAL.
CREMATION	12A. NAME AND A	odress of california	CREMATORY	$-\infty$	129. DATE CREM	ATED 12C. SAGN	ATURE OF PERS	SON IN CHAF	RGE OF CRE	EMATION
SCIENTIFIC	ISA. NAME AND A	DORESS OF CALIFORNIA	FACILITY RECEIVING	REMAINS	13B. DATE RECI	EIVED 13C. SIGN	IATURE OF PER	SON IN CHA	RGE OF FA	CILITY
TRANSIT		DDRESS IN RECEIVING S CREMATED REMAINS AR		WHERE	148. DATE SHIP		ress and sign Placing with t			CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELI ENTIFY FINAL PLACE AND			15B. DATE OF DISPOSITIO		NATURE OF PER RGE OF DISPOS		SD. LICENSE OF CREM MAINS D —IF APPI	ATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



#### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date May 22, 1995

of Zolos	as (laude dassison 00
001 110 10	0.00 1/5 kg
VaulULiner	Funeral, date, time 4/24 1/3 /9.5, 9
Church, Chapel, Graveside	: Mortuary.
All Funeral cars must arrive before 3:3	30 p.m. of regular work day or an extra charge of \$
will be applied and billed to undersigne	ed
War time veteran	
Lot 94 Grave Ro	ow Section 100F Division/Block 42
Grave space & Care Fund	
Additional spaces and cafe fund	
Opening/Closing & Setup	AID
Burial Container	
Handling Fees	N 2 1 1995
Flower vases - Marker setting fee HC	NEW CARMEDIUM
Recording and filing fee	SAN DIEGO, CALIF
	- TOURS WALLIAM TO THE SAME SECONDARY MAY THAT THE
Sales taxes	350 0
	Total Due
Lecer 1219	
by 6/21/45	Paid receipt number 46359 350.0
very 6/21/95	Paid receipt number 46359 350-0
why God an that do	Balance due D
and this is your authority to make disp	Balance due  of the above named decedent position of remains as above indicated. I certify and represent
and this is your authority to make disp that I have the right to make this author	Balance due
and this is your authority to make disp that I have the right to make this author	Balance due
and this is your authority to make disp hat I have the right to make this author any liability on account of said authoriz	Balance due  of the above named decedent obsition of remains as above indicated. I certify and represent rization and I agree to hold Mt. Hope Cemetery harmless from zation and interment.
and this is your authority to make disp that I have the right to make this autho- any liability on account of said authorize thereby authorize the interment in lot i	Balance due  of the above named decedent obsition of remains as above indicated. I certify and represent rization and I agree to hold Mt. Hope Cemetery harmless from zation and interment.
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and this is your authority to make disp that I have the right to make this author any liability on account of said authorize hereby authorize the interment in lot in hold under deed.	Balance due  Of the above named decedent of the above named decedent observation and I agree to hold Mt. Hope Cemetery harmless from the station and interment.  A Signature  RT 2, Box 165  Shifthulle, Tx 78957
and this is your authority to make disp that I have the right to make this author any liability on account of said authorize I hereby authorize the interment in lot i hold under deed.	Balance due  Of the above named decedent of the above named decedent obstition of remains as above indicated. I certify and represent relation and I agree to hold Mt. Hope Cemetery harmless from the station and interment.  Application of remains as above indicated. I certify and represent relation and I agree to hold Mt. Hope Cemetery harmless from the station and interment.  Application of remains as above indicated. I certify and represent relation and I agree to hold Mt. Hope Cemetery harmless from the station and I agree to hold Mt. Hope Cemetery harmless from the
and this is your authority to make disp that I have the right to make this author any liability on account of said authorize hereby authorize the interment in lot in hold under deed.	Balance due  Of the above named decedent of the above named decedent observation and I agree to hold Mt. Hope Cemetery harmless from the station and interment.  A Signature  RT 2, Box 165  Shifthulle, Tx 78957



#### MOUNT HOPE CEMETERY 527-3400

Butty of Aye I  From: Exederick F. Nyc I  Shree  In Peyment of Dis	11 Address: Rt. 2, Box 10 Hundred fifty 99 interment of Ed	Date: June of Smither (\$ 100 — Dollars (\$ 100 de	21 .1995 Elle TX 789 350.00, Harrison &
Lot 94 Grave	Row S	ection /OF  CREDIT 67007 20% Sales Care 77184 — 80% Sales 100 of Lots 77184 — Opening/ 100	Division #2
W.OE- 12255  BALANCE DUE  Pre-Need Lot At Need On Acct Pre-need Trust Cash Check  # 10/80	ISSUED BY M. Clark	Closing 77181 —  Burial 100 Containers 77182 —  Handling Fee 77185 —  Pecording & 100 Misc. Fees 77183 —  Pre-Need 83033 Trust 9022 —  Salee Tax 60101 78390 —	350 00

#### (STATE OF CALIFORNIA)

### SAN DIEGO COUNTY RECORDER

CERTIFIED ABSTRACT OF DEATH

NAME: EDGAR CLAUDE HARRISON JR

DATE OF DEATH: FEBRUARY 9,1957 SEX: MALE

COUNTY OF DEATH: SAN DIEGO SSN: NONE/NOT AVAILABLE

BIRTH DATE: SEPTEMBER 29,1907

DATE FILED: FEBRUARY 9,1957 DATE ISSUED: MAY 22,1995

LOCAL REGISTRATION NUMBER: 000680

This is to certify that this document is a true abstract of the official record filed with the County Recorder.

GREGORY J. SMETH RECORDER / COUNTY CLERK



632099

E-122.55

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	18. MIDDLE	IC. LAST (FAMILY)			OF DEATH 4. SEX
Edgar		Claude	Harrison ,	Jr.	09/29/1997 02/05	/1957 M
SA. CITY OF DEATH	Y	4	58. COUNTY OF DEAT	OUTSIDE CALIF.,	6. NAME, RELATIONSHIP, FULL MAILING AD	ORESS AND ZIP CODE
Guatay		\	San Diego		Becty L. NE-Mother	
7A. TYPED NAME AND A	DDRESS OF CALIFORN	IA-FUNERAL DIRECTOR OR	PERSON ACTING AS SUCH 7B. CAL		Rt.2 Box 165	
Mayer Mortua	ry, 2859 A	dams Ave., Sar	Diego, CA 92 1	APPLICABLE 24	Smithville, TX 78957  8A. SKNATURE OF APPLICANT— PERSONNEL SERVICES  8A. SKNATURE OF APPLICANT — PERSONNEL SERVICES  8A. SKNATURE OF APPLICANT	ava. 88. DATE SIGNED
ACKNOWLEDGMENT OF A	PPLICANT I hereby Section 10	acknowledge as applicant that the pr 1976 of the Health and Safety Code, ar	oposed disposition stated herein is one of the of was authorized pursuant to Section 7100 of th	dispositions authorized by Health and Safety Code.	Jan Il	06/21/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	UED IN ACCORDANCE WITH FORING HEALTH AND SAFET TY FOR THE DISPOSITION SP NO MIGHT OF REPOSIC OUTSEE OF C	Y CODE \$7.00	0 6 / 2 9	/ 1995	STRAR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW TO SHOW FINAL ISPOSITION,	P.O.BOX 85	EGISTRAR OF DISTRICT C 2D IN CAUFORNIA 222 CA 92186-522			R OF DISTRICT OF DISPOSITION— CUR IN ANOTHER DISTRICT IN CALIFORNIA	
10. AUTHORIZED DISP	THE RESERVE OF THE PARTY OF THE				FOR CORONER'S	USE ONLY
D. SCIENTIFIC U	SE	DDRESS OF CALIFORNIA	G. SHIP IN TO CALIFO THE H. TRANSIT TO OUTS CEMETERY	Entra Agree Desgreene Newson		HARGE OF BURIAL
CREMATION	12A. NAME AND A	DORESS OF CALIFORNIA	CREMATORY	128, DATE CREM	ATED 12C. SEGNATURE OF PERSON IN CH	HARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND A	DDRESS OF CALIFORNIA	FACILITY RECEIVING REMAINS	138. DATE RECI	13C. SIGNATURE OF PERSON IN C	HARGE OF FACILITY
TRANSIT	Betty L. N	DORESS IN RECEIVING ST CREMATED DEMANS ARE YE, TX 78957	ATE OR COUNTRY WHERE LID BE SHIPPED	148. DATE SHIP	PED 14C. ADDRESS AND SIGNATURE OF PLACING WITH THE CARR	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY			E, OR OTHER DESCRIPTION SUF- CA <u>DISTRICT</u> OF DISPOSITION	158. DATE OF DISPOSITIO	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	15D. LICENSE NUMBER OF CREMATED RE- MARIS DISPOSER —IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



19 Jun 95

Mayer Mortuary 2859 Adams Ave San Diego, CA 92116

Dear Sir:

Reference our conversation of 19 Jun 95, RE: Disenterment of Edgar Claude Harrison, from Mt. Hope Cemetary.

As mentioned, Mt. Hope already has in its files the authorization, as well as the Certified Abstract of Death. Our point of contact is Michele L. Clark at 527-3400.

A copy of the application (incorrectly filled out) is enclosed. Please fill and file another in my wife's name.

Enclosed is a check for \$77.00 to cover:

\$45.00 Transportation of ashes 25.00 Your services

7.00 Cost of permit

Please send the ashes to:

Frederick F., or Betty L., Nyc III

Rt. 2, Box 165

Smithville, TX 78957

If any other matters arise, you can contact us at this address, or call (512) 360-2005.

Sincerely,

Frederick F. Nyc. III

Betty L. Harrison Nyc

File: ECHMayer

E-12255

19 Jun 95

Michele L. Clark Mt. Hope Cemetary 3751 Market St. San Diego, CA 92102

Dear Ms. Clark,

Reference your letter of 14 Jun 95.

We have selected Mayer Mortuary as our agent to handle the shipment of the ashes of E. C. Harrison. A copy of our letter to them is enclosed.

Enclosed is a check for \$350,00 for cemetary charges.

Sincerely

Frederick F Nyc, III

Betty L. Harrison Nyc

File:MtHope2

#### AUTHORITY TO DISINTER, REMOVE OR REINTER

You are hereby authorized and instructed, subject to your rules and

GYDLLOW Relation to deceased RI2, Box165
Relation to deceased Address

Smithville, TX 78957

RICHARD GOERTZ
Notary Public, State of Texas
My Commission Expires
DEC. 6, 1998

I hereby authorize the above disinterment:

Lot owner must sign if hot legal custodian)

#### AUTHORITY TO DISINTER, REMOVE OR REINTER

You are hereby authorized and instructed, subject to your rules and regulations, to disinter the remains of:

Edgar Claude HARRISON

from Lot 94 Grave Section IOF Row 47 Block Division and to remove the same to and reinter said remains in Lot \_\_\_\_ Grave \_\_\_ Section \_\_\_ Row \_\_\_ Block \_ Division Cemetery The undersigned hereby certify and represent that they are the legal custodians of the remains and have the right to make this authorization, and that they are related to the decedent as indicated below. The undersigned further agree to hold Mount Hope Cemetery harmless from any liability on account of said authorization, disinterment, removal, and reinterment. Mª CASKILL AR 71847 I hereby authorize the above disinterment: owner must sign if not legal custodian) OFFICIAL SEAL SHERAYE COX NOTARY PUBLIC • ARKANSAS HOWARD COUNTY

My Commission Expires 7-28-2004

Edgar Clar Harrison Fred 7. NYC NITCH Son in Law 512/360-2005

533-3800

#### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

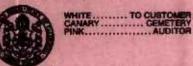
7	Date MA	ay 22,1993
You are hereby authorized and instructed, sub	eject to your rules and regulation	s, to inter the remains
of Bellie Fox	ster moore to	m
ina vault F	uneral, date, time WED 5/31	195 @ 1PM
Church Chapel Graveside hunch & gn	visile: CA Bur	Mortuary.
All Funeral cars must arrive before 3:30 p.m. o	of regular work day or an extra c	harge of \$ 150 00
will be applied and billed to undersigned.	Tros HO	RM_
War time veteran MO		56
Lot 12 Grave 6 Row_	Section _ 3 Divis	sion/Block_/2
Grave space & Care Fund		<u>795∞</u>
Additional spaces and care fund		
Opening/Closing & Setup		575
Burial Container	1 m	25000
Handling Fees	, d, a5	185 =
Flower vases - Marker setting fee	1,20,10	
Recording and filing fee	- 10 A	45. 6
Sales taxes		17.50
	Total Due	1667.50
Paid n	eceipt number 46247	1400.00
MATE 13	3770 MOREO CORRESCO CO CO.	ce due 261.50
X H . = 1	1 any our	207.50
and this is your authority to make disposition	of remains as above indicated.	l certify and represent
that I have the right to make this authorization any liability on account of said authorization a	and I agree to hold Mt. Hope Ce nd interment.	metery harmless from
	7 11	Die
I hereby authorize the interment in lot I	X DID HO	) M-
hold under deed.	15 Nort	h EUAns s
Signature of recorded holder of deed	XSAN Dies	60169
8.2	\$ 2P3-3d	P8 Sb coop
· · ·	2611	328
<b>=</b> 12256	Invoice # 3 34 -	200
Work Order # E	Acct. #	346
PY-503 (Rov. 8-92) mustigator Heather	ID:	
The same of the sa	43	

MT. HOPE CEMETERY	MT.	HO	PE	CEN	IET	ER)
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w.o. # E-12256

### NOTE

\$ 267.50	San Diego, California	may	22	1995
Thirty days after date for value received, the undersig	ned maker promises to pa	y San Diego Cit	ty Treasurer, or o	order a
3751 Market Street, San Diego, CA 92101, the sum of with interest from	Sur Hundred		on the unpaid p	
at the rate of 12 percent per annum, payable on dem	and.			
Should this note not be paid when due, it shall the accrue at the rate indicated above. Principal and inter will be liable and consents to renewals, replacement maturity, and waives presentment, demand and prot person who signs this note agrees that recourse ma contained herein. If any action be instituted on this r may fix as attorney's fees.	rest are payable in lawful r ts and extensions of time test and the right to asser by be held against his/her	noney of the Ur for payment he t any statute o separate prop	nited States. The ereof before, at f limitations. A r perty for any obl	e maker or after, married ligation
Part II, Chapter I, Article 2, Paragraph 752 authorizes the removal of any remains from a				
PRINT NAME Troy Horn	SIGNATURE Ze	y 40	pri	•
ADDRESS 5 North EUANS	St. 5	D 92	102	
CALIFORNIA DRIVER LICENSE NUMBER 100 13 L	4626 ssn	* 569-	44-73	09



#### MOUNT HOPE CEMETERY 527-3400

From: Troy Horr- Fourteen	- Hundred & Dias ternsent of Juli	Date:	D. 921	02
Lot_/a Grave_	lo Row_Se	ection3	Division Block	12
Pre-Need Lot At Need A On Acct	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	OREDIT 20% Sales Care 77164 - 80% Sales Care 77164 - 80% Sales 100 of Lots 77184 - 100 Closing 77181 - 8urtal 100 Containers 77182 - 100 Handling Fee 77185 - Recording & 100 Milso, Fees 77183 - Pra-Meed 63033 7 Tust 9022 - 100 Page 100 Pra-Meed 63033 7 Tust 9022 - 100 Pra-Meed 6303 7 Tust 9 Pra-Meed	159 1636 375 230	8888
Pre-need Trust Cash K Check C	ISSUED BY M. Clark	Trust 9022 - Salee Tex 60101 78390 - TOTAL PAID \$	1400	$\omega$

•	APPLI	CATION AND	PERMIT FOR DIS	POSITION OF	HUM	E-16	60	56	
1A. NAME OF DECEDE	)(90	18. MIDDLE	IC. LAST (FAMIL	o, milledite on c	INEK /	2. DATE OF BIRTH		OF DEATH	4. SEX
Nellie		Ruth	Moore			04/06/1929	05/22	71993	F
SA. CITY OF DEATH	104			DEATH—OUTSIDE CALIF.,		RELATIONSHIP, FULL N		RESS AND ZI	CODE
Mational C			San Die	-		y Hora-Rusba		250	
California	Cremation	& Burial Cha	R PERSON ACTING AS SUCH 78	. CALIF. LICENSE NUMBER —IF APPLICABLE	San	3 Santa Marg Diego, CA 9	2114		
5880- K1 Ca		ian Diego, Ca		FD 1357	BA. SIGN	NATURE OF APPLICANT	Person taking pern	eit 88. DATI	SIGNED
ACKNOWLEDGMENT OF A	PPUCHIT   1 hereby #	Smerrindge as applicable that the 175 of the Health and Safety Code.	propessed desposition stated herein is one and tree authorized sursumet to Section 71	of the dispositions withorized by 10 of the Health and Salety Code	>K	nh ack	41	05/2	3/199
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALLS' AND IS THE AUTHORIT IN THIS PERMIT. INTE: THIS PERMIT GRES IN	ED IN ACCORDANCE WIT ORNIA HEALTH AND SAFT Y FOR THE DISPOSITION :	TH PROVI- ETY CODE SPECIFIED  CAROMA. \$7.00		995	95. SIGNATURE OF LO 9506941	OCAL REGIST	TRAR ISSUM	G PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERIOD O SHOW FRAM, POSITION.	VIENT RECE	GISTRAR OF DISTRICT DIACAUSONIA FRA 92186-52	£ 85222	E. ADDRESS OF REGISTRAF IF DISPOSITION IS TO OCC			MINA		
10. HORIZED DISP	OSITION(S) CHECK AF	CONTRACTOR DESIGNATION OF THE PARTY OF THE P	30	820		FOR COR	ONER'S	JSE ONLY	
B. CREMATION		UNS OTHER	E. TEMPORARY  F. DISINTERMEN  G. SHIP IN TO C.  H. TRANSIT TO	r'		L DISPOSITION (Name and A		REMAINS LC	CATED A
PUPEAL	Hount He	ORESS OF CALIFORNIA OPE CEMETETY,	CEMETERY	BIF15	D   11	C. SIGNATURE OF PER	SON IN CHA	ARGIE OF BU	RIAL
CREMATION	12A. NAME AND AD	DRESS OF CALIFORNIA	CREMATORY	128. DATE CREMA	TED   12	C. SIGNATURE OF PER	son in Cha	AGE OF CAE	EMATION
SCIENTIFIC	13A. NAME AND AD	DRESS OF CALIFORNIA	FACILITY RECEIVING REMAI	NS 13B. DATE RECE	IVED 13	C. SIGNATURE OF PER	SON IN CH	URGE OF FA	CILITY
TRANSIT		DRESS IN RECEIVING S REMATED REMAINS AR	STATE OR COUNTRY WHERE RE TO BE SHIPPED	148, DATE SHIPP	ED   14	C. ADDRESS AND SIGN OF PLACING WITH T	HATURE OF THE CARRIES	PERSON IN	CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY			NE, OR OTHER DESCRIPTION S CA <u>DISTRICT</u> OF DISPOSITION	UF 15B, DATE OF DISPOSITION		C. SIGNATURE OF PER CHARGE OF DISPOS		OF CREM MAINS DI —IF APPL	ATES RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



CITY OF BAN DIRGO, CALIFORNIA

# ACCOUNTS RECEIVABLE CORM

GUSTOMEN ACCOUNT NO. 085346

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PAY	ABNE DATA
A STATE OF THE STA	7-6-95
PAYMENT P.M. RECEIVED DATE	
PAID BY IGINGLE ONE)!	
PAYMENT REFERENCE NUMBER	4 1 632 C 116 C 15 C 17 C
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MANUAT PAID \$ 267.50	5
	MER DATA
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CUSTOMER ACCOUNT NAME TR	OY HORN
PAYON NAME STHEN THAN GUSTON	
	N EVANS ST
EUSTONEN (HOTAN) HEMOTEUS	70 2010 3
	D 9210a
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HEMARAS	
* * · ·	7.1.

My No. 254328

THIS (FAR) ONE HE CO PO . TO A

# PAE WEED ST

#### MT, HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 5-25-95

of	Eugenia	Petrowsky	
na	Linke	Funeral, date, time	
Church, Chape	el, Graveside	Ţ.	Mortuary.
All Funeral car	rs must arrive before 3:30	p.m. of regular work day or an extra charge of	\$
will be applied	and billed to undersigned	ACTION OF THE PROPERTY OF THE	N16
War time veter	ran		
Lot 5081	Grave Bow	Section Division/Bloc	k 10
Constanting of the same of	Care Fund		1095.00
Grave space &	ces and care fund	1 9	, , , , , , , , , , , , , , , , , , , ,
and the last	/	1 2	315 00
Opening/Closi	ng & Serup	A . 7	100 00
Burial Contain	er / () N		190.00
Handling Fees	///	A - /	143.00
Flower vases -	- Marker setting fee	<u> </u>	
Recording and	filing fee		45.00
Sales taxes	-4		13 30
M. 301 TV (1.01 TV (1	\ v	Total Due	863.30
		Part receipt number 46245	1883.00
	3	Balance due	B
me serverenses		7.3	- VAN - 125-50
and this is you that I have the	y I am the Y r authority to make dispo- right to make this authoriza account of said authoriza	of the above nai sition of remains as above indicated. I certify a zation and I agree to hold Mt. Hope Cemetery h tion and interment.	and represent
hereby autho hold under des	rize the interment in lot I ed.	Signature 541 N. 184	5-7
Signature of recorded	holder of deed	City (619) 5788-	8556
	<b>- 12257</b>	Invoice #	
Work Order #	ETANOT	Acct.	
PY-593 (Rev. 8-92		TWO IS THE TOTAL PROPERTY OF THE PARTY OF TH	



#### CITY OF SAN DIEGO, CALIFORNIA MOUNT HOPE CEMETERY



#### OWNERSHIP AND INTERMENT PRIVILEGES

TO Eugenia Petrowsky	for the sum of \$	1095.00	(DOLLARS)
LEGAL DESCRIPTION Lot 5081; Division	on 10.		
AS DESCRIBED ON PURCHASE ORDER NUMB	BER		
According to a map of said Cemetery filed in the office endowed care. Subject to all rules and regulations no essentials for care and operation of the Cemetery. The consent of the Cemetery Authority in each and every c	w in force or may hereafter be adopted, it e rights hereby conveyed for interment pr	including the right rivileges shall not b	to ingress and egress with e relinquished without the
It is expressly understood however, that said Cemete stone, vaults or other improvements of like nature that be assumed by legal owner or representatives of plot. vandalism and natural causes of deterioration, but a Cemetery. The following type of memorial will be permitted.	t is already, or may hereafter be erected of In no case will the Cemetery Division b reserves the right to remove any object	or placed on said lose responsible for d	t or plot. Cost of same shall amage, malicious mischief,
MARKER REGULATION: Upright	t Marker Only, In The Style	of Surround	ing Markers
Plea Wait	- J.	Fater Assets	Director
	nation le avellable la alternative formate viron parie		

## WHITE TO CUSTOMER CANARY CEMETERY PINK. AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

		Date:	5 22	. 10 95
From: Eugenia Pahowshu eighteen hum	dred sixty three	30/100 Dol	lars (\$	30,
In full Payment of CURO	ms lehowsky	1 and	hust	
Lot 5081 Grave		ction.	Division Block	10
fivoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 20% Sales Care	67067 <b>2</b> /14	1 00
Acct. No.	PAU IN INIS SPACE	80% Sales	100 PTEG	
6 0057	(四位建设) 大块的 。 医公司尼	Opening/ Closing	77181	+
No.		Burial Containers	77182	L
BALANCE DUE	<b>网络是一种原则</b> (1000年)	Handling Fee Recording &	77185 100	
Pre-Need Lot At Need On Acct		Minc. Fees	77183 69033 768	30
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐		Sales Tax	60101	
AC-212 (Rev. 5-04)	ISSUED BY V. Balobia	TOTAL PAID	1052	30

# ME STEWAY

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 5- 22-95

You are hereby aut	thorized and Inst	ructed, subject to your ru	les and regulations, to	inter the remains
of	Tatu	ana Kuz	in	
ina	Lines	Funeral, date, t	ime	
Church, Chapel, G	T MUNICIPALITY			
All Funeral cars mu	st arrive before	3:30 p.m. of regular work	day or an extra charg	je of \$
will be applied and	billed to undersig	gned	AS	A 900 IV
War time veteran				324
Lot 508 Oct	ave	Row Section	) Division	/Block(O
Grave space & Car	e Fund	1-31-97		1095.00
Additional spaces a	and care fund	FULL		
Opening/Closing &	Setup	10 /		375.00
Burial Container	BULL	21-9-1	***************************************	190.00
Handling Fees		1-21		145.00
Flower vases - Ma	rker setting fee			
Recording and filin	g fee			45.00
Sales taxes			***************************************	15.50
			Total Due	1863 38
		Paid receipt number	46264	465.83
			Balance d	ue 1397. 47
that I have the right any liability on acco	thority to make d t to make this aut ount of said auth	isposition of remains as thorization and I agree to orization and interment.	of the above above indicated. I ce hold Mt. Hop Cemen	rtify and represent
hold under deed.		Address C	-41 N 1-14	47
Signature of recorded holder	of deed	City	619 SAP	92021 2556
Work Order # E	12258	Invoice #		
PY-593 (Rev. 8-92)				

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n with each remittance COUPON DO NOT MAIL ENTIRE BOOK ACCOUNT No. 1-12058 Fre-Nord Lot Vera Bellman LUBBLE P.O. Box 20237 El Cajon, CA 92071 (5080-10)Month and Day Due Indicated Below IUN LIUL AUG SEP OCT NOV DEC JAN FEB MAR APR MAY Amount due when paid on, or before, due date above days Amount due if paid more than after due date above. Amount Received NAME ADDRESS CITY STATE check ( / ) if this is new address

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rom Vera Bollman	Address: 541 / 12 1	Date: 12 -	9 54	Capa	96
n part payment or	Lend + the hard - wal		ollars (\$ .	118.0	<u> </u>
ot 5080 Grave _	Row Se	ction		Division BIOCK	10
nvoice No	NOT VALID FOR FURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lete	67007 77184 — 100 77184 —	ISOME IN	
NO. E - 15522		Opening/ Closing Surisi Consisters	100 77181 — 100 77182 —	200	
BÅLANCE DUE 41111		Handling Fee Recording & Micc. Fee	77185 — 100 77183 —	110	00
Pre-Need Lot At Need On Acct Pre-need Trust A Cash Check	11111	Pre-Need Trust Sales Tax	63633 9082 — 60101 78390 —	1/0	00
C-212 (Rev. 6-01)	ISBUED BY	TOTAL PAID	•_	118	00



VEV TO THE REAL PROPERTY.		Date:	10-7		.96
From Vera Ballman	Address: 541 7, 1st	st.	No 3	ધા છ	apon 9:
Title Time -	twate the Lud.		TOTIETS (\$ 2	39.00	)
In DANA Payment of AA	1-1-1000 000 0000			Philip	YY :
Lot 5086 Grave	RowS	ection	Trans.	Division	)
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Cars	67007 77164		
Actt. No.	The same of the same	80% Sales of Lets Opening/ Closing	77184 — 100		
W.O. E- 12258		Closing Buriel Containers	77181 — 100 77182 —		
BALANCE DUE 3714/		Handling Fee	77185		
Pre-Need Lot At Need On Acct		Recording & Misc. Fees Pre-Need Trust	77183 — 63033 —	59	00
Pre-need Trust Cash Check 385	011.11	Balos Tax	60101 78390		
AC-212 (Mar. 644)	BAUED BY J. AMMANIM	TOTAL PAID		59	00



From Vera Ball	man	527-3480 Address: 541 N. / St S	1 No. 3 E	1-5 1 call	n ca	9202
FIFTY MI	ne 41	nullion— need lot 4 trust for		ollars (\$	59.00 UZIN	<u>,</u>
Lot 5080	Grave	Row Se	iction		Division Block	10
Invoice No		NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots	67007 77184 — 100 77184 —		
w.o. E - 12258	117		Opening/ Citiesing Surfal Containers	100 77181 — 100 77182 —		
BALANCE DUE_51Z.	aution is		Hendling Fee Recording & Misc. Fees	100 77185 — 100 77183 —	50	
Pre-Need Lot XX At Need Pre-need Trust XX Cash	On Acct	The second secon	Pro-Hand Trust Sales Tex	60033 9002 — 60101 76390 —	59	00
AC-212 (Rev. 6-01)	3841	ISSUED BY COLLING JUNISCOL	TOTAL PAID		59	00

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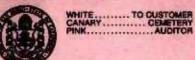


WHITE..... TO CUSTOMER CANARY CEMETERY PINK. AUDITOR

			Date: Jul	7UL 1	, 1	9,72
From: Vera Balls	nan	Address: P.O. Box 202	37 El Cay	ion 90	2021	(5000-10
	Futus	Hime dollars &	x11 00	ollars (\$	59.00	) ,
InPaymen	en Pro-	Med fot & hust of	, ,	ma k	Lunis	
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LOI 5080	_ Grave	Row8	ection	D	ivision //	>
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Acct. No.			60% Sales of Lots	77184	39	00
w.o. E-12258			Opening/ Closing	77181		
1-376	47	A COLUMN THE RESERVE	Buriel Containers	77182	-	
BALANCE DUE			Handling Fee Recording &	77185	1000	
			Misc. Fees Pre-Need	77183	100	
Pre-Need Lot At Need Pre-need Trust Cash	On Acct	and the state of the state of the state of	Trust Sales Tex	8022		
	11	SSUED BY M. Charken		78390	wa	
AC-212 (Rev. 5-94)	- 100	SSUED BY STI. CHECKE	TOTAL PAID		37	00



FIFTY NINE and	notion neighbor and trust	NO. 3, E	Cajon,	(U.92 59.00	1021-60 021-60
Lot 5080 Grave _		etion		Division Black	10
Invoice No	MOTIVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 20% Sales of Lots	67007 77184		
w.o. <u>E-12258</u> BALANCE DUE <u>571.47</u>		Opening/ Closing Burlet Containers Handling Fee	100 77181 ——————————————————————————————————		
Pre-Need Lot At Need On Acct		Recording & Misc. Fees Pre-Need Trust Sales Tax	77183 69033 5	9	00
Pre-need Trust Cash Check Mr #383U	ASSUED BY CALINA OMOR ON	TOTAL PAID	76390	9	00



From: Vers Ballman Tiply him Payment of Inc.	Address: 541 h. Lat	St. 1	8 No. 3 & Sollars (\$ 59.00	9 9 0000000000000000000000000000000000
Lot 5080 Grave	Row Se	action	Division Block	10
Acct. No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots	67007 77:184 190 77:184	
m.o. E- 12528		Opening/ Closing Buriel Containers	190 77161 100 77182	
BÁLANCE DUE _689.47		Handling Fee Recording &	100 77185 100 77183	
Pre-Need Lot At Need On Acct Pre-need Trust P Cash Check	111 00 0	Pre-Need Trust Sales Tex	83033 5 9002 80101 75080	9 00
NC-212 (Part. 504) 3829	ISSUED BY 1. Muchillin	TOTAL PAID	5	900

FIFTY nine and		Dr	15 =1 (ajun) ( pilars (\$ 59.0)	90 2.990 0.300
n Part Payment of Pre-	-need lot and the	oction	Division Block	lmari ID_
No. E- 12058	MOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Buriel Containers	87007 77184 100 77184 100 77181 100 77162	on l
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	Outing M Oura	Handling Fee Pecording & Misc. Fee Pre-Need Trust Sales Tax	100 77185 100 77183 83033 8022 60101	00
10212 (Raw. 64) #3824	IBBUED BY Catina M. Durge	TOTAL PAID	. 59	00

#### OFFICIAL RECEIPT CITY OF SAN DIEGO, CALIFORNIA WHITE..... TO CUSTOMER CANARY..... CEMETERY MOUNT HOPE CEMETERY 527-3400 Date: From: Vera B Dollars (\$ 508 **Division** Grave Row Section Block Lot NOTYALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT Invoice No. 20% Sales Cara 60% Spies Acct. No. of Lots 77184 Opening/ Closing E- 13728 77181 Buriel Containen 77182 BALANCE DUE Handling Fee 77185 Recording 4 100 77183 On Acct Pro-Need Pre-Need Lot Trust Check Sales Tax Pre-need Trust Cash 60101 72300 3813

IBSUED BY

AC-212 (Rev. 5-94)

TOTAL PAID

CITY OF SAN DIEGO, CALIFORNIA

46069

WHITE ..... TO CUSTOMER

PINKAUDITOR	MOUNT HOPE CEMETERY 527-3400			
From Vera Ballman	Address: P.D. Box 30a	Date:	1-4 CA	1996
From Histor Nine.	Address: FID DOD 50 a	The state of the s	ollars (\$ 59.4	90
in fart Payment of Pr	e-need fot	4 4m	ust	
Lot 5080 Grave	Row Se	ction	Division Block	10
Invoice No.	NOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales	67007 77164 	
w.o. E-12258		of Lots Opening/ Closing Buriel Containers	77184	
BALANCE DUBA 735 TV		Handling Fee Recording & Misc. Fees	77186 77186 100 77183	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	1011.	Pre-Need Trust Sales Tax	63033 9022 60101 76390	400
AC-212 (Par. 5-91) 3805	ISBUED BY J. Weisner	TOTAL PAID	78390 5	900

CITY OF SAN DIEGO, CALIFORNIA

46902

## WHITE......TO CUSTOMER CANARY CEMETERY PINK.....AUDITOR

From: Vera Ballman	Address: 541 N. / at s	X Na3	12-1	jon, B	19/5
In Part Payment of	e-need tot &	Pres	Dollars (\$	59.00	<u></u>
Lot 5080 Grave	Row So	ection		Division Block	10
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots	67007 77184 — 100 77184 —		
w.o. E-/2258		Opening/ Closing Buriel Containers	100 77181 — 100 77182 —		
BALANCE DUE		Handling Fee Recording & Misc. Fees	100 77185 — 100 77183 —		
Pre-Need Lot ArNeed On Acct Pre-need Trust Cash Check	0.00	Pre-Need Trust Sales Tax	63033 9022 — 60101 78300 —	59	50
AC212 (Rev. 600) 3502	ISSUED BY J. WELLANDEN	TOTAL PAID	49/31	59	00



WHITE TO CUSTOMER
CANARY CEMETERY
HIM AUDITOR

From: Vere Bollman	Address: 541 M. 1 at	At . No	3) 3 El Ca	1097 m 9002
in part Payment of Ru	Land - Lot - Lud-		ters (\$ 99,47	
Lot 5080 Grave	Row 8	ection	Division	10
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	NOTVALID FOR PURPOSE STATED UNLESS STAMPED TRAID' IN THIS SPACE.	80% Sales of Lots Opening/ Closing Surisi Containers Handling Fee Recording & Misc. Feet Pre-Head Trust	87007 77184 100 77184 100 77181 100 77182 100 77182 100 77188 100 77188 9082 8082 8082 8080	47

WHITE TO CUSTOMER CANARY CEMETERY PINK. AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA

MOUNT HOPE CEMETERY

46306

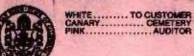
	527-3400	. 11	19		95
rom: Veru Ballman	Address: 541 N . 151	5/ No. 3 E	(Cujo	1/4 40	0216
t tyl ning	Ned loted Trust	De	ollars (\$ _	59.00	
n Payment of	TORU TOTAL TRUST	TE			
.ot 5080 Grave _	Row So	ection		Division /	
nvoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lote	67007 77184 — 100 77184 —	59	00
N.O. E 12958		Opening/ Closing Burist Containers	100 77181 — 100 77182 —		
SALANCE DUE		Handing Fee Recording & Miss. Fees	100 77185 — 100 77183 —		
Pre-Need Lot At Need On Acct Ore-need Trust Cash Check	N. 2.11	Pre-Need Trust Seles Tax	63033 9022 60101 78360	1	
C212 (Rev. 504) 3748	ISSUED BY WULLDOWN	TOTAL PAID	7830	59	00

CITY OF SAN DIEGO, CALIFORNIA

46606



From: Vira Ballman	Address: 541 N. Int	Date: 9-	12 .11	95
InPayment of PA		Dollars	\$ 59.00	) ,
Lot 5080 Grave _	Row Se	ction	Division /	0
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID: IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 80% Sales 100 of Lots 77184	59	00
W.O. E-12258 BALANCE DUE	•	Opening/ 100 Closing 77181 Burisl 100 Containers 77182 Containers 100 Handling Fee 77186 Recording & 77185 Misc. Fees 77185		
Pre-Need Lot DF At Need On Acct D Pre-need Trust DF Cash Check D		Pre-Need 83033 Trust 9032 Galoe Tax 60101 78380 TOTAL PAID		00



CITY OF SAN DIEGO, CALIFORNIA

MOUNT HOPE CEMETERY

46398

through all as	WI Walnu	Date:	7-7	7	95
From: Will Dally	ty never fine		ollars (\$ _	59.00	
InPayment of	you need Lot	Volue	est	47	6 7
Lot 5080 Grave	RowSe	ection		Division /	0
Invoice No.	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184 —	-	
Acct. No.	Salara International State of the State of	of Lots Opening/	77184 — 100	24	00
w.o. E - 18258		Closing	77181		
BALANCE DUE		Containers	77182	- Charle	
		Handling Fee Recording & Misc. Fees	77188 — 100 77183 —	14/1-15	
Pre-Need Lot At Need On Acct		Pre-Need Trust	63033		
Pre-need Trust Cash Check	9 / 1	Seles Tax	60101 78390		
AC212 (Rev. 504) # 2784	ISSUED BY AND	TOTAL PAID	版诗	59	00

CITY OF SAN DIEGO, CALIFORNIA

46246

		Date:	5 66	19 45
From: Eugenia Deteous	1100.000		74.000	7.163
hour wudie	of say five 83/1	D <sub>0</sub>	ollars (\$	43)
In past Payment of	bre need t	of for	2	
	llnan	, , , , , , , , , , , , , , , , , , ,		PI-1
Lot 508/ Grave	Row Se	ction	Division Bleck	10
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 20% Sales Care	67007 77184	
Aćat, No.	PAID IN THIS SPACE.	60% Sales of Lots	77184 465	83
E-12200		Opening/ Closing	100 77181	
W.O /397 47		Burial Containers	100 77182	
BALANCE DUE 129191		Handling Fee	77188	-
STANDARD OF THE PARTY OF THE PA		Recording & Misc. Fees	77183	
Pre-Need Lot At Need On Acct	A STATE OF THE PARTY OF THE PAR	Pre-Need Trust	63033	
Pre-need Trust Cash Check	V Bolobly	Sales Tax	76390	-
AC-212 (Rev. 604) 0/54	ISSUED BY COMPOUN	TOTAL PAID	• 465	83

# WHITE TO CUSTOMER CANARY CEMETERY AUDITOR

From: Visa Ballman	Address: 541 7111+	Date:	10/1	1 Coin	95
Filter nine & no	100 (		oliars (\$ _	59.00	
in Part Payment of Par	e-need lot & trust		September 1		
Lot 5080 Grave	Row Se	ction		Division /	0
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Seins Care	87007 77184		
Acct. No.	TAID IN THIS GRACE	80% Sales of Lots	100	59	00
12:00		Opening/ Closing	77161		
w.o. F 18928		Burial Containers	77162	HG, H-I	
BALANCE DUE		Handling Fee	77185		
		Recording & Misc. Fees	100 77183 —		
Pre-Need Lot At Need On Acct	00	Pre-Need Trust	63033		
Pre-need Trust Cash Check C		Sales Tax	60101 76390		
AC-212 (Rev. 504) 3795	ISSUED BY JOUCH	TOTAL PAID	P 3	59	00



		Date:	8-1		1895
From: Vera Ballman		t. #3,	210	3000 59.00	920a
InPayment of		<u> </u>	Oliars (\$	37.00	
Lot 5080 Grave _	Row Se	ection		Division	10
Involce No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots	67007 77184 — 100 77184 —	59	00
w.o. E-12258		Opening/ Closing Burisl Containers	100 77181 — 100 77182 —		
BALANCE DUE		Handling Fee Recording & Misc. Fees	100 77188 — 100 77163 —		
Pre-Need Lot At Need Con Acct Pre-need Trust Cash Check	OPand	Pro-Need Trust Sales Tax	63033 8022 — 60101 78390 —		
AC-212 (Rev. 544) 3786	ISSUED BY	TOTAL PAID	ATT :	59	00

STATE OF STA

WHITE TO CUSTOMER CANAAY CEMETERY PINK AUDITOR

		827-3400	1	-8		97
From Villa Ball	man	Address: 541 N. 1 St /	1+ NO.3	EI	caxon	9202
_ the hund	ud l	ighteen and holling	D/ D	ollers (\$	118.00	
In Part Payment	or you	- nera wor and o	MART			1
Lot 5080	Grave	RowSe	ction	Die	Division Brook	10
Invoice No.		NOTVALID FOR PURPOSE STATED UNLESS STAMPED TRAID' IN THIS SPACE.	CREDIT 20% Seles Care	87007 77184 —		1
Acct. No		A STATE OF THE PARTY OF THE PAR	80% Soles of Lots Opening/ Closing	100 77184 — 100 77181 —		
W.O. 0 12238 BALANCE DUE 99. 47	7		Buriel Containers	77182		
BACANCE DUE	BE T	A SEE SEE BANK	Handling Fee Recording &	77185 — 100 77183 —	117	
Pre-Need Lot At Need D	On Acct G	Dating Museum	Pro-Need Trust Sales Tax	43035 9022 —	118	00
AC-212 (Rev. 540)	3875	ISSUED BY A MA MUST UNL	TOTAL PAID	10101 76360 —	118	00



WHITE ..... TO CUSTOMER

PINKAUDITOR	MOUNT HOPE CEMETERY 527-3400				
		Date: 11	1-14		1090
From Vera Ballman	Address: P.O. BOX 2023	1 El Cal	on 9	2021	
Fifty nine ar	nd holin	D	iollara (\$ .	59.0	0,
In Part Payment of Pre	-need lot and trus	+ for		NO V	
	Tatiana kuzin	TER BUS	-31/01/1		-
Lot .5080 Grave	Row S4	ction		Division Block	10
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184 —	20	-
Acct. No.	A STATE OF THE PARTY OF THE PAR	80% Sales of Lots	77184	State of the last	-
w.o. <u>E-122.58</u>		Opening/ Closing Burtal Containers	17181 — 100	Extend	
BALANCE DUE 335, 47		Containers Handling Fee	77182 — 100 77186 —		
		Assording &	77183 -	FA	-
Pre-Need Lot At Need On Acct		Pre-Need Trust	63035 9082	59	0
Pre-need Trust Cash Check 20	Catina Jungem	Sales Tax	78390	Ea	00
AC-212 (Rev. 5-90)	ISSUED BY	TOTAL PAID	-	59	00

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date May 22, 1995

na Vault	Funeral, date, tim	WED 5/24	19569:
Shurch Chapel Graveside Chapel	gravesido o	The state of the s	Mortuar
All Funeral cars must arrive before 3:30 p.r	m. of regular work of	lay or an extra charge	of \$ 1500
will be applied and billed to undersigned. ${\cal Q}$	X plabes o	7. Therry	•
Net time veteran 770 .		0	
ot <u>719</u> Grave Row	Section	Division/B	Hock 10
Grave space & Care Fund	re-Bud	11-1465	0
Additional spaces and care fund			
Opening/Closing & Setup	- Steed	E-8160	
Burial Container	CI	*1	<u>Ø</u>
Handling Fees	(1		. 2
Flower vases – Marker setting fee			B
Recording and filing fee			
Sales taxes	11	"	N
atistund DP.		Total Due	
5 3 3 3	d receipt number _	THE STATE OF THE S	2
Thompson -1	52.000 • 2007	Balance due	· B
hereby certify I am the X dun	1. Cen	of the above i	named decede
and this is your authority to make disposition that I have the right to make this authorization liability on account of said authorization	ion and I agree to he	bove indicated. I certi	fy and represe
	0	120	/ .
	XXX	no a. Jac	uring
hereby authorize the interment in lot I lold under deed.	Signature 3	68 ante:	5 5 pu
nold under deed.	Address C	68 ante.	CA CA
nold under deed.	Address City Telliphone	68 Amti. hula Vista 120-141	CA TOO
hereby authorize the interment in lot I nold under deed.	Address City Telephone	68 Anti- hala Visto 420-141	27 5 pm



USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDOLE	1C. LAST (FAMILY)	property design and the property of the	2. DATE OF BIRTH	3. DATE OF DEATH   4. SEX		
MIMI		MELL	EBER	r	6373071969°	05/19/1995 P		
SAN DIEGO					NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMATT RENHIETH P. ADERNICK - SON			
		A FUNERAL DIRECTOR OR PERS LOUGH MORTUARY SAN DIRECO, CA 9:		WD 480	3965 IOWA STR SAN DIEGO, CA BA-SIGNATURE OF APPLICANT—F			
ACKNOWLEDGMENT OF A		actionship as applicant that the proposed 1376 of the Health and Saloty Gode, and was			Dow bh	05/22/199		
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	AND IS THE AUTHORI IN THIS PERIMIT.	UED IN ACCORDANCE WITH PRO- CORNIA HEALTH AND SAFETY CO ITY FOR THE DISPOSITION SPECIFI ID MINIT OF DOPUSAL ORTSIDE OF CILIFOR	\$7.00	98. DATE PERMIT		CAL REGISTRAR ISSUING PERMIT		
ANY CHANGE IN DISPOSE TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	VITAL MEC	EGISTRAR OF DISTRICT OF DE PADE ALFORNA O. BOX ( CA 92186-5222			OF DISTRICT OF DISPOSITION— R IN ANOTHER DISTRICT IN CAUFO	RNIA		
A. BURIAL (INCLU			E. TEMPORARY EN	A44.52.96(7).50	34	ONER'S USE ONLY PENDING—REMAINS LOCATED A' ddress)		
BURIAL	HOUNT NOW 3751 MARKE	DORESS OF CALIFORNIA CEME CEMETRE SAN D	ETERY IBGO, CA 92102	118. DATE BURIED	11C. SIGNATURE OF PER	SON IN CHARGE OF BURIAL		
CREMATION	12A. NAME AND A	DDRESS OF CALIFORNIA CREA		129. DATE CREMATI	ED 129 SIGNATURE OF PERS	SON IN CHARGE OF CREMATION		
SCIENTIFIC	10-10-	ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS 13B, DATE RECEIVED 13C, SIGNATURE OF PERSON IN CHARGE OF FACILITY			SON IN CHARGE OF FACILITY			
TRANSIT		DORESS IN RECEIVING STATE CREMATED REMAINS ARE TO		148, DATE SHIPPE	PED 14C, ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER			
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		Arest Point on Shoreline, of Entify final place and ca <u>de</u> A		168. DATE OF DISPOSITION	16C. SIGNATURE OF PER CHARGE OF DISPOS			

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.





#### INTERMENT ORDER

City of San Diego

Date May 22,1995

You are hereby authorized and instructed, s	MINISTER PRODUCTION OF THE PROPERTY OF THE PRO		he remain:
	mythe		1
na ash woulf	Funeral, date, time		
Church, Chapel, Graveside			Mortuary
All Funeral cars must arrive before 3:30 p.m.	of regular work day or	an extra charge of \$	
vill be applied and billed to undersigned	/	7	
War time veteran X			
Lot <u>1463</u> Grave Row	Section/	Division/Block	8
Grave space & Care Fund	re-Dred 1	\- <i>252</i>	0
Additional spaces and care fund			
Opening/Closing & Setup/			05.a
Burial Container	**************************************		55.0C
landling Fees		4	0.DC
Flower vases - Marker setting teg	W I		
Recording and filing fee	· V		5.00
Sales taxes	Mo Co		3.85
Flower vases - Marker setting fee	Total I	Due24	8.85
- Pald	receipt number		
	1231	Balance due	
hereby certify I and the	10	of the above name	d deceden
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization	n and I agree to hold Mt.	ndicated. I certify and Hope Cemetery har	represent miess from
	V		
hereby authorize the interment in lot I hold under deed.	Signature		
	Lavere		-
ignature of recorded holder of deed	con .		Zip Code
99	Taiephone		
- 12260	Invoice #		
Nork Order # E	Acct. #		
W.503 (Rev 8.02)			

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date May 23, 95

of Wilma G. Ina lines Funeral	date, time WED 5/24/95@1/2
Church Chaper Craveside Church & graws	
- 0	
All Funeral cars must arrive before 3:30 p.m. of regula	refork day or an extra charge of \$ 100
will be applied and billed to undersigned. 🔼 🗡	pringasi
New time veteran	0
01255 Grave / Row	Section 2 Division/Black /2
	nace
Grave space & Care Fund	\$5 \$2-50 P66 P66 P66 P66 P66 P66 P66 P66 P66 P6
Additional spaces and care fund	
Opening/Closing & Setup	<u>375 °</u>
Burial Container	190°
landling Fees	Iller oc
lower vases - Marker setting fee	
	11/00
Recording and filing fee	12 21
Sales taxes	13-36
	Total Dup
Paid receipt n	umber Kec # 460H9 400.0
0	Balance due 1/43
· · · · · · · · · · · · · · · · · · ·	WEST WAST TO THE TOTAL OF THE T
hereby certify I am the Account this is your authority to make disposition of rema	of the above named decede ins as above indicated. I certify and represe
hat I have the right to make this authorization and I ac my liability on account of said authorization and inter	ree to hold Mt. Hope Cemetery harmless from
	-//
hereby authorize the interment in lot I	D Sinyard
old under deed.	231 0684 St
P. C.	Sem Diego Sa 924
ignature of recorded holder of deed	Sum Diego ca 921
2	266-0873
	2511221
- 12261 h	voice * 354334
100	10-321
그게 되었습니다 내 그리고 내가 되었다. 그는 그리고 아내는 그리고 있다면 그리고 있다.	xt.#OX.5.5.51



	327-540	5-31			00
From Darrell V. Singa	nd Address 331 Las H St	Date: 17.	DAY C	2114	19.95
- tour Her	sterisent of Wils	1	ollars (\$	400.00	<u></u>
Lot 255 Grave _	/ Row Se	ectionC	ュ	Division Bleck	12
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED TPAID IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burist Containers Handling Fee Pecording & Misc. Fees	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77182 — 100 77183 —	400	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check CAS-212 (Rev. 5-91)	BSUED BY An Clark	Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 — 60101 76390 —	400.	00

MT	HO	DE	CEM	FT	FRY
TOT I .	. nu		CEM		Eni

w.o.# E- 12261

## NOTE

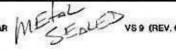
<b>\$</b> —	1163.30			ilifornia <i>37</i>	0		1994
3751	ly days after date for value r Market Street, San Diego,	eceived, the undersig	ned maker pron of Eleven 44	nises to pay San D Indud Jivty	iego City Tre	easurer, or or	derat
	interest from	June	24, 199	15		e unpaid pri	
at the	e rate of 12 percent per an	num, payable on den	nand.				
will to matu perse cont	ue at the rate indicated abo be liable and consents to re trity, and waives presentme on who signs this note agr ained herein. If any action fix as attorney's fees.	enewals, replacement ent, demand and pro ees that recourse m	its and extension stest and the right ay be held again	ns of time for pay ht to assert any st hst his/her separa	ment hereof atute of limi te property	before, at or tations. A m for any oblig	r after arried gation
•	Part II, Chapter I, Arti authorizes the removal	of any remains from a	plot for which th				
	TNAME DARRELL RESS 231 68th		signatur Diego, Ca	92/14	mya	rl	
	FORNIA DRIVER LICENSE NUMI	MACACHEL		ssn#_52	2-92-	8105	



#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO FRASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDENT—FIRST (GIVEN) 18. MIDDLE		SINYARD	~	2. DATE OF BIRTH S. DATE OF DEATH 4. 04/21/1919 05/20/1995			
SA. CITY OF DEATH		100		ATH-OUTSIDE CALIF.,	6. NAME, RELATIONSHIP, FULL		CODE
an Diego			San Diego		Darrell Sinyard	son	
estheringil en Diego, C		6322 E1 Cajor	PERSON ACTING AS SUCH 78.	n 4082	231-68th St. San Diego, CA 921 8A SIGNATURE OF APPLICANT-		SIGNED
ACKNOWLEDGMENT OF M	PLICANT   I hereby a Section 10	actionsholge as applicant that the p 376 of the Health and Salety Code, a	represed disposition stated herein is one of and was authorized sursuant to Section 7100 s	the dispositions authorized by of the Health and Safety Code.	See Jundal	65/23/	1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.		PROVI- TY CODE PECIFIED 9A. AMOUNT OF FEE		9506938	OCAL REGISTRAR ISSUING	3 PERMIT
TION REQUIRES A NEW	IF DEATH OCCURRE	EGISTRAR OF DISTRICT ( D IN CALIFORNIA San Diego, C/	MATERIA NO.		OF DISTRICT OF DISPOSITION- IR IN AMOTHER DISTRICT IN CAUF		
HORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS	A		FOR CO	RONER'S USE ONLY	
B. CREMATION			F. DISINTERMENT		W-01/11/2/2/2/2/2/2/		
C. DISPOSITION THAN IN A CE D. SCIENTIFIC US	Ht. Hope	DORESS OF CALIFORNIA	Landa Maria Maria Cara	ITSIDE OF CALIFORNIA	11C. SIGNATURE OF PE	RSON IN CHARGE OF BUI	RIAL
D. SCIENTIFIC US	Mt. Hope San Diago	DORESS OF CALIFORNIA	H. TRANSIT TO OU	ITSIDE OF CALIFORNIA	Wax	RSON IN CHARGE OF BUI RSON IN CHARGE OF CRE	
D. SCIENTIFIC US	METERY SE  11A. NAME AND AD  Mt. Hope  San Diego  12A. NAME AND AD	DRESS OF CALIFORNIA COMECTORY , CA DDRESS OF CALIFORNIA	H. TRANSIT TO OU	118. DATE BURIED	Wax	PSON IN CHARGE OF CRE	MATION
BURIAL  CREMATION  SCIENTIFIC	SEN DIEGO  12A. NAME AND AL  12A. NAME AND AL  13A. NAME AND AL  14A. NAME AND AL	DORESS OF CALIFORNIA COMBESS OF CALIFORNIA DORESS OF CALIFORNIA	H. TRANSIT TO OU  CEMETERY  CREMATORY  FACILITY RECEIVING REMAINS  TATE OR COUNTRY WHERE	118. DATE BURIED	ED 12C, SIGNATURE OF PER	RSON IN CHARGE OF CRE	MATION



E-1224	100 072	77181 000072 77182 000072 77183 000072 77184 000072 77185 000072 78390 77184	44-063191	500.00 161.18 81.66 19.34 101.44 62.32 5.72 68.34	1,163.30	PARTIAL PAYMENT	
--------	---------	--	-----------	--	----------	-----------------	--

#### INTERMENT ORDER

City of San Diego

. ME# 95-0945

Date May 23, 95 (1995)

of Stanley	Langman PA#11803.5
	Funeral, date, time ( ) 5 5 34 95 @ H
	4 only: AM- ISRAEL Mortuary
//	
	of regular work day or an extra charge of \$
will be applied and billed to undersigned	
War time veteran	
ot 29 Grave 12 Row_	Section Division/Block /2
Srave space & Care Fund	124.1
Additional spaces and care fund	
	165 a
Burial Container	
Flower vases – Marker setting fee	1100
Recording and filing fee	
Sales taxes	001
	Total Due
Paid	receipt number
	Balance due
hereby certify I am the	of the above named deceden
hat I have the right to make this authorization	n and I agree to hold Mt. Hope Cemetery harmless from
any liability on account of said authorization a	and interment.
hereby authorize the interment in lot I	
nold under deed.	Signature
	Address
ignature of recorded holder at deed	City Zip God
	Telephone
40000	25/127
Nork Order # E 12262	Invoice #_ <u>854237</u> Acct. # 000952

CITY OF SAN DIEGO, CALIFORNIA GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P O Box 2289

San Diego, California 92112 Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO PUBLIC ADMINISTRATOR 5201 A RUFFIN ROAD CA 921-23 SAN DIEGO

ACCT NO 000952

----TREASURERS USE ONLY--

9-6-95 PAYMENT DATE CA

PAYMENT REF NO \_04-883709\_\_ | AMT PAID: \_386.00

INVOICE DATE 05/26/95

PAYMENT DUE 06/25/95

PERIOD COVERED APRIL

FOR INFORMATION CONCERNING YOUR BILLING CONTACT: JOANN WAITS REF NO: E-12262 DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

STANLEY LANGMAN PAR1180355 SVC LOT 29 GRAVE 12 SEC 1 DIV 12 OPENING/CLOSING LINER RECORDING FEE

126.00 165.00 50.00

45-00

TOTAL DUE 386-00 NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER. INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE. AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT ISTED ABOVE White - Customer Copy \* Yellow - Remittance Copy INV NO.

E-12262

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDENT—FIRST (GIVEN) 18 MIDDLE STANLEY MICHAEL			IC. LAST (FAMILY)		2. DATE OF BIRTH 3. DATE OF DEATH 4.	SEX
SAN DI	EGO		SE COUNTY OF DEAT	M. Harrison and M. C.	H. MAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CO OF INFORMANT PUBLIC ADMINISTRATOR	DE
AM ISRAEL	. MORTUARY	A FUNERAL DIRECTOR OR PER	, -	FAPPLICABLE	5201-A RUFFIN RD SAN DIEGO CA 92123	
ACKNOWLEDGMENT OF A	no mater   I hereby a	SAN DIEGO CA 92 commender as applicant that the propose DN of the Health and Safety Code, and was	of disposition stated becomes one of the	dispositions authorized by	BA. SIGNATURE OF APPLICANT—translating prints   88. DATE SI	
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	JED IN ACCORDANCE WITH PR OFFINIA HEALTH AND SAFETY C TY FOR THE DISPOSITION SPECIF ID BIGHT OF DEPOSAL DUTSING OF CALFO	OVE 9A. AMOUNT OF FEE P		SSUED OF SIGNATURE OF LOCAL REGISTRAR ISSUING PE	RMIT
ANY CHANGE IN DISPOSE TION REQUIRES A NEW TO SHOW FINAL	DE ADDRESS OF REPORTE	EGISTRAR OF DISTRICT OF D	EATH- 9E. AD		OF DISTRICT OF DISPOSITION—	
IC HORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS			FOR CORONER'S USE ONLY	
B. CREMATION	SE		F. DISINTERMENT*  G. SHIP IN TO CALIFO  H. TRANSIT TO OUTS	ORMA	I. DISPOSITION PENDING—REMAINS LOCAT (Name and Address)	
BURIAL	MOUNT HO	DDRESS OF CALIFORNIA CEN PE CEMETERY KET ST SAN DIEG		56495	TIC. SIGNATURE OF PERSON IN CHARGE OF BURIAL	
CREMATION	12A. NAME AND AD	DORESS OF CALIFORNIA CRE	MATORY	12B. DATE CREMATI	ED 122 SIGNATURE OF PERSON IN CHARGE OF CREMAN	ION
SCIENTIFIC USE	13A. NAME AND AD	ODRESS OF CALIFORNIA FAC	ILITY RECEIVING REMAINS	13B, DATE RECEIV	ED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY	CY.
TRANSIT		DORESS IN RECEIVING STATE CREMATED REMAINS ARE TO		14B, DATE SHIPPE	D 14C. ADDRESS AND SIGNATURE OF PERSON IN CHA OF PLACING WITH THE CARRIER	AGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEA	REST POINT ON SHORELINE, O ENTIFY FINAL PLACE AND GA <u>D</u>		15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION OF CREMATED MAINS DISPOSITION APPLICABLE	RE- ER



# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 5-23-95

You are hereby authorized and instructed,	subject to your rul			ter the remains
	Funeral, date, ti	2.4	1	11:00
* Church, Chapel, Graveside Chapel	- 4	The same	2 . 0	
All Funeral cars must arrive before 3:30 p. will be applied and billed to undersigned.	2 0 . 11		1 1 1	1\$ 150.00
War time veteran NO.	,		0	
Lot 87 Grave 8 _ Row_	Section	2	Division/Ble	okL_
Grave space & Care Fund				795.00
Additional spaces and care fund				375,00
Opening/Closing & Setup				
Handling Fees				1000
Flower vases - Marker setting fee				
Recording and filing fee				45.00
Sales taxes				17.50
		Total Due	************	1667,50
Pa	d receipt number	VISA	+	417.00
11.1	1.4.		Balance due	1250,5
I hereby certify I am the and this is your authority to make disposit that I have the right to make this authorization any liability on account of said authorization.	ion and I agree to	above indic	ated. I certify	and represent harmless from
I hereby authorize the interment in lot I hold under deed.	Ligngure	Tany	na Who	At
	Address	5 6	A Tisero	CONCE
Bignature of recorded bolder of deed	× 2 13	Ang 8	1-7140	70043 Zip Code
/	Telliphone	25	110117	
- 12263	Invoice #	20	4243	
Work Order # E	Acct. # _	085	1525	-
PY-593 (Rev. 8-92)				

\$1250.50

PY-1012 (11-89)

## W.O. # E-12263

#### NOTE

San Diego, California

\$19.50.30	San Diego, California _	11104 03	1993
Thirty days after date for value received, the			ororderat
3751 Market Street, San Diego, CA 92101,		dred fifty & 5910	DOLLARS
with interest from	Gune 1995	on the unpai	d principal
at the rate of 12 percent per annum, payar	ble on demand.		
Should this note not be paid when due accrue at the rate indicated above. Princip will be liable and consents to renewals, rematurity, and waives presentment, deman person who signs this note agrees that recontained herein. If any action be institute may fix as attorney's fees.	al and interest are payable in lawful eplacements and extensions of time and and protest and the right to asse ecourse may be held against his/he	money of the United States, of for payment hereof before, art any statute of limitations, or separate property for any	The maker , at or after . A married obligation
	agraph 7528 of the State of Califo ains from a plot for which the purcha		SCORES &
ADDRESS X 6345 La.	gight SIGNATUREX	Lanyale La 190	Deight
CALIFORNIA DRIVER LICENSE NUMBER	6936313 ssn	1+× 547-37-7	488

# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

LISE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	NT-FIRST (GIVEN)	IB. MIDDLE	IC. LAST (FAMILY)			2. DATE OF BIRTH - DATE	DOF DEATH	4. SEX
Charles		Edward	Wright		201	1897/28/1958 8572	071995"	M
SA. CITY OF DEATH				ATH-OUTSIDE CALIF.	6. NAME	RELATIONSHIP, FULL MAILING AL	DORESS AND ZIF	CODE
San Diego			San Die	go	LT	ormant Wright-Daug	hter	
		6 Burial Chape San Diego, CA 9	The same of the sa	CALIF. LICENSE NUMBER —IF APPLICABLE  FD 1357	1,08	5 La Tijera Blvd Angeles, CA 900	56	COUNTY
	1 Thomas	converge is applicant that the propers	ACCOUNT OF THE PARTY OF THE PAR	Charles of the Control of the Contro	BA. SRIP	ATUBE OF APPLICANT—Person Shine		3/199
ACHINOWLEDGMENT OF A	Section 11	376 of the Health and Safety Code, and wa	<u> </u>	NAME AND POST OF THE PERSONS ASSESSED.		of allow	-	-
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH PR ORNIA HEALTH AND SAFETY C TY FOR THE DISPOSITION SPECI IS INGIT OF DEPOSAL OUTSIDE OF CALFO	FIED	05/23/1 Kyle Ch	995	9506974 ▶	ISTHAN ISSUING	3 PEHMI
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW SENIOR TO SHOW FINAL DISPOSITION.	Vital Rec	GISTRAR OF DISTRICT OF CO	5222	ADDRESS OF REGISTRAL IF DISPOSITION IS TO OCC		THE DISTRICT IN CALIFORNIA	1111	
THORIZED DISP	OSITION(S) CHECK A	, CA 92186-5222	1			FOR CORONER'S	LISE ONLY	_
B. CREMATION		AMS OTHER	E. TEMPORARY EN			L DISPOSITION PENDING (Name and Address)	REMAINS LO	CATED AT
BURIAL		press of California Cen pe Cemetery, o, CA	METERY	118. DATE BURIL	ED   110	SIGNATURE OF PERSON IN C	CHARGE OF BU	RIAL
CREMATION	12A NAME AND AL	tal non-	Bealer	128. DATE/CREMA	TED   120	SEMATURE OF PERSON IN C	HARGE OF CRE	MATION
SCIENTIFIC	13A. NAME AND AC	DDRESS OF CALIFORNIA FAC	ALITY RECEIVING REMAINS	13B. DATE RECE	IVED 130	SIGNATURE OF PERSON IN C	CHARGE OF FA	CILITY
TRANSIT		DDRESS IN RECEIVING STATE CREMATED REMAINS ARE TO		14B. DATE SHIPS	PED   140	ADDRESS AND SIGNATURE O OF PLACING WITH THE CARR		CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	FICIENT TO IDE	REST POINT ON SHORELINE, O NTIFY FINAL PLACE AND CA D		15B. DATE OF DISPOSITIO		SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	OF CREMA MAINS DE	ATED RE-



#### INTERMENT ORDER

City of San Diego

Date May 24, 1995

ina T.S. Vault	Funeral, date, time TUE 5/30/95/0/0:30
Vaulti iner	maveside: Clairemont Mortuar
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge of \$ 150
will be applied and billed to undersigned.	e Commission of the Commission
War time veteran X MD	
Lot Grave / GROW	7 Section Division/Bleek //
	185 AMUNICAS ASSA
Grave space & Care Fund	COURT CHEEN DE
Additional spaces and care fund	2015
Opening/Closing & Setup	AID 380
Burial Container	1950
Handling Fees	2 4 1995
Flower vases - Marker setting fee	
Recording and filing fee	
Sales taxes CTTY of SA	Sha -
	Total Due 7d-3c
Paid	receipt number (ELC "4(0,505) 5 16.00
VN "	Balance due
that I have the right to make this authorization	of the above named decede h offremains as above indicated. I certify and represe in and I agree to hold Mt. Hope Cernetery harmless from and interment.
any liability on account of said authorization	
any liability on account of said authorization a	L 10 1/11
I hereby authorize the interment in lot I	to Dewelleyer
	+ Newelleyer -
I hereby authorize the interment in lot I	Franchise en 9211 Sandrage en 9211 Sandrage en 9211 Sandrage en 9211
hereby authorize the interment in lot I hold under deed.	Spranie 2325W. JEWETT ST.  San Diago en 9211  Telephone 176 9161  Invoice #

CITY OF SAN DIEGO, CALIFORNIA

46255

# WHITE.....TO GUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY 527-3400

ZIRO LILING	Wist.	Date: 12	my	24.	19 94
From: 40 T/40	Address: 333 Junt	St 5. b.	CA	9211	1
Eight Hung	tred Sevente Swor	50/100 D	oltars (\$	872	50)
InPayment of	terment of Conga	Kena	1011000		
Taymon or		0			7
Lot Grave	16 Row 7 s	ection 411/2	9	Division Block	11
Lot Grave _		1		Block	11
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 20% Sales Care	67007 77184 —		-
Acct. No.		80% Sales of Lots	77184		
1-12264		Opening/ Closing	77181 -	775	00
w.o		Burial Containers	100 77182 —	250	0
BALANCE DUE		NAME OF TAXABLE PARTY.	100	155	00
	THE RESERVE OF THE PARTY.	Handling Fee Recording &	77185	400	127
The second of th		Misc. Fees Pre-Need	77183 — 63033		1000
Pre-Need Lot At Need On Acct		Trust	9022	des	-
Pre-need Trust  Gash  Check	A Wheel	Sales Tax	78390	- 11	100
AC-212 (Flov. 5-84) # 60/	ISSUED BY AND CHICA IS	TOTAL PAID	8	872	50

會華中埠咕姐山國美 क्रम Chinese Consolidated Benevolent Association 0853 428 THIRD STREET COMMISAN DIEGO, 雞印欺捐 CALIF., U. S. A. DATE 26 Sept 92 inancing HONG, NHOC CONG 唐王光 2323 W. Jewett St. SD 92111 Panhare (2) plots; GR, \$ 16 \$ 017 Stechin "11 \$ 900 =

E-12264

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

TA. NAME OF DECEDE CONG	ENT—FIRST (GIVEN)	18. MIDDLE NHOC	IC LAST OF	MILY) HONG		2. DATE OF BIRTH	3. DATE 03723	OF DEATH 4. SEX
6A CITY OF DEATH	SAN	DIEGO	58. COUNTY C	F DEATH-OUTSIDE CALIF.  ATE SAN DIEGO	OF INF	RELATIONSHIP, FULL MA ORMANT NETH LYNN: S		DRESS AND ZIP CODE
		: 4266 MT. ABE SAN DIEGO, C	RNATHY AVE	7B. CALIF. LICENSE NUMBER —IF APPLICABLE  FD-1126	SAN	DIEGO, CA 9	2111	
ACKNOWLEDGMENT OF A		consisting as applicant that the propo	sed disposition stated heren is	one of the dispositions authorized by	BA. SIGN/	TURE OF APPLICANT—N	mon taking po	05/26/1995
PERMIT AUTHORIZATION OF	THIS PERMIT IS ISSI SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	375 of the Health and Safety Code, and of JED IN ACCORDANCE WITH P ORNIA HEALTH AND SAFETY TY FOR THE DISPOSITION SPEC 0 MORT OF DISPOSAL OUTSIDE OF CALL	HOVI- CODE CIPIED 7.00	F FEE PAID VOE DATE PERMI		9507181	AL REGIS	STRAR ISSUING PERMIT
	P.O. BOX	EGISTRIAR OF DISTRICT OF 85222 , CA 92186-522		9E. ADDRESS OF REGISTRAS IF DISPOSITION IS TO OCC			INIA	
A. BURIAL (INCL)		- * *	F. DISINTERM G. SHIP IN TO	Salar and a salar		The second secon	PENDING-	-REMAINS LOCATED AT
BURIAL		ODRESS OF CALIFORNIA CE CEMETERY: 3751 SAN		- 112-10	ED   110	SIGNATURE OF PERS	SON IN CH	HARGE OF BURIAL
CREMATION	12A. NAME AND A	DORESS OF CALIFORNIA CR	REMATORY	128. DATE CREMA	ITED 12C	SIGNATURE OF PERS	ON IN CH	ARGE OF CREMATION
SCIENTIFIC USE	ISA. NAME AND A	DOODLY	CILITY RECEIVING REM	IAINS 13B. DATE RECE	IVED 13C	SIGNATURE OF PERS	ON IN CH	HARGE OF FACILITY
a TRANSIT		DDRESS IN RECEIVING STAT CREMATED REMAINS ARE 1		IE 14B. DATE SHIPF	PED 14G	ADDRESS AND SIGNA OF PLACING WITH TH		
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	FIGIENT TO IDE	REST POINT ON SHORELINE, NTIFY FINAL PLACE AND GA				SIGNATURE OF PERS CHARGE OF DISPOSE		15D. LICENSE NUMBER OF CREMATED RE- MAINS DISPOSER —IF APPLICABLE

#### INTERMENT ORDER

City of San Diego

Date May 25, 1995

You are hereby authorized and instruc	ded, subject to your rule	1	nter the remains
ina lines		me TUSS 5/30	45@IIA
Church Chapel, Graveside Church		Rappale	Mortuary
All Funeral cars must arrive before 3:3 will be applied and billed to undersigne	p.m. of regular work		The same
War time veteran Xno.			
Lot 7 Grave 5 Ro	w Section	3 Division/Bi	ock 12
Grave space & Care Fund		***************************************	795 00
Additional spaces and care fund		***************************************	
Opening/Closing & Setup			37500
Burial Container			
Handling Fees			145.00
Flower vases - Marker setting fee		************************	B
Recording and filing fee			45 00
Sales taxes			13.30
daller 2	Paid receipt number	Total Due 46258 Rec. 46258	342.00
18 #34		Balance due	1172130
I hereby certify I am the X U A and this is your authority to make disp that I have the right to make this author any liability on account of said authoriz	osition of remains as a ization and I agree to I	bove indicated. I certify	amed decedent y and represent y harmless from
I hereby authorize the interment in lot I hold under deed.	K.D.	click you	
Signature of recorded holder of deed	X 6 19 Telephone	- 263-2723	92113 Zip Cocks
Work Order # E 12265	Invoice #	085345	9

PY-593 (Rev. 8-92)

W.O. # E-12265

#### NOTE

\$_	1172.30	San	Diego, California	may	n 25	19_9
375	irty days after date for value received, the 51 Market Street, San Diego, CA 92101, th interest from	e undersigned m the sum of £1e	naker promises to p	ay San Diego C	City Treasurer	or order at
at t	the rate of 12 percent per annum, payat					
ma per cor	Should this note not be paid when due crue at the rate indicated above. Principall be liable and consents to renewals, resturity, and waives presentment, demandrson who signs this note agrees that rentained herein. If any action be instituted by fix as attorney's fees.	al and interest and placements and d and protest a course may be	re payable in lawful l extensions of time and the right to assi- held against his/he	I money of the e for payment ert any statute er separate pro	United States. hereof before of limitations operty for any	The maker , at or after . A married obligation
	Part II, Chapter I, Article 2, Para authorizes the removal of any rema					
PRI	INT NAME Delilah JONE DRESS 234 Do46年84	S Jan Di	SIGNATURE DA	which you	nls	
	LIEODNIA DDIVED LICENSE NUMBER N. A	136421	99	N. 432	-60-29	22

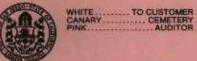
# WHITE TO CUSTOMER CANARY CEMETERY PINK. AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

		Date: 3/ lay	00 , 19 /-
From Selelah Jones	Address; 234 5 46 th	St. S.D. CH	92113
Follow th	in \$ 05/00-	Dollars (\$	49.00
In Payment of	neterment of Ler	our Agnes S	2.
		1	TO DEED VE
Lot Grave	5RowS	ection	Division /a
No. E-12365  W.O. E-12365  BALANCE DUE # 1514.30  Pre-Need Lot    At Need   On Acct   Pre-need Trust   Cash   Check	NOTVALIDEOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE	CREDIT 20% Sales Care 77184 — 80% Sales 100 of Lota 77184 — 100 Closing 77181 — 100 Containers 77182 — 100 Handling Fee 77185 — Recording & 100 Misc. Feels 77183 — 17	49 00
AC-212 (Rev. 5-94) # //25	ISSUED BY 30 CLACK	TOTAL PAID \$	49 00

CITY OF SAN DIEGO, CALIFORNIA

46286



#### MOUNT HOPE CEMETERY 527-3400

From Onderson-Ragoo	Jale Address: 5050 Feder	Date: 6	19 92102
In Cort Payment of	thronest Lengy	mes In.	(\$342.00)
Lot 7 Grave _	5 Row	ection 3	Division / 2
Invoice No	NOTVALIDEOR PURPOSE STATED UNLESS STAMPED TPAID IN THIS SPACE	### CREDIT 20% Sales Care 77184 80% Sales 100 of Lots 77184 Opening/ 100 Cooling 77181 Burial 100 Containers 77182 Containers 77182 Pre-Need 63033	343,00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check CAS-AC-212 (Rev. 5-94)	ISSUED BY Hauch	Trust 9022 Sales Tax 60101 78390 TOTAL PAID 4	

2-12265

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE Leryy	NT—FIRST (GIVEN)	18. MIDDLE Eplusvil	Jones		2. DATE OF BI MONTH, DAY, 09/11/19:		
5A. CITY OF DEATH	iego		SE COUNTY OF DEAT ENTER STATE SED Diego	or a contract of the contract	NAME, RELATIONSHIP, OF INFORMANT Delilah Jone	THE RESERVE	SS AND ZIP CODE
Anderson-Rag	sdale Mort	A-FUNERAL DIRECTOR OR PERSON  .; 5050 Federal B  San Diego CA  chowleage at applican had the prospected of	lvd.	1329 8 dispositions authorized by	234 S. 46th San Diego.	CA 92113	08 DATE SIGNED
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU- SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	\$76 of the Health and Saleta Cube, and was aut IED IN ACCORDANCE WITH PROVID ORNIA HEALTH AND SAFETY CODE Y FOR THE DISPOSITION SPECIFIED D MIGHT OF DISPOSAL DUTSEE OF CALIFORNIA.	BA. AMOUNT OF FEE F	he Hesith and Safety Code.	SSUED BC SIGNATURE	OF LOCAL REGISTR	AR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TIGHT REQUIRES A NEW TO SHOW FINAL POSITION	Vital Reco	GISTRAR OF DISTRICT OF DEAD IN CAUFORNIA POS BOX 852 Diego, CA 92186-	22		DE DISTRICT OF DISPOSI IN ANOTHER DISTRICT IN		
A. BURIAL (INCLU			E. TEMPORARY ENV. F. DISINTERMENT G. SHIP IN TO CALIF H. TRANSIT TO OUT:	DECOMPOSIO	I DISPO	CORONER'S US SITION PENDING—RE and Address)	EMAINS LOCATED AT
BURIAL		Cemetery; 3751 Ma San Diego, CA	rket St.	5/30/95	11C. SIGNATURE C	F PERSON IN CHAR	GE OF BURIAL
CREMATION	N/A	odness of california crema	r- Deal	128. DATE CREMATE	ED 12C. SIGNATURE O	F PERSON IN CHARG	SE OF CREMATION
SCIENTIFIC USE	N/A	DRESS OF CALIFORNIA FACILIT	Y RECEIVING REMAINS	13B. DATE RECEIVE	ED 13C. SIGNATURE O	F PERSON IN CHAR	GE OF FACILITY
TRANSIT		ORESS IN RECEIVING STATE OF CREMATED REMAINS ARE TO BE		148. DATE SHIPPED		SIGNATURE OF PE WITH THE CARRIER	RSON IN CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR C NTIFY FINAL PLACE AND CA <u>DISTI</u>		158. DATE OF DISPOSITION	15C. SIGNATURE OF L		D. LICENSE NUMBER OF CREMATED HE- MAINS DISPOSER —IF APPLICABLE



# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 5-25-95

on and to the To	subject to your rules and regulations, to inter the remai
or Mercado, Vicio	VI HUGO PA 11/74/66
Vault/Liner A	Funeral, date, three
Church, Chapel, Graveside (Qeline)	ing only Consad Mortusi
All Funeral cars must arrive before 3:30 p.m	n. of regular work day or an extra charge of \$
will be applied and billed to undersigned	
War time veteran	
Lot Grave Row	Section Bivision/Block
Grave space & Care Fund	136.0
Additional spaces and care fund	
Opening/Closing & Setup	1 1/65
Burial Container	072500
Handling Fees	1 1 10
Flower vases - Marker setting fee	
Recording and filing fee	45.0
Sales taxes	11-0 11
thraine Howar	386.
	d legeligt number
00,,0	Balance due
I hereby certify I am the	of the above named decede
and this is your authority to make disposition	on of remains as above indicated. I certify and represe
that I have the right make this authorization any liability on account of said authorization	on and I agree to hold Mt. Hope Cemetery harmless fro and interment.
I hereby authorize the interment in lot I hold under deed.	Bignature
noid under deed.	Address
Signature of recorded holder of deed	
	City Zip Co
	Telephone
- 12266	Invoice #
Work Order # E 12266	Acet. #
MY 500 (D 0 00)	Action 10

#### INTERMENT ORDER

City of San Diego

Date May 26,95

ina unes	- Nuneg Funeral, date, time 6	112/95/	11 pm
Church, Chapel, Graveside <u>deliril</u>		DA.	Mortuar
All Funeral cars must arrive before 3:30 p.m.		446-6	.222
		an extra charge	
will be applied and billed to undersigned.			
War time veteran			10
Lot 49 Grave 4 Row	Section	Division/E	Block 12
Grave space & Care Fund			126.0
Additional spaces and care fund			
Opening/Closing & Setup			1/ PA
Burial Container			En N
Handling Fees			
Flower vases – Marker setting fee			
Recording and filing fee			115 n1
Sales taxes			
		Due	301.1
Paid	receipt number	000	
Paid	receipt number	Balance du	
		200	W. W.
20 19 12219 1251		_ of the above ndicated. I cert	named deceder ify and represer
I hereby certify I am the and this is your authority to make disposition	of remains as above		
and this is your authority to make disposition that I have the right to make this authorization	and I agree to hold M	t. Hope Cemete	ry harmless from
and this is your authority to make disposition that I have the right to make this authorization	and I agree to hold M	t. Hope Cemete	ry harmless fro
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization a I hereby authorize the interment in lot I	n and I agree to hold Mi and interment.	t. Hope Cemete	ry harmless fro
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization and the said authorization and authorization and the said authorization and authorization and	n and I agree to hold Mi and interment.	t. Hope Cemete	ry harmless froi
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization and the said authorization in the said authorization and the said a	n and I agree to hold Mi and interment.	t. Hope Cemete	ry harmless froi
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization and the said authorization in the said authorization and the said a	n and I agree to hold Mi and interment.	t. Hope Cemete	ry harmless froi
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization and the said authorization in the said authorization and the said a	n and I agree to hold Mi and interment.  Signature	t. Hope Cemete	
and this is your authority to make disposition	n and I agree to hold Mi and interment.  Signature  Address  City	549	

GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P O Box 2289

San Diego, California 92112
Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

PAYMENT DATE OF NO 04-859568 AMT PAT

MT PATE 386-00

O6/14/95

07/14/95

PERIOD COVERED

JANE RAUCH
DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

FRANCISCO GONZALEZ NUÑEZ SVCS
PAPILAO851
LOT 49 GRAVE 4 SEC 1 DIV 12
OPENING/CLOSING
LINER
RECORDING FEE

126.00 165.00 50.00 45.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10, WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT LISTED ARDVE White-Customer Copy • Yellow-Remittance Copy

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

NAME OF DECEDE							
FRANCISC	AND DESCRIPTION OF THE PARTY OF	18. MIDDLE GONZALEZ	1C. LAST (FAMILY) NUNEZ		2. DATE OF BIRTH	3. DATE OF DEATH	4. SEX
OCEANSII	Œ		58. COUNTY OF DEAT ENTER STATE S	SAN DIEGO K		.A.)	P CODE
ADAM	DRTUARY SERV	A FUNERAL DIRECTOR OR PERSONAL LEMON GROVE, C	-	F APPLICABLE S	201-A RUFFIN RO. AN DIEGO, CA 92 A. SHANATURE OF APPLICANT—R	123	E SIGNED
ACKNOWLEDGMENT OF A		chrowledge as applicant that the proposed 376 of the Health and Salety Code, and was			45h100	ne 106/0	6/199
PERMIT UTHORIZATION OF OCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT, MOTE: THIS PERMIT GIVES IN	MED IN ACCORDANCE WITH PRO ORNIA HEALTH AND SAFETY OF IY FOR THE DISPOSITION SPECIF O RIGHT OF DISPOSAL OUTSIDE OF CALFOR	97.00	06100	1995	REGISTRAR ISSUIN	G PERMIT
Y CHANGE IN DISPOSI- ION REQUIRES A NEW RAIT TO SHOW FINAL ESPIRISITION.	P. BEATH BOX	EGISTRAR OF DISTRICT OF DI BULLETINA BULLET CA 92186-5222			F DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CAUFOR	INIA	
ORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS	HUNGEL CO.	4 1	FOR COR	ONER'S USE ONLY	
Y ROHINT (INCT)	UDES ENTOMEMENT)		E TEMPORARY ENV	AULTMENT		PENDING-REMAINS LO	CATED A
B. CREMATION C. DISPOSITION THAN IN A CI D. SCIENTIFIC U	SE		- Stanford Control of the Section	ORNIA SIDE OF CALIFORNIA 1,118. DATE BURIED	(Name and Ac		RIAL
C. DISPOSITION THAN IN A CI	EMETERY SE	DRESS OF CALIFORNIA CEM	G. SHIP IN TO CALIF	SIDE OF CALIFORNIA			IRIAL
C. DISPOSITION THAN IN A CI D. SCIENTIFIC U	MAT NAME AND A	DRESS OF CALIFORNIA CEM	G. SHIP IN TO CALIF	SIDE OF CALIFORNIA	11C SIGNATURE OF PERS	ON IN CHARGE OF BL	
C. DISPOSITION THAN IN A CI D. SCIENTIFIC U	SAN DIEGO	DRESS OF CALIFORNIA CEM	G. SHIP IN TO CALIFI H. TRANSIT TO OUTS ETERY MATORY	118. DATE BURIED	11C SIGNATURE OF PERS	SON IN CHARGE OF BL	MATION
C. DISPOSITION THAN IN A CI D. SCIENTIFIC U  BURIAL  CREMATION  SCIENTIFIC	SAN DIEGO  13A. NAME AND AL  13A. NAME AND AL  13A. NAME AND AL	DORESS OF CALIFORNIA CEM CA DORESS OF CALIFORNIA CREE	G. SHIP IN TO CALIFI H. TRANSIT TO OUTS ETERY  MATORY  BLITY RECEIVING REMAINS  OR COUNTRY WHERE	118. DATE BURIED	11C. SIGNATURE OF PERS	ON IN CHARGE OF CRESON IN CHARGE OF FA	MATION

# MT. HOPE CEMETERY INTERMENT ORDER

#### INTERMENT OND

City of San Diego

Date 5/27/95

of	ubject to your rules and regulations, to inter the remains
	Funeral, date, time
In aVaultLiner Church, Chapel, Graveside	Mortuary
	of regular work day or an extra charge of \$
will be applied and billed to undersigned.	
War time veteran	
Lot 36 Grave 9 Row	Section 2 Division/Block /2
Grave space & Care Fund	P
Additional spaces and care fund	1 250
Opening/Closing & Setup	Acc
Burial Container	10/
Handling Fees	D/N 7 13:00
Flower vases Marker setting fee	10.00
Recording and filing fee	10/00/11/
Sales taxes	V ( ) ( ) ( ) ( )
	Total Due
Paid	receipt number
· dio	Balance due
I hereby certify I am the and this is your authority to make disposition	of the above named decedent n of remains as above indicated. I certify and represent
that I have the right to make this authorization any liability on account of said authorization	n and I agree to hold Mt. Hope Cemetery harmless from and interment.
	1110
I hereby authorize the interment in lot I	Querry Rogers
hold under deed.	3721 Hemlock St
Bignature of recorded holder of deed	San Diego Ca 92/1
	264-1991 Zp Cock
	Telephone
€ 12268	Invoice #
Work Order # E 1220	Acct.#
PY-593 (Rev. 8-92)	

#### INTERMENT ORDER

City of San Diego

Date 5-29-95

*	
	sted, subject to your rules and regulations, to inter the remains
of COLFY, LOUIS	
ina T.S. VAULT	Funeral, date, time THURS 16 11 95 1:30pm
Church Chapel Graveside Chop	ul-65: Lewis-Colonial Mortuary
	00 p.m. of regular work day or an extra charge of \$ 150.00
will be applied and billed to undersigned	ed Thomas Coley By Emma Waste
War time veteran NO.	
Lot 279 Grave 10 Ro	ow Section _ 2_ Division/Stock _ 1 2_
Grave space & Care Fund	795.8
Additional spaces and care fund	
Opening/Closing & Setup	375.00
Burial Container	PA D 250.00
Handling Fees	185.00
Flower vases - Marker setting fee	MAY 2 9 1995 -
Recording and filing fee	MT. HOPE CEMETERY 45.00
Sales taxes	CITY of SAN DIEGO, CALIE 17.50
	Total Due
	Paid receipt number 46266 1667-5
V - 4004	Balance due
I hereby certify I am the August and this is your authority to make disputed that I have the right to make this authorizing liability on account of said authorizing	of the above named decedent objection of remains as above indicated. I certify and represent relation and I agree to hold Mt. Hope Cemetery harmless from and interment
any national of account of said authority	Jone ( of my
I hereby authorize the interment in lot hold under deed.	X5815 LYNN ST
Signature of recorded holder of deed	SAN Diego. CA. 92105
/	+ 4/9-583-0559 Telephone
- 12269	Invoice #
Work Order # E	Acct.#
PY-593 (Rev. 8-92)	

CITY OF SAN DIEGO, CALIFORNIA



#### MOUNT HOPE CEMETERY 527-3400

From: Thomas Caley Listeen hundred In Juli Payment of Int	sixty- Deven & 5 troment of Lauris		1667,50
Lot 279 Grave	/	Section	Division 121
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 — 80% Sales 100	159 00
Acct. No		of Lots 77184 — Opening/ 100 Closing 77181 —	375 00
BALANCE DUE		Burial 100 Containers 77182 —	250 00
BALANCE DUE	PER MAINTENANT PROPERTY OF THE PERSON NAMED IN COLUMN TWO IN COLUMN TO THE PERSON NAMED IN COLUM	Handling Fee 77185 — Recording & 100 Misc. Fees 77183 —	45 00
Pre-Need Lot	00	Pre-Need 63033 Trust 9022 — Sales Tax 60101	177 50
AC-212 (Rev. 5-94)	ISSUED BY Kauch	TOTAL PAID \$	1667 50

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS 177

A. NAME OF DECEDE	Contract of the Contract of th	18. MIDDLE	10	LAST (FAMILY)				3. DATE OF D		EX
LOUISE SA. CITY OF DEATH			5B.	COLEY COUNTY OF DEA	TH-OUTSIDE CALIF.,		02/07/1918 RELATIONSHIP, FULL MA	US/29/1		E
, SAN D	IEGO	4		SAN BIEG	0	HIOM	AS J. COLEY	- HUSBA	IND	
LEWIS COLO 3051 EL CA	NIAL/BENBO	UGH MORTUAR	Y		ALIF, LICENSE NUMBER  -IF APPLICABLE  FD 480	SAN	LYNN STREET DIEGO, GA 92 TURE OF APPLICANT—FE	2105	BB. DATE SIGN	NED
ACKNOWLEDGMENT OF AP		chrowledge as applicant that 376 of the Health and Safety C			the dispositions authorized by the Health and Safety Gods.	10	an ph	-	05/29/1	.99
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	AND IS THE AUTHORN IN THIS PERMIT	ED IN ACCORDANCE FORMA HEALTH AND S ITY FOR THE DISPOSITION O MIGHT OF DISPOSAL OUTSIDE	ON SPECIFIED 8	7.00	05/31	The state of the s	C. SIGNATURE OF LOC	AL REGISTRAR	I ISSUING PER	MIT
TION REQUIRES A NEW TO SHOW FINAL SPOSITION.		GISTRAR OF DISTRI DIN CALIFORNIA DRDSP.O. CA 92186	BOX 85222		DDRESS OF REGISTRAL DISPOSITION IS TO OCC		ICT OF DISPOSITION— THER DISTRICT IN CALIFORN	NIA		
HORIZED DISPO	DSITION(S) CHECK A	PPLICABLE ITEMS					FOR CORC	NER'S USE	ONLY	
B. CREMATION		AINS OTHER	F.	TEMPORARY END DISINTERMENT SHIP IN TO CALIF TRANSIT TO OUT			I DISPOSITION F		and Estate	
BURIAL		DDRESS OF CALFOR E CEMETERY ET STREET	SAN DIEGO,	CA 9210	2 11B. DATE BURK	ED   11G	SIGNATURE OF PERS	ON IN CHARGE	OF BURIAL	
CREMATION	12A. NAME AND A	DORESS OF CALIFOR	w/scaled	1	12B. DATE GREMA	TED 12C	SIGNATURE OF PERSO	ON IN CHARGE	OF CREMATIO	ON
SCIENTIFIC	13A. NAME AND AL	DORESS OF CALIFOR	INIA FACILITY RECE	EIVING REMAINS	13B. DATE RECE	IVED 13C	SIGNATURE OF PERS	ON IN CHARGE	OF FACILITY	-
TRANSIT		DRESS IN RECEIVIN CREMATED REMAINS			14B. DATE SHIPE	ED 14C.	ADDRESS AND SIGNA OF PLACING WITH TH		SON IN CHAR	GE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHOP ENTIFY FINAL PLACE A N/A			15B. DATE OF DISPOSITION		SIGNATURE OF PERSO CHARGE OF DISPOSE	TION !	DCEMSE NUMBE OF CREMATED R MAINS DISPOSES —IF APPLICABLE	抵



# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 37104 30,1995

You are hereby authorized and insti	ructed, subject to	your rules and reg	ulations, to inter the remains
of Lucy	A. Ben	nett	
in a	Funera	I, date, time (E)	5/31/95@11AI
Church Chapel Graveside Church	ch & graves	side: Rag	adale Mortuary.
All Funeral cars must arrive before :	4	the state of the s	
will be applied and billed to undersig	gned.		
War time veteran			
Lot Grave	Davis	Contin	Oh datas (Olaska
			_ Division/Block
Grave space & Care Fund			<u></u>
Additional spaces and care fund			10/
Opening/Closing & Setup	111)	25	
Burial Container	)	10	
Handling Fees	Ł	Ź	
Flower vases - Marker setting lee	49		
Recording and filing fee			
Sales taxes		***************************************	
		Total Due	
	Paid receipt	number	
	and the		Balance due
I hereby certify I am the		o	the above named decedent
and this is your authority to make d that I have the right to make this aut any liability on account of said authority	thorization and I	agree to hold Mt. Ho	ated. I certify and represent pe Cemetery harmless from
I hereby authorize the interment in a hold under deed.	lot1 i	Synature	
		Address	
Signature of recorded holder of deed		City	Zip Code
	-	Selephone	
40000	,	DOWNER W.	
Work Order # E 1227 (		nvoice #	
Work Order # _		Acct.#	

#### INTERMENT ORDER

City of San Diego

Date May 30, 1995

ina liner	Funeral, date, time 5/31/95 NE	1020
Vault/Liner	. // /	The same
Ghurch, Chapels Graveside gravesi		Mortuan
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge of	\$ 150-
will be applied and billed to undersigned. $X$	Boll En Electrical Control	
War time veteran		
Lot 19 Grave 3 Row_	Section Division/Bloc	k 6
Grave space & Care Fund Pre	- trug €- 4709	10
Additional spaces and care fund		0
Opening/Closing & Setup	Deed E-6909	0
Burial Container Pre- 7	Dud E-6709	Ø
Handling Fees Pre- 7	Deccl E-6709	W
Flower vases – Marker setting fee		-
tracer outing carrie timing rese conservation for the contract of the	Zeed, E-6709	0
Sales taxes Pue - 3	need E-6409	0
	Total Due	0
Paid	receipt number	
	Balance due	D
I hereby certify I am the K	of the above nar	and donaday
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization	n of remains as above indicated. I certify a n and I agree to hold Mt. Hope Cemetery h	and represen
I hereby authorize the interment in lot I hold under deed.	Signature	
noid dilder deed.	Address	
Signature of recorded holder of deed	1	
	Telephone	Zip Cox
V		
- 12271	Invoice #	
E 14411		

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-12271

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE  JOSEPH	ENT-FIRST (GIVEN)	18. MIDDLE FERNINAND	TATE	(ILY)	MONTH DAY YEAR	3. DATE OF DEATH 4. SEX MONTH DAY YEAR M			
GHULA VIST	'A		SAN DIE	DEATH—OUTSIDE CALIF	RUTH T. HERNANDEZ	NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMATERNANDEZ - DAUGHTER			
CONRAD LEMO	ON GROVE MO	CONTRACTOR OF THE PARTY OF THE		7B. CALIF. LICENSE NUMBER —IF APPLICABLE  PD—941	2870 IRIS AVENUE, #2 SAN DIEGO, CA 92154				
ACKNOWLEDGMENT OF A	I hersby	IN GROVE, CA 91 acknowledge as applicant that the pro- 1376 of the Realth and Safety Code, and	persed dispension stated herein is a	se of the dispositions authorized by	BA SIGNATURE OF APPLICANT—FOR	105/30/1995			
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORI IN THIS PERMIT.	DED IN ACCORDANCE WITH CORNA HEALTH AND SAFETY TY FOR THE DISPOSITION SPI 10 HIGHT OF DISPOSAL OUTSIDE OF CA	CODE \$7.00	PEE PAID 98. DATE PERMI Kuren War 05/31/19	7307204	AL REGISTRAR ISSUING PERMIT			
ANY CHANGE IN DISPOSIT	CO.JOPABANCHIE	EGISTRAR OF DISTRICT OF EGG-BEPTA OF HEA DS P.O. BOX & CA 92186-5222	LTH SERVICES		OF DISTRICT OF DISPOSITION— UR IN ANOTHER DISTRICT IN CALIFORN	<b>GA</b>			
B. CREMATION	OF CREMATED REM		F. DISINTERME	Margarat VIII	The state of the s	ONER'S USE ONLY ENDING FEMAINS LOCATED AT			
BURIAL	"MOONT" HO 3751 MAR SAN DIEG	PE CEMETERY KET STREET O, CA 92102	EMETERY	5/3//95	D 11C, SIGNATURE OF PERSO	ON IN CHARGE OF BURNAL			
CREMATION SCIENTIFIC	12A NAME AND A	OTA	REMATORY	128. DATE CREMA	TED 12C. SIGNATURE OF PERSO	ON IN CHARGE OF CREMATION			
SCIENTIFIC USE	13A. NAME AND A	DORESS OF CALIFORNIA F	ACILITY RECEIVING REMA	UNS 138. DATE RECE	VED 19C, SIGNATURE OF PERSO	ON IN CHARGE OF FACILITY			
TRANSIT		DORESS IN RECEIVING STA CREMATED REMAINS ARE		14B. DATE SHIPP	ED 14C ADDRESS AND SIGNA OF PLACING WITH THE	TURE OF PERSON IN CHARGE E CARRIER			
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE ENTIFY FINAL PLACE AND CA			15C. SIGNATURE OF PERSI CHARGE OF DISPOSIT				



#### INTERMENT ORDER

City of San Diego

Date May 30, 1995

You are hereby authorized and instructed, s	ubject to your	rules and rea	ulations to int	or the remains
or Emma Stit		D	and sorta, to it	
0-1 11 00	Funeral, date	time		
Vaultuner	runera, cate	Ams	ad	
Church, Chapel, Graveside	a to ave the Magnemotical	(460-46	0/	Mortuary.
All Funeral cars must arrive before 3:30 p.m	, of regular wo	rk day or an e	extra charge o	18 100
will be applied and billed to undersigned.	_			
War time veteran /				
Lot 660 Grave Row	Secti	on5	_ Division/Blo	ck 8
Grave space & Care Fund	Med	8-471	19	0
Additional spaces and care fund				8
				105 0
Opening/Closing & Setup		The comment		55 00
Burial Container				1000
Handling Fees				40.00
Flower vases – Marker setting fee				11-1-
Recording and filing fee				45.00
Sales taxes				3.83
		Total Due		268.85
and to come Paid	receipt number	er		
Tremains, from a	mrad	3	Balance due	
I hereby certify I am the X	**			med decedent
I hereby authorize the interment in lot I hold under deed.	Signature			
Signature of recorded holder of dead	A STATES			
	No.			Zip Code
./	Talaphone			-
<b>=</b> 12272.	Invoice			
Work Order # E 12212.				
- A				8
rads well				
ng Chick for				
Il amount &			1	
a sign	9-28-	95		1 0
	400	Call Block William	Jonna	Connad
	she sa	iain	Borns	y said
	she sa they'll	le at	OT TO	5
	1 70.00			
	our	FEE	5 ma	ULD
	THEN	BE 1	PAID	*
	THEN	~ .	-	)
		A		16

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 3724 30, 1995

ina <u>lines</u>	Funeral, date, time
Church, Chapel, Graveside	Merkley Burt 10 Mortuary
	m. of regular work day or an extra charge of \$
will be applied and billed to undersigned.	
War time veteran	
Lot Grave Row _	Section Division/Block
Grave space & Care Fund	
Additional spaces and care fund	<b>\</b>
Opening/Closing & Setup	\
Burial Container	
Handling Fees	112,70)
Flower vases - Marker setting fee	1120
Recording and filing fee	1
Sales taxes / CFC	
130	Total Due
thrista ( Pa	aid receipt number
How	Balance due
	of the above named decedent
I hereby certify I am the	tion of remains as above indicated. I certify and represent
and this is your authority to make disposit that I have the right to make this authorizal	tion and Lagree to hold Mt. Hope Cemetery harmless from
and this is your authority to make disposit that I have the right to make this authorization any liability on account of said authorization	tion and I agree to hold Mt. Hope Cemetery harmless from and interment.
and this is your authority to make disposit that I have the right to make this authorization any liability on account of said authorization I hereby authorize the interment in lot I	tion and I agree to hold Mt. Hope Cemetery harmless from on and interment.
and this is your authority to make disposit that I have the right to make this authorization liability on account of said authorization liability authorize the interment in lot I hold under deed.	tion and I agree to hold Mt. Hope Cemetery harmless from and interment.  Signature  Address
and this is your authority to make disposit that I have the right to make this authorization liability on account of said authorization liability authorize the interment in lot I hold under deed.	tion and I agree to hold Mt. Hope Cemetery harmless from and interment.  Signature  Address  City  Zig Code
and this is your authority to make disposit that I have the right to make this authorization liability on account of said authorization liability authorize the interment in lot I hold under deed.	tion and I agree to hold Mt. Hope Cemetery harmless from and interment.  Signature  Address
I hereby certify I am the	tion and I agree to hold Mt. Hope Cemetery harmless from and interment.  Signature  Address  City  Zig Code

# 00000

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date May 30, 1995

of Albred Home	subject to your rules and regulations, to inter the remain
	Funeral, date, time MON 6/26/95 1PM
VaultLiner	
Church, Chapel, Graveside gnaves	, ,
	of regular work day or an extra charge of \$ 150
will be applied and billed to undersigned. 🔎	X AB.
War time veteran	
Lot 168 Grave // Row	Section / Division/Block /2
	me
Grave space & Care Fund	
Additional spaces and care fund	$\Delta$ $\Box$
Opening/Closing & Setup	100 00
Burial Container	3 0 1995
Handling Fees	745.00
Flower vases - Marker setting faVIT. HOP	
Recording and filing fee CITY of SA	N DIEGO, CALIF
Sales taxes	13 30
	Total Due 1563.3013.30
Paid	receipt number 46273 1563.3
	Balance due
was a variable	THE STATE OF THE S
I hereby certify I am the Analysis and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization is	of the above named deceder n of remains as above indicated. I certify and represent and I agree to hold Mt. Hope Cemetery harmless from and interment.
	VAL: URI
hereby authorize the interment in lot I hold under deed.	Signature S. On C.
iold distact deed.	X8625 Collect Hue
lignature of recorded holder of deed	Murch Hills, Ca. 9134
	(818) 891-1165
- 12274	Invoice #
Work Order # E	Acct #
PY-593 (Rev. 8-92)	

## WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA

#### MOUNT HOPE CEMETERY 527-3400

		Date: Ma	1 30	19/
From Alline Betweent	Ann Address: 7625 Callet	F AM. Nort	4 Hills 1	4 913
Tytus kurds	set Sexty Spreet 50/	Dollars	(\$ 15/63	301
n Payment of	menson of affi	dHome	The state of	
Lot Grave	//RowSe	ection/	Division Block	2
nvoice No.	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	OREDIT 6700 20% Sales Care 7718	159	00
Acct. No.	an Association and Association	80% Sales 10 of Lots 7718	14 - (1-3/6-	00
W.O E-12274	The second second	Opening/ 10 Closing 7718 Burial 10	1	00
BALANCE DUE		Containers 7718	10 /4	00
	CONTRACTOR INCO	Handling Fee 7718 Recording & 10 Misc. Fees 7718	00 1/2	00
Pre-Need Lot  At Need  On Acct		Pre-Need 6303 Trust 902	13	
Pre-need Trust Cash Check	ESSIED DY M. COWK	Seles Tex 6010 7839	0 /3	30
NO-212 (Rev. 5-94) # 2/60	ISSUED BY MIN WOOK	TOTAL PAID	1563	30

E-12274

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECE Alfred	DENT-FIRST (GIVEN)	18. MIDDLE	IC. LAST (FAMILY)	e	2. DATE OF BIRTH 04/25/1920	3. DATE OF DEATH 4. SEX
	ronado		San Dieg	0	6 NAME, RELATIONSHIP, FULL OF INFORMANT Aline G. Birmi	MAILING ADDRESS AND ZIP CODE
	lagsdale Mor	t.; 5050 Federa an Diego, CA		-IF APPLICABLE	8625 Collett A North Hills, C	
ACKNOWLEDGMENT OF	APPLICANT Section 10	13/6 of the Health and Safety Code, and v	sed disposition stated herein is one of into authorized pursuant to Section 7100 o	f the Ficeith and Salety Code.	* debbu 6416	06/21/199
PERMIT  AUTHORIZATION OF LOCAL REGISTRAS	AND IS THE AUTHORI IN THIS PERMIT	UED IN ACCORDANCE WITH P FORMA HEALTH AND SAFETY TY FOR THE DISPOSITION SPEC NO RIGHT OF DISPOSAL OUTSIDE OF CALL	\$7.00	PAID 98 DATE PERMIT OF 12719	195 PC. SIGNATURE OF L	OCAL REGISTRAR ISSUING PERMIT 9508379
ANY CHANGE IN DISPOS TION RECOURES A NEW POSTO SHOW FINA DISTION.	Vital Rec	EGISTRAR OF DISTRICT OF ED IN CALIFORNA OTES; P.O. BOX San Diego, CA	85222	ANY DESCRIPTION OF THE PROPERTY OF THE PROPERT	OF DISTRICT OF DISPOSITION- IR IN ANOTHER DISTRICT IN CALIF	
10. AUTHORIZED DI	SPOSITION(S) CHECK A	PPLICABLE ITEMS			FOR CO	RONER'S USE ONLY
B. CREMATION	N OF CREMATED REM	AINS OTHER	F. DISINTERMENT G. SHIP IN TO CALL H. TRANSIT TO OU		I. DISPOSITION (Name and	N PENDING—REMAINS LOCATED AT Address)
- CHAL		Cemetery; 375 San Diego, (	Harket St.	118. DATE BURIER	11C. SIGNATURE OF PE	RISON IN CHARGE OF BURIAL
CREMATION	Control of the Contro	edutionia of		128. DATE CREMAT	alle of	RSON IN CHARGE OF CREMATION
SCIENTIFIC USE		DDRESS OF CALIFORNIA FA		138. DATE RECEIV	/ED 13G. SIGNATURE OF PE	RSON IN CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING STAT CREMATED REMAINS ARE T		14B. DATE SHIPPE	D 14C. ADDRESS AND SIG OF PLACING WITH	INATURE OF PERSON IN CHARGE THE CARRIER
SCATTERING AT SE OR DISPOSITION OTHE THAN IN A CEMETE	FICIENT TO IDE	REST POINT ON SHORELINE, ENTIFY FINAL PLACE AND CA	OR OTHER DESCRIPTION SUF- DISTRICT OF DISPOSITION	15B. DATE OF DISPOSITION	15C SIGNATURE OF PE CHARGE OF DISPO	



#### INTERMENT ORDER

City of San Diego

Date 5-30-95

ina Liner			
	Funeral, date, tim	5-31-95	11:00 A.
Church, Chapel, Graveside Church	165 :	Rugsdale	
All Funeral cars must arrive before 3:30 p.m.	of regular work of	ay, of an extra charge of	\$ 150.0
will be applied and billed to undersigned	x 1	N	
War time veteran			
Lot 74 Grave 2 Row		3	10
Lot 79 Grave Row	Section	Division/Bloc	
Grave space & Care Fund			795.0
Additional spaces and care fund			
Opening/Closing & Setup			375.0
			190.00
Burial Container			11.50
Handling Fees			143.00
Flower vases - Marker setting fee			
Recording and filing fee			
Sales taxes			13 30
		Total Due	15633
		TWINE WWW.	
		46272	1563 2
Paid (		46272	15633
,	receipt number_	Balance due	B
hereby certify I am the   Acceptand this is your authority to make disposition that I have the right to make this authorization	teceipt number_	Balance due	B
hereby certify I am the   Accusal and this is your authority to make disposition hat I have the right to make this authorization any liability on account of said authorization and hereby authorize the interment in lot I	teceipt number_	Balance due	B
hereby certify I am the   Actual  and this is your authority to make disposition  that I have the right to make this authorization  any liability on account of said authorization a  hereby authorize the interment in lot I  nold under deed.	teceipt number_	Balance due	B
hereby certify I am the	receipt number	Balance due	B

CITY OF SAN DIEGO, CALIFORNIA

46272

WHITE..... TO CUSTOMER CANARY ...... CEMETERY PINIC ......... AUDITOR

MOUNT HOPE CEMETERY 527-3400

			Date:	2	30	
From: Low N Bennett	Address:	2744 16000	30/00 B	Ve.	50 cA.	92102
In_full Payment of	intenuen	1 0		eneld		-
Lot 74 Grave	2	Row	Section	3	Division Block	12
Invoice No.	NOT VALID FOR PURPOS "PAID" IN THIS SPACE	ESTATED UNLESS	STAMPED CREDIT	60 60 70	7007	9 100
Acct. No.	TOO IN MISSINGE		80% Sale of Lots		100 65	6 00
E- 1077E	-		Opening	1	100	5 00
W.O			Burial Contains		100 /9.	
BALANCE DUE	Mariana.		Handling		100 ///	00
	10000		Recordin Misc. Fe	19 & 71	100 4	5 00
Pre-Need Lot At Need On Acct			Pre-Need Trust		3033	
Pre-need Trust Cash Check C	- 1	0.066.	Sales Ta		0101 /2	30
AC-212 (Rev. 5-94)	ISSUED BY	Salobles	TOTAL PA	ID	1 156	3 30

# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	NT-FIRST (GIVEN)	IB. MIDDLE	IC. LAST (FAMILY)		2. DATE OF BIRTH MONTH, DAY, YEAR	3. DATE OF DEATH MONTH, DAY, YEAR	4. SEX
Lucy Mae			Bennett		12/25/1919 05/27/1995		
SA. CITY OF DEATH	tional Cit	,	5B. COUNTY OF DEATH ENTER STATE San Diego	0	AME, RELATIONSHP, FULL M F INFORMANT AUCTRETIA V. Ada		
7.00			ERSON ACTING AS SUCH 78. GAL	Carried State of Control of Contr	237 Parkside A	ALL DE LA COLONIA DE LA COLONI	
mderson-Rage		; 5050 Federal	Blvd.	APPLICABLE	SIGNATURE OF APPLICANT—	2139	BIONED
ACKNOWLEDGMENT OF A	I hereby a	Diego, CA cheevester as applicant that the pro- 176 of the Health and Safety Code, and	posed disposition stated herein is one of the legs authorized pursuant to Section 7100 of the	depositions authorized by	Petter Well		9/199
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	ED IN ACCORDANCE WITH ORDINA HEALTH AND SAFETY Y FOR THE DISPOSITION SPE DIBERT OF DISPOSAL OUTSIDE OF CA	CODE ECIFIED \$7.00	05/30/1995	JED SIGNATURE OF LO	CAL REGISTRAR ISSUING 950724	
ANCEHANGE IN DISPOSI- INCLUSES A NEW 10 SHOW FINAL OSITION	Vital Rec	ords; P.O. Box	85222		DISTRICT OF DISPOSITION— ANOTHER DISTRICT IN CALIFO	RNIA	
10. AUTHORIZED DISPI		an Diego, 6A 9	2186-5222		FOR COR	ONER'S USE ONLY	1
B. CREMATION C. DISPOSITION THAN IN A CE D SCIENTIFIC US		AINS OTHER	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS		(Name and A	PENDING-REMAINS LOI ddress)	
BURIAL		Cemetery; 375 San Diego,	1 Market St.	118, DATE BURIED	11G. SIGNATURE OF PER	SON IN CHARGE OF BUI	RIAL
CREMATION CREMATION	12A. NAME AND AD	DRESS OF CALIFORNIA C	Manuscriptory.	12B. DATE CREMATED	12C. SIGNATURE OF PERS	ON IN CHARGE OF CREI	MATION
SCIENTIFIC USE	13A, NAME AND AL	DRESS OF CALIFORNIA F	ACILITY RECEIVING REMAINS	138. DATE RECEIVED	13C. SIGNATURE OF PER	SON IN CHARGE OF FAC	CILITY
TRANSIT TRANSIT		DRESS IN RECEIVING STA CREMATED REMAINS ARE		14B. DATE SHIPPED	14C. ADDRESS AND SIGN OF PLACING WITH T		CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, NTIFY FINAL PLACE AND CA	OR OTHER DESCRIPTION SUF- LESTRICT OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PER CHARGE OF DISPOS		SPOSER

#### INTERMENT ORDER

City of San Diego

Date 5-30-45

of Ignasio	ESPINOSA PAH /	180428
	Funeral, date, time Thurs 6-1-95	
Church, Chapel, Graveside Delive	my only: Meekley-Mike	Mortuary.
All Funeral cars must arrive before 3:30 p.m	n. of regular work day or an extra charge of	s
will be applied and billed to undersigned		BALL
War time veteran		
Lot 37 Grave 12 Row_	Section / Division/Bloc	12
Grave space & Care Fund		126.00
Additional spaces and care fund		
Opening/Glosing & Setup		165.00
Burial Container		50.00
Flower vases - Marker setting fee	Total Due	
Recording and filing fee		45.00
Sales taxes	<u> </u>	
a mercens	Total Due	386.00
Due - 12 40 Pair	d receipt number	
E	Balance due _	
hereby certify I am the	of the above nam	
that I have the right to make this authorization any liability on account of said authorization	on of remains as above indicated. I certify a on and I agree to hold Mt. Hope Cemetery h n and interment.	nd represent armless from
hereby authorize the interment in lot I hold under deed.	Synature	
	Address	
Bignuture of recorded holder of deed	Ow	Zip Gode
	Telephone	-
- 12276	Invoice # 35435	9
Work Order # E	Acct. # 000 9.50	
PY-593 (Rev. 8-92)	Acci. # CC 7 CC	

CITY OF SAN DIEGO, CALIFORNIA GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P O Box 2289 San Diego, California 92112

E-12276

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO:

-TREASURERS USE ONLY-

PAYMENT DATE THE SES

PAYMENT REF NU GH-254568 I AMT PAID: 256:00

O6/02/95

PAYMENT DUE

PERIOD COVERED

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS

REF NO: E-12276

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

IGNACIO ESPINOZA PA#1180428 LOT 37 GRAVE 12 SEC 1 DIV 12 OPENING/CLOSING LINER RECORDING FEE

126.00

45.00

TOTAL DUE

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT
MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO
AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE
SUBJECT TO A COLLECTION FEE OF 10% OR \$10,
WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH
ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.
ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT
LISTET ABOVE
White-Customer Copy • Yellow-Remittance Copy

White-Customer Copy • Yellow-Remittance Copy

E-12276

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDENT—FIRST (GIVEN)   18. MIDDLE   -		-	IC. LAST (FAMILY) ESPINUZA			2. DATE OF BIRTH		OF DEATH	4. SEX	
SA. CITY OF DEATH	AN DIEGO			SB. COUNTY OF ENTER STATE	DEATH OUTSIDE CALIF.	PUEL	RELATIONSHIP, FULL MEDITATOR	R. KATH	ERINE HO	P CODE
	DEFINE OF CALIFORNI HERKLEY-NITCH FTH AVENUE, S	ELL HORTUARY		CTING AS SUCH 7	B. CALIF. LICENSE NUMBER —IF APPLICABLE FD-119	SAN D	RUFFIN ROAD VIEGO, CA 9212		rmi, 88. DAT	E SIGNED
* ACKNOWLEDGMENT OF A					of the dispositions sufficient by 00 of the Health and Safety Code.	12	& Lean	en	05/3	1/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	AND IS THE AUTHORS IN THIS PERMIT.	UED IN ACCORDANCE FORMA HEALTH AND TY FOR THE DISPOSIT TO HIGHT OF DISPOSAL OUTS	SAFETY CODE TION SPECIFIED	9A. AMOUNT OF 1	GE PAID GE DATE PERM 05/31/19 T.C. MITC	95	9C SIGNATURE OF LO 9507287	CAL REGIS	TRAR ISSUM	G PERMIT
TION REGULES A NEW PERMIT TO SHOW FINAL SPOSITION.	P.O. BOX 85			and the second	E. ADDRESS OF REGISTRA IF DISPOSITION IS TO OC		RICT OF DISPOSITION— OTHER DISTRICT IN CAUFO	RNIA		
HORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS					FOR COR	ONER'S	USE ONLY	1
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US	OF CREMATED REM	AINS OTHER		E. TEMPORARY F. DISINTERMEN G. SHIP IN TO C H. TRANSIT TO	т		L DISPOSITION (Name and A		TIEMAINS L	ACKLED VI
BURIAL		ETERY, 3751 I			118. DATE BUR	ED   110	SIGNATURE OF PER	SON IN CH	IARGE OF BI	MIAL
CREMATION		dboard	S. Ultra Control III	RY	128. DATE CREM	ATED 120	SIGNATURE OF PERS	SON IN CH	ARGE OF CRI	EMATION
SCIENTIFIC	13A. NAME AND A	DDRESS OF CALIFO	ORNIA FACILITY	RECEIVING REMAI	NS 13B DATE REC	EIVED 130	C. SIGNATURE OF PER	SON IN CI	HARGE OF F	ACILITY
TRANSIT		DDRESS IN RECEIVI CREMATED REMAIN			148, DATE SHIP	PED   140	OF PLACING WITH T			CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEA FICIENT TO ID	AREST POINT ON SHE ENTIFY FINAL PLACE	DRELINE, OR OTH- AND CA DISTRIC	HER DESCRIPTION S T OF DISPOSITION	15B. DATE OF DISPOSITIO		CHARGE OF DISPOS		OF CREA MAINS C	MATED RE-

#### INTERMENT ORDER

City of San Diego

			e sriay		419
You are hereby authorized and instructed, su	blact to your nilar		mesel 61		
Many the		20±	11206	22	a reinal
		WE	2 1	17	RX1
Vault/Liner	Funeral, date, time	2016	A	_	
Church, Chapel, Graveside		we	mous		Mortuar
All Funeral cars must arrive before 3:30 p.m.	of regular work day	y or an	extra charge	of \$	
will be applied and billed to undersigned.		_			-
War time veteran					-
Lot 57 Grave 49 Row_	Section	1	_ Division/Bi	lock_	12
Grave space & Care Fund					
Additional spaces and care fund					
Opening/Closing & Setup				16	5.00
Burial Container				The same	
Handling Fees					
Flower vases – Marker setting fee					
Recording and filing fee					5.00
Sales taxes			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
			e	20	6.07
through Paid			Ø	20	Giros
puora Paid	receipt number		-	-	_
V*			Balance due		
I hereby certify I am the	and I agree to hole	ve indi		y and i	represe
hereby authorize the interment in lot I hold under deed.	Signature			-	-
	Address				
Signature of recorded holder of deed	City				Zip Co
	Telephone				
		2 =	55 70	1	
_ 12277	Invoice #	01-	19	0	_
Work Order # L	Acct.#	AVE.	0005	02	

CITY OF SAN DIEGO, CALIFORNIA

Make Remittance Payable to CITY TREASURER P O Box 2289

E-12277

San Diego, California 92112

Please Return YELLOW Copy with Your Payment

PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

----TREASURERS USE UNLY

PAYMENT DATES

9-6-95

PAYMENT REF NO 04-883709

AMT PAID:

386.00

O7/06/95

PAYMENT DUE

PERIOD COVERED

JANE RAUCH REF NO: E-12277
DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619-527 3400

DESCRIPTION OF CHARGES

AMOUNT

HENRY MORRIS PA 1180622 SVCS LOT 57 GRAVE 9 SEC 1 DIV 12 UPENING/CLOSING LINER RECORDING FEE

126.00 165.00

45.00

TOTAL DUE

386.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT
MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO

AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE
SUBJECT TO A COLLECTION FEE OF 10% OR \$10.

WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH
ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.

ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT

LISTED ABOVE White-Customer Copy • Yellow-Remittance Copy

White-Customer Copy • Yellow-Remittance Copy

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

5-12-217

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDENT—FIRST (GIVEN) 1B. MIDDLE UNKNOWN		MORRIS	# 000-000-000-000-000-000-000-000-000-00			3. DATE OF D MONTH, DAY, 05/19/19	VEAR Male	
San Dieg	0		SB COUNTY OF DEAT ENTER STATE San Diego	H-OUTSIDE CALIF.	OF INF	RELATIONSHIP, FULL NORMANT		
Park Cre	st Funeral	A-FUNERAL DIRECTOR OR PERS Home San Diego CA 92		LIF. LICENSE NUMBER F APPLICABLE 1507	5201 San	A Ruffin Ro Diego, CA 9	ad 2123 Termi taking permit, 8	B. DATE SIGNED
ADMINISTRACTION OF A		conswinder as applicant that the proposed 376 of the Health and Safety Code, and was a			1	+3	ولي	16/22/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH PRO ORNIA HEALTH AND BAFETY CO TY FOR THE DISPOSITION SPECIFI B MIGHT OF DISPOSAL DUTSING OF CALIFORN	\$ 7.00	88. DATE PERMIT  R.K. Sm.  06/22/1	ith	DO SIGNATURE OF LO	9508	
ANY CHANGE IN DISPOSE QUIRES A NEW POSITION.	P.O. BOX 8			DRESS OF REGISTRAR DISPOSITION IS TO OCC		HET OF DISPOSITION- THER DISTRICT IN CALIFO	ENGA	Sin
10. AUTHORIZED DISE						FOR COR	ONER'S USE	ONLY
B. CREMATION	UDES ENTOMBMENT)  OF CREMATED REM	ANK OTHER	E. TEMPORARY ENVI			I. DISPOSITION (Name and A		AINS LOCATED A
D. SCIENTIFIC L	EMETERY	ANTO STREET	G. SHIP IN TO CALIFO				- '	
BURIAL	Mt Hope of San Diggo	ODRESS OF CALIFORNIA CEME CA	ETERY	199/95	D 116	SIGNATURE OF PER	SON IN CHARGE	OF BURIAL
CREMATION	12A, NAME AND A	ODRESS OF CALIFORNIA CREM	MATORY	128. DATE CREMA	TED 129	SIGNATURE OF PER	SON IN CHARGE	OF CREMATION
SCIENTIFIC USE	13A. NAME AND AL	ODRESS OF CALIFORNIA FACIL	ITY RECEIVING REMAINS	13B. DATE RECEI	VED 13C	SIGNATURE OF PER	SON IN CHARGE	OF FACILITY
TRANSIT		DDRESS IN RECEIVING STATE CREMATED REMAINS ARE TO		14B. DATE SHIPP	ED 14G	ADDRESS AND SIGN OF PLACING WITH T		ON IN CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	FIGIENT TO IDE	REST POINT ON SHORELINE, OR ENTIFY FIMAL PLACE AND CA <u>DIS</u>		15B. DATE OF DISPOSITION		SIGNATURE OF PER CHARGE OF DISPOS	ITION ! C	IICENSE NUMBER OF CREMATED RE- MAINS DISPOSER —IF APPLICABLE



#### INTERMENT ORDER

City of San Diego

Date May 31, 1995

-111 11	Jenevieve
ina T.S Vault	Funeral, date, time 6/2/95 FRI 0 1P
Church, Chapel, Graveside Withes	505 : Nomet Valley Mortual
All Funeral cars must arrive before 3:30 p.nf.	of regular work day or an extra charge of \$ 150
will be applied and billed to undersigned. 📈	Carrired at 12:45 pm
War time veteran	Jane Rauch )
Lot /2 Grave 7 Row_	
Grave space & Care Fund	Tued E-4064 &
Additional spaces and care fund	8
Opening/Closing & Setup	375
Burial Container	250 /
Handling Fees	102 10
Flower vases – Marker setting fee	
Recording and filing fee	45.00
Sales taxes	17.56
and the second	Total Due
ble 210 Pain	receipt number B-46293 872
Co	Balance due
693-	1
hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization and the said aut	of the above named decede n of remains as above indicated. I certify and represent and I agree to hold Mt. Hope Cernetery harmless fro and interment.
hereby authorize the interment in lot I hold under deed.	XE Dene Cobbe
	Adopte Deve De
Signature of recorded holder at deed	Kroxville (n 3792
	(615) 693-4276
- 12278	Invoice #
- 12210	IIIVOICE:#
Work Order # E	Acct. #

CITY OF SAN DIEGO, CALIFORNIA

46293

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY 527-3400

From: E. G. Cobb Eight hundred &	le Address: 904 Sky B venesty-two & 50/10 ternsut of Gener	Date: 6 Dollars (5	2 1995 17 ville TN 872,50 37
Lot Grave	Row Se South Not Valid For Purpose STATED UNLESS STAMPED PAID IN THIS SPACE	OREDIT 67007 77164 -	Division 35
Acct. No	PAU IN THIS SPACE	80% Sales 100 of Lots 77184 – Opening/ 100 Closing 77181 – Buriel 100	375 00
BALANCE DUE		Containers 77182 – 100 Handling Fee 77185 – Recording & 100 Misc. Fees 77183 – Pre-Need 63033	18500
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check S		Trust 9022 - Sales Tax 60101 78390 - TOTAL PAID \$	872 50

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

IA NAME OF DECEDENT—FIRST (GIVEN) 18. MIDDLE  Genevieve Shapcoft			IC. LAST (FAMILY)				DATE OF DEATH 4 SEX		
5/	CITY OF DEATH	Knoxville		5B. COUNTY OF I	DEATH-OUTSIDE CALIF TN	OF IN	RELATIONSHIP, FULL MAILIN FORMANT MENTENS CODDIE -	NG ADDRESS AND ZIP CODE	
			FUNERAL DIRECTOR OR PERSON San Jacinto, Homet, (	CONTRACTOR DESCRIPTION OF THE PERSON NAMED IN COLUMN	GALIF LICENSE NUMBER —IF APPLICABLE	90	4 Sky Blue Drive,	KnoxvIIIe, TN 37923	
_	ACKNOWLEDGMENT OF A	PTLICANT   hereby ad Section 103	browledge as applicant that the proposed day 76 of the Health and Safete Code, and was with	cooken stated herein is one origed parament to Section 710	833 of the dispositions authorized by 0 of the Health and Safety Code.	BASIGN	ATURE OF APPLICANT—Person	06/01/1995	
	PERMIT UTHORIZATION OF OCAL REGISTRAR	SIONS OF THE CALIFO AND IS THE AUTHORITY IN THIS PERMIT.	ED IN ACCORDANCE WITH PROVI- PRINA HEALTH AND SAFETY CODE Y FOR THE DISPOSITION SPECIFIED RIGHT OF DEPOSAL OUTSIES OF CALFORNIA.	9A. AMOUNT OF F	OGO 4	1	Bradley P. Gilb	REGISTRAR ISSUING PERMIT	
-1	OF CHANGE IN DISPOSI- ION REQUIRES A NEW PLANT TO SHOW FINAL DISPOSITION.	9D. ADDRESS OF RE	GISTRIAR OF DISTRICT OF DEAT		ADDRESS OF REGISTRAF F DISPOSITION IS TO OCC BOX 85222- San E	CUR IN ANO	OTHER DISTRICT IN CALIFORNIA		
10	A BURIAL ONCLI			E TEMPORARY I F DISINTERMENT G SHIP IN TO CA H. TRANSIT TO C	7			ER'S USE ONLY IDING—REMAINS LOCATED RY	
	BURIAL	Ht. Hope	DRESS OF CALIFORNIA CEMETE Cometery Cet, San Diego, CA 921		118 DATE BURIE	ED   110	SIGNATURE OF PERSON	IN CHARGE OF BURIAL	
CREMATION		12A. NAME AND ADDRESS OF CALIFORNIA CREMATORY			128. DATE CREMA	TED 120	2. SIGNATURE OF PERSON	IN CHARGE OF CREMATION	
UL APPLICA	SCIENTIFIC USE	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY RECEIVING REMAINS			S 138. DATE RECE	IVED 130	/ED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY		
TRANSIT		14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED N/A			14B. DATE SHIPF	PPED 14C. ADDRESS AND SIGNATURE OF PERSON IN OF PLACING WITH THE CARRIER			
9	SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		EST POINT ON SHORELINE, OR O' TITFY FINAL PLACE AND CA <u>DISTR</u>		F- 15B. DATE OF DISPOSITION		SIGNATURE OF PERSON CHARGE OF DISPOSITIO		



#### INTERMENT ORDER

City of San Diego

Date May 31, 1995

of Eliza Brawn	Funeral, date, time THURS 6/1/	95 11 An
Church Chapel Graveside hurch & an		Mortuary_
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge	ots 150 a
will be applied and billed to undersigned. X		
War time veteran 200		
/ 1. 11	Section 3 Division/8	12
		MAK OD
Grave space & Care Fund	10	190
Additional spaces and care fund		2000
Opening/Closing & Setup	1)00	375
Burial Container	0117	190
Handling Fees	COUNTY	14500
Flower vases - Marker setting fee	7 2 014	
Recording and filing fee	U + (A)	4500
Sales taxes.	19 6	13.30
	Total Due	1563.30
. Paid	rpceipt number 46277	850.CC
Haug	htter Balance due	713.30
I hereby certify I am the X France	en Klaler	
and this is your authority to make disposition	n of remains as above indicated. I certif	amed decedent y and represent
that I have the right to make this authorization any liability on account of said authorization	in and I agree to hold Mt. Hope Cemeter and interment.	y harmless from
	al a fra	ale
I hereby authorize the interment in lot I all	Nances NY	all.
hold under deed.	15614 Hasales	ok.
Signature of recorded holder of deed	X Sylmar, Ca.	
	VS18) 362-1768	Zip Code
V	Adephone	
- 12279	Invoice # 254327	7
Work Order # E	Acct. # 08534"	7
PY-593 (Rev. 8-92)		

W.O. # E 12279

	7/3.30 NOTE
\$	Seven Hundred Thirteen & 3900 San Diego, California may 31 1995
37 wi	nirty days after date for value received, the undersigned maker promises to pay San Diego City Treasurer, or order at 751 Market Street, San Diego, CA 92101, the sum of Seven Handred Shutter \$ 30/100 - DOLLARS ith interest from on the unpaid principal the rate of 12 percent per annum, payable on demand.
- m	Should this note not be paid when due, it shall thereafter bear interest on the principal. Interest after maturity will corue at the rate indicated above. Principal and interest are payable in lawful money of the United States. The maker ill be liable and consents to renewals, replacements and extensions of time for payment hereof before, at or after aturity, and waives presentment, demand and protest and the right to assert any statute of limitations. A married erson who signs this note agrees that recourse may be held against his/her separate property for any obligation ontained herein. If any action be instituted on this note, the undersigned promise(s) to pay such sum as the Court ay fix as attorney's fees.
	Part II, Chapter I, Article 2, Paragraph 7528 of the State of California Health and Safety Code authorizes the removal of any remains from a plot for which the purchase price is past due and unpaid.
PF	RINT NAME Frances Dale SIGNATURE FLANCES Dale
	DORESS 151014 Rosales St. Sylmar, Ca. 91342
C	ALIFORNIA DRIVER LICENSE NUMBER NO135664 SSN # 553-76-4671

1258 teances Dale MEMO MOND plats 131 2 2000 247: 258 0933 348765#

From Lucrical

Acct. No.

BALANCE DUE

Pre-Need Lot

AC-212 (Rev. 5-94)

Pre-need Trust Cash

#### CITY OF SAN DIEGO, CALIFORNIA



Payment of

At Need 1

Grave

On Aget

□ Check # /258

#### MOUNT HOPE CEMETERY 527-3400

Row\_

NOT VALID FOR PURPOSE STATED UNLESS STAN

lak	Date: 37	ay.	31 ch	19 <u>95</u> 9134
-	0	ollars (\$	250-0	00,
- 4	enoun			
_ Se	oction3		Division Block	12
PED	CREDIT 20% Sales Care 80% Sales	67007 77184 —	159	00
	of Lots Opening/ Closing	77184 — 100 77181 —	55	00
	Burtal Containers	100 77182 — 100		
	Handling Fee Recording & Misc. Fees Pre-Need	77185 — 100 77183 —		
	Trust Sales Tax	63033 9022 — 60101 78390 —	15 1	
	TOTAL PAID	3	850	100

E-12279

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDENT—FIRST (GIVEN) 1B. MIDDLE ELIZA MAE			BROWN	IC. LAST (FAMILY) BROWN			3. DATE OF DEATH 4. SEX 05/26/1995 F
SAN DIEGO			SAN DY	DEATH—OUTSIDE CALIF.,		BARY BROWN-	ILING ADDRESS AND ZIP CODE
	AJON BLVD.	E BURIAL CHAPEI SAN DIEGO, CA 92	2115	F-1357	8A SIGNA	TURE OF APPLICANT—Par	son taking permit, 8B. DATE SIGNED
" ACKNOWLEDGMENT OF AF	MELICANT Section 103	chruwledge as applicant that the proposed 176 of the Health and Safety Code, and was a	sufficient pursuant to Section 7	100 of the Health and Safety Code.	12	more	05/30/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	ED IN ACCORDANCE WITH PRO- CRINA HEALTH AND SAFETY CO- Y FOR THE DISPOSITION SPECIFIC MIGHT OF DEPOSAL OUTSIDE OF CALFORN	DE \$7.00	PEE PAID 98. DATE PERMI 03/30/15 E. MITCH	995	C. SIGNATURE OF LOC 9507227	AL REGISTRAR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW PINAL SPOSITION.	VITAL RECO	CA 92186-5222		F DISPOSITION IS TO OCC			MA
10 HORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS			100	FOR CORO	NER'S USE ONLY
A. BURIAL (INCLU-	OF CREMATED REMA	AINS OTHER	F. DISINTERMEI			☐ (Name and Ad	PENDING—REMAINS LOCATED AT dress)  ON IN CHARGE OF BURIAL
BURIAL		E CEMETERY,	TENT.	14/1/95	110	Whit	ON IN CHARGE OF BURIAL
CREMATION	Comment of the commen	Hal Mon-		128. DATE CREMA	TED 12C.	SIGNATURE OF PERSO	ON IN CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND AD	DRESS OF CALIFORNIA FACIL	LITY RECEIVING REMA	INS 13B. DATE RECE	IVED 13C.	SIGNATURE OF PERS	ON IN CHARGE OF FACILITY
TRANSIT		DRESS IN RECEIVING STATE CREMATED REMAINS ARE TO		14B, DATE SHIPP	PED 140.	ADDRESS AND SIGNA OF PLACING WITH TH	TURE OF PERSON IN CHARGE E CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR NTIFY FINAL PLACE AND CA DIS				SIGNATURE OF PERSICHARGE OF DISPOSIT	

CITY OF SAN DIEGO AUDITOR & COMPTROLLER REPORT NO. C65-102 DEPARTMENT 072

PAID INVOICE REPORT BY DEPARTMENT AS OF 06/28/95

DATE: 06/28/95 TIME: 230854

UNPAID

BALANCE

0.00

PROPERTY DEPT-MY HOPE CEMETERY INV INV ACCT NO DATE NO CUSTOMER NAME PAYM PD PAYM FUND DEPT DATE ORG BY REF NO AMOUNT PAID BN/EQ FACILI AMOUNT APPLIED 254327 06/01/95 085347 ACCT OPER FRANCES DALE AMOUNT BILLED 100 072 06/22/95 CK 1313 77181 77182 77183 77185 78390 100 000072 072 072 072 713-30 000072 713.30 100 000072 PAID IN FULL 190.00 000072 45-00 NUMBER OF INVOICES PAID TOTAL AMOUNT PAID 713.30 13.30

#### INTERMENT ORDER

City of San Diego

Date May 31, 1995

You are hereby authorized and instructed, sof <u>Ernestine</u>	mercherson	
	Funeral, date, time THURS 4	
	graveside Rappdal	Mortuary.
All Funeral cars must arrive before 3:30 p.n	n. of regular work day or an extra char	ge or \$ 150 a
will be applied and billed to undersigned. 2	Smeet Dung	
War time veteran X		
		- 14
Lot 828 Grave Row_		n/Block _/O_
Grave space & Care Fund	·	995.a
Additional spaces and care fund	ALD	
Additional spaces and care fund	AID	375.Ut
Devilat Cambridge	1 1005	
Burial Container	1995	145.00
Handling Fees	DD CEMPTEDY	
Flower vases - Marker setting feMT. HO	AN DIEGO, CALIF	IK M
Recording and filing fee		12 20
Sales taxes		12 30
st Son	Total Due	1763.30
1507 8-2010 Pair	d receipt number 46282	1763.30
W VIV 201,=441.00	Balance	due 8
I hereby certify I am the X SON		
and this is your authority to make disposition	on of remains as above indicated. I co	re named decedent ertify and represent
that I have the right to make this authorization	on and I agree to hold Mt. Hope Ceme	etery harmless from
	- 6 -171	-
I hereby authorize the interment in lot I	X prest Des	de
hold under deed.	V 10414 Lower	ELLOW AIR
	San are such C	a aula
Signature of recorded holder of deed	City	Zp Code
	X 5 /0 -638-2	017
- 12280	Invoice #	
Work Order #	Acct. #	
PY-593 (Rev. 8-92)		

CITY OF SAN DIEGO, CALIFORNIA

46232

WHITE.....TO CUSTOMER CANARY......CEMETERY PINK.....AUDITOR

MOUNT HOPE CEMETERY

<b>公司代表的思想</b>		1	· · · · · · · · · · · · · · · · · · ·
Judy's Ernest		Date: June	1995
rom Bryson	Address: 10414 Forge	Was Ave (	belond of 716
Devente in	Gundred Levery Three	\$ 30/100 Dollars	(\$ 1763.30)
n. Payment of	terment & France	stine m	noherson
ot 828 Grave	Row Se	ection	Division /D
Grave		Charles Contract	CONTRACTOR OF THE PARTY OF THE
nvoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 6700 20% Sales Care 7718	1300
Acct. No.		80% Sales 10 of Lots 7718	
F 12200	7/1 5/10 3/17	Opening/ 100 Closing 7718	
N.O	The same of the same of	Burial 10/ Containers 7718	190 10
BALANCE DUE		100	145 00
		Handling Fee 7718 Recording & 100	45 00
Pre-Need Lot At Need A On Acct	The second second	Misc Fees 7718 Pre-Need 6303	
	The second of th	Trust 902	22 5
THE PARTY OF THE P	to Mark	7839	13 20
C212 (Rev. 594) # (860	ISSUED BY	TOTAL PAID	1163 30

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

103

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE		18. MIDDLE Barbara	Ann	1C. LAST (FAMILY) Merche	rson		2. DATE OF BIRTH		OF DEATH	4. SEX
5A. CITY OF DEATH San	Diego			68 COUNTY OF DEATH ENTER STATE San Diego	-OUTSIDE GALIF.,	OF INF	RELATIONSHIP, FULL MORMANT SE Bryson -		RESS AND Z	P CODE
Anderson-Ray	gsdale Mor		deral B	ACTING AS SUCH 7B. CAL	FAPPLICABLE	1041 0akl	4 Longfello	w Ave.	-	TE SIGNED
ACKNOWLEDGMENT OF A	I heroby	acknowledge as applicant that	t the proposed disp	osition stated herest is one of the rived personne to Section 7100 of th		Au	Lew blee	0.		0/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISS SIONS OF THE CALL AND IS THE AUTHOR IN THIS PERMIT, MOTE: THIS PERMIT CANS	SUED IN ACCORDANCE IFORNIA HEALTH AND S ITY FOR THE DISPOSITI NO WONT OF DISPOSAL OUTSI REGISTRAR OF DISTR	WITH PROVI SAFETY CODE ON SPECIFIED OF CALIFORNIA.	9A. AMOUNT OF PEE PA	THE RESIDENCE OF THE PARTY OF T	)5	<b>&gt;</b>		TRAR ISSUIN 07328	IG PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW TO SHOW FINAL SPOSITION.	Vital Rec	ords: P.O. an Diego, C	Box 852 A 92186	22	DISPOSITION IS TO OCC	UR IN ANO	THER DISTRICT IN CALIFO	RNIA		
THORIZED DISPI	OSITION(S) CHECK	APPLICABLE ITEMS					FOR COR	ONER'S	USE ONL	1
B. CREMATION		MAINS OTHER		F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	PRNIA		I. DISPOSITION (Name and A		REMAINS L	DOATED AT
BURIAL		Cemetery; San		rket St.	118. DATE BURIE	D 11C	SIGNATURE OF PER	SON IN CH	ARGE OF B	JAIAL
CREMATION SCIENTIFIC	12A. NAME AND /	ADDRESS OF CALIFO	1	ales	12B. DATE GREMA	TED 12C	SIGNATURE OF PERI	SON IN CHA	ARGE OF CR	EMATION
958	N/A	ADDRESS OF CALIFO	RNIA FACILITY	RECEIVING REMAINS	13B. DATE RECE	IVED 13C	SIGNATURE OF PER	SON IN CH	ARGE OF F	ACILITY
TRANSIT	14A. NAME AND A	ODRESS IN RECEIVING CREMATED REMAINS	IG STATE OR S ARE TO BE	COUNTRY WHERE SHIPPED	14B, DATE SHIPP	ED 14G.	ADDRESS AND SIGN OF PLACING WITH T			CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	N/A TO E	AREST POINT ON SHO DENTIFY FINAL PLACE		HER DESCRIPTION SUF- CT OF DISPOSITION	158. DATE OF DISPOSITION		SIGNATURE OF PER CHARGE OF DISPOS		MAINS D	HUMBER WATED RE- DISPOSER PLICABLE



#### INTERMENT ORDER

City of San Diego

211/2 + 111/2

Date May 31, 1995

	AKbar (1102)(5mos)
n a	_ Funeral, date, time Mon 6-5-95 2:30/
Church, Chapel, Graveside With Ke	35 : Ragodale Mortuary
All Funeral cars must arrive before 3:30 p.	m. of regular work day or an extra charge of \$ 150
will be applied and billed to undersigned.	X Backy Eisen
War time veteran	/ /
ot 2805 Grave Row_	Section / Division/Block-9
Grave space & Care Fund	100.00
Additional spaces and care fund	PAID
Opening/Closing & Setup	1710 135.00
Burial Container	MAY 3 1 1995
Jandling Face	
Flower vases – Marker setting fee . CIT	T. HOPE CEMETERY
Recording and filing fee	H5 190
Sales taxes	
Jares taxes	Total Due 270-00
P	aid receipt number 46281 270. Q
Pa	
· v matt	Balance due
hereby certify I am the X MOTA and this is your authority to make dispositi	of the above named decedention of remains as above indicated. I certify and represent
hat I have the right to make this authorizate any liability on account of said authorization	tion and I agree to hold Mt. Hope Cemetery harmless from on and interment.
AND A PROTECTION OF THE PROTECTION OF THE PROPERTY OF THE PROP	1/ 1
hereby authorize the interment in lot I	xhathy Eison
	xhathy Eison
hereby authorize the interment in lot I sold under deed.	Stathy Eisen
nold under deed.	Sanbigo Casollil
old under deed.	Sanble Casolly Telephone 542-0375
nold under deed.	Sanbigo (a 5211.6)  Telephone 5 829 eR 3731-817

527-3400



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY

		Date:	ay 31 , 19 9
Acct. No	413 Address: 2418 30	from ST. S	b. CH 72104
nPayment of	turnerty andu	ILL AKL	Hars (\$ 27/2 (0))
ot 2505 Grave _	RowS	ection/	Division 9
nvoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 20% Sales Care 80% Sales	67007 77184
~ 10001	Marie Carpeter	of Lots Opening/ Closing	77184 100 77181
		Burial Confainers	100 77182 100
		Recording & Misc. Fees	77185 100 77183 63033
	the agent a	Trust Sales Tax	9022 60101 78390
C-212 (Hev. 5-94)	(SSUED BY	TOTAL PAID	: 270 00



#### APPLICATION AND PERMIT FOR POSITION OF HUMAN REMAINS

F-12281

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	IC. LAST (FAMILY)			E OF DEATH 4. SEX
Antoine		Iman	Akbar		The second secon	071995 ¥
SA. CITY OF DEATH	Dikago		58. COUNTY OF DEATH ENTER STATE	-OUTSIDE CALIF.,	<ol> <li>NAME, RELATIONSHIP, FULL MAILING AI OF INFORMANT</li> </ol>	
	CONTRACTOR OF THE PERSON NAMED IN COLUMN 1		San Diego		Kathy Eison - Mother	
			ERSON ACTING AS SUCH 7B. CAL	F APPLICABLE	4380 Arizona St. #2	
Anderson-	Ragsdale Mc	San Diego, CA	The second secon	329	San Diego, CA 92116  8A SIGNATURE OF APPLICANT—FERSINI DENIE	permit, BB. DATE SIGNED
ACKNOWLEDGMENT OF AF	Section 10	375 of the Health and Safety Code, and w	osed disposition stated hereo is one of the was authorized oursiped to Section 7100 of th	Health and Sofety Com.	Weble wholean	06/01/199
- PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH P CORNIA HEALTH AND SAFETY TY FOR THE DISPOSITION SPEC ID MIGHT OF DISPOSAL OUTSIDE OF CALL	\$7.00	98 DATE PERMIT 06/02/199	ISSUED 9C. SIGNATURE OF LOCAL REG	9507459
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	Vital Reco	EGISTRAR OF DISTRICT OF IN CAUFORNIA ords; P.O. Box In Diego, CA 92	85222		OF DISTRICT OF DISPOSITION— R IN ANOTHER DISTRICT IN CALIFORNIA	
10. AUTHORIZED DISPO	DSITION(S) CHECK A	PPLICABLE ITEMS	100-3222		FOR CORONER'S	USE ONLY
C DISPOSITION OF THAN IN A CE		AINS OTHER	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS		(Name and Address)	
BURIAL		Cemetery; 3751 San Diego,	Market St.	118. DATE BURIED	11C. SIGNATURE OF PERSON IN C	CHARGE OF BURIAL
CREMATION	N/A	DDRESS OF CALIFORNIA CA	REMATORY	12B. DATE CREMATI	ED 12C. SIGNATURE OF PERSON IN C	HARGE OF CREMATION
SCIENTIFIC USE	N/A	DDRESS OF CALIFORNIA FA	CILITY RECEIVING REMAINS	13B. DATE RECEN	/ED 13C. SIGNATURE OF PERSON IN (	CHARGE OF FACILITY
TRANSIT		DDRESS IN RECEIVING STAT CREMATED REMAINS ARE T		14B. DATE SHIPPE	D 14C. ADDRESS AND SIGNATURE C OF PLACING WITH THE CARE	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, ENTIFY FINAL PLACE AND CA	OR OTHER DESCRIPTION SUF- DISTRICT OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	150. LICENSE MUMBER OF CREMATED RE MAINS DISPOSER —IF APPLICABLE

#### INTERMENT ORDER

City of San Diego

Date June 1, 1995

	oject to your rules and regulations, to inter the remains
· of Hattie Printe	
	uneral, date, time FRI 6/2/95@2Pr
Church, Chapel, Graveside Lettres	: Streenwood Mortuary
All Funeral cars must arrive before 3:30 p.m. o	of regular work day or an extra charge of \$ 150 °
will be applied and billed to undersigned. X	£
War time veteran	
1 st 5 Grave 7 Brus 10	3 Section MAS Division/Block U
Grave space & Care Fund Part J	
Grave space & Care Fund	
Additional spaces and care fund	
Opening/Closing & Setup	
Burial Container	190.00
Handling Fees	145.00
Flower vases – Marker setting fee	K1 / W / W =
Recording and filing fee	15.00 HS.00
Sales taxes  Note balance  Paid re	13.30
Mote halance	Total Due
20 day write Paldri	eceipt number
of the second	Balance due
I hereby certify I am the VEXECUTO	ROF ESTATE of the above named decedent
and this is your authority to make disposition	of remains as above indicated. I certify and represent and I agree to hold Mt. Hope Ceptetery barmless from
	Windles Orand
I hereby authorize the interment in lot I	July Cull
hold under deed.	2 604 CEVAR ST. 85
Signature of recorded holder of deed	FOR SAN DIEGO, 92101
	X/619)239-0625000
	Telepriline 2 511 2 5 7
- 12282	Invoice # 354358
Work Order # E	Acct. 085359
PY-593 (Rev. 8-92)	

W.O. # E-12282

### NOTE

768.30	San Diego, California	June 1 1995
Thirty days after date for value received, to 3751 Market Street, San Diego, CA 92105 with interest from	he undersigned maker promises to pay 1, the sum of Sven Hundsea 2, 1995	
Should this note not be paid when du accrue at the rate indicated above. Principally will be liable and consents to renewals, a maturity, and waives presentment, dema person who signs this note agrees that a contained herein. If any action be instituting the person was attorney's fees.	pal and interest are payable in lawful m replacements and extensions of time f and and protest and the right to assert recourse may be held against his/her	for payment hereof before, at or after t any statute of limitations. A married separate property for any obligation
	ragraph 7528 of the State of California ins from a plot for which the purchase CLARKE SIGNATURE  STE. D SANS	DIEGO, CA. 92101
PY-1012 (11-89)	5	41-60-9408

E-12282

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

A NAME OF DECEDE	-	18. MIDDLE GRACE	IC. LAST (FAMILY)	PEARCE	2. DATE OF BIRTH 3. DATE OF DEATH 4. SEX MONTH DAY 1967 05/30/1995 F
	DIEGO			AN DIEGO	NAME RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMANT LINUA CLARKE: EXECUTRIX
GREI	ENWOOD MORT 05 & IMPERI	AL AVENUE, SAN DI	EGO, CA	F-843	604 CEDAR STREET #D SAN DIEGO, CA 92101-2708  A SIGNATURE OF APPLICANT—Person taking person; 88. DATE SIGNED
ACHNOWLEDGMENT OF A	PPLICANT I bereby a Section 10	cknowledge as applicant that the proposed do 376 of the Health and Salety Code, and was auth	position Stated herein is one of the orized guramust in Section 7100 of the	dispositions authorized by Health and Safety Code.	Ollevic 1/23 106/02/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	JED IN ACCORDANCE WITH PROVI CORNIA HEALTH AND SAFETY CODE BY FOR THE DISPOSITION SPECIFIED O RIGHT OF DISPOSAL OUTSIDE OF CALIFORNIA.		06/02/199	BSUED BC. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	P.O. BOX	EGISTRAR OF DISTRICT OF DEAT 0 5222 0, CA 92186-5222			OF DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CALIFORNIA
IORIZED DISP	SITION(S) CHECK A			7	FOR CORONER'S USE ONLY
D. SCIENTIFIC US	OF CREMATED REM. EMETERY SE	AINS OTHER [  DORESS OF CALIFORNIA CEMETE  E CEMETERY	E. TEMPORARY ENVAL F. DISINTERMENT G. SHIP IN TO CALIFOR H. TRANSIT TO OUTSI	FINIA	L DISPOSITION PENDING—REMAINS LOCATED AT (Name and Address)  11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL
BURIAL	Contract to the second	ET STREET, SAN DI	EGO, CA 92102	4/2/45	· Wait
CREMATION	12A. NAME AND AD	ODRESS OF CALIFORNIA CREMAT	TORY	12B. DATE CREMATE	D 12C, SIGNATURE OF PERSON IN CHARGE OF CREMATION
SCIENTIFIC	ISA. NAME AND AD	DORESS OF CALIFORNIA FACILITY	Y RECEIVING REMAINS	13B. DATE RECEIVE	13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY
TRANSIT	14A. NAME AND AD REMAINS OR O	DRESS IN RECEIVING STATE OR CREMATED REMAINS ARE TO BE	COUNTRY WHERE SHIPPED	148. DATE SHIPPED	14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEAL FICIENT TO IDE	REST POINT ON SHORELINE, OR O' NTIFY FINAL PLACE AND CA <u>DISTE</u>	THER DESCRIPTION SUF-	15B. DATE OF DISPOSITION	15G. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION OF CREMATED REMAINS DISPOSER OF APPLICABLE



# (P.A.)

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

You are hereby authorized and instructed, se	ubject to your rules	s and regu	lations, to in	ter the ren	nains
of Oscar K	amos	PA#	1180	7//	
ina liner	Funeral, date, tim	e FRI	6/21	195 1	IA
Church, Chapel, Graveside deliver	4 :-	may	100	Mort	tuary.
- All Funeral cars must arrive before 3:30 p.m.	of regular work di	ay or an ex	dra charge d	15_	
will be applied and billed to undersigned	_		(2)	722	
War time veteran					
Lot 375 Grave 4 Row_	Section _	1	Division/Ble	ock/	2
Grave space & Care Fund	***************************************			126.	oc
Additional spaces and care fund					-
Opening/Closing & Setup				165.	OC
Burial Container					
Handling Fees					
Flower vases - Marker setting fee					
Recording and filing fee				45.	00
Sales taxes				-	
MI	9	Total Due.		386	a
Paid Paid	receipt number				
jour		В	alance due		
I hereby certify I am the	<u> </u>	of	the above n	amed dece	dent
and this is your authority to make disposition that I have the right to make this authorization	of remains as at	ove indica	ted. I certify	and repre	from
any liability on account of said authorization	and interment.		a camounty		11500
I hereby authorize the interment in lot I hold under deed.	Signature				
	Address				_
Signature of recorded holder of deed	City	-	-	7	p Code
	Telephone				-
10000	Name of the last	25	436	to	
F 12283	Invoice #_	N	195	3	
Work Order # PY-593 (Rev. 8-92)	Acct. #	cec	10	~	

#### CITY OF SAN DIEGO, CALIFORNIA GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P O Box 2289 San Diego, California 92112

L-1220

Please Refurn YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

-TREASURERS USE ONLY-

7-17-95

BY: CA CK

44.

IF

PAYMENT THEF NOO4-859568

AMT PAID: 386.00

OG/02/95

D7/02/95

PERIOD COVERED

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JOANN WAITS

REF NO: E-12248

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

USCAR RAMOS PA#1180711 SVCS LOT 25 GRAVE 4 SEC 1 DIV 12 UPENING/CLUSING LINER RECORDING FEE

165.00 50.00 45.00

126.00

TOTAL DUE

386.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT
MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO
AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE
SUBJECT TO A COLLECTION FEE OF 10% OR \$10,
WHICHEVER IS GREATER, INTEREST OF 14 PER MONTH
ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.
ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT
LISTED ABOVE White-Customer Copy • Yellow-Remittance Copy NO. 254360

E-12283

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

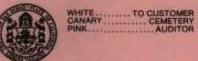
USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)   1B. MIDDLE	I IC. LAST (FAMILY)	2. DATE OF BIRTH   3. DATE OF DEATH   4. SEX
Oscar	-	Ramos	08721/Y924A 08723/Y995A M
SA. CITY OF DEATH		58. COUNTY OF DEATH-OUTSIDE CALIF.	. 8. NAME, PELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF, INFORMANY
San Diego		San Diego	Public Administrator-K. Howard
	DDRESS OF CALIFORNIA—FUNERAL DIRECTOR OR PERSON /	CTING AS SUCH 78. CALIF. LICENSE NUMBE	5201-A Ruffin Rd.
Mayer Mortus	ary, 2859 Adams Ave., San Die	ego, CA 1424	San Diego, CA 92123
	AND THE RESERVE AND THE PARTY OF THE PARTY O		BA. SIGNATURE OF APPLICANT THE CHIP WHITE BB. DATE SIGNED
ACKNOWLEDGMENT OF AP	PPLICANT I hereby acknowledge as applicant that the proposed dispersion of the Health and Salety Code, and was author		1 Dans 1 1- 10501/1995
PERMIT	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVI- SIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE	Banker (University Company) (Inches the Company) (Inches the Company) (Inches the Company) (Inches the Company)	MIT ASUED BC SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT
AUTHORIZATION OF	AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT.	\$7.00 06/02/1	
	NOTE: THE PERMIT GIVES NO RIGHT OF DISPOSAL OUTSIDE OF CALIFORNIA.	James	
TION REQUIRES A NEW	9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH IF DEATH OCCURRED IN CALIFORNIA P.O. BOX 85222		IAR OF DISTRICT OF DISPOSITION— CCUR IN ANOTHER DISTRICT IN CALIFORNIA
PERMIT TO SHOW FINAL DISPOSITION.			
	San Diego, CA 92186-5222  OSITION(S) CHECK APPLICABLE ITEMS		FOR CORONER'S USE ONLY
	IDES ENTOMBMENT)	E TEMPORARY ENVAULTMENT	I. DISPOSITION PENDING—REMAINS LOCATED A
B. CREMATION	OF CREMATED REMAINS OTHER	F. DISINTERMENT	
HAN IN A CE	METERY	G. SHIP IN TO CALIFORNIA	
D. SCIENTIFIC US	L	H. TRANSIT TO OUTSIDE OF CALIFORN	NA.
	11A. NAME AND ADDRESS OF CALIFORNIA CEMETER	Y /18. DATE BUI	RIED   11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL
BURIAL	Mt. Hope Cemetery	- 8/2/9	· · · · · · · ·
	3751 Market St., San Diego,	0.5	i juice
	12A. NAME AND ADDRESS OF CALIFORNIA CREMATO	DRY 12B. DATE CREA	MATED 12C SIGNATURE OF PERSON IN CHARGE OF CREMATION
CREMATION		1	
5	State of the state		i <b>&gt;</b>
portugue.	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY	RECEIVING REMAINS 138, DATE REC	CEIVED 19C. SIGNATURE OF PERSON IN CHARGE OF FACILITY
SCIENTIFIC			
100000			<b>→</b>
	14A. NAME AND ADDRESS IN RECEIVING STATE OR REMAINS OR CREMATED REMAINS ARE TO BE		IPPED 1 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER
TRANSIT	HEMAING ON CHEMATED HEMAING AND TO BE	onireo	I TENORO HITE THE GOVERN
SCATTERING AT SEA	15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OTH		
OR DISPOSITION OTHER	FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRIC	or Discostillar Discostil	MANS DISPOSER
THAN IN A CEMETERY			- APPLICABLE

CASKET 86 Cong INTERMENT ORDER

Date 6-1-95

Values hereby sufferized and instructed as	subject to your rules and regulations, to inter the re-	maine
0	NCHAEL WAYNE -	-5
ina Topseal vault	Funeral, date, time 6/6 Tage 11100	
Church, Chapel, Graveside Church 1		
	n. of regular Work day or appextra strange of \$ 1.5	
will be applied and billed to undersigned. X	Ilalha a II Wash	
War time veteran NO.		
-	Section 2 Division/Block 11	
Grave space & Care Fund	795	5.00
Additional spaces and care fund	-	
	276	5/
Opening/Closing & Setup  Burial Container  Oversite Top-	SEAL VISULT 575.00 35	~ ~
	18	0.
Handling Fees	103	2.0
Flower vases - Marker setting fee	1 mgs	4000
Recording and filing fee	1.5 ich 45	0.0
Sales taxes	4025 17	15
. Ragidale will ing check for total paid	Total Due 2015.2766	7.
independent total paid	receipt number R-46302 2015	5.6
amount.	Balance due	
I hereby certify I am the	of the above named dec	edent
that I have the right to make this authorization	on of remains as above indicated. I certify and repr on and I agree to hold Mt. Hope Cemetery harmless	resent s from
any liability on account of said authorization	and interment.	
I hereby authorize the interment in lot I	X. Malbour H. Loop	.1
hold under deed.	* Homen A dod	9
	Address Mary Jan 57	
Signature of recorded holder of deed	CITY COLOR	Zip Code
/	Tolegoria	
	614 002-0684	
<sub>E</sub> 12284	Invoice #	
Work Order #	Acct. #	
PY-593 (Rev. 8-92)		



MOUNT HOPE CEMETERY 527-3400

From: Anderson Roads	L Address: 5050 Federa	Date:	93102
Two flagand fits	terment of Michael	W. Bran	ara (\$ 20/5.25)
Lot Grave _	PowSe	ection 2	Division //
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	29% Sales Gam 77 80% Sales of Lots Opening/ Closing 77 Burtal Containers 77 Handling Fee 77	7007 7184 700 7184 700 7181 7100 7182 7180 7182 7180 7182 7180 7182 7180 7182 7180 7182 7180 7182 7180 7182 7180 7182 7182 7184 7184 7184 7184 7184 7184 7184 7184
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 5-94)		Misc. Fees 77 Pre-Need 63 Trust 9 Sales Tax 60	1183 45 00 1183 45 00 10101 40 25 1390 5 25



F-12284

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

IA NAME OF DECEDE		18. MIDDLE	Brown, Sr	. 116		ATE OF DEATH 4. SEX
5A. CITY OF DEATH San I	The state of the s		58 COUNTY OF DEATH ENTER STATE San Diego	OUTSIDE CALIF., 6	NAME, RELATIONSHP, FULL MAILING OF INFORMANT Adlean A. Reed, Mo	SHIP HONG SAME OF TAKE
Anderson-Ray	A STATE OF THE PARTY OF THE PAR	5050 Federal	Dram.	APPLICABLE	1533 Mary Lou St. San Diego, CA 9210 A SIGNATURE OF APPLICANT—FUTUR TAIL	
ACKNOWLEDGMENT OF A			ed disposition stated herein is one of the s authorized pursuant to Section 7100 of the	Health and Safety Code.	deble Welcon	06/05/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH PR ORNIA HEALTH AND SAFETY C Y FOR THE DISPOSITION SPECI D HIGHT OF DISPOSAL OUTSIDE OF CALFE	FIED \$7.00	98 DATE PERMIT 1	SSUED BC, SIGNATURE OF LOCAL RE	9507525
TION REQUIRES A NEW TO SHOW FINAL SPOSITION.	Vital Reco	EGISTRAR OF DISTRICT OF D D IN CALIFORNIA rds; P.O. Box San Diego, CA 9	85222		OF DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CAUFORNIA	
OTHORIZED DISPI	DSITION(S) CHECK A	PLICABLE ITEMS			FOR CORONER	'S USE ONLY
B. CREMATION		AINS OTHER	E. TEMPORARY ENVAL	FINIA	I. DISPOSITION PENDIN (Name and Address)	NG REMAINS LOOATED AT
BURIAL		Cdmetery; 3751 San Diego, C	Market St.	SATE BURIED	11C. SIGNATURIE OF PERSON IN	CHARGE OF BURIAL
CREMATION	12A. NAME AND AL	DRESS OF CALIFORNIA CRE	tal peale	128. DATE CREMATE	D 120. SIGNATURE OF PERSON IN	CHARGE OF CREMATION
SCIENTIFIC	N/A	ODRESS OF CALIFORNIA FAC	CILITY RECEIVING REMAINS	13B. DATE RECEIVE	13C. SIGNATURE OF PERSON IN	CHARGE OF FACILITY
TRANSIT		DRESS IN RECEIVING STATE CREMATED REMAINS ARE TO		14B. DATE SHIPPED	14C. ADDRESS AND SIGNATURE OF PLACING WITH THE CAR	
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		rest point on shoreline, o ntify final place and ga <u>o</u>		ISB. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	15D. LICENSE PRIMBER OF CREMATED RE- MAINS DISPOSER —IF APPLICABLE



E-12284

795 +

375· +

575 +

185. +

45. +

40+25 + 2,015. \*

E-12284

0.00 \*

575.00 x

7 . %

40 - 25 #

0.00 #

#### INTERMENT ORDER

City of San Diego

Date June 1, 1995

Ken Con	leman
na <u>liner</u> Fi	uneral, date, time MON 6/5/95 2P1
Shureh, Chapel, Graveside Without	S: CA Burial Mortuary.
All Funeral cars must arrive before 3:30 p.m. of	regular work day or an extra charge of \$ 150 2
will be applied and billed to undersigned.	white Colorman
ar time veteran	
ot 259 Grave 2 Row	Section 2 Division/Block 12
Grave space & Care Fund	795.00
Additional spaces and care fund	
Opening/Closing & Setup	375.00
Burial Container	190.00
landling Fees	145.00
Flower vases – Marker setting fee	
Recording and filing fee	45.00
Sales taxes	13.30
	Total Due
Paid re	ceipt number <u>#4284</u> 391.00
10	Balance due 1/12.3
hereby certify I am the and this is your authority to make disposition of that I have the right to make this authorization and liability on account of said authorization and the said authorization authorization and the said authorization	of the above named decedent of remains as above indicated. I certify and represent and I agree to hold Mt. Hope Cemetery barmless from d interment.
hereby authorize the interment in lot I cold under deed.	X Jahri Cel
ignature of recorded holder of deed	8 280-4503
	Telephon#

## W.O. # E-12285

## NOTE

1172.30	San Diego, California	June 1 19.95
Thirty days after date for value received, the una 3751 Market Street, San Diego, CA 92101, the with interest from	sum of Eleven Hundred 5, 1995	
Should this note not be paid when due, it is accrue at the rate indicated above. Principal at will be liable and consents to renewals, repla maturity, and waives presentment, demand a person who signs this note agrees that reconcentained herein. If any action be instituted of may fix as attorney's fees.	nd interest are payable in lawful a cements and extensions of time and protest and the right to asse arse may be held against his/he	money of the United States. The maker e for payment hereof before, at or after ert any statute of limitations. A married er separate property for any obligation
Part II, Chapter I, Article 2, Paragra authorizes the removal of any remains  PRINT NAME Parkly St.  ADDRESS 4646 Her Hey St.	from a plot for which the purcha	se price is past due and unpaid.
CALIFORNIA DRIVER LICENSE NUMBER 44	1052320 ssn	N# 569-40-5235

CITY OF SAN DIEGO, CALIFORNIA

46284



WHITE.....TO CUSTOMER CANARY....CEMETERY PINK....AUDITOR

#### MOUNT HOPE CEMETERY 527-3400

				ate: 36	cru-		19
	Address	The second secon	attery ?	計事	5 S	D 92	02
In Payment of	territy	+ of Ke	n Col	man	Pollars (\$	2911 0	<u></u>
		0					
Lot Grave	2	Row	Section	_ 2		Division Block	12
Invoice No	NOT VALID FOR PUR	POSESTATED UNLESS S	20	Sales Care	67007 77184 —	1000	-
Acct. No			of	M Sales Lots Pening/	77184 — 100	391	100
w.o. <u>E-12285</u>			CI	osing Irial Ontainers	77181 — 100 77182 —	1	
BALANCE DUE # 1/12 30	MILE TO		10	Widing Fee	77185 —		
Pre-Need Lot ☐ At Need ☐ On Acct ☐	THE PARTY OF THE P		M Pr	PCording & inc. Fees P-Need	100 77183 — 63033	-	-
Pre-need Trust   Cash   Check	THE REAL PROPERTY.		- 10	Unt Iles Tax	9022 — 60101 78390 —		
AC-212 (Rev. 5-94)	ISSUED BY	Clark	тот	AL PAID		391	00

#### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS



USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

TA. NAME OF DECEDENT—FIRST (GIVEN) 1B. MIDDLE Ken —		Coleman		2. DATE OF BIRTH 3.1	DATE OF DEATH 4. SEX	
SA. CITY OF DEATH  San Diego  7A. TYPED NAME AND ADDRESS OF CALIFORNIA FUNERAL DIRECTOR OR PERSON California Cremation & Burial Chapel 5880 El Cajon Blvd. San Diego, CA 921		PARTING AS SUCH 78. CALIF. LICENSE NUMBER 4 5 S F-1357		8. MAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMANT Pauline Coleman-Mother		
				A646 Hartley St. #5 San Diego, CA 92102  A SIGNATURE OF APPLICANT—Forum tume permet, 88. DATE SIGNED O6/05/1995		
	ACKNOWLEDGMENT OF A	Section 10.076 of the Health and Safety Code, and was within			· z cowence	
	PERMIT UTHORIZATION OF OCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THE PERMIT MISS NO MORIT OF DISPOSAL OUTSDE OF CALIFORNIA.	9A. AMOUNT OF FEE P \$7.00	06/05/199 E. Mitche	9507512	REGISTRAR ISSUING PERMIT
200	NY CHANGE IN DISPOSI- ION REQUIRES A NEW FIRMIT TO SHOW FINAL DISPOSITION.	OD. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH VITAL RECORDS P.O. Box 8522. San Diego, CA 92186-5222			OF DISTRICT OF DISPOSITION— R IN ANOTHER DISTRICT IN CALFORNIA	
10	AUTHORIZED DISP	OSITION(S) CHECK APPLICABLE ITEMS	EL ON I	85.11	FOR CORONE	R'S USE ONLY
	B. CREMATION	SE [	F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	DRNIA BIDE OF CALIFORNIA	(Name and Addres	
	BURIAL	It. Hope Cemetery San Diego, CA	a.	6/5/95	110. SIGNATURE OF PERSON	IN CHARGE OF BURIAL
BLE ITEMS	CREMATION	12A NAME AND ADDRESS OF CALIFORNIA CREMAT	ORY	12B. DATE CREMAT	ED 120 SIGNATURE OF PERSON I	N CHARGE OF CREMATION
LL APPLICA	SCIENTIFIC USE	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY -	RECEIVING REMAINS	138, DATE RECEIV	PED 13C. SIGNATURE OF PERSON	N CHARGE OF FACILITY
OMPLETE A	TRANSIT  14A. NAME AND ADDRESS IN RECEIVING STATE OR COUNTRY WHERE REMAINS OR CREMATED REMAINS ARE TO BE SHIPPED			148. DATE SHIPPE	D 14C. ADDRESS AND SIGNATUR OF PLACING WITH THE C	
Ö	SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEAREST POINT ON SHORELINE, OR OT FICIENT TO IDENTIFY FINAL PLACE AND CA DISTRI	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON CHARGE OF DISPOSITION		



## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diago

Date June 2, 1995

You are hereby authorized and instructed, su	Bolancer &
VaulttShar	Funeral, date, time MON 4/5/95 11-30a
Church, Chapel, Graveside grave Se	de: CA Berral Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge of \$ 150 00
will be applied and billed to undersigned. &	Tubie ockson
War time veteran 45	0 0
Lot Grave Row	Section 2 Division/Block 2
Grave space & Care Fund	-300.00
Additional spaces and care fund	
Opening/Closing & Setup	DAID 105.00
Burial Container	
Handling Fees	(a)-co
Flower vases - Marker setting fee	JUN 5 1995
Recording and filing fee	
Sales taxes	TY of SAN DIEGO, CALIF 3.85
RUPIAL WELK Of.	Total Due 268. 95568-85
ring amount Pald	receipt number R-46303 368.85
will mon.	Balance due
I hereby certify I am the Moth	of the above named decedent
and this is your authority to make disposition	n of remains as above indicated. I certify and represent in and I agree to hold Mt. Hope Cemetery harmless from and interment.
	D1.00 h.
I hereby authorize the interment in lot I	Mukie J. Jackson
hold under deed.	24889 OCEAN VIEW BIL
Signature of recorded holder of deed	SANDIEGO CA-92113
	8362-1227 Zpcox
/	Telaphone
- 12286	Invoice #
Work Order # E	Acot. #
PY-593 (Rev. 8-92)	



		Date:	6:5		9
From CA Burial	Address: 5880 El Co.	n Bl.	9	GALLE	9 (1
Turs hundred wiste	- sicit 2 85/100	70	ollars (\$ _	368,25	)
n 1010 Payment of	turn st of Coron	L. Ba	bac	un	0
	10				
ot Grave	RowSe	oction	101	Division Block	2
Acct, No	NOT VALID FOR PURPOSE STATED LINLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers  Handling Fee Recording & Mice. Fees Pre-Need Trust	67007 77184 — 100 77184 — 100 77181 — 100 77181 — 100 77182 — 100 77185 — 100 77183 — 63033 9022 — 9022	105	8000
Pre-need Trust Cash Check Conc.	ISSUED BY Couch	Sales Tex TOTAL PAID	60101 78390 —	368	85

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1/	A. NAME OF DECEDE	ENT-FIRST (GIVEN)	1B. MIDDLE	10. LAST (FAMILY)		2. DATE O		E OF DEATH   4. SEX
	Jerome		-	Balancie	r	037167	1961 0470	371995 M
5/	A. CITY OF DEATH			58. COUNTY OF DEAT	H-OUTSIDE CALIF.,	6. NAME, RELATIONS	HP, FULL MAILING AS	DORESS AND ZIP CODE
_	San Diego			San bleg		Rubie Jack	son-Mother	
7/	Californi	a Gremation	A FUNERAL DIRECTOR OF PERSON  & Burial Chapel  San Diego, CA 921	-	LIF. LICENSE NUMBER IF APPLICABLE  PD 1357	San Diego,	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAME	
-	ACHINIMLEDGMENT OF A	non-market     hereby a	cknowledge as applicant that the proposed disp 876 of the Health and Safety Code, and was author	esition stated become is one of the	Assessment authorized by	DAL SIGNATURE OF A	The Establishment	04/11/1995
	PERMIT UTHORIZATION OF OCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	IED IN ACCORDANCE WITH PROVI- ORNIA HEALTH AND SAFETY CODE Y FOR THE DISPOSITION SPECIFIED DRIGHT OF DISPOSAL OUTSIDE OF CALFORNIA.		The second secon	95 9504		ISTRAR ISSUING PERMIT
T	OY CHANGE IN DISPOSI- TION REQUIRES A NEW ERMIT TO SHOW FINAL DISPOSITION.	Vital Rec	GISTRAR OF DISTRICT OF DEATH DIN CAUFORNIA. Box 852 CA 92186-5222		DRESS OF REGISTRAR DISPOSITION IS TO OCCI			
11	AUTHORIZED DISP	OSITION(S) CHECK AT	PELICABLE ITEMS		- 140	F	OR CORONER'S	USE ONLY
	B. CREMATION	OF CREMATED REMA	AINS OTHER	E. TEMPORARY ENVI F. DISINTERMENT G. SHIP IN TO CALIFO H. TRANSIT TO OUTS	ORMA		SPOSITION PENDING ame and Address)	FEMAINS LOCATED AT
	BURIAL	Hount Hop	oress of California Cemeter e Cemetery, , CA	IV.	118. DATE BURIES	11C SIGNATUR	E OF PERSON IN O	CHARGE OF BURIAL
IBLE ITEMS	CREMATION	12A. NAME AND AC	DORESS OF CALIFORNIA CREMATI	DRY	128 DATE CREMAT	ED 12C SIGNATUR	E OF PERSON IN CH	HARGE OF CREMATION
LL APPLICA	SCIENTIFIC USE	13A. NAME AND AD	DRESS OF CALIFORNIA FACILITY	RECEIVING REMAINS	13B. DATE RECEIV	/ED 13C, SIGNATUR	E OF PERSON IN C	CHAPGE OF FACILITY
CAPLETE	TRANSIT	14A. NAME AND AD REMAINS OR C	DRESS IN RECEIVING STATE OR CREMATED REMAINS ARE TO BE	COUNTRY WHERE SHIPPED	148. DATE SHIPPE		AND SIGNATURE OF	F PERSON IN CHARGE
	SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	FICIENT TO IDE	REST POINT ON SHORELINE, OR OT NTIFY FINAL PLACE AND CA <u>DISTRI</u>		15B. DATE OF DISPOSITION		E OF PERSON IN OF DISPOSITION	15D. LICENSE NUMBER OF CREMATED RE- MARIS DISPOSER IF APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

### California Cremation & Burial Chapel 5880 El Cajon Blvd. San Diego, California 92115

E-12286

10 Apr 95 2299

Rubie Jackson 4889 Oceanview Blvd San Diego, CA 92113

### PURCHASE, AGREEMENT

Jerome Balancier

4889 Oceanview Blvd.

San Diego, CA 92113

NAME OF DECEASED

ADDRESS

CITY

The undersigned, hereinafter referred to as "Purchaser(s)," hereby agree(s) to purchase the within described entry, services, commodities, and materials, subject to the acceptance and approval of California Canation and Burial Chapel, hereinafter referred to as "Seller," subject to the rules and regulations of the seller, which are incorporated herein by reference. Purchaser(s) hereby grants to Seller a security interest in the within described property, services, commodities, and materials.

Museum of Danasad't - Marking ( L. a. p. )	
Transp of Deceased to Mortuary (metro San Diego)	. 85.00
Securing Permits & Death Certificate Filing	95.00
Professional Admin Fee for cremations	150.00
Funeral coach	95.00
8 Passenger Limo (3)	375.00
Certified Copy of Death Certificate (3)	36.00
Use of Slumber Room (viewing)	75.00
Chapel Service for Staff & Attentants	150.00
Embalming (Preservation of Remains)	
Cosmetology, Dressing & Casketing	175.00
Washing, Disinfection & Refrigeration	95.00
	65.00
ental casket for crem w/srv	275.00
Crematory Charge	455.00
Cremation Urn Sheet brass	79.00
Services programs Black & white (per 125)	150.00
Register Book (hard back)	20.00
Cemetery charge: grave & liner Mt Hope	568.85
ratuity for Musician & Singer	100.00
Insurance Assignment Fee	95.00
	95.00

Insurance Assignment, please sign all forms!

3,138.85

TERMS

BALANCE DUE: 3,138.85

The financial obligation of \$\frac{3,138.85}{} \text{created by this agreement is due and payable upon or before the completion of the services rendered.

In case of default, it is agreed by Purchaser(s) to pay all reasonable cost of collection, including court cost and attorney fees. It is further acknowledged by Purchaser(s) that the filing of a claim against Estate of the decedent shall not amount to a waiver of this obligation of the Purchaser(s) or the Estate of the decedent. The below is a correct statement of the service and merchandise to be furnished and the undersigned acknowledge(s) receipt of the agreement.

PURCHASER'S NAME SIGNATURE

ADDRESS

CITY

STATE

PHONE

DATE Senyard

ARRANGEMENT COUNSELOR

# MT. HOPE CEMETERY

City of San Diego

Date 6-2-95

of HICKS, INE ?		1200 1
in a Top Seal Vault Church, Chapel, Graveside Church	Funeral, date, time Thur. Granuside Rag	odale Mortuary.
All Funeral cars must arrive before 3:30 p.m will be applied and billed to undersigned.		
War time veteran NO.	/ -	San Harris
Lot 2 Grave 11 Row	Section _ 2_ Di	vision/Block_12
Grave space & Care Fund	D-8668	
Additional spaces and care fund		
Opening/Closing & Setup		
Burial Container		
Handling Fees	PAID	185.00
Recording and filing fee	IUM 9 4005	45.00
Sales taxes 1	JUN 2 1995	17.50
MT.	HOPE CEMPARES. of SAN DIEGO, CALIF	872.5
	EARTH AND THE PROPERTY OF THE PARTY OF THE P	ince due
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization.	n of remains as above indicated in and I agree to hold Mt. Hope (	
	100 - 10	1-1
I hereby authorize the interment in lot I hold under deed.	Signature 576 Elizabeth	15)
Signature of recorded holder of deed	San Diego, Call 19-264-33	Cal. 92113 45 Apacon
- 12287	Invoice #	
Work Order # E	Acct. #	
PY-593 (Rev. 8-92)		

### WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

From Chester A Hicks	Address:	516 El	aketh, 80	miligo	931
In Sull Payment of	sterner &	of may 1	Nic ha	ara (\$ <u>972.5</u>	
Lot Grave	1.1	Row	_ Section2	Division /	2
Invoice No.	NOT VALID FOR PURPOS "PAID" IN THIS SPACE	SESTATED UNLESS STAM	20% Sales Care 7 80% Sales	7007 7184 100	
Acct. NoE - 1 2 3 8 7			Opening/ Closing 7	7184 100 3 7 5 7181 3 7 5	00
BALANCE DUE			Handling Fee 7	7182 100 1 8 5 7185 1 8 5	00
Pre-Need Lot  At Need  On Acct	9 0		Pre-Naed 6	7180 303j 9022	50
Pre-need Trust Cash Check AC-212 (Rev. 5-94)	1/1-	Jauch	TOTAL PAID	\$ 2 7 3	50

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

TA. NAME OF DECEDE	ENT—FIRST (GIVEN) 18. MIDDLE	IC. LAST (FAMILY)	2. DATE OF BIRTH 3. DATE OF DEATH 4. SEX
Inez	-	Hicks	12/10/1910 06/01/1995 F
5A. CITY OF DEATH	n Diego	5B. COUNTY OF DEATH—OUTSIDE CALIF SAN DIEGO	0 NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP CODE OF INFORMANT Chester A. Hicks, Husband
	odness of California—Funeral Director on Person sadale Mottamy; 5050 Federa San Diego, CA		516 Elizabeth St. San Diego, CA 92113 BA. SIGNATURE OF APPLICANT—Person baung permit. BB. DATE SIGNED
ACKNOWLEDGMENT OF A		position stated herein is one of the dispositives authorized by orang pursuant in Section 7100 of the Health and Safety Gode.	Ellerteklein 106/05/199!
PERMIT  AUTHORIZATION OF LOCAL, REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT.  HOTE: THE PERMIT GIVES NO BERIT OF DISPOSAL OUTSIDE OF CALIFORNIA.	06/05/1	IT ISSUED, 9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT 9507526
ANY CHANGE IN DISPOSI- LECTURES A NEW TO SHOW FINAL POSITION.	OD. ADDRESS OF REGISTRAR OF DISTRICT OF DEAT IF DEATH OCCURRED IN CAUFORNIA Vital Records; P.O. Box 952 San Diego, CA 92186-5	22 # DISPOSITION IS TO OC	R OF DISTRICT OF DISPOSITION— CUIL IN ANOTHER DISTRICT IN CALIFORNIA
10 AUTHORIZED DISP	OSITION(S) CHECK APPLICABLE ITEMS		FOR CORONER'S USE ONLY
B. CREMATION		E. TEMPORARY ENVAULTMENT F. DISINTERMENT G. SHIP IN TO CALIFORNIA H. TRANSIT TO OUTSIDE OF CALIFORNIA	I. DISPOSITION PENDING—REMAINS LOCATED A (Name and Address)
BURIAL	Nt. Hope Cemetery; 3751 M. San Diego, CA		ED   11C. SIGNATURE OF PERSON IN CHARGE OF BURIAL
CREMATION	12A NAME AND ADDRESS OF CALIFORNIA CREMAT	ald 128. DATE CREM	ATED 12C. SIGNATURE OF PERSON IN CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND ADDRESS OF CALIFORNIA FACILITY N/A	Y RECEIVING REMAINS 13B. DATE REC	EIVED 13C. SIGNATURE OF PERSON IN CHARGE OF FACILITY
TRANSIT	14A NAME AND ADDRESS IN RECEIVING STATE OR REMAINS OR CREMATED REMAINS ARE TO BE		PED 14C. ADDRESS AND SIGNATURE OF PERSON IN CHARGE OF PLACING WITH THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	1SA. ADDRESS, NEAREST POINT ON SHORELINE, OR O FICIENT TO IDENTIFY FINAL PLACE AND CA DISTR N/A		15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION OF CREMATED REMAINS DISPOSER

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 6/2/95

of	MITOV	VLADIMIR	PAH	1189,7622
ina	Liner '	Funeral, date, time	West	199 11:00
Church, Ch	apel, Graveside Del	Color :	The second second	Rest Mortuary
	WHEN SOME WEAR OF COMMENT	3:30 p.m. of regular work day	or an extra c	harge of \$
		ned.		
1000	oteran		AVAIL.	
53			1	
ot		Row Section		1-1 10
Grave spac	e & Care Fund			126.00
Additional s	paces and care fund			
Opening/Cl	osing & Setup			165.00
Burial Cont	ainer			50.00
Handling Fe	Jes			
Flower vase	as - Marker setting fee			
Recording a	and filing fee			45.00
		To	tal Due	386.00
		Paid receipt number		
		77.56HY-27688888W77C0H34-2	Balan	ce due
hereby cer	rtify I am the		of the a	bove named deceden
and this is	your authority to make di	sposition of remains as above norization and I agree to hold rization and interment.	ve indicated.	certify and represen
any liability				
any liability	thorize the interment in lo	ot I Signature		
any liability		Signature Advana		
hereby aut		Advess		To God
hereby aut	deed.	Address City		Zip Code
hereby aut	deed.	Advess		Zip Cod
hereby aut	deed.	Address City Tellsphons	3557	778

### GENERAL INVOICE

Make Remittance Payable to CITY TREASURER P.O Box 2289 E-12288

San Diego, California 92112
Please Return YELLOW Copy with Your Payment.

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO.

PAYMENT DATE TO TE 
REF NO 04-883709

AMT PAID:

386.00

07/05/95

DAYMENT DUE

PERIOD COVERED

JANE RAUCH

DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

VLADIMIR MITOV SERVICES
LOT 53 GRAVE 6 SEC 1 DIV 12
OPENING/CLOSING
LINER
RECORDING FEE

AMOUNT

126.00 165.00 50.00 45.00

TOTAL DUE

386.00

NOTICE: PLEASE REMITS PAYMENT PROMPTLY. PAYMENT
MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO
AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE
SUBJECT TO A COLLECTION FEE OF 10% OR \$10,
WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH.
ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES.
ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT
LISTED ABOVE.

C22 Gev. 2/90 White - Customer Copy • Yellow - Remittance Copy

F-12288

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

Vladimir	NT-FIRST (GIVEN)	18. MIDDLE	TC. LAST (FAMILY	)		DATE OF BIRTH	3. DATE OF MONTH, DAY	
T		Jeorgien	Mitov				05/22/1	995 Rale
A CITY OF DEATH			5B. COUNTY OF DI	EATH-OUTSIDE CALF.,	OF INFO	ELATIONSHIP, FULL MA		
San Diego			San Diego		San D	Lego County	Public	: Administra
Park Crest	Funeral Ho			IF APPLICABLE	San D	Ruffin Boar 1ego, CA 921	123	
346 IWILLIAG		ne San Diego, C		1507		MRE OF APPLICANT PO	son taking pornit	8B. DATE SIGNED 06/22/199
ACKNOWLEDGMENT OF AP	Section 10	cknowledge an applicant that the propose 376 of the Health and Safety Code, and wo	aumonora amum in Section (10)	of the Health and Safety Code.		13	1	The Land Block
	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT	JED IN ACCORDANCE WITH PRI ORNIA HEALTH AND SAFETY OF TY FOR THE DISPOSITION SPECIF D RRHT OF DISPOSAL OUTSIDE OF CALIFO	S 7.00	8.K. St.   06/22/1	alth	C. SIGNATURE OF LOC	9508	
INY CHANGE IN DISPOSI	P.O. BOX 6	EGISTRAR OF DISTRICT OF D D IN CALPONNA 5222 CA 92186-5222	EATH— SE	ADDRESS OF REGISTRAP			NIA	
O. AUTHORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS				FOR CORC	NER'S US	E ONLY
B CREMATION	OF CREMATED REM	AINS OTHER	F. DISINTERMENT			(Name and Ad		MAINS LOCATED A
D SCIENTIFIC US			H. TRANSIT TO O	UTSIDE OF CALIFORNIA			- 3	-
D SCIENTIFIC US	SE		R. — ROUBLOOMS CO.		D 110.	SIGNATURE OF PERS	ON IN CHAR	GE OF BURIAL
BURIAL	IIA NAME AND AD Mt Hope Co San Diego,	emetery	ETERY.	UTSIDE OF CALIFORNIA	-16	SIGNATURE OF PERSO	5	
BURIAL CREMATION SCIENTIFIC USE	11A NAME AND AD ME Hope Co San Diego,	metery , CA 92104	MATORY	UTSIDE OF CALIFORNIA	TED 120.	Wait	ON IN CHARG	GE OF CREMATION
BURIAL CREMATION SCIENTIFIC	TIA NAME AND AD ME HODE CO SAN DIEGO 12A. NAME AND AD 13A. NAME AND AD 14A. NAME AND 14A. NAME AND AD 14A. NAME AND 14A.	CA 92104 DDRESS OF CALIFORNIA CRE	MATORY  LITY RECEIVING REMAINS  OR COUNTRY WHERE	UTSIDE OF CALIFORNIA	TED 12C	SIGNATURE OF PERSO	ON IN CHARG	GE OF FACILITY

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 6-5-95

You are hereby authorize	Lond,	DESCRIPTION OF THE PARTY	CONTRACT TO SECURITION OF THE PARTY OF THE P	Company of the Compan	, to inter the	remains
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All Funeral cars must arm	ve before 3:30 p	o.m. of regu	ular work day	or an extra ch	arge of \$	000
will be applied and billed t		- Tax	ricen 2	100 111310	7	
War time veteran KNO				-		-
Lot 10 / Grave _						1
Grave space & Care Fund						0.
Additional spaces and car	re fund					W 3.2
Opening/Closing & Setup						5.00
Burial Container					X1277722	$\delta$ . $\infty$
Handling Fees					60	,00
Flower våses – Marker se			***************			-
Recording and filing fee	10	ud	w		_4:	5.00
Sales taxes	-	ull			3	. 85
	D	Da	ME ROTO	otal Due	26	8.89
	P	aid receipt	number R	1-4634	12 26	8.8
				Balance		9-
that I have the right to ma any liability on account of I hereby authorize the inte hold under deed.	said authorizati	ion and int	Signature W/96 A	in S.	Vielest Pase o a . 954	ti
Signature of recorded holder of deed	2200		City 707	- 939-0	967	Zip Code
water F 1	2289		Invoice #			
A /	1	0		2/24	196	1
Patricia L	ollester	, the	the	askes		-
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Patricia P Samily still date for to	le bur	ial	as of	These	l.	
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the detains it ustile that comes	man	mer in	as all			
that barn	7					

Acct No. \_\_

BALANCE DUE

Pre-Need Lot

AC-212 (Rev. 5-04)

Pre-need Trust Cash

CITY OF SAN DIEGO, CALIFORNIA

46342

# WHITE TO CUSTOMER CANARY CEMETERY AUDITOR

Payment of \_\_\_\_

At Need

Grave

On Acct

ISSUED BY

#### MOUNT HOPE CEMETERY 527-3400

onem our

Row

NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE

			1000
Date:	- 14		19 45
Honor	and	no ne	2 9507
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D	ollars (\$	368.	851
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	_	Patrotecture	_
ection		Division Block	1
		The state of the s	11
CREDIT	67007		
20% Sales Care	77184 —		
80% Sales of Lots	77184		The same of
Opening/	100	105	00
Closing	77181 -		200
Burial	100	55	00
Containers	77182 — 100	10	100
Handling Fee	77185 -	60	00
Recording &	100	415	00
Misc. Fees	77183 -	-	
Pre-Need Trust	63033		
Sales Tax	60101	2	05
OHIOU TAX	78390 -	-	100
TOTAL PAID		268	85

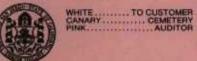
# MT. HOPE CEMETERY INTERMENT ORDER St. GAHES City of San Diene

Date 6-5-95

ina LINER		Funeral, date, t	ime Th	ursda	4 98/95
Church, Chapel, Graveside	Thape	( grave :	CON	end	Mortuary
All Funeral cars must arrive be	efore 3:30	p.m. of regular work	day or an	extra charge	of \$
will be applied and billed to un	dersigned				
War time veteran			-		
Lot 6 Grave	Row	Section	_3_	_ Division/	12
Grave space & Care Fund	Pres	Weed D	-75	69	0
Additional spaces and care fur					
Opening/Closing & Setup					
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Flower vases - Marker setting					
					11- 11
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Salar tayarla A					
Sales taxes Lo. A					
hurs heer			Total Du	•	
Sales taxes to			Total Du	333	45.00
sales taxes to the			R-46	9333 Balance du	45.00
I hereby certify I am the and this is your authority to make the think I have the right to make the	ake dispos	Paid receipt number	Total Du R-46	Balance du	45.00 e 45.00 e anamed deceder
I hereby certify I am the and this is your authority to make the any liability on account of said	ake dispos is authoriz authorizat	Paid receipt number	Total Du R-46	Balance du	45.00 e 45.00 e anamed deceder
I hereby certify I am the and this is your authority to make the any liability on account of said	ake dispos is authoriz authorizat	Paid receipt number sition of remains as ation and I agree to tion and interment.	Total Du R-46	Balance du	45.00 e 45.00 e anamed deceder
I hereby certify I am the and this is your authority to make the any liability on account of said.  I hereby authorize the intermed hold under deed.	ake dispos is authoriz authorizat	Paid receipt number sition of remains as ation and I agree to toon and interment.	Total Du R-46	Balance du	e 45.00 e armed decederly and represery harmless from
I hereby certify I am the and this is your authority to make the right to make the any liability on account of said. I hereby authorize the intermediated under deed.	ake dispos is authoriz authorizat	Paid receipt number sition of remains as ation and I agree to too and interment.	Total Du R-46	Balance du	45.00 e 45.00 e 145.00 e 145.0
Sales taxes Lo. A	ake disposis authorizat	Paid receipt number sition of remains as ation and I agree to too and interment.	Total Du R-46 above ind hold Mt. H	Balance du	45.00 e 45.00 e named deceder

CITY OF SAN DIEGO, CALIFORNIA

46323



		Date:	600	. 19
rom Connod Len DI	Address: 7387	Broadwary.	Can on Ore	ne 91
Finter sine Og	20400	2	Dollars (\$ 45.0	0),
nPayment of	carding fore-	Hazel Colem	and inter	next
	01	0		C. F.B.
ot Grave	Row_	Section	Division Block	
nvoice No	NOTVALID FOR PURPOSE STATED UNL "PAID" IN THIS SPACE:	ESSSTAMPED CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers	67007 77184 — 100 77184 — 100 77181 — 100 77182 —	
Pre-Need Lot		Handling Fee Recording & Misc. Fees Pro-Need Trust Sales Tax	100 77185 100 77183 63033 9022 60101 78390	50
0-212 (Rev. 5-94) 5 74 90 11 3 5	ISSUED BY _ / COLLE	TOTAL PAID	* H5	60



E-12290

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE HAZEL	NT—FIRST (GIVEN)	18. MIDDLE TRENE	COLEMAN	ILY)	1	the contract of the second party of the second	06/03/1995	4. SEX
EL CAJON				SOUNTY OF DEATH—OUTSIDE CALIF 8. NAME, RELATIONSHIP, FULL MAILING		- DAUGHTEI		
TA TYPED NAME AND ADDRESS OF CALIFORNIA FUNERAL DIRECTOR CONRAD LEMON GROVE MORTUARY 7387 BROADWAY — LEMON GROVE, CA		TUARY		IF APPLICABLE	A STREET, STRE	ION, CA 92021		
ACHNOWLEDGMENT OF AP	murant I hereby a	chrowledge as applicant that the	proposed disposition stated herein is a and was authorized pursuant to Section		BA SIGNAT	ON WOMEN	or paint sernet, 88, DA	TE SIGNED
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	DED IN ACCORDANCE WIT ORNIA HEALTH AND SAFE TY FOR THE DISPOSITION :	PROVI- ETY CODE SPECIFIED \$7.00	FEE PAID 88. DATE PERM Karren War 06/06/19	rant	C. SIGNATURE OF LOCA 9507576	AL REGISTRAR ISSUI	NG PERMIT
ANY CHANGE IN DISPOSIT	PAR WEST	GISTRAR OF DISTRICT COM DEPOS PO BO BO BO BO BO BO BO BO BO BO BO BO BO	ALTH SERVICES	BE. ADDRESS OF REGISTRA IF DISPOSITION IS TO OC		OT OF DISPOSITION— HER DISTRICT IN CAUPOWER	M	
10. AUTHORIZED DISPO	OSITION(S) CHECK A	PPLICABLE ITEMS		17-37-00		FOR CORO	NER'S USE ONL	.Y.
B. CREMATION	OF CREMATED REM	AINS OTHER	E. TEMPORARY  F. DISINTERME  G. SHIP IN TO	The state of the s		L DISPOSITION PE (Name and Addi	ENDING—REMAINS L	OCATED A
D. SCIENTIFIC US	BE		H. TRANSIT TO	OUTSIDE OF CALIFORNIA	4			
BURIAL	3/31 MAKE	GET STREET CA 92102	CEMETERY	6/8/95	ED 11C.	SIGNATURE OF PERSO	N IN CHARGE OF E	BURIAL
CREMATION  CREMATION  SCIENTIFIC	12A. NAME AND AL	DDRESS OF CALIFORNIA	crematory	128. DATE CREM	ATED 12C.	SIGNATURE OF PERSON	N IN CHARGE OF CR	REMATION
SCIENTIFIC USE	13A. NAME AND AD N/▲	DRESS OF CALIFORNIA	FACILITY RECEIVING REM	AINS 138. DATE RECI	EIVED 13C.	SIGNATURE OF PERSO	N IN CHARGE OF F	ACILITY
TRANSIT		DRESS IN RECEIVING S CREMATED REMAINS AR	TATE OR COUNTRY WHERE TO BE SHIPPED	E 148. DATE SHIP		ADDRESS AND SIGNATI OF PLACING WITH THE		CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY			NE, OR OTHER DESCRIPTION CA <u>DISTRICT</u> OF DISPOSITION			SIGNATURE OF PERSO CHARGE OF DISPOSITION	ON 1 OF CRE	E NUMBER MATED RE- DISPOSER PUCABLE

GOPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



# MT. HOPE GEMETERY INTERMENT ORDER

City of San Diego

Date 6-5-95

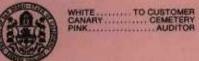
	ect to your rules and regulations, to inter the remains
of SCARBORGUGH,	ANNIE MAE
ina T.S. VAULT F	uneral, date, time THUR 618 11AM
Church, Chapel, Graveside Church &	manual A Burial Mortuary.
All Funeral cars must arrive before 3:30 p.m. d	pegular work day or an extra charge of \$ 150.00
will be applied and billed to undersigned.	amondo Henderson
War time veteran NO.	
Lot 18 Grave 12 Row_	Section Division/Block
Grave space & Care Fund	895.00
Additional spaces and care fund	
Opening/Closing & Setup	
Burial Container	200
Handling Fees	1000
Flower vases – Marker setting fee	, 4 -
Recording and filing fee	Wa _45.00
Sales taxes	17,50
	7 Total Due 1767.5
Paid re	ceipt number R - 46299 442.00
0 24	Balance due 1325.5
I hereby certify I am the and this is your authority to make disposition of that I have the right to make this authorization any liability on account of said authorization and the sai	of the above named decedent of remains as above indicated. I certify and represent and I agree to hold Mt. Hope Cemetery harmless from d interment.
I hereby authorize the interment in lot I hold under deed.	* Ja Manda Herderson * 4205 Dannya ST
Signature of recorded holder of deed	X D, Ca 92 13 264-8372 Zip Code X 619 264-8372
Work Order # E 12291	Invoice # 354810 Acct. # 085424

PY-1012 (11-89)

W.O. # E-12291

### NOTE

-\$	1325.50	San I	Diego, California	50	une	19.95
	hirty days after date for value recei	ved, the undersigned m	aker promises to pay	San Diego City	y Treasurer, o	rorderat
37	751 Market Street, San Diego, CA	92101, the sum of Th	intern hund	redtwen	ty- fine o	OLLARS
w	ith interest from	8 Chaly	1995	0	n the unpaid	principal
at	the rate of 12 percent per annum	, payable on demand.				
m pe	Should this note not be paid wherever at the rate indicated above. Fill be liable and consents to renew aturity, and waives presentment, erson who signs this note agrees ontained herein. If any action be in ay fix as attorney's fees.	Principal and interest are vals, replacements and demand and protest an that recourse may be h	e payable in lawful m extensions of time f d the right to assert leld against his/her	oney of the Un or payment he any statute of separate prope	ited States. T reof before, a limitations. A erty for any o	he maker at or after A married bligation
	Part II, Chapter I, Article : authorizes the removal of an					
U <sub>PP</sub>	RINT NAME *Lamanda	Henderson	SIGNATURE XX	Manda	Dender	100
AE	DDRESS X4205 Gan	mma St	SD 9	2113		
C/	ALIFORNIA DRIVER LICENSE NUMBER	XD0987148	SSN 6	×560-4	2-50	37



			Date:	(0"	2	1945
rom: La Manda Idend	MAD Address: 42	05 GO	nma	E.	Can Di	100 93
mur Rundred Linte	1-two 4 70	4008		Dollar	s (\$ 442,0	0)
n cont Payment of	ternestal	annie	- may	Joans	iorough	,
	1	TO STATE OF				
ot Grave	12	- Row	Section	1	Division Block	12
nvoice No	NOT VALID FOR PURPOSEST	ATED UNLESS STAF	MPED CREDIT	ies Care 771	07 84	
Acet. No.	P. 100		80% Sa of Lots	771		00
v.o. E-13291	175-00		Openin Closing Burial	771	00 181 	
BALANCE DUE #1335,50	133		Contain	HOFS 771	82 ————	
	Hall Market		Hendlin Record Misc. F	ing & .1	00	
Pre-Need Lot  At Need On Acct	00	77 38	Pre-Ner Trust	ed 630	165	
Pre-need Trust Cash Check	6/1/20	1	Sales T	ax 601 783	90 — — —	-
C-212 (Rev. 5-94) 3292	ISSUED BY	MAN	TOTAL P	AID	. 442	00

### OFFICIAL RECEIPT

CITY OF SAN DIEGO, CALIFORNIA



WHITE.... TO CUSTOMER CANARY CEMETERY

	2008 B K	Date: 4-8	7 Pet.
Payment of	rion Thomas Vas P	Dollars (5	46.93
Lot 18 Grave 16		ection	Division 12
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 20% Sales Care 77184 - 80% Sales 100 of Lots 77184 - Opening/ Closing 77181 - 100 Containers 77182 - 100 Handling Fee 77185 - Recording & 100 Handling Fee 77185 - Pre-Need 63033 Trust 9022 - Sales Tax 60101 78380 - TOTAL PAID \$	35 00 20 00 46 93

4

E-12291

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

TA. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	10. LAST (FA	THE REAL PROPERTY.	2. DATE OF BIRTH MONTH DAY, YEA 12/03/1912	
SA CITY OF DEATH National	City	nae	5B. COUNTY O	F DEATH-OUTSIDE CALIF.		MAILING ADDRESS AND ZIP CODE
Californi	a Cremation	a & Burial C		IF APPLICABLE	4205 Gamma Str San Diego, CA	reet
ACKNOWLEDGMENT OF A	Thereby a	San Diego,	proposed disposition stated herein is a series and was authorized pursuint to Section	F-1357 or of the disposition authorized by	BA. SIGNATURE OF APPLICANT	Person taking permit 8B. DATE SIGNED 06/06/199:
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	ED IN ACCORDANCE WORNIA HEALTH AND SAF Y FOR THE DISPOSITION	TH PROVI- ETY CODE SPECIFIED \$7.00		95 9507573	LOCAL REGISTRAR ISSUING PERMIT
The latest and the la	Vital Reco	GISTRAR OF DISTRICT DI N. CALEGRAMA Drds-P.O. Bo CA 92186-5	x 85222		OF DISTRICT OF DISPOSITION UR IN ANOTHER DISTRICT IN CAL	
10. AUTHORIZED DISPO	DSITION(S) CHECK A	PPLICABLE ITEMS			FOR CO	DRONER'S USE ONLY
B. CREMATION		NINS OTHER	F. DISINTERME		I. DISPOSITIO	ON PENDING—REMAINS LOCATED AT Address)
BURIAL		DRESS OF CALIFORNI e Cemetery go, CA	A GEMETERY	11B. DATE BURIE	D 11G SIGNATURE OF P	ERSON IN CHARGE OF BURIAL
CREMATION	12A. NAME AND AL	metal	non seel	128. DATE CREMA	TED 12C SIGNATURE OF PI	ERSON IN CHARGE OF CREMATION
SCIENTIFIC USE	13A, NAME AND AL	DRESS OF CALIFORNI	A FACILITY RECEIVING REM	AINS 13B. DATE RECE	VED 13C. SIGNATURE OF P	ERSON IN CHARGE OF FACILITY
TRANSIT		DRESS IN RECEIVING CREMATED REMAINS A	STATE OR COUNTRY WHER	E 148, DATE SHIPP	ED 14C ADDRESS AND SI OF PLACING WITH	GNATURE OF PERSON IN CHARGE 1 THE CARRIER
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY			LINE, OR OTHER DESCRIPTION O CA <u>DISTRICT</u> OF DISPOSITIO		15C. SIGNATURE OF P CHARGE OF DISP	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



E-12291 E-1229

CITY O	F SA	N DI	EG0	
AUDITO	RE	COMP	TROLLE	R
REPORT	NO.	C65	-102	

PROPERTY DEPT-MT HOPE CEMETERY

DEPARTMENT 072

### PAID INVOICE REPORT BY DEPARTMENT AS OF 07/12/95

DATE: 07/12/95 TIME: 000359 PAGE: 9

INV	INV ACCI	CUSTOME	R NAME DEPT	ORG	ACCT	J/0 1	AYM DATE OPER	BY BN/E	PAYM REF ND PACILI	AMOUNT PAID AMOUNT APPLIED	AMBUNT BILLED	UNPAID BALANCE
	06/08/95 08542 - 1229	LAMANDA 100 100 100 100 100 60101 6700	HENDERS 072 072 072 072 072 072	ON	77181 77182 77183 77184 77185 78390 77189	000072 000072 000072 000072 000072	7/07/95	CK I	826685331	1,325.50 375.00 250.00 45.00 274.00 185.00 17.50 179.00	1,325.50	PAID IN FULL
	OF INVOICES PAROUNT PAID		325.50									

PRE-NEED INTERMENT ORDER
City of Sen D

Date 6/6/95

in a —	_ Funeral, date, time
Veutruner Church, Chapel, Graveside	Mortuary
All Funeral cars must arrive before 3:30 p.	m. of regular work day or an extra charge of \$
will be applied and billed to undersigned.	
War time veteran	
101 77 Grove // Brow	Section 2 Division/Block //
	my -
	375.0
Additional spaces and care fund	A STATE OF THE PARTY OF THE PAR
Opening/Closing & Setup	7AID
Burial Container	
Handling Fees	JUN 6 1995
Flower vases - Marker setting fee	
Recording and filing fee	HOPE CEMETERY of SAN DIEGO, CALLE
	UI DOCUMENT TO THE PARTY OF THE
	Total Due
Pa	id receipt number 44.3/4 895. (C
	Balance due
hereby certify I am the V	of the above named deceden
and this is your authority to make disposit	of the above named decedent ion of remains as above indicated. I certify and represent tion and I agree to hold Mt. Hope Cemetery harmless from
any liability on account of said authorization	n and interment.
	Mandell & Halker
hereby authorize the interment in lot I hold under deed.	
	X333 S. EUCLID AVE
Signature of recorded holder of deed	Dar Diego PA 92118 Dip Cos
1	\$619) 264-9067 apocos
	Temphone
- 12292	Invoice #
Work Order # E	Acct. #
Work Order # =	ACCL #



### CITY OF SAN DIEGO, CALIFORNIA MOUNT HOPE CEMETERY



### OWNERSHIP AND INTERMENT PRIVILEGES

TO Mardelle Walk	cer	for the sum of \$_895.00	(DOLLARS)	
LEGAL DESCRIPTION	Lot 77; Grave 11; Section	2; Division 11		
AS DESCRIBED ON PU	RCHASE ORDER NUMBER E-122	92		

According to a map of said Cemetery filed in the office of the County Recorder of San Diego County. To be held for burial privileges only with endowed care. Subject to all rules and regulations now in force or may hereafter be adopted, including the right to ingress and egress with essentials for care and operation of the Cemetery. The rights hereby conveyed for interment privileges shall not be relinquished without the consent of the Cemetery Authority in each and every case and must be recorded in the office of Mount Hope Cemetery.

It is expressly understood however, that said Cemetery Division does not undertake or agree to make any repairs to any monument, head stone, vaults or other improvements of like nature that is already, or may hereafter be erected or placed on said lot or plot. Cost of same shall be assumed by legal owner or representatives of plot. In no case will the Cemetery Division be responsible for damage, malicious mischief, vandalism and natural causes of deterioration, but reserves the right to remove any object that detracts from the embellishment of the Cemetery. The following type of memorial will be permitted:

Regulation Marker Size is: 12 X 24 Flat Marker Only

Cemetery Manager

Real Estate Assets Director

This Information is available in alternative formats upon request.

PY-584 (Rev. 4-95)



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

rom madelle &	Walker Address	333 S	Encled Av	4. 3.6. 92/14 Oollars (\$ 875.00	=
Payment of _	Pls-Del	1 Fot	4	The state of the s	H
ot G	rave//	Bow	Section	Division //	
cct. No	"PAID" IN THIS SP	JRPOSESTATED UNLESSST ACE	20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Heriding Fee Recording & MRc. Fees	100 77184 100 77181 100 77182 100 77185 100 77183	
re-Need Lot At Need On A re-need Trust Cash Che	The state of the s	n clark	Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 60101 78390 \$	- W

### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date June 7, 1995

You are hereby authorized and instructed of Oames Co	d, subject to your rules and regulations, to inter the remains
ina liner	Funeral, date, time 6/10/95 SAT @IIAN
Shurch, Chapel, Graveside Chape 12	
All Funeral cars must arrive before 3:30 p	o.m. of regular work day or an extra charge of \$ 150 000
will be applied and billed to undersigned.	×
War time veteran MO	
	Section 2 Division/Block 12
Grave space & Care Fund	895.00
Additional spaces and care fund	<u> </u>
Opening/Closing & Setup	375.00
Burial Container	190.00
Handling Fees	145.00
Flower vases - Marker setting fee	at Overtime fee 60000
Recording and filing fee,	45.00
Sales taxes the organ	13.30
mark burg me blot per lab day day of me e Pe	Total Due
alianney (nice) A	aid receipt number 40332 566.00
lete Codulet	Q4 _T. Balance due /697.30
I hereby certify I am the	of the above named decedent
that I have the right to make this authoriza	ition of remains as above indicated. I certify and represent ation and I agree to hold Mt. Hope Cemetery harmless from
any liability on account of said authorization	on and interment.
16 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 -	k aine Inderson
I hereby authorize the interment in lot I hold under deed.	VIOLU OHOLLE
	72/30
Signature objector de Sholder of deed	Zip Cook
25 Paget	Tilephone 79-20/2
10000	254964
Work Order # E 12293	Invoice # 3 3 4 4 6 4
PY-593 (Rev. 8-92)	Acct. # 082488

W.O. # E-12293

### NOTE

\$ 1697.30	San Diego, California	June	7	19 95
Thirty days after date for value received, the un	dersigned maker promises to pay	San Diego City	Treasurer,	
3751 Market Street, San Diego, CA 92101, the	sum of sixter Hundred Men	ety Seven ?	Ju-	DOLLARS
with interest from	10, 1995	on	the unpai	d principal
at the rate of 12 percent per annum, payable of	on demand.			
Should this note not be paid when due, it stacerue at the rate indicated above. Principal and will be liable and consents to renewals, replace maturity, and waives presentment, demand an person who signs this note agrees that recounce contained herein. If any action be instituted or may fix as attorney's fees.	nd interest are payable in lawful moderness and extensions of time found protest and the right to assert rse may be held against his/her	oney of the Unit or payment here any statute of I separate proper	ed States. eof before, imitations, ty for any	The maker at or after A married obligation
Part II, Chapter I, Article 2, Paragra authorizes the removal of any remains t				
ADDRESS X 1844 Billa Vien	SON SIGNATURE	min a	Jesa	ر •
ADDRESS X 1844 Olta Vien	Mr. SD 92139			
	1080/ ssn	x 524-	14-4	1801



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

			Date:	me !	100.1	9 75
From Pagodale	Address	5050 FIA	eral Bl	d.	3.1 921	102
- Five April	dred That	your 19	100-0	ollars (\$	566.6	0,
In Payment of	nte mice	it of gan	1×4 600	R.	-	
ala III	1 1 1 1 1 1 1 1					-
Lot Grave	4	Row	Section.	-3-1	Division Block	2_
Invoice No	NOT VALID FOR PURPO	DSESTATED UNLESS STAMPS		67007 77184 —		_
Acct. No			60% Sales of Lots Opening/	77184 — 100	200	00
w.o E-12293			Closing Buriat	77181		
BALANCE DUE 1694. 30			Containers Handling Fee	77182 — 100 77185 —		
			Recording & Misc. Fees	77183 —		
Pre-Need Lot  At Need  On Acct  Pre-need Trust  Cash  Check			Pre-Need Trust Sales Tax	63033 9022 — 60101		
Pre-need Trust   Cash   Check   Check	ISSUED BY 377	Clark	TOTAL PAID	78390 —	CLE	00
AC-212 (Rev. 5-94)	33000 07		The state of the s	2.0	164	(do

E-12293

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECE	DENT-FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FAMILY)		2. DATE OF BIRTH	3. DATE OF DEATH	4. SEX
Jame	8	-	Gook		MONTH, DAY, YEAR 08/21/1921	MONTH, DAY, YEAR 06/06/1995	H
5A. CITY OF DEATH	tRonal City		58. COUNTY OF DEA	W SECTION OF THE PROPERTY OF THE PARTY OF TH	NAME, RELATIONSHIP, FULL IN OF INFORMANT Carrie Anderson		P CODE
TA. TYPED HAME AND	ADDRESS OF CALIFORN	WA-FUNERAL DIRECTOR I	PERSON ACTING AS SUCH 78 C	ALF, LICENSE WUMBER	1844 Alta View San Diego, CA 9	Dr. 2139	E SIGNED
ACKNOWLEDGMENT OF	AFPLICANT   L benday   Section	acknowledge as applicant that the 0376 of the Health and Safety Code	e proposed disposition stated horses is one of t s, and was authorized personnt to Section 7100 of	the dispositions authorized by the Health and Salety Code.	Letter while	06/0	6/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALL AND IS THE AUTHORI IN THIS PERMIT	BUED IN ACCORDANCE W IFORNIA HEALTH AND BAF BTY FOR THE DISPOSITION NO WEST OF DISPOSAL OUTSIDE O	SPECIFIED \$7.00	06/09/19	SSUED 9C. SIGNATURE OF LO	OCAL REGISTRAR ISSUM 9507820	
ANY-CHANGE IN DISPOSITION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	Vital Rec	REGISTRAR OF DISTRICT RED IN CALIFORNIA Ords; P.O. Bo In Diego, CA	ox 85222		P DISTRICT OF DISPOSITION— IN ANOTHER DISTRICT IN CALIFO	DRIVIA	
THORIZED DIS	SPOSITION(S) CHECK A	APPLICABLE ITEMS	40-1-1		FOR COR	RONER'S USE ONLY	-
B. CREMATION	N OF CREMATED REM	MAINS OTHER	E. TEMPORARY ENV F. DISINTERMENT G. SHIP IN TO CALIF		I DISPOSITION (Name and A	PENDING—REMAINS LO address)	CATED AT
BURIAL		Cemetery; 37	751 Market St.	118 DATE BURIED	11G. SIGNATURE OF PER	SON IN CHARGE OF BU	RIAL
CREMATION	12A. NAME AND A	DDRESS OF CALIFORNI	A CREMATORY	128. DATE CREMATE	D 12C SIGNATURE OF PER	SON IN CHARGE OF CRE	EMATION
SCIENTIFIC USE	1SA. NAME AND A	DDRESS OF CALIFORNI	A FACILITY RECEIVING REMAINS	13B, DATE RECEIVE	ED 13C. SIGNATURE OF PER	ISON IN CHARGE OF FA	ACILITY
TRANSIT TRANSIT	14A NAME AND A REMAINS OR N/A	DDRESS IN RECEIVING CREMATED REMAINS A	STATE OR COUNTRY WHERE HE TO BE SHIPPED	14B. DATE SHIPPED	OF PLACING WITH 1		CHARGE
SCATTERING AT SE OR DISPOSITION OTHE THAN IN A CEMETER	FICIENT TO ID	AREST POINT ON SHOREL ENTIFY FINAL PLACE AND	INE, OR OTHER DESCRIPTION SUF-	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PER CHARGE OF DISPOS	SITION OF CREM, MAINS DI	ATED RE-

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

GENERAL INVOICE

Make Remittance Payable to

F-12293

Make Remittance Payable to /NV: 254964
CITY TREASURER ACCOUNT: 085488

San Diego, California 92112

Please Return YELLOW Copy with Your Payment

CARRIE ANDERSON OK to accept ACCT NO 1844 ALTA VIEW DR money today at 085488

SAN DIEGO CA 92139 mt Hope, per John,
SAN DIEGO CA 92139 Jane Rauch 7-18-95

PAYMENT DATE 7-18-95
BY: CA CK IF
PAYMENT REF NO Hand delivered

AMT PAID: 1697.30

O6/14/95

07/14/95

--- TREASURERS USE ONLY-

PERIOD COVERED

FOR INFORMATION CONCERNING YOUR BILLING CONTACT:

JANE RAUCH

REF NO: E-12293

DEPT PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

JAMES COOK SERVICES

LOT 137 GRAVE 4 SEC 2 DIV.12 895.00

OPENING/CLOSING 375.00

LINER

HANDLING FEE 145.00

TAX ON LINER

RECORDING 6 SAT FEE 645.00

PAYMENT RECEIVED ON R-46332 566.00-

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10. WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE. AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT LISTED ABOVE White-Customer Copy · Yellow-Remittance Copy

E-12293 FAXED of the copy of general unverse for mas andrewn some as her her request to close this account

MT. HOPE CEMETERY INTERMENT ORDER City of San Diego JACKSON-CANNON, GERALD You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains Funeral, date, time M6N Church, Chapel, Graveside Church All Funeral cars must arrive before 3:30 p.m. of regular work day, or anyextra charge of \$ 150.06 will be applied and billed to undersigned. War time veteran NO Lot 132 Division/Block / 2 Grave Grave space & Care Fund ..... Additional spaces and care fund Opening/Closing & Setup. Burial Container. Handling Fees .. Flower vases - Marker setting fee Recording and filing fee . Sales taxes. Total Due Paid receipt number R-463 Balance due 16/1 I hereby certify I am the of the above named decedent and this is your authority to make disposition of remains as above indicated. I certify and represent that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless from any liability on account of said authorization and interment. I hereby authorize the interment in lot I hold under deed. Signature of recorded holder of deed Invoice # 25496 12294 Work Order # PY-593 (Rev. 8-92)

### MT. HOPE CEMETERY

w.o. # E-12294

### NOTE

\$ 1173.0.0	San Diego, California	9 JUNE	1995
Thirty days after date for value received, to 3751 Market Street, San Diego, CA 92101 with interest from			MOLLARS
at the rate of 12 percent per annum, paya	able on demand.		
Should this note not be paid when du accrue at the rate indicated above. Princip will be liable and consents to renewals, re maturity, and waives presentment, dema person who signs this note agrees that re contained herein. If any action be institut may fix as attorney's fees.	replacements and extensions of time and and protest and the right to asser ecourse may be held against his/her	noney of the United States, for payment hereof before t any statute of limitations separate property for any	The maker e, at or after s. A married y obligation
	ragraph 7528 of the State of Californians from a plot for which the purchas		
CALIFORNIA DRIVER LICENSE NUMBER	Sta Ave SO CA, God U8019085 SSN 0L6-28-98	114 14 264-88-301;	7

Invoice No. \_\_ Acct. No. \_\_ W.O. \_\_

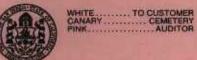
BALANCE DUE \_\_\_

Pre-Need Lot 
Pre-need Trust

AC-212 (Rev. 5-94)

CITY OF SAN DIEGO, CALIFORNIA

46331



ca Canyo	minety 1 no/10	11 - 7	011ars (\$ 390.30)
Grave	Row	Section 3	Division Block
1173.20 1173.20 1173.20 1173.20 1173.20 1173.20	NOT VALID FOR PURPOSE STATED UNLESS STATEMENT OF THE SPACE.	OPED CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Minc. Fees Pre-Need Trust Sales Tax	67007 77184 100 77184 100 77181 100 77182 100 77182 100 77183 63033 8022 60101 78390

The second secon	CONTRACTOR OF THE PARTY OF THE
Port Ser J. Underwood  Doris L. Underwood  724 Syrumid St. 264 4158  San Diego, Gu 92111	E-122.94 7005 6-5 095 18-40/1200
MT. HOPE CEMETERY  3751 MARKET STREET  SAN DIEGO, CA. 92102	\$70.00 Dollars
White San Diego, CA 92105 Union Bank Memo	cris L'Underwork.
#122000496#0150121606# *	7005
	7
Lillie L. Trowsdell  SSN 376-40-5068 USN, Rev. 3853 F Street Lh. 263-7025 San Diego, Ga 92113	June 6, 10 95 90-8157/3222
Pay to the order of 3751 MARKET STREET SAN DIESE CA 92182	\$ 5.00 Dollars
SATURATION San Diego Teachers' Credit Union	1

nderwood 724 Euramid St. 26+4158 San Diego, Ga 92114 MT. HOPE CEMETERY \$20.00 SAN DIEGO, CA. 92102 Dollars euccid & Federal 666 Duclid Avenue an Diego, CA 92105 Union Bank Memor :122000496:0150121606# 7005 Lillie L. Trowsdell 5286 SSN 376-40-5068 USN. Ret. 3853 J Street Br. 268-7020 San Diego, Ga 92118 MT. HOPE CEMETERY Pay to the 3751 MARKET STREE order of #3 2 2 28 \$5 78# 1598 30080 1#

### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	ENT-FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FAMILY)			TE OF DEATH 4. SEX
Gerald		Lee	Jackson-(	Cannon	0472871979 087	03/1995 м
National	City		SB. COUNTY OF DEA	in Diego V	NAME, RELATIONSHIP, FULL MAILING A OF INFORMANT anessa Jackson—Can	
' Californi	a Cremation	A FUNERAL DIRECTOR San Diego,	hapel	-IF APPLICABLE S	805 Alta Vista Ave an Diego, CA 92114 SIGNATURE OF APPLICANT—Ferror Labor	
- ACKAROWLEDGMENT OF A	PPLICANT I hereby a Section 18	charmledge as applicant that the 376 of the Health and Safety Cod	e proposed disposition stated became one of e, and was authorized pursuant to Section 7100 of	he dispositions authorized by	Ermollell	06/07/1995
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE W OPINIA HEALTH AND SAI TY FOR THE DISPOSITION DESKY OF DISPOSAL OUTSEE	SPECIFIED \$7.00	98 DATE PERMIT ISS 06/07/1995 E. Mitchel	9507675 1   ►	GISTRAR ISSUING PERMIT
The state of the s	Vital Rec	GISTRAR OF DISTRIC D IN CAUFORNA Ords-P.O. B	ox 85222		DISTRICT OF DISPOSITION— N ANOTHER DISTRICT IN CALIFORNIA	
THORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS			FOR CORONER	S USE ONLY
B. CREMATION C. DISPOSITION THAN IN A CE D. SCIENTIFIC US	OF CREMATED REMA	AINS OTHER	E. TEMPORARY EN		L DISPOSITION PENDIN (Name and Address)	G-REMAINS LOCATED AT
BURIAL	CONTRACTOR OF THE PROPERTY OF	DERESS OF CALIFORN Cemetery O, CA	IA CEMETERY	11B, DATE BURIED	11C. SIGNATURE OF PERSON IN	CHARGE OF BURIAL
CREMATION	- MET	ORESS OF CALIFORN	THE PARTY OF THE PROPERTY OF THE PARTY OF TH	12B. DATE CREMATED	12C/ SIGNATURE OF PERSON IN (	CHARGE OF CREMATION
SCIENTIFIC USE	13A. NAME AND AD	DORESS OF CALIFORN	IA FACILITY RECEIVING REMAINS	138. DATE RECEIVED	13C. SIGNATURE OF PERSON IN	CHARGE OF FACILITY
TRANSIT		DRESS IN RECEIVING CREMATED REMAINS	STATE OR COUNTRY WHERE ARE TO BE SHIPPED	148. DATE SHIPPED	14C. ADDRESS AND SIGNATURE OF PLACING WITH THE CAR	
5						

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN MARGE OF DISPOSING OF THE CREMATED REMAINS.

# MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 6/12/95

You are hereby authorized and instructed, so	bject to your rules and regulati	ions, to inter the remains
of Juanita At	kins 2080	64
ina lines	Funeral, date, time FRI 6	116/95@11A
Church Shapel Graveside Church & g	avisede: Rago	dale Mortuary
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra	of one of \$
will be applied and billed to undersigned. 🔏	Glacia M.	then
War time veteran		
Lot 95 Grave 10 Row	Section 2 D	ivision/Bleck //
Grave space & Care Fund Pur - 2	bud E-12233	E-9313 410. a
Additional spaces and care fund		
Opening/Closing & Setup	2AII)	37500
Burial Container		19000
Handling Fees	UN 1 2 1995	145.00
Flower vases - Marker setting feeMT;-	IOPE CEMETERY	
	SAN DIEGO, CALIE	45.00
Sales taxes		13.30
	Total Due	1/78.31
Paid	receipt number Lec # 46	133 //18.30
0	O D Bala	ance due
hereby certify I am the	liter of the	above named deceden
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization	and I agree to hold Mt. Hope	Cemetery harmless from
any hability on account of said authorization of	910	ve //
hereby authorize the interment in lot I	Aloun!	y when
nold under deed.	1350 Kas	Horer le
Signature of recorded holder at deed	5.0.	9211
	327-	2900
J	Telephone	
_ 12295	Invoice #	
Work Order # E	Acct. #	
PY-NIP (MAN B.CO)		

NAME G	Gloria Atkins		E-1229	15 ACCT. NO.	E-9313
ADDRESS	350 Las Flores, S.D.	92114	RATING	LIMIT	
DATE		EMS	OEBIT	V CREDIT	BALANCE
3-18-91	Credit Lot Opened:	THE STATE OF THE S			
•	LOT 95; grave 10; sec	tion 2; div 11	495.00		495. 00
3-18-91 531-91	Receipt #49465 RECEIPT # 40769	roupin#1		100.00	395.00 37700
1:					
•					
		D. Dorot.			
AIGNER FORM NO	1.25-204 ATKINS, Gloria	\$ 379 00	T V S HO		PRINTED IN USA
		#379 00 3/14/95			

ACCT. NO. NAME Atkins, Juanita LIMIT 350 Las Flores Terrace S.D. 92114RATING ADDRESS DEBIT CREDIT BALANCE DATE ITEMS 895.00 5-16- 95 Opened Pre-Need Lot 116.00 779.00 Credit from Pre-Need E-9313 95 470.00 309.00 5-16- 95 Downpayment Rec#46228 6/6/95 Compores 1, 2, 33 Receipt # 46306 410.00 60.00

Atkins, Juanita

AVERY FORM NO. 25-204

AVERY Pre-Need Lot

PRINTED IN USA

ACCO	GLO 350	La. Di	Cric Ath	edir eine loru Co	25	E	12 114	E-G	1313 15	N 3	1
JAN	FEB	MAR	APR 10	MAY	JUN	JUL	AUG	SEP	OCT	Nov	DEC
					AM	OUNT	\$	16	.00		
ID Ch	eck (/ dress a	) if you and plea	have a	new ach	TOT	AL	\$	T			



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY 527-3400

rom Storia Alkins	Address: 350 At.	Acus Servac	0 S. b. C. P. 9211
Payment of	terenty Eight &	vanta Atki	(\$ <u>1178.30</u> )
ot95 Grave	/D Row_	Section 2	Division //
No. E - 12295	NOT VALID FOR PURPOSE STATED UNLESS "PAID" IN THIS SPACE.	CREDIT   6700   20% Sales Care   7718   80% Sales   10% of Lote   7718   10% of Lote   7718	410 00
SALANCE DUE	1,3,4,2	Burial Containers 7718: Handling Fee 7718: Hecording & 10 Misc. Fees 7718:	143 00
Pre-Need Lot At Need On Acct One-Need Trust Cash Check C	ISSUED BY M. Clark	Pre-Need 8303: Trust 902: Sales Tax 6010 7839 TOTAL PAID	13 30



WHITE TO DUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

### MOUNT HOPE CEMETERY 264-3151

E-12295 N

40764

Payment of	Address: 350 June 11	Date: Dollars (\$	War 10	94114
ot 46 Grave	10 Row Se	oction 2	Division /	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	MOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 77184 - 80% Sales 100 of Lots 77184 - 100 Closing 77181 - 100 Containers 77182 - 100 Handling Fee 77185 - Recording 8 House 100 Minc. Fees 77183 - 100 Fee	10	



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

E-12275 Nº

40465

Date: Dollars (\$ Payment of Division Grave Section LO Block CREDIT 67007 27184 NOT VALID FOR PURPOSE STATED UNLESS STAMPED Invoice No. PAID IN THIS SPACE 20% Sales Care ACM Sales 100 Acct. No. of Lots 77184 Opening/ 100 Closing 77381 Burial 77182 Containers BALANCE DUE Handling Fee. 77185 Recording & 100 Misc Fees 771B3 Pre-Need 63033 Pre-Need Lot D At Need D On Acct Trunt 9022 Pre-need Trust Cash Check Sales Tax 60101 78300 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)

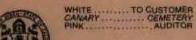


WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

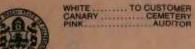
	+ 50	Date;	0=0	19/1
In Payment of	Address 104		Dollars (\$	20-00
Lot 95 Grave	/2Row	Section	3	Division //
Acct. No	Contract of the last of the la	C/TY AUDIT Containers  C/TY AUDIT Containers   100 77184 — 100 77181 — 100 77182 —	20 00	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check CAC-212 (Rev. 10-87)	ISSUED BY MICHIEL	98 Hendling Fee Hecording & Misc. Fees Pre-Need Trust Sales Tax	100 77185 — 100 77183 — 63033 9022 — 60101 78390 —	20 00



CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

E-12295	No No	34495
TERY		

In Payment of	From L Paria atken	264-3151 Address:	Date: 04-	2/.19	1
Description	mentyant as	1000	Dollars	15_76_	
NOT VALID FOR PURPOSE STATED UNLESS STAMPED   CREDIT 20% Sales Care 77184   20% Sales Car	Lot Grave	RowSe	ection		0.0
1800	Acct. No		80% Sales 100 of Lots 77184 Opening/ 100 Clashing 77181 Burial 100 Containers 77182 Hundling Fee 77183 Recording 8 100 Misc. Fees 77183 Pre-Need 6333 Trust 9622		



### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

LZ75 Nº 34479

From: Att a lttle	Address	Date:	70	3 Sto	19
In Payment of	henred lat do	Do	ollars (\$	100	-
Maria Control	A ROW_S	ection	1 2 1	Division Block	11
Acct. No	NOT VALID FOR PLIRPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 20% Sales Care 80% Sales of Lota Copening/ Closing Surial Containers  Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77183 — 100 77183 — 60033 — 60022 — 60101 —	110	
AC-212 (Rev. 11-86)	ISSUED BY	TOTAL PAID	*		150

WHITE TO CUSTOMER
CANARY CEMETERY
PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From Moria atken	Address 350 44 460	Date:	600	0 92	19/4/
In the Payment of	renced lat are	Cuan	ollars (\$	11 =	260
Lot 95 Grave	RowSe	ection		Division Block	11
Acct. No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.  CITY AUDITOR  LEG 15 1295	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Clossing Burial Containers	87007 77184 — 100 77184 — 100 77181 — 100 77182 —	10	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 11-86)	ISSUED BY LO MAN	Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	77183 — 100 77183 — 63033 — 9022 — 60101 78390 —	10	00



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA

# MOUNT HOPE CEMETERY

F-12292

46228

		Date:	7-14	5	19/5
From: Slane /   Rine	Address: 350(as 7/a	un Tart,	314	43114	-
three hundred zine	4 20/100	0	ollars (\$ _	309.0	00)
In Payment of Me-	need lat for wan	ta Otk	ins		
				7 100	1
Lot 95 Grave	/ 6 Row S	ection	10	Division	
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 20% Sales Care	67007 77184 —		
Acct. No.		80% Sales of Lots	100 77184 —	309	00
WO_ E-12233	The state of the s	Opening/ Closing	77181 -		_
	The Parket Land of the Parket La	Burial Containers	77162 — 100		-
BALANCE DUE		Handling Fee Recording &	77185		
Pre-Need Lot ☐ At Need ☐ On Acct ☐	A STATE OF THE STA	Misc. Fees Pre-Need	77183 — 63033 9022 —		
Pre-need Trust D Cash D Check D	00	Trust Sales Tax	60101	-	
AC-212 (Rev. 5-94)	ISSUED BY // Courts	TOTAL PAID	78390	309	00

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDE	ENT-FIRST (GEVEN)	18. MIDDLE	1 1C. LAST (FAMILY)			2. DATE OF BIRTH	S. DATE OF DEA	ATH 4. SEX
Juanit	ta	•	Atkins			0671671961	06/09/19	95 F
San I	Diego		SAN Diego	TH-OUTSIDE GALIF.,	OF INF	RELATIONSHIP, FULL M. ORMANT 12 Atkins As		
		.; 5050 Federal Bl		ALIF LICENSE NUMBER -IF APPLICABLE	350 1	as Flores T	errace	9
	Sa	n Diego, CA	F	-1329		TURE OF APPLICANT—IN		DATE SIGNED
ACKNOWLEDGMENT OF A		cknowledge as applicant that the proposed dispo- 376 of the Higalth and Safeta Code, and was author			Male	Hy whele	06	/13/1995
PERMIT AUTHORIZATION OF LOCAL REGISTRAR	SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.	JED IN ACCORDANCE WITH PROVI- ORNIA HEALTH AND BAFETY CODE TY FOR THE DISPOSITION SPECIFIED IN MISSE OF DISPOSAL OUTSIDE OF CALFORNIA,	\$7.00	98. DATE PERMIT	Company of the Control of the Contro	C. SIGNATURE OF LOC	950804	Contract to the contract of
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMENTO SHOW FINAL	IF DEATH OCCURRE	EGISTRAR OF DISTRICT OF DEATH D IN CAUFORNIA Tds: P.O. Box 8522	1 #	DORESS OF REGISTRAR DISPOSITION IS TO OCCI			INIA 3	
POSITION		n Diego, CA 92186-	CENTER OF THE PARTY OF THE PART					
IU. HORIZED DISP	OSITION(S) CHECK A	PPLICABLE ITEMS			4	FOR COR	ONER'S USE C	ONLY
D. SCIENTIFIC U	SE 11A. NAME AND AL	DORESS OF CALIFORNIA CEMETER	Y	FORNIA SIDE OF CALIFORNIA	D   11C.	SIGNATURE OF PERS	ON IN CHARGE C	OF BURIAL
BURIAL	nt. nope	Cemetery; 3751 Max San Diego, CA	Kat St.	16/16/95		Mait	*	
CREMATION	N/A W	etal non	Seal	128. DATE CREMAT	12G	SIGNATURE OF PERS	ON IN CHARGE OF	F CREMATION
SCIENTIFIC	N/A	ddress of California Facility	RECEIVING ŘEMAINS	13B, DATE RECEI	VED 13C.	SIGNATURE OF PERS	ON IN CHARGE C	F FACILITY
TRANSIT		DRESS IN RECEIVING STATE OR C CREMATED REMAINS ARE TO BE		148. DATE SHIPPI	ED 14C.	ADDRESS AND SIGNA OF PLACING WITH TH		N IN CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	16A. ADDRESS, NEA FICIENT TO IDE N/A	REST POINT ON SHORELINE, OR OTH NTIFY FINAL PLACE AND CA <u>DISTRIC</u>	ER DESCRIPTION SUF- T OF DISPOSITION	16B. DATE OF DISPOSITION		SIGNATURE OF PERS CHARGE OF DISPOSI	TION   OF	ENSE NUMBER CREMATED RE- INS DISPOSER F APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



E-12295

# MOUNT HOPE CEMETERY

The undersigned hereby requests and	authorizes the interment of the remains of
JUANITH AHLINS IN L	ot 95 Gr // Row Sec. 2
Division // in accordance with an	nd subject to the rules and regulations
governing said interment in Mount Ho	pe Cemetery, and certifies and represents
that he or she has the legal right to	o make such authorization and agrees to
hold Mount Hope Cemetery harmless fro	om any and all liability on account of said
authorization and interment.	
1	
Alouin M. thether	- Laughten
Signature of relative or legal representative	Address & relationship to deceased or authority to sign authorization
& Carllants	
Witness	
Witness	

. E-12295

# CITY OF SAN DIEGO

Mt. Hope Cemetery

# Notice of Cancellation and Forfeiture

To Moria Atkins
Address 350 Las Flores 5.0. CA 92114
You and each of you are hereby notified that because of default in payment:
on that Agreement for the purchase of a before need Lot 95, Grave 10
Row, Section
entered into on <u>Franch 18</u> , 19 91, by and between Mt. Hope
Cemetery and Slovia Atkins that at the end of 30 days
from date below, all rights you may have thereunder will be and are by thi
notice cancelled and forfeited.
Dated this 13 day of march, 1995.

CITY OF SAN DIEGO Mt. Hope Cemetery

By: Michele L. Clark Clerical Astr. II

F-12295



THE CITY OF

# SAN DIEGO

MT. HOPE CEMETERY • 3751 MARKET STREET • SAN DIEGO, CALIFORNIA 92101
Property Department
Business hours 8 a.m. to 4 p.m.
264-3151
Monday thru Friday • Gates open daily

February 22, 1989

Juanita Atkins C/O Gloria M. Atkins 350 Las Flores Terrace San Diego, Ca 92114

It has been over a year since a payment was received at Mt. Hope towards the purchase of your grave plot (s). If a payment is not received at Mt. Hope by March 15, 1989 it will be assumed you are no longer interested in the plot. The grave will be put on the market for sale. All funds paid thus far will be forfeited.

If you have any questions please call 264-3151.

Sondia Word

Sandra Ward

Administrative Aide II

Mt. Hope Cemetery

O INTERNENT You are herebu

# MT. HOPE CEMETERY

# INTERMENT ORDER

City of San Diego

Date 6-12-95

olMiller,	Eula	
ina Liner	Funeral, date, time Hunes 6-15	11:004
	side: Mumphness	
All Funeral cars must arrive before 3:30 p.m.		150.00
will be applied and billed to undersigned.	Mague John Hoffen	
War time veteran 270		
Lot 52 Grave 5 Row_	Section Division/Block	11
Grave space & Care Fund	D 2402	NO.
Additional spaces and care fund	$\leq 1$	
Opening/Closing & Setup	0 0 2402	R
Burial Container	D 2402	X
Handling Fees	995 A2402 -	b
Flower vases – Marker setting fee  Recording and filing fee  Sales taxes	EMETERIJE!	
Recording and filing fee	DEGUL-	45.00
Sales taxes.	02402	8
	Total Due	
Paid	receipt number 46.340	45.00
	Balance due _	0_
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization	n and I agree to hold Mt. Hope Cemetery har	d represent
I hereby authorize the interment in lot I hold under deed.	Signature 598 9 W. Roxbury	PI.
Signature of recorded holder of theed	ASSTRANCE SOS 973 5785	Zp Code
- 12296	Invoice #	
Work Order # E	Acct. #	



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA

# OUNT HOPE CEMETER

E- 60 10 4634

527-3400			
5989	Date:	June 13	18 95
COLOR II I	2	21 0	FULL LAS PA

From: Clidres Shet	Address:	\$ 00/100 C	Koxury	Pollars (\$	45 D	an co c
In Payment of	l. to Insen	+ of End	a miller			
Lot Grave	-15	Row	Section/		Division Block	1/1
Acct. No	PAID IN THIS SPAC	OSESTATED UNLESS ST	AMPED CREDIT 20% Sales Care 80% Sales of Lots Opening: Opening: Chaing Burial Containers  Handling Fee Recording & Misc. Fees Pre-Need Trust	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 — 63033 — 60022 —	45.	00
Pre-fleed Trust Cash Check	B	Clark	Sales Tax TOTAL PAID	60101 78390 —	45	00

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

TA. NAME OF DECEDE EULA	ENT-FIRST (GIVEN)	18. MIDDLE BERNADENE	IC. LAST (FAMILY)	R	M	DATE OF BIRTH DATE DAY YEAR 0/18/1914	3. DATE OF	
SA. CITY OF DEATH	Escondido		5B. COUNTY OF DEAT ENTER STATE S.		OF INFOR	LATIONSHIP, FULL M MANT Dietzler –		SHUMMING THE STATE OF STREET
Humphrey C	hula Vista		1 -	LIF. LICENSE NUMBER		. Roxbury	Place	
When a cce	The state of the s	/ista CA 91911		200	BA. SIGNATU	FIE OF APPLICANT	upon taking permit	88. DATE SIGNED
ACRMONLEDGMENT OF A	FFLIGHT Section 16	chrowings as applicant that the proposed dispo- 1376 of the Health and Safety Code, and was author	red parament to Section 7100 of t	he Health and Safety Gode.	> Lud	UN ESKA	ng	06/14/199
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	AND IS THE AUTHORI IN THIS PERMIT.	JED IN ACCORDANCE WITH PROVI- ORNIA HEALTH AND SAFETY CODE FY FOR THE DISPOSITION SPECIFIED ID BIGHT OF DISPOSAL OUTSIDE OF CALFORNIA.	\$7.00	06/15/19		SIGNATURE OF LO	CALMEGISTR	AR ISSUING PERMIT
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW PERMIT TO SHOW FINAL POSITION.	90 ADDRESS OF R F DEATH OCCURR Vital Rec San Diego	ords P.O. Box 85	1 1	DRESS OF REDISTRAR DISPOSITION IS TO OCCU			RNEA	Te let
HORIZED DISP	OSITION(S) CHECK A			-		FOR COR	ONER'S US	E ONLY
B. CREMATION		AINS OTHER	E. TEMPORARY ENV.  F. DISINTERMENT'  G. SHIP IN TO CALIF  H. TRANSIT TO OUT:	ORNIA	I	I. DISPOSITION (Name and A		MAINS LOCATED AT
BURIAL	Mt. Hope	Cemetery tet St. San Diego	CA 92102	118. DATE BURIE	D   IIC S	IGNATURE OF PER	SON IN CHAR	GE OF BURIAL
CREMATION	12A. NAME AND A	DDRESS OF CALIFORNIA CREMATO	DRY	128. DATE CREMAT	TED   12C. 8	IGNATURE OF PERS	ON IN CHARC	SE OF CREMATION
SCIENTIFIC USE	13A. NAME AND A	DDRESS OF CALIFORNIA FACILITY	RECEIVING REMAINS	13B. DATE RECEI	VED 13C. S	IGNATURE OF PER	SON IN CHAR	GE OF FACILITY
TRANSIT		DDRESS IN RECEIVING STATE OR ( CREMATED REMAINS ARE TO BE !		14B. DATE SHIPPI		DDRESS AND SIGNA F PLACING WITH TI		ERSON IN CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, OR OTH ENTIFY FINAL PLACE AND CA <u>DISTRIC</u>		15B DATE OF DISPOSITION		IGNATURE OF PERS HARGE OF DISPOS		D. LICENSE NUMBER OF CREMATED RE- MAINS DISPOSER —F APPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



-	* Per michael
-	graniside only.
	MT. HOPE CEMETERY
ne	INTERMENT ORDER
0	City of San Diego

	MT. HOPE CEMETERY	
10	MOS INTERMENT ORDER	
100	a but Dury City of San Diego	
U	Date 6-13	1-95
1	You are hereby authorized and instructed, subject to your rules and regulations, to in	ter the remains
	" BASQUEZ AMALIA	501 M105 A500 (0000)
	in a Funeral, date, time Thurs 6/15	3PM
	Church, Chapel, Graveside Charal & Organist CA Burial	Mortuary.
	All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge of	1\$150.00
	will be applied and billed to undersigned. + Applie OZIA	
	War time veteran NO.	
V	Lot 3787 Grave Row Section Division/Bit	7 9 grant 9
	Grave space & Care Fund	100,00
	Additional spaces and care fund	
	Opening/Closing & Setup	135.8
	Burial Container.	
	Handling Fees JUN 1 2 1995	
	Flower vases - Marker setting fee	
	Recording and filing feeMT. HOPE CEMETERYCTTY of SAN DIEGO, CALIF	45.8
	Sales taxes	270.00
	Total Due	270 0
	Paid receipt number 15 - 46 221  Manage due	0
	11 411-41	-
	I hereby certify I am the AMALIA of the above no and this is your authority to make disposition of remains as above indicated. I certify that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery any liability on account of said authorization and interment.	and represent
	I hereby authorize the interment in lot I AMALIA 62	10
	I hereby authorize the interment in lot I	

hold under deed. 12297 Involos # Acct. # PY-593 (Rev. 8-92)



WHITE TO GUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY 527-3400

From amalia 024N	A Address: 2966 Web	ter . 25	92113
Two hundred se	mes ly & 20/100	Dollars	
In Sulla Payment of Vote	rment of Bally ar	nalia. Bo	guy
Lot 3787 Grave	Row Se	ection	Division 9
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED *PAID* IN THIS SPACE.	CREDIT 5708 20% Sales Care 7718 80% Sales 7718 Opening 7718 Closing 7718 Burial 10 Containers 7718	125 00
Pre-Need Lot At Need O On Acct Pre-need Trust Cash Check  AC-212 (Rev. 5-94)	ISSUED BY Rauch	Handling Fee 7718 Recording & 10 Misc. Fees 7718 Pre-Need 6303 Trust 902 Sales Tax 6010 TOTAL PAID	45 00

E-12297

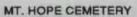
### APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY-MAKE NO ERASURES. WHITEOUTS OR OTHER ALTERATIONS

IA. NAME OF DECEDE	NT-FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FAMILY	)		E OF DEATH 4. SEX		
Amelia 5A. CITY OF DEATH		-	58 COUNTY OF DE	EATH—OUTSIDE CALIF.	6. NAME, RELATIONSHIP, FULL MAILING AN OF INFORMANT	NAME, RELATIONSHIP, FLALL MAILING ADDRESS AND ZIP CODE OF INFORMANT		
Californi	a Cremation	A-FUNERAL DIRECTOR OR I & Burial Cha		San Diego CALIF LICENSE NUMBER —IF APPLICABLE F-1357	Pedro Vazquez-Father 2962 West Ave. San Diego, CA 92103			
ADMINISTRATION OF AF	PLICANT   I hereby a Section 10:	convertige at applicant that the pro	point disposition stated herein is one of f was authorized gurnment to Section 7105	The dispositions authorized by all the Health and Safety Code.	· Mar-Mel	06/14/1995		
PERMIT  AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT.		PROVI- CODE ECIPIED \$7.00		95 9508022	ISTRAR ISSUING PERMIT		
ANY CHANGE IN DISPOSI- TION REQUIRES A NEW POSITION.	Vital Reco	GISTRAR OF DISTRICT OF IN CAUSONIA BOX CA 92186-522	85222		OF DISTRICT OF DISPOSITION— UR IN ANOTHER DISTRICT IN CALIFORNIA			
10 HORIZED DISPO	OSITION(S) CHECK AI	PLICABLE ITEMS			FOR CORONER'S	USE ONLY		
B. CREMATION		AINS OTHER	E TEMPORARY E		I. DISPOSITION PENDING (Name and Address)	- REMAINS LOCATED AT		
BURIAL		ODRESS OF CALIFORNIA C Cemetery	CEMETERY	6/5/95	D THE SIGNATURE OF PERSON IN C	CHARGE OF BURIAL		
CREMATION	12A. NAME AND AD	DRESS OF CALIFORNIA (	REMATORY	12B, DATE CREMA	TED 12C. SIGNATURE OF PERSON IN C	HARGE OF CREMATION		
SCIENTIFIC USE	13A. NAME AND AC	DDRESS OF CALIFORNIA I	ACILITY RECEIVING REMAINS	S 13B, DATE RECE	IVED 13C. SIGNATURE OF PERSON IN (	CHARGE OF FACILITY		
TRANSIT		ODRESS IN RECEIVING STA CREMATED REMAINS ARE	ATE OR COUNTRY WHERE TO BE SHIPPED	14B, DATE SHIPP	ED 14C. ADDRESS AND SIGNATURE COF PLACING WITH THE CARE			
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY	15A. ADDRESS, NEA FICIENT TO IDE	REST POINT ON SHORELINE NTIFY FINAL PLACE AND C	OR OTHER DESCRIPTION SUI A <u>DISTRICT</u> OF DISPOSITION	15B. DATE OF DISPOSITION	15C. SIGNATURE OF PERSON IN CHARGE OF DISPOSITION	150. LICENSE NUMBER OF CREMATED RE- MAINS DISPOSED OF APPLICABLE		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.





## INTERMENT ORDER

City of San Diego

Date 6-13-95

	D	eLossi	ANTO,	17/00	10 PA4/180
ina	LINEK	The second secon		Managering and Assessment Control	6/14/95
Church, C	hapel, Graveside _	Delivery	ouly.	Ragsa	ale Mortuan
All Funera	I cars must arrive be	efore 3:30 p.m. of	regular work day	y or an extra c	harge of \$
will be app	lied and billed to un	dersigned.			
Wair time v	veteran				
Lot 40	Grave 6	Row	Section	/ Divis	sion/Black / 2
Grave sna	ce & Care Fund				126
	spaces and care tu				100000
	Closing & Setup				TO A STATE OF THE
	tainer				
	Fees				
HIM WHAT IS NOT THE	ses – Marker setting				
	and filing fee				100
- Contract of the Contract of	s				
	<b>/S</b>	***************************************			28/
RIVED			274	otal Due	
101		Paid rec	eipt number		
	144			- 600	ce due
100	ertify I am the	aka disposition of	romaine ae alv	ove indicated.	bove named decede I certify and represe
I hereby or and this is	your authority to m	are disposition of	talliging go any	d Mt. Hope Ce	metery harmless fro
I hereby or and this is that I have	your authority to m	nis authorization ar	nd I agree to hol		
I hereby or and this is that I have	your authority to m	nis authorization ar	nd I agree to hol		
I hereby or and this is that I have any liability	your authority to me the right to make the your account of said uthorize the interme	nis authorization and authorization and	nd I agree to hol I interment.		
I hereby of and this is that I have any liability	your authority to me the right to make the your account of said uthorize the interme	nis authorization and authorization and	nd I agree to hol I interment.		
I hereby or and this is that I have any liabilit I hereby a hold under	your authority to me the right to make the your account of said uthorize the interme	nis authorization and authorization and	Signature		
I hereby or and this is that I have any liabilit I hereby a hold under	your authority to me the right to make the yon account of said uthorize the interme rideed.	nis authorization and authorization and	nd I agree to hol I interment.		29 C
I hereby or and this is that I have any liabilit I hereby a hold under	your authority to me the right to make the yon account of said uthorize the interme rideed.	nis authorization and authorization and	Signature		2p G
I hereby or and this is that I have any liabilit I hereby a hold under	your authority to me the right to make the right to make the your account of said uthorize the intermed deed.	nis authorization and authorization and	Signature  Address  City	2550	2964

CITY OF SAN DIEGO, CALIFORNIA GENERAL INVUICE

# Make Remittance Payable to CITY TREASURER P O Box 2289 San Diego, California 92112

E-12298

Please Return YELLOW Copy with Your Payment

COUNTY OF SAN DIEGO
PUBLIC ADMINISTRATOR
5201 A RUFFIN ROAD
SAN DIEGO CA 92123

ACCT NO 000952

PAYMENT DATE OF THE PAYMENT REF NO 04-883709 AMT PA

AMT PAID: 38

300.00

O6/16/95

07/16/95

MAY J

JANE RAUCH REF NO: E-12298
DEPT: PROPERTY DEPT-MT HOPE CEMETERY 619 527 3400

DESCRIPTION OF CHARGES

AMOUNT

ANTONIO DELOSSANTO PA1180940
LOT 49 GRAVE 6 SEC 1 DIV 12
OPENING/CLOSING
LINER
RECORDING FEE

128.00 165.00 50.00 45.00

NOTICE: PLEASE REMIT PAYMENT PROMPTLY. PAYMENT MUST BE RECEIVED BY THE DUE DATE LISTED ABOVE TO AVOID ADDITIONAL CHARGES. UNPAID BILLS WILL BE SUBJECT TO A COLLECTION FEE OF 10% OR \$10, WHICHEVER IS GREATER, INTEREST OF 1% PER MONTH ON THE UNPAID BALANCE, AND APPLICABLE PENALTIES. ANY QUESTIONS SHOULD BE DIRECTED TO THE CONTACT INV NO. 255024

E-12298

# APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

69

USE BLACK INK ONLY-MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

A NAME OF DECEDE Antoni	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAM	1B. MIDDLE	1C. LAST (FAMILY) Deless	anto			3 DATE OF DEATH	
A. CITY OF DEATH	ional City		5B. COUNTY OF DEAT		OF INFORMAN	T	LING ADDRESS AND	
	gsdale Mort	A FUNERAL DIRECTOR OR PER  L.; 5050 Federal  San Diego. CA  chromote as applicall that the propose	SON ACTING AS SUCH 7B. CA  L Blvd. F-1  d storistion stated farms is one of the	LIF, LICENSE NUMBER OF APPLICABLE  329 of depositions authorized by	5201-A I	Ruffin Rd go. CA 92		ATE SIGNED
* PERMIT AUTHORIZATION OF LOCAL REGISTRAR	THIS PERMIT IS ISSU SIONS OF THE CALIF AND IS THE AUTHORIT IN THIS PERMIT. NOTE: THIS PERMIT SIVES N	376 of the Heath and Saight Code, and we JED IN ACCORDANCE WITH PR ORNIA HEALTH AND SAFETY C TY FOR THE DISPOSITION SPECIA O BIGHT OF DISPOSAL OUTSIDE OF CALIFO	OVE- ODE PRED \$7.00	06/13/199	95		AL REGISTRAR ISSU 95079	ING PERMIT
TION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION.	Vital Reco	ords; P.O. Box ( Diego, CA 921)	85222	DRESS OF REGISTRAR DISPOSITION IS TO OCCU			NIA	
A. BURIAL (INCLL			E. TEMPORARY ENV F. DISINTERMENT G. SHIP IN TO CALIF H. TRANSIT TO OUT:	ORNIA	0'		PENDING REMAINS (dress)	AND DESCRIPTION OF THE PARTY OF
BURIAL		Cemetery; 3751 San Riego,	Market St.	914/95	110, SIGNA	TURE OF PERSO	ON IN CHARGE OF I	BURIAL
CREMATION	N/A (	With carr		128. DATE CREMATI	ED 12C. BIGNA	TURE OF PERSO	ON IN CHARGE OF C	REMATION
SCIENTIFIC USE	N/A	ODRESS OF CALIFORNIA FAC	ILITY RECEIVING REMAINS	138. DATE RECEIV	ED 13C. SIGNA	TURE OF PERSO	ON IN CHARGE OF I	FACILITY
TRANSIT		DORESS IN RECEIVING STATE CREMATED REMAINS ARE TO		14B. DATE SHIPPE		ESS AND SIGNAL ACING WITH TH	TURE OF PERSON II	N CHARGE
SCATTERING AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY		REST POINT ON SHORELINE, O NTIFY FINAL PLACE AND CA		15B. DATE OF DISPOSITION		TURE OF PERSO GE OF DISPOSIT	TION OF CRE	E NUMBER EMATED RE- DISPOSER PPLICABLE

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY, CREMATORY, FACILITY FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

E-12299 is not in cluded in this Spindle

E 12299\_ 12200