City of San Diego

R Date\_6-24-58

ina Bell Dine	E Fuperal, date, time Lives 6/28 90m.
Vauh/Liner /	al to Man Mond land
Church, Chapel, Graveside	mai Cross
All Funeral cars must arrive before 3:3	30 p.m, of regular work day or an extra charge will be applie
nd billed to undersigned. War time ve	eteran
51 3-Top \$	1 - 1
of Grave How	Section Division/Bleck
irave space & Care Fund	
dditional spaces and care fund	<i>J</i> 3
pening/Closing & Setup	), allew 13
urial Container	10 CO
andling Fees	·····\ <del>6</del> ······
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ecording and filing fee	<u>05.0</u> 7
Sales taxes	
	Total Due
	Paid receipt number 36335 35,02
	Balance due
	Salarice due
hereby certify I am the dan	of the above named decede
ind this is your authority to make disp	distion of remains as above indicated. I certify and represe rization and I agree to hold Mt. Hope Cemetery harmless fro
ny liability on account of said authori	ization and interment
	fatricia melig
hereby authorize the interment in lot old under deed.	Separate On COL
	Add & Casa all The
gnature of recorded holder of deed	Spring Valley Ca 720
	584.7737
	Telephone
4.4	1 100000000000000
Vork Order # <b>E</b> 7501	Invoice #

USE BLACK INK-MAKE NO ALTERATIONS OR FRASURES NAME OF DECEDENT SEX DATE OF BIRTH DATE OF DEATH FRANCES ATLEEN HORNER Female April 13. 1911 June 24, 1988 NAME AND ADDRESS OF SPOUSE OR OTHER INFORMANT PLACE OF DEATH-CITY OR TOWN PLACE OF DEATH-COUNTY IOR STATE IF NOT IN CALIFORNIA! Patricia J. Melega El Cajon San Diego daughter NAME AND ADDRESS OF FUNERAL DIRECTOR IOR PERSON ACTING AS SUCHI CALIFORNIA LICENSE NUMBER 2238 Casa Alta Goodbody Mort., 5027 El Carlon Blyd, San Diego, CA F 790 Spring Valley, California 92078 TYPE OF PERMIT, CHECK ONLY ONE OF THE FOLLOWING TYPES OF DISPOSITION ☐ 5 DISINTERMENT AND BURIAL FINCLUDES ■ 8 DISINTERMENT AND REINTERMENT OF CREMATED BURIAL LINCLUDES ENTOMBMENT) ENTOMBMENT REMAINS IINCLUDES INVANMENTI 2. CREMATION AND BURIAL IINCLUDES INURNMENTI 6 DISINTERMENT, CREMATION, AND BURIAL 9 DISINTERMENT OF CREMATED REMAINS AND (INCLUDES INURNMENT) DISPOSITION OTHER THAN IN A CEMETERY 3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 7 DISINTERMENT, CREMATION, AND DISPOSITION FOR CORONER'S USE ONLY OTHER THAN IN A CEMETERY 4 SCIENTIFIC USE □ 10 DISPOSITION PENDING NAME AND ADDRESS OF CEMETERY WHERE REMAINS OR CREMATED REMAINS ARE TO BE INTERRED COUNTY FERMENT Mount Hope Cemetery, 3751 Market Street, San Diego, CA San Diego NAME AND ADDRESS OF CREMATORY WHERE REMAINS ARE TO BE CREMATED | DATE CREMATED | SIGNATURE OF PERSON IN CHARGE OF CREMATORY CREMATION n/a BURIAL AT SEA ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUPPLICIENT TO IDENTIFY FINAL PLACE AND COUNTY OF DISPOSITION DITION OTHER Veds Help lower IN A CEMETERY N/A OF CREMATED REMAINS NAME AND ADDRESS OF FACILITY RECEIVING REMAINS. SCIENTIFIC USE N/A SIGNATURE OF APPLICANT This is to certify that I am the person having the right to control the disposition of the **ACKNOWLEDGMENT** remains of the above named decedent under provisions of the Health and Safety Code, OF APPLICANT DATE SIGNED and I hereby acknowledge that trespass and nuisance laws apply and understand that this permit gives no right of unrestricted access to property not owned by me. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS AMOUNT OF FEE PAID PATE PERMIT ISSUED LOCAL OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE 1988 REGISTRAR 4.00 AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT I CERTIFY THAT THE SPECIFIED DISPOSITION WAS WADE ON \_ LICENSE NUMBER OF CREMATED REMAINS CERTIFICATION OF PERSON IN CHARGE DISPOSER, IF APPLICABLE OF DISPOSITION INDICATE ADDRESS OF REGISTRAR OF COUNTY OF DEATH IF DISPOSITION IS

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

TO OCCUR IN

ANOTHER COUNTY

N/A

#### OFFICIAL RECEIPT 36335 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER MOUNT HOPE CEMETERY 264-3151 Division 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 CITY AUDITOR Burist Containers 77182 BALANCE DUE Handling Fee Recording & Pro-Need 63033 Pre-Need Lot On Acct Trust Sales Tax Pre-meed Trust TOTAL PAID AC-212 (Pey, 10-87)

City of San Diego

Date 6-27-88

B.00 2	10) of 6/29 1/2
Vends/Lines 0.41	neral, date, time LOLD (6) at 1 (GN
Church, Chapel, Graveside	(AL): Ed State 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. War time veteran	N. P.
ot 96 Grave 10 Row	Section Division/BHOCK
Grave space & Care Fund	
Additional spaces and care fund	
Opening/Closing & Setup	30. C
lurial Container	100.00
landling Fees	145.00
lower vases - Marker setting fee	**********
ecording and filing fee	35.02
ieles taxes	650
or mulsel.	Total Due
1 Tur but De	sceipt number 36 339 606.50
or .00 % the	
	Balance due
I De la	7000
hereby certify I am the Daught	of the above named deceder
nd this is your authority to make disposition nat I have the right to make this authorization	of remains as above indicated. I certify and represent and I spree to hold Mt. Hope Cemetery harmless from
nd this is your authority to make disposition nat I have the right to make this authorization	of remains as above indicated. I certify and represent and I spree to hold Mt. Hope Cemetery 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 s	of remains as above indicated. I certify and represer and I agree to hold Mt. Hope Cemetery 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 thereby authorize the interment in lot I	of remains as above indicated. I certify and represer and I agree to hold Mt. Hope Cemetery 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 thereby authorize the interment in lot I old under deed.	of the above named deceder of remains as above indicated. I certify and represented agree to hold Mt. Hope Cemetery harmless from and interment.  Secretary 17/13 W- Balance B
nd this is your authority to make disposition nat I have the right to make this authorization ny liability on account of said authorization thereby authorize the interment in lot I old under deed.	of remains as above indicated. I certify and represent and I spree to hold Mt. Hope Cemetery 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 thereby authorize the interment in lot I old under deed.	of remains as above indicated. I certify and represer and I agree to hold Mt. Hope Cemetery harmless from
hereby certify I am the <u>Daught</u> hereby certify I am the <u>Daught</u> hat I have the right to make this authorization hat I have the right to make this authorization by liability on account of said authorization to hereby authorize the interment in lot I hold under deed.  Spranture of recorded holder of deed	of remains as above indicated. I certify and represent and lagree to hold Mt. Hope Cemetery harmless from and interment.  Separate Ruth Eeles  Separate Ruth Eeles  Address & Compelles Rel TWB  Same 1 233 3887

E7502

#### USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN			SEX FEMALE	MAY 10, 1901	JUNE 22, 1988	
LOS ANGELES						
	L BOULENARD—SAN DIEGO		-1329		ALIFORNIA-90018	
	TYPE OF PER	MIT, CHECK ONLY ONE OF THE I	OLLOWING TYPES OF	F DISPOSITION		
1 BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND BURIA ENTOMBMENTI	LINCLUDES	8. DISINTERMENT AND PREMAINS IINCLUDES	REINTERMENT OF CREMATED	
2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMATION	N, AND BURIAL	9 DISINTERMENT OF CE DISPOSITION OTHER	REMATED REMAINS AND THAN IN A CEMETERY	
CEMETERY				R'S USE ONLY		
INTERMENT	NAME AND ADDRESS OF CEMETERY W	- SMMIDIRGOK CALIFOR	enta		SAN DIEGO	
CREMATION	NAME AND ADDRESS OF CREMATORY W	Tesule Mela	N/A	1007	CHARGE OF CREMATORY	
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE		ENT TO IDENTIFY FINAL	PLACE AND COUNTY OF DE	SPOSITION	
LIENTIFIC	NAME AND ADDRESS OF FACILITY REC	CEIVING REMAINS				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the peremains of the above named dece and I hereby acknowledge that to this permit gives no right of unres	edent under provisions of the Heal resposs and nuisance laws apply a	th and Safety Code, and understand that	SIGNATURE OF APPLICANT  DATE SIGNED	•	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO- AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE MID IS THE	JUN 2 8 1988	SIGNATUROF DICAL REG	SISTRAPIS SHART PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION HAS MANY ON 6	39/88 SIGNATURE OF P	ERSON IN CHARGE OF I		NUMBER OF CREMATED REMAINS R, IF APPLICABLE	
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	VITAL RECORDS-313 NO		-LOS ANGELES,	, CALIFORNIA - 9	90012	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36339

(833) PINKAUDITOR	284-3151		00 02
From Pessie Reuth &	the Address: 2271 /2	O, Cedamo	Blvd, LA
Des hundred	Dix 50/100 -	Dollars (\$	606-501,
In Payment of	ia & Sarrells	Quena	Merocce
Lot 96 Grave	10-TOP ROW_S	ection 2	Division 7
Invoice No.	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 87007 20% Sales Care 77184 — 60% Sales 100	
Acct. No. E - 7502	CITY AUDITOR	of Lots 77184 — Opening/ 100 Closing 77181 —	320 00
BALANCE DUE	JUN 3 0 1988	Burial 100 Containers 77182 — 100 Handling Fee 77185 —	19500
Pre-Need Lot At Need On Acct	30N 30 1308	Recording & 100   Misc. Fees   77183 -	35 00
Pre-need Trust Cash Check	ISSUED BY SALARIA (Ard	Seles Tax 60101 76390 —	650
AC-212 (Nov. 10-87) 0920	ISSUED BY SERVICE OF S	TOTAL PAID \$	606 30

City of San Diego

Date 6-27-88

of August	2001			-
in a	F	uneral, date, time _		
Church, Chapel, Graveside				_ 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. War tim	e veteran	i ————————————————————————————————————		
Lot 3960 GraveR				10
of Control Grave R	low	Section	Division <del>/S lock</del> .	70
Grave space & Care Fund			S	95.00
Additional spaces and care fund .				
Opening/Closing & Setup	ACTIVITIES OF THE PROPERTY OF			
SAN THE SAN THE CONTRACT OF THE				
Burial Container				
Handling Fees				
Flower vases - Marker setting fee				
Recording and filing fee				-
Sales taxes		+++++++++++++++++++++++++++++++++++++++		
		Total	Due	95.0
	Paid (	receipt number 🊄	6337 ST	15.00
	A PARAMETER		Balance due	-6
hereby certify I am the			of the above name	d deceden
and this is your authority to make of that I have the right to make this au	thorizatio	n and lagree to hold		
any liability on account of said auti	horization	and interment.		
hereby authorize the interment in	lot I			
hold under deed.	1.000	Signature 3	22 Trevell	15
Signature of recorded holder of deed		4570	Dia DA	2106
Signature of Federal Indian of George		Suga 21/	120/2	Zip Cod
		Tolephone	7050	
<b>Е</b> 7503		Invoice # _		

## OFFICIAL RECEIPT

WHITE ..... TO CUSTOMER

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

Nº 36337

PINK AUDITOR	MOUNT HOPE CEMETERY 284-3151	Date:	-21	1	88
From Action O. C.	Lee winte-you	ie D	ollars (\$ 5	375.0	20,
Lot 3960 Grave_	Row	etion		Division /	2
Invoice No.	NOTYALID FOR PURPOSE STATED UNLESS STANPED "PAID" IN THIS SPACE CITY AUDITUR	CREDIT 20% Sales Care 80% Sales	87007 77184 100	119	00
w.o. E-7503	JUN 3 0 1988	of Lots Opening/ Closing Buriel Containers	77184 — 100 77181 — 100 77182 —	778	
Pre-Need Lot At Need On Acct	( 1)	Handling Fee Recording & Misc. Fees Pre-Need	77185 — 100 77183 — 63033 9022 —		
Pre-need Trust Cash Check X	source Andre Word	Sales Tex TOTAL PAID	60101 78380	595	00

City of San Diego

Date 6-27-88

of Elper	riect to your rules and regulations, to inter the remains
in a X	neral, date, time 6/28 /00m
Vault Lines	Ma and
Church, Chapel, Graveside	, Mules Mortuan
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. War time veteran	- Deleverer Out
135 2 9-168	/ 0/2
Lot Grave How	Section Division/Block
Grave space & Care Fund Tope burn	in - tour 30 55.00
Additional spaces and care fund (2 lend	lu) ——
Opening/Closing & Setup	GO. 02
- 10.0 8	20
Burial Container	
Handling Fees	******************************
Flower vases - Marker setting fee	***************************************
Recording and filing fee	u
Sales taxes	
PA-10543 Paid re	Total Due
Of Lyd Paidre	oceipt number
(XH05)	Balance due
V-1 10	Dalance due
hereby certify I am the	of the above named deceder
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 remains as above indicated. I certify and represe and I agree to hold Mt. Hope Cemetery harmless fro and interment.
I hereby authorize the interment in lot I hold under deed.	Signature
ingia arradi abou.	Advisa
Signature of recorded holder of deed	(Control of the Control of the Contr
	State Zip Co
	Talaphone
	The state of the s
	07/137
Work Order # <b>E</b> 7504	Invoice # 27/15

PERM

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	Eloy Morales	CC88~0989	sex:	Jan.3, 1966	May 3, 1988
PLACE OF DEATH—CITY OR TOWN  Fallbrook  NAME AND ADDRESS OF FUNERAL DIRECTOR (OR PERSON A		San Dieg	PLACE OF DEATH—COUNTY IOR STATE IF NOT IN CALIFORNIA!  San Diego  TING AS SUCHI		SPOUSE OR OTHER INFORMANT INTY Coroner I Avenue
	uary 2859 Adams Ave. San Diego, CA 1424 San Diego, CA1				
	TYPE OF PE	RMIT, CHECK ONLY ONE OF T	HE FOLLOWING TYPES O		
1, BURIAL (IN	CLUDES ENTOMBMENTI	5 DISINTERMENT AND B	IURIAL (INCLUDES	B. DISINTERMENT AND REMAINS (INCLUDES	REINTERMENT OF CREMATED (INURNMENT)
2 CREMATION	N AND BURIAL (INCLUDES INURNMENT	D € DISINTERMENT, CREM		9 DISINTERMENT OF CO	REMATED REMAINS AND
3. CREMATION CEMETERY 4 SCIENTIFIC	N AND DISPOSITION OTHER THAN IN A	7 LTC VOICE THE THE LTC LTC VOICE TO THE LTC LTC VOICE TO THE LTC VOICE TO	ATION, AND DISPOSITION	188888111111111111111111111111111111111	NER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY Mt. Hope Cemetery,		The state of the s	100	ounty San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY			SIGNATURE OF PERSON I	N CHARGE OF CREMATORY
BURIAL AT SEA OR POSITION OTHER IN A CEMETERY REMATED REMAINS	ADDRESS, NEAREST POINT ON SHO	TIME OF OTHER DESCRIPTION S	led Sand	REACE AND COUNTY OF D	SSEPRETARION BY
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY R	ECEIVING REMAINS	,	) ,	
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the premains of the above named de and I hereby acknowledge that this permit gives no right of unre	cedent under provisions of the l trespass and nuisance laws ap	Health and Safety Code, ply and understand that	SIGNATURE OF APPLICAN  DATE SIGNED	
LOCAL REGIST#AR	THIS PERMIT IS ISSUED IN ACCORDANCE W OF THE CALIFORNIA HEALTH AND SAFETY O AUTHORITY FOR THE DISPOSITION SPECIFIE	ODE AND IS THE	DUN 28 198	FT N// 1. /	TRAH ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	ANTER CATEL	SELENSON IN CHARGE	DISTOSTION LICENSE	E NUMBER OF CREMATED REMAINS ER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR C	F COUNTY OF DEATH	0 2		

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

City of San Diego

Date 6-27-88

of Carros He	Most 4/29 700
in a Fv	ineral, date, time
Church, Chapel, Graveside	Mortuary.
All Funeral cars must errive before 3:30 p.m.	of regular work day or an extra charge will be applied
and billed to undersigned. War time veteran	H. Kelevery Over
128 & DINJORD	1 8 15
Lot Acc Grave Row	Section Division/Block
Grave space & Care Fund	55.00
Additional spaces and care fund	
Opening/Closing & Setup	90.00
Burial Container	
Handling Fees	
Flower vases - Marker setting fee	
Recording and filing fee	
//	
17.	Total Due 145. 00
Paid re	School State and Company in
14, A) Paidn	eceipt number
11, 10	Balance due
I hereby certify I am the	of the above named deceden
and this is your authority to make disposition	of remains as above indicated. I certify and represent
any liability on account of said authorization	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
	Address
Signature of recorded helder of deed	States Zip Codi
	2
	Talaghone
	Telephona
	Invoice #

	L L	USE BLACK INK-MAKE NO A	LTERATIONS OR ERASUR	ES	377	
Carlos H	m sanandez-Reyes		sex <b>Male</b>	Peb. 14.	1963 DATE OF DEAT	
PLACE OF DEATH—	<b>ro</b>	PLACE OF DEATH—COUNTY 10	R STATE IF NOT IN CALIFORNIAI	Donald B	ESS OF SPOUSE OR OTHER	INFORMANT
	ss of funeral director for person at ey <b>Hort. 3838 Bonita</b> ,		ALIFORNIA LICENSE NUMBER F-1371		uffin Rd. o, CES. 92123	
	TYPE OF PER	MIT, CHECK ONLY ONE OF TH	HE FOLLOWING TYPES O	F DISPOSITION		
1 BURIAL (IN	ICLUDES ENTOMBMENT)	5. DISINTERMENT AND BI	URIAL (INCLUDES	8 DISINTERMEN	NT AND REINTERMENT OF CR ICLUDES INVENMENT)	REMATED
Mark P	N AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, CREMA	ATION, AND BURIAL		NT OF CREMATED REMAINS . OTHER THAN IN A CEMETER	
3. CREMATION CEMETERY 4 SCIENTIFIC		7. DISINTERMENT, CREMA OTHER THAN IN A CEN	LTION, AND DISPOSITION METERY	FOR (	CORONER'S USE ONLY	<b>y</b> 5
CREMATION	NAME AND ADDRESS OF CEMETERY W	Park. 3838 Bomita	Rd. Bonita, C	<b>.</b>	San Diego ERSON IN CHARGE OF CREMA	ATORY
BURIAL AT SEA OR DISPOSITION DTHER THAN IN A CEMETERY OF TRACTOR REMAINS	ADDRESS, NEAREST POINT ON SHOREL	lop of the long of	F-7500	DACY BUD COUNT	Y OF DISPOSITION	
USE USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	edent under provisions of the H espass and nuisance laws app	lealth and Safety Code, ly and understand that	SIGNATURE OF AR	PLICANT	
LOÇAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH DE THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DEAND IS THE	JUN 29 1988	SIGNATURE OF LO	LA REGISTRAR ISSUING PER	· G
CERTIFICATION OF PERSON IN CHARGE OF DISPOSETION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON FE	29/89 SIGNATURE	LAULINA	DISPOSITION	LICENSE NUMBER OF CREMA DISPOSER, IF APPLICABLE	TED REMAINS
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH				

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



City of San Diego

Date 6-28-88

of Cuerna	11. Wright (X)
in a Vault Fur	neral, date, time 7/1/ #75
Church, Chapel, Graveside	: Ligod Ogbe Mortuary.
All Funeral cars must arrive before 3:30 p.m. r	of regular work day or an extra charge will be applied
and billed to undersigned. War time veteran _	Deliverent
1-0	
Lot Grave Row	Section Division & Division
Grave space & Care Fund	
Additional spaces and care fund	
Opening/Closing & Setup	ZOS.UC
Burial Container	40.00
Handling Fees	60.00
Flower vases - Marker setting fee	
Departing and filled for 1 P 3	35.02
- 1 W N/ / N/	2.60
Sales laxes	21/960
0 1000	7/ 3// 0//2/ (a)
Paid re	ceipt number 2007 3 090, 00
May english.	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	of 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 a	Puth weischedel
I hereby authorize the interment in lot I	Signature
hold under deed.	CONTROL CONTRO
Signature of recorded helder of deed	Address
	Strategy/ / 1/65 Zip Code
OBSTRUCTURE STATE	466-2632
1	**************************************
1	1 Telephone
West October E 7506	1 Invoice #

## OFPICIAL RECEIPT

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

Nº 36345

CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY				
From Buth a Weisne	264-3151 Le Laddress: 7570 Laddress: 7570 Laddress: 7570 Laddress	Date:	6-30	) 19	1160
Two hundles	Starte - two 60	100	ollars (\$ _	142,6	69
In Payment of CC	in the way		ner	4	
Lot S / Grave	RowS	ection//		ock	_
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184		
Acct. No. E-7506	CITY AUDITOR	80% Sales of Lots Opening/ Closing	77184	105	00
BALANCE DUE 6		Surial Containers Handling Fee	77182 ————————————————————————————————————	60	00
Pre-Need Lot At Need On Acct	JUN 3 0 1988	Recording & Misc. Fees Pre-Need	100 77163 63033 9022	35	00
Pre-need Trust Cash Check AC-912 (Plack 10-87)	ISSUED BY ANDRA Ward	Sales Tax	80101 78390 \$ 6	242	20

## E7506

### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	TR.	Table Controlled Springer - Sedige Williams	SEX	DATE OF BIRTH	DATE OF DEATH
ALMA MARIE	WRIGHT	Female		June 9, 1899	June 25, 1968
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH-COUNTY	OR STATE IF NOT IN CALIFORNIA	NAME AND ADDRESS OF	SPOUSE OR OTHER INFORMANT
La Mesa		San Diego	<i>-</i> //	Ruth A. Weist	
	SS OF FUNERAL DIRECTOR ION PERSON A FORT., 5027 EL Cajon		CALIFORNIA LICENSE NUMBER  R 790	7570 Sarenac La Mesa, Cali	ifornia 92041
J	TYPE OF PER	MIT, CHECK ONLY ONE O	F THE FOLLOWING TYPES C	OF DISPOSITION	
I, BURIAL (IN	CLUDES ENTOMBMENT)	5. DISINTERMENT AN ENTOMBMENT)	D BURIAL (INCLUDES	8. DISINTERMENT AND REMAINS (INCLUDES	REINTERMENT OF CREMATED (NURNMENT)
5935	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CR			REMATED REMAINS AND THAN IN A CEMETERY
3 CREMATION CEMETERY  4 SCIENTIFIC		7 DISINTERMENT, CR OTHER THAN IN A	EMATION, AND DISPOSITION CEMETERY	FOR CORON	NER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY I	, 3751 Market St	reet, San Diego,	CA	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY I	VIERS SEMAINS ARE TO BE CR	JUN 2 8 1988	SIGNATURE OF PERSON I	N CHARGE OF CREMATORY
BURIAL AT SEA OR ISPOSITION OTHER AN IN A CEMETERY CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	LINE, OR OTHER DESCRIPTION	SUFFICIENT TO IDENTIFY FINA	L PLACE AND COUNTY OF D	ISPOSITION )
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RE	CEIVING REMAINS			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dec and I hereby acknowledge that the this permit gives no right of unre-	edent under provisions of the resposs and nuisance laws	ne Health and Safety Code, apply and understand that	SIGNATURE OF APPLICAN  DATE SIGNED	
LOCAL	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	TH PROVISIONS AMOUNT OF FE	ON 277 198		Campas M. B. 1974
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	NICH DATE)	DUSCUS TO	DISPOSITION LICENSI DISPOS	E NUMBER OF CREMATED REMAINS ER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	9.0	32	16

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

### MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 6-28-88

You are hereby authorized and instructed, s	subject to your rules and regulations, to inter the remains
of	2 V. Call another
in a Bell Luner	Funepal/date, time huro 6/30 1/6
Church, Chapel, Graveside	sede : Supphiley Mortuary.
All Funeral cars must arrive before 3:30 p.r	n. of regular work day or an act a cha ca will be applied
and billed to undersigned. War time vetera	- Cooke 1 18 X2H
Lot 3/32 Grave Row	Section Division/Bleek
Grave space & Care Fund	100,00
Additional spaces and care fund	(g.X
Opening/Closing & Setup	69.00
Burial Container	1 1 97,00
landling Fees	50,00
lower vases - Marker setting tee	Sin & chair
Recording and filing tel	300
Seles taxes	200 25
1000	Total Due
W. A 49 100 Paid	receipt number
W. Mr. o y	Balance due
hereby certify I am the	of the above named decedent
that the right to make this authorization in the common that the right to make this authorization in the right to make this authorization in the right that it is not considered in the right that it is not considered in the right that it is not considered in the right that is not co	on of remains as above indicated. I certify and represent ion and I agree to hold Mt. Hope Cemetery harmless from in and interment.
hereby authorize the interment in lot I	Surreture
hold under deed.	Address
Signature of recorded holder of deed	State Zip Code
	Telephone
	Invoice #
Work Order # E 7507	Acct. #

	U.	SE BLACK INK-MAKE NO ALT	TERATIONS OR ERASUR	tES	E7507	
NAME OF DECEDEN			SEX	DATE OF BIRTH	DATE OF DEATH	
	Marcon Jeree Pope		Male	Apr 24, 1968	June 26, 1988	
PLACE OF DEATH-	2001	PLACE OF DEATH-COUNTY ION	STATE IF NOT IN CALIFORNIA	NAME AND ADDRESS OF	SPOUSE OR OTHER INFORMANT	
	Diego	San Diego		Mary Alice P		
	SS OF FUNERAL DIRECTOR (OR PERSON AC	Broadway CAL	LIFORNIA LICENSE NUMBER	319 W. E Str		
numberey Chi		la Vista, CA	F-964	San Diego, Ca	92101	
	TYPE OF PERM	IT, CHECK ONLY ONE OF THE	FOLLOWING TYPES C	F DISPOSITION		
1 BURIAL IIN	CLUDES ENTOMBMENTI	b. DISINTERMENT AND BUR ENTOMBMENT)	IIAL (INCLUDES	B. DISINTERMENT AND REMAINS (INCLUDES	REINTERMENT OF CREMATED INURNMENT)	
2 CREMATION AND BURIAL (INCLUDES INURNMENT)		6 DISINTERMENT, CREMATI	ION, AND BURIAL		REMATED REMAINS AND THAN IN A CEMETERY	
	N AND DISPOSITION OTHER THAN IN A	17 17 17 17 17 17 17 17 17 17 17 17 17 1	ACCO MICHIGANE MALERA CONSCIO	5-0-0-0 07 0-0-0 07		
CEMETERY  4 SCIENTIFIC USE		7. DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY  10 DISPOSITION PENDING		
	NAME AND ADDRESS OF CEMETERY WI	IERE REMAINS OR CREMATED REN	MAINS ARE TO BE INTERR	ED CO	UNTY	
INTERMENT	Mt. Hope Cemetery, 37				San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY WH				N CHARGE OF CREMATORY	
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORELY	ne, or other description suff	ICIENT TO IDENTIFY FINA	L PLACE AND COUNTY OF DI	SPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	IVING REMAINS				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per- remains of the above named deced and I hereby acknowledge that tree this permit gives no right of unrestr	lent under provisions of the He spass and nuisance laws apply	alth and Safety Code, and understand that	SIGNATURE OF APPLICANT  DATE SIGNED		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY CODE AUTHORITY FOR THE DISPOSITION SPECIFIED BY	ANDAS THE SA OO	DATE PERMIT ISSUED	SIGNATURE OF ACCAL REC	Lamal M.De	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	SIGNATURE SIGNATURE	YOU THE		NUMBER OF CREMATED REMAINS ER, IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF C	OUNTY OF DEATH				

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

36456

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

PINKAUDITOR	264-3151		
From Courte of Sont	Reproduces 1600 Ga	Date:	7-26 1988
two Mendie	Printy- regie	85/100 Doll	ars (\$ 699.95).
In Payment of	acces of Jage	o VIII	nas xeine
Lot	Ch	ection	Division 9
Invoice No.	NOT VALID FOR PURPOSE STATED IN LESS STAMPED -PAID' IN THIS SPACE.	80% Sales	17007 77184 80 00
W.O. E-7507	JUI 29 1988	Opening/ Closing 1 Burial	100 64 00
BALANCE DUE	1988	Handling Fee 7	77182 100 50 100
Pre-Need Lot At Need On Acct		Pre-Need (	77183 53033 9022
AC-212 (Flev. 10-87) 708803	ISSUEDBY SANDIA WES	Sales Tax TOTAL PAID	299 05
	STATE OF THE PARTY	The second second	COLUMN TO THE PROPERTY OF THE PARTY OF THE P

City of San Diego

Date 6-28-88

	MA CO		Lynn	<u>ue</u>	
na Be	el de	ale Fu	nergi date, time	Tu 1	11 11an
Church, Chapel, (	Graveside	lagely	Store &	agodo	le Mortuar
All Funeral cars r	nust arrive befo	ore 3:30 p.m.	of regular work de	ay or an extra c	harge will be applie
d billed to unde	ersigned. War,t	ime veteran .			
411	4			2	11
ot ZZ_G	rave	_ Row	Section	Divisio	on/Block
Grave space & Ca	are Fund	********	*******		250,0
Additional spaces	s and care fund			*****	
Opening/Closing	& Setup				320.00
Burial Container		_/<	) \		100.00
landling Fees				*******	145.02
lower vases - M	arker separa	r	OR TEST CALL		1000000
Recording and fill	ing fee	0	TE CALL		35.00
		7/1/2	CAROL		6.50
Sales taxes		0	4	12/02/84/67	846
Seles taxes	1	4.0	Total	al Due	
šales taxes	1	1	Total	36340	0 856.5
Sales taxes	1	A. L. L.		36340	0 856.50
Seles taxes	R	The state of the s		36340	6 856.50 ace due
hereby certify (	om the BA	other	ceipt number	36340 Balan	oove named decede
hereby certify I a and this is your a hat I have the rig	uthority to make	e disposition authorization	ceipt number of remains as abo	Balan  of the atove indicated. 1	
hereby certify I a and this is your a hat I have the rig	uthority to make	e disposition authorization	ceipt number of remains as abo	Balan  of the atove indicated. 1	pove named decede certify and represe
hereby certify I a and this is your a hat I have the rig any liability on ac hereby authoriz	uthority to mak tht to make this count of said a e the interment	e disposition authorization uthorization	ceipt number of remains as abo	Balan  of the atove indicated. 1	pove named decede certify and represe
hereby certify I a and this is your a hat I have the rig any liability on ac hereby authoriz	uthority to mak tht to make this count of said a e the interment	e disposition authorization uthorization	ceipt number of remains as abo	Balan  of the atove indicated. 1	pove named decede certify and represe
hereby certify I and this is your a hat I have the rig my liability on ac hereby authoriz gold under deed.	uthority to mak tht to make this count of said a e the interment	e disposition authorization uthorization	ceipt number of remains as abo	Balan  of the atove indicated. 1	pove named decede certify and represe
hereby certify I and this is your a hat I have the rig my liability on ac hereby authoriz gold under deed.	uthority to mak tht to make this count of said a e the interment	e disposition authorization uthorization	ceipt number of remains as abo	Balan  of the atove indicated. 1	pove named decede certify and represe metery harmless from
hereby certify I and this is your a	uthority to mak tht to make this a count of said a e the interment	e disposition authorization uthorization	of remains as about and lagree to holand interment.	Balan  of the atove indicated. 1	pove named decede certify and represe metery harmless from

E7508

### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	DARELL PHI	LIP RANDLE	No 1 o	June 4, 196	2 Hay 29, 1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY IS		Helen Randl	S Commence of the Commence of
		Pederal Blvd. ego, California	CALIFORNIA LICENSE NUMBER 1329	5432 Crestor San Diego,	
	TYPE OF PE	RMIT, CHECK ONLY ONE OF I	HE FOLLOWING TYPES O	F DISPOSITION	
1 (BURIAL (INCLUDES ENTOMBMENT)		5. DISINTERMENT AND E	BURIAL (INCLUDES	8 DISINTERMENT AND REMAINS (INCLUDES	REINTERMENT OF CREMATED S INURNMENTI
MAN .	N AND BURIAL (INCLUDES INURNMENT	(INCLUDES INURNMENT			CREMATED REMAINS AND
3. CREMATION CEMETERY  4. SCIENTIFIC		2 DISINTERMENT, CREM OTHER THAN IN A CE	ATION, AND DISPOSITION METERY	FOR COROL	NER'S USE ONLY
NTERMENT	NAME AND ADDRESS OF CEMETERY  Nt. Hope Cometery:	3751 Market Str	set; San Diego,	Califronia	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY	WHERE REMAINS ARE TO BE CREM	ATED DATE CREMATED	SIGNATURE OF PERSON I	N CHARGE OF CREMATORY
BURIAL AT SEA OR SITION OTHER IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOR	not were land	DEFINENT TO IDENTIFY FINAL	PLACE AND <u>COUNTY</u> OF D	DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RI	ECEIVING REMAINS BAL			
ACKNOWLEDGMENT OF APPEICANT	This is to certify that I am the premains of the above named de and I hereby acknowledge that this permit gives no right of unce	cedent under provisions of the trespass and nuisance laws ap	Health and Safety Code, ply and understand that	SIGNATURE OF APPLICAN  DATE SIGNED	1
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE W OF THE CALIFORNIA HEALTH AND SAFETY O AUTHORITY FOR THE DISPOSITION SPECIFIES	ODE AND IS THE	JUL Q 1 1988	PRI PRINCIPLA DI INC	and MA US
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	SIGN (TURE	defersion in thange of		F NUMBER OF CREMATED REMAINS SER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR O	F COUNTY OF DEATH	0		11

COPY Z IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

36346

# WHITE ..... TO CUSTOMER

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

From Jackie Villams Address: 2547 Parts: Julian 1980 Dollars 18 856-50 Dollars 18 856-50 Dollars 18 856-50 Dollars 18 856-50				MOUNT HOPE CEMETERY 284-3151	CANARYCEMETERY PINKAUDITOR
Oceant Regulated Jeft SU SO Dollars 18 85650	80	71100 11	Pate:	ins 2549	Jackie Willen
Introduction Day Clark Bureau Conneces	5	ollars (\$ \$56.5	SO Dollars	aled lift - Si	cent heep
	<u>e</u>	a desve	Bunas	ursell Paralles	In Payment of
Lot 4/ Grave 4 Row Section 2 Division //			ection 2	4 Rows	Lot 4/ Grave
Invoice No. NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 87007 77184 20% Sales Care 77184 100 20% Sales 100	10	77184	20% Sales Care 77.18	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	Invoice No.
W.O. E-7508 CITY AUDITOR Closing 77181 71 100 00 00 00 00 00 00 00 00 00 00 00 0	易	100 7 100	of Lots 7718 Opening/ 10 Closing 7718	CITY AUDITOR	5-750X
BALANCE DUE	170	7188	Containers 7718 10 Handling Fee 7718	0001461 198	BALANCE DUE
Pre-Need Lot At Need On Acct D		77183 63033 9022	Misc, Fees 7718 Pre-Need 8303 Trust 902	300	Pre-Need Lot At Need On Acct
AC-212 (Rev. 10-87) 3 4 ISSUED BY ANALIZ CONTROL PAID \$ 80101 78390 \$ 56 50	3		7839	1 1 4 10 11 10	,71/

City of San Diego

authorized and instructed, subject to your cales and regulations appropriate the remains Funeral, date, time Church, Chapel, Graveside All Funeral cars must arrive before 3:30 p.m. of regular work day of an extra charge will be applied nd billed to undersigned. Wer time veteran Grave space & Care Fund Additional spaces and care fund Opening/Closing & Setup Burial Container ... Handling Fees ... Recording and filing fee 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 hold under deed. sure of recorded helder of deed Invoice # Work Order #

PY-893 (REV. 8-86)

## MOUNT HOPE CEMETERY

Guenne S. Dale in	d authorizes the interment of the remains of Lot 478 Gr Row Sec. 5
Vision 8 in accordance with	and subject to the rules and regulations
overning said interment in Mount	Hope Cemetery, and certifies and represents
	to make such authorization and agrees to
NOT THE STOCK AND THE STATE OF	from any and all liability on account of said
uthorization and interment.	
	A 1 25 1
DUNNE 2 MARARIO	( Varo & Margan
PANE P. MARACID	137 Balcan D. Fl. Palm Pa GI
MANACIN MARACIN  Brothar  ignature of relative or legal epresentative	137 Balsam Q. El Cajor Ca. 92. Address & relationship to deceased or authority to sign authorization

Witness

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	YVONNE SHARON DALE	l	Female	Aug. 16.		June 28	, 1986
PLACE OF DEATH -	Diego	PLACE OF DEATH—COUNTY IN SAN D1	ego	NAME AND ADD	123 123	SE OR OTHER INF	
PRESTACTION OF THE PERSON OF T	LOTTUERA PORTO AR TERSON AC	iego, CA	CALIFORNIA LICENSE NUMBER 1083	É1 Ca	jon, CA	ı	
* †	TYPE OF PERM	IT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION	-11-0		
1, BURIAL IIN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND I	BURIAL IINCLUDES		ENT AND REINT	TERMENT OF CREN	MATED
2. CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	B DISINTERMENT, CREW (INCLUDES INURNMENT)				ATED REMAINS AN	
3 CREMATION CEMETERY  4 SCIENTIFIC		7 DISINTERMENT, CREM OTHER THAN IN A CE		FOR		S USE ONLY	
INTERMENT	NAME AND ADDRESS OF CEMETERY WI	The state of the s	The second secon		COUNTY	ian Diego	)
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CREM	7/1/00	SIGNATURE OF	ERSON HE CHA	ARGE OF CREMATO	)RY
BURIAL AT SEA OR OSITION OTHER IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORELI			PLACE AND COU	NTY OF DISPOS	SITION	- 4
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	WING THE MAINS OF THE					
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named deced and I hereby acknowledge that tre this permit gives no right of unrestr	lent under provisions of the spass and nuisance laws ap	Health and Safety Code, ply and understand that	SIGNATURE OF DATE SIGNED	APPLICANT		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE	JUN "2"9"51988	SIGNATURADE	all L. C.	AR ISSUING PERMI	T Kits
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED 9/		OF PERSON IN CHARGE OF	DISPOSITION	LICENSE NUN DISPOSER, IF	APPLICABLE	D REMAINS
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	OUNTY OF DEATH	0				

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

### OFFICIAL RECEIPT

# CITY OF SAN DIEGO, CALIFORNIA

No 36368

CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151			90
From tatterial 11/0	turadress: 6322 8	Date:	i plu	19 SD
two kindred	Jack two 60/1	00-1 p	oliars (\$ 20	2,60,
In Payment of	THE NOWS	· Cher		7
Lot 4118 Grave	The same of the sa	ection	5 Division Block	10 8 m
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-1509	CITY AUDITOR	Opening/ Closing Burisi	77181	500
BALANCE DUE	JUL 11 1988	Containers Handling Fee	77182 100 77183	000
Pre-Need Lot At Need On Acct	. / 1 / 1	Recording & Misc. Fees Pre-Need Trust	100 77183 — — — — — — — — — — — — — — — — — — —	300
Pre-need Trust Cash Check	ISSUED BY MAILA UNI	Seles Tax TOTAL PAID	80101 78390 20	12 100
AC-212 (Rev. 10-87) / 4 4 0		TOTAL BOILE	_07	V PV

City of San Diego

Date 6-2988

a asie n	Clackner
na Vault F	uneral, date, time Thurs. 6/50 Has
Church, Chapel, Graveside Murch	There Rosale Mortuan
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge will be applie
billed to undersigned. War time veteran	11 11 11 7/1 2
VALUE OF THE PARTY	
ot 1/5 Grave 12 Row	Section 2 Division/Block 12
Grave space & Care Fund	495
	-No -
Additional spaces and care fund	320 €
Opening/Closing & Setup	760+ 1700
Burial Container	water of
landling Fees	- 100 - 110 =
lower vases - Marker setting fee	
lecording and filing fee	35.0
Sales taxes	11.3
0.00	Total Diva /2013
XO	3/34/ 400
V Paid	eceipt number 3634
20	36870 200 100
hereby certify I am the	of the above named decede
and this is your authority to make disposition	of remains as above indicated. I certify and represent and lagree to hold Mt. Hope Cemetery harmless from
hat 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.
	W 10 01
hereby authorize the interment in lot   nold under deed.	Man Welle Mue Dockme
iola under deed.	X527 46 46 2 1.
ignature of recorded holder of deed	& Landugo 9211=
	x 264-1759
	Telephone
- 5	07/63/
F 7510	Invoice 1
Vork Order # E 1010	Acct. #

1100	they of	1 # 200 20	
	10	V. 018-110.	

N 140	12	W.O. # E-/S	10
31	NOTE		
읟	Can Diego California	6/29	1008

days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasurer or order at 3751 Market Street, San Diego, Ca 92102 the sum of Line Common DOLLARS with interest from on the unpaid principal at 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

PRINT NAME	SIGNATURE Musselle Mar Svekma	v
ADDRESS		
CALIF. DRIVERS LIC. #		
82	MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE	

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

RAME OF DECEDEN		vac versionalistications	SEX	DATE OF BIRTH	DATE OF DEATH	
	HEATHAN JAW	EL BLACKMAN	Male	Jan. 12, 1	933 June 24, 1988	
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY (OF	STATE IF NOT IN CALIFORNIA	NAME AND ADDRESS	OF SPOUSE OR OTHER INFORMANT	
Cha	la Vista	San Dieg	0	Willie Bla	closen - Vife	
NAME AND ADDRES	SS OF FUNERAL DIRECTOR IOR PERSO	90 Federal Blvd.	ALIFORNIA LICENSE NUMBER	527 South	46th Street	
Anderson-Re	gsdele Mortuary: San	Diego, Calif.	1329	San Diego,	California 92113	
	TYPE OF PERA	AIT, CHECK ONLY ONE OF TH	E FOLLOWING TYPES O	F DISPOSITION		
1. BURIAL IIN	CLUDES ENTOMBMENTI	5. DISINTERMENT AND BUENTOMBMENT)	RIAL (INCLUDES		AND REINTERMENT OF CREMATED JDES (NURNMENT)	
	N AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, CREMA (INCLUDES INURNMENT		9 DISINTERMENT OF DISPOSITION OF	OF CREMATED REMAINS AND THER THAN IN A CEMETERY	
3 CREMATIO CEMETERY	N AND DISPOSITION OTHER THAN IN A	T 7 DICHTERMENT CREMA	TION AND DISCOSITION	FOR COL	PONERIC LICE ONLY	
4 SCIENTIFIC		7 DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY  10. DISPOSITION PENDING		
	T				Leoner	
INTERMENT	Mt. Nope Cometery:	3751 Market Stree	the continue of the state of the same		San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CREMA	TED DATE CREMATED	SIGNATURE OF PERSO	ON IN CHARGE OF CREMATORY	
BURIAL AT SEA OR POSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	NE, OR OTHER DESCRIPTION SUF	aut to IDENTIFY FINAL	PLACE AND COUNTY O	DF DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECI	EIVING REMAINS				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the person having the right to control the disposition of the remains of the above named decedent under provisions of the Health and Safety Code, and I hereby acknowledge that trespass and nuisance laws apply and understand that this permit gives no right of unrestricted access to property not awned by me.			SIGNATURE OF APPLICANT  DATE SIGNED		
PEGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE	JUN 2 9 198	SIGNATURA OF LOCAL	PRESTOR ISSUING PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	SIGNATURE O	PERSON IN CHARGE OF	DISPOSITION LIC	ense number of cremated remains Poser, if applicable	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH				

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USF, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

#### OFFICIAL RECEIPT 36820 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER MOUNT HOPE CEMETERY PINK ..... AUDITOR 264-3151 Dollars (\$ Division Grave Row Section Blook NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE CREDIT 67007 77184 20% Sales Care of Lots Acct. No Opening/ Closing Burist Containen **BALANCE DUE** Handling Fee 77180 Recording & 100 77103 63033 Pre-Need Lot Pre-heed Trust Cash AC-212 (Rev. 10-87)

## OFFICIAL RECEIPT

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

Nº 36845

	WHITE TO CUSTOMER CANARY CREATERY PINK AUDITOR
12125	

PINKAUDITOR	264-3151		1	111	6
From: Mrs - Delli Mi	a Blademon.	Date: _/	0-1	71	9_0
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In Payment of	Valley lost	Mate	5	yee	Carry .
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Invoice No.	ROW S NOT VALID FOR PURPOSE STATED UNLESS STAMORY PAID IN THIS SPACE.	CREDIT 20% Sales Cars	87007 77184	- Block _/_	
Acct. No.		AU 80% Sales Care	77184 — 100 77184 —		EQ.
WO E-15/0	OCT,	Operation Closing	77181 — 100	-	
BALANCE DUE		Sontainers Hamiltong Fee	77182 — 100 77185 —		
		Recording & Misc. Fees	77183	125	00
Pre-Need Lot	. 11 11	Pre-Head Trues Skips Tax	63033 9022 — 60101 78390 —		
AC-212 (Rev. 10-87)	issued or Apul Max 1	BOTAL PAID	78390 —	125	(d)
			Link to	AND RESIDENCE	

From Auditor  Fr	MOUNT HOPE CEMETERY 284-3151  Man Address: 527 La 46 de  Leunaud Anderses: 527 La 46 de  Man Address:	Date: 6/92 Dollari	Nº 36341 29/88 19 21/3, Brackman Dec
Invoice No.	12 ROW SE STATED UNLESS STAMPED PAID IN THIS SPACE.	ection 2	M —
Acct. No	JUN 3 0 1988	of Lots 7711 Opening/ 11 Clossing 711 Burial 11 Containers 7711 Handling Fee 7711	000 B1 000 82
Pre-Need Lot	Issuer & Royen Dath	Misc. Fees 7711 Pre-Need 830; Trust 90; Sales Tax 8011 7631 TOTAL PAID	83

City of San Diego

Present

Date 6-29 88

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The second secon	of regular work day or an extra charge will be appli
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186	Section Division/Black / S
Row	Section Division/Black
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ARCON TO A	Balance due
hereby certify I am the	of the above named deced
	of remains as above indicated. I certify and repres- nand I agree to hold Mt. Hope Cemetery harmless fr and interment.
hereby authorize the interment in lot I	Separary - 1 0 / Ca 1/ 10
	68-630 and 34 4 1
gnature of recorded holder of deed	State dial City CA 920
	Telephone
a 1	Invoice #

## AGREEMENT FOR BEFORE-NEED CREDIT LOT SALE

This Agreement entered into this 29 day of, 1985,
between to l' Bitte Thank? 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 186, Grave, Row, Section
2, Block/Division 2, located in Mt. Hope Cemetery, for and in
consideration of a total purchase price of \$, payable as follows:
\$ cash herewith, the receipt of which is hereby acknowledged;  \$ on the \( \text{0} \) day of \( \text{lizable for the } \), 1988; and the
balance in installments of \$ 20.000 or more, payable at the office of
Mt. Hope Cemetery, on the /O 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 INTER-
MENT 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 ONLY THE INTERMENT RIGHT IN 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 the Cemetery's Perpetuity Fund. This Perpetuity Fund provides income for the care and maintenance of all portions of the Cemetery.

WITNESS our hands this day and year above written.

Deed to be issued to:

23.0 \$30.00 .10 \$35.00 Frank & Letty James

Name 3

68-650 Sepond Street # 176

Address

Catherdal (tte, la 92234

PURCHASER

Betty L. Homes

68-650 Second 56 Street Address (Mail)

Cathelial City Ca 92234
City State Zip Code

CITY OF SAN DIEGO Mt. Hope Cemetery

By: Andra J- Ward

Thomas, Frank & Betty



trom

#### MT. HOPE CEMETERY

3751 MARTIN L. KING WAY (Formerly Market St.) SAN DIEGO, CA 92102 (619) 264-3151

May 4, 1989

Betty Thomas 68-650 Second Street, #176 Cathedral City, Ca 92234

Dear Mrs. Thomas.

The discrepancy in your coupon payment date occurred when you elected to pay your final payment, coupon 24, first. (account E-7511) Because you paid coupon 24 first all your payment dates are now one month off.

Just ignore the month due stated on your coupon and continue your payments as you have been. Your account is current and there has not been any late charges accessed.

I hope this will clear up the confusion.

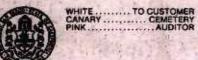
Sandra Ward

Admin. Aide II

attachement

april 30, 1989 E7511 World ym please et me know why my payments are mixed up & lalway home to send the previous months conjun? and I please home The amount I The balance due m each account? sery truly yours Betty Z. Thomas Cathedras City, Ca

68-650 Second SX # 176 Withedraflety, Ca



## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY 264-3151

CITY AUDITOR

39112

APR 1 6 1990

rom: 3/10,1 , Bitly M	Address: 68-650 314	St ACA	thedi	1 Colo	1990
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ot 116 Grave	/ Rows	ection 2	**	Division -	12
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re-Need Lot At Need On Acct		Containers  Handling Fee Recording & Misc, Fees Prs-Need Trust	77182 — 100 77185 — 100 77183 — 63033 9022 —	.57	w
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Invoice No.

BALANCE DUE

Pre-Need Lot

AC-212 (Rev. 10-87)

Cash

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

Payment of

Grave

On Acct

Check

MOT VALID FO

ISSUED BY

# CITY OF SAN DIEGO, CALIFORNIACITY AUBITOR PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY MAR 2 0 1990

tress: 67-6-5 240	Date:	3-9 /6 (5)	the 12.00	1990
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#### OFFICIAL RECEIPT 38874 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY CEMETERY MOUNT HOPE CEMETERY PINK ... AUDITOR 264-3151 Division Section. Grave Row NOT VALID FOR PURPOSE STATED LINE ESS STAMPED CREDIT 67007 77164 Invoice No 20% Sales Care 80% Sales 77184 of Lots Acct. No. Opening/ 100 FEB 2 0 1990 Closing 77181 Burial 100 Containers 77182 BALANCE DUE Handling Fee 77185 Recording & Misc. Fees 77183 Pre-Need 63033 Pre-Need Lot Trust Pre-need Trust Sales Tax 60101 78390 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)

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NAM.	lue dal	if paid le abov	more ti	nl»		~	- 83	alufa			

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

	264-3151	Date:	-9 1990
From Lette Janea	2 Address 68-650 N	leaned 5	100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
In Payment of	14 pm 15 (11	ut de	
Lot 186 Grave		ection 2	Division / 2
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	20% Sales Care 77 80% Sales	1007
Acct. No. 21-75//		Opening/ Closing 77	7184 100 100
BALANCE DUE 160-00	CITY AUDITOR	Containers 77 Handling Fee 77	100
Pre-Need Lot At Need On Acct	JAN 1 6 1990	Misc. Fees 77 Pre-Need 63	100 1183 0033 0022
Pre-need Trust Cash Check ACAC-212 (Rev. 10-87)	ISSUED BY ANDLA MALA		1000

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WHITE ..... TO CUSTOMER

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

CANARYCEMETERY PINKAUDITOR	MOUNT HOPE CEMETERY 264-3151	10		
From: Lette, And	1 13 Address 680 201	Date:	176 00	19.0
In Payment of	willer 19 (40	Dollar Not	20-0	1) (
-186		2	Division /	2
Lot Grave_	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID: IN THIS SPACE.	CREDIT 670 20% Seles Care 771		
Acct. No. 9- 751/		of Lots 771 Opening/ 1 Closing 771 Buriel	OF CITY ALD	on-
BALANCE DUE 180,00		Handling Fee 771 Recording & 1	DEC 14	TOR
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		Misc. Fees 771 Pre-Meed 630 Trust 90 Sales Tax 601	33 22 01	389
402	ISSUED BY MINA A LONG	TOTAL PAID	. 20	10

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CITY OF SAN DIEGO, CALIFORNIA

From: La	MOUNT HOPE CEMETERY 284-3151  Address 67-650 10	Date: //	-9 1989 4116 20.00	
Lot Grave Grave Acct. No.	ROW S NOTVALIDEOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	GREDIT 67007 20% Sales Care 77184 - 80% Sales 100 of Lots 77184 - Opening/ 7181 -	Division Block  Auton	n
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 10-87)	issued er a da la	Burial 100 Containers 17182 - 100 Handling Fee 77185 - Recording & 100 Misc. Fees 77183 - 100 Pre-Need 63033 Trust 9022 - 5eles Tax 60101 TOTAL PAID \$	20 00	

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#### OFFICIAL RECEIPT 38048 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT CANARY ... TO CUSTOMER CEMETERY **MOUNT HOPE CEMETERY** AUDITOR 264-3151 Date: Address Dollars (\$ . Payment of Division Section Grave NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT . 67007 Invoice No. 20% Sales Care 77184 50% Sales 100 of Lats 77184 Acct. No Opening/ Closing 77181 Buriel Containers 77182 BALANCE DUE 100 Handling Fee 77188 Recording & 100 1989 Misc. Fees 77183 Pre-Need 63033 On Acct Pre-Need Lot 9022 Lates Tax Pre-need Trust 50101 78390 Cash

TOTAL PAID

ISSUED BY

AC-212 (Rev. 10-87)

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

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

N2 37918

	204-315	Date:	-8	1969
From Little Sama	Address: 68 650 W	and It	# 176 Jars 1820	Miller
In Payment of	Caigon 11. Cle	det de	-	
Lot 186 Grave		ection	Divisio Block	
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	20% Sales Care 90% Sales	67007 77184	20 005
W.O. 57-75/		Opening/ Closing Burial	77184 100 77181 <b>CFT</b>	YAUSTOR
BALANCE DUE 290.00		Handling Fee	100 77185 100 77183	1 8 1989
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	And the s	Pre-Need Trust Sales Tax	63033 9022 60101 78390	
AC-212 (Rev. 10-87) 5575	ISSUED BY	TOTAL PAID		000

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						S				
IAME			An	nount l	Receive	ed \$	_			

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

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 38386

PINKAUDITOR	MOUNT HOPE CEMETERY		The state of the s
	264-3151	Date: 19110	P. 8-
From	Address: 66 630 3	20001-1	7500
In Payment of Cro	dit 12 Proposed	Coupon Collars (\$	0,11
Lot 186 Grave		ection Q	Division Block
Acct. No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 77184 — 20% Sales 100 of Lots 77184 — Opening/ 100 Closing 77181 — 77181 —	CMAIN
BALANCE DUE 695.45		Closing 77181 — Burist 100 Containers 77182 — 100 Handling Fee 77185 —	AUG 1.2 1989
Pre-Need Lov B At Need D On Acct		Recording & 100	57 =
Pre-need Trust Cash Check Cash AC-212 (Rev. 10-87)	ISSUED BY RYCKED	Sales Tax 90101 78380 — TOTAL PAID \$	77=

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Frank & Betty Thomas 68-650 Second, \$176 Cathedral City, Ca 92234	
Month and Day Due Indicated Below	74.00
NOV DEC JAN FEB MAR APR MAY JUN JUL AUG S	EP OCT
Amount due when paid on, or before, 57 .00	
Amount due if paid more than 20 days safter due date above.	
MANUFACTURE PROPERTY AND ADMINISTRA	
NAME Amount Received \$	
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CITY STATE ZIP	- 4



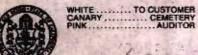
#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

Mº 38237

From: JAMAK + BITTY TI LWENTY C	nominadress 68-650 Second Ollars notion		lg l	70.0	1089
Lot 186 Grave Involce No.  Acct. No.  W.O. E - 7511  BALANCE DUE \$280.00	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Cere 80% Sales of Lots Opening/ Closing Burial Containers	67007 77184 — 100 77184 — 100 77181 — 100 77182 —	Division / Block _ /	2 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check PAC-212 (Rev. 10-87)	ISSUED BY Sharm & Crain	Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	77185 — 100 77183 — 63033 — 9022 — 60101 78390 —	JUL 1 (	1989

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## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

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Twente dall	Me			Dollars (\$6	20,00	) (77
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an	July			7883		100
Lot . 186 Grave_	1	Row	Section	A	Division /	2
Invoice No.	NOT VALID FOR PURPO	SE STATED UNLESS ST	CREDIT 20% Sales Can	67007		
Acct_No.		SE STATEDUNLESS STA	80% Sales of Lots	77184	20	00
w.o.	THE PARTY	CITY AUL	9 Opening/ Closing Buriel	77181 — 100		
BALANCE DUE 300,00		MI.	Containers	100	The sales	
		20.	Handling Fee Recording & Misc. Fees	77185 — 100 77183 —	j 14 . 16	
Pre-Need Lot At Need On Acct		12	Pre-Need Trust	63033 9022 —		
Pre-need Trust Cash Check	vh.		Sales Tax	60101 78390 —	4/5	_
AC-212 (Rev. 10-87) 5524	ISSUED BY	reif	TOTAL PAID		20	00

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WHITE... TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

PINKAUDITOR	MOUNT HOPE CEMETERY 284-3151		
From Betty & Shon a	A) Address 108-1050 Section	Date: 5-3	dral att CH
Swelt god land	60/10 COLUMN 11	Dollars	10.00 922
to YULT Payment of CAU	act w, coupic w	A LEGISLE	
Lot: 1860 Grave		ection 2	Division (3)
Invoice No.	MOTYALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	20% Sales Core 7718 80% Sales Core 10	
Acct. No	<b>国政治学</b> 的。2015	of Lots 7718 Opening/ 10 Closing 7718	W Die
BALANCE DUE 320.00		Buriel 10 Containers 7718	8 1980
	THE RESERVE TO THE	Handling Fee 7716 Recording & 10 Misc. Fee 7716	7
Pre-Need Lot At Need On Acct Pre-need Trust O Cash O Check		Pre-Need 6300 Trust 906 Sales Tax 6010	N S S S S S S S S S S S S S S S S S S S
5478	ISSUED BY HOLD BLACK	TOTAL PAID	2000

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mou	int due due da	if paid te abo	more t	Les V	10d		s s ed S		.00	1	X
vmou itter	int due due da	if paid te abo	more t	Les V			s s		.00		`

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

WHITE TO CUSTO CAMARY CEMET PINK AUDI
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	CAMARY CEMETERY PINKAUDITOR	MOUNT HOPE CEMETERY 264-3151		,, ,		10
From:	t Morros	Address: 67-650 6	Date:	# 1	一样"	26
tim	45, 110	110	Do Do	Hare (\$ 2)	0.00	
In 1	Payment of	ugan a lu	uci or	4	C Res	
LOT 180	Grave_		ection_ a	Divi	sion/2	
Invoice No		NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales	67007 77184	20	7/1
Acct. No.	:7511	CHYAUON	of Lots Opening/ Closing	77184	000	
BALANCE DU	340.00	APR	Burisi Containers	100 77182	400	100
SALANCE DO		APR 21 198	Handling Fee Recording & Misc. Fees	77186	E-1802	
Pre-Need Lot Pre-need Trust	At Need On Acct		Pre-Hend Yrust Sales Tax	63033 9022 60101 78390		100
AC-212 (Rev. 10	-1/29	ISSUED BY MALL MIL	TOTAL PAID	78390	20 6	0

DO	NOT	one co	ENTIF	RE BO	OK		• C			7	6
ACC	COUN	T No.	C	red:	LE I	ot		E	-751	4	
68	3-6.	t & 50 S	Sec	ond	Sti	ree	t, i	A 100 C	6	Sell part	Same of
		Mon	th ar	id Da	y Do	e in	dicat	ed B	elow	6	To a
JUN	JUL	AUG	SEP	OCT	NOV	DEC	NAL	FEB	MAR	APR /O	MAY
	nt due ite abo	when p	ald on	or be	lore.	)	\$	20	.00		
Amoui ifter d	nt due lue da	if paid o	more ti	nan_1	LO da	ys )	> 5	1	.00		
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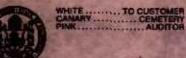
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WHITE ...... TO CUSTOMER

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINKAUDITOR	MOUNT HOPE CEMETERY	100000	10000000000000000000000000000000000000	
04-11		Date: 3	-10	
From Late Manual	Address: 60-650	Ment.	74/1	, Cottle 16
Male 201	100	D	ollars 18 DO	O) tet
In Payment of	Caupan 6 Cl	all o	MI.	
Lot 186 Grave	/ Row S	Section	O Division	01/2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	GREDIT 20% Sales Core	67007 77184	
Acct. No.	PROPERTY.	60% Sales of Lots Opening/	77104	80 00
w.o. 8:7577		Closing Burist Containers	77181	CITY AUDITOR
BALANCE DUE 360 -(D)		Hundling Fee	11/100	AD TOR
Pre-Need Lot At Need On Acct	1	Hecording & Misc. Fess Pre-Need	77183 63033	1989
Pre-need Trust Cash Check	hade the	Soles Tax	9022 60101 78390	
AC-212 (Nov 10-07) 5400	Issued by White Con	TOTAL PAID	. 6	80 OD

DO ACC	not count ank -65	MAIL T No.	ENTIF E Bet Seco	E BO	OK 111. The Str	mas		Cre	dit	Lo	) t
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MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR
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mou	ite abo nt due lue da	if paid	more t	han	10 <sub>d</sub>	rys	5		.00		355
				-	000000	42730	\$	<b>.</b>	2	0.0	v
NAM	E /	3 6	F		1	Receiv	See Mary	-=	٠.	11	,
ADD	RESS	68	-6	50	2	ec	one	1	54	*/	76
CITY	al	he	dia	0	lly	STA	TE C	a	ZIF	92	234
			chec	K (1	) if t	his i	s nev	v add	dress	ē.	



#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 24-3151

		Date:	2-7	19 29
From: Lette Shamas	2 Address: 68-650 6	teand	#176	Cotted
In Payment of	laugar 4 1	Wdet	Collars (\$ 2	
Lot 186 Grave	Rows	Section	2 Divis	ion /2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	20% Sales Care 30% Sales	67007 77184 100	20 00
Acct No. 2 - 757/	CITYAU	Sarial	77184	
BALANCE DUE 380	FEB 10	Containers 198 Micording & Misc. Feen	77182 100 77185	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	1,11	Pre-Need Trust Sales Tax	77183	
AC-212 (Rev. 10-97)	ISSUED BY MILLE / COL	TOTAL PAID	78390 	20 0

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lmou litter (	nt due due da	f paid te abo	more t	han_j	O da	ys ]	<b>s</b>	1	.00	,	
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. Mil.	RESS	. *	e v		nount	Receiv	ed S	_			
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# WHITE ..... TO GUSTOMER

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINKAUDITOR	264-3151	Date:	1-3		.89
From Lette Homes	Address: 68-650 S	Sound	no. 1	26,0	Thes
In Payment of	ugon 3 Ou	det a	Dollars (\$	20_00	<u></u>
Lot 196 Grave_		ection	2	Division /	2
Acct. No.	NOTVALIDEOR PURPOSE STATED UNCOSES STAMPED "PAID" IN THIS SPACE.	CHEDIT 20% Sales Care 60% Sales of Lots	67007 77184 100 77184	20	00
wo. 8 - 75//	JAN 09 1988	Opening/ Closing Burisl Containers	77181 — 100 77182 —	A VITTO	
BALANCE DUE 700.00	1988	Hencking Fee Recording & Affec Fees	77185 100 77183	2 - HE 17	
Pre-Need Lot At Need On Acct O	Andra Main	Trust Sales Tax	69033 9022 — 60101 78380 —	20	75
AC-212 (Rev. 10-97)	18SUED BY WILLIAM STATE OF THE	TOTAL PAID		00	00

Fr 68	ank -65	0 S dra	Bet eco 1 C	ty nd ity	The Str	eet a	922	176 34		Lo	
100		Mon	th ar	nd D	ny Di	ue in	dicat	ed B	elow		
MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	MOA	DEC	JAN	FEB
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mnu	of drap	when i	naid an	or he	fore	0				10	
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lue di Amou	nt due	ve if paid	moret		v	iys	-5750	1	THE PARTY OF		
lue di Amou	nt due due da	ve if paid	moret	han_	v		<b>s</b>	1	THE PARTY OF		
Amounter o	nt due due da	ve if paid	moret	han_	10 de		<b>s</b>	1	THE PARTY OF		

WHITE ..... TO CUSTOMER

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINKAUDITOR	284-3151			00
The Vallan	12 (8-657)	Journ D	11-1	10 10 10
some John John	an 9/00	D	ollars (\$ 7	5.00
n Payment of	upon , Wilde	7 det	and	
ot: 190 Grave	2 Telescool	Section_	2 Div	ision /2
nvoice No	NOTYALID FOR PURPOSE STATED UNLESS STAMPE PAID IN THIS SPACE.	COPPOR	67007 77184	20 00
NO.2-75/14 E-76/3	Nov	Opening/ Closing	77184 100 77181	7000
BALANCE DUE 440 SAT	<b>经济经济企业</b>	1988 Pandling Fee	77182 100 77185	
Pre-Need Lot At Need On Acct		Recording & select Feed Pro-Need Trust/)	100 77163 83033 9022	3900
Pre-need Trust & Cash Check &	ISSUED BY Andra IL	Sala tex	60101 78380 \$	77 00
	DESCRIPTION OF THE PROPERTY OF THE PARTY OF	The State of the S	TO THE REAL PROPERTY.	STATE OF THE PARTY OF

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AC	COUN	MAIL T No.	E	-75	11			Cre	dit	Lo	t
68	-65	6 &	eco	nd	Str	eet	. #	176	,		
Ca	the			-			922 dicat			16	
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Amou ofter (	nt due due da	it paid i te abov	moreti ve.	nan	10 <sub>da</sub>	ys	5	1	•00		
		*					5	21	.00		
NAM	E			Ап	naunt l	Receive	ed \$				
ADD	RESS										
CITY						STAT	E		ZIP		

nd or bring one cou	pon with each remit	tence COUPO	N 2
DO NOT MAIL E	NTIRE BOOK		_
ACCOUNT No	P-7612	Duonand	TT

Frank & Betty Thomas 684650 Second, #176

Carl Sales								ed B			
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							\$		58.	00	
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NAM											
ADD	RESS						_		_		

36613

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

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

	264-3151		1		00
Lank Alde	May 1860 A	Date:	106	tatte!	80
From Tiect Ye	Nodes College		ollars (\$	35.02	),
InPayment of	ugn 24, Cide	T day			
Lot : 186 Grave_	RowS	ection	2	Division /	2
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 50% Sales	87007 77184 —	.75	20
Acct. No. E - 4511		of Lots Quening/	77184 — 100 77181 —		
BALANCE DUE 460 CV	CITY AU	ALAMAN Fee	77182 — 100 77185 —	100	
Pre-Need Lot At Need On Acct	SEP	Misc. Fees Pre-Need Trust	100 77183 — 63033 9022 —		
Pre-need Trust Cash Check	ISSUED BY TOTAL MES	Seles Tax TOTAL PAID	60101 78380 —	35	00
0237			The state of	STREET, SQUARE, SQUARE	

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MOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	INT	AUG	SEP	OCT
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			paid on	, or bel	ore.				20.		
ue da	ite abo	ve.					S		20.4	PV	_
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	1117,										
	E		1.65	An	nount F	Receive	d S	_			
MAN											
ADD	RESS	210	Developed to								

# Send or bring one coupon with each remittance COUPON

DO NOT MAIL ENTIRE BOOK

ACCOUNT No. Credit Lot

E-7511

Frank & Betty Thomas

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end or bring one coupon with each remittance COUPON 19															
	DO NOT MAIL ENTIRE BOOK  ACCOUNT No.														
AU	ACCOUNT NO.														
A T	68-A50 Second Second 5176														
90	68-650 Second Street, #176														
La	Cathedral City, Co. 92234														
	Month and Day Due Indicated Below														
JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN				
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Send or	bring 9	one co	upon w	ith eac	ch rem	ittance	CC	DUP	ON	7	1			
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que da	ite abo	ve.					\$	20	UB					
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ADDRESS				12 5						
CITY		hack	. 1 /		STAT			ZIP		
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Send or bring one coupon with each remittance COUPON 72										
DO NOT MAIL ENTIRE BOOK										
ACCOUNT No.										
France & Betty Thomas										
68-650 Second Street, #176										
Cathedral City, Ca 92234										
Month and Day Due Indicated Below										
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Amount due when paid on, or before,										
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2 1 1										
Belin Full s										
Amount Received \$ 20.00										
Amount Received \$NAME										
ADDRESS										
CITY STATE ZIP										
☐ check ( ✓ ) if this is new address										

### MT. HOPE CEMETERY

# INTERMENT ORDER

City of San Diego

Date 6-30-88

You are hereby authorized and instruct	ed, subject to your rul	es and regulation	s, to inter the rem	ains
of Text Ou	wrence	Dees	woon (	X)
ina ask built	– Funeral, date, tir	ne Wed	apm 7	13
Church, Chapel, Graveside	reside.	Teloph	NOCE Mort	uary.
All Funeral cars must arrive before 3:3	On m. of regular wor	k day or an evtra		1
and billed to undersigned. War time ve		k day of all excla	criarda seu pe abl	pilou
and billed to differ signed. War tille ve	C	Ø.	-	
Lot Grave Row	Section	Divis	ion/Block	
Mario Volume III	w. cl			
Grave space & Care Fund	W + Jan		*****	-
Additional spaces and care fund	N. Reconst		105	N
Opening/Closing & Setup Of.L	7 (0	/	/05/	70
Burial Container		******	40.	. UC
Handling Fees		***********	60.	-00
Flower vases - Marker setting fee	<b>3</b>		<del></del>	-17
Recording and filing fee	D./		<u>త</u> 5,	00
Sales taxes		**********	<u> २.।</u>	<u>60</u>
	303	Total Due	242	60
	Paid receipt number	3639	242.	60
	1. 250 (Alexandra 1904)	Rala	nce due	•
n,	1359			
I hereby certify I am the loss and this is your authority to make dispe	w	of the a	bove named dece	edent
that I have the right to make this author	ization and lagree to	hold Mt. Hope Ce	metery harmless	from
any liability on account of said authoris	zation and interment	00	0 1	e e
I hereby authorize the interment in lot	alla	wyer	endson	2
hold under deed.	1904	LE 13 MAVE		
Signature of reformed helder of deed	VANC	OUVER B.C	CANADA.	
	State		V5N-201	Zip Code
	Telephone	872 - 14	.94	
± .	lavetee			
Wat add E 7512	Invoice	-		
Work Order # U.L.W	_ Acct. #			

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36397

	284-3151		08.5	Con Pho.	0
	. 000	Date: 7	-/	1	900
rom: MIRC / CUE	DINGER				
	0	Do	llars (\$ 4	242.	60
Payment of Ze	il di Wilson	is G	us	une	3
	0		Tige?		77
ot 7 Grave	9 Rows	section		Division /	7
tvoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	87007 77184		
cct. No.	CITY AUDITOR	80% Sales of Lots	77184	125	(1)
10 E-75/2		Opening/ Closing Burial	77181 — 100	105	00
ALANCE DUE	JUL 13 1988	Containers	77182	60	20
		Handling Fee Recording &	77185	35	00
re-Need Lot At Need On Acct		Misc. Fees Pre-Need Trust)	77183 — 83033 9022 —	Die Control	
re-need Trust Cash Check C	166,466	Sales Tan	60101 78390 —	2	60
C-212 (Rev. 10-87)	ISSUED BY THE MAN A WAY	OTAL PAID		242	60

# CHANGE OF DISPOSITION

# PERMIT FOR DISPOSITION OF HUMAN REMAINS

E75/2

		USE BLACK INK-MAKE NO ALIE	KATIONS OR EKASURE	:5			
NAME OF DECEDEN	T		SEX	DATE OF BIRTH	DATE OF DEATH		
Leif Lav	vrence Leifson		Male	01-07-1898	06-28-1988		
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY IOR ST	ATE # NOT IN CALIFORNIA)	NAME AND ADDRESS OF	SPOUSE OR OTHER INFORMANT		
National		San Diego		PER AUTHOR	ZATION:		
NATELYOPPIAS 1333 Camir	SEP SOUTEPATOR FOR PERSON A TO del Rio S. San	Diego, CA F	1272	160 Castle Oakville Or	Cresent L6J5H		
	TYPE OF PER	MIT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF		W. S.		
☐ 1 BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND BURIA ENTOMBMENT)	AL (INCLUDES	B DISINTERMENT AND I	REINTERMENT OF CREMATED INURNMENT)		
х	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMATIO	N. AND BURIAL	9 DISINTERMENT OF CE	REMATED REMAINS AND THAN IN A CEMETERY		
CEMATION AND DISPOSITION OTHER THAN IN A CEMETERY SCIENTIFIC USE		2 DISINTERMENT, CREMATIO OTHER THAN IN A CEMET		FOR CORONER'S USE ONLY			
INTERMENT	NMt.AndHODES CEMETER 3751 Market St.	San Diego, CA		1 1 1 1 may	unry San Diego		
CREMATION	"CREMAR" CREMATURY 2299 S. Mancheste	WHERE REMAINS ARE TO BE CREMATED	7-1-1988		CHARGE OF CHEMATORY		
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY OF STED REMAINS	N/A	LINE, OR OTHER DESCRIPTION SUFFIC	IENT TO IDENTIFY FINAL	PLACE AND COUNTY OF DE	SPOSITION		
USE USE	NAME AND ADDRESS OF FACILITY REI	CEIVING REMAINS					
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dec- and I hereby acknowledge that to this permit gives no right of unres	th and Safety Code, and understand that	SIGNATURE RAPAGITHORIZATION BY:  Date Signed  August 31, 1988				
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORINA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS DE MA DO	DATE PERMIT ISSUED	SIGNATURE OF LOCAL REC			
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED SPOSITION WAS MADE ON	ATTA DATE	PERSON IN CHARGE OF I	DEPOSITION LICENSE	NUMBER OF CREMATED REMAINS R, IF APPLICABLE		
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH			40		

COMPLETING THE PERMIT AND FORWARDING THE COMPLETED PERMIT WITHIN 10 DAYS OF DISPOSITION TO THE REGISTRAR OF THE DISTRICT IN WHICH DISPOSI TION OCCURRED OR THE DISTRICT NEAREST THE POINT WHERE THE CREMATED REMAINS WERE BURIED AT SEA. THE LOCAL REGISTRAR MAY DESTROY ANY ORIGINAL OR DUPLICATE PERMIT AFTER ONE YEAR

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

\W	Date 6-20-80
You are hereby authorized and instructed subject to	o your rules and regulations, to inter the remains
7	, date, time
Vault/Liner	: Mortuary.
Church, Chapel, Graveside	A STATE OF THE PARTY OF THE PAR
All Funeral cars must arrive before 3:30 p.m. of reg	Jular work day or an extra charge will be applied
and billed to undersigned. War time veteran	
Lot Grave Row	Section Division/Block
Grave space & Care Fund	495.00
Additional spaces and care fund	
Opening/Closing & Setup	
Burial Container	
Handling Fees	(1)
Flower vases - Marker setting fee	או
Recording and filing fee	<u> </u>
Sales taxes	
	Total Due
Paid receipt	number
9.715.175.24	Balance due
I hereby certify I am the	agree to hold Mt. Hope Comptery harmless from
I hereby authorize the interment in lot I hold under deed.	Joursey Nous
Signature of recorded holder of deed	Stan Diego CA. 9211.
	Telephone
E =	Invoice #
Work Order # E 7513	Acct. #

WHITE TO CUSTOMER CANARY CEMETERY PINK, AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-2181

PINK	MOUNT HOPE CEMETERY
From Doroth Down	Date: 4-11 199
twenter one	result det dat
In Payment of	and I could do
Lot Grave	12 Row Section 2 Division //
Acct. No. 81 - 75/3	NOT VALID FOR PURPOSE STATED UNLESS STAMPED  CREDIT 20% Sales Care 77184 20% Sales 100 of Lots 100
BALANCE DUE 474.00	APR 17 1989 Handling Fee 77185 Recording & 77185 Pre-Meed 83033
Pre-Need Lot At Need On Acct Pre-inced Trust Cash Check Pr	ISSUED BY Andra Ward TOTAL PAID 8 21 00

Dorothy Rouse . 4 705 S. 45th Street San Diego, CA 92113

Month and Day Due Indicated Below

JAN	FES.	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	MOA	DEC
			10					Į į		V2 5	

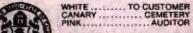
Amount due when paid on, or before, due date above

Credit Lot

Amount due if paid more than 10 after due date above.

21.00

check ( / ) if this is new address



## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 37829

Dorotte Par	264-3151	Date:	5-1	est.	19.85
In Payment of	Rugh 2 Or	auto	ollars (\$	21.0	),
Lot 2 Grave		ection	2	Division Block	/
Acct. 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 ——	That/	00
BALANCE DUE 453.0)		Closing Burial Containers Handling Fee	77181 MA 100 MA 77182 —	1 9 198	OR O
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	, , , , ,	Pecording & Misc. Fees Pre-Need Trust Sales Tax	100 77183 — 63033 9022 — 60101		
AC-212 (Rev. 10-87)	ISSUED BY TO A MILE	TOTAL PAID	78390	21	00

DO NOT MAIL ENTIRE BOOK

ACCOUNT No. E-YYXX 7513 Credit Lot

Dorothy Rouse 705 S. 45th Street San Diego, Ca

onth and Day Due Indicated Below

MAR APR MAY JUN JUL AUG SEP OCT NOV DEC

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

20.00

Amount due if paid more than 10 days after due date above.

# WHITE ...... TO CUSTOMER

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

Nº 38191

PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151	Date: 6	-27 188
From: togethe Kalla	10/108 95	1 1 th	10 2/10 )
In Payment of	gruger 3 cue	det dos	
Lot Grave	/2 Row	ection	2 Division /
Acct. No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	50% Sales of Lots 7: Opening/	7007 7184 100 2/ 00
BALANCE DUE 132.00		Burisi Containers 7: Handling Fee 7: Recording &	7181
Pre-Need Lot	ISSUED BY Land	Pre-Need 6 Trust 6 Sales Tax 6	7183 1989 3903 1989 1902 19101
AC-212 (Rev. 10-87)	ISSUED BY	TOTAL PAID	- 01100

# lend or bring one coupon with each remittance COUPON

DO NOT MAIL ENTIRE BOOK ACCOUNT No. E-7513

Credit Lot

Dorothy Rouse

705 S. 45th Street

San Diego, CA 92113

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

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

\$ 20.00

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

\$ 1.00

NAME Larally Amount general S

CITY Dar Biogo STATE CA ZIP9211

☐ check ( / ) if this is new address



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

12 38408

From DOROTHY ROUSE	755 45 HST.	Date:	8-10-	19 89
TWENTY-ONE DOLL In part Payment of Che	ARS AND XX/100	-10101	olters (\$ 21,00	2_,
Lot 2 Grave	1/2 Row	Section 2	Division Black	11
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	20% Sales Care	67007 77184 100 77184	00
W.O. E 75/3 BALANCE DUE \$4/1.	CITY AUDIT	Opening/ Closing Quriel Sontainers Handling Fee	100 77181 ——————————————————————————————————	
Pre-Need Lot At Need On Acct	The second secon	Trust	100 77183 63033 9022	
Pre-fieed Trust U Cash U Check P	ISSUED BY W. J. Traque	Sales Tax  TOTAL PAID	* 2/	00

# and or bring one coupon with each remittance COUPON

DO NOT MAIL ENTIRE BOOK

ACCOUNT No. E-XXXX 7513 Credit Lot

Dorothy Rouse 705 S. 45th Street San Diego, Ca 92113

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

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

Amount due if paid more than 10 days after due date above.

\$ 1.00

NAME SAVAGE SAMOUNL Received \$21-00
ADDRESS 705 S 45-8

Check ( / ) if this is new address

### OFFICIAL RECEIPT 38040 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT TO CUSTOMER CANARY CEMETERY MOUNT HOPE CEMETERY AUDITOR 264-3151 From: DOROTHY KOUSE Dollars (\$ 10,00 Division Grave Row Section Lot NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 Invoice No. "PAID" IN THIS SPACE. 20% Sales Care 77184 80% Sales of Lots 77184 Acct. No. 100 Opening/ Closing 77181 OP Burial BALANCE DUE 392,00 Containers 77182 Handling Fee 77185 Recording & 100 qon Misc. Fees 77183 Pre-Need 63033 On Acct Pre-Need Lot 9022 Trust Seins Tax 60101 Pre-need Trust Cash Check 78390

TOTAL PAID

ISSUED BY

AC-212 (Rev. 10-87)

NAME PARALLA AMOUNT Received \$40.00

ADDRESS 7050 \$ 45 St

CITY SAN LIEGO STATE CA ZIP 92 []



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

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

12 38687

From: Docothy Pouse	Address: 7	05 5. X5E	Date:	1/15		1989
Towns - one and	ed t lot		0	ollars (\$	2/00	2)
Lot 2 Grave	12	Row Ser	ction 2		Division Block	11
Acct. No	NOT VALID FOR PURPOSE ST "PAID" IN THIS SPACE.	ATED UNLESS STAMPED	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burisi Containers	67007 77184 - 100 77184 - 100 77181 - 100	2/ CITY AUG	OR OR
Pre-need Lot At Need On Acct Pre-need Trust Cash Check			Handling Fee Recording & Misc. Fee Pre-Need Trust Sales Tex	77182 - 100 77185 - 100 77183 - 63033 9022 - 60101	DEC 26	1089
AC-212 (Rev. 10-87)	ISSUED BY	1 Stridale	TOTAL PAID	78390	21	00

6

ACCOUNT No. E-XXX 7513 Credit Lot

Dorothy Rouse 705 S. 45th Street San Diego. Ca 92113

Month and Day Due Indicated Below

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

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

20.00

Amount due if paid more than 10 days after due date above.

1.00

:21.00

NAME LATER Amount Received \$ 21.00

CITY Divigo STATE (A ZIPY)

☐ check ( / ) if this is new address

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

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

Nº 38767

	264-3151	ALL COMPANY	1912		0
40		Date:	1-10	1	2/0
From: + OTALLE KOUS	Address: 100 0 4	5-10	Alle	1	0
Tocile 1911	and	Do Do	ollars (\$ @	10.00	),
InPayment of	weeder 7. Me	det of	7		
Lot 2 Grave	12 Row	ection	2	Division //	/
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184	715	
Acat No.		80% Sales of Lots	77184	80	00
wo 2-15/3	CITY AUDITOR	Opening/ Closing Burial	77161	100	
BALANCE DUE 257.00	A A A A A A A A A A A A A A A A A A A	Containers Hendling Fee	77182		
	JAN 1 6 1990 ,	Recording & Misc. Fees	100	74 14	
Pre-Need Lot At Need On Acct		Pre-Need Trust	63033		
Pre-need Trust   Cash  Check	ISSUED BY FINALA M	Sales Tax	60101 78390	// /	10
AC-212 (Rev. 10-87)	ISSUED BY A PACE TO	TOTAL PAID	(3)	20	w

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nou	due da	te abo	ve.	-	hount	Receive	\$	2	0.	00	2_

### CITY AUDITOR OFFICIAL RECEIPT 38965 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERWAR 1 2 1990 PINK ..... AUDITOR Division Section Grave Row NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 77184 Invoice No. 20% Sales Care "PAID" IN THIS SPACE 80% Sales 100 of Lots 77184 Acct No. Opening/ 77181 Closing Burial BALANCE DUE \$310.10 Containers 77182 Handling Fee 77185 Recording & 100 Misc. Foes 77183 Pre-Need 63033 Pre-Need Lot At Need On Acct Trust Pre-fleed Trust Cash Sales Tax 60101 78300 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)

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# Dorothy Rouse 705 S. 45th Street

San Diego / Cs 92713 \*\*
Month and Day Due Indicated Below

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

20.00

Amount due if paid more than 10 days after due date above.

2 1.00

NAME AUTOUR AMOUNT Received \$ 21.00

CHOCKEN GILL STATE A ZIP

#### OFFICIAL RECEIPT CITY AUDITOR 39155 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CEMETERY MOUNT HOPE CEMETERY APR 30 1990 AUDITOR PINK ... 284-3151 Date: Address: Dollars (\$ X 1 0 0 3 Ro164 Payment of Division Grave Bow Section Lot NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 77184 Invoice No. "PAID' IN THIS SPACE. 20% Sales Care 00 BON. Spins 100 of Lots 77184 Acct. No. Opening/ Closing 011103 77181 Burist Containers 77182 BALANCE DUE 100 Handling Fee 77185 Recording & 100 77183 Misc. Fees Pra-Naed On Acct 83033 Pre-Need Lot Trust 9022 Pre-need Trust Cash Sales Tax 60101 76300 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)

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	DEC )	-		_					AUG	SEP
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Amount due v due date abov Amount due i	/e.	No. of Car	April	8500TU		> 5	2	0.0		
after due dat	e aboye	'	ON L	- Ald	Ja	<b>\$</b>		1.0		
NAME			Ап	nount F	Receive	nd \$	6	?/.	0	<u>)                                    </u>
ADDRESS								_		
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WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

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		Date:	. 1970
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10/1	10 101		
In Payment of		Walter Control	
The state of the s			Division
Lot Grave	RowS	ection	_ Black _//_
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 -	
Acct. No.		90% Sales 100 . of Lots 77184 -	4000
F 11512		Opening/ 100 Closing 77181 -	100
W.O. K TOTO		Burial 100 Containers 77182 -	C. 2 100
BALANCE DUE		Handling Fee 77185 -	700
	Particle to	Recording & 100 Misc. Fees 77183 -	Mil
Pre-Need Lat At Need On Acct		Pre-Need 63033 Trust 9022	
Pre-need Trust Cash Check C	1 2	Sales Tax 80101 78390 -	77.
'AC-212 (Nev. 10-87) . UUT	ISSUED BY	TOTAL PAID \$	40 W

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WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

FORTY ALACTARS -	Address: 105 45 5	Date: 7- 5 5 0. 7.	2113 (s 40.00)
Lot Grave	/2	ection	Division //
Acct. No	NOT VALID FOR PURPOSE STATED LINLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 77184 80% Sales Care 77184 001 Lots 77184 Opening/ 100 Closing 77181 Burial 100 Containera 77185 Handling Fee 77185 Recording & 100 Misc. Fees 77185	40 0
Pre-Need Lot At Need O On Acct Pre-need Trust Cash Check Ac-212 (Rev. 10-87)	ISSUED BY May	Pre-Need 83235 Trust 9022 Sales Tax 60101 78390 TOTAL PAID \$	

DO	NOT COUNT	MAIL F No.	ENTIR E- 15t	E BOO	X 7	513 et 211	Ce 3	edi	t L	を金が	4
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ADD	RESS										
CITY			haak	1.7	15 4	STAT	_		ZIP		71//
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13

Dorothy Bouse 705 S. 45th Street

ACCOUNT No. E-7513

Month and Day Due Indicated Balow

Mondi and Day Due Indicated Deser											G	
	HAL	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	HOY	DEC
TANK.				LO		3		6			5/1	5

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

20.00

Amount due if paid more than 10 days after due date above.

5 2.00

Amount Received

d \$\_\_\_\_\_

NAME

ADDRESS

STATE

check ( / ) if this is new address



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From Westly Acres	Address: 205 45=4 5T	Date: 9	- 10	90112	1990
Wenty and Floo	redit for		ollars (\$	2000	)
Lot 2 Grave /	A Row Se	ction_&		Division Block	,
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Clotting Burial Containers	67007 77184 — 100 77184 — 100 77181 — 100 77182 —	90	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	ISSUED BY PLAT JOHN	Handling Fee Recording & Misc, Fees Pre-Need Trust Sales Tax	77185 — 100 77183 — 63033 — 9022 — 60101 76390 —	20	

15

ACCOUNT No. B-7513

Credit Lot

Porothy Rouse 705 S. 45th Street San Diego, CA 92113

Month and Day Due Indicated Below

	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB
į				10				6				

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

20.00

Amount due if paid more than 10 days after due date above.

s 1.00

NAME AWATH ADDRESS 5 30 - 00

ADDRESS 7 5 5 45 ST

check ( ) if this is new address



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From: Dopozity Paise Torry and 500-	Address: 705 5. 45-#	Date: Z S S S C	A. 7:	2113	19 %
Lot 2 Grave		ection2		Division Block	1/
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 89% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc, Fees	67007 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 —	46	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	ISSUED BY RIKE MIGS	Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 — 60101 78390 —	45	80

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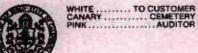


# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From: Don the Rouse	Address: 705 3 75 654	Date:/	1-3	., 19 <u>9/ -</u>
Fourt out 785	dil Lote		ollars (\$ <u>-11.00</u>	
Lot 2 Grave	/2RowSe	ction 2	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 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 77183 63033 9022 60101 78380	00
AC-212 (Rev. 10-87) 586	ISSUED BY 2/1 Leguer	TOTAL PAID	1 41	00

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CITY	8	П	check			STA		COLUMN TO	ZIF		1



#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From: Dorothy Rouse	Address: 705 5. 45.	Date: APRL 10	1 92/
In Part Payment of Payment of	107.	Divis	
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	## Stock	40 00

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Disgo STATE CA ZIP 92//3

□ check ( v ) if this is new address

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lug	SEP	oct	NOY 10	DEC 1	THE FEB	MAR	APR	MAY	JUN	100
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NAME Partial Amount Received \$

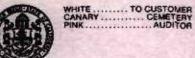
ADDRESS 7 050 So. V5 - 87

CITY Partial State CA ZIP92/

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

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

200	70 C 400 11	Date: 3-	13	92113	, 19 <u>9/</u>
In Payment of	Address: 705 S. 45 ch	0	ollars (\$	20.00	,,
Lot 2 Grave	/ A Row Sec	etion		Division Block	11
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 —	9	60
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check C	ISSUED BY M. Legue	Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	77183 — 63033 — 9022 — 60101 — 78390 —	20	00



#### CITY-OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

		Date:	. 19
From: Direthy Tours	Address: 703 5. 7	5 5 5	D. CA 92/13
twenty tour end	0/100	Dollars	(S 24/20)
In Payment of	e reed lot		
		2	Division //
Lot Grave	/2 Row	Section	Block "
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	20% Seles Care 7716	4
Acct. No		of Lots 7718	4
W.O. E 75/3		Opening/ 10 Closing 7718 Burial 10	11
BALANCE DUE		Containers 7716	12
		Handling Fee 7718 Recording & 10 Misc, Fees 7716	00
Pre-Need Lot At Need On Acct		Pre-Need 6300 Trust 900	
Pre-need Trust Cash Check	11/11	Sales Tax 6010 7830	n
AC-212 (Rev. 10-87) 673	ISSUED BY Devoted	TOTAL PAID	34 00

2	COUNT C5	r No.		uoa h S	X 7	513 et 211		edi	t 1	2	
		Mon	th an	d De	y Du	e Ind	leat	ed B	elow		100
OCT	MOV			_	_	APR	_	And in case of the	STATE OF THE PERSON NAMED IN	AUG	SEP
	nt due		paid on	, or bel	ore,		> s	2	0.0	0	ŧ
ine os											
<b>V</b> mou		if paid it	more ti ve,	han 1	₫ da	ys )	5		1.6	10	
<b>V</b> mou	nt due	if paid i te abov	more ti ve.	nan 1	₫ da	ys )	5	A.	1.6	10	
<b>V</b> mou	nt due due dan	if paid to above	more ti			ys )			1.6	10	
Amou after o	nt due due dan	if paid ite abov	more ti						1.0	NO .	

DATE	705 S. 45th Street, San Diego, Ca 92113 RATH	DEBIT	L	CREDIT	BALANCE
DATE	(TEMS	DEBIT	1	CREDIT	BALANCE
20 88	Lot 2, Grave 12, Section 2, Division 11	495 00			
0 89	Coupon 1 Revist 37682			2/00	4740
15 89	Causa 2 Day at 37829			2100	4530
57 89	Jaupra 3, Reace of 38/9/ - course	4		2/0	1320
n 80	(NUM 5 Descript # 20 DUD			40-	37
15 89	1 2 x x 20,07		11	12/100	250
10 09	No ma o Boo of 38210	111	++-	200	2000
0 70	Janeth General John		++	2000	2000
8-90	Coupor 8+9, receipt 28963		11	7/00	_ 2290
2690	COUPON 10 RECENT 39155			2100	2680
690	Coupn- 1/2/2 Lecert 35530			4000	2280
-6-av	17 13+14 7 39453			4000	1881
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-4 40	COL MANS # 16,17. RESEIDT # 39793	100	16	4000	128 0
2 - 9/ /		A P		410	9700
3 71	A Little 40124			20 00	TO
10 91	10056	tat		- CONTRACTOR OF THE CONTRACTOR	-6./
100 March 100 Ma	receipt 40550 coupons 20; 21	41	1	1000	al o
- 7 91	PECEIPT 40678 coupon 20	1		2100	3-6
-2-91	Proxipt #40919 Caypen 11		1	300	10

## MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

6-30.88 Date You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains ough in 8 Church, Chapel, Graveside 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. War time veteran Division/Bloo Grave space & Care Fund ...... Additional spaces and care fund ...... Opening/Closing & Setup ..... Burial Container ..... Handling Feas Flower vases - Marker setting fee ...... Recording and filing fee ...... Sales taxes ....... Total Due ..... Paid receipt number . Balance due I hereby certify I am the 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 Cometery harmless from any liability on account of said authorization and interment, I hereby authorize the interment in lot I hold under deed.

Work Order # PY-NET FREY 8-850

E 7513

## AGREEMENT FOR BEFORE-NEED CREDIT LOT SALE

This Agreement entered into this 30 day of, 19 50
between Worathe Pause, 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 exclu-
sive right of interment in: Lot 2, Grave 12, Row, Section
consideration of a total purchase price of \$ 495.00, payable as follows:
\$ cash herewith, the receipt of which is hereby acknowledged;
\$ 20.00 on the 10 day of (leggest, 1988; and the
balance in installments of \$20.00 for 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 INTER-
MENT 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 ONLY THE INTERMENT RIGHT IN 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.
The state of the s

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

WITNESS our hands this day and year above written. Deed to be issued to: Street Address (Mail) City Zip Code State CITY OF SAN DIEGO Mt. Hope Cemetery

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 7-/-88

of of there	e E. anderson
in a Struck India Fu	neral, date, time Wed 1/6 Ham
Church, Chapel, Graveside 2000	sede Sierre Mortual
All Funeral cars must arrive before 3:30 p.m.	of regular wor <mark>k d</mark> ay or an extra charge will be applie
and billed to undersigned. War time yeteran .	
6世年 在	2 12
Lot Grave Row	Section Division/Block
Grave space & Care Fund	495.0
Additional spaces and care fund	φ <u></u>
Opening/Closing & Setup	105.0
Burial Container	40.0
Handling Fees	60.0
Flower vases - Marker setting see	May
Recording and filling the 2	35.0
Sales taxes	2.0
N 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Total Due 342. 6
Janua of of La	ceipt number 3 8455 737.6
	737.0
(000 h	Balance due
I hedeby certify I am the James W	
and this is your authority to make disposition	of remains as above indicated. I certify and represe and lagree to hold Mt. Hope Cemetery harmless fro
that I have the right to make this authorization	
any liability on account of said authorization a	and interment.
I hereby authorize the interpretation lot I	James W anderson
a Mico	S 705-CV 680 V 70-50
I hereby authorize the interpretation lot I	James W anderson ANGER 110 ADDRESS OF 92020
I hereby authorize the interprent in lot I hold under deed.	James W anderson ANGER 110 ADDRESS OF 92020
I hereby authorize the interprent in lot I hold under deed.	James W anderson ANGERE # 110 ACCIONS CA 92020
hold under deed.	James W anderson 1440 S. ORANGE# 110 ADDITION CA 92020

Hent Baker Ogent Claim.

M 8800 41894-M18

Colonial Renn Frontelin Suns.

1-800-523-40+0

8.0. Bux 52155 Phoenex A2
85072

Lacy Thompson P.O. BOX 33/2 HS Ruidoso, New Mexico 883 45

## PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

		ME BLACK	INK-MAKE NO ALI	CRATIONS OR ERASUR	ES	
NAME OF DECEDEN	t and the second			SEX	DATE OF BIRTH	DATE OF DEATH
Pegline I	. Anderson			Female	Age 66	June 26, 1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF I	DEATH-COUNTY (or s	TATE IF NOT IN CALIFORNIA	NAME AND ADE	DRESS OF SPOUSE OR OTHER INFORMANT
Yearnes		Yuna	. Arizona		Johnson	Hortuary-
NAME AND ADDRES	S OF FUNERAL DIRECTOR (OA PERSON A	CTING AS SUC	HI CAL	FORNIA LICENSE NUMBER	256 S. 2	and Avenue
Greenwood	Mort. I-805 & Imper	Lal, Sa	n Diego, CE.	F-843	Yuma, Ar	rizone 85364
	TYPE OF PER	MIT. CHECK	ONLY ONE OF THE	FOLLOWING TYPES O	E DISPOSITION	
1940)	14.10		ditti ditte di inte	roccommo mico o	, por contour	
L BURIAL (IN	CLUDES ENTOMOMENT)		ISINTERMENT AND BURI	AL (INCLUDES		ENT AND REINTERMENT OF CREMATED INCLUDES INURNMENT)
2 CREMATION	N AND BURIAL (INCLUDES INURNMENT)		SINTERMENT, CREMATI	ON, AND BURIAL		IENT OF CREMATED REMAINS AND ON OTHER THAN IN A CEMETERY
3. CREMATION CEMETERY	N AND DISPOSITION OTHER THAN IN A	Пээ		Maria Caraca Car		*****
4. SCIENTIFIC		_ , o	ISINTERMENT, CREMATH THER THAN IN A CEMET	TERY	FOR □ 10 DISPOSITI	CORONER'S USE ONLY
•					LI 10 DISPUSITI	ON PENDING
INTERMENT	NAME AND ADDRESS OF CEMETERY W	VHERE REMAI	INS OR CREMATED REM	AINS ARE TO BE INTERR	ED	COUNTY
INTERMENT	MESillope ComateTy,		erket Street		CA.	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY Y	HERE REMAI	NS ARE TO BE CREMATE	D DATE CREMATED	SIGNATURE OF	PERSON IN CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER THANKIN A CEMETERY MATED REMAINS	ADDRESS, NEAREST POINT ON SHORE		in Count	/	L PLACE AND COU	NTY OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMA	AINS			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pe remains of the above named decr and I hereby admowledge that tr	dent under	provisions of the Hea	ith and Safety Code,	SIGNATURE OF	APPLICANT
APPLICANT	this permit gives no right of unres	tricted acces	s to property not own	ed by me.	\$100 E-1 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 -	0
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE	AMOUNT OF FEE PAID	JUL PERMIT GSS 198	SIGNATULE DE	all the Basse, M. By
CERTIFICATION OF PERSONSIN CHARGE OF DISPOSITION	DEROSITION WAS MADE ON	6/8Y	SIGNATURE DE	PERSON IN CHARGE OF	DISPOSITION	LICENSE NUMBER OF CREMATED REMAIN DISPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF	DEATH	0		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

#### OFFICIAL RECEIPT 36455 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY 264-3151 Dollars (\$ Division Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT 67007 77184 Invoice No. 20% Sales Care 80% Sales of Lots Acct. No. CITY AUBITOR Opening/ Closing Burist Containers JUL 29 1988 BALANCE DUE Handling Fee Recording & Misc. Fees 100 77183 63033 Pre-Need Lot 2022 Pre-need Trust 60101 Cash 78300 TOTAL PAID

AC-212 (Rev. 10-87)

## MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

7-5-88

of Wrether	b) Sichel
in 8 Fu	neral, date, time
Church, Chapel, Graveside	; Mortuery.
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. War time veteran	
Lot 67 Grave 3,4,5 Row_	White Control of the
Lot Grave 4, Row	Section Division/Block
Grave space & Care Fund	3@ 495 1485.0
Opening/Closing & Setup	
Burial Container	~ X Y
Handling Fees	) A
Flower vases - Marker setting fee	/ V
Recording and filling fee	/ /
1000	
6 6 2:	Total Due
2300 80	oceipt number
(0)	
10	Balance due
I hereby certify I am the	of the above named decedent
	of remains as above indicated. I certify and represent and lagree to hold Mt. Hope Cemetery harmless from
any liability on account of said authorization	and interment
I hereby authorize the interment in lot I	X sothin scall
hold under deed.	Agnatura
Signature of recorded holder of deed	Acidicate
Signature of Personal Crosses of Centre	Sams Zip Code
	Telephona
The regression	Invoice #
Work Order # E 7515	Acct.#
PY-593 (REV. 0-96)	

NAME Sco	tt, Dorethia			ACCT. NO.	E-7515
ADDRESS 51	8 S. 46th Street, San Diego, Ca 92113 RA-	ING		LIMIT	
DATE	ITEMS J	DEBIT	1	CREDIT	BALANCE
0 05 88	Lot 67, Graves 3,4,5, Section 2, Division 12	1485 00	П		
8 5 88	Combon 11/ Receipt 36484			61-	1414-
3-7 88	Caugon # 2. Receipt 36652			6/00	136300
5-12 88	couple #3" Clescot 36829			6100	130200
1-14 88	Coursex # 4 Survey 34963			0100	124100
4-8 88	Collor # 5 receipt 37078			6100	1180 00
1-6 89	Coupan 6. Percent 37/88			6100	N 1900
2-7 89	Coupm 7: Recept 37325			6/00.	105800
27 89	Causin 8. Resent 37453			6100	89700
1-10,89	Coupon 9' General 37663			6100	93600
-4. 89	Cadem 10, Recept 37755			10/00	87500
5-12 89	(Jacom 11, Peace of 38/53)			6/00	8/1900
2-10 89	Coulon is Recent 38222			6/00	75300
18 63	Calan 3 1606 100 38394			61-	690
18 39	(Vausen 14) Kecept 379/2			6100	6310
89	Muchon 15 Receipt 38035			6100	57000
1-9 89	Tayon 16, Regent 38549			6/00	50900
2-11 89	Malegon 17. Reguest 38658			6100	448 CX
1-11-90	CARDON 18. Kenner 38773		La La	6/00	3870
AIGNER FORM NO.	25-204 Scott, Dorethia 67 - 3,4,5 - 2	- 12			PRINTED IN USA

		ME	
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110	~	143	_

## ACCT, NO.

ADDRESS		RATING	LIMIT	22
DATE	ITEMS	06817 /	CREDIT	BALANCE
2 H 00 1.	19 - 1 11-	60/2		38000
4-9-90 Caupa	21, Receipt # 39/03	8962 102W		267-
Vaccion and the second	67			20400
5-17-90 recu	GT 39238	,	6/0	14300
6-12-40 Cary	on 23 keceips 39351		6/10	8200
A TO Cong	1 Jecusto 3476	-	X) W	
1				

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

rom: Mysthia In	tt Address 518, 5.	Date: 8 -	theel	19 <i>2</i> 3
n his ment Payment of	wait For	<del></del> •	Hars (\$ <u>6.7.72</u>	25
ot Grave	RowS	ection	Division Block	2
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/	67007 777184 100 77184 100 77181	1
BALANCE DUE 1979	AUG 0 9 1988	Buriel Containers Hendling Fee Recording & Misc. Fees	100 77182 100 77186 100 77183	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Ac-212 (New, 10-87)	BBUED BY MILLS HAIT	Pre-Need Trust Sales Tax TOTAL PAID	80033 9022 80101 78380 \$	

DO NOT MAIL ENTIRE BOOL

ACCOUNT No. E-7515 Credit Lot

Dorethia Scott 518 S. 46th Street San Diego, Ca 92113

Month and Day Due Indicated Below

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

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

\$ 61.00

Amount due if paid more than \_\_\_\_5\_\_days after due date above.

99 56

NAME Dorethia Scott

CITY S & Diago STATE Ca. ZIP 9213

☐ check ( VI) if this is new address

CITY OF SAN DIEGO, CALIFORNIA

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151	// Date:	9	-7.	. S
From: Josephia St	WU Address: 570 27	46400	lars (\$	61.0	2
In Payment of	egos a Credes	t dot	piars (\$		
Lot 67 Grave	3-5 Row 1	Section 2		Division /	/
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPAGE.	CREDIT 20% Sales Care	67007 77184 —	,,	15
Acct. No. 2 - 75/5	CITY AUTO	O' 80% Sales of Lots Opening/	100 77184 — 100 77181 —	61	00
W.O	TO SERVER LITTER TO THE RESIDENCE OF THE PARTY OF THE PAR	18 Continuera	100 77182 —		
	SEP	Handling Fee Recording & Misc. Fees Pre-Need	77185 — 100 77183 — 63033		
Pre-need Trust Cash Check	Jacks los	Trust Seles Tax	9022 — 60101 78390 —	11	20
172	ISSUED BY THE IA VER	TOTAL PAID		61	10

Dorethia Scott 518 S. 6th Street San Diego, Ca 92113

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

Amount due when paid on, or before due date above

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

62.00

Dorethiz Sc

CITY San Diego STATE 20. ZIP 921/3

## CITY OF SAN DIEGO, CALIFORNIA

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY				0
From Sorethia Son	HAddress: 5/8	Date:	10-1	2.	900
_ Sixte - one	Joupan 3 Cu	of t	Dollars (\$	61,0	0,
. 60	3_5		2	Division /	5
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS TAMPED TRAID IN THIS SPACE.	CREOTT 20% Sales Car	677007 77184 —	Block	00
w.o. E-75/5	OCT 14 1988	of Lots Opening/ Closing Burist Containers	77184 — 100 77181 — 100 77182 —		
BALANCE DUE 1302,00		Handling Fee Recording & Misc. Fees	77186 — 100 77183 —	etcu.	( ) ( ) ( ) ( )
Pre-Need Lot At Need On Acct Pre-need Trust Cesh Check	ISSUED BY LANGE MAN	Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 — 80101 76360 —	101	
AC-212 (Rev. 10-87) /60		10,742,7410		01	00

and or bring one coupe	on with each remittance	COUPON	3
DO NOT MAIL EN	TIRE BOOK	A STANSON TO A STANSON TO S	J
ACCOUNT No.	P 7515	Pundite !	100

Dorethia Scott 518 S. 46th Street San Diego, Ca 92113

Month and Day Due Indicated Below

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

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

\$ 61.00

Amount due if paid more than 5 days after due date above.

6100

NAME Dorethia Scott

CITY San Diego STATE CA. ZIP 9 24

	51	S S	. 4 ieg	Scoth	St	92	113				4
<b>APR</b>	MAY						NOV				MAR
	-				<u>.</u>		10			4	
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ue da mou	nt due			han	5_da	ys 🏻			7	00	
ue da mou				han	5_da	ys	\$	-		00	- 2
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mout fter d	we da					94		14	1.	1.7	1
fter d							C		1/1	00	
fter d		th.	29	SU	ott	Receive	s	- 1	11	do	-

WHITE TO CUSTOMER CAMARY CEMETERY

# CITY OF SAN DIEGO, CAUFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

PINKAUDITOR	264-3151		3500636	50
From Orether Sea	El Address: 518 J. 4	Date:/	trat SB	004
sitte - one	nei/108	Polls	ara (\$ 61,00	)
InPayment of Color	par 6 Credit	dot		10.50
Lot 67 Grave	3-5 Rowse	oction 2	Division /	2
Invoice No.	NOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 6 20% Sales Care 7 80% Sales	7007	00
ACCI. NO. 21 - 7515		of Lots 7 Opening/	7164 100 7181	
BALANCE DUE 1/19,00		Burist Containers 7	100 7182 100	AUBITA
CACHAGE DOE 222		Recording & 7	7185 JAN 7	
Pre-Need Lot At Need On Acct O		Sales Tax 6	3033 9022 0101	1989
'AC-212 (Rev. 10-87) 203	ISSUED ON MINISTER WARD	TOTAL PAID	: 61	00

DO	NOT	MAIL T No.	ENTIR		OK	vittanc	*CA.=***		Lt I	ot	6
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JUN	JUL	AUG									MAY
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	nt due ite abo	when p	aid on	, or be	fore.		> 5		61	.00	-
Amou after d	nt due lue da	if paid i te abov	more ti ve.	nan	<b>5</b> da	ys )	<b>s</b>		1	.00	45
			noutre <b>s</b>	An	nount (	Receive	s d \$	6	1.0	20	

NAME Wor ethis Scott ADDRESS 518 5,46554.

CITY San Diego STATE Crac. ZIP 72//3

	WHITE	TO CUST
Same.	CANARY	TO CUST
	A STATE OF THE PARTY OF THE PAR	his and the second
		700

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

CANARY CEMETERY AUDITOR	MOUNT HOPE CEMETERY		2-7	0
Courtea Sia	El Address 518 S.	96.76 V	tut 5	8
sixty-one of	Cauga 7	allent t	15 61 - CO	)
60	3-5	Contract 2	Division / 2	
nvoice No.	NOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 87 20% Sales Care 77 80% Sales 01 Lots 77	Block	ci.
NO_ 2'-1575 BALANCE DUE 1058.00	FEB 1 o	Containers 71	7181 100 1182 100 1185	
Pre-Need Lot At Need On Acct Ore-need Trust Cash Check OX	ssued as he her land	Pro-Need 83 Trust 6	1953 9035 9032 1101 \$ 61	de
	A SHE IS NOT THE REST, POSSESSION AND ADDRESS.	The second second		

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UL	AUG						FEB		JUN
	nt due	utan	paid on		8		10		
	ite abo	ve.	more ti		200	ys	\$ \$	1.0	15
ou er c	lue da								

WHITE TO CUSTOMER CAMARY CEMETERY PINC MUDITOR

CITY OF SAN DIEGO, CAUFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

AUDITOR	284-3151		2 05
From Lotather State	# Address: 5/8 S- 4676 p	Flee to	2 50
_ lifte - one	20 //00 -	Dollars (\$	6/00)
InPayment of	Jaugan & Oras	Ta	£
Lot 67 Grave	3-5 Row Section	2	Division/
Invoice No.	NOTYALID FOR PURPOSESTATED LINLESS STAMPED CREDIT 20% Sales		
Acct. No.	CITY AUDITOR of Lots Opening/ Closing	77184 — 100	6/ 00
WO. 2-7575	MAR 1 0 1989 Containers	The state of the s	
BALANCE DUE 777.00	Mandling F Recording Mad. Fee		1 Car 1 Car
Pre-Need Lot 2 At Need - On Acct	Pre-Need Trust	63033 9022 —	
Pre-need Trust Cash Check	ISSUED BY Shared Land TOTAL PAIG	80101 78390 —	6/00
AC-212 (Flev. 10-67) 25		1032 V	0/100

	51	3 5.	5.00	ith	St	92				100	0.50
		Mon	th an	d Da	y Di	ie In	dicate	ed B	elow		
AUG	SEP	ост	NOV	DEC	MAL	FEB	MAR	APR	MAY	IUN	JUL
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CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

From: Conclus Ass	MOUNT HOPE CEMETERY 264-3181  LA Address: 5/8 J. 46 Th	4-11 8,
InPayment of	rugen 9 Wedet &	Dollars (S/OU)
Invoice No.  Acct. No.  W.O.  BALANCE DUE 936-00	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE.  CITY AUDITOR Opening Opening Closing Burial Containers Handling Fee	Block /
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 10-97)	ISSUED BY AND LOW DOWN TOTAL PAID	77183 63633 60033 60001 76300 8 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6

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CITY OF SAN DIEGO, CALIFORNIA

WHITE TO CUSTOMER CAMARY CEMETERY PINK	MOUNT HOPE CEMETERY		50	//	00
From: Aptithea Ja	Aldress S18 S	Pate:	Street	750	4
Sifty-one	102100 - 10 au	det To	WIE W	61, Œ	)
Lot 67 Grave	3-5 ROWSe	ection	2 !	Division /	2
Invoice No	NOT VALID FOR FURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales	67007 77184	6/	05
W.O. 2- 7573		of Lots Opening/ Closing Surist Containers	77184	CITYA	IDITO
BALANCE DUE 0 15,00		Handling Fee Recording & Misc. Fees Pre-Need	100 77185	MAY O	1989
Pre-Need Lot M At Need O On Acct O Pre-need Trust O Cash O Check 90	ISSUED BY MARIA VE	Trush Seed Tex	9022 80101 78390	61	00
AC-212 (Rev. 10-87)				401	00

Send or bring one coupon with each remittance COUPON DO NOT MAIL ENTIRE BOOK ACCOUNT No. 15-7515 Credit Lot Dorethia Scott 518 S. 46th Street San Diego, Ca 92113 Month and Day Due Indicated Below OCT NOV DEC JAN FEB MAR APR MAY JUN JUL AUG SEP Amount due when paid on, or before. due date above Amount due if paid more than \_\_\_\_\_\_\_ days after due date above. \$ 61.00 Amount Received NAME **ADDRESS** STATE CITY ZIP □ check ( v ) if this is new address

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

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

N2 38153

	264-3151	to the second state	10
	TL	Date: 6 -/	2 19 6/
From: Mellier Son	LL Address: 5/8 5 9	16 th of	90
Nitt -61	ILL : 90000 -	Dollars (	6/100
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Lot 67 Grave	3-5 Rowse	oction 2	Division /2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184	
'Acct. No.		80% Sales 100 of Lots 77184	64,00
w.o. 8-15/5		Opening/ 100 Closing 77181 - Burial 100	W AIDHO
BALANCE DUE 8/4-00		Containers 77182	JUN ,
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Pre-Need Lot At Need On Acct		Pre-Need 63033 Trust 9022	1
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WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

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	264-3151	10 -178 11	12 0	~
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Pre-Need Lot At Need O On Acct		Pre-Need 6	77183 JUL 1 83033	1 1989
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WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Dorathia Scot Sirtix-au	284-3151 + Address 518 5 416	Date: H	ug. 8	-,19 <u>89</u> .
Payment of	Row Se	_ SIYO 0	Division Block	
Acct. No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED -PAID' IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing	67007 77184 1000 77184 100 77181	AVDITOR
BALANCE DUE 1612.		Burial Containers Handling Feb Recording & Misc. Fees	77182 100 77185 100 77183	1 2 1989
Pre-Need Lot	ISSUED BY REJUDIN	Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 60101 78390	101 -

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ADD	1200	_									

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

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PINKAUDITOR	264-3151	Date: 9	8 19 89
Sexte - che	10/100 - 7	Dollars (	\$61.00
InPayment of	rufen 14. Cica	of Fot	
Lot 67 Grave	8 7 5 Row Se	ection 2	Division /2
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 77181 Burial 100 Containers 77182	CITY AUDITOR
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	he Lath	Handling Fee 7185 Recording & 7185 Misc. Fees 77183 Pre-Need 83033 Trust 9022 Sales Tex 60101 78390	SEP 18 1980
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WHITE ...... TO CUSTOMER CANARY ..... CEMETERY PINK ..... AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

	284-3151	Date:	5-10 19 89
From Loselken hat	Address: S.	1670 St	act, de
In Payment of	100 -	41 ATO	liars (\$ (6/,00)
- 10	3 -		Division /17
· Lot Grave	3-5 Row	Section	Block-/_
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAN	MPED CREDIT 20% Sales Care	87007 77184
Acct. No.	terror and a second second with the Police	80% Sales of Lots	77184 6/ 00
w.o. 2-15/5		Opening/ Closing	100 77181 100
BALANCE DUE 570,0	Tark (	Burial Containers	77 182 OCT -
BALANCE DOE		Handling Fee Recording &	77185 100 9 700m
Pre-Need Lot At Need On Acct	STATE OF THE STATE OF THE STATE OF	Misc. Fees	77183 63033 9022
Pre-need Trust Cash Check	12 / 1/2	Trust Seles Tax	9022 60101 78390
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57185.464 St.	nam	E 6	Dar	ret	The state of the s	mount I	Receive 5 C	de	_	1.0	0	

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

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

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	264-3151	1	1000
	24	Date://	1901
From: Billies Mr.	U. Address 6 16 V. 4/-	do Iti	to a
Ville - one	10/10	Dollar	1. 61.00 V
0	de Den la llica	1011	Land Section 1
In Payment of	and the	wow.	
7.0	7	"	Division /5
Lot Grave	S = S Row Se	ction	Block -
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 670 20% Sales Care 771	OT CITY AUDITO
Acct. No.		80% Sales 1771	84 67 00
wo. 2-75/7		Closing 771	00 NOV 3 1000
		Containers 771	
BALANCE DUE 309.00	A STATE OF A PROPERTY AND A STATE OF A STATE	Handling Fee 771	85
W 5 5	** \$	Misc. Fees 771	83
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	Frank Land	Pre-Need 530 Trust 90 Sales Tax 801	
	ISSUED BY THERE I HERE	TOTAL PAID	
'AC-212 (Rev. 10-87)	issued at the same of the same	TOTALPAID	6100

Send or bring one coupon with each remittance DO NOT MAIL ENTIRE BOOK Credit Lot ACCOUNT No. E-7515 Dorathia Scott 518 S. 46th Street San Diego, Ca 92113 Month and Day Due Indicated Below MAY JUN JUL AUG SEP OCT NOV DEC JAN FEB MAR Amount due when paid on, or before, due date above Amount due if paid more than 5 days after due date above. NAME Dorethiz Scott ADDRESS 5185, 46 St. CITY San Diego STATE Cas ZIP92/13

#### OFFICIAL RECEIPT 38658 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY PINK .... 264-3151 Address Dollars (\$ 6 Payment of Division Grave Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT 67007 Invoice No. 20% Sales Cere 77184 ROS Sales 100 of Lots 77184 Acct. No. Opening/ Closing Burial 77182 Containers **BALANCE DUE** 77185 Handling Fee Recording & Misc. Fees 77183 Pré-Need 63033 9022 Pre-Need Lot Trust Pre-need Trust Sales Tax 80101 ISSUED BY CHILA TOTAL PAID AC-212 (Rev. 10-87)

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WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

From: De This Scott	Address: 518 A. 44 Cas Till	Date:	/-// ollars (\$ \&/	
Lot 67 Grave 3	4.5 Row Se	ection 2	Div	rision /2
Invoice No	MOTYALIO FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Cere 80% Sales of Lots Opening/ Glosing Burial Containers	67007 77184 100 77184 100 77181 100 77182	6100
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	JAN 1 6 1990	Handling Fee Recording & Misc. Fees Pre-Need Trust Seles Tax	100 77185	
AC 212 (Rev. 10-87) 332	ISSUED BY JULIANUS	TOTAL PAID	•	6100

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CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

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WHITE ...... TO CUSTOMER CANARY ...... CEMETERY

MOUNT HOPE CEMETERY MAR 1 2 1990

CITY AUDITOR

	264-3151	Date: 3-	1 1990
From Desthia leatt	Address: 548 ab. 46	4 11, 18	92/13
In Payment of	det to E	Dolla	rs (\$ / 22,00 )
Lot 67 Grave	3-4-5 Row Se	ection 2	Division /2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	80% Sales	007 184 100 (23 (2)
w.o. E - 75/5		Opening/ Closing 77 Burist	184 100 181
BALANCE DUE 265.00		Handling Fee 77	182 100 185
Pre-Need Lot Al Need On Acct Pre-need Trust Cash Check	A A VI	Pre-Need 63 Trust 9 Sales Tax 60	183 033 022
AC-212 (Rev. 10-87) 2456	ISSUED BY Utilla	TOTAL PAID	1220

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WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

CITY AUDITOR

Me

39102

APR 1 6 1990

		Date:	9-9-	1990
Surffere dollars	Address: 518 5. 4644	41	CA 92112 ollars (\$ 61,00	
In Part Payment of CVV	111 1012 34,5 Row Se	ection 2	Division.	2
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 90% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees	67007 77184 100 77184 100 77181 100 77182 100 77185	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 10-97)	ISSUED BY W.J. Heague	Pre-Need Trust Sales Tex TOTAL PAID	83033 9022 80101 78390 \$ 6/	

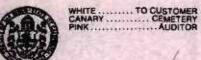
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	WHITE TO CUSTOMER CANARY CEMETERY
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CITY OF SAN DIEGO, CALIFORNIA
PROPERTY DEPARTMENT
MOUNT HOPE CEMETERNY 2 9 1990
284-3151

From: Derittura Screet  Sering Grant  In Payment of	Address 518 b. 46	Date: 5-	19 ,1990 92/13 re (\$ 61.02)
-Lot 67 Grave	345 RowSe	ection 2	Division /2
Invoice No	MOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 670 20% Sales Care 771	184
Acct. No.	n 9	of Lots 77	100
wo. E-11515		Closing 771 Burial	181
BALANCE DUE		Containers 77	100
# 10 May 2 248 74		Recording & 77	
Pre-Need Lot At Need On Acct		Trust 90	033
Pre-need Trust Cash Check	West .	780	101
AC-212 (Rev. 10-87) 376	ISSUED BY	TOTAL PAID	6/10



### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From: Less than the state of th	Address: 518 S. 46"	Date: 17	1990 1 93/13 ollars (\$ 25 4 )
Lot 67 Grave 1	4 5 Row Se	ection	Division / 2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE,	CREDIT 20% Sales Care	67007
Acct. No.		90% Sales of Lois Opening/ Closing	100 77184 100 77181
W.O. # 757-5		Burial Containers	100 77182
BALANCE DUE		Handling Fee Recording & Misc. Fees	77185 100 77183
Pre-Need Lot At Need On Acct O		Pre-Need Trust	65033
Pre-need Trust Cash Check AC-212 (Rev. 10-87)	ISSUED BY Lat	Sales Tax TOTAL PAID	60101 78390 \$ 22 W

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NAMI	E			Am	nount R	lsceive	\$ d \$				
CITY	12,00				- 50	STAT	-		ZIP		

#### AGREEMENT FOR BEFORE-NEED CREDIT LOT SALE

This Agreement entered into this 5 day of hale, 1980
between & melhea Malt, 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 exclu-
sive right of interment in: Lot61, Grave315, Row, Section
2. Block/Division/2, located in Mt. Hope Cemetery, for and in
consideration of a total purchase price of \$/465.00, payable as follows:
\$ cash herewith, the receipt of which is hereby acknowledged; \$ 6/.00 on the 10 day of Alexand , 1905; and the
balance in installments of $$6/.000$ 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 INTER-
MENT 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 ONLY THE INTERMENT RIGHT IN 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.
divined administration administrational measurements and

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

WITNESS our hands this day and year above written.

Deed to be issued to:

23.061.00

Dorethia Scatt

518 S. 46 to Street

Son Diego, CA 92113

PURCHASER

Street Address (Mail)

City State Zip Code

CITY OF SAN DIEGO Mt. Hope Cemetery

By: Anala

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

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ina Cesto VI	Welt.	uneral, date, tir	200	as 0,91	67 M
Church, Chapel, Graveside			tothe	dour	Mortus
All Funeral cars must arrive be	efore 3:30 p.m	of regular wor	k day or a	in extra charge	will be appli
and billed to undersigned. Wa	r time veterar		(3	5/2)22	77-82
1394			2		V
Lot Grave	Row	Section _	2	_ Division/Blo	CK_O
Grave space & Care Fund					0 <u>5                                    </u>
Additional spaces and care fur					
Opening/Closing & Setup					105.0
Burial Container					40.C
Handling Fees					1-1
Flower vases - Marker setting					
en en man de la company de la				**********	35.0
Recording and filing fee	14				26
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I Nereby certify I am the and this is your authority to m that I have the right to make the any liability on account of said	ake dispositio is authorization d authorization	on and lagree to	above in	dicated. I certify	harmless fr
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I Nereby certify I am the and this is your authority to m that I have the right to make the any liability on account of said I hereby authorize the intermethold under deed.	ake dispositio is authorization d authorization	on and lagree to	above inches hold Mt.	dicated. I certify	harmless fr
I Mereby certify I am the and this is your authority to m that I have the right to make the any liability on account of said I hereby authorize the intermethold under deed.	ake disposition is authorization in lot l	on and lagree to	above inched Mt. I	dicated. I certify Hope Cemetery    Action   LA RUE	harmless fr

### County of Bexar



#### 600 NORTH LEONA SYREET BAN ANTONIO, TEXAS 78207 [512] 223-2918

PERMISSION IS GRANTED TO THE ROSELAWN RESURRECTION CEMETERY AND MAUSOLEUM (Crematorium or Funeral Home)

AT SAN ANTONIO, TEXAS TO CREMATE THE BODY OF (City and State)

HAZEL MARIE HETHERINGTON (Full name of deceased)

ISSUED THE 1st DAY OF JULY 19 88 BY

WAITING PERIOD WAIVED

XX NO

YES

		30.0					
ВОБУ	Betweed D	) naitese (	clty or town)	(county)	(etote)	neq to matices to sensit	egwda ni
	Body was	lered.		Name of cemete	ry or cramdory		
ox Soze os	N to evuluagis	Lynn	Jaka	tolstile.	KOTNA WAS		88/T/L
HORIZA- OT M						intereg enoticings bri	
	None				San Anton	to, Texas	
2000	emiodme to emak	r (if none, write no	(euc	License number	senbbo sseniaud	arantana manana manana di	
7VSO:		197		7257	Porter Lo	ring Mortuary	
CE OF	lesenut to emel	atsetib		License number	ezasbbo ezantzud		
557				Place of byriel removel od/OSE disposal Ceme	stawn Resur	rection	ver town) (stote)
:EVZED	4. Sex Female	5. Color or rece White	6. Age in years	7. Place of deal	na (city or na nas	25 x855018/97/45/02/02	my) (stete) xar Texas
NO Y	I. Full name of d	경우 시대도 전에 걸어 생각하다 아이들은 선생님이 얼마나 사람이다.	NOLON		2, Dute of death ( 8/28/	month, day, and year)	2. Death due to YES X
	ABH TO THENTS DATISTIC		เรเรา	AL-TRANSIT	PERMIT	NUMB	(534

PORTER LORING

1101 McCullough · Box 1246 · San Antonio, Texas 78295 · 227-8221

July 7, 1988

Deceased: Hazel Marie Hetherington Date of Death: June 28, 1988

TO WHOM IT MAY CONCERN:

This is to certify that to the best of my knowledge the contents of this container are the cremated human remains of the above mentioned deceased.

Marjorie Janen

Marjorie Lamar Vice President

# CITY OF SAN DIEGO, CALIFORNIA

CAMARY CEMETERY PINK AUDITOR		MOUNT H	MOUNT HOPE CEMETERY 284-3151			6		
V m	ald Heathe	unotosies	9619	Larue	9-0	23 19	88 2 lv	
From:	or huske	farte	-two	60/100	the state of the s	242,60	5	
In.	Payment of	azel A	eather	noten 3	Sex	urrner	£	
1-	cul	STATE OF THE PARTY		7203 - 1	7	Division 9	SIRIFE TON	

ot 1394 Grave	RowS	ection 3	Division 8
nvoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 67007 20% Sales Care 77184	
2-25/6	CITY AUDITOR	80% Sales 100 of Lots 77184 Opening/ 100 Closing 77181	105 02
ALANCE DUE	SEP 29 1988	Burisi 100 Containers 77182 100 Handling Fee 77185	60 X
e-Need Lot At Need On Acct	, ,	Recording & 100 Misc. Feet 77183 Pre-Need 63033	850
re-Need Lot At Need M On Acct			

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 2-5-88

of	KARLLE	e del	Thouse	e
T.S. Va	ult .	unecal, date, time	non 7/1	1 llan
Veult/Liner Church, Chapel, Graveside _	Manal	De Rome Ro	essale	Mortuary
III Fyneral cars must arrive	before 3:30 p.m	of regular work day	or an extra charge w	ill be applied
a billed to undersigned. W			automentale tikuterale (	
531/				10
ot Grave	Row	Section	Division/Stock	× / -
Grave space & Care Fund .				25.00
additional spaces and care for	und,			
pening/Closing & Setup			×	20.00
lurial Container		a		12.00
landling Fees	······	2		10.00
lower vases - Marker settin	g fee   V			
ecording and filing fee	110000			35.00
iales taxes	N/V	OOD OO ALESCO CIBARO SUMMES	ACTION AND BROKES STEP OF THE SECTION	11.37
1/0		- CALL	. /	1063
14		3	Due	10N 3
	Paid	receipt number 🛥	0000	700.0
	1920		Balance due	9
	T. 11.			
hereby certify I am the	nake disposition	n of remains as abov	of the above name indicated. I certify a	nd represent
hat I have the right to make t my liability on account of sa	his authorizatio	n and lagree to hold	Mr. Hope Cemetery h	armless from
illy nationally on account of so	na adulonization			1
hereby authorize the interm	ent in lot l	buch	wxm	Lee
old under deed.		Signature 5	12 Reny	1455
gneture of recorded holder of deed		Address 1)	E 6.	1114
		State 2 2	0-0-76	Zip Cod
		Talaphone	07/14	
		Invoice # _	4	
E 751	7	100 MARKET		
Vork Order # U.L.	<b></b> → ₹	Acct. #		

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

•

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

-	70	MET STYLENGER COMPLETENCE STOLENGE SOUTHWAY	an the surface of the first party and the substitute in	1200		
NAME OF DECEDEN			SEX	DATE OF BIRTH	DATE OF DEATH	
	Michelle Lee Makenx	Markee	Female.	February	9,1973 Muly 2, 1988	
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY	OR STATE IF NOT IN CALIFORNIA	The state of the s	RESS OF SPOUSE OR OTHER INFORMANT	
	Diego	San Diego			hallader - Mother	
	SS OF FUNERAL DIRECTOR FOR PERSON AC		CALIFORNIA LICENSE NUMBER		nois St. Apt. 5	
Inderson-Rag	sdale Mort.:5050 Fede	ral Blvd.: CA	F 1329	San Diego,	, CA 92116	
	TYPE OF PERA	AIT, CHECK ONLY ONE O	F THE FOLLOWING TYPES O	OF DISPOSITION		
1 BURIAL UN	ICLUDES ENTOMBMENT)	5. DISINTERMENT AN ENTOMBMENT)	D BURIAL (INCLUDES		NT AND REINTERMENT OF CREMATED INCLUDES INURNMENT)	
AND ASSESSMENT OF THE PROPERTY	N AND BURIAL (INCLUDES INÚRNMENT)	6. DISINTERMENT, CR	EMATION, AND BURIAL MENT)		NT OF CREMATED REMAINS AND N OTHER THAN IN A CEMETERY	
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY     4 SCIENTIFIC USE		7. DISINTERMENT, CR OTHER THAN IN A	EMATION, AND DISPOSITION CEMETERY	FOR CORONER'S USE ONLY		
NTERMENT	NAME AND ADDRESS OF CEMETERY W Ht. Hope Cemetery: 37	51 Market St.:	San Diego, CA		COUNTY Sen Blego	
CREMATION	NA Blue Cul	mere remains are to be cr	EMATED SATE CREMATED	SIGNATURE OF P	ERSON IN CHARGE OF CREMATORY	
OR OSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON STOREL	ine Or other description  Corulate	SUFFICIENT TO IDENTIFY FINA	AL PLACE AND <u>COUN</u>	TY OF DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS		10		
ACKNOWLEDGMENT OF APPLICANT This is to certify that I am the permains of the above named deceared the above named deceared the above named deceared the above named deceared the above named t		dent under provisions of the espass and nuisance laws	se Health and Safety Code, apply and understand that			
LOCAL REGISTRIAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COE AUTHORITY FOR THE DISPOSITION SPECIFIED IN	THIS PERMIT SA. 00/	// 111 1 1 198	8 A	CAL REGISTRAR ISSUING PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	53/6-10 /	TER DATE!	DYLW YELL	DISPOSITION	LICENSE NUMBER OF CREMATED REMAIN DISPOSER, IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	Dept. of Health Serv		85222 o, CA 92138-5222	2		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE EMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

### OFFICIAL RECEIPT

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

Nº 36383

CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 284-3151		00
From Johard Musk	Le Address: 5/22 Res	Date: 7-6	SD 19 CH
Jourteen Keep	died 24 37/100	Dollars (\$	1406-37
In Payment of ///	Tunixe tee	COUNCES	Division (1)
Lot 5 3/6 Grave	Row Section	and the second	Block /O
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	REDIT   67007   20% Sales Cere   77184 — 80% Sales   100	536 00
BALANCE DUE	JUL 13 1988	Containers 77182 — 100 Handling Fee 77185 — Recording & 100 Milac. Fees 77183 — Pre-Need 69033	3500
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check  AC-212 (Rev. 10-97)	ISSUED BY Souchea Cord	Trust 9022 — 9022 — Sales Tax 60101 78390 — 0TAL PAID	1406 37

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 7-6-88

of To Vant	0,00	Thurs 7/2 10.
Alm N	neral, date, time D	1/
Church, Chapel, Graveside	7	Hanghere Mortuary.
All Funeral cars must arrive before 3:30 p.m.		
and billed to undersigned. War time veteran	9	Calever Onl
03848 Grave Row	Section	Division/Block
Grave space & Care Fund	********	
additional spaces and care fund		
pening/Closing & Setup		320.00
urial Container	- I	175,00
andling Fees	101	120,00
ower vases - Marker setting fee		***************************************
ecording and filing fee	6 1900	35.00
ales taxes	CEMETERY.	11.37
MT. HOP	E CEMETERY N DIEGO, CALIE.	Due
CITY		36369 7/1.31
· · · · · · · · · · · · · · · · · · ·		Balance due
hereby certify I am the	of remains as above	of the above named decedent
hat I have the right to make this authorization ny liability on account of said authorization :	and lagree to hold	
iny liability of account of said authorization i	Λ	. eal
hereby authorize the interment in lot I	Joan	Cohnson
old under deed.	1301	PIPPO PLACE
gnature of recorded holder of deed	BREN	TWOOD, CA 94513
748-4908	4/5-	634-5843
20 7 7	Invoice # _	
ork Order # E 7518	Acct. #	
7-693 (REV. B.86)		

E7518

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

		USE BLACK INK-MAI	NE NO ALIEKA	HONS OR ERASURE	S			
NAME OF DECEDEN	T			SEX	DATE OF BIRTH		DATE OF DEATH FOU	
SHIRLE	Y MAE DE LEO			Female	June 28,	1935	June 29,	1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—CO	DUNTY IOR STATE	IF NOT IN CALIFORNIA)	NAME AND ADDRE	SS OF SPO	OUSE OR OTHER IN	FORMANT
Chula	Vista	84	an Diego		Joan E	. John	son (Sist	er)
NAME AND ADDRES	S OF FUNERAL DIRECTOR (OR PERSON A		CALIFOR	NIA LICENSE NUMBER	30 Pip	po Pla	ce	
Humphrey C		55 Broadway	CA	<b>F</b> -964	Brentw	ood, C	A 94513	
	TYPE OF PER	MIT, CHECK ONLY OF	NE OF THE EO	HOWING TYPES OF	DISPOSITION			
	, , , ,	mility children Street St.						
BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMEN		(INCLUDES	8 DISINTERMEN REMAINS (IN			MATED
2 CREMATION	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMEN		AND BURIAL	9. DISINTERMEN		MATED REMAINS AN	
3 CREMATION	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMEN	T CREATION	Виделения Г	500.0	OBONIES		
4 SCIENTIFIC USE		7. DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY  10 DISPOSITION PENDING				
y solution					LI IG DISPOSITION	PENDING		
INTERNACIO	NAME AND ADDRESS OF CEMETERY V	VHERE REMAINS OR CRE	MATED REMAIN	S ARE TO BE INTERRE	D	COUN	TY	
INTERMENT	Mt. Hope Cemetery	3751 Market !	8t. 8	m Diego, CA		, Sa	n Diego	
CREMATION	MAME AND ADDRESS OF CREMATORNY	Board &	guan	BATE CREMATED	SIGNATURE OF PE	RSON IN CI	HARGE OF CREMAT	ORY
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY DEMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	LINE OF OTHER DESCRI	PRION SUFFICIEN	IT TO IDENTIFY FINAL	PLACE AND COUNT	Y OF DISPO	DISTRION	
CIENTIFIC	NAME AND ADDRESS OF FACILITY REG	CEIVING REMAINS						
USE	H/A							
	This is to certify that I am the pe	erson having the right	to control the	disposition of the	SIGNATURE OF AP	PLICANT		
ACKNOWLEDGMENT	remains of the above named dec				<b>&gt;</b>			
OF APPLICANT	and I hereby acknowledge that to this permit gives no right of unres				DATE SIGNED			
LCCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED.	DE AND IS THE	OF FEE BATT	DATE PERMIT ISSUED	SIGNAMBE OF LO	12	HAR ISSUING PERM	ع
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED BISPASSITION WAS MADE ON	NYER/DATE) SIG	Servi	SON IN CHARGE OF	NSFOSITION		JMBER OF CREMATE IF APPLICABLE	ED REMAINS
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH						

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

E7518 OFFICIAL RECEIPT 36369 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY 264-3151 Address Dollars ( Payment of Division Grave Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT 67007 77184 Invoice No 20% Sales Core 80% Sales Acct. No of Lots 77184 CITY AUDITOR Opening/ Closing 100 77181 JUL 11 1988 77182 Containers BALANCE DUE Handling Fee 77185 Recording & 100 Misc. Fees 77183 Pre-Need On Acct 83033 Pre-Need Lot Trust Pre-need Trust Sales Tax 60101 78390 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)

## MT. HÖPE CEMETERY INTERMENT ORDER

City of San Diego V

	Q.	Date 7-6-	-86
	1 V 1212 1610	W19	IINS.
You are hereby authorized and instruct	ted subject to your rules	and regulations, to h	ter the remains
TS 1600	- caux	7 7	Som
Shart Shart Saultan	Funeral oddite, time	(as a d)	- Free
Church, Chapel, Graveside	CONCENTION :	Done	Mortuary.
All Funeral cars must arrive before 3:3 and billed to undersigned. War time vi	1/0	lay or an extra charge	Will be applied
The contract of the contract of the contract of	SANONAL DE TRE PARTILIES	₩#G	10
Lot 90 Grave 12 Row	Section	Division/8	and Let
Grave space & Care Fund Le	ngk Berial	*************	395
Additional spaces and care fund	· · no	بعہ	
Opening/Closing & Setup			32000
Burial Container Communication	Whall		17500
Handling Fees	boc	******	17000
Flower vases - Marker setting fee		*******	
Recording and filing fee			35
Sales taxes			1137
30day note	To	tal Dué	11063
	Paid receipt number	8/19/88	500 d
	A SHELLES MANUSCO	Balance du	.606-3
0	0-1	Dolai Lo do	,
I hereby certify I am the and this is your authority to make disp that I have the right to make this author any liability on account of said author	rization and I agree to ho	ove indicated. I certi	named decedent fy and represent y harmless from
I hereby authorize the interment in lot hold under deed.	ti Sightyura	news lengt	lacher
nod onder cocc.	Attirms	71 maryo	25+
Signature of recorded holder of deed	- 150 State 42	8-4947	12154
	Telephone		
E mean	Acres in a	C 10 0 7	To the same
Work Order # <b>E</b> 7519	Acet 0	12671	
Work Order # E 7519	Acet #	02671	

		-	MM	0
W.O.	#	<b>E</b> -	751	7

NOTE

\$	1106 37	San Diego, California	auli
-		- walve received the understance	

July 6 1988

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of Seven hearth at 2/00 DOLLARS with interest from on the unpaid principal at 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

ADDRESS 4071 Marzo St, SD 92154

CALIF. DRIVERS LIC. # 1N5458264

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

HARRIET	ESTELLE VIGGINS		Yemale	March 7, 1	916 July 5, 1988
Chula Vi		PLACE OF DEATH—COUNTY IOR S	TATE IF NOT IN CALIFORNIAL	Mancy Ann	SS OF SPOUSE OR OTHER INFORMANT Claibourn-Daughte
7387 B	S OF FUNERAL DIRECTOR, JOR PERSON A	CTANG AS SUCHO CALI	FORNIA LICENSE NUMBER <b>941</b>	4071 Marz San Diego	o Street o, CA 92154
	TYPE OF PERA	WIT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF	F DISPOSITION	
I BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND BURI	AL IINCLUDES		T AND REINTERMENT OF CREMATED LUDES INURNMENT!
Principal Company of the Company of	N AND BURIAL INCLUDES INURNMENT!	6 DISINTERMENT, CREMATIC (INCLUDES INURNMENT)	ON, AND BURIAL		T OF CREMATED REMAINS AND OTHER THAN IN A CEMETERY
3 CREMATION CEMETERY  4 SCIENTIFIC	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT, CREMATIC OTHER THAN IN A CEMET		FOR CO	ORONER'S USE ONLY PENDING
INTERMENT	NAME AND ADDRESS OF CEMETERY W	ALDI MELKOL	AINS ARE TO BE INTERRE	(D)	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CREMATED	DATE CREMATED	SIGNATURE OF PER	SON IN CHARGE OF CREMATORY
BURIAL AT SEA OR POSITION DTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	INE, OF OTHER DESCRIPTION SUFFICE	HENT TO IDENTIFY FINAL	PLACE AND COUNTY	OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	dent under provisions of the Hea espass and nuisance laws apply	Ith and Safety Code, and understand that	SIGNATURE OF APP  DATE SIGNED	LICANT
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE INDIS THE \$4.00	JUL 7 198	8. Almad	A Convert M.B.
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION		NER GATE)	CON THE PROPERTY OF	DISPOSITION L	ICENSE NUMBER OF CREMATED REMAINS DISPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR/OF	COUNTY OF DEATH (			

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE FAMILY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

CITY OF SAN DIEGO AUDITOR & COMPTROLLER REPORT NO. C65-102

#### PAID INVOICE REPORT BY DEPARTMENT AS OF 08/25/88

DATE: 08/25/88 TIME: 235938 PAGE: 6

DEPARTMENT 072 PROPERTY DEPT-MT HOPE CEMETERY PAYM PD PAYM REF NO INV ACCT INV AMOUNT BILLED UNPAID CUSTOMER NAME FUND DEP AMOUNT PAID DATE NO NO DATE ACCT BN/EQ FACILI AMOUNT APPLIED BALANCE DEPT DRG OPER NANCY ANN CLAIBOURN 100 072 100 072 100 072 606.37 1.106.37 071641 07/12/88 026973 08/19/88 CK 1686 500.00 0000 72 0000 72 0000 72 0000 72 0000 72 PARTIAL PAYMENT 77181 77182 77183 99.42 124.28 15.82 142.81 77184 100 072 76.83 5.14 35.70 100 072 60101 78390 77184

NUMBER OF INVOICES PAID

530 DO

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 7-6-88

of	MILLS	Succe	7	18 200
N 8 Veult/Liner	T/	ineral, date, time	The fi	to and
Church, Chapel, Gravesid	Jours	uce :	sunga	Mortuary
All Funeral cars must arrive	before 3:30 p.m.	of regular work	lay or an extra cha	rge will be applied
billed to undersigned. W	ar time veteran		cooke	120
21/19			1	9
Grave	Row	Section	Division	/Block
				100 00
Grave space & Care Fund .	*****		<i>∹</i> ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	100,0
Additional spaces and care f	und		·X	
pening/Closing & Setup .				69. a
lurial Container		121	)	
landling Fees		Q10!		
lower vases - Marker settin	g fee	··· <i>D</i> /		
lecording and filing fee	V.			35,00
	0.1			
Sales taxes	170			19900
	K O		al Due	150 0
	V Paid n	eceipt number _	26207	700.00
			Balance	due _9720
	Father	10		
hereby certify I am the	NOT DESCRIBED TRANSPORT	20.27°		ve named deceden
and this is your authority to r that I have the right to make t	nake disposition his authorization	of remains as at and lagree to ho	iove indicated. I co ild Mt. Hope Cema	ertiny and represen etery harmless from
any liability on account of sa	id authorization	and interment.	100	211
	1			
hereby authorize the interniold under deed.	MOOT IN LOC I	Signature		
(Tuly du		Address		sea bearing
granula of recorded politics of deed		State /	100	O /// - Ze Cod
		6/	9-427	7467
		Telephone		
12-6				
, D.		AL PROPERTY.	0 1100	5
<b>E</b> 752	n	Acct.	0 1104	

		W.O. # E-7520
Carlos States	NOTE	
\$ 99.00	San Diego, California	July 7 19 88
30 lays after date Cherry or San Die the sum of Asia	ego City Treasurer, or order at 3751	d maker promises to pay to Mt. Hope  1 Market Street, San Diego, Ca 92102  DOLLARS with interest from  1 at the rate of 12 percent per annum,
payable on demand.	on the unpaid principal	at the rate of 12 percent per annum,
Interest, after mate are payable in law to renewals, replace maturity, and waive of limptations. A against his/her ser	rity will accrue at the rate indicated money of the United States. The ements and extensions of time for pass presentment, demand and protest a married person who signs this note earate property for any obligation on note, the undersigned promises(s) to	and the right to assert any statute
Safety Code at	er I, Article 2, Para. 7528 of the athorizes the removal of any remains is past due or unpaid.	
PRINT NAME FRAU	EF GAKCIA SIGNATURE	July D
ADDRESS 2989	Kanapali Vag &	B. A. 198 154
CALLE DETWEED ITC	# KAR 69380	

MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE

E7520

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

		SE BLACK INK-MAKE NO ALI	TERATIONS OR ERASURE	3.		
NAME OF DECEDEN	T .	, , , , , , , , , , , , , , , , , , , ,	SEX	DATE OF BIRTH	DATE OF DEATH	
ALLEND	E GARCIA		Male	July 05, 198	8 July 05, 1988	
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH-COUNTY IOR	STATE IF NOT IN CALIFORNIA)	NAME AND ADDRESS (	OF SPOUSE OR OTHER INFORMANT	
Chule		San Die	go	Frank F.	Garcia (Father)	
NAME AND ADDRES	SS OF FUNERAL DIRECTOR (OR PERSON	TING AS SUCHI CA	LIFORNIA LICENSE NUMBER	2989 Kaan	apali Way	
Humphrey C	hula Vista Mortuary-	mla Vista. CA	P-964	San Diego	, CA 92154	
	380 m W	maken Talent & Such and			X	
		WIT, CHECK <u>ONLY ONE</u> OF THE	FOLLOWING TYPES OF	DISPOSITION		
III 1 BEJRIAL (IN	ICLUDES ENTOMBMENT)	5. DISINTERMENT AND BUR ENTOMBMENT)	RIAL BINCLUDES	B DISINTERMENT AN REMAINS IINCLUD	D REINTERMENT OF CREMATED ES INURNMENT)	
100	N AND BURIAL (INCLUDES INURNMENT)	8 DISINTERMENT, CREMAT	ION, AND BURIAL		CREMATED REMAINS AND	
3. CREMATION CEMETERY	N AND DISPOSITION OTHER THAN IN A	7. DISINTERMENT, CREMAT	ION AND DISPOSITION	FOR CORO	ONER'S USE ONLY	
4. SCIENTIFIC USE		OTHER THAN IN A CEME	YEBV	10 DISPOSITION PENDING		
	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATED REM	MAINS ARE TO BE INTERRE	0	COUNTY	
INTERMENT	Mt. Home Cemetery	3751 Market St. Sc	an Diego, CA	i i	San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY W		THE RESERVE OF THE PARTY OF THE	SIGNATURE OF PERSON	IN CHARGE OF CREMATORY	
BURIAL AT SEA	ADDRESS, NEAREST POINT ON SHOREL	OR OTHER DESCRIPTION SUFF	ICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF	DISPOSITION	
DISPOSITION OTHER IN A CEMETERY OF MATED REMAINS	N/A		(//	4 .		
SCIENTIFIC	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	<del></del>			
USE	B/A		826			
	This is to certify that I am the pe	rson having the right to control	the disposition of the	NT:		
ACKNOWLEDGMENT OF	remains of the above named dece			>		
APPLICANT	and I hereby acknowledge that to this permit gives no right of unres			DATE SIGNED		
LOČAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE	JUL 8 1988	SIGNAL DE OF SCA	BETRAR ISSUING BRAMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED 7/10		PERSON IN CHARGE SEC	SPOSITION LICEN	SE NUMBER OF CREMATED REMAIN SER, IF APPLICABLE	
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	O STEEL			

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

	67007	FF184			11-00	
071642 07/12/88 026972 E-7520	FRANK F. GARCIA 100 072 100 072	77181 77183	08/08/88 CK 000072 000072	1997	99-00 64-00 35-00	99-00 PAIS IN FULL
NUMBER OF IRVOICES PAID TOTAL AMOUNT PAID	824-00					

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 7-7-88

of Rock Vault	neral, date, time Mon 7/18 AYL
Vault/Liner	Alexan man
All Europeal case must estima before 3:30 a.m.	of regular work day or an extra charge will be applied
and billed to undersigned. War time veteran .	Deleuer On La
and blied to didensigned. War time veterall .	7
Lot Grave JO Bear	Section Division Block
Grave space & Care Fund Would	le Cest blot
Additional spaces and care fund	
Opening/Closing & Setup	105.00
Burial Container	10.00
עו	7.1 0 60,00
Handling Fees	21
Flower vases - Marker setting fee	35.00
Recording and filling fee	
Sales tayes	N 2.60
1. WWW M	Total Due
dall set with	21/120 01/2/1
Paid re	ceipt number 2090 / 2000
(N'98 WIN 11)	Balance due
P -71 49 1	The self-to the structure of the self-to t
I hereby certify I as the	of the above named deceden of remains as above indicated. I certify and represen
that I have the right to make this authorization	and lagree to hold Mt. Hope Cemetery harmless from
any liability on account of said authorization a	and interment.
I hereby authorize the interment in lot I	8.44/website
hold under deed.	Signature
Signature of recorded holder of deed	Address
	State Zip Cod
	Tetsphone
(K.E.)	1900000
	Invoice #
Wast Order # E 7521	

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

	ı	JSE BLACK INK-MAKE NO AL	TERATIONS OR ERASUR	tes		
ME OF DECEDEN	π.		SEX	DATE OF BIRTH	DATE OF DEATH	
Coraldine 2	les Lavson		<b>Female</b>	Age 61 -	July 2, 1988	
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY IOR	STATE IF NOT IN CALIFORNIA	NAME AND ADD	RESS OF SPOUSE OR OTHER INFORMANT	
Yesse	4.00	Yuma, Arisona		Kannana M	ortuery	
NAME AND ADDRES	SS OF FUNERAL DIRECTOR FOR PERSON A	CTING AS SUCH)	ALIFORNIA LICENSE NUMBER	795 W. 28	th Street	
Greenwood N	lort. I-805 & Imperial	. Sám Diego, CA.	F-843	Torse , Ar	1xons 85864	
•	TYPE OF PER	MIT, CHECK ONLY ONE OF TH	E FOLLOWING TYPES C	F DISPOSITION		
☐ 1.BURIAL ON	ICLUDES ENTOMBMENT)	5. DISINTERMENT AND BU	RIAL (INCLUDES		ENT AND REINTERMENT OF CREMATED INCLUDES INURNMENT!	
2. CREMATION AND BURIAL (INCLUDES INURNMENT) 3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 4. SCIENTIFIC USE		6 DISINTERMENT, CREMA-	TION, AND BURIAL		ENT OF CREMATED REMAINS AND N OTHER THAN IN A CEMETERY	
		7 DISINTERMENT, CREMA		FOR CORONER'S USE ONLY  10. DISPOSITION PENDING		
		SOSTANTON ASPANIA CORAN CATANIA	CAC-100).			
CREMATION  HIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	NAME AND ADDRESS OF CREMATORY V	51 Market Street, HERDEMAINS ARE TO BE CREMAT	Sen Diego CA.	92102 SIGNATURE OF F	PERSON IN CHARGE OF CREMATORY  OF DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	ENHO REMAINS				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pe remains of the above named dece and I hereby acknowledge that tr this permit gives no right of unres	dent under provisions of the Ho espass and nuisance laws appl	ealth and Safety Code, y and understand that	SIGNATURE OF A	PPLICANT	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE	D JUL 11 19	SIGNATURE OF L	LA REPUTRAR ISSUING PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	4740/2/11 "NE	ATER DATE	PERSON INCHARGE	DISPOSITION	LICENSE NUMBER OF CREMATED REMAIN DISPOSER, IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	U	×		

INDEX 3 OF THE PERMIT IS TO BE RETURNED TO THE COUNTY OF DEATH WHEN THE REMAINS ARE DISPOSED OF IN ANOTHER COUNTY IF NOT PPLICABLE, COPY 3 MAY BE DISCARDED THE LOCAL REGISTRAR MAY DESTROY ANY ORIGNAL OF DUPLICATE PERMIT AFTER ONE YEAR.

#### OFFICIAL RECEIPT

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

No 36427

CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 284-3151		02
From Cannyain Ma	tus address: 795 W.	28th It.	Sume : 62
Two lundred	Into-two 60/100	Dollar	242.60
Payment of	musere dans	The state of the s	newspers
Lot 47 Grave		ection2	Division /
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 570 20% Sales Care 771	84
Acct. No	CITY AUBITOR	of Lots 771	00 10 100
w.o. & / Da/	THE RESERVE OF THE PERSON NAMED IN	Buriel 1 Containers 771	00 40 00
BALANCE DUE	JUL 25 1988	Handling Fee 771 Recording & 1 Misc. Fee 771	
Pre-Need Lot At Need On Acct D	. / 1 / 1	Rive-Need 630 Frigst 90 Sales Tax 801	33
AC-212 (Rev. 10-87) Cash Check A	ISSUED SY Proble West	TOTAL PAID 783	
	THE RESERVE AND ADDRESS OF THE PARTY OF THE	THE RESERVE AND ADDRESS.	The second secon

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

13 413+13

City of San Diego

Date 7-7-88

a Ost Vault Fun	eral, date, time .	Wed 7/1	3 10:3
hurch, Chapel, Graveside	;_6	mad	Mortua
Il Funeral cars must arrive before 3:30 p.m. of	regular work da	y or an extra charge	will be applie
nd billed to undersigned. War time veteran _	0.00		
15 10		2	
ot / 3 Grave / C Row	Section	Division/84	rck
rave space & Care Fund		(10)	
dditional spaces and care fund	Lavar	.ec	
pening/Closing & Setup	09 41		105.0
urial Container Age 4	W.		40.0
	1	**************	60.0
andling Fees	^	*******	
ower vases - Marker setting fee	011	**************	3/1
ecording and filing fee	<i>D.</i>		41
ales taxes		************	11/5/
_	Tota	Due	746.6
Paid rec	eipt number	20275	244.6
-	3	Balance due	5
Rought	on		
nereby certify I am the Community to make disposition of	remains as abo	of the above n we indicated. I certif	v and represe
at I have the right to make this authorization a ny liability on account of said authorization ar		d Mt. Hope Cemetery	harmless fro
	( ),	111/1/	1
nereby authorize the interment in lot I old under deed.	Signature	all VIII	cons
	Address /	24 1 m	00
grature of recorded holder of deed	9200	TEST (X	7209
	- >	66.00	169
	Telephone		/
14.4			6

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	Ť	H. VIII DON'THE	1000		SEX	DATE OF BIRT	+	DATE OF DEA	ATH	
ESTHER M	ARGARET LILYBLADE				Female	Dec. 9	1912	July 7	. 1988	
La Mosa	CITY OR TOWN	A STATE OF THE PROPERTY OF THE PARTY OF THE	PLACE OF DEATH—COUNTY (OR STATE IF NOT IN CALIFORNIAL			NAME AND AD				
NAME AND ADDRESS OF FUNERAL DIRECTOR (OR PERSON A		TING AS SUCH	TING AS SUCHI CALIFORNIA LICENSE NUMBER			Pre-ne	ed			
	TYPE OF PERA	AIT, CHECK	ONLY ONE O	THE F	OLLOWING TYPES C	F DISPOSITION				
1 BURIAL (IN	CLUDES ENTOMBMENT)	☐ 5 DI	SINTERMENT AN	D BURIA	L (INCLUDES		MENT AND R	EINTERMENT OF NURNMENT)	CREMATED	
	N AND BURIAL (INCLUDES INURNMENT)	☐ 6 DI	SINTERMENT, CR ICLUDES INURNA	EMATIO	N, AND BURIAL	9 DISINTERI	MENT OF CRI	EMATED REMAINS HAN IN A CEMET	S AND TERY	
3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 4 SCIENTIFIC USE		7. DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY			FOR CORONER'S USE ONLY  10. DISPOSITION PENDING			LY		
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAI		000	INS ARE TO BE INTERR	ED	COU	nTY Diego	NS.	
CREMATION	NAME AND ADDRESS OF CREMATORY W	C2 100	ge Kan	S.				CHARGE OF CREE	MATORY	
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY OF GREMATED REMAINS	ADDRESS, NEAREST POINT ON SHAREL	INE. OF OTH	en Description	H	ENT TO IDENTIFY FINA	L PLACE AND COL	INTY OF DIS	POSITION.		
CIENTIFIC	NAME AND ADDRESS OF FACILITY REC	EIVING REMA	lins							
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that the this permit gives no right of unrest	dent under	provisions of the	e Heali apply a	h and Safety Code, nd understand that	SIGNATURE OF  DATE SIGNED	APPLICANT			
- LOCAL REGIŜTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	E AND IS THE	\$4.00	PAID	JUL 8 1988	SIGNATURE OF	LOCAL REGI	Mrss M	ermit Emm	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	1 SIIVIXIA	3/88 IDER DATEI	- 2	rous	ERSON IN CARRE OF	DISPOSITION	DISPOSER	NUMBER OF CREM	MATED REMAIN	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE/ADDRESS OF REGISTRAR OF	COUNTY OF	DBATH	0	and the second second					

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

36395

## WHITE ..... TO CUSTOMER

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151	7 0	of of
with ante	in 4584 ~	Pate;	177 . 19 80
From Two Junale	d Sorte - tevo	Dollars (\$	212,60
InPayment of	stheo' Lily	lodes s	Service
Lot 5 Grave	10 Row S	ection 8	Division 5
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 —	
Acct. No. E-7522	CITY AUDITOR	80% Sales 100 of Lots 77184 — Opening/ 100 Closing 77181 — Burial 100 Containers 77182 —	105 00
BALANCE DUE	JUL 13 1988	Handling Fee 77185 — Recording & 100 Misc, Fees 77183 —	5 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	Vardea Ch	Pre-Need 63033 7rust 9022 — Sussee Tax 60101 78390 —	260
AC-212 (Rev. 10-87) 004481	ISSUED BY	TOTAL PAID \$	044 60



### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 7/11/88

ot Mas Sally	A STATE OF THE PARTY OF THE PAR	400	
N a Vault/Liner	Funeral, date, tim	62 00	- 2
Church, Chapel, Graveside		Fagsdale	Mortuary
All Funeral cars must arrive before 3	:30 p.m. of regular work	day or an extra charg	e will be applied
and billed to undersigned. War time	veteran		
7n 9		2	10
ot / Grave _ Roy	v Section _	Division/B	tock / 2
Grave space & Care Fund	**************		4950
dditional spaces and care fund	m	Dur sport	2
		3200	
pening/Closing & Setup		200	w e - w
lurial Container Conut	Vanl	1.73	
andling Fees		170.13	
	STEEDS TO THE STANKEN	1 <del></del>	
ow vales Alarkir settin fee	*****************	1300	
ecording and filing fee		1.00	.,
ales tayles   . 1 . 1 . 1988	***************	1 11.37	
4-5-4-4	7	otal Due	12065
MT. HOPE CEMETERY			120150
CITY of SAN DIEGO, CALIF.	Paid receipt number 3	JU-1110	1000.40
		Balanca de	ue
P.	7		
hereby certify I am the	eur	of the above	named deceder
nd this is your authority to make dis hat I have the right to make this auth			
ny liability on account of said autho		, k	SPILES Y AND
	8	1.	
hereby authorize the interment in le hold under deed.	ot 12 1 Sepreture	m solar	28_
2.	00 (11 3	682 K	20.
ignature of recorded holder of deed	- 11 Marient	in dien	
114097485770	State 0		Zip Cox
IT gelendelited.	Telephone	2. 7	2.02
The state of the s			
京 1000	Invoice	#	
Work Order # E 7523	N. Carlotte		- 8
Work Order # L I U & U	Acct. #		

### Anderson-Ragsdale Mortuary

"Third Generation In The Mortuary Profession"

5050 FEDERAL BLVD. SAN DIEGO, CALIF 92102

PHONE 17141 263-3141



July 8, 1988

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

Dear Sir:

I am enclosing a check in the amount of \$1206.50 for a pre-need grave for Mrs. Sally Little.

A brother of the deceased, Sam Blake will make the selection of the grave. He lives at 3082 "K" Street: San Diego, CA 92102 and his phone number is 232-0284

I am sending him a copy of this letter so that he will know what has been done.

Make the receipt to Anderson-Ragsdale Mortuary and be sure that a copy is given to Mr. Blake.

E-7523 Per # 36410 W Ragsdale

OWNER

OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK. AUDITOR  From Indusor Rapdale	CITY OF BAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151  Montagy Address: 5050 February	Date: Juli	8 921	19 88
In Sull Payment of Present Comment of Present Action of Present Ac	heed Stave of Sening	Dollar Sally	Division Block	00
W.O. F - 7523  BALANCE DUE On Acct Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Ac-212 (Rev. 10-87)	SSUED BY LOGICAL STORY	Closing 771 Burlal 1 Containers 771 Handling Fee 771	JUL 1 000 000 000 000 000 000 000 000 000 0	1988 50 50

Total La

#### MT. HOPE CEMETERY

INTERMENT ORDI	ER
City of San Diego	7/1
The state of the s	Date ///2/88
You are hereby authorized and instructed, supject to your rules :	and regulations, to inter the remains
of mine sehnie	g &
in a Funeral, date, time	
Church, Chapel, Graveside;	Mortuary.
All Funeral cars must arrive before 3:30 p.m. of regular work de	ay or an extra charge will be applied
and billed to undersigned. War time veteran 100.	- 16
Lot/30 Grave 6 Row Section	2 Division/Black //
Grave space & Care Fund . Ou had Pd- E	-7045
Additional spaces and care fund	***************************************
Opening/Closing & Setup	/0589
Opening/Closing & Setup	lt 40°
Hardling A I D Labor	
Flower vases - Marker setting fee	
Recording and biling gool 1988	<u> 30°°</u>
Same Mare Hope Cemetery	2.40
CITY of SAN DIEGO, CALIF.	al Due
Paid receipt number	36413 242.60
	Balance due
I hereby certify I am the Dullel	And the second s
I hereby certify I am the and this is your authority to make disposition of remains as about hat I have the right to make this authorization and I agree to hol any liability on account of said authorization and interment.	of the above named decedent ove indicated. I certify and represent Id Mt. Hope Cemetery harmless from
. P	00
I hereby authorize the interment in lot I Signeture Signeture	more Schnig
2 1	is of agon shirt

Invoice #

Work Order # E 7524 PY-563 (REV. 8-85)

#### OFFICIAL RECEIPT 36413 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO GUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY PINK..... AUDITOR 264-3151 Date: Dollars (\$ 242 -Division Section Grave Marie M. CREDIT NOT VALID FOR PURPOSE STATED UNLESS STAMPED CITY AUDITOR Invoice No. "PAID" IN THIS SPACE 20% Sales Care 80% Sales of Lots 77184 ACCL NO Opening/ Closing 77181 Burial Containers 77182 100 BALANCE DUE Handling Fee 77185 Recording & 100 Miec. Fees 77183 Pre-Need 63033 Pre-Need Lot On Acct Trust Sales Tax 60101 Pre-need Trust Cash TOTAL PAID ISSUED 8 AC-212 (Rev. 10-87)

### MT. HORE CEMPERY

	MENT ORDER
meet at com	of San Diego
Dre Must	Date 7-/2-88
You are hereby outhorized and instructed, sub	oject to your rytes and regulations, to inter the remain:
of Dolly a	ne Doleshal
in a Full	meral, date, time
	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. War time veteran .	10
Lot 10 Grave 3 Row	Section
Grave space & Care Fund	
Additional spaces and care fund	
Opening/Closing & Setup	320.0
Burial Container	100.00
Handling Fees	195.00
Flower vases - Marker setting fee	
Recording and filing fee	\$5,00
Sales taxes	<u>6.39</u>
Madel	Total Due
1. Alexandre	sceipt number 36 4/4 100-00
Le Let	Total Due
I hereby certify I am the and this is your authority to make disposition	of remains as above indicated. I certify and represen
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 and interment.
I hereby authorize the interment in lot I hold under deed.	Signature
	Addresse
Signature of recorded holder of deed	Stane Zip Cox
P	Telephone
- annu	Invoice #
Work Order # <b>E</b> 7525	Acct. #
PY-693 (REV. B-85)	

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY Nº 36414

CAMARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 284-3151	<b>汽车</b> 了手机	
From Letter Jane Cole	Shaladress: 6550 %	Date: Ochlec	12 19 63
InPayment of	reneed Sunt	Dollars (\$	100.00
Lot 10 Grave t	3 - PIP Row_s	ection 17	Division 7
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 87007 20% Salas Care 77184 – 80% Salas 100 of Lots 77184 –	CITY AU BITOR
W.O. E - 7525 BALANCE DUE 506.50		Opening/ 100 Closing 77181 - Burlal 100 Containers 77182 - 100	JUL 1 9 1981
Pre-Need Lot  At Need  On Acct		Handling Fee 77185 -  Recording & 100  Misc. Fees 77183 -  Pre-Med 63033  Trust 9022 -	100 00
Pro-need Trust Cash Check Check AC-212 (Nev. 10-97)	ISSUED BY JANAIA	Sales Tex 80101 78390 -	100 00

36675

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORMA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

PINKAUDITOR	284-3151		0		70
From Little Jane (	Westel 6550	Poste 1	Ini	ic So	1980
fifte I della	us no/10	D	ollars (\$ :	50,0	0,
In Payment of	reneed Mus				1500
Lot 10 Grave	3Rows	ection/	7	Division Block	7
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales	87007 77184 — 100 77184 —		
Acct No	CITY AUDITOR .	of Lots Opening/ Closing Burial	77184 — 100 77181 —	1	1
BALANCE DUE 406,50	SEP 19 1988	Containers Handling Fee	77182 — 100 77185 —	V 9 A	
Pre-Need Lot   At Need   On Acct	J. 13 1988	Recording & Misc. Fees Pre-Need	100 77183 — 63033 9022 —	Si	00
Pre-need Trust Cash Check	ISSUED BY TRANSA VARA	Sales Tax TOTAL PAID	60101 78360 —	<7	100
AC-212 (Rev. 10-87) /0/6	ISSUED III	TOTAL PAID	ALC: Y	2	100

AC-212 (Rev. 10-67)

# CITY OF SAN DIEGO, CALIFORNIA

CAMARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY				
Jett Dalland	1 650	2 Date:	2	-6	10 8
tocate- fee	Address: 2500 0	0	ollars (\$	25.0	2
In Payment of	Flenced Allo	IT	No.		
Lot 10 Grave	3s	ection/	17	Division 7	7
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales	67007 77184		
W.O. 9-17525	CITY ALBOTOR	of Lots Descring/ Closing Buriel	77184 100 77181		
BALANCE DUE 381.50	FEB 1 0 1989	Containers Handling Fee	77182 100 77185	registration of the second	
Pre-Need Lot Q At Need On Acct	1309	Pre-Need	100 77183 63033 9022	ds	00
Pre-need Trust Cash Cash Check Q	ISSUED BY SANACE / JOLE	Sales Tax TOTAL PAID	60101 78390 —	14	2

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 7/12/88

		7 1	
You are hereby authorized and instructed, su	blect to your rules an	d regulations, to in	ter the remains
John Dos 7	10554	10	
no some F	uneral, date, time	hunday	2/14 - 1/do
Church, Chapel, Graveside	Buil Fe	- IA	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. War time veteran			#E417 F0171 V ON. #. #51 V 400
121 800		1	12
of Grave Row	Section	Division-491	ock_/
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Grave space & Care Fund			007 <del>10075 - 35</del>
A THE SERVICE THE RESIDENCE OF THE PROPERTY OF THE PROPERTY OF THE			90 0
Opening/Closing & Setup			. 20.00
Surial Container		******	6)/-
landling Fees	***************************************		•
lower vases - Marker setting fee			
Recording and filing fee			ñ
Sales taxes			
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wow to	receipt number		Waterball 1900
28-02-	eceipt number		
	ř.	Balance du	0
hereby certify I am the	one	of the above n	amed deceden
and this is your authority to make disposition hat I have the right to make this authorization		indicated. I certif	y and represen
my liability on account of said authorization  Portical Board - Ly		vii. nope cemeter	y narmiess from
hereby authorize the interment in lot I	Signature		-
P. VI WAS DESIGNATIVE OF THE CO.	Address		
ignature of recorded holder of deed	Stele		Zio Cod
	Telephone		
	Address of the second	and the second	
# 15 N	Invoice #	100	
Nork Order # E 7526	Acct.#		A CONTRACTOR OF THE PARTY OF TH
TOTA OTOGI W	FLOOL IT	-	-

E7526

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

JOHN DOE			SEX Male		DATE OF BIRTH UNKNOWN	Fd.	Feb.	4, 198		
PLACE OF DEATH— Escondid	San	Diego	IOR STATE IF NOT IN CA	LIFORNIA)	San Diego	County Con	coner	RMANT		
Featherin	cajon	nva:	CALIFORNIA LICENSE NI	UMBER	5555 Overl Sen Diego,		E 0.000 0.000 0.000	23		
	53	TYPE OF PER	MIT, CHECK S	ONLY ONE OF	THE FOLLOWING T	YPES OF	DISPOSITION			
1 BURIAL (IN	CLUDES ENTOMBMENT)			INTERMENT AND	BURIAL IINCLUDES		8 DISINTERMENT A REMAINS IINCLU	ND REINTERMENT DES INURNMENT)	OF CREMA	TED
1 <u>47</u> :	N AND BURIAL IINCLUDES	100000000000000000000000000000000000000	G. DISI	INTERMENT, CRE	MATION, AND BURIAL		9 DISINTERMENT OF DISPOSITION OF	OF CREMATED REM		
3 CREMATION CEMETERY 4. SCIENTIFIC		R THAN IN A		INTERMENT, CRE	MATION, AND DISPOS CEMETERY	300+1000	FOR COR	NONER'S USE	ONLY	
INTERMENT	NAME AND ADDRESS OF	emetery	3751 N	larket St	., San Diege	o, Ca		San Dieg		
CREMATION	n/a CO	CREMATORY	WHERE BEMAINS	ARE TO BE CRE	MATED BATE CREMA	MA	SIGNATURE OF PERSO	IN SHARGE OF	CREMATOR	×
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY MATED REMAINS	n/o Parl	T ON SHORE	Boar	DESCRIPTION T	Box	Y MINAL	PLACE AND COUNTY OF		le,	
SCIENTIFIC USE	NAME AND ADDRESS OF	FACILITY RE	CEIVING REMAIL	De	A felle	V -	- No him	ie		30
ACKNOWLEDGMENT OF APPLICANT	This is to certify that remains of the above and I hereby acknow this permit gives no r	named dec	edent under prespass and n	rovisions of th visance laws o	e Health and Safety opply and understan	Code,	SIGNATURE OF APPLIC	ANT		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN AI OF THE CALIFORNIA HEALTH AUTHORITY FOR THE DISPOS	AND SAFETY CO	DE AND IS THE	AMOUNT OF FEE	JUL 14	1988	SIGNALIBE OF LOCAL	PARTE ISSUIT	BERMIT	646
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE	CIFIED	7/14/88	SIGNATION	PERSON IN THAT	RGE OF D	ISPOSITION LICE DISF	NSE NUMBER OF O		REMAINS
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF F	REGISTRAR OF	COUNTY OF D	EATH						tí X

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

# MT. HOPE CEMETERY

City of San Diego

Date 7/14/88

		7 7
You are hereby authorized and instructe	ed, subject to your rules and	regulations, to inter the remains
of	woodwara	2/1/04
in a Vault Liner O	Funeral, date, time	m //18 / 1.111:
Church, Chapel, Graveside	merche : W.	Mortuary.
All Funeral cars must arrive before 3:30	0 p.m. of regular work day o	ran extra charge will be applied
ind billed to undersigned. War time ve	teran	Tecky
Lot 521 GraveRow	Section 5	Division/Block
Grave space & Care Fund Q	u heed	
Additional spaces and care fund		
Opening/Closing & Setup		3200
Burial Container	- A	175-20
landling Fees	PAID	1700
lower vases - Marker setting fee	delen en	
Recording and filing fee	JUL 1 8 1988	35
Sales taxes MT.	HOPE CEMETERY	1131
To anin CITY	of SAN DIEGO, CALLE	7//.37
A. 10 - 2	Paid receipt number 36	429 711.37
·-	:.P2	Balance due
	a thone -	
I hereby certify I am the and this is your authority to make dispo that I have the right to make this author any liability on account of said authoria	ization and I agree to hold M	of the above named decedent indicated. I certify and represent It. Hope Cemetery harmless from
I hereby authorize the interment in lot hold under deed.	Signatura	
	Address	
Signature of recorded holder of dead	State	Zip Cod
	Telephons	
Emen	Invoice #	
Work Order # E 7527	Acct. #	

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	Mode B. Wooden	md.	SEX Famile	DATE OF BIRTH	DATE OF DEATH July 13,1988
	S OF FUNERAL DIRECTOR FOR PERSON AS		ALIFORNIA LICENSE NUMBER	Audrey Nelson 14015 Hillds	ale RD
Alhies Wil	son Mortuery 125 S Box	acchery Escondido	297	Valley Cente	ar Ca 92082
	TYPE OF PER	MIT, CHECK ONLY ONE OF TH	HE FOLLOWING TYPES O	OF DISPOSITION	
1 BURIAL (IN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND BU	URIAL (INCLUDES	8 DISINTERMENT AND REMAINS (INCLUDE	D REINTERMENT OF CREMATED
2. CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMA			CREMATED REMAINS AND
3 CREMATION CEMETERY  4 SCIENTIFIC		7. DISINTERMENT, CREMA OTHER THAN IN A CEN	ATION, AND DISPOSITION		ONER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATED R	EMAINS ARE TO BE INTERP		San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	0 .	TED DATE CREMATED	SIGNATURE OF PERSON	IN CHARGE OF CREMATORY
BURIAL AT SEA  OR  SITION OTHER IN A CEMETERY OF CREMATED REMAINS	10 Contilan	INE. OR OTHER DESCRIPTION SUF	FICIENT TO IDENTIFY FINA	L PLACE AND COUNTY OF	DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RE	EIVING REMAINS			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	dent under provisions of the H espass and nuisance laws app	ealth and Safety Code, ly and understand that	SIGNATURE OF APPLICAL  DATE SIGNED	
LOCAL REDISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED II	DE AND IS THE S 4.00	JUL 15 196	SIGNATURE OF LOCAL H	EGISTRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	NTER GATE)	PERSON O CHARGE OF		SE NUMBER OF CREMATED REMAIN SER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	<i>d</i> ••••		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

Seven hundred cleven dollars a

From: W.L.S. Associates Inc

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Payment of Interment of Eddie B. Woodward

264-3151				
Date:	7-	18	166.00	19.88
1885 225 So. Broadway	Esc.	CH	92025	5
nd 37/00 Broadway,	- Dolla	18	7/1.31	7
Control of the Contro	DUIIO	in to	7. T.	-

Lot 521 Grave Row NOT VALID FOR PURPOSE STATED UNLESS STAMPED Invoice No. 'PAID' IN THIS SPACE Acct. No. CITY AUDITOR W.O. 7527 JUL 25 1988 **BALANCE DUE** Pre-Need Lot At Need Pre-need Trust Cash Check 21756 ISSUED BY W.J. Teague AC-212 (Rev. 10-07)

tion 5		Division - Block	8
CREDIT 20% Sales Care	67007 77184 —		
BO% Sales of Lots	100 77164 —		
Opening/ Closing	100	320	1
Burial Containers	100	175	-
Handling Fee	100	170	-
Recording &	100	35	-
Pre-Need Trust	83033 9022	THE SERVICE STATES	
Sales Tax	80101 78390 —	11	37
TOTAL PAID	- 5	711	37

City of San Diego

Date 7-15-80 You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains uneral, date, time Church, Chapel, Graveside All Funeral cars must arrive before 3:30 p.m. of regular work day and billed to undersigned. War time veteran Grave space & Care Fund Additional spaces and care fund Opening/Closing & Setup Burial Container . Handling Fees ..... Flower vases - Marker setting fee Paid receipt number 2 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 hold under deed. Invoice # Work Order # PY-893 (REV. 9-65)

E7528

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	Agnes B. Starr		Famale	Jan. 19	, 1905 DATE OF DEATH July 14, 1988		
PLACE OF DEATH— San DI NAME AND ADDRES	ego SS OF FUNERAL DIRECTOR (OH PERSO <b>S S</b>		DANIA LICENSE NUMBER	Sarah S 7814 Mi	DRESS OF SPOUSE OR OTHER INFORMANT bippy - Conservator ssion Bonita Drive		
Cypress Vi	ew/Bonham Brothers	San Diego, CA.	670	San Die	go, CA. 92120		
<b>x</b> x	TYPE OF PERA	AIT, CHECK ONLY ONE OF THE F			ENT AND REINTERMENT OF CREMATED		
1 <u>00</u>		ENTOMBMENT)	L (INCLUDES		INCLUDES INURNMENT)		
	N AND BURIAL (INCLUDES INURNMENT)  N AND DISPOSITION OTHER THAN IN A	6 DISINTERMENT, CREMATION (INCLUDES INURNMENT)	N, AND BURIAL		ENT OF CREMATED REMAINS AND ON OTHER THAN IN A CEMETERY		
4 SCIENTIFIC		7, DISINTERMENT, CREMATION OTHER THAN IN A CEMETE		FOR  10 DISPOSITI	CORONER'S USE ONLY		
INTERMENT	NAME AND ADDRESS OF CEMETERY W Mt. Hope Cemetery, 3	HERE REMAINS OR CREMATED REMA 751 Harket Street,			COUNTY San Diego		
CREMATION	NAME AND ADDRESS OF CREMATORY W	THERE REMAINS ARE TO BE CREMATED	DATE CREMATED	SIGNATURE OF	PERSON IN CHARGE OF CREMATORY		
BURIAL AT SEA OR DISPOSITION OTHER THE IN A CEMETERY MATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	Covering Design (1905)	ENT TO IDENTIFY FINAL	PLACE AND COU	NTY OF DISPOSITION		
SCIENTIFIC USE	NAME AND ADDRESS OF EACHTY REC	EIVING REMAINS					
ACKNOWLEDGMENT OF	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tr	dent under provisions of the Healt	th and Safety Code,	SIGNATURE OF APPLICANT  DATE SIGNED			
APPLICANT 3+	this permit gives no right of unrest						
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED I	E AND IS THE \$4.00	MIE 4148 121988	SIGNATURE OF I	rall & Campal, M.D. W		
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	10/88 SIGNATURE OF P	ERSON INCHARGE OF D	ISPOSITION	LICENSE NUMBER OF CREMATED REMAINS DISPOSER, IF APPLICABLE		
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAN OF	COUNTY OF DEATH			<i>x</i> .		

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

#### OFFICIAL RECEIPT 36433 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY 264-3151 Payment of Division Grave Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 Invoice No. "PAID' IN THIS SPACE 20% Sales Care 77184 ROS Sales 100 Acct. No. of Lats CITY AUDITOR Opening/ Closing Burlel Containers 77182 JUL 25 1988 BALANCE DUE Handling Fee 77185 Recording & Misc. Fees 100 77183 Pre-Need 63033 Pre-Need Lot Trust 8022 Pre-need Trust Seles Tax 60101 78390 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 745-88

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of remains as above indicat and I agree to hold Mt. Hope and interment.	ed. I certify and represer
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Address	
- David	Žie Co
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2020/25	100
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Telephone	31.30
Telephone Invoice	
	Total Due  Seipt number of the fremains as above indicate and I agree to hold Mt. Hopend interment.

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#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

None to to the						17.0			
NAME OF DECEDEN	0.77	WYGOLD		TARVA	SEX	DATE OF BIRTH	1000	DATE OF DEATH	1000
		NICOLE			Female	May 14,		July 3,	
PLACE OF DEATH-	AND THE PROPERTY OF THE PARTY O		A STANSON STREET		OR STATE IF NOT IN CALIFORNIA			OUSE OR OTHER IN	
San Di				Diego	20	Donta	(oung	- Father	
	ss of funeral direct FORNIA CREMATION	AND BURIAL		4	CALIFORNIA LICENSE NUMBER			A 92107	2
*6 IB	5802 El Ca					THE RESERVE THE STATE OF THE ST			
S 1	San Diego,	CA THELLE PER	MIT, CHECK	ONLY ONE OF	THE FOLLOWING TYPES O	OF DISPOSITION			40
•	2.37	v T	FI	All reasons and the	and Westers			2n. S. Li 220	3
AUX 1 BURIAL (IN	CLUDES ENTOMBMENT	n.		SINTERMENT AND I	BURIAL IINCLUDES		NCLUDES INC	NTERMENT OF CRE JRNMENT)	MATED
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LI 3. CREMATIO CEMETERY	N AND DISPOSITION O	THER THAN IN A	Пзр	SINTERMENT CREM	NATION, AND DISPOSITION	EOB	CORONER	'S USE ONLY	
4. SCIENTIFIC	USE			THER THAN IN A CE		10 DISPOSITIO		S OSE CHET	
						THAT CHARL BYSEST STATION	thouse services	***	
INTERMENT	Mt. Hope				StSan Die	(B.7)	Sa	n Diego	
CREMATION	NAME AND ADDRESS		vhere remai	NS ARE TO BE CREM	ATED DATE CREMATED	Nie		HARGE OF CREMAT	ORY
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY MATED REMAINS	ADDRESS, NEAREST	36X1	2 × / 2	ES JESCHTION	JEFICIENT TO IDENTIFY FINA	L PLACE AND COUN	ITY OF DISPO	SITION	
SCIENTIFIC USE	NAME AND ADDRESS	OF FACILITY REC	EIVING REMA	ains 3	o"deep				
	This is to contifu t	hat I am the ne	rean basina	the right to cont	rol the disposition of the	SIGNATURE OF A	PPLICANT	-	
ACKNOWLEDGMENT	(Carried Co.) (C		market Switch Colonial Colonia	PERSONAL CONTRACTOR	Health and Safety Code,	<b>&gt;</b>			
OF APPLICANT		nowledge that to	espass and	nuisance laws ap	ply and understand that	DATE SIGNED			
*	ms perma gives	no udui oi outas	Incled deces				*******		
LOCAL REGISTRAR	OF THE CALIFORNIA HEA AUTHORITY FOR THE DIS	LTH AND SAFETY CO	DE AND IS THE	\$ 4.00	DATE PERMIT ISSUED		L Com	RAR ISSUING PERM	JUN
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE	SPECIFIED 7/	20/88 NTER DATE	SIGNATUR	OF PERSON MCHARGE OF	DISPOSITION		IMBER OF CREMAT F APPLICABLE	ED REMAINS
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	Vital Rec				San Diego,	CA 92138	-5222	San Diego	•

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

City of San Diego

You are hereby authorized and instructed, subjects your rule and regulations, to inter the remains Church, Chapel, Graveside 100 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. War time vete Grave space & Care Fund ....... Additional spaces and care fund Opening/Closing & Setup . Recording and filing fee 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 ture of recorded holder of deed State Invoice # Work Order

PY-593 (REV. B-85)

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

1297; E1530

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	Mary Omefrick			SEX Tambo	DATE O	F BIRTH 30.1906	Jaly 15, 1988
PLACE OF DEATH	74.7.11.1.79.11.18.20.47.07H	PLACE OF DEATH—COUNTY for STATE IF NOT IN CALIFORNIA!		30000 Table 10000	ND ADDRESS O	F SPOUSE OR OTHER INFORMANT	
	S OF FUNERAL DIRECTOR FOR PERSON AC	\$46.6.7920400000000000000000000000000000000000	1/20/200300	ORNIA LICENSE NUMBER 297	743	s Race 20 condido C	2025
	TYPE OF PERM	NT, CHECK ON	NLY ONE OF THE	OLLOWING TYPES OF	DISPOSI	TION	
I SURIAL IIN	CLUDES ENTOMBMENTI		TERMENT AND BURIA MBMENT)	L (INCLUDES	B DIS	SINTERMENT AND	D REINTERMENT OF CREMATED S INURNMENT!
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3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY  4. SCIENTIFIC USE		DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY			FOR CORONER'S USE ONLY  10. DISPOSITION PENDING		
INTERMENT	NAME AND ADDRESS OF CEMETERY W	Healtat !	OR CREMATED REMA	p Ca	0777	1	COUNTY San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	NAME OF TAXABLE PARTY.	A: Oceansida El Camino	2-21-88	SIGNATU	JRE OF PERSON	IN CHARGE OF CREMATORY
BURIAL AT SEA OR OSITION OTHER IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORELI	NE, OR OTHER !		ENT TO IDENTIFY FINAL	PLACE AF	COUNTY OF	DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECI	IVING REMAINS			WI		
ACKNOWLEDGMENT  OFF  APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tre this permit gives no right of unrest	dent under pro spass and nui	visions of the Heal sance laws apply o	th and Safety Code, and understand that	DATE SI	TRE OF APPLICAN	NT
LQCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE	MOUNT OF FEE PAID	JUL 18 1988		Endly &	CONTAL M.D. NO
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	TER DATÉ!		ERSON IN CHARGE OF D	DISPOSITIO		SE NUMBER OF CREMATED REMAINS SER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEA	АТН				2

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

AC-212 (Rev. 10-87)

City of San Diego

Date 7-18-88

hurch, Chapel, Graveside Lager 5 Wood of the House of the	e Ciques Vien	Mortuar
Il Funeral cars must arrive before 3:30 p.m. of regula	el : Cifred Velic ir work day or an extra charge w	Mortuar
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nd billed to undersigned. War time veteran ALO	Van Tilland	m be appne
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MT. HOPE CEMETERY		
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ales taxes	Quetal	-
Baldue on fest	Total Due	83.80
00 44	-1112×	62 D
Balon Trust Paid receipt nu	mber 36/~	0 3.0
on agreent 355	Balance due	
1.4		
hereby certify I am the	of the above nar	ned decede
nd this is your authority to make disposition of remai	ns as above indicated. I certify a	and represe
nat I have the right to make this authorization and I ag ny liability on account of said authorization and inter	ree to hold Mt. Hope Cemetery h	armiess fro
	0 . 0	1
hereby authorize the interment in lot I	* tvelen Y	ores
old under deed.	gnature a - 9	. 1.
5	775 XIA	, 0
gneture of recorded holder of deed	San lugo	Ca 921.
	190-0864	Zip Co
7	dephone	

PY-593 (REV. 8-88)

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	Jesus Hernandez	Flores	SEX Male	Nov. 8, 193	6 July 17, 1988
PLACE OF DEATH—	Diego	San Dle		Evelia Flor	
Cypress Vi	S OF FUNERAL DIRECTOR ION PERSON W/BONNESS Brothers	53° imperial Ave San Diego, CA.	670	975 Gal Dri San Diego,	
1	TYPE OF PERA	WIT, CHECK ONLY ONE	OF THE FOLLOWING TYPES O	OF DISPOSITION	
1 BURIAL IIN	CLUDES ENTOMBMENT)	5 DISINTERMENT A	ND BURIAL (INCLUDES		AND REINTERMENT OF CREMATED IDES INURINMENTI
_	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, C			OF CREMATED REMAINS AND HER THAN IN A CEMETERY
3 CREMATION CEMETERY  4 SCIENTIFIC	N AND DISPOSITION OTHER THAN IN A	Disinterment, COTHER THAN IN A	REMATION, AND DISPOSITION A CEMETERY	FOR COF	RONER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W.  Mt. Hope Caractery.  NAME AND ADDRESS OF CREMATORY W.  NAME AND ADDRESS OF CREMATORY W.	3751 Market Str	est. San Diego.	CA. 92102	COUNTY San Diego ON IN CHARGE OF CREMATORY
BURIAL AT SEA OR ISPOSITION OTHER MAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST BOINT ON SHOREL	INE OR OTHER DESCRIPTION	SUFFICIENT TO IDENTIFY FINA	AL PLACE AND COUNTY O	F DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that the this permit gives no right of unrest	dent under provisions of tespass and nuisance laws	he Health and Safety Code, apply and understand that	SIGNATURE OF APPLIC	CANT
VOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE	JOE PERMITYSSY	BE SIGNATURE LOCAL	HISTORIAN ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON		SE OF PERSON IN THANGE OF	DISPOSITION LICI DIS	ense number of cremated remain Poser, if applicable
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	1		·

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR IT THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

City of San Diego

Date >-18-88

ofCluft.or	· 10.	Masle	·/-	
ina bell Lever	Funeral, date	e, time Z	1/22	11:30
Church, Chapel, Graveside	de & Mare	Page	sale.	Mortuary.
All Funeral cars must arrive before 3:	30 p.m. of regular	work day or a	n extra charge w	ill be applied
on billed to undersigned. War time v	eteran			
And TRO-AUD				10
Lolo 790 Grave Row	Secti	on	Division <del>/Bloc</del> k	
Grave space & Care Fund			******	
Additional spaces and care fund				
Opening/Closing & Setup			تو	20.00
Burial Container				00.00
Handling Fees		********	!	45.00
Nower vases - Marker setting fee				AS
Recording and filing fee				35.00
Sales taxes			*************	6.50
		Total Due	. 6	06-57
	Paid receipt num	. 86	440 6	06.50
	r and receipt ridii	ASSESSED 1	Balance due	-6
O-	1		balance que	
hereby certify I am the	egicles		of the above nam	ned decedent
and this is your authority to make disc that I have the right to make this autho	fosition of remain: prization and lagre	s as above inc e to hold Mt.	dicated. I certify a Hope Cemetery b	ind represent armless from
any liability on account of said author	ization and interm	nent.		
I hereby authorize the interment in lo		Lina	) ha	us
hold under deed.	5500	72/1	- Dacks	, lo.a
Signature of recorded holder of deed	Add	2	/ ins	1,92/3
	) Stori	1.193 11	21-119	ALL Zie Code
	Tala	phone /	70-10 10	7-
37.50		and are the		
F 7539	707	roice #		
Work Order # UUD	_ Ao	ct. #		

E7532

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	Clifton Martin		SEX Noma 1 e	January 1	10, 1910 July 15, 1988
PLACE OF DEATH-	San Diego	PLACE OF DEATH—COUNTY ION	STATE IF NOT IN CALIFORNIA	Tina Dav	RESS OF SPOUSE OR OTHER INFORMANT
NAME AND ADDRESS OF FUNERAL DIRECTOR (OR PERSONAL AND ADDRESS OF FUNERAL DIRECTOR (OR PERSONAL PROPERTY SAN		Federal Blvd. Diego, CA 92102	ALIFORNIA LICENSE NUMBER	San Diego	side Ave. o, CA
	TYPE OF PERA	AIT, CHECK ONLY ONE OF TH	E FOLLOWING TYPES O	F DISPOSITION	
1. BURIAL IIN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND BU	RIAL (INCLUDES		ENT AND REINTERMENT OF CREMATED NCLUDES INURNMENTI
1020	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMA			ENT OF CREMATED REMAINS AND IN OTHER THAN IN A CEMETERY
3: CREMATION CEMETERY  4. SCIENTIFIC	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT, CREMA OTHER THAN IN A CEM		FOR	CORONER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY WI	HERE REMAINS OR CREMATED RE	MAINS ARE TO BE INTERRI	n Diego, C	A San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE DIMANS ARE TO BE CREMA	DATE CREMATED	SIGNATURE OF F	PERSON IN CHARGE OF CREMATORY
BURIAL AT SEA OR OSITION OTHER IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORELI		FICIENT TO IDENTIFY FINAL	PLACE AND COUN	OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	IVING REMAINS			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece- and I hereby acknowledge that tre this permit gives no right of unrest	dent under provisions of the H spass and nuisance laws appl	ealth and Safety Code, y and understand that	SIGNATURE OF A  DATE SIGNED	PPLICANT
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE \$4.00	JUL 1 9 1988	- None	OCAL REGISTBAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION		TER DATE	CHEW SHAPPE AFF	DISPOSITION	LICENSE NUMBER OF CREMATED REMAINS DISPOSER IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	San Diego County Dept		. Box 85222 Diego, CA 921:	38-5222	· · · · · · · · · · · · · · · · · · ·

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

OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR  From Lina Davis  In Payment of Line  Payme	PROPERTY DEPARTMENT	JUL 26 1988  Pate: 7-  Result	Nº 36440  -20 88  -20 88  -20 92139
Invoice No	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 Pre-Need Prust Sales Tax	Division / O Block 100 77184 100 320 00 77182 100 195 00 77182 100 195 00 77182 100 35 00 77182 100 35 00 77182 100 77182 100 77185 00 771

City of San Diego

7-18-88 You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains Funeral, date, time Church, Chapel, Graveside . All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge and billed to undersigned. War time veteran Division (Block Section Grave space & Care Fund ... Additional spaces and care fund Opening/Closing & Setup ... Burial Container ...... Flower vases - Marker setting fee Recording and filing fee 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 State Invoice # Work Order Acct. #

PY-503 (REV. 8-86)

#### MOUNT HOPE CEMETERY

		July 19,	19_88
The undersigned hereby requests a	nd authorizes t	he interment	of the remains of
William G. Menze	n Lot 791 Gr	Row	Sec
Block Division <u>10</u> in accordance with governing said interment in Mount			0 NOST (#800)
that he or she has the legal righ			
authorization and interment.	1000		E
7 our Min	2010		
Signature of relative or legal representative		s & relations: ity to sign au	nip to deceased or thorization
			- A-1
Witness	*		
*			
Witness			





from the

# United States Nahy

This is to certify that

WILLIAM GEORGE MENZE

// BOATSWAIN'S MATE SEC MD CLASS, COL

In Burney the Deschaused from the usu receiving station, naval station, san diego, california and from the March Service of the United Station this soon soon day of november 1946.

This certificate is awarded as a Testimonial of Fidelity and Obedience.

> E. K. JONES, COMMANDER, USN COMMANDING OFFICER

E7533

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

	MILLIAM GEORGE MENZE			NOV 24, 1915	JR. 18, 1988
PLACE OF DEATH—CITY OR TOWN  SAN DIEGO  NAME AND ADDRESS OF FINESAL DIRECTOR OF PERSON		PLACE OF DEATH—COUNTY SAN DIE	0-500	SUE MENZE, WIFE	SPOUSE OR OTHER INFORMANT
		SUNSET CLIFFS	CALIFORNIA LICENSE NUMBER F-816	1271 BARGOR STRE SAN DIEGO, CA	
4 2	TYPE OF PERA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES	OF DISPOSITION	
T BÚRIAL UN	CLUDES ENTOMBMENTI	5. DISINTERMENT AND ENTOMBMENT)	BURIAL (INCLUDES	B. DISINTERMENT AND REMAINS (INCLUDE:	REINTERMENT OF CREMATED S INURNMENT!
2. CREMATION	N AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, CRE			CREMATED REMAINS AND
CEMETERY	3. CREMATION AND DISPOSITION OTHER THAN IN A		MATION, AND DISPOSITION		
INTERMENT	NAME AND ADDRESS OF CEMETERY W			RED C	OUNTY SAN DIESO
CREMATION	NAME AND ADDRESS OF CHEMATORY W	HERE REMAINS ARE TO BE COME	MATED DATE CREMATED	SIGNATURE OF PERSON	IN CHARGE OF CREMATORY
BURIAL AT SEA OR BARDSITION OTHER HIN A CEMETERY CAMATED REMAINS	ADDRESS, NEAREST POINT ON SHORELI	Vault			DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECI	EIVING REMAINS	marke		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece- and I hereby acknowledge that tre this permit gives no right of unrest	dent under provisions of the espass and nuisance laws a	Health and Safety Code, pply and understand that	<b>&gt;</b>	σ
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	EAND IS THE CE. OO	2	- A- 10 6	GISTRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	TER DATE) SIGNATUS	oreu 110	DISPOSITION LICENS DISPOS	E NUMBER OF CREMATED REMAIN SER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	0	=	

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

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

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

		Date:	7-20	)	86
From: Beardaley Mitchell	Address: 1818 Junet C	leff Blue	1,5.0	CA 92	102
light hundred &	art - six 37/100	9	ollars (\$,_	846-0	37
In Payment of Little	can Menzes	Sullas	Sur	vice	26
an	ed marke in	Stallate	an y	lec	
Lot 79/ Grave_	RowS	ection	-	Division /	0
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184 ——		
Acct. No	CITY AUBITOR	of Lots Opening/	77184 — 100	320	00
wo. E-1555	136525	Closing Burial Containers	77181 — 100 77182 —	175	00
BALANCE DUE	JUL 25 198	samoung rea	100 77185 ——	170	00
Pre-Need Lot At Need On Acct		Recording & Misc. Fees Pre-Need	77183 — 83033	1 10	00
Pre-need Trust Cash Check	11 9	Trust Sales Tax	9022 — 60101 78390 —	11	37
AG-212 (Rev. 10-87)	ISSUED BY WY Mague	TOTAL PAID	•	846	37
	Control of the Contro	Section of the second section of the section of the second section of the section o			

City of San Diego

Date 7-19-88

Bell Lines	ineral date, time 11 7/22 100
Church, Chapel, Graveside Mapel &	Thave El Caron Corrandina
	of regular work day or an extra charge will be applie
and billed to undersigned. War time veteran	U
5 0	3 0
Lo20/8_GraveRow	Section Division/Block
Grave space & Care Fund	
Additional spaces and care fund	
Opening/Closing & Setup	30.00
Burial Container	/TD [
Handling Fees	145-00
Flower vases - Marker setting fee	
Recording and filing fee	251
Sales taxes	/ 5/
	Total Due
Paid re	eceipt number 36434 606-50
1770-7010	Balance due
C	
hereby certify I am the	of the above named decede
that I have the right to make this authorization	of remains as above indicated. I certify and represe a and I agree to hold Mt. Hope Cemetery harmless fro
any liability on account of said authorization	and interment.
hereby authorize the interment in lot I	July X
hold under deed.	73720 Manleview
Signature of recorded holder of deed	Address Landa CA 820
	Since Zoc
	Telephone
2 n/	
E SEGA	Invoice #
Work Order # E 7534	Acct #

#### E7534

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

LISE RIACK INK-MAKE NO ALTERATIONS OR FRASILIZES

A	53			INTO		
NAME OF DECEDEN	Ki.		SEX	DATE OF BIRTH	DATE OF DEATH	
Elmer	Fred Koch		Male	Mov. 16, 190	July 18, 1988	
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY (OF	STATE IF NOT IN CALIFORNIA	NAME AND ADDRESS OF	SPOUSE OR OTHER INFORMANT	
Lakes	lde	San Diego		Jerry Koch -	Son	
	S OF FUNERAL DIRECTOR FOR PERSON AN		P-1022	13320 Maple View Street Lakeside, CA 92040		
	TYPE OF PER	MIT, CHECK ONLY ONE OF TH	E FOLLOWING TYPES O	OF DISPOSITION		
1. BURIAL (IN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND BUENTOMBMENTI	URIAL IINCLUDES	8 DISINTERMENT AND I	HEINTERMENT OF CREMATED INURNMENT)	
	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMA (INCLUDES INURNMENT			REMATED REMAINS AND THAN IN A CEMETERY	
3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY  4. SCIENTIFIC USE		7 DISINTERMENT, CREMA OTHER THAN IN A CEN	TION, AND DISPOSITION METERY	FOR CORONER'S USE ONLY  10. DISPOSITION PENDING		
INTERMENT	NAME AND ADDRESS OF CEMETERY W	Market St San	Diego, CA 92	102	unty Sen Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY	value mila	TED DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CHEMATORY	
BURIAL AT SEA OR POSITION OTHER IN IN A CEMETERY OF CREMATED REMAINS	ADDRESS. NEAREST POINT ON SHOREL	LINE, OR OTHER DESCRIPTION SUI	FICIENT TO IDENTIFY FINA	L PLACE AND COUNTY OF DE	SPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	CEIVING REMAINS	200			
ACKNOWLEDGMENT OF	remains of the above named dece	on having the right to control the disposition of the lent under provisions of the Health and Safety Code,		SIGNATURE OF APPLICANT		
APPLICANT	and I hereby acknowledge that to this permit gives no right of unrest	일이 교계합니다 아이를 하겠어서 이번 열면 이렇게 하지만 아니다 아이라면 되게 되었다. 나를 하였다.	Section of the sectio	DATE SIGNED	C	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE \$4.00	0 JOL 2 0 1988	SIGNATURE OF LOCAL REG	STRAR ISSUING PERMITY	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED 7	NTER DATE!	PERSON IN LANGE OF		NUMBER OF CREMATED REMAINS R, IF APPLICABLE	
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	Q.			

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

36434

# 

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

AUDITOR	264-3151		0
Both Woolen	Address: 1445 Hone	Date: 7	19 5.6.0
From July Merske	1 DIX 50/100 -		lars (\$ 606 50)
In Payment of	men codes D	uncar	Service
Lot 20/8 Grave	Row Se	ection 3	Division Block
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPAN STATED	CREDIT 20% Sales Care 80% Sales	67007 77184
Acct. No. E - 7534	JUL 25 1988	of Lots Opening/ Closing Burial	77184 100 330 00 77182 100 100 00
BALANCE DUE		Recording &	100 77185 100 77183 35 00
Pre-Need Lot Al Need On Acct Pre-need Trust Cash Check	Sales Was	Sales Tax	69033 8022 60101 60300
AC-212 (Rev. 10-67) 225	ISSUED BY WHILE OUT	TOTAL PAID	1 406 30

City of San Diego

Date 7-20-88

of access	Melory	-
n a	_ Funeral, date, time	
hurch, Chapel, Graveside	-7-	Mortuary
Il Funeral cars must arrive before 3:30 p	p.m. of regular work day or an extra charge will	be applied
nd billed to undersigned. War time veter	eran	
705		10
ot A Grave Row _	Section Division/Block	10
irave space & Care Fund	<b>خ</b>	595.0
dditional spaces and care fund		
pening/Closing & Setup		
urial Container		
landling Fees		
lower vases - Marker setting fee	**************	
ecording and filing fee		0
ales taxes		95.00
	Total Due	
Pa	aid receipt number 36 436 S	95.a
	Balance due	-6
hereby certify I am the	of the above name	.d daaadaa
and this is your authority to make disposi	ition of remains as above indicated. I certify and ration and I agree to hold Mt. Hope Cemetery han	d represen
	DUT- HILLIA	my
hereby authorize the interment in lot I old under deed.	5565 56 # P	Z : S.
hereby authorize the interment in lot I old under deed.	5565 5645 P Additions Signe 619 Z62-654	92 11 92 11 210 COO
hereby authorize the interment in lot I look under deed.	Signature 5565 56 # P  Arkings  Signe 619) Z62-654  Invoice #	04

#### OFFICIAL RECEIPT

# CITY OF SAN DIEGO, CALIFORNIA

Nº 36436

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151		220	S
From: Bille Melsey	Address: 5565 S	Date:	Men	9500
In Payment of	serced lot		ollars (\$~2,	,
Lot 7/5 Grave	RowS	ection		Division 10
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.  CITY AUDITOR	CREDIT 20% Sales Care 80% Sales of Lots Opening/	67007 77184 ————————————————————————————————————	47000
W.O. E - 25 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	JUL 25 1988	Cleaking Buriel Containers  Handling Fee Recording & Misc, Fees	77181 100 77182 100 77185	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 10-87)	ISSUED BY Sandra Mora	Pro-Need Trust Sales Tax TOTAL PAID	77183 89093 9022 80101 78390	595 00

an hus	of San Diego Da	7-20-88
of	pject to your rules and r	egulations, to inter the remains
Church, Chapel, Graveside		Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of socialor work day or	
		an extra charge will be applied
and billed to undersigned. War time veteran		
Lot 282 Grave Row	Section	Division/Block
Grave space & Care Fund		
Additional spaces and care fund	on on the second of the second	annaghannan -
Opening/Closing & Setup	R @ 350	0.00 640.00
Burial Container		330. C
Handling Fees		200 ///
Flower vases - Marker setting fee		A
Recording and filing fee	@35	70.00
		71 1/5
Sales taxes		/3X/ (S
900000000000000000000000000000000000000	AVALTHERS	ie
Paid re	eceipt 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	and lagree to hold Mt	ndicated. I certify and represent
I hereby authorize the interment in lot I hold under deed.	Signature	
	Address	
Signature of recorded holder of dead	Stace	Zip Code
	Telephone	
0.1	Invoice #	
Work Order # <b>E</b> 7536	Acet. #	

### OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

( with

36500

	264-3151	168	-11	15
allest mel	1 555 - 57	Date:	2000	19
telly - La	er delles	Dol	llars (\$ 57.	10.
proposed Payment of	's Bead The	est		
	中国工程的 · 图 图	A PASSE	Busta	1)
ot 5 Grave	RowSe	ection	Division Block	0
nvoice No:	MOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales	67007 77184	-
Acct. No	CITY AUBITOR	of Lots Opening/	77184 100 77181	
NO. 1374/95		Buriel	100 77182	
BALANCE DUE 204,70	AUG 09 1988	Recording A	77185	
Pre-Need Lot At Need On Acct O	1	Pre-Need Trust	9022 5	1
1/2 06	ISSUED BY MILL SMILL	TOTAL PAID	60101	-
10-212 (Rev. 10-87)		LINE THE PARTY LINE		

		MAIL	The same			ittano	C	OUP	ON		1
-		T No.		E-75		9:	.Pr	ene	ed ′	Frus	st
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JAN	FEB	MAR									DEC
	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	5)(9).0	ALCON .				10	0		<u> </u>	
	nt due ate abo	when p	paid on	, or bet	ore,		<b>&gt;</b> 5	57	.00		
Amou after (	nt due due da	if paid te abo	more ti ve.	han	LO da	ys	<b>&gt;</b> \$	1.	.00		
		d	4	319	1		S	58	.00		
NAM	E	194	570	An	nount l	Receiv	ed \$	-			-
ADD	RESS										
CITY	55					STAT			ZIF		- 8
CITY	91		check	( <b>/</b>	) if t		E new	/ add	_		

#### OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36632

PINKAUDITOR	264-3151	
	Date	9-6 1080
Jost Mala	565 500	Man SA
me headle	Address: 10/19	Dollars (\$ 1/4.00 a)
+n Payment of	wilgon 243 U	ed Henced
<b>新加州</b>	THE PROPERTY OF THE PROPERTY O	Must
Lot 765 Grave_	RowSection	Division / O
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Pre-Need Lot At Need On Acct	Trout Trout	9022
Pre-need Trust Cash Check	Markey / 1/1 Sales	78390
AC-212 (Rev. 10-87) 9910	ISSUED BY TOTAL	- 119 VO

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#### OFFICIAL RECEIPT 36793 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY 264-3151 Muson Division Grave Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT Invoice No. 20% Sales Care 80% Sales Acct. No. of Lots Opening/ Closing 77181 CITY AUBITOR Buriel Container 77182 BALANCE DUE Handling Fee Recording & Misc. Fres 77183 On Acct Pre-Need Lot - At Need -Pre-Need 63033 Trust Pre-need Trust A Cash

AC-212 (Rev. 10-87)

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#### OFFICIAL RECEIPT 36786 CITY OF BAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT CANARY ...... TO CUSTOMER MOUNT HOPE CEMETERY 264-3151 Dollars (\$ Division Grave Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE. CREDIT 67007 Invoice No 20% Sales Care 77184 80% Sales 100 of Lots 77184 Acct. No CITY AUDITOR Opening/ Closing 77181 Burist Containers **BALANCE DUE** 100 7 1988 Handling Fee Recording & Misc. Fees 77183 Pre-Need Pre-Need Lot On Acct

AC-212 (Rev. 10-87)

Pre-need Trust Cash

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9022 Sales Tax TOTAL PAID

#### OFFICIAL RECEIPT Nº 36893 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT CANARY ..... TO CUSTOMER MOUNT HOPE CEMETERY 204-3151 Dollars ( Division Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 87007 77184 Invoice No. Acct. No. 77181 W.O 1989ndling Fee BALANCE DUE Recording & 77183 Pre-Need 03083 Pre-Need Lot [] Trust Pre-need Trust Cash Sales Tax 60101 TOTAL PAID AC-212 (Rev. 10-87)

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## OFFICIAL RECEIPT

CITY OF SAN DIEGO, CALIFORNIA

Nº 37039

From Cette Ma Care  From Cette Ma Care  From Payment of	MOUNT HOPE CEMETERY 284-3151  Address: 5565  NO/100 —  Quipon 8 Uni	Date:	12-5 90,5	D. 10 80
Lot 785 Grave	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 20% Sales Care 80% Sales	Divis 5007 77184	lon /o
Acct. No. 2 - 7536 W.O. 2 - 7536 BALANCE DUE 925, 45	PAID IN THIS SPACE CITY AUG DEC 9 7	of Lote Operating/ Depailing Surial Containers Perfecteding Fee Recording A Misc. Fee	100 77184 — 100 77181 — 100 77182 — 100 77185 — 100	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	18SUED DE SINGLABURGE	Pre-Need Triest Sales Tax TOTAL PAID	77183 63003 9022 60101 78390	51100

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# WHITE ..... TO CUSTOMER

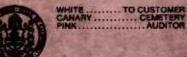
# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINK	MOUNT HOPE CEMETERY 284-3151		A STATE OF THE PARTY OF THE PAR	
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Acct. No.	JAN 09	Opening/	77184 100	
wo c-1536	09	Opening/ Closing Buriel Containers	77181 ——————————————————————————————————	
BALANCE DUE 811.43	<b>的工艺者也是</b> 为。	Handling Fee	77185	
	THE PROPERTY OF	Recording & Misc. Feet Pre-Need	77183	10 0
Pre-Need Lot At Need On Acct Pre-need Trust Ceah Check	11.11.1	Trust Sales Tax	63083 9022 60101 78390	1
AC-212 (Flev. 10-87) 4506	ISSUED BY Tradia / Midd	TOTAL PAID	\$ /	1400
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# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINK	MOUNT HOPE CEMETERY 284-3151			
From: Lette, Melan		SETA S	thu	7500
InPayment of	Jamileon 10/1	Punco	ollars (5	114.00 ,
Lot 785 Grave	RowSe	ection		Division 10
Invaice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED FAID IN THIS SPACE.  CITY ALLOTTON  FEB 0.6 1989	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burisi Containers Hendling Fee Recording &	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. 10-57)	ISSUED BY MINE WALL REED	Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	77183 — 83033 9022 — 80101 76390 — \$	11400

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#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

From: Betty Ma Crey	Address; 5565	Date:	3- three	# 5	89
In Payment of	Vaugar 13 \$1	y Lu	Mars (	Division	st 10
Lot /6 S Grave	ROW S  NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184 —	Block /	
Acct. No. 8-1536	CHY AUDIN	SUS Sales	100 77184 — 100 77181 —		
BALANCE DUE 583.45	MAR 1 0 198	Conteiners Handling Fee Recording & Misc. Fees	77182 — 100 77185 — 100 77183 —		
Pre-Need Lot At Need On Acct Pre-need Trust 9 Cash Check 9	ISSUED BY SINGLE MILES	Pre-Need Trust Sales Tax TOTAL PAID	63933 9022 — 60101 78390 —	114	00

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### OFFICIAL RECEIPT

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

CITY AUDITOR

Nº 37604

WHITE ...... TO CUSTOMER CANARY ...... GEMETERY

MOUNT HOPE CEMETERY

APR 07 1989

	264-3151		11/	/	20
From Dott Malay	Address: 5565 .	Date:	1-4	Maci!	e de
One heardto	la Caretta	D. O.	ollars (\$ _	1190	0,
In Payment of	weight 15 916	Jus	ula	· ·	91
Lot 185 Grave	RowSe	ection		Division /	)_
Invoice No	MOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burtal Containers	67007 77184 — 100 77184 — 100 77181 — 100 77182 —		
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	John the	Handling Fee Recording & Misc. Fess Pro-Need Trust Sales Tax	77185 — 100 77163 — 63633 9022 — 80101 76390 —	119	0
AC-212 (Rev. 10-87) 45/5	ISSUED BY	TOTAL PAID		114	00

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#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From Letty a. Mc Cary  Le huraled for  In flut Payment of Pre	HUR ABULAND + 00/1	lace Su	1 DLL	90 Ca 114.00	9211	Value of the same
Lot 185 grave -	Row Se	ction		Division	10	1
Invoice No	NOT VALID FOR PURPOBE STATED UNLESS STAMPED -PAID' IN THIS SPACE.	CREDIT 20% Sales Core 80% Sales of Lotte	67007 77184 — 100 77184 —	CITY	AUDITO	
W.O. E- 2536 BALANCE DUE 355.45		Opening/ Closing Burial- Containers Hendling Fee	77181 — 100 77182 — 100 77185 —	MAY (	R 1989	
Pre-Need Lot At Need On Acct Pre-need Trust At Cash Check	O. Mach	Recording & Misc. Fees Pre-Need Trust Sales Tax	100 77183 — 53033 9022 — 60101 78380 —	114	00	
AC-212 (Rev. 10-87) 4598	ISSUED BY HOURS I ACCE	TOTAL PAID	3	114	00	

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## OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

N2 37894

P. H. Waller		565 0	Date: 6	12	19.07
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Lot 785 Grave			tion	Division /	0
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#### OFFICIAL RECEIPT 38230 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT TO CUSTOMER WHITE ... CANARY CEMETERY MOUNT HOPE CEMETERY AUDITOR PINK ... 264-3151 Date: Milly 56 th Payment of Division Section Block Grave Row NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 CITY Invoice No. AUDITOR "PAID" IN THIS SPACE. 20% Sales Care 77184 80% Sales of Lots 77184 Acct. No Opening/ 100 Closing 77181 1989 Burist 100 Containers 77182 BALANCE DUE Handling Fee 77185 Recording & Misc. Fees 77183 Pre-Need 63033 On Acct Pre-Need Lot Trust 9022 ISSUED By Sharin & Crain Sales Tax 60101 78390 Pre-need Trust Cash 464 TOTAL PAID AC-212 (Rev. 10-87)

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#### OFFICIAL RECEIPT 38343 . CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT CANARY ..... TO CUSTOMER MOUNT HOPE CEMETERY PINK AUDITOR 264-3151 Date Dollars (\$ Division Section Grave Row Block NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT 67007 77184 CITY WOITOR Involce No. 20% Sales Care 80% Sales 100 of Lots 77184 Acct. No Opening/ Closing 100 77181 AUG 02 Buriel 100 1989 Containers 77182 100 **BALANCE DUE** Handling Fee 77188 Recording & Misc. Fees 100 77183 Pre-Mead 69033 At Need On Acct Pre-Need Lot Trust B022 Pre-need Trust Cash Sales Tax 60101 Check 78390 TOTAL PAID 4656 ISSUED BY AC-212 (Rev. 10-67)

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# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains Funeral, date, time & Church, Chapel, Graveside \ 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. War time veteran \_ Grave space & Care Fund ... Additional spaces and care fund Opening/Closing & Setup ..... Flower vases - Marker setting fee .... **Total Due** 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 hold under deed. Work Order PY-593 (REV. B-86)

### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	LEO OWASEI		SEX male	Jaly 31, 19	DATE OF DEATH 1988			
Chala Vist	JEN 1774 N. T. 1882 N. T. 1882 N. H. 1882 N.	PLACE OF DEATH—COUNTY (OR S	TATE IF NOT IN CALIFORNIA)	Aiko Oweshi - wife				
And the second of the second second second		I Carlos Blyd.	FORMA LICENSE NUMBER	Bonita, CA 92002				
- 4		UT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF	DISPOSITION				
BURIAL (IN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND BURI	AL (INCLUDES	8 DISINTERMENT AND REINTERMENT OF CREMATED REMAINS (INCLUDES INURNMENT)				
	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMATK	ON, AND BURIAL	9 DISINTERMENT OF CREMATED REMAINS AND DISPOSITION OTHER THAN IN A CEMETERY				
3 CREMATION CEMETERY      4 SCIENTIFIC		7. DISINTERMENT, CREMATH OTHER THAN IN A CEMET		FOR CORONER'S USE ONLY				
CREMATION  BURIAL AT SE  POSITION OTHER  THAN IN A CEMETERY OF CREMATED REMAINS	NAME AND ADDRESS OF CHMETERY W	HERE REMAINS ARE TO BE CREMATE	D Date CREMATED	SIGNATURE OF PERSON	N IN CHARGE OF CREMATORY  SISPOSITION			
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECI	EIVING REMAINS						
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tre this permit gives no right of unrest	dent under provisions of the Hea espass and nuisance laws apply	alth and Safety Code, and understand that	SIGNATURE OF APPLICATION OF APPLICAT	ANT			
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COC AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AMO IS THE	JUL "2"2" 1988	SIGNATURIOS LOCAL	& Campos M.D. White			
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED TO DISPOSITION WAS MADE ON TEN	SIGNATUR OF TER/DATE)	in the		NSE NUMBER OF CREMATED REMAINS OSER, IF APPLICABLE			
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH						

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

## OFFICIAL RECEIPT

WHITE ..... TO CUSTOMER

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

No 36437

CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151		TO TO
Mrs. O. V. On	and 1054 On	Date:	7-20 1966
Leace leens	and elever, 371	100 - Ooll	ars (\$ 711.37)
4n Payment of Ol	o ludaches	Duria	sesuce
Lôt 5208 Grave	RowS	ection	Division 10
Invoice No	"PAID" IN THIS SPACE.  CITY AUDITOR	20% Sales Care 7 80% Sales	7007 7184 190
W.O. E-1537		Opening/ Closing 7 Burial	100 320 00
BALANCE DUE	JUL 25 1988	Handling Fee 7	7182 170 00
Pre-Need Lot Al Need On Acct	(///)	Pre-Need 6	7183 3033 8002 0101
AC-212 (Rev. 10-87) Cash Check 3743	ISSUED ST ANGEL Was		7/137
	#### 1,000 TOURS TOUR TOUR TOUR	CONTRACTOR OF THE PARTY OF THE	AND STATE OF THE PARTY OF THE P

## MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 7-20-88

of Cotherine	Kuthen	
in a Fu	neral, date, fime	
Church, Chapel, Graveside		Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra c	charge will be applied
and billed to undersigned. War time veteran		
Lot/26 Grave 849 Row_	Section 2 Division	on/ <del>Block</del>
Grave space & Care Fund		500, Cl
Additional spaces and care fund		
Opening/Closing & Setup		
Burlal Container		
Handling Fees	******************	
Flower vases - Marker setting fee		
Recording and filing fee	Secure of the Control	
Sales taxes		
	Total Due	50.00
Paid re	eceipt number	
	Balan	ice 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 remains as above indicated. I and lagree to hold Mt. Hope Ce	certify and represent
I hereby authorize the interment in lot I hold under deed.	3663 Del	Cerso
Signature of recorded helder of deed	Jan Dieg	o, UA 92/20
	Talaphore	
F ****	Invoice #	<u> </u>
W. J. D. J. E. 7538	Acct. #	

ADDRES	55	5663 Del Cerro, San Diego, Ca 92120	RAT	ring			LIMIT	A0
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PY-693 (REV. 8-85)

## MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 7/20/88

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	regular work of regular number	regular work day or an incomplete section incomplet	Total Due  Total Due  Tempins as above indicated. I certify and lagree to hold Mt. Hope Cemetery and interment.  Sections  Total Due  Total Due

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDENT CLARA - ZIMMERMAN			Female .	June 20, 190	DATE OF DEATH 2 July 15, 1988	
Lemon Gro		PLACE OF DEATH—COUNTY ION S San Diego	PLACE OF DEATH—COUNTY FOR STATE IF NOT IN CALIFORNIA)		SPOUSE OR OTHER INFORMANT County Public Administrator	
CONFANDADORES	S OF FUNERAL DIRECTOR OF PERSON AS	TING AS SUCHO CAL	FORNIA LICENSE NUMBER  941	5201-A Rudfin Road San Diego, CA 92123		
	TYPE OF PERA	AIT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF	DISPOSITION		
1. BURIAL (IN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND BUR	IAL (INCLUDES	8 DISINTERMENT AND REMAINS (INCLUDE	REINTERMENT OF CREMATED S INURNMENTI	
2 CREMATION AND BURIAL (INCLUDES INURNMENT) 3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 4. SCIENTIFIC USE		6. DISINTERMENT, CREMATI (INCLUDES INURNMENT)	ON, AND BURIAL	9 DISINTERMENT OF CREMATED REMAINS AND DISPOSITION OTHER THAN IN A CEMETERY		
		7. DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY		
INTERMENT	NAME AND ADDRESS OF CEMETERY W		AINS ARE TO BE INTERRE		OUNTY San Diego	
CREMATION	NAME AND AND SESSOF CREENING ORY IN		D DATE CREMATED	SIGNATURE OF PERSON	IN CHARGE OF CREMATORY	
BURIAL AT SEA OR OSITION OTHER IN A CEMETERY OF CHEMATED REMAINS	M/A Coulted	INE, OR OTHER DESCRIPTION SUFFI	CIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF	DISPOSITION	
SCIENTIFIC: USE	NAME AND ADDRESS OF FACILITY REC	EIVING RIMAINS				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tre	dent under provisions of the Her espass and nuisance laws apply	alth and Safety Code, and understand that	SIGNATURE OF APPLICAL  DATE SIGNED	π	
LOCAL REGISTRAR	This permit gives no right of unrest This PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED II	PROVISIONS AMOUNT OF FEE PAID	DATE PERMIT ISSUED		SHISTRAR ISSUING PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED 7/		PERSON IN CHARGE	ISPOSITION LICENS	SE NUMBER OF CREMATED REMAINS SER. IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDUATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	0			

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

## MENOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 7-21-88

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and interment.	5 072	12	0	
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	of regular work Section Section	SectionD  SectionD  Total Due, eceipt number 3644  of remains as above indicate and lagree to hold Mt. Hope	of regular work day or an extra charge we see the second of the above na second of the above na second of the above na second agree to hold Mt. Hope Cepagery is and Lagree to hold Mt. Hope Cepagery is an an analysis of the above na second managery is an account to the second managery is an account to the second managery is a second managery in the second managery in the second managery is a second managery in the second managery in the second managery is a second managery in the second managery in the second managery is a second managery in the second managery in the second managery is a second managery in the second managery in the second managery in the second managery is a second managery in the se	Section Division/Block  Section Division/Block  Section Division/Block  Total Due 9/// Balance due  of remains as above indicated. I certify and reprint and lagree to hold Mt. Hope Cemetery harmless and interment.  June Dush of the showen amed decident and interment.  June Dush of the showen amed decident and lagree to hold Mt. Hope Cemetery harmless and interment.

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USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	LUCILLE MARI	B CAMPAG	LI.			sex female	Pab 22,	120 22 22 22	July 20, 1988
PLACE OF DEATH—	CITY OR TOWN			LACE OF DEATH—COUNTY (OR STATE IF NOT IN CALIFORNIA)			NAME AND ADDRESS OF SPOUSE OR OTHER INFORMAN		
NAME AND ADDRESS OF FUNERAL DIRECTOR (00050)			TINGOS SUCH DIVIDA CALIFORNIA LICENSE NUMBER 7-480		5690 Yorkshire Avenue La Mesa, CA 92042				
		TYPE OF PERA	міт, снеск с	ONLY ONE O	F THE FOL	LOWING TYPES OF	F DISPOSITION		
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3 CREMATION CEMETERY 4 SCIENTIFIC	N AND DISPOSITION OTH	ER THAN IN A	7. DISI	INTERMENT, CR	REMATION,	AND DISPOSITION	580	CORON	ER'S USE ONLY
INTERMENT	NAME AND ADDRESS (					ARE TO BE INTERRE	27.5	col	INTY San Diego
CREMATION	NAME AND ADDRESS O	CREMATORYW	HERE REMAINS	ARE TO BE CR	EMATED	DATE CREMATED	SIGNATURE OF	PERSON IN	CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER ON A CEMETERY MATED REMAINS	ADDRESS, NEAREST PO	Voul	INE, OR OTHER	R DESCRIPTION	SUFFICIEN	T TO IDENTIFY FINAL	PLACE AND COU	NTY OF DIS	SPOSITION
SCIENTIFIC USE	NAME AND ADDRESS (	OF FACILITY REC	EIVING REMAIN	NS					
ACKNOWLEDGMENT OF APPLICANT	This is to certify the remains of the above and I hereby ackno- this permit gives no	re named dece wledge that to	dent under p espass and n	rovisions of th	he Health o apply and	and Safety Code, understand that	SIGNATURE OF A	APPLICANT	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN OF THE CALIFORNIA HEALT AUTHORITY FOR THE DISPO	H AND SAFETY COL	DE AND IS THE	AMOUNT OF FE		UE "2"/2" 1988	SIGNATURE OF	OCAL REG	ISTRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISCOSITION	I CERTIFY THAT THE SE DISPOSITION WAS MASS	E ON	NTER DATE	SIGNATU	CO PERS	in the	SISPOSITION		NUMBER OF CREMATED REMAINS R, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ANDRESS OF	REGISTRAR OF	COUNTY OF D	EATH	Û		3		

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

	OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR  From: Une Baskay  In Payment of O	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY JUL 26 1988  264-3151  Pate: 7-2/ 1888  Colores: 5690 Yorkskie ave L. M. 6  Colores: 5690 Yorkskie ave L	en
*	Lot 1588 Grave	RowSectionSection	
	Acct. No.  W.O. E-7540  BALANCE DUE  Pre-Need Lot At Need On Acct Pro-need Trust Ceach Check Of Check	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 77182 Pre-Need 83033 Trust 8022 Trust 8022 Trust 8022	
	AC-212 (Rev. 10-87)	ISSUED BY ANALA MOTAL PAID 78390 4/11 32	

## MT. HOPE CEMETERY INTERMENT PROER

City of San Diego

Date 7-21-88

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lower vases - Marker setting fee			25
Recording and filing fee			003 -0
Sales taxes			
	Tota	Due	27.0
Paid	receipt number	6940	35.0
3.000		Rajan	ce due
		Date	
-		of the al	ove named deci
hereby certify I am the GRANT			
and this is your authority to make disposition	on of remains as above	ve indicated. I	certify and reprine
and this is your authority to make disposition hat I have the right to make this authorization	on of remains as above on and lagree to hold	ve indicated. I	certify and reprinetery harmless
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USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	VERA BLLEW CRAIG		SEX female	May 27, 1900	July 20, 1988		
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY IS	OR STATE IF NOT IN CALIFORNIA)	Max R. Hash -			
	SS OF FUNERAL DIRECTOR KORPERSON	Tres Pires	CALIFORNIA LICENSE NUMBER	2731 Chelar Street San Diego, CA 92123			
1	TYPE OF PE	RMIT, CHECK ONLY ONE OF T	HE FOLLOWING TYPES OF	DISPOSITION			
1. BORIAL IIN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND E ENTOMBMENT)	BURIAL (INCLUDES	8 DISINTERMENT AND RE REMAINS (INCLUDES IF			
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3. CREMATION CEMETERY  4. SCIENTIFIC		7 DISINTERMENT, CREM OTHER THAN IN A CE	ATION, AND DISPOSITION METERY	FOR CORONE	R'S USE ONLY		
INTERMENT	NAME AND ADDRESS OF CEMETERY Hount Hope Cometary		REMAINS ARE TO BE INTERRE		San Diego		
CREMATION	NAME AND ADDRESS OF CREMATORY	WHERE REMAINS ARE TO BE CREM.	ATED DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY		
BURIAL AT SEA OR DISTION OTHER OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOR	ELINE, OR OTHER DESCRIPTION SU	OFFICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF DISI	POSITION		
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RE	ECEIVING REMAINS					
ACKNOWLEDGMENT OF APPLICATE	This is to certify that I am the person having the right to control the disposition of the remains of the above named decedent under provisions of the Health and Safety Code,						
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WI OF THE CALIFORNIA HEALTH AND SAFETY C AUTHORITY FOR DIE QUEPOSITION SPECIFIES	ODE AND THE	JUL 22 198	SIGNATURE OF LOCAL REGIS	STRAR ISSUING PERMIT		
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SHECIFIED DISPOSITION WAS MADE ON	SIGNATURE SIGNATURE	COLUMN CHARGE OF E	DISPOSER DISPOSER	IUMBER OF CREMATED REMAINS , IF APPLICABLE		
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY		F COUNTY OF DEATH		*			

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

OFFICIAL RECEIPT  WHITE TO CUSTOMER CAMARY CEMETERY PINK AUDITOR	PROPERTY DEPARTMENT	TY AUBITOR N UL 26 1988	1º 36442 ∠ √ 19 88
From The X True  Thust - June  Payment of V  Grave	Address 2 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Dollars (\$	35.00, See Division/2
Invoice No.  Acct. No.  W.O.  BALANCE DUE  Pre-Need Lot  At Need  On Acct	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 — 80% Sales Care 77184 — 00 of Lors 77194 — 0 pening/ 7181 — Burial 100 Containers 77182 — 190 Handling Fee 77185 — Recording 6 100 Misc Fees 77183 — Pre-Need 63033	35 00
Pre-need Trust Cash Check AC-212 (Aev. 10-87)	ISSUED BY FANALA WA	70/st 90/22 — 80/22 —	35 00

## MT. HÖPE CEMETERY INTERMENT ORDER

City of San Diego

Date 7-21-88

Hankso.	Whetherston
To a DAY die A	- 100 d 7/20 20m
6-09 Veult/Liner 0 / 01 / 1	uneral, date, time Well //d/ Jam
Church, Chapel, Graveside Auch &	Stove; Romano 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. War time veteran	
111 12	2 11
ot Fraye Row	Section Division/Block
Too Wall cup	7
Grave space & Care Fund	
Additional spaces and care fund	200 (1)
Opening/Closing & Setup	<u>∞0.0/</u>
Burial Container	
Handling Fees	************
Flower vases - Marker setting fee	
Recording and filing fee	35. d E
Sales taxes	
sales taxes	305/1
	Total Due
Paid :	receipt number
	M NIECE Balance due
24/11	William & Ve
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	n and I agree to hold Mt. Hope Cemetery harmless from
hereby authorize the interment in lot I (	and Willen
hald under deed.	10536 CAN, Gleneller
Signature of recorded holder of deed	MATCH 92126
	State _ 1/2 = _ Zip Code
7000	344-0/3(0
The second of th	544-0/3 G
* 5	599 -0/3 6 Telephone
Catalan E 7542	S99-0/3 6 Telephone

## OFFICIAL RECEIPT

**BALANCE DUE** 

Pre-Need Lot

Pre-need Trust

AC-212 (Rev. 10-87)

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

CITY AUDITOR

TOTAL PAID

NE

36447

	WHITE	TO CUSTOME CEMETER	B
自量指	PINK	AUDITO	Ä
	. /	11	

MOUNT HOPE CEMETERY 264-3151

JUL 26 1988 Dollars (\$4 Division Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 57007 20% Sales Care 80% Sales 100 of Lots 7718 Opening/ Closing 000728 Burlat 100 Containers 100 Hendling Fee 77185 Recording & 77183 Pre-Need 83033 9023 Trust Sales Tax 80101 78380

Payment of Grave Invoice No. "PAID" IN THIS SPACE. Acct. No

Cash

On Acct

ISSUED BY

Check

E7542

### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	T	Westernam Giro. Walante Coloro	SEX	DATE OF BIRTH	\ b	ATE OF DEATH	_
-	PINKEY WH	TTINGTON	Fema le	July 4	, 1912	July 20,	1988
PLACE OF DEATH-		PLACE OF DEATH—COUNTY				SE OR OTHER INFO	500
Sai	n Diego	San Di				illiams -	dest
Ander son-	S OF FUNERAL DIRECTOR (OR PERSON ACRES OF FUNERAL DIRECTOR (OR PERSON AC	San Diego.	CALIFORNIA LICENSE NUMBER		minto Gi	ienelien Fornia 92	SUCCESSION OF
	VIETE GEOGRAPHICA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	CONTRACTOR STREET			
_+		2		2			
1 BURIAL IIN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT)	BURIAL (INCLUDES	8. DISINTERME REMAINS (I	ENT AND REINTE NCLUDES INURN		ATED
120	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREM		9. DISINTERME DISPOSITIO		TED REMAINS AND IN A CEMETERY	)
LI 3 CREMATION CEMETERY	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT, CREM		FOR	CORONER'S	USE ONLY	
4 SCIENTIFIC	USE	OTHER THAN IN A C	EMETERY	☐ ID DISPOSITIO	ON PENDING		
INTERMENT	NAME AND ADDRESS OF CEMETERY W				COUNTY	San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CREM	DATE CREMATED	SIGNATURE OF F	PERSON IN CHAI	RGE OF CREMATO	RY
BURIAL AT SEA OR DSITION OTHER IN A CEMETERY OF HEMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	INE OR OTHER DESCRIPTION S	UFFICIENT TO IDENTIFY FINAL	PLACE AND COUN	ITY OF DISPOSI	TION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS			5785		
ACKNOWLEDGMENT OF	This is to certify that I am the per remains of the above named dece	dent under provisions of the	Health and Safety Code,	SIGNATURE OF A	APPLICANT		
APPLICANT	and I hereby acknowledge that to this permit gives no right of unrest			DATE SIGNED			
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED II	SEAND IS THE	JUL 2 2 198	SIGNATURE OF	L Came	R ISSUING PERMI	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED 7	TER/DATE) SIGNATOR	OF PERSON IN CHARGE OF	SPOSITION	DISPOSER, IF	BER OF CREMATER APPLICABLE	D REMAINS
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDIVATE DODDESS OF REGISTRAR OF	COUNTY OF DEATH	0		***		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED 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 7-21-88

of <u>Feed</u>	ord T. Bloaks
ino Beef Lines	Funeral, date, time Non 7/25 //as
Church, Chapel, Graveside	- Teatheringel Mortuer
All Funeral cars must arrive before 3	3:30 p.m. of regular work day or an extra charge will be applie
and billed to undersigned. War time	veteran Wetress any
1250	Det greens
26 50 Grave Ro	w Section Division <del>/Bleck</del> / O
Grave space & Care Fund	
Additional spaces and care fund	-0
Opening/Closing & Setup	Durch of
Burial Container	Buchul
V-10-W 38800-V10-W-19-000	19800
Handling Fees	The state of the s
Flower vases - Marker setting fee .	350
Recording and filing fee	<u>93.98</u>
Sales taxes	
	Total Due
	Paid receipt number 367740 35,000
,	Balance due
Tele	<i></i>
	of the above named decade sposition of remains as above indicated. I certify and represe norization and I agree to hold Mt. Hope Cemetery harmless fro orization and interment.
I hereby authorize the interment in I hold under deed.	or Chlora M Brooks
Signature of recorded holder of deed	State 286-854-3
8	1 margin circum
E == 40	Invoice #

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES NAME OF DECEDENT DATE OF BIRTH DATE OF DEATH SEX RICHARD PAUL BROOKS Male May 14, 1914 July 19, 1988 PLACE OF DEATH-CITY OR TOWN PLACE OF DEATH-COUNTY IOR STATE IF NOT IN CALIFORNIA NAME AND ADDRESS OF SPOUSE OR OTHER INFORMANT Chlora Brooks, wife San Diego San Diego NAME AND ADDRESS OF FUNERAL DIRECTOR (OR ASSOCIATION AS SOCIA 5164 Catoctin Dr. CALIFORNIA LICENSE NUMBER FEATHERINGILL MORTUARY, 6322 El Cajon Blvd. San Diego, Ca. 1083 TYPE OF PERMIT, CHECK ONLY ONE OF THE FOLLOWING TYPES OF DISPOSITION 1. BURIAL IINCLUDES ENTOMBMENT □ 5. DISINTERMENT AND BURIAL (INCLUDES ■ 8 DISINTERMENT AND REINTERMENT OF CREMATED ENTOMBMENT) REMAINS (INCLUDES INURNMENT) 2 CREMATION AND BURIAL INCLUDES INURNMENT! ☐ 6 DISINTERMENT, CREMATION, AND BURIAL 9. DISINTERMENT OF CREMATED REMAINS AND (INCLUDES INURNMENT) DISPOSITION OTHER THAN IN A CEMETERY 3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY DISINTERMENT, CREMATION, AND DISPOSITION FOR CORONER'S USE ONLY OTHER THAN IN A CEMETERY 4 SCIENTIFIC USE ☐ 10 DISPOSITION PENDING NAME AND ADDRESS OF CEMETERY WHERE REMAINS OR CREMATED REMAINS ARE TO BE INTERRED COUNTY ERMENT Mt. Hope Cemetery, 3751 Market St., San Diego, Ca. San Diego NAME AND ADDRESS OF CREMATORY WHERE REMAINS ARE TO BE CREMATED | DATE CREMATED SIGNATURE OF PERSON IN CHARGE OF CREMATORY CREMATION BURIAL AT SEA ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUFFICIENT TO IDENTIFY FINAL PLACE AND COUNTY OF DISPOSITION OR SITION OTHER n/a IN A CEMETERY OF CREMATED REMAINS NAME AND ADDRESS OF FACILITY RECEIVING REMAINS SCIENTIFIC USE n/a SIGNATURE OF APPLICANT This is to certify that I am the person having the right to control the disposition of the ACKNOWLEDGMENT remains of the above named decedent under provisions of the Health and Safety Code, DATE SIGNED and I hereby acknowledge that trespass and nuisance laws apply and understand that **APPLICANT** this permit gives no right of unrestricted access to properly not owned by me. AMOUNT OF FEE PAID DATE PERMIT ISSUED SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS LOCAL OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT \$4.00 REGISTRAR CERTIFICATION I CERTIFY THAT THE SPECIFIED SIGNATURE OF PERSON IN CHARGE OF DISPOSITION LICENSE NUMBER OF CREMATED REMAINS DISPOSITION WAS MADE ON DISPOSER, IF APPLICABLE OF PERSON IN CHARGE ENTER DATE OF DISPOSITION INDICATE ADDRESS OF REGISTRAR OF COUNTY OF DEATH IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR  From: Local Sunch Control of Payment of Receipt Payment Payment of Receipt Payment Pay	CITY OF SAM DIEGO, CALIFORNIA CITY PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151  Address: 5764 Cate NO/100	L 26 1988	Nº - 21 c. SA Mars (\$35-	36443 19 88 19 211 S
Invoice No.  Acct. No.  W.O. E-7593  BALANCE DUE  Pre-Need Lot   At Need & On Acct   Pre-need Trust   Cash   Check   Q 3 1// Ac-212 (Rev. 10-27)	NOT VALID FOR PURPOSE STATED UNLESS STAMPED TAID IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales Care 80% Sales of Lots Opening/ Closing Burist Containers Handling Fee Recording & Misc. Fees Rrs-Need Trust Sales Tex TOTAL PAID	Divisic	



#### MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 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 will be applied and billed to undersigned. War time veteran Section Opening/Closing & Setup ... **Burial Container ...** .............. Sales taxes UL.2.1 MT. HGPE CEMETERY CITY of SAN DIEGO, CALIF. Paid receipt number 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 Zip Cod Invoice # Work Order # PY-593 (REV. 8-88)

RECORDING REQUESTED BY AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTS TO Escrow No Title Order No. SPACE ABOVE THIS LINE FOR RECORDER'S USE. DOCUMENTARY TRANSFER TAX \$\_ computed on full value of property conveyed, or QUITCLAIM DEED computed on full value less value of liens and encumbrances remaining at the time of sale. Signature of Declarant or Agent Determining Tax Firm Name E. Kittelson the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do\_\_\_\_\_ hereby remise, release and forever quitclaim to Catherine Turner RECEIVED the following described real property in the City of Seco Diego JUL 21 1988 , State of California: County of Sen Diego MT. HOPE CEMETERY Lot 816 Section 3 Division Assessor's parcel No. \_ 1988, at El Cujory Calif.
Callorg E. Kittelson STATE OF CALIFORNIA in the year 1988, before me , personally known to me (or proved to me on the basis of satisfactory evidence) to be the person\_ whose name MARY LOU CROCKETT 15 subscribed to the within instrument, and acknowledged to me that

NOTARY PUBLIC - CALIFORNIA

WITNESS my hand and official sea

Public in and for said State.

NAME

(This area for official notarial seal)

MAIL TAX STATEMENTS TO

S he\_ executed it.

ADDRESS

# Prima

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 7/21/88

ou are hereby authorized and instructed, sub	, ,	A.
alparene	Lavina Tues	ner
n a Leneu Fu	neral, date, time	
Church, Chapel, Graveside	- Neer	Mortuary.
III Funeral cars must arrive before 3:30 p.m.	of regular work day or an	extra charge will be applied
nd billed to undersigned. War time veteran	1/0	.30
		ο.
ot 816_GraveRow	Section	Division/Block
rave space & Care Fund . By . E	-7544	Red
additional spaces and care fund		
pening/Closing & Setup		-3.20°°
urial Container Consulta B	.00 Lines	Ing
	bou	1450
	NONE	············ <u></u>
1	ZK8/K.S	200
cording and filing fee		
les taxes - 4.1.1999	***********	7-17
MT. HOPE CEMETERY	Total Due	606.50
CITY of SAN DIEGO, CALIF. Paid re	ceipt number 36 44 040 F 75	Wireles O
200	A CONTRACT TO	belance due 31
havebu assett law the Muly	. ار الأ	f the above named decedent
hereby certify I am the nd this is your authority to make disposition	of remains as above indi	cated. I certify and represent
hat I have the right to make this author detion my liability on account of said authorization	and lagree to hold Mit. In and interment,	ope Cemetery narmiess irom
	XP TA	25
hereby authorize the interment in lot I old under deed.	Signatura	Die Ch
	Address	02/22
igneours of recorded helder of deed	Sura Kril S	TO TO COM
	Telephone	105
	#700000#58600000	
E 7545	Invoice #	* -
Nork Order # LUTU	Acct. #	W

OFFICIAL RECEIPT  WHITE TO CUSTOMER ON AUDITOR  WHITE AUDITOR	PROPERTY DEPARTMENT	TY AUDITOR UL 26 1988	Nº 36445
From Catherine Tuy Sex few rid for in few Payment Tra	tubre of 100-	le heed tru	1208-89 92/23 164/50 1000
Invoice No	ROW_S NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE	of Lots 771 Opening/ Closing 771 Burial Containers 771	00 84 90 81 90 82
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	Loyeus tith	Handling Fee 77 Recording a Misc. Fees 77: Pre-Need 63 Trust 90 Sales Tax 60 TOTAL PAID	60650

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 7-22-88

of Velen	E. Cherry	
in a Fu	neral, date, time Ded 7/27	11:00
Church, Chapel, Graveside	Lepture Soc	e Mortuary
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge will	be applied
nd billed to pode light. War time veteran .	117	7.5
11 Balana	•	, ,
Lot 4 Grave Row	Section { Division/Block	12
Grave space & Care Fund		5.00
Additional spaces and care fund	THE ROUGH TO SERVICE SHARES AND INVESTIGATED THE CONTRACT THE WOOD COLUMN THE	20 0
Opening/Closing & Setup		0,00
Burial Container		-
landling Fees		
Flower vases - Marker setting feet		_
Recording and filing fee		
Sales taxes + SMG9.		
04 00-41	Total Due	95,00
Recording and filing fee As Sales taxes 108 4999999999999999999999999999999999999	eceiot number	3
V L.	Balance due _	
711	100000000000000000000000000000000000000	
hereby cartify I am the	of the above name	
and this is your authority to make disposition that I have the right to make this authorization	of remains as above indicated. I certify an and lagree to hold Mt. Hope Cemetery ha	rmless from
any liability on account of said authorization a	and interment.	n. assistan.
any needing on ecocam of auto delitorization (		
hereby authorize the interment in lot I	Signeture	_
hereby authorize the interment in lot I nold under deed.	Signatura Address	-
hereby authorize the interment in lot I nold under deed.	- Academic	Zię Co
hereby authorize the interment in lot I hold under deed.	Address	Zie Co
hereby authorize the interment in lot I hold under deed.	Address Stata	Zię Cod
hereby authorize the interment in lot I hold under deed.  Signeture of recorded holder of peed.	Address Stata	Zie Cod

€7546

### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	π		SEX	DATE OF BIRTH	DATE OF DEATH
Helen E O	wens		Female	Feb 14,1904	July 1, 1988
PLACE OF DEATH	CITY OR TOWN	PLACE OF DEATH-COUNTY IOR	STATE IF NOT IN CALIFORNIA	NAME AND ADDRESS OF	SPOUSE OR OTHER INFORMANT
National City		San Diego		Public Admin	istrator
Action and the second	SS OF FUNERAL DIRECTOR 10% PERSON AND COLUMN 14065 How 8 Rus	STATE MEDICAL STATE AND ADDRESS OF THE STATE	LIFORNIA LICENSE NUMBER	5201-A Ruffi San Diego, C	The state of the s
The state of the s		MIT, CHECK ONLY ONE OF THE		E DISPOSITION	
•	THE OF PER	WIT, CHECK CHET CHE OF THE	POLICIMING TIPES C	Disrosition	
a 1 BURIAL IIN	ICLUDES ENTOMBMENT)	5. DISINTERMENT AND BUY ENTOMBMENT)	RIAL (INCLUDES	B DISINTERMENT AND REMAINS (INCLUDES	REINTERMENT OF CREMATED INURNMENTI
2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, CREMAT	ION, AND BURIAL	DISINTERMENT OF CONTROL  DISPOSITION OTHER	REMATED REMAINS AND THAN IN A CEMETERY
	N AND DISPOSITION OTHER THAN IN A	Yes a second		-an anna	IFRID HOT ONLY
CEMETERY  4. SCIENTIFIC USE		7. DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY  10: DISPOSITION PENDING	
CREMATION  BURIAL AT SEA  OR  DISPOSITION OTHER	NAME AND ADDRESS OF CEMETERY WE ME HOPE COMMETTERY WE MAKE AND ADDRESS OF CREMATORY WE MAKE AND ADDRESS, NEAREST POINT ON SHORELY MAKE AND ADDRESS.	3751 Market St	San Dieg	SIGNATURE OF PERSON II	SAN Diego N CHARGE OF CREMATORY ISPOSITION
EMATED REMAINS		Acceptance of the control of the con			
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	dent under provisions of the He espass and nuisance laws apply	alth and Safety Code, and understand that ned by me.	DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED II	DE AND IS THE NITHIS PERMY	1	BEIGNATURE OF LOCAL RE	Compas MIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	NTER DATE)	PERSON IN CHARGE OF	DISPOSITION LICENSE DISPOS	NUMBER OF CREMATED REMAIN ER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF				***************************************

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 7-22-88

of When	The same of the sa	-1207 110
in a Fu	neral, date, time	10149
Church, Chapel, Graveside	Pocone	The Mortuary
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extre	charge will be applied
and billed to uggersigned. War time veteran .		
41100 7	j i	12.
Lot Row	Section Divis	sion/Block
Grave space & Care Fund		55,00
ACAD SELECTION CONTRACTOR SELE		
Opening/Closing & Setup		112 111
Burial Container		
Handling Fees		
Flower vases - Marker setting fee		WWW.97 (1-1-1-1)
Recording and filing fee		
Sales taxes		
10- 00-510	Total Due	143,00
Paid re	eceipt number	
an /U	Bala	ince due
T		
I hereby certify I am the	of the	above named deceden
and this is your authority to make disposition that I have the right to make this authorization	of remains as above indicated and lagree to hold Mt. Hope C	. I certify and represen emetery harmless from
any liability on account of said authorization		3
I hereby authorize the interment in lot I		
hold under deed.	Signature	41:
Signature of recorded holder of deed	Address	26
signature or recorded rooter or deed	State	Zip Coo
	Telephone	
	Telephone	
West Order # E 7547	Tolophone	

E7547

## PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	ELIO FRAGOSO		SEX MALE	MARCH 4, 1959	May 1, 1988
SAN DIEGO	CITY OR TOWN	PLACE OF DEATH—COUNTY SAN DIEGO	IOR STATE IF NOT IN CALIFORNIA)	SAN DIEGO COUN	
	SS OF FUNERAL DIRECTOR FOR PERSON AS AGS DALE MORTUARY 5050		CALIFORNIA LICENSE NUMBER	5555 GVERLAND SAN DIEGO, CAL	
4.	TYPE OF PERA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES OF	DISPOSITION	
BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENTI	BURIAL UNCLUDES	8. DISINTERMENT AND REMAINS (INCLUDES II	
☐ 2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREI		9 DISINTERMENT OF CRE DISPOSITION OTHER T	
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY  7 DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY  OTHER THAN IN A CEMETERY			FOR CORONER'S USE ONLY  10. DISPOSITION PENDING		
INTERMENT	NAME AND ADDRESS OF CEMETERY W		REMAINS ARE TO BE INTERRE		NTY San Diege
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CRE	MATED DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY
BURIAL AT SEA OR POSITION OTHER IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON CHOREL	INE. OR OTHER DESCRIPTION S	DEFICIENT DENTIFY FINAL	PLACE AND COUNTY OF DIS	POSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tre	dent under provisions of the	Health and Safety Code,	SIGNATURE OF APPLICANT  DATE SIGNED	
LOCAL	this permit gives no right of unrest THIS PERMIT IS ISSUED IN ACCORDANCE WITH	Carrier and the second of the second second second	SUSPERMENTAL CONTROL	SIGNAPURE CONTO AL RIGHT	STRANDIS MONTH
REGISTRAR	OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED II	E AND IS THE 4.00	JUL 27 1988	SIGNAPHE GROUND AVERGE	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSTION WAS MADE ON	SIGNATURE SIGNATURE	PERSON IN SHAPES OF D	DISPOSITION LICENSE IN DISPOSER	NUMBER OF CREMATED REMAINS I. IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE APORESS OF REGISTRAR OF	COUNTY OF DEATH	J		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

# MT. HOPE CEMETERY INTERMENT ORDER

City of Sen Diego

Date 7-22-88

1 - Sign	& Mewton
18 / SU duelt	Funeral date, time July 7/26 281
Church, Chapel, Graveside	the Have aggalle Mortuery
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. War time vete	ran WWIL Witness cooker
150 11	of Placed in Jan
of OO Grave T Row _	Section Division/Block
Grave space & Care Fund	950-00
Additional spaces and care fund	107
Opening/Closing & Setup	320.00
Burial Container	175,00
landling Fees	170.00
lower vases - Marker setting fee	Ð
decording and filing fee $\ldots, \ldots, \ldots$	<u>35.00</u>
Sales taxes	<u>//-37</u>
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Total Due
W.	21.1154 300 11
\ \\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	aid receipt number 26937
0,	Balance due 661.
1/4	ah ton
hereby certify I am the	of the above named deceden of the above named deceden the first and representation of remains as above indicated. I certify and representation of the above named deceden
iny liability on account of said authorization	ation and I agree to hold Mt. Hope Cemetery harmless fron tion and interment.
	14 6 600
hereby authorize the interment in lot I	Signature
loid under deed.	759/ Skyline De.
Ignature of recorded holder of deed	5.D. Cod 92114
	475-1546 Zip Cod
	Telephone
	Invoice #
Vort Order # E 7548	

W.O.	#	E.	-7578	
	-			

		NOTE	54	Maria Parasi
\$ 961.37	San Diego, Ca	lifornis	celeja	32 19 8
the sum of Muse	go City Treasurer, p	r order at 3751	maker promises to pa Market Street, San D	y to Mt. Hope iego, Ca 92102 interest from
payable on demand.		mpunu pramoapun	Pc	reene her gamami
Interest after mature are payable in lawfort to refiewals, replace maturity, and waives of limitations. A ragainst his/her separature	rity will accrue at a substant of the Unite and extensions presentment, demandarried person who starate property for an acce, the undersigned	the rate indicated States. The sof time for pad and protest an igns this note any obligation co	ter bear interest on ed above. Principal maker will be liable yment hereof before, d the right to asser grees that recourse ntained herein. If pay such sum as the	and interest and consents at or after t any statute may be had any action be
Safety Code aut	er I, Article 2, Parathorizes the removal is past due or unparathorized A. Bell	of any remains	tate of California B from a plot for whic	ealth & h the
ADDRESS 1591 SA	ACC. MARKET TO THE PARK TO THE			
CALIF. DRIVERS LIC.	# A286695			23

MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	John Lee Newton		SEX Male	June 22,	1921	July 21, 19	88
PLACE OF DEATH-	Sen Diese	PLACE OF DEATH—COUNTY (	OR STATE IF NOT IN CALIFORNIAI	COLUMN CONTRACTOR		OUSE OR OTHER INFOR	MANT
Carried Control of the	SS OF FUNERAL DIRECTOR ION PERSON	Veceral Elvd.	CALIFORNIA LICENSE NUMBER	7591 Sk	yline E	rive	
1985	TYPE OF PER	MIT, CHECK ONLY ONE OF T	HE FOLLOWING TYPES O	and the second second			
I BURIAL IIN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND E	BURIAL (INCLUDES		ENT AND RE	INTERMENT OF CREMAT URNMENT)	ED
STATE	N AND BURIAL IINCLUDES INURNMENTI	6 DISINTERMENT, CREM (INCLUDES INURNMEN				MATED REMAINS AND	
3 CREMATION CEMETERY  4 SCIENTIFIC		7. DISINTERMENT, CREM OTHER THAN IN A CE	IATION, AND DISPOSITION METERY	FOR CORONER'S USE ONLY  10. DISPOSITION PENDING			
INTERMENT	Mt. Hope Cometery	HERE REMAINS OR CREMATED	REMAINS ARE TO BE INTERRI	10000	COUN	пү ian Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY W	THERE REMAINS ARE TO BE CREM	DATE CREMATED	SIGNATURE OF F	PERSON IN C	HARGE OF CREMATORY	
BURIAL AT SEA OR OSITION OTHER IN A CEMETERY OF CREMATED REMAINS	ADDRESS, MEAREST POINT ON SHORE	M. OR OTHER DESCRIPTIONS	PHOTENT TO IDENTIFY FINAL	PLACE AND COUN	ITY OF DISP	OSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	-				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pe remains of the above named dece and I hereby acknowledge that to this permit gives no right of unres	dent under provisions of the espass and nuisance laws ap	Health and Safety Code, ply and understand that	SIGNATURE OF A	PPLICANT		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY CO- AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE	JUL 25 1968	De CLOSTON	MEG	and issuing permit	m
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	19014/9011	16/88 SIGN TUE	OF PERSON IN CHARGO	POSITION		UMBER OF CREMATED R	HEMAINS
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF San Diego County Dept P.O. Box 85222 San	. of Health Serv	ices 8-5222				×

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

36454

## WHITE ..... TO CUSTOMER

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINK AUDITOR	MOUNT HOPE CEMETERY				DE
Les Westte	Arthograss:	Date:	-25	. 1	00
titue 14	KKIO D	D	ollars (\$ _	3001	125
InPayment of	In Mewton	Bulla			
0	OBTOOM STREET, STREET			信官公司	
Lot 120 Grave	4 Row So	ection 2	10.0	Division //	/
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184 —	50	00
Acet. No.	CITY AUDITOR	80% Sales of Lots Opening/	77184 — 100	000	00
w.o. 6-1346	THE RESERVE AND ADDRESS OF THE PARTY OF THE	Closing Burial Containers	77181 — 190 77182 —	50	126
BALANCE DUE 66/131	JUL 29 1988	) Handling Fee Recording &	77185 — 100		32
Pre-Need Lot At Need On Acct	/	Misc. Fees Pre-Need	77183 — 83033 9022 —		
Pre-need Trust   Cash Check	h. hallh	Soles Tax	80101 78390	307	1
AC-212 (Rev. 10-67)	ISSUED BY THE GOLD TO	GYOTAL PAID		500	00

	100	U 12	11183	000072	125.00	PAID IN FUL
673030 08/23/88 027413 E-159/8	THERESA 100 100 100 100 6010	072 072 072 072 072	77181 77182 77183 77185 78390	08/30/88 CA 000072 000072 000072 000072	661.37 270.00 175.00 35.00 170.00	661.37 PAID IN FUL
072047 00 /27 /00 00/ 021	CONTI N	INT COM MCMOD TAI	cn	08/30/88 CK 8580	660-00	440 00

## MT. HOPE CEMPTERY INTERMENT-ORDER

City of San Diego

Date 7-25-88

	-	100	1 112
eral. date, tim	16	1960	ue 1.5
tXHAW	e )	lenge	Le Mortuary
regular work	day or a	n extra charge	will be applied
	7		11
Section	oc.	_ Division.484s	de
			250.
			(C)
Control of the Control of the			
			District Control of the Control of t
			170.
			35.
			11.3
1	otal Due		961.37
eint number	36	457	961.31
	-W-16-0		- P
		Dalance due	
7.9		of the above na	amed decedent
remains as a nd lagree to i	above inc nold Mt. I	licated. I certify lope Cemetery	and represent
d interment.		11	
100	9de	ofthe	nolle
Signature	105	Carina	+ C+
Address	102	Vinca	C-9910
State	011	DIENO	Zip Code
2184a CV	00 -1	7 7 1 1 1	
Telephone	334	W.O.	
2	334	mio.	
2	-3-5-		
	regular work regular work Section  Section  eipt number remains as and lagree to a interment.	regular work day or an acceptance of the section of	regular work day or an extra charge  Section 2 Division. All september 36,457  Balance due of the above many of the abov

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

		out duried that Harrie Tie I	ELENTINO ON ENVIOUN	950-1		
NAME OF DECEDEN	eya Miller		Yemale	July 26, 19	July 22, 1988	
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY 10	R STATE IF NOT IN CALIFORNIA)	NAME AND ADDRESS	OF SPOUSE OR OTHER INFORMANT	
Chula	Vista	San Die	ego	Barbara Harron (Daughter)		
NAME AND ADDRES	SS OF FUNERAL DIRECTOR TOR PERSON A	CTING AS SUCHI	ALIFORNIA LICENSE NUMBER	1905 Guze	ot Street	
Humphrey Ch		mia Vista, CA	P-964	San Diego	, CA 92107	
	TYPE OF PER	MIT, CHECK ONLY ONE OF TH	HE FOLLOWING TYPES OF	FDISPOSITION		
1. BURIAL (IN	ICLUDES ENTOMBMENT)	5. DISINTERMENT AND BE ENTOMBMENT)	URIAL (INCLUDES	B DISINTERMENT AT REMAINS (INCLUS	ND REINTERMENT OF CREMATED DES INURNMENT)	
(MIDELL)	N AND BURIAL (INCLUDES INURNMENT)	B. DISINTERMENT, CREMA			F CREMATED REMAINS AND HER THAN IN A CEMETERY	
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 4 SCIENTIFIC USE		7. DISINTERMENT, CREMA OTHER THAN IN A CEN		FOR CORONER'S USE ONLY		
INTERMENT	NAME AND ADDRESS OF CEMETERY W	VHERE REMAINS OR CREMATED R	EMAINS ARE TO BE INTERRE	ED9	COUNTY San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY	VHERE REMAINS ARE TO BE CREMA		SIGNATURE OF PERSO	N IN CHARGE OF CREMATORY	
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE		FRIGHT TO IDENTAL FINAL	- Line	FDISPOSITION	
USE USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINSY Father	<i>;</i> '			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pe remains of the above named dece and I hereby acknowledge that to this permit gives no right of unres	edent under provisions of the h resposs and nuisance laws app	lealth and Safety Code, bly and understand that	SIGNATURE OF APPLIC  DATE SIGNED	ANT	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE JIND IS JIHE   \$4.00	DATE PERMIT ISSUED	SIGNATUR OF LOCAL	GIGAR ISSUING MIDT CO	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	SIGNATURE	of PERSON IN CHANGE OF I	DIPPOSITION LICE DISP	NSE NUMBER OF CREMATED REMAINS OSER, IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	0			

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

36457

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

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From Barbora Has	264-3151 101 Mildress: 1905 V	Date: 7-2	7 . 19 88
In Payment of Il	red xette-one	SHID Dollars (\$	961,37
Lot 42 Grave	3 Row S	sction 2	Division //
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 87007 20% Sales Care 77184 — 80% Sales 100 of Lota 77184 —	200 00
W.O. E-7549  BALANCE DUE 6	0041063 1988	Opening/ 100 Closing 77181 — Burial 100 Comainers 77182 — Handling Fee 77185 —	175 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	1/1/2	Recording & 100 Misc. Fees 77183 —  #re-Need \$3033  #rusi \$9022 —  Sales Tax \$0101  78390 —	1137
AC-212 (Rev. 10-87) # 2	ISSUED BY ANGELOW	TOTAL PAID	961 37

## MT. HOPE CEMETERY

## INTERMENT'ORDER

City of San Diego

W. Company	Date //4	23/88
	Valoria	
You are hereby authorized and instructed, sub	bject to your rules and regulations,	to inter the remains
of Priscella	are Jone	a o
ina Cremation boult Fu	uneral, date, time	7/28 1:3
Church, Chapel, Graveside	; Abagodale	Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra ch	arge will be applied
and billed to undersigned. War time veteran	Deline	u (daly)
none center of sio	ul	8 0
Lot 28/2 Grave Bow	Section Division	ARCTICIK 1/0
Grave space & Care Fund Pr	Pail Lone's Grave "	N N
WIRMSHOWS WINDER STREET		
Additional spaces and care fund		10/10
Opening/Closing & Setup		103 -
Burial Container		40=
Handling Fees	*************	<u>60 =</u>
Flower vases - Marker setting fee	*************	
Recording and filling fee		350
Sales taxes		2.60
	Total Due	242.60
No.	eceipt number 36450	203/1
raiore	ROYAPANI BUTANI AMELOLOB ISBU	C
	Balance	due
I hereby certify I am the ZKh caloud	S. af the abo	ve named decedent
and this is your authority to make disposition	of remains as above indicated. I c	ertify and represent
that I have the right to make this authorization any liability on account of said authorization		etery harmless from
	11 0 01	
I hereby authorize the interment in lot I	Downald	Mesus
hild under deed.	Dava was	MANON
Signature of recorded holder of deed	Acres David	ENSP
. 4 0 0	Sinte 31 38 11	Zip Code
	Teléphone	
42		
E mero	Invoice #	
Work Order # <b>E</b> 7550	Acct. #	
PV-843 (REV R-95)		

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	T	COLD TO CHARGE THE CASE THE CASE THE CASE	SEX	DATE OF BIRTH	DATE OF DEATH		
	Priscilla Lane Va	ent Ine	Female	Oct. 12, 1940	July 21, 1988		
		- Total Tota	OF DEATH-COUNTY (OR STATE IF NOT IN CALIFORNIA)		SPOUSE OR OTHER INFORMANT		
	S OF FUNERAL DIRECTOR ION PERSONAL	CONGAS SUCHI	ALIFORNIA LICENSE NUMBER F 1329	2921 "C" St. Apt. 280 San Diego, CA 92102			
	TYPE OF PER	MIT, CHECK ONLY ONE OF TH	IE FOLLOWING TYPES O	F DISPOSITION			
1. BURIAL (IN	CLUDES ENTOMBMENTI	5. DISINTERMENT AND BU	IRIAL (INCLUDES	B. DISINTERMENT AND REMAINS (INCLUDES	REINTERMENT OF CREMATED INURNMENT)		
2. CREMATION AND BURIAL (INCLUDES INURNMENT)  3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY  4. SCIENTIFIC USE		6. DISINTERMENT, CREMA		9 DISINTERMENT OF CREMATED REMAINS AND DISPOSITION OTHER THAN IN A CEMETERY  FOR CORONER'S USE ONLY  10 DISPOSITION PENDING			
		7 DISINTERMENT, CREMA OTHER THAN IN A CEN					
TERMENT	NAME AND ADDRESS OF CEMETERY V		MAINS ARE TO BE INTERRE	0	San Diego		
CREMATION	NAME AND ADDRESS OF CREMATORY V	and the same of th	- 1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/	SIGNATURE OF TERSON I	CHARGE OF CHEMATORY		
OR OR THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	LINE, OR OTHER DESCRIPTION SUF	FICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF D	SPOSITION		
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	1				
ACKNOWLEDGMENT This is to certify that I am the per remains of the above named decer		erson having the right to control the disposition of the adent under provisions of the Health and Safety Code, respass and nuisance laws apply and understand that		•, •			
LOCAL    REGISTRAR	this permit gives no right of unres  THIS PERMIT IS ISSUED IN ACCORDANCE WIT  OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	H PROVISIONS AMOUNT OF FEE PA	edinis Chinasio / Petri	SIGNATION OF LOS	GETTER ISSUMMENT (		
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED 7	37/VY SIRNATURE	F PERSON N CHARGE OF		NUMBER OF CREMATED REMAINS ER, IF APPLICABLE		
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAN OF Sen Plage County Dep	COUNTY OF DEATH	P.O. Box I cas San Diego,	5222 CA 92138-5222			

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

#### OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36450

	264-3151	Date:	7-25		88
too here deed	Spite - trop 69	100-0	ollars (\$ 4	1/2.6	0,
Lot 2872 Grave	RowSe	ction	0	Division /	
Acct. No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.  CITY AUDITOR "	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing	67007 77184 — 100 77184 — 100 77181 —	105	00
BALANCE DUE	JUL 29 1988	Buriel Containers Handling Fee Recording & Misc. Fees	100 77182 — 100 77185 — 100 77183 —	35	33
Pre-Need Lot Al Need On Acct Pre-need Trust Cash Check A	ISSUED BY Andrea Mary	Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 — 60101 78380 —	842	60

#### MT-HOPE MEMETERY

#### INTERMENT ORDER

City of San Diego

Date 7/26/88

of BORBY	Alle	-1
ina Vault Fu	negal, date, time Thew //	m 7/28
Church, Chapel, Graveside Church 4	8.8. Ragsfile	Mortuary
All Funeral cars must arrive before 3:30 p.m.		ge will be applied
and billed to undersigned. War time veteran		15
Lot 88 Grave 12 Row	Section Division/	Block
Grave space & Care Fund		4952
Additional spaces and care fund	******************	74-6
Opening/Closing & Setup	+ (courte)	3200
Burial Container	(Grants)	17000
Handing BALL	f	210-
Flower values - Marker setting for	***********************	200
Recording and filing fee		11.3
Sale 12X83	Total Due	1201 3
SAN DIEGO CALIF	ceipt number 36 458	1206.3
/ //	Balance (	110 -O-
	0.777203-83	
I hereby certify I am the and this is your authority to make disposition	of remains as above indicated. I cer	e named deceden tify and represen
that I have the right to make this authorization any liability on account of said authorization		ery harmless from
The state of the s	111:20.6.16	10
I hereby authorize the interment in lot I hold under deed.	4416 LOGA	N AVE
Signature of recorded holder of deed	SAN DIEGO	921
	Telephone 264-61	269 2000
×-:	ACCUMENTS AND AC	
E 7551	Invoice #	
Work Order #	Acct. #	

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	π	DOE BLACK INK-MAKE	SEX		DATE OF BIRTH		DATE OF DEATH FOUND
NAME OF DECEDER	Bobby Earl Hill		1,000	Male	Dec. 23.	1949	SAMOUS STATE OF STATE
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COL	JNTY IOR STATE IF I	. 100.7	NAME AND ADD	HIST	Daly 25, 1988 OUSE OR OTHER INFORMANT - Mother
Anderson	SS OF FUNERAL DIRECTOR FOR PERSON IN-Registrate Hortwary	050 Federal 8 an Diego, CA	Tyd CALIFORNIA	329	San Dieg		
	TYPE OF PER	MIT, CHECK ONLY ON	OF THE FOLLO	WING TYPES OF	DISPOSITION		
T BURIAL (IN	ICLUDES ENTOMBMENT)	5. DISINTERMENT		LUDES	8 DISINTERME REMAINS (III		INTERMENT OF CREMATED URNMENT)
Service Control of the Control of th	N AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT		BURIAL			MATED REMAINS AND IAN IN A CEMETERY
3 CREMATION CEMETERY 4. SCIENTIFIC		7 DISINTERMENT OTHER THAN I	r, Cremation, and In a cemetery	CONTRACTOR CONTRACTOR	FOR		R'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY V				0	COUN	n Diego
CREMATION	NAME AND ADDRESS OF CREMATORY	VHERE REMAINS ARE TO BI	E CREMATED DAT	TE CREMATED	SIGNATURE OF P	ERSON IN C	HARGE OF CREMATORY
BURIAL AT SEA OR POSITION OTHER N A CEMETERY MATED REMAINS	ADDRESS. NEAREST POINT ON SHORE	INE OR OTHER DESCRIPT	TION SUFFICIENT T	O IDENTIFY FINAL	PLACE AND COUN	TY OF DISP	OSITION
SCIENTIFIC USE		REMAINS					
ACKNOWLEDGMENT	This is to certify that I am the pe remains of the above named dec				SIGNATURE OF A	PPLICANT	
OF APPLICANT	and I hereby acknowledge that to this permit gives no right of unres			SECTION SHAPE SUPPLIED OF THE SECTION OF THE SECTIO	DATE SIGNED		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE MO IS THE	DAT	E PERMIT ISSUED L 28 1988	A-4-	40	TRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF VISPOSITION	I CERTIFY THAT THE SPECIFIED 7	NATE DATE	DOXUM	UN CHANGE OF D	ISPOSITION		UMBER OF CREMATED REMAINS IF APPLICABLE
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF San Diego County Dep	100 Sept. 100 Se	P. 0) Box San Diego	85222 o, CA 9213	8-5222		

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

	PETTY Flow  Betty Flow  Full Payment of Dad	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151  Address: 357 Rosely Line Company Line Comp	Robby E. Hill	36458 7 88 2 114 206 37 7 - Security
Li	ot 88 Grave	12		vision 12
	voice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 80% Sales 100	96 00
A	cct. No. Lo. E-7551	A PART OF THE PART	of Late 77184 Opening/ 100 Closing 77181 Burisl 100	2000
В	ALANCE DUE	CETTYAAUGSTOR	Containers 77182 100 Handling Fee 77185 100	70 00
P	re-Need Lot At Need On Acct	AUG 08 1988	Misc. Fees 77183 ————————————————————————————————————	3 80
	re-need Trust Cash Check Co-	Logen Tilto	* 12 Sales Tax 80101 78300	06 37

#### OFFICIAL RECEIPT Nº 36816 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY 284-3151 Division Grave NOT VALID FOR PURPOSE STATED UNLESS STAM CREDIT 20% Sales Care Invoice No. OCBO% Sales Acct. No BALANCE DUE ! Handling For Recording & Misc. Fees 77183 63033 Pre-Need Lot 8022 Pre-need Trust THAL PAID AQ-212 (Mev. 10-87)

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 7-26-88

ina Linea Fu	neral, date, time 1/29/Frie - 10 Am
Church, Chapel, Graveside Ly May Ma	
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge will be applied
ny billed to undersigned. War time veteran .	*****
Lot 4933 Grave Row	Section Division/Black
Grave space & Care Fund Gre R	iel E-4603
Additional spaces and care fund	Telout
Opening/Closing & Setup	Derom
Burial Container	10/87
Handling Fees	<i>H</i> - ·
Flower vases - Marker setting fee	NONE
Recording and filing fee	
Sales taxes	
and all	Total Due
) Paid re	oceipt number
Ula, alt	Balance due
Howard Ke	Balance due
hereby certify I am the	of the above named deceder
I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization	of the above named deceder of remains as above indicated. I certify and represer and lagree to hold Mt. Hope Cemetery harmless from
I hereby certify I am theand this is your authority to make disposition	of the above named deceder of remains as above indicated. I certify and represer and lagree to hold Mt. Hope Cemetery harmless from
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 thereby authorize the interment in lot I	of the above named deceder of remains as above indicated. I certify and represer and lagree to hold Mt. Hope Cemetery harmless from
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 thereby authorize the interment in lot I	of the above named deceder of remains as above indicated. I certify and represent and lagree to hold Mt. Hope Cemetery harmless from and interment.
hereby certify I am the	of the above named deceder of remains as above indicated. I certify and represent and lagree to hold Mt. Hope Cemetery harmless from and interment.
hereby certify I am the	of the above named deceder of remains as above indicated. I certify and represent and lagree to hold Mt. Hope Cemetery harmless from and interment.  Signature Address State Zap.Co.
hereby certify I am the	of the above named deceder of remains as above indicated. I certify and represent and lagree to hold Mt. Hope Cemetery harmless from and interment.
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 the above named deceder of remains as above indicated. I certify and represent and lagree to hold Mt. Hope Cemetery harmless from and interment.  Signature Address State Zap.Co.

NAME APO	E APODACA, ARGELIA C/O Howard Hrath			E-6544	
ADDRESS 61	1 Highland Avenue, National City, Ca 9205	0 RATING	LIMIT		
DATE	ITEM5	DEBIT	BIT / CREDIT B		
fa. 87	Opening/Closing, Bell Liner, Recording	Fee 60 6 00	6 06 00	0	
*					
1560					
•					
AIGNER FORM NO	APODACA, ARGELIA	4933 -	10	PRINTED IN USA	

E7552

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	T -	National Control of the Control of t	SEX	DATE OF BIRTH	DATE OF DEATH	
ARCE	RIA E. APODACA		FEMALE	DEC. 12,	1912 JULY 26, 1988	
PLACE OF DEATH—	CARRIEL	PLACE OF DEATH—COUNTY FOR STATE IF NOT IN CALIFORNIA)  LOS ANCELES  CTING AS SUCHI  CALIFORNIA LICENSE NUMBER			DRESS OF SPOUSE OR OTHER INFORMANT IR APODACA * DAU IN LAW	
	S OF FUNERAL DIRECTOR (OR PERSON AC			WITCHT AREA COCCORDINATION	WEFT ST. 30, CALIF. 92114	
N. S. S.	TYPE OF PERM	IT, CHECK ONLY ONE C	F THE FOLLOWING TYPES (	OF DISPOSITION		
1 BURIAL IIN	CLUDES ENTOMBMENTI	5. DISINTERMENT AN	IO BURIAL (INCLUDES	B. DISINTERN	MENT AND REINTERMENT OF CREMATED	
☐ 2º CREMATION	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CF			MENT OF CREMATED REMAINS AND ON OTHER THAN IN A CEMETERY	
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 4 SCIENTIFIC USE		7 DISINTERMENT, CREMATION, AND DISPOSITION		FOR CORONER'S USE ONLY		
TERMENT	NAME AND ADDRESS OF CEMETERY WI				SAN DIEGO	
CREMATION	NAME AND ADDRESS OF CREMATORY WI	HERE REMAINS ARE TO BE CR	EMATED DATE CREMATED	SIGNATURE OF	PERSON IN CHARGE OF CREMATORY	
BURIAL AT SEA OR SITION OTHER THEN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORELI	NE, OR OTHER DESCRIPTION	SUFFICIENT TO IDENTIFY FINA	L PLACE AND COU	NTY OF DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	IVING REMAINS				
ACKNOWLEDGMENT OF	This is to certify that I am the per remains of the above named dece	lent under provisions of t	he Health and Safety Code,	SIGNATURE OF	APPLICANT	
APPLICANT	and I hereby acknowledge that tre this permit gives no right of unresh		MANAGONE SANDEN	DATE SIGNED		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED	F AND IS THE	JUL 27 191	20 Taber	COCAL REGISTERS ISSUING PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	11-2-11-	ER DATE)	RE OF PERSON IN CHARGE OF	DISPOSITION	LICENSE NUMBER OF CREMATED REMAINS DISPOSER. IF APPLICABLE	
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	VITAL RECORDS: 313	COUNTY OF DEATH	, LOS AMGELES, C	CALIFORNIA		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERFED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

P Date 7/27/88

of Rondale L	estour	Jample	20
ina Vault Fu	nerak date, time 🛩	1 7/30	1000
Vault/Liney / / / /	Mark O. D.	1/200	270
Church, Chapel, Graveside Much +	man age	Wite	Mortuary
All Funeral cars must arrive before 3:30 p.m.	3323000 000	r an extra charge W	ill be applied
and billed to undersigned. War time veteran .	No		
110	-		14
Lot // Grave Row	Section 5	Division/Block	k / de
			4950
Grave space & Care Fund			110
Additional spaces and care fund			31 0
Opening/Closing & Setup			500=
Burial Container			17500
And or an annual state of			17000
Handling Fees			
Flower vases - Marker setting fee			2/8
Recording and filing fee			00
Sales taxes			11.31
an well	Total D	ue /	1206.3
10632	21	459	60000
	ceipt number $\frac{\Delta P}{\Delta P}$	. / _	10/37
Sat. Queter	- 000 -	Balance due	3 80.00
Time	X	C	18631
I hereby certify I am the	of remains as above	of the above nati indicated. I certify a	ned deceden and represen
that I have the right to make this authorization any liability on account of said authorization a		t. Hope Cemetery h	armless fron
any moderny on account of acts activities not to		10 000	100
hereby authorize the interment in lot I	X Jen	M 11-11	F The
hold under deed.	Willelle.	Jandes	St.
Signature of recorded holder of deed	Address Clark	nerace	9210
Constitute on sectorated trouble, in research	State	2001 11	20500
	Talephone	201-1	400
	2 Value (4000 0 F )	60 70	23
	Invoice #	07300	X O
Work Order # E 7553	Acct. #	02780	4
TYUIR CIUCI W	most. W		

		W.O. #	E-755	3
20	NOTE			
00131		5/	- 07	a. 2
\$ 986 XX San Dieg	go, California	1/0	190	88
30 days after date for value recei	ved, the undersigne	d maker promises	to pay to Mt. Hop	e
Cemetery or San Diego City Treasur	er order at 375	l Market Street,	San Diego, Ca 921	.02
Chepist 29, 10 88	the unpaid principal	DOLLARS  1 at the rate of	with interest fr 12 percent per an	
payable on demand.	Secretary and the secretary of the secre		recently and analysis was alleged as Alle	Charles Control
Should this note not be paid when	due, it shall there	after bear intere	st on the princip	al.
Interest after maturity will accru are payable in lawful money of the	e at the rate indica	ated above. Prin	cipal and interes	t
to renewals, replacements and exte	nsions of time for	navment hereof be	fore at or after	
maturity, and waives presentment,	demand and protest	and the right to	assert any statut	e '.
of limitations. A married person	who sions this note	sorees that reco	irse may be had	
against his/her separate property	for any obligation	contained berein.	If any action h	ρ .
instituted on this note, the under	(e)easimora beneis	to pay such sum a	the Court may f	ix
as attorney's fees.		er paj bach sam e	over L may .	20,5
		ld.		
Part II, Chapter I, Article 2	Para. 7528 of the	State of Californ	ofa Health &	
Safety Code authorizes the re	moval of any remains	s from a plot for	which the	
purchase price is past due or		o ream a proc for	WHACH LIFE	4
, manufact prove as pens use of		. (	r . n. n	
PRINT NAME	SIGNATURE	Y Dennis L	J-WJ F Flee	_

MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE

ADDRESS

CALIF. DRIVERS LIC. #

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	Ronda le Desha	um Samples	SEX Mala	Jan. 7, 1976	July 26, 1988
PLACE OF DEATH-	CITY OR TOWN		IOR STATE IF NOT IN CALIFORNIA)	NAME AND ADDRESS OF	SPOUSE OR OTHER INFORMANT
NAME AND ADDRES	SS OF FUNERAL DIRECTOR FOR PERSONS		CALIFORNIA LICENSE NUMBER  670	4616 Landis S San Diego, CA	treet
7 .			THE FOLLOWING TYPES O	F DISPOSITION	10-1-2-2
BURIAL IIN	ICLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT)	BURIAL (INCLUDES	B DISINTERMENT AND REMAINS (INCLUDES	REINTERMENT OF CREMATED
50.5% = .00000240.0000 ********************************	ON AND BURIAL (INCLUDES INJENMENT)	6 DISINTERMENT, CRE			CREMATED REMAINS AND THAN IN A CEMETERY
4 SCIENTIFIC	6	7 DISINTERMENT, CRE OTHER THAN IN A C	MATION, AND DISPOSITION CEMETERY	FOR CORO	NER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY WI		REMAINS ARE TO BE INTERR	1.5	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY WI	. Landani	MATED DATE CHEMATED	SIGNATURE OF PERSON	N CHARGE OF CREMATORY
BURIAL AT SEA OR SITION OTHER IN A CEMETERY OF CREMATED REMAINS	NA Bate	ME, ON CHAEF GESCH TION	Dec + Vand	LACE AND COUNTY OF E	ISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	EIVING REMAINS			
ACKNOWLEDGMENT  OF  APPLICANT	This is to certify that I am the pen remains of the above named dece- and I hereby acknowledge that tre this permit gives no right of unrestr	dent under provisions of the spass and nuisance laws a	Health and Safety Code, pply and understand that	SIGNATURE OF APPLICAN  DATE SIGNED	,
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY CODI AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE	JUL 2 8 1966	CIGNATURE OF LOCAL RE	Campos, M. Dall
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	CERTIFY THAT THE SPECIFIED CISESSITION WAS MADE ON	TER DATE)	OF PERSON IN CHARGE OF I		E NUMBER OF CREMATED REMAINS ER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF C	COUNTY OF DEATH	0		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE SEMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

From Lewhis Payment of	Address: 46/6 Lands	Date 19	Nº 28 2 101 - Slany	36459 
: Lot 1/9 Grave		ction_3	Divis Bloc	
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.  CITY AUDITOR	CREDIT 20% Sales Cere 80% Sales of Lots Opening/ Closing Burist Containers	67007 77184 100 39 77184 100 77181 100 77182	25 00
BALANCE DUE 98637	AUG 03 1988	Hendling Fee Recording & Misc. Fees Pre-Need	100 77185	
Pre-need Lot	ISSUED BY LONGING	Trust Sales Tax TOTAL PAID	9022 90101 78390 \$ 66	00 00

#### OFFICIAL RECEIPT 36556 CITY OF BAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY 284-3151 Division Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT Invoice No 20% Sales Care BON Sales 77184 CITY AUDITOR of Lots Acct. No. Opening/ Closing 77181 Burist Containers 77182 AUG 22 1988 BALANCE DUE Handling Fee 771年 Recording & Fre-Need 83033 Pre-Need Lot At Need A Toubt Pre-need Trust Cash Sales Tax 60101 TOTAL PAID AC-212 (Mey, 10-87)

URGENT - REPLY IMMEDITELY NO REPLY REQUIRED MESSAGE SIGNED REPLY SIGNED

073023 08/23/88 027409 E-7553	LENNIS D. MC GEE 100 072 100 072 100 072 100 072 60101	77181 000072 77182 000072 77183 000072 77185 000072 78390	JV21 757	986.37 215.00 175.00 415.00 170.00	986-37	PAID IN FULL
NUMBER OF INVOICES PAID TOTAL AMOUNT PAID	2.092.74					

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

7-27-88

and billed to undersigned. War time veteran	rive before 3:30 p.m. of regular work day or an extra charge will be applied. War time veteran	hurch, Chapel, Graveside Authority before 3:30 p.m. of regular work day or an extra charge will be applied by the state of the above named deceded under signed. War time veteran	of Towners	a a	Jan	son	//-
All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge will be a good billed to undersigned. War time veteran	arrive before 3:30 p.m. of regular work day or an extra charge will be applied. War time veteran	If Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge will be applied by the provided of the state of the	na 1. 3. Venet Fu	neral, date, tir	no	11291	1an
probabilist to undersigned. War time veteran	Row Section Division/Block 7  Row Section Division/Block 7  and Section Division/Block 7  and Section Section Division/Block 7  Invoice #  Invoice #	grave Space & Care Fund  dditional spaces and care fund  pening/Closing & Setup  urial Container  andling Fees  lower vases - Marker setting fee  ecording and filing fee  seles taxes  Total Due  Paid receipt number 36 46 7 71/3  Balance due  hereby certify I am the  pening for the above named deceded this is your authority to make this authorization and I agree to hold Mt. Hope Cemetery harmless from the labelity on account of said authorization and interment.  Paid receipt number 36 46 3 74/3  Balance due  F 7554	hurch, Chapel, Graveside	rede 1	Miller	- Kies MeCo	Mantu
probabilist to undersigned. War time veteran	Row Section Division/Block 7  Row Section Division/Block 7  and Section Division/Block 7  and Section Section Division/Block 7  Invoice #  Invoice #	grave Space & Care Fund  dditional spaces and care fund  pening/Closing & Setup  urial Container  andling Fees  lower vases - Marker setting fee  ecording and filing fee  seles taxes  Total Due  Paid receipt number 36 46 7 71/3  Balance due  hereby certify I am the  pening for the above named deceded this is your authority to make this authorization and I agree to hold Mt. Hope Cemetery harmless from the labelity on account of said authorization and interment.  Paid receipt number 36 46 3 74/3  Balance due  F 7554	Il Funeral cars must arrive before 3:30 o m	of regular wor	k day or a	extra charge will	he anni
grave Section Division/Block Divisio	Row Section Division/Block  Ind  Ind  Ind  Ind  Ind  Ind  Ind  In	rave space & Care Fund  dditional spaces and care fund  pening/Closing & Setup  urial Container  andling Fees  lower vases - Marker setting fee ecording and filing fee  sless taxes  Total Due  Paid receipt number 36 / 6 2 / 1/-3  Balance due  Paid receipt number 36 / 6 2 / 1/-3  Balance due  hereby certify I am the			,	Tontia dilaigo iriii	ос орр.
dditional spaces and care fund  pening/Closing & Setup  urial Container  andling Fees  lower vases - Marker setting fee  ecording and filing fee  ales taxes  Total Due  Paid receipt number 36 / 6 2 ///  Balance due  hereby certify I am the  of the above named de and this is your authority to make disposition of remains as above indicated. I certify and repart I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmles my liability on account of said authorization and interment.  hereby authorize the interment in lot I signature  Signature  Lawred Augustan  Augustan  Balance due  Augustan  Augustan  Balance due  Balance due  Augustan  Balance due  Balance	recare fund  stup  175.0  175.0  175.0  175.0  175.0  175.0  175.0  175.0  Setting fee  Balance due  Total Due  Total Due  Total Due  Balance due  of the above named deced into the standard program and the standard authorization and lagree to hold Mt. Hope Cametery harmless for the standard authorization and interment.  Interment in lot I  Sepatare  State  175.0  Balance due  Of the above named deced into the standard program and the standard	rave space & Care Fund  dditional spaces and care fund  pening/Closing & Setup  urial Container  andling Fees  lower vases - Marker setting fee  ecording and filling fee  35.0  Paid receipt number 36.76.2  Paid receipt	2 O	2	1		4
dditional spaces and care fund  pening/Closing & Setup  durial Container  andling Fees  lower vases - Marker setting fee  decording and filing fee  descript number 36 / 6 2 / / / / / / / / / / / / / / / /	recare fund  stup  175.0  175.0  175.0  175.0  175.0  175.0  175.0  175.0  Setting fee  Balance due  Total Due  Total Due  Total Due  Balance due  of the above named deced into the standard program and the standard authorization and lagree to hold Mt. Hope Cametery harmless for the standard authorization and interment.  Interment in lot I  Sepatare  State  175.0  Balance due  Of the above named deced into the standard program and the standard	rave space & Care Fund  dditional spaces and care fund  pening/Closing & Setup  urial Container  andling Fees  lower vases - Marker setting fee  ecording and filling fee  35.0  Paid receipt number 36.76.2  Paid receipt	or 98 Grave & Row	Section	1	Division 494-4	1
pening/Closing & Setup  Journal Container  Journal	rotal Due	dditional spaces and care fund  pening/Closing & Setup  urial Container  andling Fees  lower vases - Marker setting fee  secording and filing fee  ales taxes  Total Due  Paid receipt number 36 /6 2 /// 3  Balance due  Paid receipt number 36 /6 2 /// 3  Balance due  Total Due  Of the above named deceded at his is your authority to make disposition of remains as above indicated. I certify and represent I have the right to make this authorization and lagree to hold Mt. Hope Cemetery harmless from a liability on account of said authorization and interment.  Personal Purchase  September  September  Provice #  Invoice #  Invo	Ulave now	_ oouton _	- 820	_ DIVISION/BIOCK _	(0)
pening/Closing & Setup  furial Container  Job  landling Fees  lower vases - Marker setting fee  secording and filing fee  selecting and filing fee  Paid receipt number 36 96 2 7//-  Balance due  Paid receipt number of the above named de not his is your authority to make disposition of remains as above indicated. I certify and repaint his with the right to make this authorization and lagree to hold Mt. Hope Cemetery harmles ny liability on account of said authorization and interment.  Thereby authorize the interment in lot I sepature  Sepature  Sepature  Job  Job  Job  Job  Job  Job  Job  Jo	setting fee  Setting fee  Total Due  Total D	pening/Closing & Setup  JOC  urial Container  andling Fees  lower vases - Marker setting fee ecording and filling fee  sless taxes  Total Due  Paid receipt number 36 / 62 / 1/-3  Balance due  Paid receipt number 36 / 62 / 1/-3  Balance due  of the above named deced and this is your authority to make disposition of remains as above indicated. I certify and repres and I have the right to make this authorization and lagree to hold Mt. Hope Cemetery harmless from the policy of the interment in lot I  See Puruting H  Posture of recorded holder of deed  F 7554  Invoice #	irave space & Care Fund				
pening/Closing & Setup  urial Container  landling Fees  lower vases - Marker setting fee  ecording and filing fee  ales texes  Total Due  Paid receipt number 36 96 2 7//-  Balance due  hereby certify I am the  not this is your authority to make disposition of remains as above indicated. I certify and repaint I have the right to make this authorization and lagree to hold Mt. Hope Cemetery harmles my liability on account of said authorization and interment.  hereby authorize the interment in lot I load under deed.	setting fee  Setting fee  Total Due  Total D	pening/Closing & Setup  JOC  urial Container  andling Fees  lower vases - Marker setting fee ecording and filling fee  sless taxes  Total Due  Paid receipt number 36 / 62 / 1/-3  Balance due  Paid receipt number 36 / 62 / 1/-3  Balance due  of the above named deced and this is your authority to make disposition of remains as above indicated. I certify and repres and I have the right to make this authorization and lagree to hold Mt. Hope Cemetery harmless from the policy of the interment in lot I  See Puruting H  Posture of recorded holder of deed  F 7554  Invoice #	dditional energe and care fund				
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lower vases - Marker setting fee  ecording and filing fee  ales taxes  Total Due  Paid receipt number 36 96 2 7//-  Balance due  Balance due  thereby certify I am the	setting fee  Balance due  Paid receipt number 36 / 6 2 / / 3 8 69 3945  Invoice #	lower vases - Marker setting fee  secording and filing fee  ales taxes  Total Due  Paid receipt number 36 46 2  Balance due  of the above named decade at this is your authority to make disposition of remains as above indicated. I certify and represent I have the right to make this authorization and lagree to hold Mt. Hope Cemetery harmless from I liability on account of said authorization and interment.  Thereby authorize the interment in lot I liability of recorded holder of deed  F 7554					20,0
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Paid receipt number 36 46 2 1/1-3  Balance due  thereby certify I am the	Paid receipt number 36 / 6 2 7 / 3  Balance due  of the above named deced ity to make disposition of remains as above indicated. I certify and repres make this authorization and lagree to hold Mt. Hope Cemetery harmless for t of said authorization and interment.  interment in lot I  Superfice  State  1 8 6 9 3 9 4 3  Invoice #	Paid receipt number 36 96 2 7/1-3  Balance due  Thereby certify I am the	ales taxes				11.0
hereby certify I am the of the above named de nd this is your authority to make disposition of remains as above indicated. I certify and repart I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmles my liability on account of said authorization and interment.  The day of the above named deep indicated. I certify and repart I have the right to make this authorization and interment.  The day of the above named deep indicated. I certify and repart I have the right to make this authorization and interment.  The day of the above named deep indicated. I certify and repart I have the right to make this authorization and interment.  The day of the above named deep indicated. I certify and repart I have the right to make this authorization and interment.  The day of the above named deep indicated. I certify and repart I have the right to make this authorization and interment.  The day of the above named deep indicated. I certify and repart I have the right to make this authorization and interment.  The day of the above named deep indicated. I certify and repart I have the right to make this authorization and interment.  The day of the above named deep indicated. I certify and repart I have the right to make this authorization and interment.	Balance due  of the above named deced ity to make disposition of remains as above indicated. I certify and repres make this authorization and I agree to hold Mt. Hope Cemetery harmless for t of said authorization and interment.  interment in lot I  Signature  State  40242  State  100010000000000000000000000000000000	hereby certify I am the		39	Total Due	74	1.3
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hereby authorize the interment in lot I sold under deed.  He layer Lucifor Senture Senture Signature Signa	interment in lot I  Signature  State	hereby authorize the interment in lot I blood under deed.  Signature of recorded holder of deed  F 7554  Invoice #	nd this is your authority to make disposition		above ind	icated. I certify and	d repres
old under deed.	Signature Sf Signa	pressure of recorded holder of deed  pressure of recorded holder of deed  F 7554  Signed Pure State of deed  F 7554				robe Cemetery nar	miessir
old under deed.	Signature St. State Stat	pressure of recorded holder of deed  F 7554  Signature	045000 T1CV 0.5400000 001 -45.84 (Sec. COTT 24/1001) 2500 748-654 (VAION SOCI-	101	( )	91	
8,560 Funtan of	State 21 8693945 21p Telephone #	pristure of recorded holder of deed  State  State  18693945  Telephone  Invoice #	hereby authorize the interment in lot I	y'e	Keyn	2 Want	on
gnature of recorded holder of deed 9024	State 21 8693945 21p Telephone #	F 7554	old under deed.	85	60 B	with I	2
State 2-13 8693945	State 21 8693945 21p Telephone #	F 7554		And The same	00	des	12
20 18693945		F 7554	Busines or vacoused ucuses or open	State	19	707	Zip
Telephone		F 7554		Z-/3	186	93945	
Y STATE OF THE PARTY OF THE PAR		F 7554		Y Share a discharge			
Territories M		F 7554		termina.			

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	1		SEX	DATE OF BIRTH	DATE OF DEATH
	IIA M. WAUSON	···	remale		6, 1897 July 27, 1988
PLACE OF DEATH-		PLACE OF DEATH—COUNTY	(OR STATE IF NOT IN CALIFORNIA)	CONTRACTOR CONTRACTOR	DRESS OF SPOUSE OR OTHER INFORMANT
Bellf		Los Angeles	Townson		Wauson - Son
	S OF FUNERAL DIRECTOR ION PERSON A		CALIFORNIA LICENSE NUMBER	8566 Pu	The state of the s
Miller	Miss McComb Mortuary,	Downey, CA	F-439	Downey,	CA 90242
48.0	TYPE OF PERA	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES OF	DISPOSITION	
I BURIAL IIN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT)	BURIAL IINCLUDES		MENT AND REINTERMENT OF CREMATED
HETTERS AND THE SECOND STREET	N AND BURIAL IINCLUDES INURNMENTI	6 DISINTERMENT, CRI			MENT OF CREMATED REMAINS AND ON OTHER THAN IN A CEMETERY
3 CREMATION CEMETERY 4 SCIENTIFIC		7 DISINTERMENT, CRI OTHER THAN IN A	EMATION, AND DISPOSITION CEMETERY	FOR	CORONER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W	751 Market St.	San Diego, CA		COUNTY San Diego PERSON IN CHARGE OF CREMATORY
CREMATION	Ortan	n - Clo	the wood	fran	_
BURIAL AT SEA OR OSITION OTHER IN A CEMETERY OF REMATED REMAINS	ADDRESS, NEAREST POINT ON SAPREL	Laut Could	SUFFICIENT TO IDENTIFY FINAL	PLACE AND COU	NTY OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	250 8		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pe remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	dent under provisions of the espass and nuisance laws o	e Health and Safety Code, apply and understand that	SIGNATURE OF DATE SIGNED	C00107 - 600 10 70
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	E AND IS THE	DATE PERMIT ISSUED		LOCAL REGISTRANDELLING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	1010101	NOTER DATE!	AF OF PERSON AS CHARGE OF D		LICENSE NUMBER OF CREMATED REMAINS DISPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	NOCATE ADDRESS OF REGISTRAR OF	ASSESSED AND AND AND AND AND AND AND AND AND AN	a Street, Los An	geles, CA	90012

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

#### 36462 OFFICIAL RECEIPT CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ...... TO CUSTOMER CANARY ...... CEMETERY MOUNT HOPE CEMETERY 264-3151 Dollars (\$ Division NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE. CREDIT 67007 Invoice No. 20% Sales Care 77184 80% Sales of Lats Acct. No CITY AUDITOR 100

**BALANCE DUE** 

Pre-Need Lot Pre-need Trust

AC-212 (Rev. 10-87)

AUG 03 1988

TOTAL PAID

Opening/ Closing 77181 Burial 100 Containers Handling Fee Recording & Misc. Fees Pre-Need

Sales Tax

63033 60101

## MT. HONE CEMETERY INTERMENT ORDER

City of San Diego

Date 7-27-88

ofe	ena Judebeca
1. S. Vault	Funeral, date, time Man 8/1 /pm
hurch, Chapel, Graveside	Wesido Existan - Mortuary
Il Funeral cars must arrive before 3:	30 p.m. of regular work day or an extra charge will be applied
nd billed to undersigned. War time v	162
120	TODE IN
ot 130 GraveRow	Section 100P Missen Block 10
Grave space & Gore Euge	
dditona spaces A cale (Fd)	]
peging/Closing & Setup	320, CE
urial Confaine 6.1 1988	175.00
AND THE CEMETERY	170,00
STX of SANDIEGO CAME.	
ecording and filing fee	35.00
Sales taxes	37
· WALLY D	Total Due 7/1/37
1 min (b)	Paid receipt number 36 444 71137
90':11	Balance due
were the	
herway certify I am the	of the above named deceden
	orization and lagree to hold Mt. Hope Cemetery harmless from
my nacimy on account or sold activor	
hereby authorize the interment in lo	tel Signatura Starfac
old tillder dood,	7294 > Delmolo Re)
ignature of recorded holder of deed	Score Neguet, La 9267
gnature of recorded holder of deed	Telephone (Vigue), La 9267 Telephone  7(4) 493-4146
Acarlo Oceano # E 7555	Sura 7/4) 493-4146 Talaphone

### E7555

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	AVIII TO A T		SEX <b>Female</b>	May 26, 1896	July 27, 1988
PLACE OF DEATH-	SELMA ANNA CUDEBRO		IOR STATE IF NOT IN CALIFORNIA	CANADA TAMANA TA	SPOUSE OR OTHER INFORMANT
	na Hills	Oran		Arthur L. Kie	Martin Contract and the second
	SS OF FUNERAL DIRECTOR (OR PERSON AC		CALIFORNIA LICENSE NUMBER	22942 Belmont	
Erickson-	Anderson 8390 Allison	Av. La Mesa, CA	F296	Laguna Niguel	l, California 925
	visit and a second of the seco	AND THE CONTRACT OF STREET AND	or an anti-ferral community and the control	201 - 201 0-12 - 0-10 CM - 10 CM	
(a)	TYPE OF PERA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES (	H DISPOSITION	
B S BURIAL (IN	CLUDES ENTOMBMENT)	5. DISINTERMENT ANI	BURIAL UNCLUDES	8 DISINTERMENT AND PREMAINS (INCLUDES	REINTERMENT OF CREMATED INURNMENT)
2 CREMATIO	IN AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CR			EMATED REMAINS AND THAN IN A CEMETERY
3 CREMATIO	N AND DISPOSITION OTHER THAN IN A	D 2 DISINTERMENT CR	EMATION, AND DISPOSITION	COR CORON	ER'S USE ONLY
SCIENTIFIC		OTHER THAN IN A		☐ 10 DISPOSITION PENDIN	
F. 9 - 132-1	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATE	D REMAINS ARE TO BE INTERE	RED COL	UNTY
INTERMENT	Mount Hope Cemetery 3	751 Market Stre	et, San Diego	CA.	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	7-040-25	MATED DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER N IN A CEMETERY JEMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	Vaul	SUFFICIENT TO IDENTIFY FINA	L PLACE AND <u>COUNTY</u> OF DIS	SPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	1000		, i
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece- and I hereby acknowledge that the this permit gives no right of unrest	dent under provisions of the espass and nuisance laws	e Health and Safety Code, apply and understand that	DATE SIGNED  July 28,	like I
LOCAL BEGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA MEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE 4.00	AUG 1 198		Const MDr (s
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I JULIONE I IU	TEH DATE) SIGNATU	LOCAL TOTAL	DIPPOSITION LICENSE	NUMBER OF CREMATED REMAINS R, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	North Sycamore	Street Sant	a Anna, CA. 927	02

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

OFFICIAL RECEIPT  WHITE TO GUSTOMER CANARY GEMETERY PINK AUDITOR	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151	Nº 36464  Date: 8/1/88  19 19 19 19 19 19 19 19 19 19 19 19 19 1
in full Payment of Selma  Lot 130 Grave	Address: 27 4 Colon	Dollars (\$ 7//37)  Cotion 160F Division 10
Acct. No. E 7555	NOTYALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 87007 20% Sales Care 77184 80% Sales 100 of Lots 77184 Opening/ 100 320 00 Closing 77181 Burial 100 175 00 Containers 77182 100 170 00
Pre-Need Lot   At Need   On Agot   Pre-need Trust   Cash   Check   AG-212 (Rev. 10-67) # 264	Loyer 1988	Handling Fee 77185 Recording 4 100 Misc. Fees 77183 Pre-Need 83033 Trust 8022 Sales Tax 80101 78390 TOTAL PAID \$ 771 37

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 7-27-88

of V2L	ace desideter
	- 7
in 8Yault/Liner	Funeral, date, time
Church, Chapel, Graveside	
All Funeral cars must arrive before 3:3	O p.m. of regular work day or an extra charge will be applied
and billed to undersigned. Waytime ve	teran
90/ 1/	1 15
Lot Grave Row	Section Division/Black
	200 495 900
Grave space & Care Fund	770.00
Additional spaces and care fund	
Opening/Closing & Setup	40.7
Burial Container	<i>(y</i>
Handling Fees	·
Flower vases - Marker setting fe	
Recording and filing fee	
Sales taxes	
	Total Due 990.00
	Paid receipt number
	Balance due
therete sould be a share	of the above named decedent
	osition of remains as above indicated. I certify and represent
that I have the right to make this author any liability on account of said authori:	ization and lagree to hold Mt. Hope Cemetery harmless from zation and interment.
	Carro C 1 to
I hereby authorize the interment in lot	OCHCE Jergleion
hold under deed.	Serious
Signeture of recorded holder of deed	Address
	Starte Zip Code
	Tologhore
	Invoice #
Work Order # E 7556	201/10/02/1
Work Order # E 1000	Acct. #

	26 Palin Street, San Diego, Ca 92114 RAT		-		LIMIT	I George Colors
DATE	ITEMS	DEBIT		V	CREDIT	BALANCE
27 88	Lot 90, Grave 4 & Lot 91, Grave 1 in Sec 1,	990	00			
- 1	Division 12 2 @ 495.	- 19 30				
6 88	Causen #1 descipt 36035				4200	9480
5. 88	lauter # 2 Decept 36769			17	W/CE	907
488	Oragon # 3 Receipt 36917		1		40	866
6 88	Causon # 4 Clesast 37059	6/			14/80	X24
9.09	May 5, Feclist \$7202				din	7824
28 8	(10 Man. 46 Doge at 37236			1	(4/10)	1742
1 59	Day 1002 # 1 Peac St 31159	100	1		200	700
0.54	Marion 48 Prost 37605			1	100	1/1
- 09	110 Day 7 20068			2	21/0	234
100	Jan 1000 4 6 Pro At 20125	111	-	+	1	100
0 66	Jan 10 10 10 10 20 20 20 20 20 20 20 20 20 20 20 20 20			1	37	230
1 86	Margar #11, Keenpt 38265		-	1	3700	200
4 00	Lombor 12 recorde		ļ .		415	767
200	Caupar 19 14 cent 36417				94/00	426
3 8%	Janyan 14, Kese pt, 3,8014,		-		4/00	4.05
84	Varyen 13/ Keren 38506	- M	1 8		4100	299
0 89	aguipen 16, perent 38633				4100	333
W-11-90	Canpor 19 Receipt 31775				24/20	297

ADDRESS		RATING	LIMIT	29200
DATE	Этемя	DESIT	CREDIT	BALANCE
2-6-98 C	super # 18, Kecipt 38826		4100	2500
3-9-90 C	super+19, receipt 38982		4100	21000
4390 11	neina 2. Receipt 39073		4100	16900
5-7-90 C	Jupa-21, Receipt 39303		4/00	12800
6490 Co	upon- 20, receipt 39323		4/00	8700
6-12-10 G	super 24, receipt 394	87	4/w	46 00
8-690 C	super 24 receipt 39515		4600	
	THE SASS			
	PAID	————— <del>—</del>	++++	
	- IFAID,			
	AUG 6 1990			
	MT. HOPE CEMETERY			
	CETY of SAM DIRGO, CALLE,			

#### AGREEMENT FOR BEFORE-NEED CREDIT LOT SALE

This Agreement entered into this all day of
That Purchaser agrees to purchase and that Seller agrees to sell the exclusive right of interment in: Lot 2, Grave , Row, Section, Block/Division, located in Mt. Hope Cemetery, for and in consideration of a total purchase price of \$, Department of payable as follows:  \$, cash herewith, the receipt of which is hereby acknowledged;  \$, on the, day of, 1988; and the balance in installments of \$, or more, payable at the office of Mt. Hope Cemetery, on the, 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 INTER-
sive right of interment in: Lot 27, Grave 1, Row, Section, Block/Division, located in Mt. Hope Cemetery, for and in consideration of a total purchase price of \$, payable as follows: \$ cash herewith, the receipt of which is hereby acknowledged; \$, on the, day of, 198; and the balance in installments of \$, or more, payable at the office of Mt. Hope Cemetery, on the 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 INTER-
sive right of interment in: Lot 27, Grave 1, Row, Section, Block/Division, located in Mt. Hope Cemetery, for and in consideration of a total purchase price of \$, payable as follows: \$ cash herewith, the receipt of which is hereby acknowledged; \$, on the, day of, 198; and the balance in installments of \$, or more, payable at the office of Mt. Hope Cemetery, on the 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 INTER-
consideration of a total purchase price of \$
consideration of a total purchase price of \$
\$ 41.00 on the 10 day of September, 1988; and the balance in installments of \$ 100 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 INTER-
balance in installments of \$\frac{4000}{0000}\$ or more, payable at the office of Mt. Hope Cemetery, on the \frac{1000}{0000}\$ 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 INTER-
balance in installments of \$\frac{4000}{0000}\$ or more, payable at the office of Mt. Hope Cemetery, on the \frac{1000}{0000}\$ 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 INTER-
Mt. Hope Cemetery, on the 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 INTER-
PURCHASER, MAY CANCEL THIS TRANSACTION AT ANY TIME PRIOR TO MIDNIGHT OF THE FIFTH CALENDAR DAY AFTER THE DATE OF THIS TRANSACTION, PROVIDED NO INTER-
FIFTH CALENDAR DAY AFTER THE DATE OF THIS TRANSACTION, PROVIDED NO INTER-
10.70 PM 10.
MENT 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 ONLY THE INTERMENT RIGHT IN 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 the Cemetery's Perpetuity Fund. This Perpetuity Fund provides income for the care and maintenance of all portions of the Cemetery.

WITNESS our hands this day and year above written.

Deed to be issued to:  23@ 441.00=1	Mrs. Grace V. Lingleton 1933 5126 Palin St. Address San Diego, CA 921
	PURCHASER
	. Street Address (Mail)  City State Zip Code
	CITY OF SAN DIEGO Mt. Hope Cemetery  By: Anala X. While

#### OFFICIAL RECEIPT

TO CUSTOMER

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

Nº 36635

CANARY CEMETERY AUDITOR	MOUNT HOPE CEMETERY 264-3151,			
Marc New 10	to 0/26 4	Dute: 9	76	19
forty- two	20/10)	10 Do	ollars (\$ A.C.	0,
Payment of	wayer 1 0	vau z	Division /	_
Lot 70/9/ Grave	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT	-Block //	
Acct. No.	PAID IN THIS SPACE.	20% Sales Care 80% Sales of Lots Opening/	67007 77184 100 77184 100	00
W.O. 2-7556 BALANCE DUE 998.00	CITY AUGIT	Closing Burial Containers	77181	
	00019	Recording & Misc. Fees	77185 100 77183	0/03
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	Shedy The	Trust Sales Tax	63033 9022 60101 78390	100
AC-212 (Rev. 10-87)	ISSUED BY JUSTICE JUST	TOTAL PAID	- 40	00

Amount due if paid more than 10 days

after due date above.

s\_ 1.00

\$ 42.00

NAME Grace V. Singleton ADDRESS 5126 Palin St.

Amount Received

check ( / 4 if this is new address

OFFICIAL RECEIPT  WHITE TO CUSTOMER CANADY CEMETERY PINK. AUDITOR	CITY OF BAN DIEGO, CALIFORMA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151	N	36769
From: Surc Serles	no/100 2 Vice	Dollars (\$	45872/19 41.00
Lot 90 # 91 Grave_	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 20% Sales 100 of Lots 77184	Division/2 Block /2
W.O. 2-7556  BALANCE DUE 907.00  Pre-Need Lot At Need On Acct	CITY AUDITOR	Opening/ 100 Closing 77:81  Burlet 100 Containers 77:62  Handling Fee 77:85  Recording A 100 Misc. Fees 77:83  Pre-Need 63033	
Pre-seed Trust Cash Check Dr Ac-212 (Rev. 10-87) 3094	IBBUED BY STATE OF ST	Trust   9022	41001

											537
	NOT I	ALIEP CALL	0400-11/5			ittance	CC	OUP	ON	- 1	2
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51	26	Pal	in	Str	eet	ğ					
	in D						Š.				
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CITY						STAT	E		ZIP	10	
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### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MALINT MADE CEMETERY

(SAS) PINKAUDITOR	264-3151	"	2/ 02
From: lase Levelet	The Address: ST26 A	and Str	wt 100
In Payment of	Congon 4 Och	tet Las	2-47,00
. Lot 40/9/ Grave_	4//	ction/	Division / 2
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 6700: 20% Sales Care 7718-80% Sales 100 of Lote 7718- Opening/ 100 Closing 7718: Buriel 100 Containers 7718: Handling Fee 7718: Recording 8 100	OFC, ROMON
Pre-Need Lot At Need On Acct On Pre-need Trust Cash Check Ac-212 (Rev. 10-87)	1880ED BY Smilke Ward	Recording 4 100 Misc. Fees 7718 Pre-Need 8303 Trust 902 Sales Tax 5010 TOTAL PAID 1	199

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nou ter d	lue dat	e abon	Red Pilot	d'a		Receive	ed S	4	1000-10	00	

# WHITE TO CUSTOMER CAMARY GENETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From Have Single	to rooms 5126 Par	Date:Dete:Dete:Dete:Dete:Dete:Dete:Dete:Dete:	ollara (\$	41.0	19.87
Lot 20/9/ Grave 4	ugar 5 - 010	sction 1	at a	Division /	2
Acct. No. 2-7556  BALANCE DUE 789, 70	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Cars 80% Sales of Lots Opening/ Closing Burist Containers	87007 77184 — 100 77184 — 100 77181 — 100 77182 —	CITYAU	OD
Pre-Need Lot (NAt Need   On Acct   Pre-need Trust   Cash   Check   AC-212 (New. 10-87) 3/60	ISSUED BY Andla Wolf	Handling Fee Recording & Misc, Fees Pre-Need Trust Seles Tax TOTAL PAID	77185 — 100 77183 — 69033 9022 — 60101 78390 —	JAN 1.7	989

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nou	nt due lue da	lf paid	ve.	0202	nount.	Requive	al		CHARLES OF		ì



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY 264-3051

From: Man Sende finte, - on In Payment of (1)	e valled -	Pales 2-6	# 3 121 41.00
- Lot 90/9/ Grave C	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID: IN THIS SPACE.	CREDIT 67007 20% Sales Care 77154 — 80% Sales 100	Division/2 Block
W.O. 2-7556  BALANCE DUE 792.00		80% Sales 100 of Lots 77184 — Opening/ 100 Glosing 77181 — Burial 100 Containers 77182 — 100 Handling Fee 77185 — Recording & 100	FER . WOMOR
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Ac-212 (Nev. 10-87)	ISSUED BY AND WELL SALE	Recording & 100	41 00

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Т		Color Section 1		-	_				elow	ATTENDED	
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		n		An	nount i	Receive	ed S	-4	hi	00	L.

## WHITE ..... TO CUSTOMER

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINK	MOUNT HOPE CEMETERY 284-3151		20	1	p
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10 Perment of Co	no 1100 Then	HAI	ollars (\$ _	41.00	
Payment of	2//	The Art of the	,	Division /	
· Lot 90/9/ Grave	4// RowS	action		Block	_
Acct. No. 27 - 7556	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.  CITY AUDITOR	Closing	67007 77184 —— 100 77184 —— 100 77181 ——	41	00
BALANCE DUE 702,00	MAR 1 0 1989	Burial Containers Handling Fee Recording & Misc. Fees	100 77182		
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Cash Ac-212 (Rev. 10-87)	IBSUED BY My Ara Vard	Pre-Hoed Trust Sales Yax TOTAL PAID	63033 9022 60101 78390	41	0
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mounter .	ate abo int due due da	if paid te abo	more t	han 3	<del>0 d</del>	Receiv	Milking.	4	1.0	ю	

CITY AUDITOR Nº 37605

WHITE TO CUSTOMER CAMARY CEMETERY PINK. AUDITOR	MOUNT HOPE CEMETERY 264-3151	APR 07 1989	9-4	×19 8,
From: Those Jenger	Address: 4 4 00	ten st	ul, 3	
- Jack - once	auson 8 Coll	I lat	lars (\$	0
In Payment of				350
-Lot 90 /9/ Grave	4// ROW8	lection /	Division -Block	12
Invoice No.	HOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	20% Sales Care	67007 77184	1/20
Acct. No.	學是自己的學生不可以	Opening/	77184 	100
W.O. 7-1336		Buriel	77181	1
BALANCE DUE 601,00	<b>经</b> 不能是统治。		77185 100	
Pre-Need Lot At Need On Acct			77183 ————————————————————————————————————	3
Pre-need Trust Cash Check	La health	Salos Tex	60101 78390	7 00
in ordina out - 2220	ISSUED BY	TOTAL PAID	1 4	10

ce Sir 6 Pali	ngleton in Stre	n eet 92114		red			1000
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		30	\$	H	I.	00	

# WHITE TO CUSTOMER CAMARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

	264-3151		- 00
From Hora dend	Cetapores 15126 M	Date: Stu	J 53
Cfarty- one	10/100	Dollars (	41.00
Payment of	august 1	may ox	
Lot 70/9/ Grave	4//RowS	ection	Division /2
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 - 80% Sales 100	4100
Acct, No. 9-7556	THE RESIDENCE AND ASSESSMENT	of Lots 77184 - Opening/ 100 Closing 77181 - Buriel 100	City
BALANCE DUE 620-05		Containers 77182 - 100 Handling Fee 77185 -	MAY 10
Pre-Need Lot At Need On Acct		Recording & 100 Misc. Fees 77183 - Pre-Need 63033	MAY 1 2 1989
Pre-need Trust Cash Check	I hadral to	Trust 8022 - Sales Yex 80101 78390 -	/// 35
AC-212 (May. 10-87) 3436	ISSUED BY AUTHORITION OF THE	TOTAL PAID \$	4/ 00

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Amou	int due due da	il paid ite abo	more t ve.				S				

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

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NOT VALID FOR PURPOSE STATED UNLESS STATES	D CREDIT 67007 20% Sales Care 77184 —	///
, AUDI	60% Sales 100 of Lots 77184 —	41 00
cu, or	Opening 100 Closing 77181 —	
,0 m	Containers 77182 —	
70,	Handling Fee 77185 — Recording & 100	1 3 S
/ * /	Pre-Need 63033	
	Sales Tax 60101	
ISSUED BY Abyeld Will	TOTAL PAID .	4/60
	Address: 72 Addres	Address:    Dollars (\$   Dollars   \$   Dollars   Dollars   \$   Dollars   Dollars   \$   Dollars   Dollars   \$   Dollars   \$   Dollars   \$   Dollars   \$   Dollars   Dollars   \$   Dollars   \$   Dollars   \$   Dollars   \$   Dollars   Dollars   \$   Dollars   Dollars   \$   Dollars   Dollars

with each remittance COUPON DO NOT MAIL ENTIRE BOOK ACCOUNT No. 8-7556 Credit Lot Grace Singleton 5126 Palin Street San Diege, Ca 92114 Month and Day Due Indicated Below OCT NOV DEC JAN FEB MAR APR MAY JUN 1111 AUG SEP Amount due when paid on, or before, 41.00 due date above. Amount due if paid more than 10 days after due date above. Amount Regerved CITY Lan DIRAY STATE ZIP 97114 I check ( ) if this is new address

#### OFFICIAL RECEIPT. 38265 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY CEMETERY MOUNT HOPE CEMETERY PINK ... AUDITOR 264-3151 Date From Dollars (\$ In Payment of Division Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 Invoice No 20% Sales Care "PAID" IN THIS SPACE 77184 80% Sales 100 of Lots 77184 Acct. No Opening/ CITY Cigalno 77181 MUDITOR Burist 100 77182 Containers BALANCE DUE 100 Handling Fee 77185 JUI Recording & 100 Misc. Fees 77183 Pre-Need 63033 On Acct Pre-Need Lot Trust 9022 Pre-need Trust Sales Tax 80101

ISSUED BY

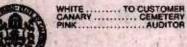
AQ-212 (Rev. 10-87) 0266

TOTAL PAID

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### OFFICIAL RECEIPT 38367 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE TO CUSTOMER CANARY CEMETERY MOUNT HOPE CEMETERY PINK 264-3151 \_ Dollars (\$ Payment of Division Section Block Grave Row NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 Invoice No "PAID" IN THIS SPACE. 20% Sales Care 77184 AUDITOR 80% Sales 100 of Lots 77184 Acct. No Opening/ 77181 Closing Buriel Containers 77182 100 **BALANCE DUE** Handling Fee 77185 Recording & Misc. Fees 100 77183 Pre-Need 63033 Pre-Need Lot - At Need | On Acct 9022 Trust Check Pre-need Trust Sales Tax 60101 78380 TOTAL PAID ISSUED BY AC-212 (Rev. 10-87)

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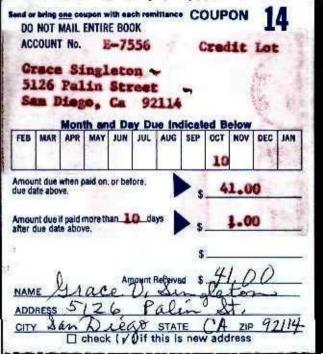


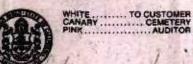
### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

	264-3161	51	59
From Marc Sende	12 Address 2126 1	Date:	20 92114
InPayment of	Cau 29n 13	Wedel o	(s 91.00)
Lot 90/9/ Grave	2/// Rows	ection	Division /
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 80% Sales 100	4/100
W.O. 2-1)556		of Lots 77184 Opening/ 100 Closing 77181 Burial 100 Containers 77182	CITY AUDITOR
BALANCE DUE 476.00		Handling Fee 77185 Recording & 100 Misc. Fees 77183	SEP 11 1989
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	12/2/1/	Pre-Med 63033 Trust 9022 Sales Tax 60101 78390	
AC-212 (Rev. 10-87) 3802	ISSUED BY AND OUT	TOTAL PAID \$	4/ 00

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#### OFFICIAL RECEIPT 38014 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CEMETERY MOUNT HOPE CEMETERY PINK ..... AUDITOR 264-3151 Date: Dollars (\$ Payment of Division Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED -PAID' IN THIS SPACE. CREDIT 67007 77184 Invoice No. 20% Sales Care 80% Sales 100 of Lote 77184 . Acct. No. Opening/ 100 Closing 77181 W.O CITY Burist 100 Containers 77182 TUBROR 100 BALANCE DUE Handling Fee 77185 Recording & Misc. Fees 77183 Pre-Need 63033 On Acct Pre-Need Lot 8022 Trust Pre-need Trust Cash ☐ Check Sales Tax 50101 78390 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)





MOUNT HOPE CEMETERY

	284-3151	Date:	11-	7	1909
From: State Stages  from: Payment of United	10/100 15 C/10	at 1 x	ollars 15	41.0	),
Lot 90/9/ Grave		ection		Division /	2
Acct. No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 60% Sales of Lots Opening/ Closing	67007 77184 — 100 77184 — 100 77181 —	CITYAU	00
BALANCE DUE 394/10		Burial Containers Handling Fee Recording &	100 77182 — 100 77185 —	Nov 13	1980.
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		Misc. Fees Pre-Need Trust Sales Tax	77183 — 63033 · 9098 — 80101 78399 —		203
AC-212 (Rev. 10-87) 33 1/2	ISSUED BY JOING   Wald	TOTAL PAID		41	00

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### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

N2 38633

PINKAUDITOR	264-3151	Date: 12	-6 1.89
from: State State  first - Sie	e Zan 16 Olice	Dollars (	41.00
Lot 90/9/ Grave	4// Row	ation/	Division Division
· Acct. 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	CITY AUDITOR
BALANCE DUE 353-00		Burial 100 Containers 77182 100 Handling Fee 77185 Recording & 100 Misc. Fees 77183 Pre-Need 63033	DEC 11 1989
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Nev. 10-87)	ISSUED BY And a Word	Trust 9022 Sales Tax 60101 78390 TOTAL PAID \$	4/00

ocupon with each remittance DO NOT MAIL ENTIRE BOOK ACCOUNT No. E-7556 Credit Lat Crace Singleton 5126 Palin Street San Diego, Ca 92114 Month and Day Due Indicated Below JUN JUL AUG SEP OCT NOV DEC JAN FEB MAR Amount due when paid on, or before. due date above Amount due if paid more than 10 days after due date above. 41,00 Amount Received \$ NAME Grace ADDRESS 5126 ZIP 92114 CITY San Diea O STATE C ☐ check ( ) if this is new address

WHITE ..... TO CUSTOMER

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINK	IDITOR MOUNT HOPE CEMETERY		1	N. S.
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July-11	ne Mallare	710/100 DO	ollars (\$ 4/.	00
Payment of	Credit lots			
			The state of	75.13
ot 90 691	Grave 4 8 / Row Se	ection /	Division	12
voice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 20% Sales Care	67007 77184	
oct. No.	TAIL IN STAGE	80% Sales of Lots	77184 4	100
0 E-7556	Ome	Opening/ Closing	77181	1000
	CITY AUDITOR	Burial Containers	77182	100
ALANCE DUE		Handling Fee	77185	
	JAN 1 6 1990	Recording & Misc. Fees	77183	
	Acct C	Pre-Need Trust	63033 9022	W.14
re-need Trust U Cash U Ch	leck &	Salse Tax	78390 · · ·	A
C-212 (Bay 10.87) 22/5	ISSUED BY ALLICE COLOR	TOTAL PAID	\$ 4	0 00

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er d	ive da	te abo	ve.	Ar	mount	Receive	ed S		41.	D	0

.... TO CUSTOMER

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

CANARY CEMETERY AUDITOR	MOUNT HOPE CEMETERY 254-3151	Date:	2-6		90
From Hince Lingetin	Address 5/06 Pale	11, 9	9211	4	
Firty- One 1	Vollar-	Who o	ollars (\$	41.0	1 1
In Payment of	CACT NOT				
bot 90+91 Grave	/ / / Row So	ection/_		Division /	2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 50% Sales	67007 77184 —	111	(1)
Abot. No.		of Lots Opening/ Closing	77184 — 100 77181 —	CITY AU	ITOR
W.O. F-4556		Buriel Containers	100 77182 —		The state of
BALANCE DUE		Handling Fee Recording &	77185 — 100	FEB 12	1990
Pre-Need Lot At Need On Acct		Misc. Fees Pre-Need Trust	77183 — 63033 9022 —	200	
Pre-need Trust Cash Check	Millint	Sales Tax	80101 78390 —	111	122
AC-212 (Rev. 10-87) 3372	ISSUED BY	TOTAL PAID		41	W

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## CITY OF SAN DIEGO, CALIFORNICITY AUDITOR

MOUNT HOPE CEMETERY MAR 2 0 1990

NOT VALID FOR PURPOSE STATED UNLESS STAME

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PED	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burist Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	87007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77185 — 100 77183 — 63033 9022 — 60101 78390 —	41	20
T.	TOTAL PAID		111	000

Invoice No. -Acct. No. BALANCE DUE Pre-Need Lot Pre-need Trust Cash Ab-212 (Rev. 10-87)

	NOT		500000			Ittance	C	OUP	ON	1	9
AC	COUN	T No.	1	-7	556		C	red:	1 3	Jo.	12
51	ee 6 I	di	in i	ETT		14	1	A. Cale			
To the		-					dical	led B	elow		10 3
JUL	AUG			MOV					APR		JUN
								20			
tue d Amou	nt due ate abo ant due due da	ue. If paid	more t		and the second	rys	> s	4	1.0	0	
NAM ADD	ileast.		rac	1e A1	V,	Receiv	A STATE OF THE PARTY OF	4	1.0	or	١



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

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

### MOUNT HOPE CEMETERY 284-3151

CITY AUDITOR

Ne

39073

APR 9 1990

	2	Date:	43	2000	1990
InPayment of	Address: 210 Paris	D	ollars (\$ .	41.0	
Lot 90 +91 Grave	4 + / Row S	ection		Division /	2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales	67007 77184	41	m
Acct. No		of Lots Opening/ Closing	77184 — 100 77181 —		
BALANCE DUE		Burial Containers	77182 — 100		
		Handling Fee Recording & Misc. Fees	77185 — 100 77183 —		
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		Pre-Need Trust Sales Tax	63033 9022 60101		
AC-212 (Rev. 10-87) 3433	ISSUED BY Jan Carl	TOTAL PAID	78300	41	00

DO NOT MAIL ENTIRE BOOK ACCOUNT No. E-7556 Grace Singleton 5126 Palin Street San Diego, Ca 92114 Month and Day Due Indicated Below JUN JUL OCT NOV DEC HIN FEB MAR APR AUG SEP Amount due when paid on, or before, due date above Amount due if paid more than 10 days after due date above. NAME Mrs. Grace V. 5 in ale ton ADDRESS 5 (26 Palin CITY San Diea D STATE CA ZIF ZIP 92114

WHITE TO CUSTOMER
CANARY CEMETERY
PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 39203

	264-3151	ACT HOS	9	-
	Control of the second of the s	Date:	7	
From Frace Angum-	Address: 2196 Paker	11, 18	72/14	1
toty bre	Collan	Alfos Do	llers (\$ <u>44.</u> 5	)
In Payment of	der Kit			1
*Lot 90 491 Grave	# / Row So	ection/_	Divisio Black	12
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care	87007 77184	1/00
<sup>7</sup> Acct. No.	1 - 1 - 1 - 1 H / 5 - 1 - 1 - 1 - 1	80% Sales of Lots	77184 100	
W.O. F = 1.55		Opening/ Closing Burial	77181 CIT	YAUBITOR
BALANCE DUE		Containers Handling Fee	77182 100 77185	
		Recording &	77183 MA	1 1 199n
Pre-Need Lot At Need On Acct O		Pre-Need Trust Sales Tax	63033 9022	
21/62	ISSUED BY Wait	TOTAL PAID	80101 78390	m
AG-212 (Rev. 10-87)	1/2	TOTALTAIN		IV.

1	COUN Ce 16 I	Sir	n S	tre	net.		Cz	edi	E I	Jo	
			100 100	-	TRUCK	ee in	dicat	ed B	elow		
SEP	OCT					MAR					AUG
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	nt due ate abo		paid on	or be	fore,		> 5	4	1.0	0	
vnou	nt due due da	if paid	more ti	nan.1	9 da	rys			1.0	0	
ner i	oue as	en auto	va.			1					
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	E N	Ars.	Ch	ACE	mount	Receive	o S	+0	n	00	
NAM				- bank				-	1		
	RESS	5	12	6	P	ali	ñ	8	11		



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

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

39323 Nº

	264-3151		1 / 100	0
		Date:		19/0
From: Jingletn-	Address: DOG Fale	Mr., 12	( )	1 7 1
toty 0	· Actor	16/10 Do	ollars (\$ 41. @	)
In Payment of	Edy ToT			2
		7		100
hot 90 + 9/ Grave	4 + / Row Se	ection	Division	12
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 20% Sales Care	67007 4/	00
Abot. No.		80% Sales of Late	77184	-
wo. E - 7556		Opening/ Closing Burial	77181 CTT A	160
BALANCE DUE	The state of the s	Containers	77182	2
DALANCE DOL	Alegan Harris Barrier Barrier	Handling Fee Recording &	100	
Pre-Need Lot At Need On Acct		Misc. Fees Pre-Need Trust	77183	
Pre-need Trust Cash Check	110.4	Sales Tax	60101 78390	-
AC-212 (Rev. 10-07) 341/3	ISSUED BY ALCO	TOTAL PAID	141	00

Send or bring one coupon with each remittance COUPON DO NOT MAIL ENTIRE BOOK ACCOUNT No. D-7556 redit Lat Grace Singleton 5126 Palin Street, San Diego, Ca 92114 Month and Day Due Indicated Below AUG SEP OCT APR MAY JUN JUL NOV DEC JAN FEB MAR Amount due when paid on, or before, due date above. Amount due if paid more than 10 days after due date above. check ( )) if this is new address



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

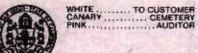
### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

Nº 3

From: Brace Singleto	Address: 5136- Fale	Date:	1-12 1 4 9 ollars (\$ 41.6	19 <u>96</u> 2/10
In Payment of	May Ket	2770) D	ollars (\$	)
Lot 90 - 91 Grave	4 + / Row Se	ection/_	Division Slock	12
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 Pre-Need Trust	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77185 100 77185 100 77185 100 77185 100	1 00
Pre-need Trust Cash Check C	ISSUED BY LOCK	Sales Tax TOTAL PAID	1 4/	00

S.	26 1	di	in s	tro tro	300	14		Parties A	* 01		1
	1	-	-	De De	-	-	-	-	_		Torr
40¥	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ОСТ
4							3	10	3	1	23
ue da	ate abo	ve.		or bet	117	ys	s	4	1.6	10	18
						.5	\$			W-000	
			-	An	naunt l	Receive	ed S	4	1.	00 et	Á

#### OFFICIAL RECEIPT



#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Nº 39573

		Date:/	-6		19 2
From I am Secretary	Address: 51 xc date	11.11	6	92114	
July Six	110	100 0	ollars (\$	46.00	)
InPayment of	der For				
Lot 90 8 91 Grave 5	/	ction_/		Division Block	12
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184 —	46	00
Acct No.		80% Sales of Lots	77184		-
wa €- 7536		Opening/ Closing	77181		-
		Burial Containers	77182		-
BALANCE DUE		Handling Fee	77185 —		-
		Recording & Misc. Fees	77183 -		
Pre-Need Lot At Need On Acct		Pre-Need Trust	83033 9022 —		-
Pre-need Trust Cash Check	1 1 - 1	Sales Yex	60101 78390 —	Anres - Con	
AC-212 (Rev. 10-87) 3575	ISSUED BY LLC	TOTAL PAID	*	46	(1)

DO ACC	NOT I	MAIL No.	ENTIR	E BOO	)K 556	4	•	Ted		2	4
DEC								AUG			NOV
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nous er d	t due l	Coeid i e abov	noreth re.	1821. <u>I</u>	day	<b>S</b>	5	gu-	1.0	0	6
							10	_4	46	0	0
AM	E	Gr	ac	e	Pa	5	IN	ale	7	Dη	
ITY	5	27	Die	9	b if the	STAT	E (	Add	ZIF	92	21/

Par-wal

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 2288

ou are hereby authorized and instructed, sul	Propoles	N
- Vilar	pro y	
1 a Fi	uneral, date, time	
24 252 B10EA 1999	(laxs)	11/
hurch, Chapel, Graveside	Wes. Wi	Mortuary
l Funeral cars must arrive before 3:30 p.m.	of regular work day or an ext	a charge will be applied
nd billed to undersigned. War time veteran		
GraveRow	Section S Div	rision/Blook
( <u> </u>		I STOTIC
rave space & Care Fund		
dditional spaces and care fund		*****
pening/Closing & Setup		
urial Container	11/1	anymi -
andling Fees	7662	
ower vases - Marker setting fee	///	
cording and filing fee	·····/	
ales taxes	1/2.1	
mod turner	1/8/	
8	Continue	
Paid n	eceip Dember	
Absoluteda S		• Carrier and Construction
	Ba	lance due
nereby certify I am the	of the	above named deceden
nd this is your authority to make disposition at I have the right to make this authorization	or remains as above indicate	c. I certify and represer Cemetery harmless from
ny liability on account of said authorization	and interment.	Ma
nereby authorize the interment in lot I	() pp. 1001	
old under deed.	Signature	
W0446 #000 W0444 W07 WW0449	Address	7.55
nature of recorded holder of deed	State	Zio Coc
	dists	zip co
	Talaghane	
	ERSENIESE.	
fork Order # E 7557	Invoice #	

# Short Cult

# MT HOPE CEMETERY INTERMENT ORDER

City of San Diego V

	Date //29/08
You are hereby authorized and instructed, sub	ject to your rule gand regulations, to inter the remains
Dorille House Duget	neral, date, time Wel-HAM-8/3
Church, Chapel, Graveside	Kassdall Mortuary.
	of regular work day or an extra charge will be applied
and billed to undersigned. War time veteran .  Lot 91 Grave 2 Rewy	Section Division/Blook 12
Grave space & Care Fund	Burial 4950
Additional spaces and care fund	3200
Burial Container Asuale Cupt	330 7
Flower vases - Marker setting fee	
Recording and filling fee	3500 359
Solog taxes  410 to 152 1 4 1 09.07 100 Paints  30 007 1 100 Paints  1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Total Due
30 00 THE SAN DIEGO	36602 52/45
I hereby certify I am the and this is your authority to make disposition	of the above named desedent of remains as above indicated. I certify and represent and I agree to hold Mt. Hope Cemetery harmless from
I hereby authorize the interment in lot I hold under deed.	*Olive arkethmat Signature 7 401 Gribble 9+
Signature of recorded helder of deed	1762-6300 2000h
	Telephone
Wast Order # E 7558	Invoice #
Work Order # = 1000	Acot. #

***		E 7/18 -
\$521 45	NOTE San Diego, California	7/29 1988
Cemetery or San Diego	City Treasurer, or order at 3751 M	arket Street, San Diego, Ca 92102
Should this note not Interest after maturi are payable in lawful to renewals, replacem maturity, and waives of limitations. A maagainst his/her separ	be paid when due, it shall thereaft ty will accrue at the rate indicate money of the United States. The m ents and extensions of time for pay presentment, demand and protest and rried person who signs this note ag ate property for any obligation con te, the undersigned promises(s) to	d above. Principal and interest aker will be liable and consents ment hereof before, at or after the right to assert any statute rees that recourse may be had tained herein. If any action be
Safety Code auth	I, Article 2, Para. 7528 of the St orizes the removal of any remains f s past due or unpaid.	
ADDRESS	7	5-31-

MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE

CALIF. DRIVERS LIC. #

E7558

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

		ode dovati initi minita i	TO THE STATE OR ENHAUM	W.				
NAME OF DECEDEN	AKA Cassandra Re	setta King	SEX 1	DATE OF BIRTH	DATE OF DEATH			
100-	Rose Cassa	ndre King	Femala	Aug. 18,	1901 July 28, 1988			
PLACE OF DEATH-	CITY OR TOWN		TY ION STATE IF NOT IN CALIFORNIA)	NAME AND ADDR	RESS OF SPOUSE OR OTHER INFORMANT			
San Di	ego	San Die		Dorothy Balley - Daughter				
NAME AND ADDRES	S OF FUNERAL DIRECTOR (OR PERSON 5050		CALIFORNIA LICENSE NUMBER	2935 - 3	9th St.			
Anderson-Ra	gsdale Mortuery 3075	in Diego, CA	F-1399	San Dieg	San Diego, CA 92105			
.,	TYPE OF PE	ERMIT, CHECK ONLY ONE	OF THE FOLLOWING TYPES OF	DISPOSITION				
1, BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT A	NO BURIAL (INCLUDES		NT AND REINTERMENT OF CREMATED			
2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT	6 DISINTERMENT. C	CREMATION, AND BURKAL		NT OF CREMATED REMAINS AND VIOTHER THAN IN A CEMETERY			
3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY     4. SCIENTIFIC USE		7. DISINTERMENT, C	CREMATION, AND DISPOSITION	FOR CORONER'S USE ONLY				
		OTHER THAN IN	A CEMETERY	10 DISPOSITION PENDING				
INTERMENT	NAME AND ADDRESS OF CEMETERY		TED REMAINS ARE TO BE INTERRE	D	San Diego			
CREMATION	NAME AND ADDRESS OF CREMATORY	WHERE REMAINS ARE TO BE C	REMATED DATE CREMATED	SIGNATURE OF P	ERSON IN CHARGE OF CREMATORY			
BURIAL AT SEA OR DISPOSITION OTHER I IN A CEMETERY EMATED REMAINS	ADDRESS, NEAREST POINT ON SHOW	RELINE OR OTHER RESCRIPTION	N SUFFICIENT TO IDENTIFY FINAL	PLACE AND COUN	TY OF DISPOSITION			
SCIENTIFIC	NAME AND ADDRESS OF FACILITY R	ECEIVING IN AINS						
ACKNOWLEDGMENT OF	This is to certify that I am the remains of the above named de	cedent under provisions of	the Health and Safety Code,	SIGNATURE OF APPLICANT				
APPLICANT	and I hereby acknowledge that this permit gives no right of unr		Marie and the Conference of the Marie and the second	DATE SIGNED				
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE W OF THE CALIFORNIA HEALTH AND SAFETY I AUTHORITY FOR THE DISPOSITION SPECIFIE	CODE AND IS THE AND IS THE	DATE PERMIT ISSUED AUG 3 1988	400	L. Campas M. 9.000			
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	ENTER DATE	URE PERSON IN CHARGE	POSITION	LICENSE NUMBER OF CREMATED REMAINS DISPOSER, IF APPLICABLE			
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR O	OF COUNTY OF DEATH	0					

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED 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 PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151  Thoopings: 740/ Shill	Nº 36463
In Jost Paymenton Done	leimin feet for for	Dollars (\$ 1000 20)  etting - due  Division 12
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.  CITY AUDITOR  AUG 03 1988	CREDIT 67007 20% Sales Care 77184 80% Sales 100 of Lots 77184 Opening/ 100 Closing 77181 Burlal 100 Containers 77182 160 Handling Fae 77185
Pre-Need Lot	ISSUED SV COYUL STORE	Recording & 7100 Misc. Fiee 77183 Pre-Meed 63033 Trust 9022 Salas Tax 60101 78360 TOTAL PAID \$ 100000000000000000000000000000000000

#### OFFICIAL RECEIPT 36642 CITY OF BAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY PINK ..... AUDITOR 264-3151 Payment of Division Section Row NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE CREDIT Invoice No. 20% Sales Care 80% Sales 100 of Lots Acct. No Opening/ CITY AUGIT Closing Burial Containers **BALANCE DUE** 100 andling Fee Recording & 63003 Pre-Need Lot 8022 Pre-need Trust Sales Tax Cash Check 66101 78390 TOTAL PAID AC-212 (Rev. 10-87)

### MT. HOPE CEMETSRY

### INTERMENT ORDER

City of San Diego

Date 8/1/88

	Date 0// 03
You are hereby authorized and instructed, sub	bject to year roles and regulations, to inter the remains
of Charlette	Jowell
ina Varlt Fu	ineral, date, time Fu -//Am 8/5
Church, Chapel, Graveside Church	+ 48 Seenwood Mortuery
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. War time veteran	1/0
sar 3199_	- 10
Lot A Row Row	Section Division/Block
Grave space & Care Fund	le la
Additional spaces and care fund	none
Opening/Closing & Setup	320\$
Burial Container	ult 17500
Handling Fees	170=
Flower vases - Marker setting fee	
Recording and filing fee	1100 .300
Seles taxes	D
10 dogoccours 10 h	Total Due
1	eceipt number
	Balance due 5//,37
Q 0	2-1
	of the above named decedent of remains as above indicated. I certify and represent and lagree to hold Mt. Hope Cametery harmless from and interment.
I hereby authorize the interment in lot I	x ILled Seld.
hold under deed.	SUMMER 2415 WATH I DEN Q.
Signature of recorded holder of deed	Address SAN D. 1000 GRA. 94105
	1 264-2527 De Code
4	Tolephone
100 mars	Invoice # 073025
Wort Order # E 7559	127411
Work Order # 1 0 0 0	Acct. #

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

		JSE BLACK INK-MAKE NO	ALTERATIONS OR ERASUR	ES		
OF DECEDEN	AKA Anabell Posell		Fema la	Oct. 7. 1901	July 30, 1988	
PLACE OF DEATH	- /SHIW 2511	PLACE OF DEATH—COUNTY	IOR STATE IF NOT IN CALIFORNIA	NAME AND ADDRESS OF	SPOUSE OR OTHER INFORMANT	
San D		San Diego			hnson, JrGrands	
NAME AND ADDRES	SS OF FUNERAL DIRECTOR IOR PERSON A	CTING AS SUCHO	CALIFORNIA LICENSE NUMBER	2415 Kathleen		
nderson-Rag	sdale Hortuary San Di	ego, CA	F 1329	San Diego, CA	32105	
1900	TYPE OF PER	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION		
BURIAL (IN	ICLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT)	BURIAL (INCLUDES	B DISINTERMENT AND REMAINS INCLUDES	REINTERMENT OF CREMATED INURNMENT!	
☐ 3 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CRE	MATION, AND BURIAL ENT)	9 DISINTERMENT OF CO	REMATED REMAINS AND THAN IN A CEMETERY	
3 CREMATIO CEMETERY	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT, CRE	MATION, AND DISPOSITION	COD CODON	EDIC LIEE ONLY	
4. SCIENTIFIC	No. and the second	OTHER THAN IN A		FOR CORONER'S USE ONLY  10. DISPOSITION PENDING		
	NAME AND ADDRESS OF CEMETERY V	WHERE REMAINS OR CREMATED	REMAINS ARE TO BE INTERR	ED CO	UNTY	
NTERMENT	Mt. Hope Comptery: 37	51 Market St.: 1	San Diego, CA	į.	San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY V	WHERE REMAINS ARE TO BE CRE	MATED DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY	
4	W/A			<b>&gt;</b>		
OR DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS			Sufficient to identify final	L PLACE AND COUNTY OF DI	SPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	CEIVING REMAINS				
	This is to certify that I am the pe	rson having the right to co	ntrol the disposition of the	SIGNATURE OF APPLICANT		
ACKNOWLEDGMENT OF	remains of the above named dece			<u> </u>		
APPLICANT	and I hereby acknowledge that to this permit gives no right of unres	tricted access to property not	owned by me.	DATE SIGNED		
LOCAL AEGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS THE	AUG 3 198	SIGNATURE OF LOCAL RE	mad M.D.MM	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	NTER DATE	FOF PERSON IN CHANGE OF	DISPOSE DISPOSE	NUMBER OF CREMATED REMAINS R. IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	Pt. of Health Se	rvices: P.S.Box	85222 San Die	go, CA 92138-5222	

Y 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

	FUND DEFT DES	ALLI	JJU UFEK BRJEW FACILI	AMUUNI APPLIEU	BALANCE
073025 08/23/88 027411 2-7559	RUDOLPH A. JOHNSON, J	77181 77182 77183 77185 78390	10/10/88 CK 1294 000072 000072 000072 000072	200 • 00 89 • 97 49 • 20 9 • 84 47 • 80 3 • 19	711.37 511.37 PARTIAL PAYMENT
0730%4 08/22/88 0044GD	CIEMENS CRANITE COMPA	<b>v</b>	10/12/88 CK 14493	125-00	1 25 -00 0 00

1

£3

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date SINERAL You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains Church, Chapel, Graveside All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge will be applied nd billed to undersigned. War time veteran Grave space & Care Fund Additional spaces and care fund Opening/Closing & Setup ... Burial Container ... Handling Fees ... MT. HOPE CEMETERY Flower vases - Marker setting f Recording and filing fee ..... I from Ray 36514 Paid receipt number 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. re of reported helper of deed Zip Code Invoice #

Acct. #

Work Order

PY-583 (REV. 8-86)

E7560

DATE OF DEATH

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

SEX

DATE OF BIRTH

JOHN LYRN SINEGAL			Male	July 8, 1	947 July 28, 1	988
PLACE OF DEATH-	San Diego	PLACE OF DEATH—COUNTY IOR STA		100	less of spouse or other infor	
NAME AND ADDRES	S OF FUNERAL DIRECTOR (OR PERSON AC	그렇게 그렇게 되고 하게 되어 있는데 하고 있다. 이번 그리고 있는데 하게 되었다고 있다.	RNIA LICENSE NUMBER		Franklin Avenue	
Anderson-Ra	gsdele Mort.: 5050 Fe	feral Blvd.; Ca.	1329	San I	lego, California	9210
.,	TYPE OF PERA	AIT, CHECK ONLY ONE OF THE F	OLLOWING TYPES OF	DISPOSITION		
I BURIAL IIN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND BURIAL ENTOMBMENT)	(INCLUDES		NT AND REINTERMENT OF CREMAT	rED
2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	☐ 6. DISINTERMENT, CREMATION	, AND BURIAL		NT OF CREMATED REMAINS AND	
☐ 3 CREMATIO	N AND DISPOSITION OTHER THAN IN A	(INCLUDES INURNMENT)		DISPOSITION	OTHER THAN IN A CEMETERY	_
4. SCIENTIFIC		7 DISINTERMENT, CREMATION OTHER THAN IN A CEMETE	. AND DISPOSITION	FOR CORONER'S USE ONLY  10 DISPOSITION PENDING		
INTERMENT	NAME AND ADDRESS OF CEMETERY W			27772	COUNTY	
- UNIETIMEINT	The state of the s	3751 Merket Street;	AND SHADOW THE SHADOW TO SHADOW THE SHADOW	The Control of the Co	San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY	HERE REMAINS ARE TO BE CREMATED	DATE CREMATED	SIGNATURE OF P	FRSON IN CHARGE OF CREMATORY	
BURIAL AT SEA OR SITION OTHER IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	INE, OR OTHER DESCRIPTION SUFFICI	NT TO IDENTIFY FINAL	PLACE AND COUN	Y OF DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tre	dent under provisions of the Healt spass and nuisance laws apply as	and Safety Code, ad understand that	SIGNATURE OF AND DATE SIGNED	PLICANT	
PER SERVICE	this permit gives no right of unrest	ricted access to property not owne	by me.			0)
LÖCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COC AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE	AUG 2 1988	SIGNATURE OF LE	LE COMOS MADEMIT	m
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	SIGNATURE OF PA	RSON IN CHARGE OF	DISPOSITION	LICENSE NUMBER OF CREMATED P DISPOSER, IF APPLICABLE	REMAINS
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	San Diego County Dep		s: P.O.Box	85222 San	Diego, CA 92138-5	222
Least of the contract of the c	L				Y	10000

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

NAME OF DECEDENT

36514

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

		Date:	8-	51	88 6
From: Goldie F. Sinegal	Address: 12785 Fairbr	ook Rd	5.0.	CA 921	3/
Eight hundred fifty-s			ollars (\$	856.0	0,
In FUI Payment of Inte	ment for John Sinea	al		and the	17.4
2 PROPERTY.	A STATE OF THE STA		(20 F.14		
Lot 20 Grave	1 3 Rows	ection 2	P. Co	Division Block	1/_
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 20% Sales Care	67007 77184 —	50	00
Acet. No.		80% Sales of Lots	100 77184 —	200	00
w.E-7560	CITY AUDITOR	Opening/ Closing	77181 —	320	00
Englisher exercise	STITABLION	Burial Containers	77182 —	100	00
BALANCE DUE	AUG 09 1988	Handling Fee Recording &	77185 —	144	200
Pre-Need Lot D &t Need W On Acct D	A00 03 1300	Misc. Fees Pre-Need	77183 — 63033	.25	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		Trust Seles Tax	9022 — 60101	6	50
AC-212 (Rev. 10-67) 3280	ISSUED BY W.J. LEAGUE	TOTAL PAID	78390 —	256	00
THE RESERVE OF THE PARTY OF THE		30,00	35- 30	-	

### MT. HORE CEMETERY INTERMENT ORDER

City of San Diego

Date 8/1/88

	2 /1/	ngere	CHA!	
ina Lener	Funeral, 4	To the 8	12/88-1	un-JAM
Church, Chapel, Graveside	h+95	-: - 6	Papel	Mortuary
All Funeral cars must arrive befo	ore 3:30 p.m. of regula	ar work day or	an extra charge	will be applied
billed to undersigned. War ti	.7			10,000 dt. 1744 <b>3</b> ,00400
20 0	EUS/ANSIYERS ELICISES	144		17
or 20 Grave 2	RowSec	ction <u>14</u>	Division/Blo	ck/
Grave space & Care Fund	/	10		
Additional spaces and care fund				
Opening/Closing & Setup		TO.	<b></b>	3200
Burial Container	IPA	11	<b>1</b>	10000
landling Fees		1988	1	14500
lower vases - Marker setting fe	AUG o	300000000000000000000000000000000000000		
tecording and filing fee	T. HOPE	CEMETERY		-32°
Sales taxes	GITY of SAN	DIEGO,		650
A from Par		Total Du	e	606.50
4.0	Paid receipt nu	umber3	65/5	606,50
	2	Several Services	Balance due	0
	/ /	10		
$Q_{k}$	/ Ma			
hereby certify I am the	e disposition of remain	ins as above to	of the above na	med deceden
and this is your authority to make hat I have the right to make this a	e disposition of remains authorization and lag	ins as above to pree to hold Mt rment.	of the above ne dicated. I certify Hope Cemetery	med deceden and represen harmless from
and this is your authority to make hat I have the right to make this a	e disposition of remai authorization and I ag uthorization and inte	ins as above h gree to hold Mt rment.	of the above ne dicated. I certify Hope Cemetery	med deceden and represen harmless from
and this is your authority to make hat I have the right to make this a any liability on account of said as hereby authorize the interment	uthórization and inte	ins as above in gree to hold Mt rment.	of the above na ndicated. I certify Hope Cametery	med deceden and represent harmless from
and this is your authority to make hat I have the right to make this a any liability on account of said an hereby authorize the interment hold under deed.	uthorization and inte	ins as above in pree to hold Mt rment.	_ of the above na idicated. I certify Hope Cemetery	med deceden and represen harmless from
hereby certify I am the send this is your authority to make that I have the right to make this a smy liability on account of said at hereby authorize the interment hold under deed.	uthorization and inte	rment. Signatur	of the above na idicated. I certify Hope Cemetery	med deceden and represen harmless from Zp Coe
and this is your authority to make hat I have the right to make this a any liability on account of said as hereby authorize the interment hold under deed.	uthorization and inte	rment. Synasura Address	of the above na dicated. I certify Hope Cemetery	and represen harmless from
and this is your authority to make that I have the right to make this a any liability on account of said as hereby authorize the interment hold under deed.	uthorization and inte	rment. Signesure Address	_ of the above na idicated. I certify Hope Cemetery	and represen harmless from

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	T		SEX	DATE OF BIRTH	DATE OF DEATH
	BEATRICE	FITZGERALD	Fema le	Sept. 9,	1899 July 28, 1988
PLACE OF DEATH	San Diego	PLACE OF DEATH—COUNTY I	90	H. W. Rags	RESS OF SPOUSE OR OTHER INFORMANT
NAME AND ADDRES	ss of funeral director (on person at gadale Mort.: 5050 Fee	TING AS SUCHI San Diego I.Blvd.; San Dieg	CALIFORNIA LICENSE NUMBER 1329	5050 Fede San Diego	ral Blvd. o, CA 92102
	TYPE OF PER	WIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION	4
BURIAL (IN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND ENTOMBMENT)	BURIAL IINCLUDES		NT AND REINTERMENT OF CREMATED
200	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREM			NT OF CREMATED REMAINS AND N OTHER THAN IN A CEMETERY
3 CREMATION CEMETERY 4 SCIENTIFIC		7 DISINTERMENT, CREM OTHER THAN IN A CI		FOR	CORONER'S USE ONLY N PENDING
interment	NAME AND ADDRESS OF CEMETERY W		and the second s		COUNTY San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CREM	MATED DATE CREMATED	SIGNATURE OF P	ERSON IN CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER AN IN A CEMETERY CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	INE, OR OTHER DESCRIPTION S	UFFICIENT TO IDENTIFY FINAL	\$	TY OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	A.,		12 = .
ACKNOWLEDGMENT OF	This is to certify that I am the pe remains of the above named dece	dent under provisions of the	Health and Safety Code,	SIGNATURE OF A	PPLICANT
APPLICANT	and I hereby acknowledge that to this permit gives no right of unrest			DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE	~ NUG 2 1988	Marall	A Compat M. Demm
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	Q9/2/14/7	NTER DATE)	OFFERSON IN CHARGE OF	DISPOSITION	LICENSE NUMBER OF CREMATED REMAIN: DISPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	Dept. of Health Ser				

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

36515

### 

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

12003	204-3131				No.
		Date:	8-5-		19 88
From: Anderson Raysdale	Address: 5050 Federa	Blvd. S.I	D. CA	9210	2
	ars and 59/100	THE RESERVE OF THE PARTY OF THE			
		T / Do	ollars (\$	606.50	<u></u>
In HOII Payment of In H	rment of Beatrice	titzgera	11	ST ST	
		0			
Lot 20 Grave	1	14	SEIDE	Division	7
Lot Grave	Row.	Section		Block	1
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPER	CREDIT 20% Sales Care	67007 77184 —		2 50
Acct. No.		80% Sales of Lots	77184		-
WO E 7561		Opening/ Closing	77181 -	320	00
W.O. 2 /361	CITY AUDITOR	Burial Containers	77182 —	100	00
BALANCE DUE	AUBITOR	Handling Fee	100	145	00
<b>的复数形式的现在分词形式</b>	Allo	Recording &	100	35	00
Pre-Need Lot At Need A On Acct	AUG 09 1988	Pre-Need	77183 — 63033	Contract of	1000
Pre-need Trust  Cash Check		Trust Sales Tax	9022	6	50
	ISSUED BY W.J. Flague	TOTAL PAID	78390 —	10%	CO
AC-212 (Rev. 10-67) 995/	100000	- IOINETAID	The Part of the Contract of th	600	

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 8/2/88

		,
You are hereby authorized and instructed, subject	t to your rules and regulations, to	inter the remains
TO 1/2 DA	data time Thew - 10 A	c/4
Veult/Liner Q1 Q 1	al, date, time	m - 0/ r
Church, Chapel, Graveside Auch Church	-m; Coman	//:25 -
All Funeral cars must arrive before 3:30 p.m. of r		ge will be applied
nd billed to undersigned. Wer time veteran 🗘	<u>/6</u> .	
Lot 59 Grave 8 Row	Section5_ Division/4	2
RIO	-0.5-0.01.00.0	
Grave space & Care Fund Jul. Med.	7/9/85	
Additional spaces and care fund	Sp.	- Da 00
Opening/Glesing & Setup		J20-
Burial Continue . A	nto lands	175 =
Handling Fees	_	1700
Flower vases Marker setting les		
Recording and Hilling See EMETERY		- KJ &
Selee GILY of SAN DIEGO, CALIF.		1131
all them	Total Due	711.37
Paid recal	ipt number 355 V	711.37
	Balance d	lue O
* 07		
I hereby certify I am the	remains as above indicated. I cer	named decedent tify and represent
that I have the right to make this authorization an any liability on account of said authorization and	d I agree to hold Mt. Hope Cemetr	
•	c/ 0400 A	2.0.1
I hereby authorize the interment in lot I hold under deed.	Signatury (2000)	wieg
	Address 1	man
Signature of recorded holder of deed	Swite to Days Co	72104 Zip Code
	282-0833 Telephone	
E#//		
Wort Order # E 7562	Invoice #	-
Work Order # E 1004	Acct. #	Marine Victor

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

LUDA A.	ROWLEY		remale.	Sept. 20	DATE OF DEATH July 27, 1988
San Diego		PLACE OF DEATH—COUNTY TO San Diego	R STATE IF NOT IN CALIFORNIA)	Stella	RESS OF SPOUSE OR OTHER INFORMANT Jeanette Rowley-Dau
	STOREWAY - Lemon Gro		ALIFORNIA LICENSF NUMBER  P 941		lson Avenue go, CA 92104-1523
	TYPE OF PERA	KIT, CHECK ONLY ONE OF TH	HE FOLLOWING TYPES OF	DISPOSITION	
, 🍱 1 BURIAL (IN	CLUDES ENTOMBMENT)	S DISINTERMENT AND B	URIAL IINCLUDES		NT AND REINTERMENT OF CREMATED
is and the second second	N AND BURIAL UNCLUDES INURNMENT)	6 DISINTERMENT, CREMA (INCLUDES INURNMENT)	ATION, AND BURIAL	9 DISINTERME DISPOSITION	NT OF CREMATED REMAINS AND N OTHER THAN IN A CEMETERY
3. CREMATION CEMETERY  4. SCIENTIFIC		7 DISINTERMENT, CREMA OTHER THAN IN A CER		FOR DISPOSITIO	CORONER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OF CREMATED R	EMAINS ARE TO BE INTERRE	D	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W		DATE CREMATED	SIGNATURE OF P	ERSON IN CHARGE OF CREMATORY
BURIAL AT SEA OR ISPOSITION OTHER AN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	twant -	FFICIENT TO IDENTIFY FINAL	PLACE AND COUN	TY OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS		# # # # # # # # # # # # # # # # # # #	
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that the this permit gives no right of unrest	dent under provisions of the h esposs and nuisance laws app	lealth and Safety Code, ly and understand that	SIGNATURE OF A	PPLICANT
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED	SEAND IS THE	225(V) (43)	SIGNATURE OF	A. Campas, M. D.M.
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED		DEPERSON IN CHARGE OF		LICENSE NUMBER OF CREMATED REMAINS DISPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUP IN	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	9	200	

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

OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CHAPTERY PINK AUDITOR  From: Itella Payment of Payment o	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151  Ley Address: 4382 Will Ele San and 3%00  Levent of Luda 9. R	Date:	Nº 36502 8/5 . 1988 D. 92 100 Dinars (\$ 7//27)
Invoice No.  Acct. No.  W.O. F 7562  BALANCE DUE  Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.  CITY AUDITOR AUG 0 9 1988	CREDIT 20% Sales Core 30% Sales Core 30% Sales Core 30% Sales 30 Lots Opening/ Closing Burist Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	Division Block  67007 777184 100 77185 100 77185 100 77185 100 77185 100 77185 100 77185 100 77185 100 77185 100 77187 100 77183 83033 9022 80101 78390

京海市 なまれ にとばる 東西

### MT. HOPE CEMETERY INTERMENT ÓRDER

City of San Diego

R Date 8/2/88

of James	yones_	n I pn	M Shu
in a Fur	eral, date, time	her-HAM	- 8/4
Church, Chapel, Graveside Church	Sta Ra	gedale	Mortuary.
Il Funeral cars must arrive before 3:30 p.m. o	f regular work day o	r an extra charge wi	ill be applied
nd billed to undersigned. War time veteran	wwz-ain	y	
ot 10 Grave 4 Row -	_Section_2	Division/Block	12
0;	0.000		
arave space & Care Fund Tru(	neig Ga		
Additional spaces and care fund			2000
pening/Closing & Setup			3200
Surial Company			100
landling Fees	******		145-
lower vases A Marker setting (lep			
secording and filing fee			35°
MT. HOPE CEMETERY CITY of SAN DIEGO, CALIF.	*******		650
	Total D		606 50
Paid rec	ceipt number <u>Sé</u>	5443	60650
Via phone-	hille	Balance due .	#
hereby certify I am the Luge		of the above nam	ed decedent
and this is your authority to make disposition of hat I have the right to make this authorization of any liability on account of said authorization a	and lagree to hold M	indicated. I certify a	nd represent
0.01 (10.00 Anno 1.7	vm'	10: 1 1.	
hereby authorize the interment in lot I	Signature O	15-260	nul D
D DECEMBER (A 2 ) 100 (200 A 4 ) 200 (200 A 200	X GO S	Sough	( n 2011
ignature of recorded holder of deed	Syna 3/=	, Leans	Zip Code
	1000	-6301	
	Telephone		
West Order # <b>E</b> 7563	Invoice #		

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	James Jones		SEX Male	Oct. 8, 191	DATE OF DEATH
PLACE OF DEATH	n Diego	PLACE OF DEATH—COUNTY Sen Diego	IOR STATE IF NOT IN CALIFORNIA	Millie C.	of spouse or other informant
Anderson-R	SS OF FUNERAL DIRECTOR (OR PERSON Lagsdale Hortwary: San	Pideral Blvd. Blego, CA 92102	CALIFORNIA LICENSE NUMBER	San Diego,	7 ( C.) [ C.] [ C.) [ C.) [ C.] [ C.] [ C.) [ C.] [ C.
	TYPE OF PER	MIT, CHECK <u>ONLY ONE</u> OF	THE FOLLOWING TYPES C	DE DISPOSITION	
B. L BURIAL (IN	ICLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT)	BURIAL UNCLUDES		AND REINTERMENT OF CREMATED DES INURNMENT!
2 CREMATION	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREI			OF CREMATED REMAINS AND HER THAN IN A CEMETERY
3 CREMATION CEMETERY 4. SCIENTIFIC		7 DISINTERMENT, CREI		FOR COF	RONER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W	3751 Market	Street San	Diego, CA	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY	HEREREMAINS ARE TO BE CREE	DATE CREMATED	SIGNATURE OF PERSO	ON IN CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER IN A CEMETERY DEMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	INE OF OTHER DESCRIPTION S	Wet	PLACE AND COUNTY O	of DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS		1/21	leian
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pe remains of the above named dece and I hereby acknowledge that to this permit gives no right of unres	dent under provisions of the espass and nuisance laws a	Health and Safety Code, oply and understand that	SIGNATURE OF APPLIC	CANT
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE	AUG 2 198	_	REGISTRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	101416411	SIGNATUR	OF PERSON IN CHARGE OF	DISPOSITION LICE	ENSE NUMBER OF CREMATED REMAINS POSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	San Diego County Dep		vices: P.O.Box	85222 San Di	ego, CA 92138-5222

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

OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR  From: Willie Cones	CITY OF SAN DIREC, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151	Nº 36493  Dete: 8/8/8/19  Molars (\$60650)
tot / O Grave	4 ROW SE  NOTVALIDATOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	ction 2 Division /2  CREDIT 87007 20th Sales Care 77184
Acct. No	CITY AUDITOR AUG 09 1988	80% Sales 100 of Lots 77184
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check  AC-212 (Rev. 10-87)	Soyu Hall	Misc. Feels 77183 Pra-Need 63033 Trust 9022 Trust 80101 Foral Paid 6063 TOTAL PAID 60650

### MT. HOVE CEMPTERY INTERMENT ORDER

City of San Diego

Date 8/2/88

	Date _	7 7
You are hereby authorized and instructed, subj	CONTRACTOR OF THE CONTRACTOR O	itions, to inter the remains
of parise	Inn Vin	non
in a Could Fur	eral, date, time	- 8/5-
Church, Chapel, Graveside	de Rage	Mortuary.
All Funeral cars must arrive before 3:30 p.m. o	f regular work day or an ex	tra charge will be applied
and billed to undersigned. War time veteran	No.	
Lot 90 Grave 3 Row -	SectionD	ivision/etests//
Grave space & Care Fund Pu heel-	E7/75 gois	36469 (390
Additional spaces and care fund	********	
	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	320%
Burial Container T. S. Vau	<b>建</b>	17500
Handling Fees Labou		<u>/70 °°</u>
Flower vases - Marker setting fee		<u> </u>
Recording and filling fee	******************	35°=
Sales taxes		1130
200	Total Due	711.37
Paid rec	seipt number	
Name of	SECTION NEWSCOTT CONTROL OF THE PROPERTY OF TH	alance due
I hereby certify I am the 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 a	of remains as above indicated and lagree to hold Mt. Hope and interment.	ne above named decedent ied. I cartify and represent a Cemetery harmless from
I hereby authorize the interment in lot I hold under deed.	X Terafaul Signature	P. Herrett
Signature of recented habiter of deed	Address	
	Greek	Zip Code
	Telephone	1011
ST. L.	Invoice # 075	3024
Work Order # <b>E</b> 7564	Acct. # 020 9	10'
PY-583 (REV. 8-86)	027	1110

100	T
Dit.	 400

	W.O. # E-7564
	al low
27	<u>8/2/88</u> 19 <u> </u>

San Diego, California

CALIF. DRIVERS LIC.

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sam of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sam of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sam of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sam of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sam of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sam of San Diego, Ca 92

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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

PRINT NAME	SIGNATURE Walsel S. Barrett
ADDRESS	

MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

OF DECEDEN	d		SEX	DATE OF BIRTH	DATE OF DEATH		
OF DECEDER	CHARLS IE ANN	E & MOW	Female	July 15, 18	THE PROPERTY OF THE PROPERTY OF		
PLACE OF DEATH		PLACE OF DEATH COUNTY	1.000		OF SPOUSE OR OTHER INFORMANT		
Commonwealth Common Com	Diego	San Di			errett - Daughter		
NAME AND ADDRES	SS OF FUNERAL DIRECTOR. (OR PERSON A	CTING AS MICHI	CALIFORNIA LICENSE NUMBER	2466 56th S			
Anderson-Re	agsdale Mort.: 5050 P	Mara   Bl .: Ca.	1329		California 92105		
			1,7-7	Jun Diago,	SETTIONALE SELOS		
	TYPE OF PER	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION			
· ·		C a property and	SUBSTITUTE OF S	П в окумпериом м	D REINTERMENT OF CREMATED		
1. BUHIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND ( ENTOMBMENT)	BURIAL UNCLUDES	REMAINS (INCLUD	ES INURNMENT)		
□+2 CREMATIO	IN AND BURIAL IINCLUDES INURNMENT)	6 DISINTERMENT, CHEN	IATION AND BURIAL	☐ 9 DISINTERMENT OF	CREMATED REMAINS AND		
		IINCLUDES INURNME			ER THAN IN A CEMETERY		
3 CREMATIO CEMETERY	IN AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT CREM	IATION, AND DISPOSITION	FOR CORC	ONER'S USE ONLY		
4 SCIENTIFIC	USE	OTHER THAN IN A CE		☐ 10 DISPOSITION PEN			
52 339-298001156				DESCRIPTION OF THE PROPERTY.	e per constitution		
INTERMENT	NAME AND ADDRESS OF CEMETERY V				COUNTY		
	Mt. Hope Cametery:	A.A.S.		Company and the Company of the Compa	San Diego		
CREMATION	NAME AND ADDRESS OF CREMATORY V	Weta Sea	DATE CREMATED	SIGNATURE OF PERSON	I IN CHARGE OF CREMATORY		
OR DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	LINE, OR OTHER DESCRIPTION SI	JEFICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF	DISPOSITION		
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	CEIVING REMAINS					
	This is to certify that I am the pe	rson having the right to cont	ral the disposition of the	SIGNATURE OF APPLICA	,NT		
ACKNOWLEDGMENT							
OF APPLICANT	and I hereby acknowledge that to this permit gives no right of unres			DATE SIGNED			
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS THE	AUG 5 198		AGUSTHAR ISSUING PERMIT		
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED SISPOSITION WAS MADE ON	SIGNATURE	OF PERSON IN CHARGE OF		SE NUMBER OF CREMATED REMAINS DSER, IF APPLICABLE		
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	e com	Ital Records . O. Box 85222 an Diego, Calif	ornia 92138-	5222		

OPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

NO TMA	DATE	NO	CUS TOMER	NAME DEPT	DRG	ACCT	1/0	DATE OPER	E	AYM EF ND FACILI	AMO	UNT PAID	AMOUNT	BILLED	UNPAID
073024	08/23/88 - 756	11	WALSIEL 100 100 100 100	0 72 0 72 0 72 0 72 0 72 0 72	ETT	77181 77182 77183 77185 78390	9000 9000 9000	72		81		711.37 320.00 175.00 35.00 170.00	15.	711.37	PAID IN FULL

OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR  FINE DIA LUEL POME	9 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151	Date:	Nº 9/2	36702
In full Payment of But	very and 37/00 charles	der Stand	Divis	(137) Dec.
Invoice No. 073024  Acct. No. 027410  W.O. E 7564  BALANCE DUE	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.  CITY AUDITOR  CITY TRASUDED  SEP 30 1988	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77185 100 77185	
Pre-Need Lot At Need On Acct Fre-need Trust Cash Check AC-212 (Rev. 10-87)	ISSUED BY LOUNDER	Trust Sales Tex TOTAL PAID	9022 60101 78390 1	11 37

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

8-2-88 You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains . Funeral, date, time Church, Chapel, Graveside . 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. War time veteran Section Grave space & Care Fund Prenead C-6217 Additional spaces and care fund Opening/Closing & Setup ..... Flower vases - Marker setting fee ....... Recording and filing fee ...... Balanca 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 Cemetary harmless from any liability on account of said authorization and interment. I hereby authorize the interment in lot I hold under deed. Acct. # PY-503 (REV. 8-86)



#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

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NAME OF DECEDEN	т		SEX	DATE OF BIRTH	DATE OF DEATH		
Theodor	e Grant Beach		Male	07-13-19			
San Die	STATE OF THE STATE	PLACE OF DEATH—COUNTY IS San Diego	OR STATE IF NOT IN CALIFORNIA)	PRENEED	SS OF SPOUSE OR OTHER INFORMANT TELOPHASE		
	is 900 Per Mactor for Person at no del Rio S.#105		F-1272	4221 Cen San Dieg	tral Avenue o, CA 92105		
1999 Cami		Ar.	DECEMBER OF STREET	J			
(10 A)	TYPE OF PER	MIT, CHECK ONLY ONE OF 1	HE FOLLOWING TYPES O	F DISPOSITION	*		
U & BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND I	BURIAL IINCLUDES		AND REINTERMENT OF CREMATED		
Transcore and adversers	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREM		9. DISINTERMENT	F OF CREMATED REMAINS AND OTHER THAN IN A CEMETERY		
CEMETERY	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT, CREM	ATION, AND DISPOSITION	FOR CO	DRONER'S USE ONLY		
4 SCIENTIFIC	USE	OTHER THAN IN A CE		☐ 10. DISPOSITION PENDING			
INTERMENT	Mt. Hope Cemetery w				San Diego		
CREMATION	CREMARO CREMATURY	WHERE REMAINS ARE TO BE CREM	ATED DATE CREMATED	SIGNATURE OF PER	SOUTH CHARGE OF CREMATORY		
OR SITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL		IFFICIENT TO IDENTIFY FINAL	PLAGE AND COUNTY	OF DISPOSITION		
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	CEIVING REMAINS		×	-11		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pe remains of the above named dece and I hereby acknowledge that to this permit gives no right of unres	edent under provisions of the espass and nuisance laws ap	Health and Safety Code, ply and understand that	SIGNATURE OF APPROMEED Telophase by Date Signed  October 4, 1988			
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE VIST OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS THE			L. Carrol, M.D.		
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON 15	17/8 SIGNATURE	OF PERSON IN CHARGE OF	DISPOSITION	ICENSE NUMBER OF CREMATED REMAINS ISPOSER, IF APPLICABLE		
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF		0	₩ (K			
COPY 1 OF THE	PERMIT ACCOMPANIES THE REMAIN	NS TO THE STATED PLACE OF	DISPOSITION THE PERS	ON IN CHARGE OF D	ISPOSITION IS RESPONSIBLE FOR		

COPY 1 OF THE PERMIT ACCOMPANIES THE REMAINS TO THE STATED PLACE OF DISPOSITION. THE PERSON IN CHARGE OF DISPOSITION IS RESPONSIBLE FOR IMPLETING THE PERMIT AND FORWARDING THE COMPLETED 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 BURIED AT SEA. THE LOCAL REGISTRAR MAY DESTROY ANY ORIGINAL OR DUPLICATE PERMIT AFTER ONE YEAR.

#### OFFICIAL RECEIPT

CITY OF SAN DIEGO, CALIFORNIA

Nº 36823

WHITE TO CUSTOMER CAMARY CEMETERY PINK AUDITOR	PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151	10-17	1 80
From Mary Beac	Address: 422/ Carla	2 Oue	50
In Payment of	Wedne Dianto	Such	nend
Lot 3234 Grave	Row Section	Divis	
Invoice No.	NOTVALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 20% Sales Care	67007 77184	
Acct. No.	U/ / No. 80% Saint	77184 100	0500
w.o. 8- 7565	OCT 14 1988 Gricolar Constainers	77181	40 00
BALANCE DUE	Handling Fee	77585 100	90 80
Pre-Need Lot At Need On Acct	William France Pro-Named	77183 63033 9022	
Pre-need Trust Cash Check	Ax Ala. (MX) Salas TEX	78390 /7	2 60
AC-212 (Nev. 10-87) & 165	ISSUED BY TOTAL PAID	- 0	10 60

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

creditsale

Date 8/2/88

of appetern "Tu	in "Davis	
in aF	uneral, date, time	
Church, Chapel, Graveside		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. War time veteran		
La2737Grave Row	Section	Division/Black 10
Grave space & Care Fund . Care	Le and R	5950
Additional spaces and care fund	jouble Cly	W:
Opening/Closing & Setup		·····
Burial Container		<b>,.</b>
Handling Fees	month	
Flower vases - Marker setting fee	el tras	ــــــــــــــــــــــــــــــــــــــ
Recording and filing fee		<del>-</del>
Sales taxes		646
	Total Due	<u>1950</u>
Paid r	receipt number	
	20	Balance due
I hereby certify I am the	el.	of the above named decedent
and this is your authority to make dispessition that I have the right to make this authorization	n of remains as above in n and agree to hold Mt.	dicated. I certify and represent Hope Cemetery harmless from
any liability on account of said authorization	and interment.	- 1 10
I hereby authorize the interment in lot I hold under deed.	Cippeles	a line town
Signature of recorded holder of deed	Address	8
C100 (14) (14) (24) (25) (17) (17) (25) (17) (25) (17) (25) (17) (25) (17) (25) (17) (25) (17) (25) (17) (25)	State	Zip Code
	Telephone	
THE STATE OF THE S	Invoice #	
Work Order # E 7566	Acct. #	

	WHITE TO CUSTOMER CANARY CEMETERY	PROPERTY DEPARTMENT
684	PINKAUDITOR	MOUNT HOPE CEMETERY
	#	264-3151

*	204-3151	10	-10	88
From: appituan Haus	S Address: 6261 Par RSIO	Le ave. Jo	nDug	V.Ca 93130
In part Payment of CH	chut 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	edit Sa	llars (\$ -	0.00
Lot 2737 Grave_	Row Se	ection	Dh.	vision / Ø
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	CREDIT 20% Sales Care 80% Sales	57007 77184	3000
Acct. No	CITY AUDITOR	of Lots Opening/ Closing Buriel Containers	77184	00
BALANCE DUE	OCT 14 1988	Handling Fee Recording & Misc. Fees	77185	
Pre-need Lot Q Al Need On Acct Pre-need Trust Cash Check	ISSUED BY LOCA Black	Pre-Need Trust Sales Tax TOTAL PAID	63033 90222 90101 78380	260
AC-212 (Nov. 10-67) 1 669	100000177	COLUMN TOTAL	The same	200

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AC-212 (Rev. 10-57)

## CITY OF SAN DIEGO, CALIFORNIA

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY	
From Eppetern De	luis Address: 45/3 University	Te ave SB
InPayment of	upon 2 Wedit dot	ponárs (\$ 23,00_)
Lot 2737 Grave_	Row	Division / O
Acct. No.  W.O. Z - 7546  BALANCE DUE 544 00  Rre-Need Lot X At Need 0 On Acct 0	NOT VALID FOR PURPOSE STATED UNMESS STAMPED  TPAID' IN THIS SPACE  1 3 7 20% Sales Care 20% Sale	67007 77184 1600 77184 100 77181 100 77182 100 77185 100 77185 100 77185 100 77185 80033 8022
Pre-need Trust Cash Check		00101 78390

#### Send or bring one coupon with each remittance COUPON

DO NOT MAIL ENTIRE BOOK

ACCOUNT No. E-7566

Credit Lot

Appitean Davis 6261 Parkside Avenue San Diego, Ca 92139

Month and Day Due Indicated Below

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

due date above

Amount due when paid on, or before.

after due date above.

25,00

26.00

Amount due if paid more than 15 days

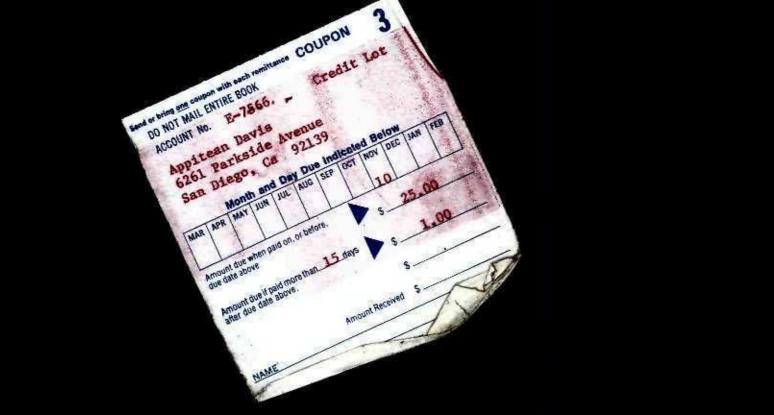
#### OFFICIAL RECEIPT

WHITE TO CUSTOMER CAMARY CEMETERY PINK AUDITOR

# PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

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	264-3151		Maria L		1 4
From Lexitean Dans	6 Address: 6261 Fail	Date: -	10	93/39	192
Describer Fin	Arelge.	The De	ollars (\$ _	25.W	
Cot 2737 Grave	Row	Section	102	Division	0
Acct. No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPE "PAID" IN THIS SPACE.	D CREDIT 20% Sales Care 80% Sales of Lots	67007 77184 — 100 77184 —	25	w
NO. E-75/de		Opening/ Closing Burial Containers	77181 — 100 77182 —	CITY AU	troi
Pre-Need Lot At Need On Acct		Handling Fee Recording & Misc. Fees Pre-Need Trust	77185 — 100 77183 — 63033 9022 —	FEB 12	1990
Pre-need Trust Cash Check	ISSUED BY Allellat	Sales Tax TOTAL PAID	60101 78390 —	25	w



#### OFFICIAL RECEIPT



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 41358

From: Tina Williams  Lifty Dallors  In Payment of For	Address: 6261 Park Side	Date:	), (s)	7 72139 50.0	91 0 )
Lot <u>2737</u> Grave	RowSe	ction		Division / O	
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 77182 — 100 77188 — 17183 —	50	03
Pre-Need Lot At Need On Acct On Pre-need Trust Cash Check A	ISSUED BY D. Carte	Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 — 60101 78390 —	50	00

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MOUNT HOPE CEMETERY

From appitean Dave	527-3400	Date:	15	7	1990
InPayment of	he-Dece for	w _ n	ollars (\$	25 W	
Lot 2737 Grave	RowSe	ection		Division Block	10
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 Lota 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 77183 — 63033 9022 — 80101 78390 —	25	w
AC-212 (Rev. 1-91) 1927	ISSUED BY Waits	TOTAL PAID	78390 —	25	W

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#### OFFICIAL RECEIPT



WHITE..... TO CUSTOMER CANARY..... CEMETERY

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 42084

From Dina Welian 194	ST-3400  STEAT COLI Parkers  COLI Parkers	Date:	1/3	92/35	1992
In Payment of L	Le Des for	دن <u> </u>	ollars (\$	30.4	,
Lot 2737 Grave	Row Se	ction		Division	10
Invoice No.  Acct. No.  W.O. E- 7566  BALANCE DUE  Pre-Need Lot D At Need On Acct	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Cars 80% Sales of Lots Opening/ Cicsing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need	67007 77184 — 100 77184 — 100 77181 — 160 77182 — 100 77185 — 100 77183 — 83033 — 82022 —	30	00
Pre-need Trust Cash Check AC-212 (Rev. 1-91)	ISSUED BY Juliet	Seine Tex TOTAL PAID	9022 — 60101 78390 —	30	W

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#### OFFICIAL RECEIPT



CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

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InPayment of	Pre- Need Bot for	appites	) favi
Lot 2737 Grave	RowSe	action	Division /U
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 100 Closing 77181	25 0
BALANCE DUE		Rurial 100 Containere 77162 Handling Fee 77165 Recording & 77163	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check  AC-212 (Rev. 1-91)	The state of the s	Pro-Head 63033 Trust 5022 Sales Tax 60101 76360 TOTAL PAID \$	

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WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

TINA WILLIAMS	9709 Vougho Dr. Little	Cooken !	12-	3	991
Port Payment of	re-need Lot for Appile	0.0	ollars (\$ _	20.0	<u>o</u> ,
ot 2737 Grave _	Row Se	ection		Division	10
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		CREDIT 20% Seine Care 60% Sales of Lote Opening/ Closing Burlel Containers Hendling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77184 — 1000 77181 — 1000 77181 — 1000 77182 — 1000 77183 — 1000 77183 — 1000 77183 — 1000 77183 — 1000 77183 — 1000 77183 — 1000 77183 — 1000 77183 — 1000 77183 —	20	00
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NAME	Davis, Appitoan 9709 Vaughn Dr., Little Rock,		2205	ACCT. NO.	E-7566
ADDRESS	6261 Parkside Avenue, San Diego, Ga - 92139 RAT	ING		LIMIT	
DATE	ITEMS	DEBIT	V	CREDIT	BALANCE
8_2 88	Lot 2737, Division 10	595 0	0		
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AIGNER FORM N	Davis, Appitean 2737 -	10			PRINTED IN USA
AIGNER FORM N	J. 20-204				Carrier Park

E 7566

#### CITY OF SAN DIEGO

#### Mt. Hope Cemetery

#### Notice of Cancellation and Forfeiture

To: Appitean Davis

Address 9709 Vaughn Drive, Little Rock, Arkansas, 72205

You and each of you are hereby notified that because of default in payment on the Agreement for the purchase of Lot 2737. Division 10 in Mt. Hope Cemetery.

Entered into on that August 2, 1988 by and between Mt. Hope Cemetery and Appitean Davis that at the end of 30 days from date below, all rights you may have thereunder will be and are by this notice canceled and forfeited.

Dated this 27 day of July, 1996

CITY OF SAN DIEGO MT. HOPE CEMETERY

BY: Kaupe Dak

## MT. HOPE CEMETERY INTERMENT ORDER

City	of San Diego
CreditSale	Date 8/2/88
You are hereby authorized and instructed, sub	pject voyr rules and regulations, to inter the remains
of applean in	in Davis
in a Fu	uneral, date, time
Church, Chapel, Graveside	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. War time veteran	
La2737Grave Row	Section Division/8 10
Grave space & Care Fund . Care	e and for 595°
Additional spaces and care fund	oner calls.
Opening/Closing & Setup	
Burial Container	
Handling Fees	ne on the
Flower vases - Marker setting fee	10 traw
Recording and filing fee	
Sales taxes	
	Total Due
Paid re	eceipt number
	Balance due
3	01
I hereby certify I am the	of the above named deceden
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 in and lagree to hold Mt. Hope Cemetery harmless from
any nationary on account of said admonization	70.7
I hereby authorize the interment in lot I hold under deed.	Captition has the
4	Address
Signature of recorded heater of deed	State Dip Cod
	Telephone
	W 40 W
Work Order # E 7566	Invoice #
Work Order # III 1 0 0 0	Acct. #

E-7566

#### AGREEMENT FOR BEFORE-NEED CREDIT LOT SALE

This Agreeme	nt entered	into thi	s 2 da	y of <u>lug</u> herein known	ust	, 1988
between a	pitean	"Time"	Davis,	herein known	as "Purcha	ser," and
the City of	Šan Diego,	Mt. Hope	Cemetery	, herein know	m as "Sell	er."

That Purchaser agrees to purchase and that Seller agrees to sell the exclusive right of interment in: Lot 2737, Grave - , Row - , Section - , Block/Division 10 , located in Mt. Hope Cemetery, for and in consideration of a total purchase price of \$ 595 . , payable as follows: cash herewith, the receipt of which is hereby acknowledged; on the 10th day of , 19**%%**; and the balance in installments of \$ 25001 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 INTER-MENT 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 ONLY THE INTERMENT RIGHT IN 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 the Cemetery's Perpetuity Fund. This Perpetuity Fund provides income for the care and maintenance of all portions of the Cemetery.

236250

WITNESS our hands this day and year above written.

Deed to be issued to:

92139

after 8/1/88

**PURCHASER** 

City

State

Zip Code

CITY OF SAN DIEGO Mt. Hope Cemetery

	PE CEMETERY
( I INTERM	ENT ORDER . /
City o	of Sen Diego
The	X/2/XX
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of adolfot dista	iect to your rifes and regulations, to inter the remains  Lingas + Enrugia  neral, date, time - Flores Sile
Church, Chapel, Graveside	
VIII. AND THE CONTROL OF THE CONTROL	Mortuary.
The state of the s	of regular work day or an extra charge will be applied
and billed to undersigned. War time veteran -	
2702- Grave Row Bours	Section Division/Block/O
Additional spaces and care fund Serge	+ Double OK -
Opening/Closing & Setup	
Buriel Container LN	of anon
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Flower vases - Marker setting fee	
Recording and filing fee	
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7 (toyman)	Total Due
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and Butter	Salance due
and to weather	Delands and
I hereby certify I am the	of the above named decadent
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 remains as above indicated. I certify and represent and I agree to hold Mt. Hope Cemetery harmless from and interment.
	* O. I Gillian .
I hereby authorize the interment in lot I hold under deed.	500 1020 50.315+
Signature of recorded holder of deed	SAN DIEGO
Organization of the Control of the C	Signer Call 3 2 in Code
	Talaphore Talaphore
200	
	Invoice #
Work Order # E 7567	Acct. #
PY-562 (REY, 8-85)	

#### AGREEMENT FOR BEFORE-NEED CREDIT LOT SALE

-7567

This Agreement entered into this 2 day of Un , herein known as "Purchaser," and the City of San Diego, Mt. Nope Cemetery, herein known as "Seller." That Purchaser agrees to purchase and that Seller agrees to sell the exclusive right of interment in: Lot 3702, Grave \_\_\_\_, Row \_\_\_\_\_, Section \_\_\_\_\_\_, Block/Division 10 , located in Mt. Hope Cemetery, for and in consideration of a total purchase price of \$ 1190 00, payable as follows: cash herewith, the receipt of which is hereby acknowledged; , 1988; and the on the 10 day of balance in installments of \$ 5000 or more, payable at the office of Mt. Hope Cemetery, on the /old 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 INTER-MENT 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 ONLY THE INTERMENT RIGHT IN ABOVE-DESCRIBED PROPERTY. COST OF BURIAL SERVICES - OPENINGS AND CLOSINGS OF THE GRAVE, CEMENT BURIAL

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

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.

WITNESS our hands this day and year above written.

Deed to be issued to:	adol	for a aid	la Willes
2702 3702	1020 5	Name Lo. 3/st Ll Address	_
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3703	PURCHASER	que Flore Same aldu	له س-
	(	mer Buth	en)
	X 12.7	h phillips	<u> </u>
	City	eet Address (Mail) State	Zip Code
	<b>12</b> 55		

CITY OF SAN DIEGO Mt. Hope Cemetery

Toyen Stills

OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK CHOUSTON	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY		Nº	36640
From leda Villeras	264-3151 Address: 1020 S, a	Date:	9-7 Stru	A. 1988
In Payment of	low 41 9	The Do	llara (\$ 50	ing,
.Lot 3702 2003 Grave_	Row Sel	CREDIT 20% Sales Care	Divis Bloc 67007 77184	
W.O. E - 1567	OTY AUDITOR	80% Sales	100 77184	50 00
Pre-Need Lot At Need On Acct	(1920)	Handling Fee Recording & Mile. Fees Pre-Need Trus	100 77185	
AC-212 (Nev. 10-67)	ISSUED BY AFRICA ( VOL)	TOTAL PAID	78390	500

S 100 5

nd or bring one coupon with each remittance DO NOT MAIL ENTIRE BOOK	COUPO	<b>1</b>
ACCOUNT No. E-7567	Credit	Lot
Enriques Flores		
1020 S. 31st Stree	t	
San Diego, Ca 921		

		Mon	th ar	nd Da	ay Di	e in	dical	led B	elow		
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Amount due if paid more than 10 days after due date above.

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

\$ 26.00

Amount Received \$

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### Send or bring one coupon with each remittance COUPON

DO NOT MAIL ENTIRE BOOK

ACCOUNT No. E-7567 Credit Lot

Aida Villegas 1020 S. 31st Street San Diego, Ca 92113

Month and Day Due Indicated Below

JAN	FEB	MAR	APR	MAY	NUL	JUL	AUG	SEP	OCT	NOV	DEC
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Amount due when paid on, or before. due date above

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Amount Received

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STATE check ( √ ) if this is new address

#### OFFICIAL RECEIPT 36761 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY PINK ...... AUDITOR 264-3151 From: Dollara (\$ Division Section MOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. OREDIT 67007 Invoice No 20% Sales Care 80% Sales Acet. No of Lats 77164 Opening/ 77181 CITY AUDITOR Closing Buriet 100 Containers 77182 BALANCE DUE 7 1988 Handling Fee 77185 OCT Recording & Pre-Need 63033 9022 On Acct PreeNeed Lot Trust Pre-need Trust Cash Sales Tax 60101 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)

2

ACCOUNT No. E-7567

Credit Lot

Enriques Flores 1020 S. 31st Street San Diego, Ca 92113

Month and Day Due Indicated Below

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

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Amount Received

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Check ( v' ) if this is new address

#### OFFICIAL RECEIPT 36760 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR MOUNT HOPE CEMETERY 284-3151 Date: From Dollars (\$ Division Section Row NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE CHECKT 67007 77184 Invoice No. 20% Sales Care **BOAL Sales** of Lots Acct. No. CITY AUDITOR Opening/ Closing 77181 Burial Containers BALANCE DUE Handling Fee 77185 Recording & Pre-Need 53033 9022 Pre-Need Log Trust Pre-need Trust - Cash 60101 78380 Sales Tax TOTAL PAID AC-212 (Rev. 10-87)

Send or bring one coupon with each remittance COUPON

DO NOT MAIL ENTIRE BOOK ACCOUNT No. E-7567

Credit Lot

Aida Villegas 1020 S. 31st Street San Diego. Ca 92113

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Amount Received

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WHITE ..... TO CUSTOMER

CITY OF SAN DIESD, CALIFORNIA PROPERTY DEPARTMENT

PINK AUDITOR	MOUNT HOPE CEMETERY	对"自己"是一个是一个
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From: GINEGICES O	HU Madress 1020 5 212	Thus
. Wolally fee	e, 16/100 Dolla	19 (\$ 65.00)
In Payment of	upon 3 Water do	7
Lot 3703 Grave	RowSection	Division /O
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STATED CREDIT OF 20% Sales Care 77	7007
Acct. No.	(V/V) Opening/	100
w.o. 2-756	8 190 Closing 77	100
BALANCE DUE SAO, OL)		100 7185
Pre-Need Lot CX At Need - On Acct	Pro-Need to	7183
Pre-need Trust   Cash   Check	Sally hory bales Tax 00	20101
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1020 S. 31st Street San Diego, Ca 92113

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#### OFFICIAL RECEIPT Nº 36896 CITY OF BAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR **MOUNT HOPE CEMETERY** 284-3151 Division Saction NOT VALID FOR PURPOSE STATED UNLESS STATED CREDIT 67007 Invoice No. 20% Sales Com 77184 OPSO% Sales of Lots Acct. No. NOV Burial Containers Handling Fee 7718 Recording & Misc. Feet 77183 Pre-Need Lot At Need D On Acct D 63033 Pre-need Trust Cash & Check TOTAL PAID AC-212 (Mey, 10-37)

### Send or bring one coupon with each remittance COUPON

DO NOT MAIL ENTIRE BOOK

ACCOUNT No. E-7567

Credit Lot

Aida Villegas 1020 S. 31st Street San Diego, Ca 92113

MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB
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Amount due if paid more than 10 days after due date above.

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Amount Received

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CANARY ..... TO CUSTOMER

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINKAUDITOR	284-3151	1	21 0
From: Wres 15 - 5	Ares Address: 7821 S.	3/27 F	het So
InPayment of _C	super 4 Citi	tel dat	15 25,00
Lot 3703 Grave	N Row Se	ction	Division /O
Acct. No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED CITY AUD	CREDIT 9700 20% Sales Care 7718 80% Sales 10 77 of Lots 7718 Opening/ 10	25 00
BALANCE DUE 495,00	DEC 9	Containers 7718	9
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	The De	Pecording & 10 Misc. Fees 7718 Pre-Need 6503 Trust 8010 Sales Tax 8010 7639	
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CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

CANARY GEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151			98535	153
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BALANCE DUE 770.00	19	Guandling Fee Recording & Misc. Fees	100 77186 —— 100 77183 ——		
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CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151			~
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CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUND HORE CEMETERY

264-3151

Nº 37347

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NAME OF STREET	0.40

WHITE TO CUSTOMER
CANARY CEMETERY
PINK AUDITOR

From: leide Villeges Address: 1020 S 31st Hut, SS. (1020), Dollars (\$ 25.00),

3102	THE RESERVE THE PARTY OF THE PA	-1	Division 10
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	20% Sales Care 77 80% Sales of Lots 77 Opening/ Closing 77 Burial Containers 77	007 184 100 100 100 100 100 100 100 100 100 10

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# WHITE ..... TO CUSTOMER

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

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twenter fine	20/100	Pollars (\$	25.00	)_,
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Invoice No.	NOTVALIDEOR PURPOSE STATED UNLESS STAMPED GREDIT 20% Sales Care 20% Sales Care of Lots	67007 77184 — 100 77184 —	25	00
w.o. 2-7567	CITY AUDITOR Opening/ Closing Buriel Containers	100 77181 — 100 77182 —	TO THE REAL PROPERTY.	
BALANCE DUE	MAR 1 0 1989 Handling Fee Recording 4 Minc. Fee	77185 — 100 77183 —	NO. L	
Pre-need Lot Of At Need On Acct On Acc	ISSUED BY STATES TOTAL PAID	69033 9022 — 60101 76390 —	25	
AC-212 (Rev. 10-67)	ISSUED ST	-0.90 H	03	9

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CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

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From Cuita Villego.	O Address: 1020 2.30 07	Thut &
In Payment of	bugar 7 matel	Dollars (\$ 25,00)
2005		Division /
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Acct. No. 21-7567	CITY AUDITOR Of Lote Opening/ Citosing/ Citosing/ Burisi	77184 100 77181
BALANCE DUE 430,00	MAR 1 0 1989 Handling Fee	77182 100 77185 100 77183
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	Pro-Nood Trust Gales Tax	63033 6022 60101 78380
AC-212 (Rev. 10-87)	ISSUED BY TOTAL PAID	· 05 00

## Send or bring one coupen with each remittence COUPON DO NOT MAIL ENTIRE BOOK

ACCOUNT No. E-7567

-7567 Credit Lot

Aida Villegas 1020 S. 31st Street San Diego, Ca. 92113

Month and Day Due Indicated Below

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

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

s 25.00

Amount due if paid more than 10 days after due date above.

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Amount Received \$\_\_\_\_\_

NAME

ADDRESS CITY

STATE ZIF

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#### CITY ALIMITAG OFFICIAL RECEIPT 37614 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT APR 07 1989 MOUNT HOPE CEMETERY 264-3151 Date: Pollars (\$ Payment of Division Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT 67007 Invoice No. 20% Sales Care 80% Sales of Lots Acut. No Opening/ Closing 77181 **Surial** Containen 77182 BALANCE DUE Handling Fee 77185 Recording & 100 77183 Pre-Need 60033 At Need . On Acct Pre-Need Lot 9022 ales Tax Pre-need Trust Check 80101 ISSUED BY TOTAL PAID AC-212 (Mev. 10-87)

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WHITE ..... TO CUSTOMER

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT CITY AUDITOR

Nº 37613

APR 07 1989

GANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY	Mr. W. O. 1		EL SA
	264-3151	Date:	4-4	.10
From: Mecles	ACLAddraes: 1620 S	3/1	the	27
Twent- Jun	10/100-	0	Ollers (\$ 25.	00
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		200	P-9998	10)
Lot 3703 Grave	Row	Section	Division	10
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPET	20% Sales Care	67007	100
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w.o. 8-756/		Opening/ Closing Surial Containers	77181	7
BALANCE DUE 4/3,00		Handling Fee	100	
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Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	1 1 1 1 1	Pre-Need Trust Sales Tax	83033 9022 80101	
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Invoice No. Acct. No.

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

MOUNT HOPE CEMETERY 264-3151

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AC-212 (Mev. 10-87)

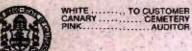
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#### OFFICIAL RECEIPT 38405 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT CANARY .. TO CUSTOMER CEMETERY MOUNT HOPE CEMETERY PINK AUDITOR 264-3151 Date: Dollars (\$ Division Grave Row Section Block NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT 67007 Invoice No 20% Sales Care 77184 80% Sales 77184 Acct. No. of Lots Opening/ 100 CITY AUDITOR Closing 77181 W.O. Burial 100 77182 Containers BALANCE DUE 100 77185 Handling Fee AUG 12 1989 Recording & 100 Misc. Fees 77183 Pre-Need Lor At Need On Acct Pre-Need 63033 Trust Pre-need Trust Cash Check Sales Tex 60101 78390 IBSUED BY **FOTAL PAID** AC-212 (Rev. 10-87)

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# CITY OF SAN DIEGO, CALIFORNIA PROPERTY SEPARTMENT MOUNT HOPE CEMETERY

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#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

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From: Magicio Sta	284-3151 10 205.31 10 205.31	Date:	7-	F 9	89
In Payment of	RowSe	ction	1	Division Block	5
Acct. 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 —	div.	UDITOR
BALANCE DUE 320:00		Closing Burial Containers Handling Fee Recording &	77181 — 100 77182 — 100 77185 —	JUL 1	0 1989
Pre-Need Lot OX At Need On Acct Pre-need Trust Cash Check Check	ISSUED BY MALL, MICH	Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	77183 — 63033 — 60101 — 78390 —	ds	00

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WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

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From Fill 1908 Flores,  Awesty-give dela  In part Payment of Mar	Address: 10005. 31-43	Date:	11-2 .18\$ H 921/3 Hers (\$ 25.00 )
Lot 3703 Grave_		ection	Division 10
Acct. No. E 1567	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	80% Sales of Lots Opening/ Closing	87007 77184 100 171184 100 77181 100 77181
BALANCE DUE 220,00		Handling Fee Recording &	7100 77182 77183 NOV 1 3 1989
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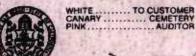
WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

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Lot 3702   Grave   Row   Section   Division   Divisio	Amenty five los	Caesand xx/100	Dollars (	25.00
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Handling Fee 77188 NOV 7 0	Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	ISSUED BY W. O. Teaque	Flandling Fee   77185     Recording & 100     Misc. Fees   77185     Pre-Need   63033     Trust   9022     Sales Tax   60101     78390	NOV 13 1989

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## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

NO 38017

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BALANCE DUE 29100		Handling Fee Recording & Misc. Fees	100	OCT 10	1989
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	1/1/	Pre-Need Trust Saise Tax	63033 9022 60101		
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#### OFFICIAL RECEIPT 38018 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT TO CUSTOMER CEMETERY CANARY MOUNT HOPE CEMETERY AUDITOR PINK ... 264-3151 Dollars (\$ -Payment of Division Grave Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 . Invoice No "PAID" IN THIS SPACE. 20% Sales Care 77184 80% Sales 77184 of Lats Acct. No Opening/ 100 Closing 77181 Burial 100 DE CO Containers 77182 100 BALANCE DUE Handling Fee 77185 Recording & 100 Misc. Fees 77183 Pre-Need 63033 On Acct At Need Pre-Need Lot 9022 Trust Sales Tex 60101 78390 Pre-need Trust Check TOTAL PAID ISSUED BY AC-212 (Rev. 10-87)

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#### OFFICIAL RECEIPT 38488 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY PINK ..... ..... AUDITOR 264-3151 Date From Dollars (\$ Division Row Section Grave NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 Invoice No. "PAID" IN THIS SPACE. 20% Seles Care 77184 80% Sales of Late 77184 Acct. No Opening/ 100 Closing 77181 100 Burisi Containers 77162 BALANCE DUE 100 Handling Fee 77185 SFP Recording & 100 Micc. Foos 77183 Pre-Need 63033 Pre-Need Lot Trust Pre-need Trust Cash Check Sales Tax 60101 78390 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)

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•	OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR  From: 1000 A	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151	Date:	112 7-6 9	38487
	In Payment of Lot 3003 Grave	Daugh 13	OUA.	700	vision /O
	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 Burisl Containers Handling Feb Recording & Misc. Fees Pre-Need Trust Sales Tax	100	SEP 1 1989

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# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

CAMARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151	Date:	6-5	19.59
from: Secretaria Secre	Receptor 10 One	det o	ollars (\$ 25.	<i>oo</i> ,
Lot 3703 Grave	RowS	ection	Division Block	10
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check  AC-212 (Rev. 10-87)	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.  CITY AUDITOR  UNI 0 9 1989	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax  TOTAL PAID	67007 77184 100 77181 100 77182 100 77185 100 77185 63033 8022 60101 78390	500

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#### OFFICIAL RECEIPT 38114 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER .... CEMETERY MOUNT HOPE CEMETERY PINK AUDITOR 264-3151 Date: From Address: Pollars (\$ Division Grave Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. OTY AUDITOR YUL CREDIT 87007 77184 Invoice No. 20% Sales Care ROM Sales 100 of Lots 77184 Aogt. No. Opening/ Closing 100 77181 Buriel Containers 77182 BALANCE DUE 100 Handling Fee 77185 Recording & 100 Misc. Fees 77183 Pre-Need 63033 Pre-Need Lot Trust Pre-need Trust Sales Tax 60101 78390 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)

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#### OFFICIAL RECEIPT 38241 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER ..... CEMETERY CANARY . MOUNT HOPE CEMETERY PINK. AUDITOR 264-3151 Date: From Dollars (\$ Division Row Section Block NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 Invoice No "PAID' IN THIS SPACE 20% Sales Care 77184 CHAUDITOR . 80% Sales 100 of Lots 77184 Acct. No Opening/ Closing 100 77181 Buriel 100 JUL 1 0 1989 Containers 77162 BALANCE DUE \_ 100 Handling Fee 77185 Recording & 100 Misc. Fees 77183 Bre-Need 63033 9022 On Acct Pre-Need Lot Anunt Sales Tax 60101 Pre-need Trust Check 78390 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)

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OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR  From: The Color of The Color o	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151  Address: 1020 S-	Date: 12 Stat Att	11 19.89 100 , 25,00
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 77184 – 80% Sales Care 77184 – 90% Sales 100 of Lots 77184 – 90% Closing 77181 – 80% Sales 100 Containers 77182 – 100 Handling Fee 77185 – 9acording & 77183 – 9re-Need 63033 Trust 9022 – Sales Tax 60101 78390 – TOTAL PAID \$	Division /O Block /O CITY AUTOR  UEC 18 1989

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CITY STATE ZIP

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# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

No 38663

From Lead Village  From Lead Village  Taxata Village	PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151  Address: 10 20 5	Date:	12-11 1989 Hult 3
In Payment of, Lot 3702 Grave_	ganger 16 Chi	ction	Division / D
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 50% Sales of Lots Opening/ Closing Burial Containers  Mandling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax  TOTAL PAID	67007 77184 100 77184 100 77181 100 77185 100 100 100 100 100 100 100 10

lend or bring one coupon with each remittance COUPON DO NOT MAIL ENTIRE BOOK ACCOUNT No. E-7567 Credit Lot Aida Villegas 1020 S. 3lat Street San Diego, Ca 92113 Month and Day Due Indicated Below MAY JUN JUL AUG SEP OCT NOV DEC JAN FEB MAR Amount due when paid on, or before, due date above. Amount due if paid more than 10 days after due date above. Amount Received NAME ADDRESS CITY STATE check ( / ) if this is new address

#### OFFICIAL RECEIPT 38724 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY PINK ... AUDITOR 264-3151 Date: Address: Dollars (\$ Payment of Division Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE, CREDIT 67007 77184 - Invoice No. 20% Seles Care 80% Sales 100 77184 of Lots Acct. No. Opening/ Closing 100 77181 Buriel 100 Containers 77182 BALANCE DUE 100 Handling Fee 77185 Recording & 100 Misc. Fees 77183 Pre-Need 63033 Pre-Need Lot Trust Sales Tax 60101 Pre-need Trust Cash ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)

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#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Nº 38723

From: Marie Har.  Trock to — 4 de la	Address: 1020231	Date:	ollars (\$	2-8	)_,
Lot 3703 Grave_	Row Se	ection		Division/C	5
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 Burial Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	67007 77184 — 100 77184 — 100 77185 — 100 77182 — 77182 — 100 77185 — 100 77183 — 83033 — 80101 78390 —	IAMAS	1990

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# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

CAMARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 284-3151	Date:	2.5-		1990
Seventy-three dollar	Address: 1020 S. 3/57.	5.D. CA		13.00	, ,
	redit lots, I prene		ollars (\$	15,00	
Lot 3702 Grave	Row S	ection		Division /	8
. Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales	67007 77184 —	72	90
w.o. E 7567/		of Lots Opening/ Closing Buriel Containers	77184 — 100 77181 —	CITY	UBITOR
BALANCE DUE		Handling Fee Recording & Misc. Fees	77182 — 100 77185 — 100 77183 —		2 1990
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		Pre-Need Trust Sales Tax	63033 9022 — 60101 78380 —		
4C-212/Bev 10.87)	ISSUED BY W. g. Teagul	TOTAL PAID		73	00

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#### CITY OF SAN DIEGO, CALIFORNIA CITY AUBITOR OFFICIAL RECEIPT 38995 PROPERTY DEPARTMENT CANARY ..... TO CUSTOMER MOUNT HOPE CEMETERY MAR 2 0 1990 PINK ... AUDITOR 264-3151 \_ Dollars (\$ 25.00) Payment of Division Grave Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 Invoice No. 77184 "PAID' IN THIS SPACE 20% Sales Care 80% Sains 100 of Lots Acct. No Opening/ Closing 100 **Buriel** 100 Containers 77182 BALANCE DUE \_ 300 Handling Fee 77185 Recording & 100 Misc. Fees 77183 On Acct Pro-Need 63033 Pre-Need Lot Trust 9022 Pre-need Trust Cash Check Sales Tax 60101 78390 TOTAL PAID AC-212 (Rev. 10-87)

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CITY						STATI	E		ZIP	65	

OFFICIAL RECEIPT TCLO10533 39088 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY CEMETERY MOUNT HOPE CEMETERY PINK AUDITOR 264-3151 Date: Address Dollars (\$ = Payment of ADD 1 6 1000 Division Grave Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 Invoice No. "PAID" IN THIS SPACE 20% Sales Care 77154 80% Sales 100 of Lots 77184 Acct. No. Opening/ Closing 100 77181 Burial 100 BALANCE DUE 80 Containers 77182 100 Handling Fee 77185 Recording & 77183 Misc. Fees Pre-Need Lot At Need Pre-Need 63033 On Acct 902 Trust Pre-need Trust Cash Check Sales Tax 80101 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)

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CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

Me

39175

WHITE ..... TO CUSTOMER CANARY ..... GEMETERY PINK ..... AUDITOR

MOUNT HOPE CEMETERYMAY 0 7 1990

From adolp : acide Vill	91 Address: 100 4 3/6	Date: 5-2 1990'
In Payment of	LT SOT	Oollars (\$ ====)
Lot 3702 Grave	RowSe	oction Division /D
Invoice No.  Acct. No.  W.O. F - 7567  BALANCE DUE  Pre-Need Lot  At Need  On Acct Pre-need Trust  Cash Check  AC-212 (Rev. 10-67)	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 100 Containers 77185  Recording & 100 Handling Fee 77185  Recording & 100 Misc. Fees 77185  Pre-Need 60033 Trust 9022 Sales Tax 80101 76390  TOTAL PAID \$ 25 00

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MAN	E			An	nount	Receive	ed \$	¥			
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700											

NAME Flore	es, Enri	.ques					ACCT. NO.	E-7567
ADDRESS 1020	0 S. 31s	t Stre	eet, San Diego	o, Ca 92113	RATING		LIMIT	9
DATE			ITEMS		DE	BIT V	CREDIT	BALANG
8-2 88	lot	3903	3 Device	ion 10	54	2500		
9-7 88	Couge	21	, alder	Tot Verent	3,600		2500	59000
103 88 1	Rosey 20,	2	Receipt	36761			2500	5450
11-288	Quely	a.	3. Rece	et 3/08	97		20	5200
12-1,88	Ward	m	4. Legen	21 37018			2500	4506
1-4 82 (	Jouge	No 5	s' see	and 37K	57		2500	47000
2-9 87	Carp	m 6	, Perey	pt 3734	6		2500	144500
3-7 89	agelet	2427	, Vege	At 3746	7	11 1 1 1	2500	44000
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12-11 89 (	Tales	26	. Peace st	38662			2500	1950
12 90	( Weigh	NI	1. Persel	F38723		1000	2500	1700
2-5 90 €	pulso	n 18	Receipt	38838			2500	14500
AIGNER FORM NO. 25	5-204 F	lores	Enriques	4.0	3703 - 1	.0		PRINTED IN USA

- 4

NAME				ACCT. NO.	
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11	89	Oh. lon &	Pen at an	:14	2570	29575
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DATE	ITEMS	DEBIT	TI	CREDIT	BALANCE
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4-5-90	Caupa 20, receit 39088		11	2500	9500
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WHITE ...... TO CUSTOMER CANARY .... CEMETERY PINK ..... AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

Nº 39592

	Address: 1620 5 91 57 574		9-11		1990
In Payment of	20 -	Committee Property	ollars (\$ 2		
Lot 2702 Grave	Row Se	ection		Division Block	6
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	67007 77184 100 77184 100 77181 100 77182	00	- P
Pre-need Trust Cash Check C	( ) /	Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	100 77185 ————————————————————————————————————		
AC-212 (Rev. 10-87)	ISSUED BY THE THE POURS	TOTAL PAID	•	20	-

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WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

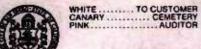
#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

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Lot 3703 Grave		Section	Division Block	10
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Seles Care 77164 - 80% Seles 100	25	00
Acct. No		of Lots 77184 - Opening/ 100 Closing 77181 -		
BALANCE DUE 20.00		Buriel 100 Containers 77182 - 100 Handling Fee 77185 -		
		Recording & 100 Misc. Fees 77183 - Pre-Need 83033		
Pre-Need Lot	recited by Maries &	Trust 9022 - Sales Tax 60101 78390 -		
AC-212 (Rev. 10-87)	ISSUED BY	TOTAL PAID \$	25	00





#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Nº 40049

t 70-1	Address: 1620 2 31 4.	Date: 13 -1	72113	. 1970
In Payment of	New Truck	D	ollars (\$ <del>\$</del> <del>\$</del> 3	.00
Lot Grave	Row Se	ection	Divi:	
Acct. No	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 ————————————————————————————————————	43 00

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

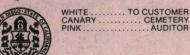
## CITY AUDITOR

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY MAR 1 2 1990

N2 38952

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Lot 3 703 Grave	Row So	ection	Division Block	10			
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007				
Acct. No.		80% Sales of Lots	77184 22	50			
w.o. E-4567		Opening/ Closing Burial	77181 100				
BALANCE DUE \$130.00		Containers	77182				
	等的。 第一位 第一位 第一位 第一位 第一位 第一位 第一位 第一位 第一位 第一位	Handling Fee Recording & Misc. Fees	77185 ————————————————————————————————————				
Pre-Need Lot At Need On Acct		Pre-Need Trust	63033 9022				
Pre-need Trust Cash Check C	11. 11)0.4	Sales Tax	60101 78390				
AC-212 (Rev. 10-87)	ISSUED BY MANUAL	TOTAL PAID	\$ 25	) W			

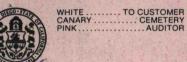


#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

E8450

39285

Date: Address: Dollars (\$ Payment of Division Grave. Section Block NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 Invoice No. "PAID" IN THIS SPACE. 77184 20% Sales Care 80% Sales 100 of Lots 77184 Acct. No. Opening/ 100 77181 Closing 100 Burial Containers 77182 100 **BALANCE DUE** Handling Fee 77185 Recording & 100 Misc. Fees 77183 Pre-Need 63033 Pre-Need Lot At Need On Acct 9022 Trust · Pre-need Trust Cash Check Sales Tax 60101 78390 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)



# PROPERTY DEPARTMENT

### MOUNT HOPE CEMETERY 264-3151

CITY AUDITOR

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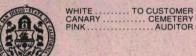
39174

MAY 07 1990

E8450

From: Enriques Flores	Address: 163 5 3/4	Date:	92/1	1990
In Payment of	redet Lot	De	ollars (\$ =	20)
Lot	Row	Section		Division / O
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 Pre-Need Trust Sales Tax	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77185 100 77183 63033 9022 60101 78390	25 W
AC-212 (Rev. 10-87)	ISSUED BY DURAL COLLECT	TOTAL PAID	\$	25 W

#### OFFICIAL RECEIPT



#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Nº 39090

From: Enriques Flores	Address: / 03a 1. 3/	Date: 4	15	92/13	990
In Payment of	Let Letter	CITY AUB	ollars (\$	25.6	)
Lot 3703 Grave	Row Se	APR 16	1990	Division Block	0
Invoice 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 —	25	a.
W.O. F = 1567  BAL'ANCE DUE 3959		Closing Burial Containers Handling Fee	77181 — 100 77182 — 100 77185 —		
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		Recording & Misc. Fees Pre-Need Trust Sales Tax	100 77183 — 63033 9022 —		
AC-212 (Rev. 10-87)	ISSUED BY Me Clark	TOTAL PAID	78390 —	25	00

	Send or bring one coupon with each remittance COUPON 19 DO NOT MAIL ENTIRE BOOK										
Charles and Charles on	ACCOUNT No. 2-7567 Credit Lot										
	Enriques Flores										
	1020 S. 31st Street										
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Send or bring one coupon with each remittance COUPON 20											
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#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 8/3/88

Mika in in 1/1a	ject to your rules and regulations, to inter the remains
in a Cometa Comeine Valtu	neral, date, time AYP - about 8/15
Church, Chapel, Graveside	; Common Mortuary
THE STATE OF THE PARTY OF THE STATE OF THE S	of regular work day or an extra charge will be applied
and billed to undersigned. War time veteran	Me
Lot 3534 Grave Row	Section Division/Block 10
HARR P. Ruin	- Haday 5and C-31357
Grave space & Care Fund	La I Mark D. Commis-
Additional spaces and care fund	for Mose 3 Cumain -
Opening/Closing & Setup	0121-
burial Container	
Handling Fees	
Flower vases - Marker setting fee	<b>_</b> =
Recording and filing fee	<u>36.0</u>
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1-100	me lay e.
IN METERS CEME OF A THE	of the shows named deceden
that 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
any liability on account of said authorization a	and interment.
I hereby authorize the interment in lot I	of sur
hold under beel.	Signature
Har Villegre	Address
Caughter	Súrta Zip Cod
	Talaphone
F ****	Invoice #
Work Order # E 7568	Acct. #

	August 2,	1988
The undersigned hereby requests and authorizes using Varanton In Lo 3 Sab Gr		the Gremains of Sec
Block Division 10 in accordance with and subject		regulations
governing said interment in Mount Hope Cemeter	y, and certifies a	and represents
that he or she has the legal right to make suc	h authorization as	nd agrees to
hold Mount Hope Cemetery harmless from any and	all liability on	account of said
39	17-Course	Dx. Days
HONE NEW TOOLS NOT	ess & relationship crity to sign autho	CHANGE CANDIDARY AND ACTUAL COLORS
Bruly E. Attella Witness Witness		entermonen erkem en m = \$60
E 7568		

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

Marie and the second		or period that make	NO ALTERATIONS OR ERASU	NLD			
VIRGINIA	- VARENHORST		Female	AUE. 1,	1892	AUE.	2, 1988
PLACE OF DEATH-	CITY OR TOWN	San Diego	NTY OR STATE IF NOT IN CALIFORNI	Lynne L	. Boie	o-Braz	er informant
NAME AND ADDRES	S OF FUNERAL DIRECTOR, FOR PERSON AC		CALIFORNIA LICENSE NUMBER 7 941	3955 Co Spring	CHARLES THE COLUMN TWO IS NOT	TO STREET STATE OF THE STATE OF	2077
	TYPE OF PERA	AIT, CHECK ONLY ONE	OF THE FOLLOWING TYPES	OF DISPOSITION			
☐ 1. BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT ENTOMBMENT)	AND BURIAL BINCLUDES	8 DISINTERN	IENT AND REI		FCREMATED
207	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT.	CREMATION, AND BURIAL RNMENT)		MENT OF CREM		
3 CREMATIO CEMETERY 4 SCIENTIFIC		7 DISINTERMENT. OTHER THAN II	FOR CORONER'S USE ONLY  10. DISPOSITION PENDING				
INTERMENT	NAME AND ADDRESS OF CEMETERY W	310T W	ATED REMAINS ARE TO BE INTER	RED	COUNT	n Dieg	to
CREMATION	NAME AND ADDRESS OF CREMA TOWN	BE BMANS ARETO BE	ONTE DATE REMATED	SIGNATURE OF	PERSON N C	ARGE OF CR	EMATORY
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	INE OR OTHER DESCRIPT	Center Center	Left to	NTY OF DISPO	SITION	1
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY BED	13 more	luns	Ha	nd Sid	10689	ep Center
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that the this permit gives no right of unrest	dent under provisions o espass and nuisance la	f the Health and Safety Code, ws apply and understand that	<b>&gt;</b>	APPLICANT		
, LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED II	E AND IS THE	AUG 3 19		LOCAL REGIST	RAR ISSUING	Binn M
CERTIFICATION OF PERSON IN CHARGE OF INSPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	STER PATEL	COLLUN THARGE OF	MSPOSITION		MBER OF CRI F APPLICABLE	EMATED REMAINS
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	)- () ,				

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

•	OFFICIAL RECEIPT  WHITE TO GUSTOMER CANARY CEMETERY PINK AUDITOR	CITY OF SAN DIEGO, GALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151	Nº 36550
	From Bill Bill Payment of Delle Payment	testy twe +	Date: Dellars (\$ 242.60)  CITY AUDITOR
	Lot 35.2 G Grave	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT Solies Care 77184 AUG 22 DES
•	Acct. No	15 Deoguille	60% Sades 7106

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 8/3/88

ofFuneral.	date, time
Vault/Liner	
Church, Chapel, Graveside	; Mortuary
All Funeral cars must arrive before 3:30 p.m. of reg	ular work day or an extra charge will be applied
and billed to undersigned. War time veteran	-s+12 NO
0105 Grave 142 Row S	14 7
ot 105 Grave 142 Row S	Section Division/Stack
Tiam	her to 6. N
Grave space & Care Fund	(201)
Additional spaces and care fund	energe J
Opening/Closing & Setup)	· f · · · · · · · · · · · · · · · · · ·
Buriel Conteiner	hanial Spyl
Handling Fees	Ostensa
lowd vasos Marker setting fee	200
Recording and filing the	30-
Sales taxes	·
AUG 3 _ 1988	Total Due
MT. HGPE CEMETERY Paid receipt	3///22 -/
CITY of SAN DIEGO, CALIF.	
CAT WOLL, DESCRIPTION	Balance due
handy could be a three	
hereby certify I am the and this is your authority to make disposition of ren	of the above named deceden nains as above indicated, I certify and represen
that I have the right to make this authorization and I any liability on account of said authorization and in	
any material on account of said action action one in	Comon.
hereby authorize the interment in lot I	10.000000000000000000000000000000000000
nold under deed.	Signature
Signature of recentled heitler of deed	Address
Special of residual factor of com-	States Zip Code
	Telephone
w *	TORY MAN
\$1.	Invoice #
Work Order # E 7569	
Work Order # E 1303	Acct. #

I. Van Doren, Executor trero, California 92063 Mr. Jeffrey H. Tierman Attorney at Law 600 "B" Street, Suite 2000 San Diego, California 92101 attro, SYLVIA WILLIAMS Estate. NEW OWNER +1: MARK OSTENSO KNATHANIAL OSTENSO Mail 2 deel to By 8/25

JEFFREY H. TIERMAN Attorney at Law 600 "B" Street, Suite 2000 San Diego, California 92101-4508

Telephone: (619) 231-0456

JUL 27 1988

Attorney for Petitioner

ROBERT D. ZUMWALT, Clerk DEPUTY

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SUPERIOR COURT OF THE STATE OF CALIFORNIA

FOR THE COUNTY OF SAN DIEGO

In re the Estate

Case No. 143 852

11

SYLVIA M. WILLIAMS aka SYLVIA WILLIAMS,

of

FOR ALLOWANCE OF EXECUTOR'S COMMISSION AND ATTORNEY'S FEES FOR ORDINARY SERVICES, FOR ALLOWANCE OF ATTORNEY'S FEES

ORDER SETTLING FIRST AND FINAL

ACCOUNT AND REPORT OF EXECUTOR.

Deceased.

FOR AUTHORITY TO PAY TAX PREPARER, DETERMINATION OF BENEFICIAL INTEREST IN ESTATE,

FOR EXTRAORDINARY SERVICES,

AND FOR FINAL DISTRIBUTION UNDER WILL WITH RESIDUE

DISTRIBUTED TO A TESTAMENTARY

TRUST

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MARGARET VAN DOREN, Executor of the Will of the deceased, has filed her first and final account and report of executor and

petition for its settlement, for allowance of executor's commissions and attorney's fees for ordinary services, for 23

allowance of attorney's fees for extraordinary services, for 24

authority to pay tax preparer, for a determination of beneficial

interest in estate and for final distribution under will with

residue of estate distributed to a testamentary trust. The

report and petition were heard on July 19, 1988 at 1:45 p.m. in

Department F-5 of the above entitled Court, the Honorable ROSS G.

THARP, Judge Presiding; JEFFREY H. TIERMAN appeared as attorney
for petitioner and no one appeared in opposition.

The Court finds:

The representative was and still is authorized to

The representative was and still is authorized to administer the estate without court supervision under the Independent Administration of Estates Act.

Notice of hearing of the petition has been regularly given as prescribed by law.

All allegations of the petition are true.

SYLVIA M. WILLIAMS died testate on May 26, 1987, in the City of La Mesa, County of San Diego, State of California, and was at the time of death a resident of San Diego County.

Notice of death was given, the time for filing or presenting claims against the estate has expired, and the estate is now in a condition to be closed.

No claims have been filed or presented against the estate.

All debts of the decedent and of the estate and all expense of administration have been paid, except closing expenses and commissions of petitioner as executor, fees of JEFFREY H. TIERMAN, her attorney and payment of the tax preparer's fees.

No California or Federal Estate Tax Return is due or payable.

All California and Federal income taxes due and payable by the estate have been paid. A final California and Federal fiduciary income tax return will be filed by the executor.

The estimated expenses of closing the estate including the reserve for potential liability are \$1,500.00 and the executor

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should be authorized to withhold that sum from distribution.

All assets of the estate are decedent's separate property.

It was the decedent's intent to establish a trust for the benefit of MARK OSTENSO.

Distribution should be ordered as specified below.

IT IS ORDERED THAT:

- 1. The administration of the estate is brought to a close.
- 2. The executor has in her possession belonging to the estate, after deducting the credits to which she is entitled, a balance at the appraised value of \$184,130.89 of which \$183,030.89 is in cash. The first and final account, petition and report of the executor is approved.
- 3. All acts of the executor relating to matters in the account, petition and report are approved.
- 4. The executor is authorized to retain \$1,500.00 from this distribution to pay closing expenses of administration and as a reserve for potential liabilities and from this reserve the executor is authorized to pay up to \$125.00 for the preparation of the 1988 federal and state fiduciary income tax returns. Any unexpended portion of the reserve shall be distributed pro-rata to the distributees without further court order.
- 5. The executor is authorized and directed to pay to herself \$5,019.88 as statutory commissions for administration of this estate, and the petitioner shall pay JEFFREY H. TIERMAN, her attorney, \$5,019.88 as statutory fees for his services in administration of this estate.
- 6. The executor is authorized and directed to pay to JEFFREY H. TIERMAN, \$700.00 as compensation for extraordinary

services in administration of this estate, determined as follows: 1 for his services relating to the sale of the estate improved real 2 property including preparation of the notice of sale, discussions 3 with the real estate broker, review of offer, preparation of 4 petition for confirmation of sale and appearance at the hearing 5 to confirm the sale, preparation of the order and review of 6 7 escrow instructions. 7. The executor is authorize and directed to pay to RUTH 8 EHRINGER, \$125.00 for the preparation of the 1987 federal and 9 10 state fiduciary income tax returns. 8. The property in the hands of the executor available for 11 12 distribution is as follows: 14

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Cash in the amount of \$183,030.89 Less: Statutory attorney's fee (\$ 5,019.88) Statutory executor's commission (\$ 5,019.88) Extraordinary attorney's fee (\$ 700.00) Payment to Tax Preparer (\$ 125.00) Reserve for Closing Expenses (\$ 1,500.00) CASH AVAILABLE FOR DISTRIBUTION.....\$170,666.13

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--Mt. Hope Cemetery Deed, Lot 105,

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Graves 1 and 2, Section 4, Division

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7, as described in purchase order

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No. B-7058 on 3/2/61.....\$ 1,100.00

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TOTAL ASSETS AVAILABLE FOR DISTRIBUTION.....\$171,766.13

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The provisions of decedent's will relating to distribution are as follows:

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"FOURTH: I give and bequeath the following specific gifts:

- a. The sum of \$5,000.00 to my nephew FRED WILLIAMS.
- b. The sum of \$5,000.00 to my nephew's wife, CAROL WILLIAMS.
- c. The sum of \$5,000.00 to my friend CATHERINE REDPATH of El Cajon, California.
- d. The sum of \$5,000.00 to my friend JAMES BECK who lives on Providence Road in San Diego, California.
  - e. The sum of \$5,000.00 to MARGARET I. VAN DOREN.

In the event any of the above-named persons should predecease me, the bequest herein made to the predeceased person shall lapse and shall go into the residue of my estate.

FIFTH: I give, devise and bequeath the rest and residue of my estate as follows:

- a. One-half to my grandson MARK OSTENSO.
- b. One-half IN TRUST to MARGARET VAN DOREN, as Trustee, without bond, for the benefit of my great grandson KNATHANIAL OSTENSO.
  - 1. The trust shall terminate
- (a) when KNATHANIAL OSTENSO reaches the age of twenty-one (21) years of age, or
  - (b) when the trust corpus is exhausted, or
  - (c) upon the death of KNATHANIAL OSTENSO.
- Upon the termination of the trust, the Trustee shall distribute the assets then remaining in the trust estate, including all accumulated income to KNATHANIAL OSTENSO.
- No interest in the principal or income of the trust shall be anticipated, assigned, or encumbered, or subject to any

creditor's claim or to legal process, prior to its actual receipt by the beneficiary.

- 4. To carry out the purpose of the trust created in this Will, the trustee is vested with the following power with respect to the trust estate and any part of it:
- (a) To invest and reinvest the trust estate in any insured federal savings and loan in the State of California in any manner which will return the highest income per year to the trust.

SIXTH: In the event my grandson MARK OSTENSO should predecease me, or we should die by reason of a common accident or disaster, then I direct that the share of my estate which would have been inherited by my said predeceased grandson shall become a part of the trust estate.

In the event my great-grandson KNATHANIAL OSTENSO should die before the age of twenty-one and the termination of the trust, or predecease me; or we should die by reason of a common accident or disaster, then I direct that the share of my estate which would have been inherited by my said great grandson shall lapse and shall go to my grandson MARK OSTENSO.

The terms of decedent's Codicil relating to distribution are as follows:

"I no longer want to leave James L. Beck, anything, I no longer want to leave anything to Catharine Redpath, or to Carol Williams.

I want to leave Helen Lena Cook 5,000, five thousand dollars and to Helen Ostenso of Washington state, five Thousand dollars.

I want to leave Knathniel Ostenso half of remaining
estate, in a lump sum, at age 30, thirty. And my Grandson Mark
Ostenso five hundred dollars per month till his half is gone."
9. The property on hand available for distribution sha
be distributed as follows:
TO: FRED WILLIAMS - A specific bequest consisting of cash in the amount of\$ 5,000.00
TO: MARGARET VAN DOREN - A specific bequest consisting of ca in the amount of\$ 5,000.00
TO: LENA COOK (referred to as HELEN LENA COOK - A specif bequest consisting of cash in the amount of\$ 5,000.00
TO: HELLEN OSTENSO (referred to as HELEN OSTENSO) - A specif bequest consisting of cash in the amount of\$ 5,000.00
TO: MARGARET VAN DOREN as Trustee of the SYLVIA WILLIA TESTAMENTARY TRUST for the benefit of MARK OSTENSO - A one-ha (1/2) interest in the residue of the estate available f distribution consisting of the following:
Cash in the amount of\$ 75,333.06
An undivided one-half (1/2) interest in the Mt. Hope Cemetery Deed, Lot 105,
Graves 1 and 2, Section 4, Division
7, as described in purchase order
No. B-7058 on 3/2/61\$ 550.00
TOTAL SHARE DISTRIBUTABLE\$ 75,883.06
TO: MARGARET VAN DOREN as Trustee of the SYLVIA WILLIA
TESTAMENTARY TRUST for the benefit of KNATHANIAL OSTENSO - one-half (1/2) interest in the residue of the estate availab
for distribution consisting of the following:
Cash in the amount of \$ 75,333.07
An undivided one-half (1/2) interest in the Mt. Hope Cemetery Deed, Lot 105,
Graves 1 and 2, Section 4, Division
7, as described in purchase order No. B-7058 on 3/2/61\$ 550.00
TOTAL SHARE DISTRIBUTABLE \$ 75,883.07
TOTAL ASSETS DISTRIBUTABLE\$171,766.13

1 The specific bequests to FRED WILLIAMS, MARGARET VAN 2 DOREN, LENA COOK and HELLEN OSTENSO shall bear interest at the 3 rate of 10% per annum (\$1.37 per day) from May 27, 1988 to the 4 date of distribution and shall be paid from the reserve 5 maintained by the Executor. 6 10. Any other property of the estate not now known or 7 discovered that may belong to the estate in which decedent or the 8 estate may have an interest shall be distributed as follows: 9 MARGARET VAN DOREN as Trustee of Fifty Percent (50%) 10 the SYLVIA WILLIAMS TESTAMENTARY TRUST for the benefit of MARK 11 OSTENSO P.O. Box 126 12 Potrero, California 92063 13 MARGARET VAN DOREN as Trustee of Fifty Percent (50%) the SYLVIA WILLIAMS TESTAMENTARY 14 TRUST for the benefit of KNATHANIAL OSTENSO 15 P.O. Box 126 Potrero, California 92063 16 17 JUL 2 7 1988 ROSS G. THARP DATED: 18 19 20 21 The foregoing instrument is a full, true and correct copy of 22 the original on file in this office. JUI 27 1989 ROBERT D. ZUMWALT, County Clerk and Clerk of the Seperior Court of the State Attes 23 of California, in and for the County of San Diego. 24 25 Deputy JEAN PETERSON 26 27

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#### CITY OF SAN DIEGO, CALIFORNIA MOUNT HOPE CEMETERY

3/2/1961

E7569



#### OWNERSHIP AND INTERMENT PRIVILEGES

TO Ernest E. and Sylvia M. Williams for the s	of \$ (DOLLARS)
LEGAL DESCRIPTION Lot 105 Graves 1 and 2 5	Section 4 Division 7
AS DESCRIBED ON PURCHASE ORDER NUMBER B-7058	8
According to a map of said Cemetery filed in the office of the held for burial privileges only with endowed care. Subject to bereafter be adopted, including the right to ingress and egres Cemetery. The rights hereby conveyed for interment privileges of the Cemetery Authority in each and every case and must be	to all rules and regulations now in force or may is with essentials for care and operation of the is shall not be relinquished without the consent
It is expressly understood however, that said Cemetery Division repairs to any monument, head stone, vaults or other improvement after be erected or placed on said lot or plot. Cost of same shat of plot. In no case will the Cemetery Division be responsible natural causes of deterioration, but reserves the right to remove the complete of the Cemetery. The following type of memorial will be preserved.	ents of like nature that is already, or may here- all be assumed by legal owner or representatives to for damage, malicious mischief, vandalism and ove any object that detracts from the embellish-
Flush Marker Onl	У
Reserved W Lehne	when he decompare transfer
Comotery Manager	Park and Recreation Director

WHITE' TO CUSTOMER BLUE CEMETERY PINK AUDITOR YELLOW RETAIN

#### CITY OF SAN DIÈGO, CALIFORNIA

PARK DEPARTMENT CEMETERY DIVISION

N° 10950

250

TOTAL PAID \$.

00

YELLOW RETAIN MOUNT HOPE CEMETERY DIVISION GRAVE \_ ROW SECTION BETTE UNLESS STATE CREDIT 306 951 125 SALES CARE 7784 125 HALF SALES OF LOTS MAR 2 1961 100 OPENINGS 7781 MT. HOPE CEMETERY CITY of SAN DIEGO, CALIF. 100 BOXES 7782 100 REMOVALS FOUNDATIONS7783

FORM 312

UNPAID BALANCE AFTER THIS PAYMENT

OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY FINK AUDITOR  From Mossaut L Van Jan	CITY OF RAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151  EN Address Po Box 126-0	Nº 36483 8/3/88.19 Varo, Ca 92063
The same	tamper fee -  tamper to sum 8  142 ROW_SE	Dollars (\$3500)
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	CITY AUDITOR  ADG 09 1988	CREDIT 67007 20% Sales Care 77184 80% Sales 100 of Lobs 77184 Opening/ 100 Closing 77181 Burlat 100 Containers 77182 Handling Fee 77185 Recording 6 100 Misc. Fees 77183 Pre-Need 63033 Trust 9022 Sales Tax 90101 TOTAL PAID \$

MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 8/3/88

		7 / -
- Russell -	subject to your rules and regu	ulations, to inter the remains
in South Cryst	Funeral, date, time	-8/6-AM 10:30
Church, Chapel, Graveside	1485 Per	Jale 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 undereigned. War time vetera	in 146	
Lot 133 -Grave 3 Row	Section	Division/Stack 7
Grave space & Care Fund Cusha	\$ 1970-C875	9 —
Additional spaces and care fund . The	of Cuent open lo	Idula -
Opening/Closing & Setup	0 (1-1 )	3204
Burial Container	pt - use Bit	trucp. 3309
Handling Fees 2010.T-380	E- 11808 32	700 00
Flower vases - Marker setting fee		
Recording and filing fee	***************************************	30,00
Sales tades	,	d1.45
AUG 0 1988	36524 Total Due .	39500
	Tecept number	* 1011.45
CITY of SAN DIEGO, CALIR.	J4044 /	Balance due
I hereby certify I am the and this is your authority to make dispositi		the above named decedent
that I have the right to make this authorization	tion and I agree to hold Mt. Ho	
	P.11	2 Want
I hereby authorize the interment in lot I hold under deed.	Mortalia C	- Januar
A Trula Garrion	2719 10	ubst
	San Oli	euro. Ca 92793
	Takestorn \$1.0	1450
1.5	Invoice #	1-11-0
Work Order # E 7570	Acct. #	
mr 444 mm) a 544		

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	m.		SEX	DATE OF BIRTH	DATE OF DEATH	
	Oliver Herrison, Jr.		Male	diggs.	July 31, 1988	
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH-COUNTY	OR STATE IF NOT IN CALIFORNIA	NAME AND AD	DRESS OF SPOUSE OR OTHER INFORMANT	
. San Diego		San Diego	4		oan Harrison-Grandmother ok Street	
Anderson-R		Federal Blvd.	F 1329		po, CA 92113	
•	TYPE OF PER	MIT, CHECK ONLY ONE O	F THE FOLLOWING TYPES (	OF DISPOSITION		
BURIAL (IN	CLUDES ENTOMBMENTS	5: DISINTERMENT AN	D BURIAL (INCLUDES	B. DISINTERA	MENT AND REINTERMENT OF CREMATED (INCLUDES INURNMENT)	
A ROLL AND A SECURIOR SECURIOR AND A	N AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, CR (INCLUDES INURNA		9 DISINTERN DISPOSITI	MENT OF CREMATED REMAINS AND ON OTHER THAN IN A CEMETERY	
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 4 SCIENTIFIC USE		7 DISINTERMENT, CR OTHER THAN IN A	EMATION, AND DISPOSITION CEMETERY	FOR CORONER'S USE ONLY  10 DISPOSITION PENDING		
INTERMENT	NAME AND ADDRESS OF CEMETERY W	751 Military and San	san Diego, C		San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORN V	WHEREMAINS ARE TO BE CR	~ 1 / TH	SIGNATURE OF	PERSON IN CHARGE OF CREMATORY	
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	NON -			INTY OF DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	Lat Fun	ul-	Done	tion")	
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the peremains of the above named dece and I hereby acknowledge that to this permit gives no right of unres	ident under provisions of the espass and nuisance laws	e Health and Safety Code, apply and understand that	DATE SIGNED	APPLICANT	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE	DATE PERMIT ISSUED	8 SIGNAPUBE OF	LOCAL RECISTRAR ISSUING PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION		MTEN DATE) SIGNATU	RESERSON IN CHARMY OF	DISTOSTION	LICENSE NUMBER OF CREMATED REMAINS DISPOSER, IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	San Diego County Dep	100	. 0. dox 85222 an Diego, CA 921	38-5222		

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

OFFICIAL RECEIPT  WHITE TO CLISTOMER CANARY CEMETERY PINK AUDITOR  From Me Language Control of the Control of t	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151  LIST Abdress: 37/9 Teak	Date: Office Dollar	Nº 5. 92.	36522
Lot 133 Grave	ROW_SE  NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	80% Sales of Lots 7' Opening/	Division Block	7
Pre-Need Lot  At Need On Acct Pre-need Trust Cash Check AG-212 (Rev. 10-87)	AUG 09 1988	Burial Containers 7 Handling Fee 7 Recording & Misc. Fees 7 Pre-Need 6 Trust Sales Tax 8	7180 77182 100 77185 100 77185 100 100 100 1010 1010 1010 1010 1010	30 00 35 00 31 45 11 45

H-1-7-L-2.

#### MT. HOPE CEMETERY

#### INTERMENT, ORDER

City of San Diego

Date 8/3/88

		//	
You are hereby authorized and instructed, sub	oject to your rules and r	egulations, to inte	r the remains
of Tacker of	regus	Man - 10 ay	no obl
in a here years Fu	meral, date, time		S 8/01.
Church, Chapel, Graveside Withun	only Been	y Poberts	Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or	an extra charge v	vill be applied
and billed to undersigned. War time veteran	W	tress	only o
/41.	Lo	weing Den	
Lot Grave Row	Section /	Division/Bloc	×-6-
Grave space & Care Fund	in head		
Additional spaces and care fund	More		
			32000
Opening/Closing & Setup	(0.00)		10000
Burial Container Count Hand	m. Usery	********	111000
Handling Fees	***********	**********	141-
Flower vases - Marker setting fee			7/700
Recording and filing fee			35 00
Sales taxes	, (******************		6.50
11:0 Semi-B. Rebitis	Total Du	10	60650
Via Enni-B. Rebit 36	eceipt number		
(A)	1.00	Balance due	10
(on)	Viathore	Erniet!	8-
I hereby certify am the and this is your authority to make disposition	of remains as above in	of the above nar	
that I have the right to make this authorization any liability on account of said authorization	and lagree to hold Mt	Hope Cemetery h	armless from
any maniny on account of and action action			
I hereby authorize the interment in lot I	Samuel		
hold under deed.			
Signature of recorded holder of deed			
Q P. Onew	State		Zip Code
De Del herd	1.0 Talaphana		
No Ball her	Invoice #	N	
West Oate: # E 7571		,	
Work Order # Land 10 1 1	Acct. #		

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	VINTON	WRIGH	IT, SR.	SEX Male	Sept.		Aug. 3, 1988
PLACE OF DEATH-	S2244886.175040	San Di	lego	TE IF NOT IN CALIFORNIA)	Mr. No	ADDRESS OF SP	OUSE OR OTHER INFORMANT
NAME AND ADDRES	SS OF FUNERAL DIRECTOR OF PERSON A	Pat.	Blvd. CALIFO	RNIA LICENSE NUMBER		ise, Ca.	95969
7 5 10- 00 A	TYPE OF PER	MIT, CHECK ONL	Y ONE OF THE F	OLLOWING TYPES OF	DISPOSITIO	N	
1. BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTE	RMENT AND BURIA	UNCLUDES		ERMENT AND REI	INTERMENT OF CREMATED URNMENT)
2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)		RMENT, CREMATION	L AND BURIAL			MATED REMAINS AND IAN IN A CEMETERY
3 CREMATIO CEMETERY 4 SCIENTIFIC		7. DISINTE OTHER	RMENT, CREMATION THAN IN A CEMETE	I. AND DISPOSITION		OR CORONES	R'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY V	HERE REMAINS OF		NS ARE TO BE INTERREI	° CA	COUN	m Diego
CREMATION	NAME AND ADDRESS OF CREMATORY V	VHERE REMAINS AR	E TO BE CREMATED	DATE CREMATED	SIGNATURE	OF PERSON IN C	HARGE OF CREMATORY
BURIAL AT SEA OR ISPOSITION OTHER AN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	LINE, OR OTHER DE	Duy (	Stall - W	DO LE	OUNTY OF DISP	OSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	CEIVING REMAINS	•				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dec- and I hereby acknowledge that to this permit gives no right of unres	edent under provi espass and nuise	sions of the Healt ince laws apply a	h and Safety Code, nd understand that	SIGNATURE  DATE SIGNE	OF APPLICANT	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS THE	OUNT OF FEE PAID	AUG 05 1988	SIGNATURE	ULZ.	TRAR ISSUMS BRANCE
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	NTER DATE	SIGNATURE OF PI	ERSON IN CHARGE OF D	ISPOSITION		UMBER OF CREMATED REMAINS IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEAT	<b>H</b> ?			¥	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

NE

WHITE TO CUSTOMER CANARY CEMETERY PINK AUBITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

	264-3151		0 00 00
From El Ancio Lee	ac Roberto 5000 Ca	Date: OCa	10-31 1988 rugar Pd SD
six pundled	Six 50/100 -	Dolla	606-50,
InPayment of	ight vivos rices	- Decer	
Lot 96 Grave		ection	Division 6
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Pev. 10-87)	NOT VALID FOR PURPOSE STATED UNLESS STAMPED THAID IN THIS SPACE.  OTTY AUGITOR  SEP  SEP  SSUED BY TO LOLA  SSUED BY TO LOLA  SSUED BY TO LOLA  SSUED BY TO LOLA  STATEMENT OF THE STAMPED THAIR THE STAMPED THAID THE STAMPED THAID THE STAMPED THAID	80% Sales of Lots 77 Opening/ 77 Opening/ 77 Opening/ 77 Opening Surial Containers 77 Handling Fee 77 Handling Fee 77 Opening & Misc. Fees 77 Opening	007 184 100 100 100 100 100 100 100 100 100 10

# Prevendo

PY-583 (NEV. 8-85)

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

8-4-88 You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains Johnson \_ Funeral, date, time \_\_\_\_\_ Mortuary. Church, Chapel, Graveside \_ 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. War time veteran \_\_\_\_\_. Pow Section Division (Block Grave space & Care Fund ..... Additional spaces and care fund ...... Opening/Closing & Setup ...... Provided by Mortray Handling Fees ..... Recording and filing fee ...... Total Due ... Paid receipt number 3650 Balance due MT. HOPE CEMETERY COX ALSAN 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 interpent. I hereby authorize the interment in lot I hold under deed. Invoice # Work Order # Acct. # \_



WHITE. TO CUSTOMER CANARY CEMETERY PINK. AUDITOR

## PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

		Date:	2-4-		88
From: Anna Face Johnson	Address: 5764 Solola	Ave S.D.	CA	92114	-
Nine hundred and fifty	dollars and xx/100	D	ollars (\$ _	950.00	)
In Full Payment of grave	space opening & closi	ng, recor	ding	and	14.50
Filing fee		0	9		338
Lot Grave	RowS	ection	376	Division /	0
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT _ 20% Sales Care	67007 77184 —		00
Acct. No.	AUDITOR	50% Sales of Lots Opening/	77184 — 100	476	00
w.o. E 7572		Glosing Burist	77181		
BALANCE DUE	0 9 198	8 Containers Handling Fee	77182 — 100 77185 —		1
		Recording & Misc. Fees	77183	255	
Pre-Need Lot   At Need   On Acct   Pre-need Trust   Cash   Check   Ch		Pre-Need Trust Sales Tax	63033 9022 — 60101	355	00
AC-212 (Rev. 10-87) #3045	ISSUED BY W.J. Frague	TOTAL PAID	60101 78380 ——	950	00
3413			THE REAL PROPERTY.	100	1000

3
27
7
M

MT. HOPE CEMETERY .
INTERMENT ORDER

City of San Diego

88-4-8

d regulations, to inter the remains  Mortuary.  or an extra charge will be applied	SS (35) (35) (8)	Balance due  of the above named decedent of the above named decedent with Hope Cametery harmless from Solution
You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains of the national faye. John SON (International John SON) In a venture. Church, Chapel, Graveside Church, Chapel, Graveside 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. War time veteran	Grave space & Care Fund  Grave space & Care Fund  Additional spaces and care fund  Opening/Closing & Satup  Grave space & Care Fund  Additional spaces and care fund  Opening/Closing & Satup  Handling Fees  Handling Fees  Recording and filling fee  Sales tages  Total Due  Total Due	AUG 2 1989 Paid receipt number 36.50 Balance due  M.T. MGPE CEMETERY  Indept Caddra Number 2000 of the above named decedent and this is your authority to make disposition of remains as above indicated. I certify and represent that there the right to make this authorization and lagree to hold Mt. Hope Camerry harmless from any liability on account of said authorization and infinent.  Thereby authorize the interment in lot I hold under deed.  Seman of mental that of deed.  Seman of mental that of deed.  Invoice #
RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR  A Face Johnson Payment of grave fee	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151  Address: 5264 Solola by dellars and by low espace, opening & clas	Date: 8-4- ,1988  Ave S.D. CA 92114  Dollars (\$ 950.00)  Ing, recording and
7.3.7 Grave	Row	Section Division 10
	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 87007 //9 00 00 00 Lots 77184 00 00 00 Lots 77184 00 00 00 Lots 77184 00 00 00 00 00 00 00 00 00 00 00 00 00

6	OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151		IV.	36	511
1		204-3131	Date:	8-4-		1988.
	Nine hundred and forte		Ave, S.D.	ollars (\$ 95	50.00	
2010	Filing fee	, , , , J	ection_	J Div	vision /	0
W.	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	119	00
0	Pre-Need Lot Al Need On Acct Pre-need Trust Cash Check	ISSUED BY W.J. Flague	Recording & Misc. Fees Pre-Need Trust Sales Tax	100	355	00
	AC-212 (Rev. 10-87) #3045	ISSUED BY W. Y. Cague	TOTAL PAID	*_9	150	(

### MT. HORE CEMETERY INTERMENT ORDER

City of San Diego

	Date 8-5	-88
You are hereby authorized and instructed,	A SECTION OF THE PROPERTY OF T	nter the remains
of Elro Susan Her		
ina Liner	- Funeral, date, time Tues 3/9 2pm	и
Church, Chapel, Graveside Chapel, G		Mortuary.
All Funeral cars must arrive before 3:30 p	o.m. of regular work day or an extra charg	e will be applied
and billed to undersigned. War time veter	ran	
Lot <u>4284</u> Grave Row	Section Division/8	lock- 10
Grave space & Care Rung . PARMER:		
Additional spaces and call fund		
Opening/Closing Setup AI.		320,00
Burial Container Ainer	DT	100,00
I HUGA.	~	145.00
Handling Fees My 4000 498	8 , 1	
Recording and filing fee	» <sub>~</sub>	35,00
STATE OF THE PARTY	LIE /	6.50
Sales taxes	~	606,50
aller I having	3614/	40650
Sauf to h	lid receipt number Selance du	1
why chee	, balance di	W
I hereby certify I am the		named decedent
and this is your authority to make disposi that I have the right to make this authorize any liability on account of said authorizet	ation and I agree to hold Mt. Hope Cemete	
I hereby authorize the interment in lot I hold under deed.	Secretary	
note under deed.	Address C	
Signature of recorded holder of dwell	Sinten	Zip Code
	Telephone	
VIII.	Invoice #	
ш. т. т. Е 7573	197CHADEGS	
Work Order #	Acct. #	

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDENT  ELRO SUSAN HERSHEY  SE				May 19.	1901 August 3, 19
		PLACE OF DEATH—COUNTY OR STATE IF NOT IN CALIFORNIAL			
NAME AND ADDRESS	S OF FUNERAL DIRECTOR (OR PERSON A	CA 92045	F 941		
٨.	TYPE OF PER	WIT, CHECK ONLY ONE O	F THE FOLLOWING TYPES O	OF DISPOSITION	
BURIAL (INCLUDES ENTOMBMENT)		5 DISINTERMENT AND BURIAL UNCLUDES ENTOMBMENT!		8. DISINTERMENT AND REINTERMENT OF CREMATED REMAINS INCLUDES INURNMENT!	
2. CREMATION AND BURIAL (INCLUDES INURNMENT)		6 DISINTERMENT, CREMATION, AND BURIAL INCLUDES INURNMENT)		DISINTERMENT OF CREMATED REMAINS AND DISPOSITION OTHER THAN IN A CEMETERY	
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY     4 SCIENTIFIC USE		7. DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY  10. DISPOSITION PENDING	
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OF CREMATI	D REMAINS ARE TO BE INTERF	RED	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY	HERE EMAINS ARE TO BE CF	EMATE DATE CREMATED		PERSON IN CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER HAN IN A CEMETERY OF CREMATED REMAINS	N/A LONG	INE, OR OTHER DESCRIPTION	SUFFICIENT TO IDENTIFY FINA	L PLACE AND COUN	ITY OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	\$		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the person having the right to control the disposition of the remains of the above named decedent under provisions of the Health and Safety Code and I hereby acknowledge that tresposs and nuisance laws apply and understand the this permit gives no right of unrestricted access to property not owned by me.			<b>&gt;</b>	
POCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE \$4.00			CAL REGISTRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED SIGNATURE OF PERSON IN CHARGE OF DISPASSITION WAS MADE ON FITTER PATE.			DISPOSITION	LICENSE NUMBER OF CREMATED REMAIN DISPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	8		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE LITILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diegq

Date 8-5-88

of grade	yourso	~ ·	1001
ina Vault	Funeral, date, time	mon- 8/2-	1 P. M.
Church, Chapel, Graveside Chart	Q* *** : (	Parific Beaul	Mortuary.
All Funeral cars must arrive before 3	1:30 p.m. of regular work	lay or an oxfra charge	heilqqs ad lliw
and billed to undersigned. War time	veteran		
	w Section	3_ Division/Bloo	*_8_
Grave space & Care Fund		*************	
Additional spaces and care fund		*******	
Opening/Closing & Setup	<u></u>		3200
Burial Container Container	L Stabel Van	e <del>t</del>	175
Handling Fees	bor	**************	170 =
Flower vases - Marker setting fee			
Recording and filing fee			32.00
Sales taxes			11.37
0 -0 Ta Sail	To	tal Due	711.37
emily "	Paid receipt number _	37778	5//37
	<b>~</b>	Balance due	0
500	Jakes .	Doranto das	Part of the same
I hereby certify I am the		of the above na	med decedent
I HOLDEY COLLINY LANGE THE			and represent
and this is your authority to make dis		vieteme.) agont tim bid	harmless from
	norization and lagree to hi	old Mt. Hope Cemetery	harmless from
and this is your authority to make dis that I have the right to make this auth any liability on account of said authority	norization and lagree to he prization and interment.	old Mt. Hope Cemetery	harmless from
and this is your authority to make dis that I have the right to make this auth	norization and lagree to he prization and interment.	old Mt. Hope Cemetery	harmless from
and this is your authority to make dis that I have the right to make this auth any liability on account of said authority I hereby authorize the interment in I	norization and lagrae to hi prization and interment.	old Mt. Hope Cemetery	harmless from
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 I hold under deed.	orization and lagree to hi orization and interment. lot I	old Mt. Hope Cemetery	
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 I hold under deed.	orization and I agree to he prization and interment.  or I Standard	old Mt. Hope Cemetery	harmless from
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 I hold under deed.	norization and I agree to horization and interment.  lot I Signature  Address State Telephone	AV	
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 I hold under deed.	orization and I agree to he prization and interment.  of I Signature  Address	SIG MT. Hope Cemetery	55

• 4	E7574
то	elige of sight
DATE	O / TIME & O S
, WHILE Y	OU WERE OUT
" [aloney	1 + Malmay
OF (1882	othy)
	8
DSebh	Le Blanc - 1249
TELEPHONED	PLEASE CALL
RETURNED YOUR CALL	WILL CALL AGAIN
WAS IN TO SEE YOU	WILL COME IN AGAIN
MESSAGE /360	da net leve
APB.	
Re: Xess	ie Johnston
. ,	/
opening	Closing
o Ocusto	claim 1
FORM 80-70 (Rev. 8-86)   RECE	THE WENT WENT

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	Т		5EX	DATE OF BIRTH	DATE OF DEATH
JESSIE C.	JOHNSON		FEMALE	JUNE 18, 1	912 AUG. 4,1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY IOR	STATE IF NOT IN CALIFORNIA)	NAME AND ADDRES	S OF SPOUSE OR OTHER INFORMANT
SAN DIRGO		SAN DIEGO		JOSEPH Le	BLANC-NEPHEW
NAME AND ADDRES	S OF FUNERAL DIRECTOR OF PERSON A	TING AS SUCHI CAI	IFORNIA LICENSE NUMBER	4789 DAWE	S ST.
PACIFIC BE	ACH MORTUARY- SAN DIE	O. CA 92109	815	SAN DIEGO	. CA 92109
-	TYPE OF PERA	AIT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF		*Constant Value Constant
1. BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND BUF ENTOMBMENTI	RIAL IINCLUDES		AND REINTERMENT OF CREMATED UDES INURNMENT)
	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMAT (INCLUDES INURNMENT)	ION. AND BURIAL		OF CREMATED REMAINS AND THER THAN IN A CEMETERY
CREMATION     CEMETERY      SCIENTIFIC		7 DISINTERMENT, CREMAT OTHER THAN IN A CEME	ION. AND DISPOSITION	FOR CO	RONER'S USE ONLY
				<b>=</b> 10 bioresiment	
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATED REM	MAINS ARE TO BE INTERRE	D	COUNTY
INTERMENT		51 MARKET STSAN	The state of the s		SAN DIEGO
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CREMATI	ED DATE CREMATED	SIGNATURE OF PERS	ON IN CHARGE OF CREMATORY
BURIAL AT SEA OR POSITION OTHER IN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	INE OR OTHER DESCRIPTION SUFF	ICIENT TO IDENTIFY FINAL	PLACE AND COUNTY	OF DISPOSITION
SCIENTIFIC	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS			17
ACKNOWLEDGMENT	This is to certify that I am the per remains of the above named dece	불의 경우 내 있었다. 내 전에 가지 않는 사람들이 되었다면 하는 것이 되었다. 그 없는 것이 없다면 했다.		SIGNATURE OF APPL	CANT
APPLICANT	and I hereby acknowledge that the this permit gives no right of unrest	espass and nuisance laws apply	and understand that	DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED II	SE AND IS THE \$4.00	AUG - 8 1988	Commence of the Commence of th	L. Comol, M. H. S
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIEY THAT THE SPECIFIED DISPOSITION WAS MADE ON	ITER DATE)	PERSON IN CHARGE OF E		ENSE NUMBER OF CREMATED REMAINS SPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	1	=1	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

Elen.	WHITE TO CUSTOMER	
	WHITE TO CUSTOMES CANARY CEMETERY PINK AUDITOR	
199		

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

Deven dunde	A silteen 11/100	Dotte: Doll	May 10 les 8 lare 18 716	7/ 19 BP
Lot Grave		ection	Oivision Block	TV AUDITOR
Acct. No. 2 - 75 74	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	80% Sales of Lots Opening/ Closing Burist	77184 32 77184 32 77184 32 77184 32 77184 32	72 1999
Pre-Need Lot  At Need On Acct Pre-need Trust Cash Check AC-212 (New 10-67)	Sounder Sonder Ch	Recording 4 Misc. Feet Productd 150 Tytus 15735	77180 77180	5 34 1 37 2 7)



# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

of Gharles E. I.	immal	<b>8</b>
in a Fu	neral, date, time	0 965 1771
Church, Chapel, Graveside Sel only	- 8 Heifie	Beach 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. War time veteran .		
Lot <u>4/81</u> Grave — Row —	Section Divis	ion/Block 10
Grave space & Care Fund Per hea	J	
Additional spaces and care fund	come	<u></u>
Opening/Closing & Setup	O: 0	<u>– – –</u>
Burial Container	- Jane	==
landling Fees	2167	==
lower vases - Marker setting fee		<u>-</u>
Recording and filing fee		35.01
Seles texes		····- <u>-=</u>
: Clore VP.	Total Due	35.00
Paid re	eceipt number 3630.	2 35,00
1007	Bele	ince due
I hereby certify I am the	52 PX100	above named deceden
	of remains as above indicated and lagree to hold Mt. Hope C	I certify and represen
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 a hereby authorize the interment in lot I hold under deed.		\$25 \$15 \$15
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 hold under deed.	Sgrature	Zip Cor
that I have the right to make this authorization any liability on account of said authorization a hereby authorize the interment in lot I hold under deed.	Signature Address	Zip Coc
and this is your authority to make disposition that I have the right to make this authorization any liability on account of said authorization at I hereby authorize the interment in lot I hold under deed.  Signature of recorded holder of deed	Segretion Address State	Zip. Cod

Pacific Beach Mortuary

	4	SE BLACK INK-MAKE NO ALTER	ATIONS OR ERASUR	es	
NAME OF DECEDEN	T		SEX	DATE OF BIRTH	DATE OF DEATH
CHARLES E.	TIMMS, JR.		MALE	JULY 13, 1910	AUG. 3, 1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH-COUNTY IOR STA		NAME AND ADDRESS OF	SPOUSE OR OTHER INFORMANT
SAN DIEGO		SAN DIEGO		BOBBY E. TIM	KOS_SI
NAME AND ADDRES	SS OF FUNERAL DIRECTOR, JOB PERSON A	TING AS SUCH) CALIFO	RNIA LICENSE NUMBER	P. O. BOX 446	
PACIFIC BE	ACH MORTUARY-"SAN DIE	GO, CA 92109	315	ALPINE, CA	
	CONTRACTOR		******		-
1798	TYPE OF PER/	AIT, CHECK ONLY ONE OF THE F	OLLOWING TYPES C	F DISPOSITION	
			<u>në</u>	<b>—</b>	2.402.202.20
1. BURIAL (IN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND BURIAL ENTOMBMENT!	, IINCLUDES	REMAINS INCLUDE:	REINTERMENT OF CREMATED SINURNMENT)
2. CREMATIO	N AND BURIAL (INCLUDES INURNMENT)			<u> </u>	
		B. DISINTERMENT, CREMATION (INCLUDES INURNMENT)	I. AND BURIAL	9 DISINTERMENT OF I	THAN IN A CEMETERY
3. CREMATIO	N AND DISPOSITION OTHER THAN IN A	_		TANK TELLIFENIES (SE	
CEMETERY		7 DISINTERMENT, CREMATION OTHER THAN IN A CEMETE		FOR CORONER'S USE ONLY  10. DISPOSITION PENDING	
SCIENTIFIC	USE	Official from the A demonstra			
	NAME AND ADDRESS OF CEMETERY W	HERE BEMAINS OF CREMATED BEMAI	MC ARE TO BE INTERP	ED 10	DUNTY
INTERMENT			ACCUMENTAL PROPERTY OF A SECONDARY	11	- A 10.00
	MT. HOPE CEMETERY-375 NAME AND ADDRESS OF CREMATORY W		DATE CREMATED		SAN DIEGO N CHARGE PS CREMATORY
CREMATION				ALL A	Nacde
BURIAL AT SEA	CYPRESS VIEW CREMATOR ADDRESS. MEAREST POINT ON SHOREL		8-8-88	BLACE AND COLOTY OF D	HEBOCITION .
OR	ADDRESS, NEXITEST FOIRT ON SHOREE	INE, OR OTHER DESCRIPTION SOFFICI	IN TO IDENTIFY FIRM	E PEACE AND COPPET OF L	STOSHION .
DESCRIPTION OTHER	Lura				
OF CREMATED REMAINS					
SCIENTIFIC	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS			
USE	N/A				
	This is to certify that I am the pe	rson having the right to control th	e disposition of the	SIGNATURE OF APPLICAN	I.
ACKNOWLEDGMENT	remains of the above named decedent under provisions of the Health and Safety Code,		<u> </u>		
APPLICANT	· · · · · · · · · · · · · · · · · · ·	resposs and nuisance laws apply and understand that		DATE SIGNED	
	this permit gives no right of unres			A CONTRACTOR OF THE PROPERTY OF	
LOCAL	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY CO.		AUG -5 1980	1 24 100	GISTBAR ISSUING PERMIT
REGISTRAR	AUTHORITY FOR THE DISPOSITION SPECIFIED	N TAIS PERMIT 94.00		LP FUTHERA A	Campal M.D.
CERTIFICATION	I CERTIFY THAT THE SPECIFIED	30/98 SIGNATURE OF P	ERSON IN COME OF	SPOSITION LICENS	E NUMBER OF CREMATED REMAINS SER, IF APPLICABLE
OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	NTER MATE	WX III	T DISPO	SEN, IF AFFEICABLE
IF DISPOSITION IS	MOICATE ADDRESS OF REGISTRAN OF	COUNTY OF DEATH			
TO OCCUR IN	-02	U			
ANOTHER COUNTY	N/A				
COPY I OF THE	PERMIT ACCOMPANIES THE REMAIN	S TO THE STATED PLACE OF DIS	POSITION. THE PERS	ON IN CHARGE OF DISPO	SITION IS RESPONSIBLE FOR

MPLETING THE PERMIT AND FORWARDING THE COMPLETED PERMIT WITHIN 10 DAYS OF DISPOSITION TO THE REGISTRAR OF THE DISTRICT IN WHICH DISPOSIOCCURRED OR THE DISTRICT NEAREST THE POINT WHERE THE CREMATED REMAINS WERE BURIED AT SEA. THE LOCAL REGISTRAR MAY DESTROY ANY IGINAL OR DUPLICATE PERMIT AFTER ONE YEAR.

#### OFFICIAL RECEIPT

WHITE ..... TO CUSTOMER

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

Nº 36582

CAMARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151		0 0	//	02
From: El Cancio Ma	Thursia Ston 4	Date:	S-di	ion	e 5
	1400 9 1 1000	o	ollars (\$ \$	35.00	
In Payment of U	ques E. Smin		new.	11/1/4	
Lot 4/6/ Grave	Row So	ection	(10)	Division Block	10
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	87007 77184 —		
Acat. No.	DITOR	80% Sales of Lots Opening/	77184	21977	
w.o. E-15/15	CITY AUDITOR	Closing Buriel Containers	77181 100 77182		
BALANCE DUE	SEP 6 1988	Handling Fee	100	3 1 1 E	
Pre-Need Lot D At Need X On Acct D	SET	Recording & Misc. Fees Pre-Need	100 77183	.15	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	16/1	Trust Bales Tax	9022 — 60101	100000	
AC-212 (Rev. 10-87) 84297	IBSUED BY MINA VALLE	TOTAL PAID	78390	35	00

### MT.HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 8-8-88

	Date	0 0
ou are hereby authorized and instructed, sub	ject to your rules and regulations,	to inter the remains
A January S. Th	MILERON /E	1200
10 Cault Fu	neral, date, time	w/drm
hurch, Chapel, Graveside	; Acemplese	Mortuary.
III Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra ch	arge will be applied
nd billed to undersigned. War time veteran .		
or 0 /5 Grave Row	Section Division	n/Block/O
Grave space & Care Fund		
Additional spaces and care fund	.,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<u></u> _
Opening/Closing & Setup		320 =
Burial Container Comment U	rult	175
landling Fees Later		170 00
	A ( / /	
lower vases - Marker setting fee	(). X	7/9"
Recording and filing fee		33
Sales taxes		1151
	Total Due	711=1
Paid re	eceipt number	
- 25 X 2404ANES	Baland	e due
hereby certify I am the		ove named decedent
and this is your authority to make disposition hat I have the right to make this authorization		
ny liability on account of said authorization :	and interment.	
hereby authorize the interment in lot I hold under deed.	Signature	- 30
	Address	
ignature of recorded holder of deed	Sale	Zio Cod
	300000	
	Telephon*	
Sec.	Invoice #	
Nork Order # E 7576		
Work Order # O LO	Acct. #	

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

R 8/9/88

You are hereby authorized and instruc	ted, subject to your rules and regulations, to inter the remains
of market cle	market senter
in a Vault	Funeral, date, time former 11 471 415
Church, Chapel, Graveside Chy	ul-Hu: Ragedale Mortuary.
All Funeral cars must arrive before 3:3	30 p.m. of regular work day or an extra charge will be applied
d billed to undersigned. War time v	eteran MD .
100 11	/ /1
Lot Grave Row	Section Division/Black
Grave space & Care Fund	385
Additional spaces and care fund	ECONOMIC PROPERTY OF THE SECOND CONTRACTOR OF
Opening/Closing & Setup	320°
Burial Container	e Vault 17500
Handling Fees Lat	Jan 17000°
lower vases - Marker setting fee	100 (200 A 60 A 200 (200 A 400 (200 A 200 A 2
Recording and filing fee	<u> 3८°°</u>
Sales taxes	11.37
Agey	Total Due
4	THE PRODUCTION OF THE PRODUCT OF THE
	Paid receipt number
200	Balance due
" Alaka	into Ollan
I hereby certify I am the Value and this is your authority to make disp	of the above named decedent cosition of remains as above indicated. I certify and represent
that I have the right to make this author any liability on account of said author	rization and lagree to hold Mt. Hope Cemetery harmless from
any naturally on account of said author	0/10
I hereby authorize the interment in lo	11 X Valles ie & aller
hold under deed.	Surger 11 Surger of 41
20 - 20 - 40 - 60 - 10 - 60 - 60 - 60 - 60 - 60 - 6	- Mangay + CA Co-
Signature of recorded holder of deed	State 700 To Code
	1 445-3657
	Talaphone
	11/2/201
E 7577	Invoice
Work Order #	_ Acct.# ZX CNO
PY-MAY (REV. B-MS)	College of the Colleg

NOTE

			21		
\$ //	0	6	37	100	*

San Diego, California

		122	
/ MA	1 43	19 🛭	
		_ ~ _ •	

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or Sap Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of DOLLARS with interest from on the unpaid frincipal at the rate of 12 percent per annum, payable on decand.

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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

	atticle size
PRINT	MAME
THILL	DESTITE

SIGNATURE Vallesie & aller

ADDRESS

CALIF. DRIVERS LIC. # A0747904

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	T			SEX	DATE OF BIRTH		DATE OF DEATH
	Incille Elishbeth	Fennix		Tenale.	Nov. 16.	1923	Aug. 8. 1988
PLACE OF DEATH-			DUNTY IOR ST	TE IF NOT IN CALIFORNIA	A CONTRACTOR OF STREET		ISE OR OTHER INFORMANT
26	Marianel City	Sen Diego					- Daughter
NAME AND ADDRES	S OF FUNERAL DIRECTOR ION PERSONAL	PASSUELL BIV	CALIF	ORNIA LICENSE NUMBER	10 TO	res Stre	
	agadale Mortuary: San I	Mego. CA 92	102	1329	San Die	ego, CA	92102
			A TOTAL CONTRACTOR	OLLOWING TYPES O	E DISPOSITION		
10 m	THE OF FEMA	ii, check one o	INC OF THE !	OLLOWING TIFLS C	Disrosinion		
BURIAL (IN	CLUDES ENTOMBMENTI	5 DISINTERME ENTOMBMEN		L (INCLUDES		ENT AND REINI	FERMENT OF CREMATED (NMENT)
2. CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERME		N, AND BURIAL			TED REMAINS AND
3 CREMATION CEMETERY	N AND DISPOSITION OTHER THAN IN A	(V9000000000000000000000000000000000000			1200 E		
4 SCIENTIFIC	uee		NT, CREMATIO N IN A CEMETE	N, AND DISPOSITION BY			S USE ONLY
A SCIENTIFIC	USE				10. DISPOSITIO	ON PENDING	
	NAME AND ADDRESS OF CEMETERY WE	ERE REMAINS OR CRI	EMATED REMA	INS ARE TO BE INTERR	ED	COUNTY	(
INTERMENT	Mt. Hope Cemetery	3751 Max	ket Str	eet San D	iego, CA	Sa	a Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	EBE NEMAINS ARE TO	BE CREMITED	DATE CREMATED	SIGNATURE OF	PERSON IN CHA	ARGE OF CREMATORY
BURIAL AT SEA OR OSITION OTHER IN A CEMETERY OF THEMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	NE OR OTHER DESCR	PTION SUFFICE	ENT TO IDENTIFY FINAL	PLACE AND COU	NTY OF DISPOS	SITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	IVING REMAINS	20.16	0 = 0			
	This is to certify that I am the per	on having the right	to control th	e disposition of the	SIGNATURE OF	APPLICANT	
ACKNOWLEDGMENT	remains of the above named deced				<b>&gt;</b>		
OF APPLICANT	and I hereby acknowledge that tre this permit gives no right of unrestr	Managa 1988 ng 1989 ng apagaman na ang		THE PERSON OF THE PROPERTY OF	DATE SIGNED		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY CODI AUTHORITY FOR THE DISPOSITION SPECIFIED IN	AND IS THE	OF FEE PAID	AUG 1 0 1988	SIGNATURE OF	1. Cam	AR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	EF DATE) SIG	SHATUSE OF P	en Stell	PSPOSITION	DISPOSER, IF	MBER OF CREMATED REMAINS APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF C	OUNTY OF DEATH		7			

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

073020 08/23/88 027408 VALLERIE T. ALLEN 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072 100 072	77191 000072 77182 000072 77183 000072 77184 000072 77185 000072 76390 77184	1,106.37 320.00 175.00 35.00 316.00 170.00 11.37
--	--	--

1,106.37

PAID IN FULL

#### OFFICIAL RECEIPT 36668 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR MOUNT HOPE CEMETERY 254-3151 Dollars (5 Division Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT 67007 77184 Invoice No 20% Sales Care 80% Sales of Lets BALANCE DUE . Handling Fee Pre-Need Lot At Need On Acct Pre-need Trust D Cash R Check ISSUED BY AC-212 (Rev. 10-87)

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 8/9/88

		//	
11:00.0	oct to your rules and reg	julations, to inter the	remains
of with	G/	2- 204	14
in aFu	ineral, date, time	4 - 8 r. M.	Aspect.
Church, Chapel, Graveside	ys. ga	gadele	Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or a	n extra charge will b	e applied
age billed to undersigned. War time veteran			
/ m -	4		
Lot 72 Grave Row	Section	_ Division/Block	
La constitución de la constituci		2	Co :
Grave space & Cere Fund	*************	···········	36/ 1
Additional spaces and care fund			
Opening/Liosing & Setup	. <del></del>	<b>ٽ</b>	20
Burial Copptainer	~ <u>-</u> ,		20 %
Handling Fees 1988	( )	(3.50) 14	450
MILHER OMMERSERY	Y		
CITY of SAN DIEGO, CALIF.			700
			150
Sales taxes		······ 5	7.10
ann Orbit.	Total Due	·········· 64	-
Paid re	eceipt number 3/65	33-	200
11:00	363	Balance due	<i>2</i> 0
Mattan	- nomelle	* Haboveth ?	رحدم
I hereby certify I am the and this is your authority to make disposition		of the above named icated. I certify and	
that I have the right to make this authorization any liability on account of said authorization	and lagree to hold Mt. H		
any hability on account of said authorization	and interment.		
I hereby authorize the interment in lot I	*	- 1	
hold under deed.	Signature	77	
Signature of recorded holder of deed	Address		120
	State		Zig Code
	Telaphone		
	Invoice #		
Work Order # E 7578	Acct #		
PY-603 MEV B-854			

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	T		SEX	DATE OF BIRTH	DATE OF DEATH
	VILLIE GRE	EN. JR.	Male	Aug. 18, 195	2 August 1, 1988
PLACE OF DEATH-			IOR STATE IF NOT IN CALIFORNIA!	NAME AND ADDRESS OF	SPOUSE OR OTHER INFORMANT
	s of funeral director for person ac agada le Hort.: 5050 Fe			8019 Westm San Diego,	ore Road California 92126
	TYPE OF PERM	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION	
DE 1 BURIAL UN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENTI	BURIAL HINCLUDES	8 DISINTERMENT AND REMAINS INCLUDE:	REINTERMENT OF CREMATED
PHILE CONTRACTOR STATE OF	N AND BURIAL IINCLUDES INURNMENTI	6 DISINTERMENT, CRE		9 DISINTERMENT OF O	CREMATED REMAINS AND I THAN IN A CEMETERY
3 CREMATION CEMETERY 4 SCIENTIFIC		7 DISINTERMENT, CRE	MATION, AND DISPOSITION CEMETERY	FOR COROL  10 DISPOSITION PEND	NER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W.  NAME AND ADDRESS OF CREMATORY W.	751 Market St.:	San Blago, Call	fornie	SAR DIEGO N CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER WATED REMAINS	ADDRESS, NEAREST POINT ON SHORELI	NE, OR OTHER DESCRIPTION :	SUFFICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF D	DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECI	EIVING REMAINS	Tr.		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named decer and I hereby acknowledge that tre this permit gives no right of unrestr	lent under provisions of the spass and nuisance laws a	Health and Safety Code, pply and understand that	SIGNATURE OF APPLICAN  DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	PHIS PERMIT	AUG 1 0 198	● Nonall A. V	CONTRACT ISSUING PERMIT B
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	12/8 SIGNATUR	easly the	SPOSITION LICENS DISPOS	E NUMBER OF CREMATED REMAINS ER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	P,	tal Ascords 0. Box 85222 in Diego, Califor	mia 92138-52	12

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

	OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR  From Herrie A B  In Julie Payment of AA	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151  Part Address: 80/9 West	Date: 8/2/88.19 True Pd - 10. 92/26 Dollars (\$ 600 = )
THE N	Lot 92 Grave		ection Division
	Pre-Need Lot   Af Need   On Acct   Pre-need Trust   Cash   Check   AC-212 (Rev. 10-87)   1520	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.  CITY AUBITOR  AUG 22 1988	CREDIT 20% Sales Care 77184 20% Sales 100 of Lots 100 Opening/ 100 Closing 77184 Bursel 100 Containers 77182 Handling Fee 77185 Flecording 8 100 Misc. Fees 77183 Pre-Need 63033 Trusi 9022 Sales Tax 80101 78390 TOTAL PAID \$ 6000

	WHITE	TO	CUSTO
	CANARY	*****	CEME
TEL S			Ent.
SEP.		100	

PINK AUDITOR	MOUNT HOPE CEMETERY 284-3151		1		
From Linda Viate Inf Bry	Helines 2706 Koring	Date: _ &	0.92	11/2	8
In Say Payment of Int	fui amo Row W	Tillie La	iars is 26	5º0 dec	-
Lot 92 Grave	5 Row Se	ction 2	Divis Bloc	sion //	
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED -PAID' IN THIS SPACE.	20% Sales Care 80% Sales	67007 77184 100 77184	- 11	000
w.o. E - 7578	and a larger	Burial Containers	100 77181 100 77182	R5 OX	2
Pre-Need Lot At Need On Acct	m	Recording & Misc. Fees Pre-Need Trust	77185 100 77183 63033 9022		OR BAR
Pre-need Trust Cash Check P	ISSUED BY CONTURBED		80101 76390	1650	0

#### MT! HOPE CEMETERY

#### INTERMENT ORDER

City of Sarr Diego

1	Sheet the state of the state of	-/.	100
	•	Date 8///	188
1	2	7/	
You are hereby authorized and instrum	oted, subject to your rule	s and regulations, to inte	the remains
of Jane	w . //	Mickey.	2014
in a Sharing Ol	Funeral, date, tim	e offs/mo	20. M.
Church, Chapel, Graveside	25.	Jeenphu.	Mortuary.
"All Funeral cars must arrive before 3	30 p.m. of regular work	day or arrextra charge v	vill be applied
and billed to undersigned. War time	veteran 100.		20
Lot 275 Grave Roy	w Section _	Division/Place	. 10
	V	Omoon/	A STATE OF THE STA
Grave space & Care Fund	.N	*********	
Additional spaces and care fund	no	W	= M
Opening/Closing & Setup	1000		2000
Burial Container	cophi	me	10000
Handling Fees	abov	k.X	14
Flower vases - Marker setting fee	······›	-2/80	= 20
Recording and filing fee		λ(),	200
Sales taxes		0	6:40
3000	1 you offer	otal Due	006,50
note	Paid receipt number .		
	2	Balance due	
	mi La	. —	
I hereby certify I am the and this is your authority to make dis	position of remains as	of the above na bove indicated. I certify	and represent
that I have the right to make this authors any liability on account of said authors.	rization and interment.	oki Mt. Hope Cemetery	marmiess irom
-5.		HAT!	1
I hereby authorize the interment in lo hold under deed.	Signature	a solilla la	THADO
Signature of recorded holder of deed	Address	a. Talla	92037
	State	457-5069	ZogCode
	Telephone	/	•
	M-2000 AV 22-0	07302	6
Work Order # E 7579	Invoice	127419	
Work Order #	Acct. #	VACIO	-

TT 0		E	70	17	1
M.O.	#	_6_	13	/	3

	1150	(i)		
6	065	San	Diego,	California

Mugust 1/ 19 88

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of San Diego, Ca 92102 the sum of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of S

payable on demand.

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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

ADDRESS 8870-209 Ville Le Jolla Dr. La Jolla CA 92037
CALIF. DRIVERS LIC. # N 9748 (20

1 N 1740120

E7579



OFFICE OF MT. HOPE CEMETERY

HE CITY OF
SAN DIEGO
TSI Market Street
In Diego, California 92102

Not a
Public Pecod
Sealed
E-2519

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	at .	ETERRIADISTRIC	SEX	DATE OF BIRTH	DATE OF DEATH
Commence of Commence	JANR MeNICKEN		Female	10-12-1917	08-05-1988
PLACE OF DEATH-		PLACE OF DEATH—COUNTY (		Barbara Ch	
NAME AND ADDRES	SS OF FUNERAL DIRECTOR ION PENSON MLE Vista Hortuary	55 Broadway Chula Vista, CA	P-964	8870-209 1 La Jolla,	/11le Le Jolle CA 92037
	TYPE OF P	ERMIT, CHECK ONLY ONE OF T	HE FOLLOWING TYPES O	OF DISPOSITION	
I BURIAL (IN	ICLUDES ENTOMBMENT)	5. DISINTERMENT AND BENTOMBMENT)	JURIAL IINCLUDES	B. DISINTERMENT AND REMAINS IINCLUDE	REINTERMENT OF CREMATED S INURNMENT)
724	IN AND BURIAL (INCLUDES INURNMEN	(INCLUDES INURNMEN			CREMATED REMAINS AND R THAN IN A CEMETERY
3 CREMATIO CEMETERY			ATION, AND DISPOSITION METERY		NER'S USE ONLY
O SULLINIA				10 DISPOSITION PEND	
INTERMENT	Mt. Hope Cemetery	WHERE REMAINS OR CREMATED I			San Diego
CREMATION	NAME AND ADDRESS OF CREMATOR	Y WHERE REMAINS ARE TO BE CREM	ATED DATE CREMATED	SIGNATURE OF PERSON	IN CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY OF THAN AMAZED REMAINS	ADDRESS, NEAREST POINT ON SHOW	RELINE, OR OTHER DESCRIPTION SL	Lewille -	Bethlut	DISPOSITION Jack 4
CIENTIFIC USE	NAME AND ADDRESS OF FACILITY F	RECEIVING REMAINS	La Penie	e - Kenn	ulag
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the remains of the above named do and I hereby acknowledge that this permit gives no right of unr	scedent under provisions of the I tresposs and nuisance laws app	Health and Safety Code, ply and understand that	SIGNATURE OF APPLICATE  DATE SIGNED	vi -
, LOCAL REGIS₹RAR	THIS PERMIT IS ISSUED IN ACCORDANCE V OF THE CALIFORNIA HEALTH AND SAFETY AUTHORITY FOR THE DISPOSITION SPECIFIE	CODE AND IS THE	JUL 20 198	SIGNATURE OF LONG	CANACH WINDS
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	SIGNATURE	OF PERSON IN CHARGE OF	DISPOSITION LICENS DISPO	SE NUMBER OF CREMATED REMAINS SER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR	OF COUNTY OF DEATH	1 4000		92 <u> </u>

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

CITY OF SAN DIEGO AUDITOR & COMPTROLLER REPORT NO. C65-102 PAID INVOICE REPORT BY DEPARTMENT AS OF 10/05/88 DATE: 10/05/8 TIME: 203609 PAGE: 8

DEPARTMENT 072

PROPERTY DEPT-MT HOPE CEMETERY

DEPART	MENI 072	PKU	PEKIT DEP	I-MI HU	PE LEME	IEKY								
INV	DATE	ACCT NO	CUS TOMER	NAME DEPT	DRG	ACCT	<b>J/</b> 0	PAYM DATE DPER		PAYM REF NU FACILI	AMOUNT PAID AMOUNT APPLIED	AMOUNT BIL	LED	UN PA ID BALANCE
073026	08/23/88 E-7	1548	KENNETH 100 100 100 100 60101	J. CHEV 072 072 072 072 072	ERTUN	77181 77182 77183 77185 78390	0000 0000 0000	72 72	CK 7	22	606.50 320.00 100.00 35.00 145.00 6.50	606	•50	PAID IN FULL
	OF INVOIC			06.50		1 5 5 5 5 5				( Val	Ø.			

MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

R Date 8/12/88

			Date	dial	00
You are here!	by authorized and ins	tructed, subject to you	ur rules and regu	nations, to inte	r the remains
of	(tense	Troop		9	
in a	Vault	() Funeral, dat	te, time <b>S/6</b> 7	uew/	IP.M.
Church Char	pel, GravesideC	Repel & 48	. Pari	Li Bal	Mortuary.
	ars must arrive before		work day or an	Bill	
A CONTRACTOR OF THE PARTY OF TH	undersigned. War tin	CHOCKER OF THE CONTROL OF THE CONTROL	Work day or an	extra citalge t	viii be applied
242	22E	lie veleiali	10		10
Lot of ot of	Graye	RowSect	ion	Division/Bloc	k_/O_
-22	18				
Grave space	a Come Fund	0-1 220	0-11	Ø	
Additional sp	aces and care fund	MP and	Jan N.	. 17	
Opening/Clo	sing & Setup	······)	2Jl		
Burial Contai	ner Vauce		and		
Handling Fee	IS				
Flower vases	- Marker setting fee				- 4-0
Recording an	nd filling fee	Au	now	<del></del>	35 %
Sales taxes	******				-3-25
glant			Total Due .		25 =
Dear		Paid receipt nur	nber 36	565	35.00
		Mana Manatan		Balance due	0
					10531
I hereby certi	ify I am the our authority to make	disposition of remain		f the above na	
that I have the	e right to make this at	uthorization and lagr	ee to hold Mt. Ho		
any navinty c	ni account di sala au	Thomas and interv	Herit,		
	orize the interment	nife 1 E	nature		
hold under d	eed. 2	1171	501/046		
Signature of records	d helder of deed	77	dress		
	ν.	, 1 Su			Zip Code
	8	n 18 0 "	aphone		
	12	§	voice #		
asymaton N	E 7580		voice #		
Work Order I	000	A	oct. #		

		AUGUST 1	19 88
The undersigned hereby r	equests and authorizes	the interment	of the remains of
PEARL TROOP	in Lot 228 Gr	Row	Sec
Block Division #10 in accor governing said interment that he or she has the 1 hold Mount Hope Cemetery authorization and interm	in Mount Hope Cemetery egal right to make such harmless from any and	, and certifies	and represents
Signature of relative or representative		ss & relationshirity to sign aut	ip to deceased or thorization
Witness			
Witness			

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

		ASE BLACK INK-WAKE IN		M EKASUKE			
NAME OF DECEDEN			SEX		DATE OF BIRTH	DATE OF DEATH	
PEARL TROO	7071		FEMA	LE	FEB. 23, 190	ALUVE AAT AZVO	
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH-COUNTY	Y IOR STATE IF NOT IN	CALIFORNIAI	The second secon	OF SPOUSE OR OTHER INFORMANT	
LA JOLLA		SAN DIEGO			SELF PRE-N	EED	
PACIFIC BE	SS OF FUNERAL DIRECTOR AND ASSOCIATE	SE CA 92109	CALIFORNIA LICENS	E NUMBER			
	TYPE OF PER	MIT, CHECK ONLY ONE C	F THE FOLLOWING	TYPES OF	DISPOSITION		
BURIAL (IN	ICLUDES ENTOMBMENT)	5. DISINTERMENT AN ENTOMBMENT)	D BURIAL (INCLUDES	s	8 DISINTERMENT AL	ND REINTERMENT OF CREMATED: DES MURNMENT)	
VINCOLLISE PERCONANTEREN	N AND BURIAL IINCLUDES INURNMENTI	6. DISINTERMENT, CI (INCLUDES INURN	REMATION, AND BUR MENT!	IAL		F CREMATED REMAINS AND MER THAN IN A CEMETERY	
3. CREMATION CEMETERY  4 SCIENTIFIC		7. DISINTERMENT, CA		POSITION	FOR COR	ONER'S USE ONLY	
INTERMENT	NAME AND ADDRESS OF CEMETERY W			and the Later of the	o !	COUNTY SAN DIEGO	
CREMATION	NAME AND ADDRESS OF CREMATORY W	WHERE REMAINS ARE TO BE CR	MEMATED DATE CRI	EMATED	SIGNATURE OF PERSON	N IN CHARGE OF CREMATORY	
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY CREMATED REMAINS	ADDRESS, NEAREST POINT DISCHORES	INE OR OTHER DESCRIPTION	SUFFICIENT TO IDE	NTIFY FINAL	PLACE AND COUNTY OF	DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	CEIVING REMAINS	\$ (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)				
ACKNOWLEDGMENT OF APPLICANT ACKNOWLEDGMENT OF APPLICANT This is to certify that I am the person having the right to remains of the above named decedent under provisions of and I hereby acknowledge that tresposs and nuisance law this permit gives no right of unrestricted access to property			he Health and Safe apply and underst at owned by me.	ety Code, and that	SIGNATURE OF APPLICANT  DATE SIGNED		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED I	H PROVISIONS AMOUNT OF FE	AUG 1	2 1988	CIGNATURE OF LOCAL	REGISTRAR ISSUING PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	HTER DATES SIGNATI	Defension in C	HARIOTO OF THE		NSE NUMBER OF CREMATED REMAINS OSER, IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	N/A	COUNTY OF DEATH	g ×	8			

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

36565

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

	264-3151		~ 12	N
		Date:	8-16	_ 19 80
From prefer Stock	Address: 4710 00	20 Selle	et Sa	Deex
- Shirt - dine	10/10/1 -	Dol	lars (\$35.0	0
1. Po	1 111021	Manne	W/c	0
In Payment of	and Strings	want -	7 ye	_
1000			0	10
Lot A Grave	Row	Section	Division Block	10
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED		67007	
	"PAID" IN THIS SPACE.	Committee of the Commit	77184	2 200
Acct. No	The state of the s	Opening/ Closing	100 77181	TO TOTAL
w.o. E 300	AUG 24 198	Burial Containers	100	
BALANCE DUE	AUG 64 150		100 77185	
		Recording &	77183	5 00
Pre-Need Lot At Need On Acct		Pro-Need Trust	63033 9022	
Pre-need Trust Cash Check	N /2 / / / / /		80101 78390	
AC-212 (Rev. 10-87) //53	ISSUED BY MILE IN YOU	OFOTAL PAID	. 3.	500
A STATE OF THE STA	Appropriate to the second seco			



#### ME HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 8/12/88

You are hereby authorized and instructed, sub	bject to your rules and regulations, to in	ter the remains
of Agisy C. L	are 00	- la -
	ineral, date, time 3/6/88 - L	45 /230
Church, Chapel, Graveside	de tamily-	Mortuary.
All Funeral cars must arrive before 3:30 p.m.		will be applied
and billed to undersigned. War time veteran		
LOK 38/2 Grave Row	Section Division/	- 10
-1. Al C-10 -		
Grave space & Care Fund F.A. Mules	0 C-3383	
Additional spaces and care fund	38/3 anused	
Opening/Closing & Setup	·····	10500
Burial Container	Un Vault	40°-
Handing less AID Aude	<i>,</i>	6000
Flower vases - Marker setting fee	***********	
AUG 1 5 1988		32.
Sale MA HGPE CEMETERY		2,60
CITY OF AN DIEGO, CALIF.	Total Due	242.60
Paid re	eceipt number 36559 -	242.60
4 Chame	Balance du	$-\alpha$
VIAS X SOAL	NESCHI SALES	100
I hereby certify I am the		amed decedent
that I have the right to make this authorization any liability on account of said authorization	and I agree to hold Mt. Hope Cemeter	
	+ James H. Lo	2
I hereby authorize the interment in lot I hold under deed.		
	2003 ESCARPI	
Signature of recorded holder of deed	Los Awgeles (	To Code
	7(Z/3)257-63/	<u>د</u>
	2006/07-7 2007/Y	
E MEGA	Invoice #	
Work Order # E 7581	Acet. #	

		USE BLACK INK-MAI	KE NO ALTERA	THONS OR ERASURE		E 4970075 NI
ME OF DECEDEN	п			ŞEX	DATE OF BIRTH	DATE OF DEATH
	MERON LARE			FEMALE	APRIL 24, 18	
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH-CO	OUNTY HOR STAT	E IF NOT IN CALIFORNIAL		F SPOUSE OR OTHER INFORMANT
LONG BEAG		LOS ANGELES			JAMES H. LAR	
	SS OF FUNERAL DIRECTOR IOR PERSON A		10074 M23-1590-70	RMA LICENSE NUMBER	2003 ESCARPA	10 10 10 10 10 10 10 10 10 10 10 10 10 1
THE NEPT	UNE SOCIETY OF SAN PE	DRO(P.O. 1668	8) ; F-	-1289	LOS ANGELES,	CA 90041
*	TYPE OF PER	MIT, CHECK ONLY O	NE OF THE FO	OLLOWING TYPES OF	DISPOSITION	
1 BURIAL (IN	ICLUDES ENTOMBMENT)	5 DISINTERMEN	NT AND BURIAL NT)	INCLUDES	8 DISINTERMENT AN REMAINS (INCLUD	D REINTERMENT OF CREMATED ES INURNMENT)
	N AND BURIAL (INCLUDES INURNMENT)	(INCLUDES I	NT, CREMATION.	AND BURIAL		CREMATED REMAINS AND
CEMETERY  A SCIENTIFIC		2 7 DISINTERME	NT, CREMATION N IN A CEMETER	Y	FOR CORC	ONER'S USE ONLY
	, ouc	ATPROCESSANCE AND	000000000000000000000000000000000000000		E 10 DISPOSITION FEM	and .
INTERNACA.	NAME AND ADDRESS OF CEMETERY	WHERE REMAINS OR CRE	EMATED REMAIN	IS ARE TO BE INTERRE	D	COUNTY
INTERMENT	MT. HOPE CEMETERY 37				2	
CREMATION	NAME AND ADDRESS OF CREMATORY	WHERE REMAINS ARE TO	CANADA CANADA CONTRACTOR AND A CONTRACTOR		SIGNATURE OF ERSON	INCHARGE OF CREMATORY
	DILDAY-MOTTELLS 1250			8-12-88	·M-	1/1/2
DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE CREMAINS HELD @ NEPT				1117	
SCIENTIFIC	NAME AND ADDRESS OF FACILITY RE		202 21 21			
USE	N/A				was a few array was a second	
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the p	edent under provision resposs and nuisance	s of the Health laws apply on	and Safety Code, d understand that	DATE SIGNED  AUGUST 10	1988
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WI OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DOE AND IS THE		UG 1 1 1988	SIGNATURE OF LOCAL I	EGISTRAR ISSUING PERIORT
CERTIFICATION OF PERSON IN CHARGE		16/88 SH	GNAP OF PE	RSON LEGISTE E		SE NUMBER OF CREMATED REMAINS DSER, IF APPLICABLE
OF DISPOSITION	5512-10	to the second se				

COMPLETING THE PERMIT AND FORWARDING THE COMPLETED PERMIT WITHIN 10 DAYS OF DISPOSITION TO THE REGISTRAR OF THE DISTRICT IN WHICH DISPOSI-TION OCCURRED OR THE DISTRICT NEAREST THE POINT WHERE THE CREMATED REMAINS WERE BURIED AT SEA. THE LOCAL REGISTRAR MAY DESTROY ANY ORIGINAL OR DUPLICATE PERMIT AFTER ONE YEAR

Payment of	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3161  L Address: 1482 Lold Two De 900	Date: 8/16 Enfain & Sast	Bead 90740
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED CITY AUGUST AUG 24		105 00 40 00 31 00 2 60

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 8-15-88

of Susua Su	micro	Was X	812	1/2
Church, Chapel, Graveside	meral date, tim	Escale	le M	ortuary
All Fyheral cars must arrive before 3:30 p.m.	of regular work	day or an extra ch		
d billed to undersigned. War time veteran	No.			
Lot 63 Grave // Row _	Section _	2 Division	/Block/	11
Grave space & Care Fund			30	0 2
Additional spaces and care fund	n	on-		7.07
Opening/Closing & Setup			32	1.00
Buriel Container Coment Le	nin - no	Outlow	100	1-0
Harding Town	or.	**************	/95	.0
Flewer rases Market setting be	·		2	- 1
Recording and filing fee			0	5.0
Sees tax 69 4 1.0 1300		*****	···· 70	2-2
MT. HOPE CEMETERY		Total Due	200	2.3
Paid .	eceipt number	1 0		>
Mather	A	Balance	due	_
hereby certify I am the and this is your authority to make disposition		1/10 of the abo	ve named de	ceden
that I have the right to make this authorization any liability on account of said authorization	and lagree to	hold Mt. Hope Cem	etery harmle	ss from
21,7 1125111,7 011 02302111 07 2230 0411107 1231011	Ž	Dering !	han u -	1
I hereby authorize the interment in lot I hold under deed.	Signature	22211	7/100	FIF
Signature of recorded helder of deed	Attribu	Diener Of &	19111	1
additions or account union to oner	State	01914	10-11	Zip Cod
	Temphone		_	
	Invoice	#		
Work Order # E 7582	\$155145E	SVE21		

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES NAME OF DECEDENT DATE OF BIRTH DATE OF DEATH SEX **GLORIA SMITH MAJORS** Sept. 12, 1952 Aug. 12, 1988 Fama la NAME AND ADDRESS OF SPOUSE OR OTHER INFORMANT. PLACE OF DEATH-CITY OR TOWN PLACE OF DEATH-COUNTY (OR STATE IF NOT IN CALIFORNIA) Louise Smith - Mother San Diego San Diego 7777 Belden St. Apt. 113 NAME AND ADDRESS OF FUNERAL DIRECTOR TO PERSON ACTING AS SUCH CALIFORNIA LICENSE NUMBER San Diego, CA 92111 derson-Recadale No en Diego, CA F 1329 TYPE OF PERMIT, CHECK ONLY ONE OF THE FOLLOWING TYPES OF DISPOSITION 5 DISINTERMENT AND BURIAL (INCLUDES B. DISINTERMENT AND REINTERMENT OF CREMATED RUBIAL UNCLUDES ENTOMBMENT ENTOMBMENT) REMAINS (INCLUDES INURNMENT) 2 CREMATION AND BURIAL (INCLUDES INURNMENT) ☐ 6. DISINTERMENT, CREMATION, AND BURIAL 9 DISINTERMENT OF CREMATED REMAINS AND (INCLUDES INURNMENT) DISPOSITION OTHER THAN IN A CEMETERY 3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 7 DISINTERMENT, CREMATION, AND DISPOSITION FOR CORONER'S USE ONLY OTHER THAN IN A CEMETERY 4. SCIENTIFIC USE ☐ 10 DISPOSITION PENDING NAME AND ADDRESS OF CEMETERY WHERE REMAINS OR CREMATED REMAINS ARE TO BE INTERRED COUNTY TERMENT loog Cematery: 3751 San Diego, CA San Diego NAME AND ADDRESS OF CREMATORY WHERE REMAINS ARE TO BE CREMATED SIGNATURE OF PERSON IN CHARGE OF CREMATORY DATE CREMATED CREMATION N/A IRIAL AT SEA ADDRESS, NEAREST POINT ON SHORPLINE OR OTHER DESCRIPTION SUFFICIENT TO IDENTIFY FINAL PLACE AND COUNTY OF DISPOSITION OSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS NAME AND ADDRESS OF FACILITY RECEIVING REMAINS SCIENTIFIC N/A USE SIGNATURE OF APPLICANT This is to certify that I am the person having the right to control the disposition of the **ACKNOWLEDGMENT** remains of the above named decedent under provisions of the Health and Safety Code, and I hereby acknowledge that trespass and nuisance laws apply and understand that DATE SIGNED APPLICANT this permit gives no right of unrestricted access to property not owned by me. AMOUNT OF FEE PAID DATE PERMIT ISSUED. THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS SIGNATURE OF LOCAL

PPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE EMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

Diego Co. Dept. of Health Services San Diego, CA 92138-5222

SIGNATURE OF PERSON IN CHARGE OF BISPOSITION

P. G. Box 85222

\$4.00

REGISTRAR

CERTIFICATION

OF PERSON IN CHARGE

OF DISPOSITION

IF DISPOSITION IS

TO OCCUR IN ANOTHER COUNTY DE THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE

AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT

INDICATE ADDRESS OF REGISTRAR OF COUNTY OF DEATH

(ENTER/DATE)

I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON \_

LICENSE NUMBER OF CREMATED REMAINS

DISPOSER IF APPLICABLE



#### MT. HOPE CEMETERY

#### INTERMENT.ORDER

City of San Diego

Date 8-15-88

reallow	rexa	00	erset	1	Made	auel
n a		Fune	raį, date, time	1110	18/	7 100
Church, Chapel, (	Graveside	sues.	de :	Engo	dala	Mortus
All Funeral cars r	nust arrive before	3:30 p.m. of	egular work			will be appli
end billed to unde	ersigned. War time	veteran 🚄	Carlot	( &	ucero	1005
.3250 G	rave Ro	w	_ Section	_/_	Division/Ble	- 9
Fraue engre & C	are Fund					100.0
dditional spaces						
pening/Closing	& Setup					64.00
urial Container	************				*******	
landling Pees 7:	X 1 D	7				-
lower values - M	string fee					35.0
lecarding and fill lake taxes AUG	1 6 1988	1		********	**********	
THE CONTRACTOR	PE CEMETERY	1	To	stal Due		199.0
	N DIEGO, CALIF	31	ipt number _	365	64	199.0
	_				Balance due	-0
hereby certify I	am the Y	nother	r)	of	the above na	med deced
nd this is your a	uthority to make di	norization an	d lagree to h	bove indic	ated. I certify	and repres
rry liability on ac	count of said auth	orization and	interment.	(	me	Phinol
hereby authoriz	e the interment in	lot I	Signegue	UND TH	1111	4 2
snature of recorded holds			X010	Die	o CA	9811
regressive of recorded house			126	627	36	Zip
			Telephone		7	
			Invoice #	200		
	7583					



USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	1		SEX	DATE OF BIRTH	DATE OF DEATH	
	Resshawn Barnett	McDowell.	Female	Aug. 3, 1	988 Aug. 3, 1988	
PLACE OF DEATH	CITY OR TOWN	PLACE OF DEATH—COUNTY IOR	STATE IF NOT IN CALIFORNIAI		ESS OF SPOUSE OR OTHER INFORMANT	
	al City	Sen Diego		177000000000000000000000000000000000000	ille NeDowall - Nother Street Apt. 5	
	S OF FUNERAL DIRECTOR (OR PERSON AC	323 113450.	LIFORNIA LICENSE NUMBER	A PERSONAL PROPERTY OF THE PRO	o, California 92102	
Anderson-Ra	gadale Nort.: 5050 Fee	d. Blvd. Ca.	1329	ces area	e, carriotura 72102	
	TYPE OF PERA	AIT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF	DISPOSITION		
1. BUNIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND BUILD STORMS STATE   5 DISINTERMENT   5 DISINTERMENT	RIAL (INCLUDES		T AND REINTERMENT OF CREMATED CLUDES INURINMENT)	
	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMAT (INCLUDES INURNMENT)	ION, AND BURIAL		NT OF CREMATED REMAINS AND OTHER THAN IN A CEMETERY	
3. CREMATION CEMETERY  4. SCIENTIFIC		7 DISINTERMENT, CREMAT OTHER THAN IN A CEMI	ION, AND DISPOSITION	FOR C	ORONER'S USE ONLY	
	307			U IO DISPOSITION	PENDING	
INTERMENT	NAME AND ADDRESS OF CEMETERY WI			College Colleg	San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY W	Top Wooden	Dane B	met.	RSON IN CHARGE OF CREMATORY	
BURIAL AT SEA OR "N OTHER TO A CEMETERY OF SEMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	here - 3	S & Suep.	PLACE AND COUNT	Y OF DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	EIVING REMAINS		"Tit		
ACKNOWLEDGMENT  OF  APPLICANT  APPLICANT  OF  APPLICANT  APPLICANT  This is to certify that I am the person having the right to control the disposition remains of the above named decedent under provisions of the Health and Safety and I hereby adknowledge that tresposs and nuisance laws apply and understand this permit gives no right of unrestricted access to property not owned by me.			alth and Safety Code, and understand that	<b>.</b>		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED I	E AND IS THE	AUG 1 1988	SIGNATURE OF LO	CAL REGISTRAR ISSUING PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	CERTIFY THAT THE SPECIFIED SISPOSITION WAS MADE ON	TER DATE!	PERSON INCHURGE OF P		LICENSE NUMBER OF CREMATED REMAINS DISPOSER, IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	P.O.	Records Box 85222 Diego, CA. 92	138-5222		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

	O IS OX	
Doto	8-12-80	

You are h	ereby authorized a	nd instructed, sc			to inter the remains
of	Muse	en O	Rongo	even of	2 D
in a	Vault/Liner		uneral, date, time		
Church, C	Chapel, Graveside				Mortuary.
All Funer	al cars must arrive	before 3:30 p.m	. of regular work d	lay or an extra cha	arge will be applied
and billed	f to undersigned. V	Var time veterar	·	40	
Water Seasonate			N	e al	
Lot	Grave	Row	Section Mu	Division Division	/Block
Grave spa	ace & Care Fund	1.0	@ 23	Ø.	3500,0C
Additiona	il spaces and care	fund			
Opening/	Closing & Setup				
Burial Co	ntainer				
Handling	Fees				
Flower ve	ıses - Marker settir	ng fee			
Sales tax					
- 1	77 76	14 6		al Due	3500 d
21	1 12 14	1 119	receipt number		250.00
21	21.40	Palo	receipt number		. 4
31	31 700	58		Balance	due
I hereby o	ertify I am the			of the abo	ve named decedent
that I have	e the right to make	this authorization	on and lagree to ho	ove indicated. I c	ertify and represent stery harmless from
any liabili	ity on account of s	aid authorization	and interment	GA	ed
l barabı i	authorize the inter	meet in let l	7000	- The	720
hold unde		Herit Willow	Signature	Box 261	1058
Signature of re	corded helder of deed	-	Addition	Deepo (	192126
			Telephone	9	
	62001		Invoice #		
	E 758	200	INVOICE W		

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151  Address: Planta de la	Date: 8	Nº 36552 12 19 88 13 92 12 6 ollars (\$ 3500 22)
Lot Payment of Lot Grave Involce No	ROWSE  MOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lobs Opening/	Division Block  87007 77184 100 2800 00 17184
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Br	Sought Stille	Closing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax  TOTAL PAID	77181 CITY AUGUTOR 100 77182 100 77183 AUG 22 1988 63033 8022 60101 78390

THE WAY

City of San Diego

Date 815-88

of angela	Kom (stellown lagent
in aF	uneral, date, time Weal 8/17 2pt
Church, Chapel, Graveside Belevicy	Only : (slif Bulled Mortuery
All Funeral cars must arrive before 3:30 pm	of regular work day or an actra charge will be applied
and billed to undersigned. War time veteran	
ot 106 Grave 2 Row	Section 160F Similar Block 43
Grave space & Care Fund	28. O
Additional spaces and care fund	C (4)
Opening/Closing & Setup	15.00
Burlel Container	F - 0 ( W)
Handling Fees	
Flower vases - Marker setting fee	
Recording and filing fee	<u> </u>
Sales taxes	
a 1 105 M/	Total Due 7.3.00
() f) Paid r	receipt number
1-1	Balance due
hereby certify I am the and this is your authority to make disposition	of the above named deceden of remains as above indicated. I certify and represen
	n and I agree to hold Mt. Hope Cemetery harmless from
	1000 m
hereby authorize the interment in lot !	Signature
	Signature
nold under deed.	
hold under deed.	Address
hold under deed.	Address Same Zip Ced Telephone
hereby authorize the interment in lot I hold under deed.  Specure of recorded holder of deed  Work Order #	Address Zip Cod

		USE BLACK INK-MAKE NO AL	TERATIONS OR ERASURE	5	
NAME OF DECEDEN	at .		SEX	DATE OF BIRTH	DATE OF DEATH
	C. Ram		Female	7-28-1988	7-28-1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY (OR	STATE IF NOT IN CALIFORNIAL	THE REPORT OF THE PERSON	SPOUSE OR OTHER INFORMANT
San Di	ego	San Diego		Hector Ram	
CALIFORN	SS OF FUNERAL DIRECTOR (OR PERSON A CREMATION & BUR Cajon BLVd. San	AL CHAPEL	F-1357	950 E. Madi: El Cajon. C	
	TYPE OF PER	MIT, CHECK ONLY ONE OF TH	E FOLLOWING TYPES OF	DISPOSITION	
BURIAL III	ICLUDES ENTOMBMENT)	5. DISINTERMENT AND BU	RIAL UNCLUDES	8 DISINTERMENT AND I REMAINS (INCLUDES	REINTERMENT OF CREMATED INURNMENT)
35	IN AND BURIAL (INCLUDES INURNMENT)	B DISINTERMENT, CREMA-		9 DISINTERMENT OF CE DISPOSITION OTHER	IEMATED REMAINS AND THAN IN A CEMETERY
3 CREMATIO     CEMETERY     4. SCIENTIFIC		7. DISINTERMENT, CREMA OTHER THAN IN A CEM	TION, AND DISPOSITION ETERY	FOR CORON	ER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY V	ry 3751 Market	Street San	Diego, CA	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY	WHERE REMAINS ARE TO BE CREMAT	DATE CHEMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY
BURIAL AT SEA OR TION OTHER A CEMETERY OF MATED REMAINS	Mol	LINE, OR OTHER DESCRIPTION SUF	FICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF DIS	SPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REG	CEIVING REMAINS	1 /1	m-'1_	
ACKNOWLEDGMENT OF	and I hereby acknowledge that to	edent under provisions of the He espass and nuisance laws appl	ealth and Safety Code, y and understand that	SIGNATURE OF APPLICANT  DATE SIGNED	· · · · · · · · · · · · · · · · · · ·
APPLICANT	this permit gives no right of unres	microa access to property nor ov	med by tire.	1	
LOCAL REGISTRAR	This permit gives no right of unrest THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	H PROVISIONS AMOUNT OF FEE PAIL	L PART CONTINUE IS COURT	SIGNATURE OF LOCAL REG	STRAR ISSUING PERMIT
LOCAL	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO	H PROVISIONS DE AND IS THE IN THIS PERMIT  SIGNATURE OFFER DATE:	L PART CONTINUE IS COURT	DISPOSITION LICENSE	

CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR HE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

#### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 817-88

100 111	olexe plijas	The STAN PHX
Church, Chapel, Graveside	Funeral, date of me	Mortuary.
AllyFuneral cars must arriv	ve before 3:30 p.m. of regular work day	or an extra charge will be applied
nd billed to undersigned.	War time veteran	
Lot 55 Grave	RowSection	2 Division/Block 7
Grave space & Care Fund	preneed C 5347	
Additional spaces and care	fund	
Opening/Closing & Setup	DAID	205,07
Burial Container	IPAID	50,01
Handling Fees	AUG 2 3 1988	60,0
Flower vases - Marker set	tire fee	
Recording and filing fee .	MT. HOPE CEMETERY	35,00
Sales taxes	CITY of SAN DIEGO, CALIF.	26
		2/17/
	Total	Due
	Total Paid receipt number <u>36</u>	
	26	
	26	577 242-60 Balance due ———
and this is your authority t that I have the right to mak	26	Balance due ——————————————————————————————————
and this is your authority t that I have the right to mak any liability on account of	Paid receipt number 36  Sow In Kausson make disposition of remains as above this authorization and lagree to hold said authorization and interment.	Balance due ——————————————————————————————————
that I have the right to mak	Paid receipt number 36  Sow In Kausson make disposition of remains as above this authorization and lagree to hold said authorization and interment.	Balance due ——————————————————————————————————
and this is your authority t that I have the right to mak any liability on account of I hereby authorize the inte hold under deed.	Paid receipt number 36  Sow In Kausson make disposition of remains as above this authorization and lagree to hold said authorization and interment.	Balance due ——————————————————————————————————
and this is your authority t that I have the right to mak any liability on account of I hereby authorize the inte	Paid receipt number 36  Sow In Kausson make disposition of remains as above this authorization and lagree to hold said authorization and interment.	Balance due ——————————————————————————————————
and this is your authority that I have the right to make any liability on account of hereby authorize the inte- hold under deed.	Paid receipt number 36  Sou In Raus  or make disposition of remains as above this authorization and lagree to hold said authorization and interment.  Firment in lot I  Signeture 87  Address Link State 4  Telephone	Balance due ——————————————————————————————————

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN			- Paracount	THE SECRET CONTRACTOR OF THE SECRET CONTRACTOR	TO THE PROPERTY OF THE PROPERT
MAINE OF BEOEDER	T .		SEX	DATE OF BIRTH	DATE OF DEATH
CAROLINE	ELIZABETH HYATT		FEMALE	JULY 30, 1895	APRIL 3, 1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY YOR ST	ATE IF NOT IN CALIFORNIA)	NAME AND ADDRESS OF S	SPOUSE OR OTHER INFORMANT
		SAM DIEGO		PRE NEED DONOR FORMS	
NAME AND ADDRES	SS OF FUNERAL DIRECTOR IOR PERSON A	CALIF	ORNIA LICENSE NUMBER	I - Editor Desires Diversion	8.9
BILL COLL	INS. UCSD SCHOOL OF M	EDICINE	NONE		
1813	TYPE OF PER	AIT, CHECK ONLY ONE OF THE I	OLLOWING TYPES OF	DISPOSITION	
XX 1. BURIAL ON	ICLUDES ENTOMBMENT)	5. DISINTERMENT AND BURIA ENTOMBMENT)	L INCLUDES	8 DISINTERMENT AND R REMAINS IINCLUDES	
	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMATIO	N, AND BURIAL	9 DISINTERMENT OF CR DISPOSITION OTHER T	
3, CREMATIO CEMETERY	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT, CREMATIO	N AND DISPOSITION	FOR CORONE	ER'S USE ONLY
4. SCIENTIFIC		OTHER THAN IN A CEMETE	RY	FOR CORONER'S USE ONLY  10. DISPOSITION PENDING	
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CREMATED  JOY IN CO.  INC. OR OTHER DESCRIPTION SUFFICE	STRAULISMAN VIDEO VI	SIGNATURE OF PERSON IN	
OR STITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS SCIENTIFIC USE	Cenent lin	Would Halfof	Diane		
SITION OTHER THAN IN A CEMETERY OF GREMATED REMAINS SCIENTIFIC	Center Center	EIVING REMAINS  roon having the right to control to dent under provisions of the Heal espass and nuisance laws apply o	ne disposition of the th and Safety Code, and understand that	SIGNATURE OF APPLICANT  DATE SIGNED	
STITION OTHER THAN IN A CEMETERY OF GREMATED REMAINS SCIENTIFIC USE  ACKNOWLEDGMENT OF	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS  room having the right to control to dent under provisions of the Heal espass and nuisance laws apply of tricted access to property not away of PROVISIONS  AMOUNT OF FEE PAIN DE AND IS THE	ne disposition of the th and Safety Code, and understand that	<b>F</b>	
THAN IN A CEMETERY OF GREMATED REMAINS SCIENTIFIC USE  ACKNOWLEDGMENT OF APPLICANT	NAME AND ADDRESS OF FACILITY REC  This is to certify that I am the peremains of the above named deceand I hereby acknowledge that to this permit gives no right of unrest of the california HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED I CERTIFY THAT THE SPECIFIED OISPOSITION WAS MADE ON	receiving REMAINS  AMOUNT OF FEE PAINS  REMAINS AMOUNT OF FEE PAINS	ne disposition of the th and Safety Code, and understand that ad by me.	SIGNATURE OF LOCAL REGIONAL PROSITION LICENSE	

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

in Full

Invoice No.

BALANCE DUE

W.O. £7586

Acct. No.

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

From William F. D. Pocco

Two hundred forty two dollars and 60/100

Grave

Payment of LAWINMENT OF CAROLINE

"PAID' IN THIS SPACE

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Address: 387 Theresa

Row

NOT VALID FOR PURPOSE STATED UNLESS STAMPED

SEP 6 1988

SEP 6 1988

Date:	1-23	- 155	1988
Way, S.L	. CA		
		242.6	
Hyatt	Olidia (4	Service Control	18 To 1
117411	380	55 West 18 (6)	N 2 3
1 10		Division	7
ection//		_ Block	_
CREDIT 20% Sales Care	67007 77184 —	F INDA	327
80% Sales of Lots	100 77184 —		JO
Opening/ Closing	77181 —		00
Buriel Containers	100 77182 —	40	00
Handling Fee	100 77186 —	60	00
Recording & Misc. Fees	100 77183 —	35	00
Pre-Need Trust	63033 -	STATE A	
Sales Tax	80101 78390 —	2	60

**TOTAL PAID** 

	17 3 10		33/38
re-Need Lot	At Need Cash	1	On Acct Check
C-212 (Rev. 10-87)			4862

City of San Diego

Date 8-17-88

of 1500 -11	are The	Kas
ina T.S. Vault	Funeral, date, time	1 X19 pm
Church, Chapel, Graveside	treside Fee	their classiffortury
All Funeral cars must arrive before 3	,	2-11-0
and billed to undersigned. War time		G.
C C C C C C C C C C C C C C C C C C C	voldiali	2 17
ot S Grave Roy	v Section	Division/Block/
Grave space & Care Fund		***********
Additional spaces and care fund		
Opening/Closing & Setup		320.00
Burial Container		175.00
	11 -	120.00
landling Fees	J . 19	
Flower vases - Marker selting fee .	k	300
Recording and filing for U.	M	1/ 2/
Sales taxes	ξ <b>\</b>	11-0
BAN	Total Du	111-3
AM . NX 27 1888	Paid eceipt number 36	<u> 57/ 71/37</u>
TO THE TAX		Balance due
hereby county a prising PE CEMET and this is you having the to make the	CALIF.	
hereby cestify antiful NOTECO.	CALAR	of the above named deceden
and this is your author by to make this that I have the eight se make this auth	position of remains as above in orization and I agree to hold Mt.	idicated. I certify and represen Hope Cemetery harmless from
any liability on account of said autho	rization and interment.	S 190
hereby authorize the interment in le	Signature	
hold under deed.		
Signature of recorded holder of deed	Alar Passes	
N.A.	Stone Stone	Zip Cod
/ \	KAO Talaphone	4
	V Invoice #	
Garage access	myorce #	
Work Order # E 7587	Acct. #	

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	T	Si -	SEX	DATE OF BIRTH	DATE OF DEATH
ROSE MARI	E THOMAS		Female	Apr. 2, 1892	Aug. 16, 1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH-COUN	TY IOR STATE IF NOT IN CALIFORN		F SPOUSE OR OTHER INFORMANT
Lemon Gro		San Diego		Selwyn J. Th	
	SS OF FUNERAL DIRECTOR FOR PERSONAL GILL MORTUARY 6322 EJ	M Diego Ca. Cajon Blvd.	CALIFORNIA LICENSE NUMBER 1083	4562 - 50th San Diego, C	
	TYPE OF PERI	WIT, CHECK ONLY ONE	OF THE FOLLOWING TYPES	OF DISPOSITION	
M & BURIAL (IN	CLUDES ENTOMBMENT)	5. DISINTERMENT A	NO BURIAL (INCLUDES	8. DISINTERMENT AN	D REINTERMENT OF CREMATED S INVRIMENT)
2. CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, O	CREMATION, AND BURIAL NMENT)		CREMATED REMAINS AND
3. CREMATION CEMETERY 4. SCIENTIFIC		D 7. DISINTERMENT, OTHER THAN IN	CREMATION, AND DISPOSITION A CEMETERY	FOR CORO	NER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMA 3751 Market St	TED REMAINS ARE TO BE INTER	. 92102	Sen Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	Contract of the Contract of th	and the state of t		IN CHARGE OF CREMATORY
BURIAL AT SEA OR OSITION OTHER IN A CEMETERY OF CHEMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	T. S. Vault	Particular and the second services and the second	AL PLACE AND COUNTY OF	DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	dent under provisions of espass and nuisance law	the Health and Safety Code s apply and understand tha	<b>)</b>	NT
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED II	E AND IS THE		SIGNATURE OF LOCAL R	EGISTRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED SISPOSITION WAS MADE ON	NTIM DATE) SIGNAT	COLLUNION OF ABBE OF		SE NUMBER OF CREMATED REMAINS SER. IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	Ū -		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

City of San Diego

Date 817-88

TS Var Of	1 Ast 8/20 11as	21
na /- J-V @CCC/	Funeral, date, time	-
Church, Chapel, Graveside 1994	side : Propodale Morte	uar
All Funeral cars must arrive before 3:30	D p.m. of regular work day or an extra charge will be app	olie
nd billed to undersigned. War time ver	teran,	
ot 16 Grave 4-186	Section Division/Block	23000
a Grave space & Care Fund		
dditional spaces and care fund		-
Opening/Closing & Setup	320-	9
Burial Container	/25:	0
مر	120,	0
lower vases - Marker setting fee	at Overtine 380.	0
Recording and filing fee	35.0	0
Sales taxes	11-0	7'
	Total Due	3
9	Paid receipt number 36567 1051- 6	3
	A	-
	Balance due	
hereby certify I am the and this is your authority to make dispo that I have the right to make this author any liability on account of said authoriz	of the above named dece esition of remains as above indicated. I certify and repre- ization and lagree to hold Mt. Hope Cemetery harmless ration and interment.	158
hereby authorize the interment in lot nold under deed.	833 4 15465	7
ignature of recorded holder of deed	2/3-2/7-0205 902 Telephone	7
Nort Order # E 7588	Invoice #	

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

A STATE OF THE STA	25		The state of the s		
NAME OF DECEDEN			SEX	DATE OF BIRTH	DATE OF DEATH
	ELECTRA ELIZABET	H ANDERSON	Fema le	Aug. 18, 1925	Aug. 16, 1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY	OR STATE IF NOT IN CALIFORNIA)	NAME AND ADDRESS OF	F SPOUSE OR OTHER INFORMANT
	mal City	San Dieg	•	Richard E. H	utchinson - Son
NAME AND ADDRES	SS OF FUNERAL DIRECTOR (OR PERSON AS I-Registrate Nort .: 5050	Federal Blvd.	CALIFORNIA LICENSE NUMBER F 1329	833 Cyrene S Carson, GA 9	
. A		Diego, CA WIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O		_
1. BURIAL (IN	ICLUDES ENTOMBMENTI	5. DISINTERMENT AND ENTOMBMENT)	BURIAL (INCLUDES	8. DISINTERMENT AND	REINTERMENT OF CREMATED S INURNMENT)
1007800 GENERALIS IN 130	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMINCLUDES INURNME			CREMATED REMAINS AND R THAN IN A CEMETERY
3. CREMATIO CEMETERY 4. SCIENTIFIC		7. DISINTERMENT, CREAT OTHER THAN IN A C		FOR CORO	NER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W	THE THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	REMAINS ARE TO BE INTERRI	ED C	OUNTY Sen Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	RE BEMAINS THE TO BE CHEN	MATED DATE CREMATED	SIGNATURE OF PERSON	IN CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	OR OTHER DESCRIPTION S	UFFICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF	DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	thair.			**
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that the this permit gives no right of unrest	dent under provisions of the espass and nuisance laws ap	Health and Safety Code, ply and understand that	SIGNATURE OF APPLICATE  DATE SIGNED	था
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED II	PROVISIONS AMOUNT OF FEE P			GISTRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON		OF PERSON IN CHARGE OF	POSITION LICENS	E NUMBER OF CREMATED REMAINS SER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	Charles and a second	P. O. Box ryices Sen Di	85222 ego, CA 92138-	5222

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

#### OFFICIAL RECEIPT

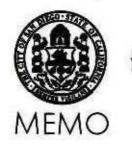
WHITE ..... TO CUSTOMER

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINKAUDITOR	MOUNT HOPE CEMETERY		
- 11-tol	284-3151	Date: 8-/	7 188
From: C. S. Stewars	Andress: 0 23	MILE NO	009146
ne Mousance.	nente - one 30,	100 - Dollars (	1091-07
InPayment of	esta Elexabeth	andus	140
Eurea!	Nervice		NE PROPERTY.
Lot 116 Grave		ection	Division //
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID! IN THIS SPACE.	CREDIT 57007 20% Sales Care 77184	THE ROLL THE
Acct. No.	CITY AUDITOR	80% Seles 100 of Lots 77184 Opening/ 100 Closing 77181	320 00
W.O. 6 - 1500		Closing 77181	175 00
BALANCE DUE	AUG 24 198	8 Containers 77182 100 Handling Fee 77185	170 00
		Recording & 100 Misc. Fees 77183	2/15/00
Pre-Need Lot   Al Need On Acct	1, 111	Pre-Need 63033 Trust 9022	11 3/7
Pre-need Trust Cash Check	I haden to like	Selee Tax 60101 76390	1001 20
AC-212 (Rev. 10-87)	ISSUED BY COL	TOTAL PAID \$	109137

City of San Diego

You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains Funeral, date, time S 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. War time veteran \_ Additional spaces and care fund Opening/Closing & Setup ..... Burial Container ...... Flower vases - Marker setting fee Recording and filing fee ...... Paid receipt number I hereby certify I am the of the above named decedent and this is your authority to make dispection 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 intermen I hereby authorize the interment in lot I hold under deed. nature of recorded holder of shed Work Order # PY-503 (REV. 0-85)



from

MT. HOPE CEMETERY

3751 Market Street San Diego, CA 92102 264-3151

October 5, 1988

Elizabeth Moore 5078 Beech Street San Diego, Ca 92102

Dear Ms. Moore:

I have not received your check for \$270, I quess it was lost in the interoffice mail. I have voided the old receipt (see attached) and issued a new one for the amount received. I will bill you for the balance of \$270.

I am sorry for my error and the confusion which has resulted.

Sandra Ward Admin. Aide II

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	Elizabehh Marie	Moore	Fema 1 a	March 4, 1917	Aug. 13, 1988
	tional City	PLACE OF DEATH—COUNTY 10	A STATE IF NOT IN CALIFORNIA)	El Izabeth Ann	
Anderson-I	SS OF FUNERAL DIRECTOR IOR PERSONAL LANGUAGE PORTUGATION	Federal Blvd.	CALIFORNIA LICENSE NUMBER	2413 Shamrock San Diego, CA	
10	TYPE OF PERA	HIT, CHECK ONLY ONE OF TH	HE FOLLOWING TYPES OF	DISPOSITION	
1 BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND B ENTOMBMENT)	URIAL IINCLUDES	B. DISINTERMENT AND REMAINS (INCLUDE	D REINTERMENT OF CREMATED S INVRNMENT)
5144 5144	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMI- (INCLUDES INURNMEN			CREMATED REMAINS AND R THAN IN A CEMETERY
3 CREMATION CEMETERY  4 SCIENTIFIC		7 DISINTERMENT, CREMA OTHER THAN IN A CEI		FOR CORONER'S USE ONLY  19. DISPOSITION PENDING	
TERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATED R	EMAINS ARE TO BE INTERRE	jo, CA	SAn Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CREMA	ATED DATE CREMATED	SIGNATURE OF PERSON	IN CHARGE OF CREMATORY
OR OSITION OTHER OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	NE, OR OTHER DESCRIPTION SU	FFICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF	DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECI	EIVING REMAINS		=== <del>=</del>	
ACKNOWLEDGE ENT OF APPLICANT	This is to certify that I am the person having the right to control the disposition of the remains of the above named decedent under provisions of the Health and Safety Code, and I hereby acknowledge that trespass and nuisance laws apply and understand that this permit gives no right of unrestricted access to property not owned by me.			<u> </u>	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	EAND IS THE \$4.00	AUG 1, 7 198	SIGNAL OF LOCAL	Compat MD:
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DESCRIPTION WAS MADE ON THE	THE DATE	OF PERSON IN CHARGE OF THE		SE NUMBER OF CREMATED REMAINS SER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	1		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

#### OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36773

From: Elegabetto Ille	ORC Address 5018 Secole	Date: 10	-5 .88 Ch. Open # 9210
In Payment of _&C	yabeth Thousa	Dollar Moore	Division (1)
Invoice No	NOTVALIDATOR PURPOSE STATED UNLESS STAMPED PAID'IN THIS SPACE  CITY AUDITOR  OCT 7 1988  ISSUED BY ANGLE LANGE	of Lots 771 Opening/ 771 Closing 771 Burial Containers 771 Handling Fee 771 Recording &	8100K

# no Contin

#### . MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 8/17/88

w	Date 0/1/0	<u>a</u>
You are hereby authorized and instructed, subject	to waterulae and regulations to interthe	romains
of John Brown	the particular and the property of the particular and the particular a	
of your backs	W.	7
in a Funer	al, date, time	
Church, Chapel, Graveside		ortuary.
All Funeral cars must arrive before 3:30 p.m. of r	egular work day or an extra charge will be	applied
and billed to undersigned. War time veteran		
1.1	= +400	
Lot <u>64</u> Grave <u>6</u> Row	Section Division/Block	2
Grave space & Care Fund	4	952
Additional spaces and care fund	one reserved	
Opening/Closing & Setup		
Surial Container	fariant _	
Handling Fees	thelim	
Flower vases - Marker setting fee		
Recording and filing fee		
Seles taxes		
"on more in 6 mo.	Total Due	
1. Edward (* 1670)	-10	960
Paid recei	pt number 36567 4	700
	Balance due	00 -
2.1.1	77/9	5=
hereby certify I am the	of the above named of	leceden
and this is your authority to make disposition of r that I have the right to make this authorization an	I agree to hold Mt. Hope Cemetery harmi	ess from
any liability on account of said authorization and	interment.	18
	John Duan	s ba
hereby authorize the interment in lot (	100 G 12 G 1 - 1	- 0
	20100 30000	- Fry
Signature of recorded holder of deed	3D1 7210	52
	= 264 8062	Zip Code
	Telephone	
DESTRUCTION OF THE PARTY OF THE	Invoice #	
Work Order # <b>E</b> 7590	N. T. C.	
Work Order #	Acct. #	

ADDRESS	903 Broadway, San Diego, Ca 92102	RATING		L	IMIT		
DATE	ITEMS	DEBI	T /	CREO	Т	BALAN	CE
8-17 88	5 5 7 3 W 1 2 6 65 2 3 16 6 8 17 11			300		195	5 0

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 284-3151	Nº 36569
In Defort Payment of But  Lot 64 Grave	heed Credit Sale -	Dollars (\$ 300 2°)
Invoice No	7 AUG 24 198	sales Care 77184 300 00 105 105 105 105 105 105 105 105 10
Pre-Need Lot At Need On Acct Pra-need Trust Cash Check Check	De Jantes Sail	Need 69033

City of San Diego

Date 8-17-88

of the contract of	ours	1	
The state of the s	neral, date, time	A CONTRACTOR OF THE PARTY OF TH	10au
Church, Chapel, Graveside	Desce Ur	read	Mortuar
All Funeral cars must arrive before 3:30 p.m. o	of regular work day o	r an extra charge v	vill be applie
and billed to undersigned. War time veteran			
3919	Section	PLEASE PLANT - NATION	10
Lot-22/// Grave How	Section	Divisio <del>n/Dloc</del>	*
Grave space & Care Fund			
Additional spaces and care fund			
Opening/Closing & Setup			320,0
Burial Container			100,0
Handling Fees			145.0
Flower vases - Marker setting fee			
Recording and filing fee			25.0
Sales taxes			6.5
	Total D	us	0650
Paid re-	ceipt number 3	0570 4	06-5
		Balance due	40
en .	900		
hereby certify I am the Daug Men-	of remains as above and I agree to hold M	indicated. I certify	and represe
that I have the right to make this authorization any liability on account of said authorization a	and interment.		
any liability on account of said authorization a hereby authorize the interment in lot I	Signature	e e zum	<u>ن</u> د.
any liability on account of said authorization a l hereby authorize the interment in lot I hold under deed.	Signature 834 Jan	umba k	) (-
any liability on account of said authorization a hereby authorize the interment in lot I	Signature	e l. Zavan sumba k la 921 - 7296	
any liability on account of said authorization a I heraby authorize the interment in lot I hold under deed.	Signature 834 Jan Address D. Bittle #69 Totophana	cumbe a	Zip C

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

		DIE BOACK HAK-MAKE HO	ALTERATIONS OR ERASORE	3	A CONTRACT OF THE STATE OF THE
ALICIA -	- ROBERTS	-1/	Pemale	July 27,	1907 Aug. 17, 1988
Lemon G		San Diego	IOR STATE IF NOT IN CALIFORNIAI	Isabel Z	ss of spouse or other informant aroa1 - Daughter-1
	S OF FUNERAL DIRECTOR FOR PERSON A		CALIFORNIA LICENSE NUMBER	836 Jacu San Dieg	mba Street 18 o, CA 92114
	TYPE OF PER	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES OF	DISPOSITION	
1. BURIAL IIN	ICLUDES ENTOMBMENT)	5. DISINTERMENT AND ENTOMBMENT)	BURIAL (INCLUDES		T AND REINTERMENT OF CREMATED CLUDES INURNMENT)
STATE OF THE PROPERTY OF THE P	N AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, CRE			T OF CREMATED REMAINS AND OTHER THAN IN A CEMETERY
3. CREMATIO CEMETERY  4. SCIENTIFIC		7. DISINTERMENT, CRE	MATION, AND DISPOSITION	<u></u>	ORONER'S USE ONLY
SCIENTIFIC				☐ 10 DISPOSITION	
INTERMENT		,San Diego, C	A 92102	0	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY Y	WERE REMAINS ARE TO BE CREE	MATED DATE CREMATED	SIGNATURE OF PEI	ISON IN CHARGE OF CREMATORY
BURIAL AT SEA OH DISPOSITION OTHER IN A CEMETERY EMATED REMAINS	M/A		SUFFICIENT TO IDENTIFY FINAL	PLACE AND COUNTY	OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REG	EIVING REMAINS	W		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pe remains of the above named dece and I hereby acknowledge that to this permit gives no right of unres	dent under provisions of the espass and nuisance laws a	Health and Safety Code, pply and understand that	SIGNATURE OF API	PLICANT
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS THE	DATE PERMIT ISSUED	SIGNATURE OF LOC	L REGISTRAN ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED 8/1	SIGNATURI NIZER DATEI	OFFERSON IN CHANGE OF A	EN I	ICENSE NUMBER OF CREMATED REMAINS DISPOSER, IF APPLICABLE
IF DISPOSITION IS TO DOCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	0		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

#### OFFICIAL RECEIPT

WHITE ..... TO CUSTOMER

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

No 36570

PINKAUDITOR	284-3151	10 00
Trakel Zata	21 836 Date: 0-	X (MA 92/
From: Menone	Sex 30/10 Dollars	15 6d6 D
In Payment of	Mica Druts Sureal	Arvice
39/9	Row Section	Division / O
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007	THE RESERVE
Acct. No.	CITY AUDITORSales 100	301 51
w.o. E-1591	Opening/ 100 77181 Closing 77181 100 100 100 100 100 100 100 100 100	100 00
BALANCE DUE	Handling Fee 77185	195 00
Pre-Need Lot	Recording & 100	0000
Pre-need Trust Cash Check	Seles Tax 60101	650
AC-212 (May 10-87) 2200	ISSUED BY COTAL PAID	60600

#### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 879-88

you me	the
eral date, time	es olds 20m
Have Po	codale Mortuary.
regular work day or an	extra charge will be applied
_Section3	Division/Block / 2
	4850
	320.00
	125.00
	170.00
	<u> 35.00</u>
	11.37
Total Due .	1206.3
eipt number <u>3668</u>	0 1000.00
anilles	Baller 00 due 206.37
WELF BU !	Dieas 6/388
f remains as above indic	the above named decedent cated. I certify and represent
nd I agree to hold Mt. Ho id intermegt.	ope Cemetery harmless from
Ken Will	lion of Charles
Signature 20 CV	Wline Dr.
0 D	04. 92114
264-5	469 Ep Cada
Telephone	A STATE OF THE STA
Tetephone	15 20 3
	Total Due eipt number 3668  could be greated and lagree to hold Mt. Hold interpress.  Fremains as above indicated interpress.  Full Will begreated to the could be supplied to the could be supp

240				
	THE OWNER.	~	-	

	62	
	1 27	000
Mugus	x 23	19 88

W.O. # E-7592

1206 37 San Diego, California

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sam of the condition of the unpaid principal at 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 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 had against his/her separate property for any obligation contained herein. If any action be, instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

PRINT NAME XPer. William R. Charles SIGNATURE & Rev. William Charles

ADDRESS

CALIF. DRIVERS LIC. # A0783966

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	T .	THE BUSINESS WAS THE THE	SEX	DATE OF BIRTH	DATE OF DEATH
(RIME) HE PEREN	GARY WAYNE SHITH		Male	May 31, 1953	Aug. 17, 1988
PLACE OF DEATH-	AND THE RELEASE	PLACE OF DEATH—COUNTY San Diego	IOR STATE IF NOT IN CALIFORNIA)	Mable Smith -	
A STATE OF THE PARTY OF THE PAR	ss of funeral director (or person a gadala Mortuary 5050	Federal Blvd.	F 1329	Sen Diego, C	Set School State Set Set Set Set Set Set Set Set Set S
134	TYPE OF PER	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION	
5 1. BURIAL IIN	ICLUDES ENTOMBMENTI	5. DISINTERMENT AND ENTOMBMENT)	BURIAL (INCLUDES	B DISINTERMENT AND REMAINS (INCLUDE:	REINTERMENT OF CREMATED S INURNMENT)
2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CRI		9. DISINTERMENT OF O	REMATED REMAINS AND
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY  4. SCIENTIFIC USE		7 DISINTERMENT, CRI	EMATION, AND DISPOSITION CEMETERY	FOR CORONER'S USE ONLY	
4. SCIENTIFIC	NAME AND ADDRESS OF CEMETERY W	THERE REMAINS OR CREMATE	D REMAINS ARE TO BE INTERR		DUNTY
INTERMENT	Mt. Hope Cemetery: 3				San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	TALLER TO BE CHE	MATED DATE CREMATED	SIGNATURE OF PERSON I	N CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER N A CEMETERY MATED REMAINS	N/A C	INE. OR OTHER DESCRIPTION	SUFFICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF D	SPOSITION .
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RE	asy De	ggery"		1
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the person having the right to control the disposition of the remains of the above named decedent under provisions of the Health and Safety Code, and I hereby acknowledge that trespass and nuisance laws apply and understand that this permit gives no right of unrestricted access to property not owned by me.		SIGNATURE OF APPLICAN  DATE SIGNED	T.	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	OF AND IS THE	AUG 2 2 1988	Morall & a	CONTRACT ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	10011111111	NTER DATES	EMEN IN CHARGE OF		E NUMBER OF CREMATED REMAIN SER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	indicate vooriss of registrar of San Blogo County Dept P. O. Box 85222 San				

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

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

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From: Mable Smith	Address: 209 Rexview	Date:		13-	19.88
One thousand dollars a	ment of Cary Wayne	0	The second second	1000.	00,
		2		Division	12
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales	67007 77184 —	Block 9	100
Acct. No	CITY AUDITOR	of Lots Opening/ Closing Burist	77184 — 100 77181 — 100	320	B
BALANCE DUE	SEP 19 1988	Containers  Handling Fee Recording & Misc. Fees	77182 — 100 77185 — 100 77183 —	10	00
Pre-Need Lot ☐ At Need ☐ On Acct ☑ Pre-need Trust ☐ Cash ☒ Check ☐	THE RESERVE OF THE PARTY OF THE	Pre-Need Trust Sales Tax	63033 9022 — 60101 78390 —	200	
AC-212 (Rev. 10-87)	ISSUED BY W.J. Fleague	TOTAL PAID		1000	00

City of San Diego

Date 8-23-88

of Worthy	2. HOLLOW	V60 1
in a Veult/Liner	uneral, date, time	to pm
Church, Chapel, Graveside	de dever	Mortuary.
All Funeral cars must arrive before 3:30 p.m	of regular work day or an extra d	harge will be applied
/ and billed to undersigned. War time veteran	1/2	SECTION AND ADDRESS OF THE PARTY OF THE PART
~5 ° 0′	,	11
Lot Grave Row	Section Divisio	n/Block
Grave space & Care Fund		
Additional spaces and care fund	0 -9	
Opening/Closing & Setup	200412	MARANES I
(16 H)	OD to tople 0	10450
Burial Container	or so process.	
Handling Fees		
Flower vases - Marker setting fee		3511
Recording and filing fee	***********	
		28 14
. / 2	Total Due	1 1300
AUG 23 1988   Paid	receipt number 363/4	1 37 50
//	Balanc	ce due
MT. HGPE CEMETERY	la. V	
and this is your authority to make disposition	n of remains as above indicated. I	
that I have the right to make this authorization any liability on account of said authorization		natery harmless from
	(Ja	271-
hereby authorize the interment in lot I hold under deed.	Steame	rough
	(Mixtrons	
Signature of recorded holder of deed	State	Zip Code
	Talashara	
¥2	STEELINGS	
#W =	Invoice #	

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	DOROTHY GRACE BORTON		female	June 25, 1911	Aug 22, 1988
PLACE OF DEATH— San Diego	CITY OR TOWN	PLACE OF DEATH—COUNTY San Diego	IOR STATE IF NOT IN CALIFORNIA)	NAME AND ADDRESS OF S	POUSE OR OTHER INFORMANT
3031 MI CA300 MIVA.			4666 Oregon Street San Diego, CA 92116		
٠,	TYPE OF PERA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES OF	DISPOSITION	
3 A BURIAL IIN	CLUDES ENTOMBMENTI	5. DISINTERMENT AND ENTOMBMENT)	BURIAL (INCLUDES	B DISINTERMENT AND R	EINTERMENT OF CREMATED NURNMENTI
2 CREMATION	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CRE		9 DISINTERMENT OF CR	
3 CREMATION AND DISPOSITION OTHER THAN IN A		ER'S USE ONLY			
TERMENT	NAME AND ADDRESS OF CEMETERY W		REMAINS ARE TO BE INTERRE	72.00	San Diego
CREMATION	NAME AND ADDRESS OF CREMANDRY W	HERE REMAINS ARE TO BE CRE	MATED DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY
BURIAL AT SEA OR SITION OTHER THIS IN A CEMETERY OF CREMATED REMAINS	ADDRES CHAREST POST ON HORE	OTHER DESCRIPTION	Vault	PLACE AND COUNTY OF DIS	POSITION
SCIENTIFIC USE	NAME AND ADDRESS FACILITY REC	EIVING REMAINS			
ACKNOWLEDGMENT QF AMPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that the this permit gives no right of unrest	dent under provisions of the espass and nuisance laws a	Health and Safety Code, pply and understand that	SIGNATURE OF APPLICANT  DATE SIGNED	
LOCAL RECEPTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED II	DEAND IS THE	AUG 2 4 198	SIGNATURE OF LOCAL RECU	STRAN ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	THIVI I I I I	VTER PATEL	OF PERSON IN CHARGEOF E	DISPOSER DISPOSER	NUMBER OF CREMATED REMAINS R, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICAT ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	0		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

OFFICIAL RECEIPT  WHITE TO CUSTOMER CAMARY CEMETERY PINK AUDITOR  From: WALLEY STATES OF THE STATES	CITY OF SAN DIEGO, CALIFORNIA PHOPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151  Address: 4666 Orego	Nº 36578  Date: 8/23/88.19  Lt -2992/16
Payment of Dure Togs S	PAID IN THIS SPACE.	Dollars (\$
Acct. No	CITY AUDITOR SEP 6 1988	80% Sales 100 of Lots 77184 Opening/ 100 Closing 77181 Surial 100 Containers 77182 Containers 77182 Recording & 700 100 100 100 100 100 100 100 100 100
	6 1988	Recording & 7100 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2

City of San Diego

Date\_8-23-88

of Jours	100 8/31 HB
Na Veult/Liner	Funeral, date, time (1)
Church, Chapel, Graveside	(2/3) 262 - 044(
	30 p.m. of regular work day or an extra charge will be applied
and billed to undersigned. War time v	/eteran
Lot 5/9/ Grave Row	v Section Division Please
Grave space & Care Fund	<u>,</u>
Additional spaces and care fund	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
Opening/Closing & Setup	105-06
Burial Container	40.00
Burial Container	60.Q
Flower veses - Marker setting file	······································
Recording and filing seel.	85.0L
Salor taxor When	2.60
0 0 1	Total Due
الله (١	Paid receipt number 365 ) 3 242 6
no w	Balance due
( ) A	
hereby certify I am the	of the above named decedent position of remains as above indicated. I certify and represen
	orization and lagree to hold Mt. Hope Cemetery harmless from
that I have the right to make this author any liability on account of said author	rization and interment.
that! have the right to make this author any liability on account of said author	rization and interment.
any liability on account of said author	rization and interment.
any liability on account of said author	rization and interment.
any liability on account of said author	rization and interment.
hereby authorize the interment in lo hold under deed.	Chipho Hacker Signature 434 L'ST Chulch
any liability on account of said author hereby authorize the interment in lo hold under deed.	Chipho Hacker Signature 434 L'ST Chulch

#### OFFICIAL RECEIPT

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36573

From: C. Ugsaka	Address: 434 7"	Date: _8	2.2	2 Vala V	86 to
In Payment of Control Grave	aneko Sakake	sction_	ollars (\$ .	Division /	7
Acct. No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.  CITY AUDITOR  AUG 24 1988	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burist Castainers	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 — 63033 9022 — 60101 78390 —	105 40 60 35	000000000000000000000000000000000000000

E7594

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES NAME OF DECEDENT SEX DATE OF BIRTH Tameko Takaki Female 1-30-1895 8-18-1988 PLACE OF DEATH-CITY OR TOWN NAME AND ADDRESS OF SPOUSE OR OTHER INFORMANT PLACE OF DEATH-COUNTY IOR STATE IF NOT IN CALIFORNIA) Los Angeles Chiyeko Hosaka - Daughter Los Angeles NAME AND ADDRESS OF FUNERAL DIRECTOR (OF PERSON ACTING AS SUCH) CALIFORNIA LICENSE NUMBER 434 L. Street Chula Vista CA 92011 Fukui Mortuary, Inc. T-1.854-8086 TYPE OF PERMIT, CHECK ONLY ONE OF THE FOLLOWING TYPES OF DISPOSITION 1. BURIAL (INCLUDES ENTOMBMENT) 5. DISINTERMENT AND BURIAL INCLUDES B. DISINTERMENT AND REINTERMENT OF CREMATED ENTOMBMENT REMAINS IINCLUDES INURMMENT) CREMATION AND BURIAL INCLUDES INURNMENT 6 DISINTERMENT, CREMATION, AND BURIAL 9. DISINTERMENT OF CREMATED REMAINS AND (INCLUDES INURNMENT) DISPOSITION OTHER THAN IN A CEMETERY 3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 7 DISINTERMENT, CREMATION, AND DISPOSITION FOR CORONER'S USE ONLY OTHER THAN IN A CEMETERY 4. SCIENTIFIC USE ☐ 10 DISPOSITION PENDING NAME AND ADDRESS OF CEMETERY WHERE REMAINS OR CREMATED REMAINS ARE TO BE INTERRED INTERMENT Mt. Hope Cemetery 3751 Market St., San Diego, CA San Diego NAME AND ADDRESS OF CREMATORY WHERE REMAINS ARE TO BE CREMATED DATE CREMATED SIGNATURE OF PERSON IN CHARGE OF CREMATORY Evergreen Cemetery CREMATION 204 N. Evergreen Ave., L.A., CA BURIAL AT SEA ADDRESS, NEAREST POINT ON SHORELINE, OR OTHER DESCRIPTION SUFFICIENT TO IDENTIFY FINAL PLACE AND COUNTY OF DISPOSITION INSPOSITION OTHER A CEMETERY TED REMAINS NAME AND ADDRESS OF FACILITY RECEIVING REMAINS SCIENTIFIC USE N/A SIGNATURE OF APPLICANT This is to certify that I am the person having the right to control the disposition of the **ACKNOWLEDGMENT** remains of the above named decedent under provisions of the Health and Safety Code, DATE SIGNED and I hereby acknowledge that trespass and nuisance laws apply and understand that APPLICANT this permit gives no right of unrestricted access to property not ewned by me. THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS AMOUNT OF FEE PAID DATE PERMIT ISSUED LOCAL OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE REGISTRAR AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS FERMIT \$4.00 SIGNATURE OF PERSON LICENSE NUMBER OF CREMATED REMAINS DISPOSITION CERTIFICATION I CERTIFY THAT THE SPECIFIED DISPOSER. IF APPLICABLE DISPOSITION WAS MADE ON . OF PERSON IN CHARGE KENVER DATE OF DISPOSITION INDICATE ADDRESS OF REGISTRAR OF COUNTY OF DEATH IF DISPOSITION IS L.A. Health Dept. 313 N. Figueroa St., L.A., CA 90012 TO OCCUR IN ANOTHER COUNTY

COPY 1 OF THE PERMIT ACCOMPANIES THE REMAINS TO THE STATED PLACE OF DISPOSITION. THE PERSON IN CHARGE OF DISPOSITION IS RESPONSIBLE FOR COMPLETING THE PERMIT AND FORWARDING THE COMPLETED 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 BURIED AT SEA. THE LOCAL REGISTRAR MAY DESTROY ANY OF THE PERMIT AFTER ONE YEAR.

City of San Diego

Date 8-22-58

of Clas	Quoro
ine T. S. Vault	Funeral date time Wed 8/24 11-6
Vault/Liner Ø	reviale Neempseen Mortuge
	m. of regular work day or arrespe charge will be applie
ang billed to undersigned. War time vetera	
111	
Lot 07 Grave Row	Section Division/Block
Grave space & Care Fund	E-7590 195.0
Additional spaces and care fund	
Opening/Closing & Setup	50. C
Burial Container	105,0
Handling Fees	120.0
Flower vases - Marker setting fee	
Recording and filing fee	35.0
Sales taxes	
	Total Due 906.3
Paid	d receipt number 10/25/88 906. 3
0.000 0.000	Balance due
4/.	0
hereby certify I am the	of the above named decede
that I have the right to make this authorizati	ion of remains as above indicated. I certify and represe tion and I agree to hold Mt. Hope Cemetery harmless fro
any liability on account of said authorization	on and interment
hereby authorize the interment in lot I	19th Dune 1
hold under deed.	3403 Blooder
Signature of recorded holder of deed	3.0. CA 92/02A
	Sum 2611-81/2- 160
	209 000
	Telephone 9 4 800 =
	Telephone Telephone
Work Order # <b>E</b> 7595	Invoice Acct

E7595

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	T.	VAR-15380-08-00-1-86324 - 3001	1000 -0.4500000000000000000000000000000000000	SEX	DATE OF BIRTH	DATE OF DEATH
OLG	A LINOM DUDONO			Female	03-27-193	08-21-1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—C	COUNTY IOR ST	ATE IF NOT IN CALIFORNIA)	NAME AND ADDRE	SS OF SPOUSE OR OTHER INFORMANT
San Diego		San Diego			cono, Jr. (Rusband)	
Humphrey (	SS OF FUNERAL DIRECTOR IGR PERSON A	55 Broadway Chula Vista	CA	ORNIA LICENSE NUMBER	3903 Br San Die	ego, CA 92102
	TYPE OF PER/	MIT, CHECK ONLY C	ONE OF THE	OLLOWING TYPES O	F DISPOSITION	
1 SURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERME		L (INCLUDES		T AND REINTERMENT OF CREMATED (LUDES INURNMENT)
AND SET SECULARISES IN	N AND BURIAL (INCLUDES INURNMENT)		ENT, CREMATIO INURNMENT)	N. AND BURIAL		T OF CREMATED REMAINS AND OTHER THAN IN A CEMETERY
CEMETERY		7. DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY		
4. SCIENTIFIC	USE	VISC. 128-4-4 (10) (10)	MAN TRANSPORT NO THE RESIDENCE		☐ 10 DISPOSITION	PENDING
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CE		INS ARE TO BE INTERA	ED	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO	BE CREMATE	DATE CREMATED	SIGNATURE OF PER	RSON IN CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER AN IN A CEMETERY CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	Vault	RIPTION SUFFIC	IENT TO IDENTIFY FINAL	PLACE AND COUNTS	OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS				
This is to certify that I am the person having the right to control the disposition of the ACKNOWLEDGMENT remains of the above named decedent under provisions of the Health and Safety Code,		SIGNATURE OF APPLICANT				
OF APPLICANT	and I hereby acknowledge that to this permit gives no right of unrest				DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	AND MARKS THE POST	T OF FEE PAID	AUG 2 2 1988	SIGNATURE OF LOC	ALCONOMIA CO
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	NTEL DATE	IGNATURE OF F	PERSON IN CHARGE OF		ICENSE NUMBER OF CREMATED REMAIN: DISPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICÂTE ADDRESS OF RÉGISTRAR OF	COUNTY OF DEATH				

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

CITY OF SAN DIEGO AUDITOR & COMPTROLLER REPORT NO. C55-102 DEPARTMENT 072 PROPERTY DEPT-MT HOPE CEMETERY INV INV DATE ACCT CUSTOMER NAME FUND DEPT AMOUNT PAID AMOUNT BILLED DRG ACCT JOHN BUOND JR-100 072 100 072 100 072 100 072 073823 D9/13/8A 02758D PAID IN FULL 10/25/88 CK 77181 77183 77183 77184 77185 78390 78390

### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

	Date 8/22/88
You are hereby authorized and instru	acted, subject to your rules and regulations, to inter the remains
of Sanet	proguent 11.0 11 day start
in a Vault/Liner	Funeral, date, time W/W   HM - X/XT
Church, Chapel, Graveside	Mortuary.
All Funeral cars must arrive before 3	1:30 p.m. of regular work day or an extra charge will be applied
and billed to undersigned. War time	veteran
Lot 154 Grave Ro	w Section//_ Division/Block
Grave space & Care Fund	Pu heel - 8-8/45
Additional spaces and care fund	Topof boute Cypt of Tongo
Opening/Closing & Setup	320=
Burial Container	730 -
Handling Fees	320"
Flower vases - Marker setting sen	- Met
Recording and filing fee	<u> </u>
Sales taxes	<u> 21.43</u>
30	Total Due
- Andrew	Paid receipt number
	Balance due
I hereby certify I am the X XXX	of the above named decedent
that I have the right to make this auth any liability on account of said author	sposition of remains as above indicated. I certify and represent norization and I agree to hold Mt. Hope Cemetery harmless from prization and interment.
I be a character of a factor o	Caroline Voon Edd
I hereby authorize the interment in i	Signatury 311 Cornet of De
Superury of localitad habitur at dear	- Address N. D. C. Q. 92154
Start Control (Start) Bright Start Control (Start)	State 619-690-6802 Total
	4703247
Wast Order # E 7596	Invoice
Work Order # 1 0 3 0	027578
	(d)

	4	6	7/	-0/
W.O.	#	E-	10	76

NOTE

102645	San Diego, California	aug 22	1988
		•	33) / <del>12-2-3</del>

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sym of Our Charles Two DOLLARS with interest from on the unpaid principal at 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

ADDRESS

CALIF. DRIVERS LIC. #\_ E0/33763

E7596

# PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

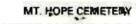
NAME OF DECEDEN	Ÿ	SOL BENCK HAK MAKE IN	SEX	DATE OF BIRTH	DATE OF DEATH
JANET TOTOKO TAKEGUCEI			female	Aug 31, 1939	Aug 19, 1988
Chule Vista San Diego NAME AND ADDRESS OF FUNERAL DIRECTOR (OR RESON ACTING AS SUCH) SOSI Cajon Blyd.			OR STATE IF NOT IN CALIFORNIA	Jack Takeguc	
		Cajon Blyd	CALIFORNIA LICENSE NUMBER	987 - 4th Av Chula Vista,	
	TYPE OF PER	MIT, CHECK ONLY ONE O	F THE FOLLOWING TYPES	OF DISPOSITION	
🗱 1, BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AN ENTOMBMENT)	O BURIAL (INCLUDES	B. DISINTERMENT AND REMAINS IINCLUDE:	REINTERMENT OF CREMATED SINURIMENTI
	N AND BURIAL (INCLUDES INURNMENT)	S DISINTERMENT, CR			CREMATED REMAINS AND THAN IN A CEMETERY
3: CREMATIO CEMETERY 4: SCIENTIFIC		7 DISINTERMENT, CR OTHER THAN IN A	EMATION, AND DISPOSITION CEMETERY	FOR COROL	NER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY V			M250004W 19	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY V	VHERE REMAINS ARE TO BE CR	EMATED DATE CREMATED	SIGNATURE OF PERSON I	N CHARGE OF CREMATORY
BURIAL AT SEA OR SPOSITION OTHER IN A CEMETERY PREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	Tom Double	CULLY -	16" to	Tof.
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	CEIVING REMAINS	-11		0
ACKNOWLEDGMENT OF APPEICANT	This is to certify that I am the per remains of the above named decr and I hereby acknowledge that to this permit gives no right of unres	edent under provisions of the respass and nuisance laws	ne Health and Safety Code, apply and understand that	<b>&gt;</b>	T .
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS THE	2000 00 100	- ATTE	STRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	SIGNATURE DATE	XOYEN LABOR OF	DISPOSITION LICENS DISPOS	E NUMBER OF CREMATED REMAINS ER. IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	20 -		

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

E-7596	100 100 100 100 60101	V. VON EIFF 072 072 072 072 072	77181 77182 77183 77185 78390	09/26/88 CK 000072 000072 000072 000072	1438	1.026.45 320.00 330.00 35.00 320.00 21.45	1,026.45	PAID IN FULL
417/80 00/801	COUTT AND	CUM MENUDIAL	cn	09/28/88 CK	R6.76	250 00	368 33	

36724

WHITE TO CUSTOMER CANARY	PROPERTY DEPARTMENT MOUNT HOPE CEMETERY		142 00	
From Caroline Von Ey	284-3151 Address: 13/1 CAY	Days: The	9-26 Acc. SD	19.08
in Payment of	toenty - six 45% et Jakeneckes	(100)	Coment	-15
Lot Grave	RowSe	ction	Division Block	The second
Invoice No. 073824 / Acct. No. 027578	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots	87007 77184 100 77184	
w.g. E - 7596	CITY AUDITOR	Opening/ Glosing Burial Containers	77181 100 77182	
Pre-Need Lot At Need On Acct	SEP 30 1988	Handling Fee Recording & Misc. Fees Pro-Need	100 77185 ————————————————————————————————————	
Pre-need Trust Cash Check C	ISSUEN BY FINE Vac	Soles Tex TOTAL PAID	9022 80101 78390 \$ 1026	45



# INTERMENT ORDER

City of San Diego

Date 8-22-88

ou are hereby authorized and instructed	Westo	Gaun	Z/
. 010 1	Funeral, date,	time File 8	126 2:0
thurch, Chapel, Graveside Child	. IV.	Recol	De Mortuar
All Funeral cars must arrive before 3:30		8	
a billed to undersigned. War time ve	- A /_	ork day or arrextra c	narge will be applie
a billed to undersigned. War time ver		-7	.11
ot 65 Grave 4 Row.	Section	Divisio	n/Block
			مفله م
Grave space & Care Fund		300	
Additional spaces and care fund	·····	**********	don of
Opening/Closing & Setup			250.00
Burial Container		***********	100.00
fandling Fees			195.0
lower vases - Marker setting fee			<del></del>
lecording and filing fee . (. Å . ‡			350
iales taxes		AU	6.50
A DO KNO A		Total Due 90	836-S
ALGUN OF ALC	Paid receipt number	36591	906050
CIVE LUE	, and receipt marries	Balan	-6
in wood	10	O	a due
hereby certify I am the	queben	of the ab	ove named decede
nd this is your authority to make dispo hat I have the right to make this author	ization and I agree	to hold Mt. Hope Cer	
ny liability on account of said authoriz	ration and interme	nt.	
hereby authorize the interment in lot	· A	merson	1-occure
old under deed.	Signati	728 50	33510
ignature of recorded holder of dead	Address	1 9	21/3
CEANT NATION STATES CONTRACTORS	State	231-571	Zp C
	Telepho	ine	-
M.	Invoi		

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	T		SEX	DATE OF BIRTH	DATE OF DEATH	
ALBERTA TOUNG			Yenale	December	24,1922 August 20,1988	
PLACE OF DEATH-		PLACE OF DEATH COUNTY	OR STATE IF NOT IN CALIFORNI	NAME AND AD	DRESS OF SPOUSE OR OTHER INFORMANT	
San Diego		San Diego		Anderso	n Young-Husband	
NAME AND ADDRES	SS OF FUNERAL DIRECTOR IOR PERSONA	Federal Blvd.	CALIFORNIA LICENSE NUMBER	728 Sou	th 33rd Street	
Anderson-R	agedale Mortuary San	Diego, CA	¥ 1329	San Die	go, CA 92113	
• .	TYPE OF PER	MIT, CHECK ONLY ONE O	F THE FOLLOWING TYPES	OF DISPOSITION		
8 A BURIAL UN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND ENTOMBMENT)	D BURIAL IINCLUDES		MENT AND REINTERMENT OF CREMATED (INCLUDES INURNMENT)	
2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CR	EMATION, AND BURIAL MENTI		MENT OF CREMATED REMAINS AND ON OTHER THAN IN A CEMETERY	
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY		7 DISINTERMENT, CR	EMATION, AND DISPOSITION CEMETERY	FOR CORONER'S USE ONLY		
4 SCIENTIFIC	USE			☐ 10 DISPOSITI	ION PENDING	
INTERMENT	NAME AND ADDRESS OF CEMETERY V			RED	San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY V			SIGNATURE OF	PERSON IN CHARGE OF CREMATORY	
BURIAL AT SEA OR SPOSITION OTHER IN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	NE, OR OTHER DESCRIPTION	SUFFICIENT TO IDENTIFY FIN.	AL PLACE AND COL	<u>NTY</u> OF DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY	EIVING BEMAINS				
ACKNOWLEDGMENT	This is to certify that I am the pe remains of the above named decr				APPLICANT	
OF APPLICANT	and I hereby acknowledge that to this permit gives no right of unres			DATE SIGNED		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS THE	an AUG 23 19	88 Noral	DE COME PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	OVE I I L	COLUMN HARGE P	DISPOSITION	LICENSE NUMBER OF CREMATED REMAINS DISPOSER. IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDIGATE ADDRÉSS OF REGISTRAR OF San Diego County De P.O. Box 85222 San	pt. of Health S				

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

36591

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 244-3181

55000 P	284-3151	0 1	
Cuderan - Day	Sto con To	Dete: 0-d	6 - 1900
From: Charles August	Abdress: JOS SO/10	2 Dollars	206.50
InPayment of	Theilas your	à Lecle	1
	11 1 3	•)	Division //
Lot Grave	Row Se	ection	Block /
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184	60 00
Acet. No.		80% Sales 100 of Lots 77184	
W.O. E-7597	CITY AUDITOR	Opening/ 100 Closing 77181 Burial 100	-300
BALANCE DUE		Containers 77185	11/2/00
	SEP 6 1988	Handling Fee 77185 Recording & 100 Miss, Feen 77185	
Pre-Need Lot At Need On Acct		Pre-litted 63033 Trust 9022	
Pre-need Trust Cash Check C	March / /	Sales Tax 60101 78390	
AC-212 (Rev. 10-87) 9756	squeb sy / That I do	CHOTAL PAID I	906 50

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 8-23-88

of	ovack
ina Bell Hener Fu	neral, date, time Muro. 8/25 2.
Vault/Liner / / s	Swies Coloxia hum
Church, Chapel, Graveside	X
All Funeral cars must arrive before 3:30 p.m. o	of regular work day or an extra charge will be applied
and billed to undersigned. War time veteran .	Witness - gound
1/0 1	a clavera regime
Lot 49 Grave 6 Row	Section Division/Block
	IECO
Grave space & Care Fund	
Additional spaces and care fund	****************************
Opening/Closing & Setup	320.0
[25] [1] [1] [1] [1] [1] [1] [1] [1] [1] [1	
Burial Container	1000
Handling Fees	195,00
Flower vases - Marker setting toe	ØI
Recording and filing fee.	35.0
	150
Sales taxes ()	11016
200	Total Due
Paid re	ceipt number
	Balance due
W	Balance due
hereby certify I am the	of the above named deceder
and this is your authority to make disposition	of remains as above indicated. I certify and represe
that I have the right to make this authorization any liability on account of said authorization s	and I agree to hold Mt. Hope Cemetery harmless fro
arry hability of account of said authorization a	ind interment.
I hereby authorize the interment in lot I	
hold under deed.	Signicture
EV. I Was a law of the control of th	Address
Signature of recorded holder of deed	State Ziu Co
	5-900-900
	Telephone
Al or	
Work Order # <b>E</b> 7598	Invoice #

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN		7258410	an symmetry with	HEAR CONTRACTOR	Ts	EX	DATE OF	RIRTH	_	DATE OF	DEATH
JAN JOSEF MOVAK			127	male	April		1924	A PERSONAL PROPERTY.	31, 1988		
PLACE OF DEATH—CITY, OR TOWN  San Diego  NAME AND ADDRESS OF FUNERAL DIRECTOR IOR SERSON A  Lovis Colonial Bendonsh		F	San D		(OR STATE	F NOT IN CALIFORNIAI	Publi	c Ada	inist	rator,	HER INFORMANT San Diego C
		San Die	Elicajon Blyd.		1	A LICENSE NUMBER	5201 "A" Ruffin Road San Biego, CA 92123				
F	Ť	YPE OF PERMI	T, CHECK	ONLY ONE OF	THE FOLL	OWING TYPES O	F DISPOSITI	ION			
S 1 BURIAL (IN	CLUDES ENTOMBMENT)			INTERMENT AND	BURIAL III	NCLUDES				INTERMENT	OF CREMATED
2. CREMATION	N AND BURIAL IINCLUDES	NURNMENT	G 6 DIS	INTERMENT, CRE	EMATION, A	ND BURIAL				MATED REM	
3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY     4. SCIENTIFIC USE		THAN IN A	7. DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY			FOR CORONER'S USE ONLY			ONLY		
INTERMENT	NAME AND ADDRESS OF			S OR CREMATED		ARE TO BE INTERR	11-70 VIV.		COUN	San D	iego
CREMATION	NAME AND ADDRESS OF	REMATORY WHI	ERE REMAIN	S ARE TO BE CRE	MATED [	ATE CREMATED	SIGNATUR	E OF PE	RSON IN C	HARGE OF (	CREMATORY
BURIAL AT SEA OR POSITION OTHER IN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, MEASES	ON SHORELIN	E, OR OTHE	R DESCRIPTION	SUFFICIENT	TO IDENTIFY FINAL	PLACE AND	COUNT	Y OF DISP	OSITION	1
SCIENTIFIC USE	NAME AND ADDRESS OF	FACILITY RECEI	VING REMAI	NS							76)
ACKNOWLEDGMENT OF APPLICANT	This is to certify that remains of the above and I hereby acknowl this permit gives no ri	named decede	ent under p pass and n	provisions of the visance laws o	e Health a apply and	nd Safety Code, understand that	SIGNATUR  DATE SIGN		PLICANT		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACC OF THE CALIFORNIA HEALTH A AUTHORITY FOR THE DISPOSIT	ND SAFETY CODE	AND IS THE	AMOUNT OF FEE	PAID	UG 24 198		E OF LO	AL PERIS	TRAR ISSUIT	BERMIT CH
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE	ON 2/05	V/SX	SIGNALIZE	OF PERS	UN TOTAL				UMBER OF O	REMATED REMAINS
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF R	EGISTRAR OF CO	OUNTY OF D	DEATH	a					38	

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

# PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

NAR'	٧		CEM
100			
100	***	 	AU

	284-3151		- "	00
some Court of Sand	List Address 5201-A Re	Poto: _ k	24.50	19 9212
Mula kundie	Jajte - Lenen	101100 p	ollars (\$ 114	7.40,
In Payment of	on for Morales	til	mulo	TYAUDI
Lot 49 Grave	6	ection 6	Diffeion	12 OR
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 50% Sales of Lots	67007 77184 100 77184	6 000
Acct. No. 2-75-98		Opening/ Closing Buriel	77181	9 00
BALANCE DUE		Containers Handling Fee	77182 100 77185 19	5 00
Pre-Need Lot At Need On Acct	1 1	Recording & Misc. Fees Pre-Need / 00 Trust 75/35	77183 J	5 90
Pre-need Trust Cash Check P	ISSUED BY SOUNCE WELL	Sales Tax TOTAL PAID	80101 78390 1/ C/	900
AC-212 (Rev. 10-87)				, 11/0

# MT. HOPE CEMETERY

# INTERMENT ORDER

City of San Diego

8-23-88

of Last	Kry Digwn
in a	Funeral, date time WLA, 8/24 2:33
Church, Chapel, Graveside Sulat	Bulla Paggale 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. War time vetera	in constit 18" flat
224	1 9
Lot 3351 Grave Row	Section Division/Block
Grave space & Care Fund	100.00
THE RESIDENCE OF THE PARTY OF T	
Opening/Closing & Setup	10/1
Burial Container	
Handling Fees	
Flower vases - Marker setting fee	
	280
Recording and filing fee	
Seles taxes	199 1
all of the Bo	Total Due
Sage Of Die	d receipt number 263 00
No Ble Vi	Balance due
T W	
I hereby certify I am the and this is your authority to make dispositi	on of remains as above indicated. I certify and represen
that I have the right to make this authorization any liability on account of said authorization	ion and lagree to hold Mt. Hope Cemetery harmless from
any manning on account of across dutilities	
I hereby authorize the interment in lot I	Senature
	Reference and the second secon
hold under deed.	0.204031
hold under deed. Signature of recorded holder of steed	Address
	State Za Cod

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES SEX NAME OF DECEDENT DATE OF BIRTH DATE OF DEATH Male August 18. KARL BAY BROSM PLACE OF DEATH-CITY OR TOWN NAME AND ADDRESS OF SPOUSE OR OTHER INFORMANT PLACE OF DEATH-COUNTY FOR STATE IF NOT IN CALIFORNIA Gladys Mae Brown-Mother San Diego San Diego NAME AND ADDRESS OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH CALIFORNIA LICENSE NUMBER 2608 Upshur Brive 050 Federal Blvd. Sam Diego, CA 92110 F 1329 derson-Regodale Mortuery &

	TYPE OF PERM	MIT, CHECK <u>ONLY ONE</u> OF THE FOLLOWING TYPES O	F DISPOSITION
ES - SHOWN	ICLUDES ENTOMBMENT)  N AND BURIAL (INCLUDES INURNMENT)	DISINTERMENT AND BURIAL (INCLUDES ENTOMBMENT)      B. DISINTERMENT, CREMATION, AND BURIAL (INCLUDES INGRIMENT)	B. DISINTERMENT AND REINTERMENT OF CREMATED REMAINS (INCLUDES INURNMENT)      DISINTERMENT OF CREMATED REMAINS AND DISPOSITION OTHER THAN IN A CEMETERY
3 CREMATIO CEMETERY 4 SCIENTIFIC		7 DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY	FOR CORONER'S USE ONLY
ERMENT		HERE REMAINS OR CREMATED REMAINS ARE TO BE INTERR	Son Diese
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE HEMAINS ARE TO BE CREMATED DATE CREMATED	SIGNATURE OF PERSON IN CHARGE OF CREMATORY
OR SITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	Wooden Live	L PLACE AND <u>COUNTY</u> OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	EIVING REMAINS	
ACKNOWLEDGMENT OF APPLICANT	remains of the above named decea and I hereby acknowledge that tre	rson having the right to control the disposition of the dent under provisions of the Health and Safety Code, espass and nuisance laws apply and understand that ricted access to property not owned by me.	SIGNATURE OF APPLICANT  DATE SIGNED
L'OCAL' REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIEDIN	DE AND IS THE NOTHING SAME AUG 2,3 1980	SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON IEN	SIGNATURE OF PERSON IN CHARGE DE	DISPOSER IF APPLICABLE
IF DISPOSITION IS	INDICATE ADDRESS OF REGISTRAR OF C		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE MATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

TO OCCUR IN ANOTHER COUNTY

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

	264-3151		7.5		,0
Jakes Brown	11 2607 /ln	Date:	luc	39	1000.
on Junares	Mente, - Ment	na//10 0	ollars (\$	1990	2
fnPayment of	IL R Browns	Burea	0		- A - A - A - A - A - A - A - A - A - A
Lot 3351 Grave	RowS	ection /	The same	Division	9
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184 —	20	00
Acct. No.	-OR	80% Sales of Lots Opening/ Closing	100 77184 — 100 77181 —	64	18
BALANCE DUE	CITY AUDITOR	Burial Containers	100 77182 —		
Shamot bot	SEP 6 1988	Handling Fee Recording & Misc. Fees	77185 — 100 77183 —	35	00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	36 (1)	Pre-Need Trust Sales Tax	63033 9022 — 60101		301
AC-212 (Rev. 10-87) 45%	ISSUED STATE AND SOLES	TOTAL PAID	78390 —	199	00

# Pu head

# MT. HOPE CEMETERY

# INTERMENT ORDER

City of San Diego

Date 8/03/88

VIII	Date 8 /03/10
You are hereby authorited and instructed, su	bject to your rules and regulations, to inter the remains
of Chlora M.	Brooks
ina topleal fault F	uneral, date, time
Church, Chapel, Graveside	; 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. War time veteran	NO.
Lot 2651 Grave Row	Section Division/Black _/O
Grave space & Care Fund Pu )4	eed C-9748
Additional spaces and care fund	nome 32.00
Opening/Closing & Setup	320 =
Burial Container	17500
Handling Fees	abo 170 00
Flower vases - Marker setting fee	
Recording and filing fee	<u> 35°</u>
Sales taxes	_ <i>//-37</i> _
	Total Due
Paid (	receipt number 36576 711.37
d. 0,5550.0	Balance due
my	full
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 simains as above indicated. I certify and represent in and I agree to hold Mt. Hope Cemetery harmless from and interment.
I hereby authorize the interment in lot I hold under deed.	x Chlora M. Brook
Signature of recorded holder of deed	San Deegs, Ca. 92115
	Telephone
E mann	Invoice #
k Order # E 7600	Acct. #

OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY	E	Nº	36576
From GRlora M. Bro	284-3151  okv Address: 5764 Cata	Date Ste	18.9	12115
In Separate Payment of By-	need opening theory	Cout Vo	ollars (\$ 7	v. fu
Invoice No.	ROW SIND THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots	67007 77184 100 77184	sion 10
W.O. <i>E-7600</i> BALANCE DUE	CITY AUDITOR	Opening/ Closing Buriel Containers Handling Fee Recording &	77181 100 77182 77182 77185 100	1
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Ac-212 (Nev. 10-87)	ISSUED BY LONGILL STATE	Misc. Fees Pra-Need Trust Skies Tax TOTAL PAID	77183 63033 9022 60101 78390	7// 37

# NEWHOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 8-24-88

ina T.S. Vault Fy	ineral, date, time Sic 866	11:30
Church, Chapel, Graveside Laursk	/ 0	Mortuary
All Funeral cars must arrive before 3:30 p.m.		be applied
nd billed to undersigned. War time veteran	<del></del> •	5000024.069
Lot DS Grave S Row	Section Division/Block	12
Grave space & Care Fund	. 42	5.00
Additional spaces and care fund		
Opening/Closing & Setup		20.0
Burial Container	<i>[</i> 2	15.02
Handling Fees		10,00
Flower vases - Marker setting fee		
Recording and filing fee		35.00
Sales taxes	······	1.3
C. M. Coll M. 18	Total Due	10-0
Paid re	sceipt number	0
De de la como	Balance due	
hereby certify am the	of the above named	deceden
and this is your authority to make disposition that I have the right to make this authorization	and lagree to hold Mt. Hope Cemetery harn	
any liability on account of said authorization	and interment.	)
hereby authorize the interment in lot I	Damantha Joses	
noid under dead.	3056 Clay Ave	990
Signature of recorded holder of deed	California 9:	2113
	(FIB) 333-4969-	
Was Contra E 7601	Invoice #	
Work Order #	Acct. #	

W.O. #_	0-160	0/
0	1	- 0
llean	11. A. DU	10 08

\$ 1206.37 San Diego, California

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Centery or San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of the trace 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as afterney's fees.

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

PRENT NAME Amontha Jones SIGNATURE SIGNATURE CALIF. DRIVERS LIC. # 115130148

MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE

# OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF BAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36590

	264-3151		
From Ludes on Londa	le Address: 5050 Adde	Date: 6-	50 92/0
- Che Thousan	the hundred	N 37 Dollars (\$	1206.37
In Payment of	the willia fore	2	
Lot 105 Grave	5 Row_s	action 2	Division / 2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67097 20% Sales Care 77184 — 80% Sales 100 of Lots 77184 —	31600
W.O. E-760/	CITY AUDITOR	Opening/ 100 Closing 77181 — Burist 100	320 00
BALANCE DUE	SEP 6 1988	Containers 77182 - 100 Handling Fee 77185 - Recording & 100	170 00
Pre-Need Lot At Need On Acct	36////	Misc. Fees 77183 — Pre-Need 69033 Trust 9022 —	1/ 20
Pre-need Trust Cash Check D	ISSUED BY STRALLE VORO	Sales Tax 60101 78390 - TOTAL PAID \$	1206 37
		STATE OF THE PARTY	

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7601

		one derion him minute no me			15.55
NAME OF DECEDEN	σ		SEX	DATE OF BIRTH	DATE OF DEATH
		RUTH ALMA JOHES	Female	May 27, 15	32 August 21, 198
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY IOR	STATE IF NOT IN CALIFORNIA	NAME AND ADDRE	SS OF SPOUSE OR OTHER INFORMANT
50 SW	n Diego	San Die	go	Diame	Jones - Daughter
NAME AND ADDRES	SS OF FUNERAL DIRECTOR (OR PERSON	ACTING AS SUCHE SAN DiegoCA	LIFORNIA LICENSE NUMBER	3056 CI	ay Avenue
Anderson-In	gedale Mort.; 5050 P	ederal Blvd., Ca.	1329	San Die	go, California 9211:
	TYPE OF BE	RMIT, CHECK ONLY ONE OF TH	E SOLLOWING TYPES O	NE DISPOSITION	
1	THE OF TE	MIN, CHECK ONE! ONE OF IT	t roughing tires c	, Did Cullion	
1. BURIAL (IN	ICLUDES ENTOMBMENT)	5 DISINTERMENT AND BU ENTOMBMENT)	RIAL (INCLUDES		T AND REINTERMENT OF CREMATED (LUDES INURNMENT)
2 CREMATIO	N AND BURIAL UNCLUDES INURNMENT	6 DISINTERMENT, CREMAT			T OF CREMATED REMAINS AND OTHER THAN IN A CEMETERY
3 CREMATION CEMETERY	N AND DISPOSITION OTHER THAN IN A	7. DISINTERMENT, CREMAT	NOW AND DISPOSITION	FOD C	ORONER'S USE ONLY
4 SCIENTIFIC		OTHER THAN IN A CEM		□ 10 DISPOSITION	
				a to disposition	renoms
A	NAME AND ADDRESS OF CEMETERY	WHERE REMAINS OR CREMATED RE	MAINS ARE TO BE INTERR	ED	COUNTY
TERMENT	Mt. Bone Cometery:	3751 Market Stree	t; San Diego,	California	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY	WHERE REMAINS ARE TO BE CREMAT	DATE CREMATED	SIGNATURE OF PER	SON IN CHARGE OF CREMATORY
OR DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	3-6	ELINE, OR OTHER DESCRIPTION SUFI	FICIENT TO IDENTIFY FINA	1.0	OF DISPOSITION
SCIENTIFIC	NAME AND ADDRESS OF PACINTY RE	CEIVING REMAINS	Blue 1	INV .	71
USE	N/A		Du	CO (VA-	
ACKNOWLEDGMENT OF	This is to certify that I am the p remains of the above named de and I hereby acknowledge that	edent under provisions of the He	ealth and Safety Code,	SIGNATURE OF APP	PLICANT
APPLICANT	this permit gives no right of unre	하고 있는 것이 하는 이 아이들이 그리고 있다면 하는 것이 없는 것이었다면 없어요.		1,14-1,14,141,181,181,181,181,181	
LOCAL	THIS PERMIT IS ISSUED IN ACCORDANCE W OF THE CALIFORNIA HEALTH AND SAFETY O AUTHORITY FOR THE DISPOSITION SPECIFIES	OOE AND IS THE	AUG 25 198		L REGISTRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON 8	SIGNATURE SIGNATURE	PERSON IN CHARGE		ICENSE NUMBER OF CREMATED REMAIN DISPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR O	P. 0.	Nedords Box 85222 Mego, Califor	nia 92138-	5222

OPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

# Breneed

# MT. HOPE CEMETERY INTERMENT CROER

City of San Diego

Date 8-25-88

	-	a - 970-2-2-
n a Fu	neral, date, time	
Church, Chapel, Graveside	10 VII.	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. War time veteran		
ot 69 Grave 4-Row	Section 17 Divis	ion/ <del>Block-</del> 7
Grave space & Care Fund		
Additional spaces and care fund	14 21	
pening/Closing & Setup	LA DO	330.00
Surial Container	N. Y. B	125.00
landling Fees		170.00
lower vases - Marker setting fee	L All	
ecording and filing fee	18	35.0
iales taxes	5	11.3
1 20 10	Total Due	711.3
10	3608	4 211.37
ų Paid fe	ceipt number 2600	(N) (
	Bala	nce due
	of the	above named deceden
hereby certify I am the	사용적인 이 이 교육이 있고 이 경험이 이 경험이 되었다. 그 경험을 받아 있다면 하는데 없었다면 살	
hereby certify I am the and this is your authority to make disposition hat I have the right to make this authorization any liability on account of said authorization a	and lagree to hold Mt. Hope C	
and this is your authority to make disposition hat I have the right to make this authorization in liability on account of said authorization hereby authorize the interment in lot !	and lagree to hold Mt. Hope C	
and this is your authority to make disposition hat I have the right to make this authorization in liability on account of said authorization hereby authorize the interment in lot !	and I agree to hold Mt, Hope C and interment.	
nd this is your authority to make disposition hat I have the right to make this authorization ny liability on account of said authorization hereby authorize the interment in lot I	and I agree to hold Mt. Hope C and interment.	
nd this is your authority to make disposition hat I have the right to make this authorization ny liability on account of said authorization of hereby authorize the interment in lot I old under deed.	and lagree to hold Mt, Hope Cand interment.  Signature Address State	emetery harmless from
nd this is your authority to make disposition hat I have the right to make this authorization ny liability on account of said authorization hereby authorize the interment in lot I sold under deed.	and I agree to hold Mt. Hope Cond interment.  Signature  Address	emetery harmless from
and this is your authority to make disposition hat I have the right to make this authorization in y liability on account of said authorization hereby authorize the interment in lot I hold under deed.	and lagree to hold Mt, Hope Cand interment.  Signature Address State	emetery harmless from

36584

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

	264-3151	0	_ 07
From: Mattanie Ste	cle Address: 4421 &	Date: 6.0	50 92113
to kended	clever 37/10	Dollars (5	211.37
In Payment of	Vin your	Joe She	rno
Lot 69 Grave		ection 17	Division 7
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Seles Care 77184 —	
Acct. No.	CITY AUDITOR	80% Sales 100 of Lots 77184 — Opening/ 100 Closing 77181 —	
W.O. E FOL	6 1988	Burial 100 Containers 77182 —	MALE RES
BALANCE DUE SCO, OO	SEP 6 150	Handling Fee 77185 — Recording & 100 Misc. Fees 77183 —	
Pre-Need Lot At Need On Acct	1///	Pre-Need 63033 Trust 9022 —	21137
Pre-need Trust A Cash Check A	ISSUED BY MINIA Word	Seles Tex 60101 78390 — TOTAL PAID \$	211 30
AC-212 (Hev. 10-87) 62-19			

# OFFICIAL RECEIPT

VAHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORMA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36611

(640) PINKAUDITOR	204-3151		
10 th. 0 4	-1 11/11	Date: 1-	1986
From: ///////	Address:	Non !	ac.
the hendred	rent sello	Dollars (	\$ 190.00
in Payment of	Maca Missi	for	wheeper.
Styl	200		
Lot 69 Grave	Rows	ection /1	Division /
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184	
Acct. No.		80% Sales 100 of Lots 77184	
w.o. E-7602		Opening/ 180 Closing 77181	MARKET BELLEVILLE
BALANCE DUE 210,00	CITY AUDI	TORBurial Containers 77182 100	
BALANCE DUE		Handling Fee 77185	
Pre-Need Lot At Need On Acct	erp 13	19 0 ording & 100 Pre-Need 63033 Trust 9022	19000
Pre-need Trust Cash Check		Trust 9022 Sales Tax 60101 78390	
2501110000	Source of the Color	TOTAL PAID \$	19000
AC-212 (Mev. 10-87) 7 7 1 40 0 1		1	

# OFFICIAL RECEIPT

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

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36658

PINKAUDITOR	264-3151	Date:	9-8	,	88
From Juna Ste	Address:		ollars (\$ <u>S</u>	D.a	),
Payment of Grave	4-top Row See	ation /7		vision 7	
Acct. No	NOTVALIDEORIPURPOSE 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 260-00  Pre-Need Lot . At Need . On Acct	SEP 14 1988	Burial Containers Handling Fee Recording & Alisc Fees	100 77182 ————————————————————————————————————	50	
Pre-need Trust Cash Check Chec	ISSUED BY FOR AND WIN	Sules Tax TOTAL PAID	9022 90101 78390 \$	50	00

### OFFICIAL RECEIPT 36696 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY PINK ..... AUDITOR 264-3151 Division Grave. Section Block Row NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT Invoice No 20% Sales Care 50% Sales Acct. No of Lots 77184 CITY AUDITOR Opening/ Closing 77181 Surial Containers SEP 21 1988 BALANCE DUE Handling Fee Recording & 100 77183 Pre-Need 63033 Pre-Need Lot At Need On Acct Trust Pre-need Trust Sales Tax 80101 78390

AC-212 (Rev. 10-87)

TOTAL PAID

OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151	Nº 36992
From Herman Ad Just Xal	Dienced Aust	Dollars (\$ CO'D)
Invoice No.  Acct. No.  W.O. E - 7602	ROW_S  NOT VALID FOR PURPOSE STATED UNLESS STAMPED TPAID' IN THIS SPACE.	CREDIT 67007 2/3 1008 00 Closing 77181 00 Containers 77182
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Ac-212 (Rev. 10-87)	ISSUED ST SANDER WAL	Hendling Fee 77185 Recording & 100 Misc. Fees 77183 Pre-Need 83033 Typel 8022 Sales Tax 80101 78390 TOTAL PAID \$

From: Center Character Cha	MOUNT HOPE CEMETERY 284-3151  MANAGERES: 634 S.  MANAGERES: 634 S.	Date: 11-2 UGIN LO Dollars (\$	88 100 500 500 500 500 500 500 500 500 500
In Payment of	Herman Ver	gens to	Division 17
Invoice No. 2-760 2 W.o. 2-760 2	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	OCTION  CREDIT 67007 20% Sales Care 77184 — 80% Sales 100 of Lots 77184 — Opening/ 100 Closing 77181 — Burial 100 Containers 77182 —	DEC 02 198
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	1,1	Handling Fee	30 00

WHITE ..... TO CUSTOMER

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINKAUDITOR	MOUNT HOPE CEMETERY 264-3151	The same of	10 - 00
4	-0 1111615	Date:	100
From Mila Me	Ell Address: 940/	Charles	(me, so
Ante stalle	in (1)	Dolla	are ys 30-00 )
InPayment of	day goomen	on of	willing.
Lot 69 Grave	4 Row S	ection /	Division 7
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	Turn of the same	7007
Acct. No.	PAID IN THIS SPACE.	80% Sales	100
w.o. 2-7602	DEC	Burial	100 7181 100
BALANCE DUE	9	URD	7182 100 7185
	The state of the state of	Recording & 7	7183 57 (1)
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	11/11	Sales Tax 0	10033 9022 10101 1330
AC-212 (Rev. 10-07) 73/	ISSUED BY GNAW J. N	CAN FAID	. 50 00
	NO. A. P. CO. CO. CO. CO. CO. CO. CO. CO. CO. CO	THE RESERVE OF THE PARTY OF THE	

### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

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 will be applied billed to undersigned. War time veteran Grave space & Care Fund Additional spaces and care fund ...... Opening/Closing & Setup ... Flower vases - Marker setting fee ... Recording and filing fee ...... ×165 Total Due ...... Paid receipt number . Balance due . ereby 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. sture of recorded holder of deed Zin Cod Work Order #

PY-683 (REV. B-85)

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7603

SANDRA -	- CWIK		Yemale	June 15,1	JULY 21 1988	
Pine Vall	PLACE OF DEATH—CITY OR TOWN PING VALLEY  PLACE OF DEATH—COUNTY FOR STATE IF NOT IN CALL San Diego		ATE IF NOT IN CALIFORNIA)			
T387 Broadway, Lemon Groy		CA 92045	ORNIA LICENSE NUMBER  941	San Diego		
7.2	TYPE OF PERA	AIT, CHECK ONLY ONE OF THE P	COLLOWING TYPES OF	F DISPOSITION		
I GURIAL UN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND BURIA ENTOMBMENTI	LINCLUDES		AND REINTERMENT OF CREMATED UDES INURNMENT)	
2. CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMATIO	N. AND BURIAL		OF CREMATED REMAINS AND THER THAN IN A CEMETERY	
3 CREMATION CEMETERY 4 SCIENTIFIC		7 DISINTERMENT, CREMATIO OTHER THAN IN A CEMETE		FOR CO	RONER'S USE ONLY	
INTERMENT	MAME AND ADDRESS OF CEMETERY W	San Diago.	CA 92102	D	San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY	HERE REMAINS ARE TO BE CREMATED	DATE CREMATED	SIGNATURE OF PERS	SON IN CHARGE OF CREMATORY	
BURIAL AT SEA OR DISPOSITION OTHER WIN A CEMETERY EMATED REMAINS	N/A COM	ine OR OTHER DESCRIPTION SUPPLY MAY - 4 Plate	Harller -	- Lendy	OF DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	72	Sker		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tre this permit gives no right of unresh	dent under provisions of the Heal espass and nuisance laws apply a	th and Safety Code, and understand that	SIGNATURE OF APPL  DATE SIGNED	ICANT	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE	AUG 2 9 1988	SIGNATURE OF LOCA	AL BEGINTAD ISSUING PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	30 SIGNATURE OF P	ERSON IN CHARGE OF E		CENSE NUMBER OF CREMATED REMAINS SPOSER, IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH				

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

# MT. HOPE CEMETERY

# INTERMENT ORDER

Qunisha BROOK San Diego

Date 8-26-88

of	a Brown	to inter the remains
ina Beel Dine (60A) Fyin	eral, date, time	8/2912/30
Church, Chapel, Graveside	Pagoda	le_ Mortuary.
All Funeral cars must arrive before 3:30 p.m. o	f regular work day or an extra ch	narge will be applied
and billed to undersigned. War time veteran -	GM	t the
1.3/2 Bow	Section Divisio	n/Block 9
Lot E Brave Row	Section Divisio	MARION
Grave space & Care Fund		100.00
Additional spaces and care fund		
Opening/Closing & Setup		64.00
Burial Container	0-10 W	49.00
Flower vases - Marker setting fee	fur war	50-0
Flower vases - Marker setting fee	173	
Recording and filing flog	<i>V</i>	35.00
Seles taxes	/	300
20 South	Total Due	299.0
Paid rec	seipt number $_{-2657'}$	299.00
he was color	Baland	e due
N M 10 000	Pat I	
I hereby certify I am the and this is your authority to make disposition o	f remains as above indicated. I	ove named decedent certify and represent
that I have the right to make this authorization a any liability on account of said authorization a	and I agree to hold Mt. Hope Cerr nd interment.	etery harmless from
I heraby authorize the interment in lot I		
hold under deed.	Signature	
Signature of recorded holder of deed	Address	
LE SURGER DE LE PRODUCTION DE LE CONTRACTION DE	State	Zip Code
	Telephone	
	Invoice #	
Work Order # E 7604	Invoice #	

# OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# CITY OF BAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36597

PINKAUDITOR	264-3151	8.2	9 8
From Cubecom-Par	Maladress 5050 Stale	Date: Mirel	Son Decro
In Payment of	unisher Cerie	Dollars (	13 Vitine
2/2/		1	Division 9
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 67007 20% Sales Care 77164 80% Sales 100	20 00
Acct. No. E-7604	CITY AUDITOR	of Lots 77184 Opening/ 100 Closing 77161 Buriel 100	6000
RALANCE DUE	SEP 6 1	Containers 77182 100 Handling Fee 77185 - Recording & 100	3500
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	/ //	Mec. Fee 77183 - Pre-Need 63033 Trust 9022 - Sales Tax 60101 78390 - 78300 - 7	310
AC-212 (Rev. 10-67) /0068	ISSUED BY DING GU	TOTAL PAID 6	299 00

E-7604

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

				7-22-2	
NAME OF DECEDEN		N. 100	SEX	DATE OF BIRTH	DATE OF DEATH
-	Quinisha Qineye Bro	and the second second	Female	March 5, 1988	Aug. 24, 1988
PLACE OF DEATH-	Mary Miles of Memory	San Dieg	TY FOR STATE IF NOT IN CALIFORNIA	Anthonette Clay	SPOUSE OR OTHER INFORMANT
NAME AND ADDRES	R Diego SS OF FUNERAL DIRECTOR (ORTHON P	The second secon	CALIFORNIA LICENSE NUMBER	2848 "L" Stree	t
inderson-Reg	sdale Mortuary San Di	ego, CA	F 1329	San Diego, CA	92102
4	TYPE OF PER	MIT, CHECK ONLY ONE	OF THE FOLLOWING TYPES (	OF DISPOSITION	
1 BURIAL (IN	ICLUDES ENTOMBMENT)	5. DISINTERMENT A	ND BURIAL UNCLUDES	B. DISINTERMENT AND REMAINS (INCLUDES	REINTERMENT OF CREMATED INURNMENT!
	IN AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, C	CREMATION, AND BURIAL NMENT)		REMATED REMAINS AND THAN IN A CEMETERY
4. SCIENTIFIC		D / DISINTERMENT, O OTHER THAN IN	CREMATION, AND DISPOSITION A CEMETERY	FOR CORON  10. DISPOSITION PENDIN	ER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMA 51 Market St.:	TED REMAINS ARE TO BE INTERP	- NO.	unty San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	O to Co	REMATED DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER TO NA CEMETERY CHARLED REMAINS		1/1-	NUTRICION TO DENTIFY FIN	AL PLACE AND COUNTY OF DI	SPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	25	1	
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pe remains of the above named dece and I hereby acknowledge that to this permit gives no right of unresi	dent under provisions of espass and nuisance law	the Health and Safety Code, s apply and understand that	<u> </u>	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE . CA OR	AUG 2 9 198	(L.   Third (Albert Hill) Albert (Little Cont.)	SISTRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON 3/3/-1-9	129/54 SIGNAT	USE OF PERSON TO CHARGE OF	DISPOSITION LICENSE DISPOSE	NUMBER OF CREMATED REMAINS R, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAN OF San Diego County Dept.		an Diego, CA 921	38-5222	4

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

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Dete 8-29-88

	Date	
You are hereby authorized and instructed, subjection	ct to your rules and regulations, to inter the remains	ains
0 00 1	my surrent	0)
n a Karring Fun	ergi, date, time	20
church, Chapel, Graveside	Morte Morte	агу.
dl Funeral cars must arrive beries 3:30 p.m. of	regular work day or an extra charge will be app	lied
and billed to undersigned. War hope veteran _	No.	
457 60%	- 10	2
ot TDD / Grave Row	Section Division/Black / C	_
Grave space & Care Fund	uble Cusht 695	- 65
Additional spaces and care fund	u open tota Crest -	_
pening/Closing & Setup	320.0	劢
Jouble C	ulst 330.	a
10.	20.0	1
landling Feas		
lower vases - Marker setting fee	1 C91	10
lecording and filling fee	1. X. 1	12
Sales taxes	127	7
0 0 0	Total Due	**
Paid rec	eipt number 900.0	20
\X () \/	Balance/dua	45
110000	1 Statute 193108 2000	15
hereby certify is in the	of the above ramed dece f regrains as above indicated. I certify and repre	dent sent
hat I have the right to make this authorization a my liability on account of said authorization ar	nal agree to hold Mt. Hope Cemetery harmless to ind interment.	irom
	SULTI Auto	_
hereby authorize the interment in lot I old under deed.	Signature Signature	10
100 1100 000a.	ASSES JULIAN AVE	_
ignature of recorded holder of deed	SAN DEGO CA TOU	3
	230-1893	-
	G	
er i	Invoice #	
Nork Order # <b>E</b> 7605	Acct. #	20
N 503 (DEV 0.85)	Supplied and the suppli	

MOTE

,		115					
\$	721	XX	Å,	Ø.	San	Diego,	California

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of leventer hundred twentione of 400 - DOLLARS with interest from falled /- 1988 on the impaid principal at 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix . as attorney's fees.

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

PRINT NAME Manthe Conantes SIGNATURE Glanthe Conantes

ADDRESS 1802 JULIAN AVE SAN DEGO CA. 9

CALIF. DRIVERS LIC. #/

OFFICIAL RECEIPT  WHITE TO CUSTOMER CAMARY CEMETERY PINK AUDITOR	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY	Nº 36884
From Matha Cey	Van Hoteles: 1802 Jule	on One SD
in Payment of Ser	exect on cons	Dollars (\$ 200-00)
Involce No. 073825		Division Division Pleat  ATT 67007  I Sales Care 77184  5 Sales 100
ACCL. No	of t Op Clo Bu Co	ots 77184
Pre-Need Lot Af Need On Acct Pre-need Trust Cash Check	Sada (1)	Indiling Fee 77185 11 1 9 1988 100 9 10 9 1

AND SHADOWS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7605

NAME OF DECEDENT  JORGE GOMEZ Serafin			SEX Male	Sept. 16,1951	Aug. 26, 1988	
PLACE OF DEATH—COUNTY OR STATE IF NOT IN CALIFORNIA LICENSE NUMBER AND ADDRESS OF FUNERAL DIRECTOR FOR PERSONS STINEMPORTAL AVE. CALIFORNIA LICENSE NUMBER AND ADDRESS OF FUNERAL DIRECTOR FOR PERSONS STINEMPORTAL AVE.			La	NAME AND ADDRESS OF SPOUSE OR OTHER INFORMAN ROSAUTA COMEZ - VI fe		
Cypress Vic	ss of Funeral Director for Pendon pw/Bonham Brothers Se	670 CALIFORNIA LICENSE NUMBER	San Diego, CA	The state of the s		
3.00	TYPE OF PERA	WIT, CHECK ONLY ONE OF T	HE FOLLOWING TYPES C	OF DISPOSITION		
BURIAL (IN	ICLUDES ENTOMBMENT)	5. DISINTERMENT AND B	URIAL (INCLUDES	B DISINTERMENT AND R		
THE STATE OF THE S	N AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, CREMI			EMATED REMAINS AND THAN IN A CEMETERY	
3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 4. SCIENTIFIC USE			7. DISINTERMENT, CREMATION, AND DISPOSITION		ER'S USE ONLY	
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATED F			Sen Blego	
CREMATION	NAME AND ADDRESS OF CREMATORY W	MERE REMAINS ARE TO BE CREM	ATED DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY	
BURIAL AT SEA OR DISPOSITION OTHER IN A CEMETERY MATED REMAINS	ADDRESS, NEAREST PONYJON, SHOREL	INE OR OTHER DESCRIPTION SU	Botto	L PLACE AND COUNTY OF DIS	POSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	dent under provisions of the I espass and nuisance laws app	dealth and Safety Code, oly and understand that	SIGNATURE OF APPLICANT  DATE SIGNED	. 70	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED II	E AND STHE . CA	DATE PERMIT ISSUED	significant settles de la	CHANGES LINE PERMY	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPUSSMENT HAS MADE ON	SIGNATURA	SHUN BE		NUMBER OF CREMATED REMAIN: R. IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	0			

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

#### OFFICIAL RECEIPT 36599 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY 264-3151 Date: Qua 30 Division Block Section Grav NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 77184 Invoice No 20% Sales Care 80% Sales CITY AUDITOR of Lots Acct. No Opening/ Closing 77182 BALANCE DUE Handling Fee 77186 Recording & Misc. Food 77183 Pre-Need Lot On Acct Pro-Need **B3033** At Need 9022 Trust Pre-med Trust Cash Check Sales Tax 80101 TOTAL PAID AC-212 (Ray, 10-87)

CITY OF SAN DIESO AUDITOR & COMPTROLLER REPORT NO. C65-102

### PAID INVOICE REPORT BY DEPARTMENT AS OF 11/08/88

DATE: 11/08/86 TIME: 225514 PAGE: 10

DEPARTMENT 072

PROPERTY DEPT-NT HOPE CEMETERY

INV	INV	ACCT NO	CUSTOMER NAME FUND DEPT	ORG	ACCT	J/0	PAYM DATE OPER	PD PAYM BY REF NO BN/EQ FACILI	AMOUNT PAID AMOUNT APPLIED	AMOUNT BILLED	UNPAID
073825	8-76	05	MARTHA CERVANTES 100 072 100 072 100 072 100 072 60101 67007		77181 77182 77183 77185 78390	000072 000072 000072	2	CA	200 • 00 48 • 43 49 • 95 5 • 30 72 • 04 3 • 25 21 • 03	1,321.45	PARTIAL PAYMENT

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 8-29-88

of	D care	u,	4. 5.
in a 7.5. Vacett Fu	nergi, date, time	1 9/2	2:00
Church, Chapel, Graveside	alo de	wes late	Rea Portuary
All Funeral cars must arrive before 3:30 p.m.	of regular work day or	an extra char	pe will be applied
billed to undersigned. War time veteran .	WW 1-		O
35	Section	Division/4	10 m
ot Grave Row	Section	DivisionA	steek
Grave space & Care Fund	*******		
Additional spaces and care fund			
pening/Closing & Setup	: 1		320,0
urial Container	and		178.00
landlin Feet A. I. D.	Labor		170. a
lower vases - Marker setting fee			000
AUG 3 0 1988			<u>35.0</u>
ales taxed T. HGPE CEMETERY	*******		1/0
CITY of SAN DIEGO, CALIF.	Total D	الم	7/1-51
Paid re	ceipt number	598	711.37
	- A	Balance d	ue 🌫
Arm	elitu		-54,50
not this is your authority to make disposition	of remains as above i	ndicated, I cen	named decedent tify and represent
hat I have the right to make this authorization iny liability on account of said authorization is		, riope Cemete	ary narmiess from
	1. UanA	ho Ton	Rousson
hereby authorize the interment in lot I old under deed.	Signature 302	Som	01
ignature of recorded holder of deed	Address & A	92	102
	S 200	- 200	77 Zo Cod
	Telephone	15/	/
40-24	Invoice #		
North Corder # <b>E</b> 7606	(B) (C)((G))		
Nork Order # L (UUU	Acct.#		The latest and the la

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151  La Address: 302/ Slm  Laural and 3/00 = 1	Date: Opplied Dalle	Nº 3	0.88
In	ROW SE  NOT VALID FOR PURPOSE STATED UNLESS STAMPED  PAID' IN THIS SPACE.  CITY AUGITOR  6 1988  SEP  SEP  SEP	20% Sales Care 7 80% Sales of Lots 7 Opening/ Closing 7 Burial Containers 7 Handling Fee 7 Recording & Misc. Feee 7 Pre-Need Trust 8	Division Black 100 77184 30 77181 100 77181 100 77182 100 77183 30033 9022 902101 178390 \$ 7//	10 000000 377

E-7606

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

		SOC DESCRIPTION THAT I THE	L agu	Laure of pionis	TERROR COLOR		
NAME OF DECEDEN	ALEXANDER ECKERT		sex male	May 8. 1897	Aug 28. 1988		
PLACE OF DEATH-	CITY OR TOWN	San Diego	IDR STATE IF NOT IN CALIFORNIA)				
Levis Col	onial/Benbough San D	tego, CA 92164	T-480	3021 Elm Stre San Diego, Ca	TO SUCCESSION OF THE SUCCESSIO		
5 B	TYPE OF PER	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION			
T. BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT	BURIAL (INCLUDES	8. DISINTERMENT AND REMAINS IINCLUDES	REINTERMENT OF CREMATED SINURNMENT)		
	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CRE		9. DISINTERMENT OF CONTROL OF CON	REMATED REMAINS AND		
3. CREMATIO CEMETERY  4 SCIENTIFIC		7 DISINTERMENT, CRE OTHER THAN IN A	MATION, AND DISPOSITION CEMETERY	FOR COROL	NER'S USE ONLY		
NTERMENT	NAME AND ADDRESS OF CEMETERY W		REMAINS ARE TO BE INTERRI	100	San Diego		
CREMATION	NAME AND ADDRESS OF CREMATORY V	WHERE REMAINS ARE TO BE CRE	MATED DATE CREMATED	SIGNATURE OF PERSON I	N CHARGE OF CREMATORY		
BURIAL AT SEA OR ISITION OTHER IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE		SUFFICIENT TO IDENTIFY FINAL 500 — Build	3	ISPOSITION		
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC						
ACKNOWLEDGMENT  OF  APPLICANT	This is to certify that I am the pe remains of the above named decr and I hereby acknowledge that to this permit gives no right of unces	edent under provisions of the espass and nuisance laws of	e Health and Safety Code, apply and understand that t owned by me.	DATE SIGNED			
LOCAL REGISTRAR <sup>©</sup>	THIS PERMIT IS ISSUED IN ACCORDANCE WIT- OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS THE	PAID DATE PERMIT ISSUED AUG 3 1 198	SIGNA OF LOCALE	Comros, M.J. W		
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED 9	SIGNATUS	OYEU TOUR	DISPOSITION LICENS	E NUMBER OF CREMATED REMAIN SER, IF APPLICABLE		
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	4	*	4:		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR Y THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 8-30-68

of	ulda	Mocek	2	1-
ina Coll	Legen	Funeral date, time	74 11	201 9/2
Church, Chapel, Grave	Man al	EXKARL SI	Can	Mortuary
All Funeral cars must a	errive before 3:30 p.	m, of regular work da	ay or an extra cira	rde will be applied
age billed to undersign			* • N. C. B. C.	**************************************
1100				10
Lot ZO & Grave _	Row	Section	Division/	Block /O
Grave space & Care Fu	ınd			000001 <del>2</del>
Additional spaces and	care fund			
Opening/Closing & Se	tup	PAL	$\bigcap$	300.00
Burial Container				100.00
Handling Fees				145.00
Flower vases - Marker	setting fee	ter the reservation of the body to		
Recording and filing fe		ITY of SAN DIEGO	CALIF.	35.00
Sales taxes	UK. MX			6.50
1/100	MVIDO	Tota	al Due	606-80
1 me 1	MIN Pair	receipt number	26615	606-50
MULLIY	1000		Balance	dua - 6
100 1000	W.		Dalarke	
I hereby certify I am the	•		of the abov	e named deceden
and this is your authori that I have the right to n	nake this authorizat	ion and learee to bol	Mt. Hope Ceme	tery harmless from
any liability on account	t of said authorizatio	in and interment	<b>_</b>	
I hereby authorize the	interment in lot I	13 HOXIV	<b>3</b> 40	
hold under deed.	morning and a second second second	// Signature		
Signature of recorded halder of deed	,	Adress		
NT - 0 12 1100 200 0000-000 - 0000 - 0000		Steen		Zip Cod
		Talaphene		
( <u>/442</u> ))		Invoice #	S	
Work Order # E 7	607	Acct. #		
44 VIII VIVOI II	Part Control of the C	Trout, II		

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

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36615

PINK AUDITOR	264-3151	0	1 00
From: Clayer Ma	Turkeye 684 S.	Date: 1	pan ave, E
In Payment of	Wilson Mock	Dollars	1 606. D
Lot 4686 Grave	Row Se	oction	Division /
Invoice No.  Acct. No.  W.O. F - 1607  BALANCE DUE  Pre-Need Lot At Need On Acct Pre-need Trust Cash Check  AC-212 (Rev. 10-87)	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE  CITY AV ISSUED BY SEP	CREDIT 20% Sales Care 7718 80% Sales Care 7718 80% Sales Care 7718 60% Sales 7718 Container 7718 Containers 7718 Handles Fee 7718 Man Ples 7718 Sales Tax 9010 7839 TOTAL PAID	320 00 100 00 105 00 35 00

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-1607

NAME OF DECEDEN	Matilda Moeckel	akas	SEX	DATE OF BIRTH	DATE OF DEATH
	Hilda Moeckel		Female	Mar. 26, 1900	
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH-COUNTY	OR STATE IF NOT IN CALIFORNIA		SPOUSE OR OTHER INFORMANT
	La Nesa	San Diego		Doris Folson	
NAME AND ADDRES	S OF FUNERAL DIRECTOR FOR PERSON A	CTING AS SUCHI	CALIFORNIA LICENSE NUMBER	1325 So Oran	ge
684 80.	follison Ave El Ca	ion. Ch 92020	F-1022	El Cajon, Ch	92020
100	THE OF RE	MIT, CHECK ONLY ONE OF	THE FOLLOWING THREE O	E DIEROCITION	
2	TIPE OF PER	MII, CHECK ONLY ONE OF	THE POLLOWING TIPES O	FDISTOSITION	
I 1 BURIAL (IN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND ENTOMBMENT)	BURIAL IINCLUDES	8 DISINTERMENT AND P	
2 CREMATION	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREM		9 DISINTERMENT OF CR	EMATED REMAINS AND
	AND DISPOSITION OTHER THAN IN A		30		AND THE COUNTY OF THE PROPERTY OF
CEMETERY		7. DISINTERMENT, CREA	MATION, AND DISPOSITION	mana - se a re-relativisti ili ili ili ili ili ili ili ili ili i	ER'S USE ONLY
4 SCIENTIFIC	USE	S. Manuel Manuel March		☐ 10 DISPOSITION PENDIN	G
CREMATION  BURIAL AT SEA OR OSTITION OTHER V A CEMETERY WHATED REMAINS	NAME AND ADDRESS OF CEMETERY WAR AND ADDRESS, NEAREST POINT ON SHORE	3751 Market Street	DATE CREMATO	Ca 92102 Su AIGNATURE OF PERSON IN	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	CEIVING REMAINS			.03
ACKNOWLEDGMENT  QF  APPLICANT	This is to certify that I am the peremains of the above named decorded I hereby acknowledge that to this permit gives no right of unres	dent under provisions of the espass and nuisance laws of	Health and Safety Code, ply and understand that owned by me.	SIGNATURE OF APPLICANT  DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE MIND ISTTHE	SEP 11 190	SIGNATURE OF LOCK EG	PAR ISSUING BERNIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION		SIGNATIVE	OF PERSON IN CHARGE A		NUMBER OF CREMATED REMAINS R, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	O- a		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date\_8.30-88

	5415
	ucted, subject to your rules and regulations, to inter the remains
of Werne	7: 0/2 11.62
na T.S.Vaelt	Fungral, date, time 7/2 //. 90
Church, Chapel, Graveside	20 9 Stave; Rossalle Mortuary.
All Funeral cars must arrive before 3	3:30 p.m. of regular work day or an extra charge will be applied
nd billed to undersigned. War time	veteran
ot 101 Grave 9 Roy	w Section 2 Division/Blook 12
or 1221 Grave nor	W decition street of the c
Grave space & Care Fund	995.0
Additional spaces and care fund	es Sp 748+ 10 for
pening/Closing & Setup	Localpat 485.00 for 320.00
	175,00
landling Fees	190.00
lower vases - Marker setting fee	
lecording and filing fee	35.00
iales taxes	10/12/88 11.31
() asx	Total Due
0 000	Paid receipt number 36822 (206.31)
2.No	Balance due
1	
hereby certify I am the and this is your authority to make dis	of the above named decedent sposition of remains as above indicated. I certify and represent
hat I have the right to make this auth my liability on account of said autho	norization and I agree to hold Mt. Hope Cemetery harmless from
	Engles Y La
hereby authorize the interment in lo	ot I Signature 17 18
	1 / Carles Nais
ignature of recorded holder all deed	The first of the case
	Total 698657
E mono	Invoice #
Vork Order # E 7608	Acct. #
v columny 6.06)	- Frankli P

Quans 30 19 88

\$ 1206.37 San Diego, California

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of twelve limited single 37/00 DOLLARS with interest from Months 2/988 on the unpaid principal at 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

PRINT	NAME	*	SIGNATURE	ne	my.	Dean	
	The state of the s			/		- Nacional State of the State o	

ADDRESS

CALIF. DRIVERS LIC. # N368 34

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7608

NAME OF DECEDEN	п		SEX	DATE OF BIRTH	DATE OF DEATH	
70-	HERMAN MONRO	E LONDSEY, JR.	Male	Aug. 27, 195	1 Aug. 26, 1988	
ALCOHOL STATE OF THE STATE OF T	San Diego	PLACE OF DEATH—COUNTY IOR ST Sen Diego		NAME AND ADDRESS EVELYN	OF SPOUSE OR OTHER INFORMANT	
NAME AND ADDRES	SS OF FUNERAL DIRECTOR (OR PERSON AC	ING AS SUCH SAN DIRECT CALIF	ORNIA LICENSE NUMBER	337 Redcr	est Drive	
	gsdale Mort.: 5050 Fe		1329	San Diego	, California	
. ,	400000000000000000000000000000000000000	(CECSE or Providence Company of Authority Annual Company	INTERNATION CHARGOS AND CONTRACTOR	THE REPORT OF THE PARTY OF THE	The second secon	
	TYPE OF PERM	IT, CHECK ONLY ONE OF THE	FOLLOWING TYPES O	F DISPOSITION		
1. GURIAL (IN	ICLUDES ENTOMOMENT)	5. DISINTERMENT AND BURIA	L IINCLUDES		ND REINTERMENT OF CREMATED DES INURNMENT)	
100 ASS SEVERAL CONT.	N AND BURIAL (INCLUDES INURNMENT)	B. DISINTERMENT, CREMATIC	N, AND BURIAL		F CREMATED REMAINS AND HER THAN IN A CEMETERY	
3. CREMATION	N AND DISPOSITION OTHER THAN IN A	T a historian way or a		>con con	AUTOR USE AND	
4 SCIENTIFIC		7. DISINTERMENT, CREMATIO OTHER THAN IN A CEMET		FOR CORONER'S USE ONLY  10 DISPOSITION PENDING		
100 100	NAME AND ADDRESS OF CEMETERY WA	IERE REMAINS OR CREMATED REMA	INS ARE TO BE INTERRE	O.	COUNTY	
INTERMENT	Mt. Hope Cemetery: 3	751 Market Street:	San Diego, C	al i fornia	San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY WE	Control of the Contro	The second secon		N IN CHARGE OF CREMATORY	
BURIAL AT SEA OR POSITION OTHER IN A CEMETERY	ADDRESS, NEAREST POINT ON SHOPEH	NE OR OHER OSCRIPTION SUFFIC	IENT TO IDENTIFY FINAL	PLACE AND COUNTY OF	F DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	IVING REMAINS			*	
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per- remains of the above named dece- and I hereby adknowledge that tre this permit gives no right of unrestr	lant under provisions of the Heat spass and nuisance laws apply o	th and Safety Code, and understand that	SIGNATURE OF APPLIC	ANT	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	THIS PERMIT 4.00	AUG 3, 1 198		TRAR ISSUING PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON IN	SIGNATURE OF	SELL SEE OF	DISPOSITION LICE	NSE NUMBER OF CREMATED REMAIN: POSER, IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDIČATE ADDRESS OF REGISTRAR OF C	P. 0.	(Records Box 85222 Hege, Califo	rnia 92138-5	222	

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

#### OFFICIAL RECEIPT Nº 36822 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERY MOUNT HOPE CEMETERY 264-3151 Division Grave Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT "PAID" IN THIS SPACE 20% Sales Care 90% Sales of Late Surint Containers BALANCE DUE Handling Fee 190 Recording & Pre-Need At Need On Acct Pre-Need Lot Trust Sales Tax 60101 Pre-need Trust TOTAL PAID AC-212 (Rev. 10-87)

017000 0012300 070C10	100 072	77183	000072	411.0	125.00	*******	PAID IN FULL
073826 09/13/88 027576 E-7608	EVELYN BEAN 100 072 100 072 100 072 100 072 100 072 100 072 60101 67007	77181 77182 77183 77184 77185 78390 77184	10/12/88 CK 000072 000072 000072 000072 000072	36822	1,206.37 320.00 175.00 35.00 396.00 170.00 11.37 99.00	1.206.37	PAID IN FULL

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# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

9-1-88

of Rafael al	ellingur)	lations, to inter the remains
in a Fu	neral, date, time	9/21
Church, Chapel, Graveside Alleger		Mortuary
VI Funeral cars must arrive before 3:30 p.m.	of regular work day or an	4/39 extre charge will be applied
nd billed to undersigned. War time veteran .	- 376	
ot 120 Grave 9 T6 Prow	Section /	Division/Block-/2
Grave space & Care Fund		55,0
Additional spaces and care fund		7. 11
Opening/Closing & Setup		
Burial Container		
landling Fees		
lower vases - Marker setting (as		
Recording and filing fee J		
Sales taxes		
100	Total Due .	145. a
CO CO Paid to	eceipt number	MANAGA MASAMBAN SAN SAN SAN SAN
10' i 10"	sceipt number	Balance due
1). Pulled		Balance que
hereby cereby I am the	of	the above named deceder
and this is your authority to make disposition that I have the right to make this authorization	of remains as above indic	ated. I certify and represen
any liability on account of said authorization	and interment.	pe cemetery narmiess nor
hereby suthorize the interment in lot I	Signature	
iota dinasi deba.	Address	
ignature of recorded holder of deed	Stete	Zhp Cox
	Telephone	
	1 magazine	
86	A STATE OF THE PARTY OF THE PAR	625
Work Order # <b>E</b> 7609	Invoice #	13535

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

-	-		
E	-1	1	na
_	- 1	0	07

NAME OF DECEDEN			SEX	DATE OF BIRTH	DATE OF DEATH
	RAFAEL ALEXANIER	Vasquez	MALE	9-14-1969	3-28-1988
PLACE OF DEATH-		**************************************	IOR STATE IF NOT IN CALIFORNIA		OF SPOUSE OR OTHER INFORMANT
	San Yaidro	San Diego	· ·		ounty Coroner
NAME AND ADDRES	SS OF FUNERAL DIRECTOR FOR PERSON AG	Attornal city, Ca	CALIFORNIA LICENSE NUMBER	5555 Overlan	
Heath Fune:	ral Home, 611 Highland	Ave.	807	pen nago,	<u> </u>
	TYPE OF PERM	NIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES	OF DISPOSITION	
1 BURIAL IIN	ICLUDES ENTOMBMENTI	5. DISINTERMENT AND ENTOMBMENT)	BURIAL (INCLUDES	8. DISINTERMENT AN	ND REINTERMENT OF CREMATED
2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, CRI	EMATION, AND BURIAL		F CREMATED REMAINS AND IER THAN IN A CEMETERY
3 CREMATIO CEMETERY	N AND DISPOSITION OTHER THAN IN A				
4. SCIENTIFIC		OTHER THAN IN A	EMATION, AND DISPOSITION CEMETERY	5000	ONER'S USE ONLY
M 4. SCIENTIFIC	. USE			10. DISPOSITION PEN	IDING
TERMENT	NAME AND ADDRESS OF CEMETERY WI			RED	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W		The same of the sa	SIGNATURE OF PERSON	N IN CHARGE OF CREMATORY
BURIAL AT SEA OR OSITION OTHER IN A CEMETERY FEMATED REMAINS	ADDRESS, NEAREST POINT ON SHORELI	ne, or other description	SUFFICIENT TO IDENTIFY FINA	AL PLACE AND COUNTY OF	DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	IVING REMAINS		12-V	
ACKNOWLEDGMENT OF	This is to certify that I am the per remains of the above named dece				ANT
APPLICANT	and I hereby acknowledge that tre this permit gives no right of unrestr			DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	EANDISTHE SALOO	SEP 0 2 198	SIGNATURE OF CAL	HE LABOUNG PERMIT.D
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	1111-1-10-1-101	AN DATE!	PERSON IN CHARLEST		nse number of cremated remain Oser, if applicable
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	- O - 132	SALK.	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

MT. HOPE CEMETERY

### INTERMENT ORDER

fully of the 11 A PM City of San Diego

You are hereby authorized and instaucted, subject to your rules and regulations, to inter the remains meral, date, time Church, Chapel, Graveside Mortuery. All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge and billed to undersigned. War time veteran Grave space & Care Fund ....... Additional spaces and care fund Opening/Closing & Setup ...... Flower vases - Marker setting fee ...... Recording and filing fee ...... Sales taxes 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. Artrirame ers of recorded holder of deed State Zie Cos invoid Work Order # Acct. A

PY-593 (NEV. B-85)

	T.	JSE BLACK INK-M	AKE NO ALTE	RATIONS OR ERASUR	ES E	-7610		
NAME OF DECEDEN	at .			SEX	DATE OF BIRTH	DATE O	F DEAT POUND	
JOSE LUIS	-CITY OR TOWN	PLACE OF DEATH	COUNTY (OR ST	MALE ATE IF NOT IN CALIFORNIA	JUNE 23.	1961 MAY	. 29, 1988	
ENCINITAS	SS OF FUNERAL DIRECTOR FOR PERSON AF	SAN DIROC	)	ORNIA LICENSE NUMBER	SAN DIEG	DEMENTY COR		
GLEN ABBEY	MORT. 3838 BONITA RD.	BONITA, C		r-1371	SAN DIEG	272-6		
	TYPE OF PER	MIT, CHECK ONLY	ONE OF THE	FOLLOWING TYPES O	F DISPOSITION			
BURIAL (IN	NCLUDES ENTOMBMENT)	5 DISINTERM	IENT AND BURIA	AL UNCLUDES		ENT AND REINTERMEN		
2 CREMATIO	IN AND BURIAL (INCLUDES INURNMENT)		ENT, CREMATIO INURNMENT)	N, AND BURIAL		ENT OF CREMATED RE		
3 CREMATIO CEMETERY	ON AND DISPOSITION OTHER THAN IN A	D 7 DISINTERM	ENT, CREMATIO	N, AND DISPOSITION	FOR CORONER'S USE ONLY		CARLO CONTRACTO	
4 SCIENTIFIC	USE	OTHER TH	OTHER THAN IN A CEMETERY			☐ 10 DISPOSITION PENDING		
CHEMATION  BURIAL AT SEA OR DISPOSITION OTHER IN A CEMETERY MATEO REMAINS SCIENTIFIC USE	NAME AND ADDRESS OF CREMATORY WAR POLICY BOTH ADDRESS, NEAREST POINT ON SHOREL	WE OR OTHER DESCRIPTION	RIPTION SUFFICE	With 4 15	Yestin K	PERSON INCLURED OF THE PROPERTY OF DISPOSITION		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	dent under provisio espass and nuisano	ns of the Heal e laws apply o	th and Safety Code, and understand that	SIGNATURE OF DATE SIGNED	APPLICANT		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE	OF FEE PAID	SEP/0 7 1999	SIGNATURE OF	LOCAL REGISTRAR ISSU	1.D. CO	
CERTIFICATION OF PERSON IN CHARGE	I CERTIFY THAT THE SPECIFIED 2	////	- And	PERSON CHARGE	DISPOSITION	DISPOSER, IF APPLIC		
OF DISPOSITION	182-6TOB-1-12 1	NTER DATE	veo 1	w Xtotten			ABLE	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 9/1/88

You are hereby authorized and instructed, sub	ject to your rules and regulation	ns, to inter the remains
of alle M.	ourson	- 00
in a Rell duier Fu	neral, date, time 76-1	us-dr.m.
Church, Chapel, Graveside	2 meghlor	Wilshall Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra	charge will be applied
and filled to undersigned. War time veteran .	1/2	12 -
100 (6)	- 2	15
Lot A Grave Bow Row	Section Divi	sion/Block 7
Grave space & Care Fund ON Bo	ttone - Line	2500
TOTAL CONTROL OF THE PROPERTY	w	OLIVER
Additional spaces and care fund		
Opening/Closing & Setup	<del></del>	320.00
Burial Container		100,00
Handling Fee	1	<u> 88,30</u>
Flower vases - Marker setting fee 1988		***************************************
Recording and Mine 15025 EEME TERY Sales taxes Sales taxes	1	3500
CITY of SAN DIFCO	<b>1</b>	6.50
Sales taxes		(Zon 90
here of	Total Due	800-c
Paid re	ceipt number <u>36626</u>	800.00
Contract	Bal	ance due
I hereby certify I am the		above named decedent
and this is your authority to make disposition that I have the right to make this authorization	and I agree to hold Mt. Hope C	
any liability on account of said authorization	and interment.	
I hereby authorize the interment in lot I	2602 660 CH	
hold under deed.	Signature	
Signature of recorded holder of deed	Address	
	Stone	Zip Cede
	Telephone	
40.00	Invoice #	
Work Order # E 7611	Acct. #	
Work Order #	ACCL #	

OFFICIAL RECEIPT  WHITE TO CUSTOMER CAMARY CEMETERY PINK AUDITOR	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151		Nº /	36626
From Medly Witch	Matury 3655-52	Let !	18/3	2,103
In Payment of Tal	ment feed of alie	e bline Denield	m-PA.	Cew (24 V03
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 00% Sales of Lots	67007 77184 100 77184	
W.O. F 7611 BALANCE DUE	CITY AUBITOR	Opening/ Closing Burial Containers Handling Fee Recording &	100 77181 100 77182 100 77185	3 38
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 10-87)	ISSUED BY COMMITTEES	Misc. Fees Pre-Need Trust Seles Tax TOTAL PAID	77183 e3033 9022 90101 78390	650

E-7611

		USE BLACK INK-MAKE NO	ALTERATIONS OR ERASU	RES	
NAME OF DECEDEN	EL JOHNSON		SEX FEMALE	AUG 5, 1907	AUG 26, 1988
PLACE OF DEATH—CITY OR TOWN  SAN DIEGO  NAME AND ADDRESS OF FUNERAL DIRECTOR JOB BERSON  SAN DIEGO, CA 92103		PLACE OF DEATH—COUNTY SAN DIEGO	(OR STATE IF NOT IN CALIFORNIA	PUBLIC ADMINIST	
		T'AVENUE,"	F-119	939 MAIN STREET EL CENTRO, CA	Parameter of the second of the
)	TYPE OF PER	MIT, CHECK ONLY ONE OF	F THE FOLLOWING TYPES (	OF DISPOSITION	
1. BURIAL (IN	ICLUDES ENTOMBMENT)	5. DISINTERMENT ANI ENTOMBMENT)	D BURIAL (INCLUDES	B DISINTERMENT AN	ND REINTERMENT OF CREMATED LES INURNMENT)
2: CREMATION	N AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, CR			F CREMATED REMAINS AND ER THAN IN A CEMETERY
3. CREMATION CEMETERY 4. SCIENTIFIC		7. DISINTERMENT, CR OTHER THAN IN A	EMATION, AND DISPOSITION CEMETERY	FOR CORO	ONER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W			RED .	SAN DIEGO
CREMATION	NAME AND ADDRESS OF CREMATORY W	WHERE REMAINS ARE TO BE CRI	Clarti Apull	SIGNATURE OF PERSON	IN CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER AN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON GUIDE	Dollow	SUFFICIENT TO IDENTIFY FINA	AL PLACE AND <u>COUNTY</u> OF	DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS		300	
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pe remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	dent under provisions of the espass and nuisance laws	e Health and Safety Code, apply and understand that it owned by me.	DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FORTHE DISPOSITION SPECIFIED	DE AND IS THE \$4.00			START IS NO SERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISTORTION WAS MADE ON	TER DATE	OSCU STORE OF	ASPOSITION LICEN	ISE NUMBER OF CREMATED REMAINS OSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	d		

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

### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 9-2-88

You are hereby authorized and instructed, subject	to your rules and regulations, to	inter the remains
a company	adegas	11 0
na Dole Sept Funer	d, date, time week 9/	6 10m
Church, Chapel, Graveside	lave Copress Ve	Mortuary
All Funeral cars must arrive before 3:30 p.m. of re	gular work day or an extra cha	rge will be applied
pd billed to undersigned. War time veteran		
4 6	TARE	16
ot Grave Row	Section Division	Block
Grave space & Care Fund		
Additional spaces and care fund	03 KX	453.500,00
	92	CANADA NA SECONO
Opening/Closing & Setup	1	1684
Burial Container		
landling Fees		
lower vases - Marker setting fee		
Recording and filing fee	V	35.00
Sales taxes 🚚	Va.	
nach	Total Dua	203.45
(V) (V)	√ Total Due	
Paid receip	ot number	18
No	Balance	due
N. l.	(f)	
hereby certify I am the hard this is your authority to make disposition of m	of the above indicated. I ce	e named deceder
hat I have the right to make this authorization and	I agree to hold Mt. Hope Ceme	tery harmless from
any liability on account of said authorization and	Interment.	11
hereby authorize the interment in lot I	Georal A.	colaris
nold under deed.	6190 LORCA	18
Particle March Mar	Address A . T. T. T.	el onue
ignature of receeded holder of deed	State State	Zip Co
	1 82-4890	
29	780 - 2444	The same of the sa
W_3	Invoice #	
E 7612		
Vork Order # V J. W	Acct. #	

W.O.	#	6	-761	2
	31			

2321/		1 1-1
\$ 203.45	San Diego, California	September 2 19 88
Cematery or San Diego	City Treasurer, or order at 3751	maker promises to pay to Mt. Hope Market Street, San Diego, Ca 92102 DOLLARS with interest from at the rate of 12 percent per annum,
payable on demand.		, amum,
Interest after maturity are payable in lawful to renewals, replaceme maturity and waives p of limitations. A mar against his/her separa	y will accrue at the rate indicate money of the United States. The nts and extensions of time for paresentment, demand and protest arried person who signs this note at the property for any obligation contents.	ter bear interest on the principal. ted above. Principal and interest maker will be liable and consents syment hereof before, at or after and the right to assert any statute agrees that recourse may be had ontained herein. If any action be pay such sum as the Court may fix
Safety Code autho	I, Article 2, Para. 7528 of the S rizes the removal of any remains past due or unpaid.	State of California Health & from a plot for which the
PRINT NAME GEORGE	A, RDAMS SIGNATURE	Leorge a. Chams
	LORCA DRIVE S	21
CALIF. DRIVERS LIC. #_		

MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE

26 E-761.2 E ROBICHAUD WINETEER RODICHOUD KATHERIN CHURCH Moresan TUCKER Solomon Floren FRONK SHARUS SHARLUS CHAS そうる たいろの MARY E412 EVGENE

WINETEER O. K. Marsell HAGEMAN 4 PAUL

# LUCY 5 WORGAN 210000 commos CHURCHILL MARY MARVIN CASSIOY BELL CLAUSE JAMES

17

Homer

4 VERNON FOSTER

AVEY DITTON

DOAK

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ANDREW !

GEANCES

MARTHA

SALLIE

16126 XOLB

RHOOM

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WILLETON

FROSK

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MRS E.W.

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Modern

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S PARTAGE

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SmITH

PRESENCH

Charlo

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JABEL

STEPHENSO

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SYONEY

DRED

HANNAH

FRAND

Emily

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BARNICK

JOSEPH CAHILL

21/110 m 50N

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CREELMAN

EVELYN CANILL

CREELMAN

MAYBEILE

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JOSEPH

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BUEHRER

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HUDS TON

Seo.

Wm. FINCH

Warren

James

42

G.CENERLY

SUEHRER

BANTA

Elias Phom

JOHN

E-7612

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES-

NAME OF DECEDEN			SEX	DATE OF BIRTH	DATE OF DEATH
PLACE OF DEATH-	Theim Royer Ada city or town Diego	PLACE OF DEATH—COUNTY (OR S)	FORE &	THE RESERVE AND ADDRESS OF THE PARTY OF THE	917 Sept. 1, 1988 ss of spouse or other informant Adams - Husband
NAME AND ADDRES	SS OF FUNERAL DIRECTOR FOR PERSON AS CONTRACTOR Brothers		FORMA LICENSE NUMBER	6290 Lorce San Diego	Drive
TO ASSESS AS TO AS TO ASSESS AS TO AS TO ASSESS AS TO A	TYPE OF PERM ICLUDES ENTOMBMENT) IN AND BURIAL (INCLUDES INURNMENT)	TIT, CHECK ONLY ONE OF THE  5. DISINTERMENT AND BURL ENTOMBMENT)  6. DISINTERMENT, CREMATIC	AL (INCLUDES)	B. DISINTERMENT REMAINS (INCI     9 DISINTERMENT	AND REINTERMENT OF CREMATED LUDGS INURNMENT)
3 CREMATIO CEMETERY 4 SCIENTIFIC		(INCLUDES INURNMENT)  7. DISINTERMENT, CREMATIC OTHER THAN IN A CEMET		.70157780.0001	DRONER'S USE ONLY PENDING
INTERMENT	NAME AND ADDRESS OF CEMETERY WI	3751 Market Street	. San Blago,	CA. 92182	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CREMATE	D DATE CREMATED	SIGNATURE OF PER	SON IN CHARGE OF CREMATORY
BURIAL AT SEA OR OSITION OTHER IN A CEMETERY MATED REMAINS	ADDRESS. NEAREST POINT ON SHORELI	NE, OR OTHER DESCRIPTION SUFFICE  ALTHOUGH THE CONTROL OF THE CONT	to identify final	e Catho	OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECO	WINT REMAINS BOLL			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named decer and I hereby acknowledge that tre this permit gives no right of unrestr	dent under provisions of the Hea spass and nuisance laws apply	ith and Safety Code, and understand that	SIGNATURE OF APPLICATION OF APPLICAT	LICANT
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE	SEP 2 198	SIGNATION OF LOS	E. Camara, M.D.
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CENTIFY THAT THE SPECIFIED 9	TER PATEL	W Lelle	DISPOSITION LI	CENSE NUMBER OF CREMATED REMAIN ISPOSER, IF APPLICABLE
IF DISPOSITION IS. TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH			

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

CITY OF SAN DIEGO AUDITOR & COMPTROLLER REPORT NO. C65-102

# PAID INVOICE REPORT BY DEPARTMENT AS DF 09/28/88

DATE: 09/28/88 TIME: 213624 PAGE: 7

DEPARTMENT 072

PROPERTY DEPT-MT HOPE CEMETERY

I NV ND	DATE	ACCT	CUSTOMER NAM		RG ACCT	J/O OPER	PD PAYM BY REF ND BN/EQ FACILI	AMOUNT PAID AMOUNT APPLIED	AMOUNT BILLED	UNPAID BALANCE
073827	6-76		SEORSE A- AD 100 07 100 07	72	77162 77183	09/20/88 000072 000072	CK 1154	203.45 168.45 35.00	203.45	PAID IN FULL

NUMBER OF INVOICES PAID TOTAL AMOUNT PAID

203-45

# MT OPE CEMETERY INTERMENT ORDER

Our west city	of San Diego	2-88
1 Ju		
of Here & Bett	ject to your rules and regulations, to i	nter the remains
in a Fu	neral, date, time	- 3
Church, Chapel, Graveside	8 //	Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charg	e will be applied
and billed to undersigned. War time veteran		
Lot 86 Grave / Bow	Section Division 49	12
W		
Grave space & Care Fund	***********	——
Additional spaces and care fund	N 4201	11150
Opening/Closing & Setup	$y \sim 3\alpha v$	640.00
Burial Container	********************************	350.00
Handling Fees	*****	320.00
Flower vases - Marker daying fee	_ 4/_	
Recording and filing We	DAS.00	70.00
- 17		21.45
Sales taxed		13810
()///	Total Due	1.201.73
VV~ Paid re	caipt number	
7	Balance de	JB
I hereby certify I am the	of the obour	named decedent
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 s	of remains as above indicated. I cert and lagree to hold Mt. Hope Cemete	ify and represent
I hereby authorize the interment in lot I	Belly Ly Fr	lomas
hold under deed.	28-650 Secon	D#176
Signature of recorded holder of deed	7 - the Res Olis	CA
	State (6/9)	324-0193
	Telegiture	
F wasa	Invoice #	
Work Order # <b>E</b> 7613	Acct. #	



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

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

E-7613 Nº

39732

In Payment of	19/9
Diogram	)
Lot Grave Row Section Division Black	1
Invoice No	1
W.O. F /5// F /6/3  BALANCE DUE  Opening/ Closing 77181  Buriel 100 Containers 77182  100 100 100 100 100	
Hecoding & 100 Mitc, Fees 77183	1013
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check Sales Tax 60101 78390 Total Paid Total Paid Sales Tax 78390 Total Paid Sal	10



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY 29 1990 E-763

39239

From Flack , Bett, M	out Address & Co Second	Date:	-17.	hellik	(C)
In Payment of C's	Seven & Pla 12	1 DEW	ollars (\$	71/4.	
Lot 196 Grave	/ RowS	ection 2		Division /-	_د
Învoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184 —	20	0
Acct. No.		80% Sales of Lots Opening/	77184 — 100		100
W.O. F-1613 1 1511	是 传 是 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Closing Burial	100		
BALANCE DUE		Containers Handling Fee	77182 — 100 77185 —		
		Recording & Misc. Fees	77183		
Pre-Need Lot At Need On Acct O		Pre-Need Trust Sales Tax	63033 9022 ——	57	00
	ISSUED BY 16 acts	TOTAL PAID	78390	MI	00
AC-212 (Rev. 10-67)			-	7/	

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

M2 38875

From Phack Rone	264-3151 Address: 67-633 Second	Date:	2-9	(1990
nPayment of _P	hollais Com	Topis 0	ollars (\$ 57	(6)
Lot Grave	FlowS	Section	Divisi Block	
Invoice No	NOTVALID FOR PURPOSE STATE LINEAS PATE PAID IN THIS SPACE.	CREDIT 20% Sales Cere 80% Sales of Lots Opening/ Closing Burial Containers	67007 77184 100 77184 100 77181 100 77181	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	$a, a, b \neq 0$	Handling Fee . Recording & Misc. Fees Pre-Need Trust . Sales Tax . TOTAL PAID	100 77185 100 77183 63033 8022 80101 78390	57 00

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 38764

PINK,AUDITOR	264-3151	The state of	10	100
The Man	1 70 700	Date:	1-7	19/
From July Julia	Address: O6 1630 Nd	ent !	16 CALLE	10010
- July - July	- 10/100-	7 09	llars (\$	80
In Payment of	and la	and	Just	
176			2 Division	12
Lot Grave	RowSe	ction	Block	
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 Opening/	77184	V
wo 6-16/3	CITY ALBERTOR	Closing Burial	77181	
BALANCE DUE 4/8,45	the state of the s	Containers Handling Fee	77182 100 77185	4
	JAN 1 6 1990	Recording & Misc. Fees	77183	700
Pre-Need Lot At Need On Acct		Pre-Need Trust Seles Tax	63033 9022 60101	100
Pre-need Trust Cash Check	ISSUED BY Thomas bid	TOTAL PAID	78390	700
AC-212 (Rev. 10-87) 480	ISSUED BY	TOTALPAID	. 0	100

WHITE TO CUSTOMER CAMARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

M2 38635

From the Ima	Address: 68 6 0 X	Date:	12-6 19 87
In Payment of	augen 15	Print d	Hars (\$ 52.90 \$
Lot 186 Grave	Aows	Section 6	2 Division / 2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	80% Sales	67007 77184 CFTY AUG TOR
W.O. 2-76/3		Opening/ Closing Burial	77181 DEC 14 1000
BALANCE DUE 469-43		Handling Fee Recording &	77182 100 77185 100 77183
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ▼ Cash ☐ Check ▼	1 ///	Pre-Need Trust	63033 9022 60101
AC-212 (Rev. 10-87) 442	ISSUED BY DIALA WAS	TOTAL PAID	5700

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

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Nº 38539

	284-3151	Date:	11-9, 189	2
From: Dette D- Manie Sift - Lave In Payment of	10/100 14 /10	polling of the	106 (ATTENTAL)	2
Lot 186 Grave	Aowse	ection 2	Division /2	
Acct. No. 8' - 76/3	NOTVALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	20% Sales Care 7 80% Sales of Lots 7 Opening/ Closing 7 Burlai	77007 77184 100 77181 100 77181 100 77181 100 77181 100 77181	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	Issues er midea Chare	Recording & Misc. Fees 7 Pre-Need 8 Trust Sales Tax 6	100 7185 100 100 100 100 100 100 100 100 100 10	The second second second

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

N2 38049

La Long	284-3151	Date: 10	-12 19 E9
In Payment of	Address 2	Dollars (\$	57.00
Lot 186 Grave	RowS	ection	Division / 2
Acct. 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 —	CITY UDITOR
BALANCE DUE 583.45		Surial 100 Containers 77182 — Handling Fee 77185 — Recording & 77183 —	OC1 16 1989
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	ISSUED BY ATTACK A LAZA	Pre-Need 83033 Trust 9022 — Sales Tax 60101 76390 — TOTAL PAID \$	5700

WHITE TO CUSTOMER
CANARY CEMETERY
PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 37917

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1 to Hanas	1 1000000000000000000000000000000000000	Date:	26 1/1/1/1
From Ser Co	Address:	seema +1	( ) D
Juffer Sur	n repros	Dollars	5 2,00
In Payment of 10	lents of file	reced Au	ST.
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Lot 186 Grave		Section 2	Division /2
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 67007 20% Sales Care 77184	Cova
Acct. No.		80% Sales 100 of Lots 77184 Opening/ 100	CITY AUDITOR
wo. 6-16/3		Closing 77181 Burial 100	SFP 1 8 1000
BALANCE DUE 640, 45		Containers 77182 100 Handling Fee 77185	10 100
		Recording & 100 Misc. Fees 77183	
Pre-Need Lot At Need On Acct	1 1	Pre-Need 63033 Trust 9022	2/00
Pre-heed Trust A Cash Check	mary Chesal	Sales Tax 50101 78390	1000
AC-212 (Rev. 10-87)	ISSUED-BY	TOTAL PAID \$	5/10

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

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

119 38238

From: Thank + Bitty Th	amas Address 64-650 Se	Date: AU	y bru	6 + #j	189
InPayment of	seven dollars "% oupon 10 Prepud	1 Tru	ollars (\$	57.0	0
Lot 18.6 Grave	RowSe	ection 2		Division /	2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales	67007 77184 —	CITY	UDITO
Acct. No. = 7613		of Lats Opening/ Closing	77184 — 100 77181 —	JUL 1	0 1989
BALANCE DUE 754, 45		Burial Containers	100 77182 — 100		0 1003
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Handling Fee Recording & Misc. Fees	77185 — 100 77183 —	6.7	20
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	01 00	Pre-Need Trust Sales Tax	63033 9022 — 60101 78390 —	57	00
AC-212 (Rev. 10-87) 5547	ISSUED BY MAN ON MAN	TOTAL PAID	•_	57	00

WHITE TO CUSTOMER'
CANARY CEMETERY
PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

V2 38107

1604	United to	¢ 1000 1	Date: 6-	5 189
fifte - Dene	Address:	00 7	Dollars (	39.65
InPayment of	1 par	I JACKI	A Su	Division / )
Invoice No.	NOT VALID FOR PURPOSE STA	TED UNLESS STAMPED	CREDIT 67007 20% Sales Care 77184 - 80% Sales 100	Block-
W.O. 2-16/3		CITY AUDITOR 1989	of Lots 77184 - Opening/ 100 Closing 77181 - Burlal 100 Containers 77182 -	
Pre-Need Lot At Need On Acct		JUN	Handling Fee 77185 - Recording & 100 Misc. Fees 77183 - Pre-Need 63033 - Trust 9022 - 100 Misc. Fees 6303 -	5100
Pre-need Trust Cash Check AG-212 (Rev. 10-87) 5524	ISSUED BY	der Ward	Sales Tax 60101 78380 TOTAL PAID \$	5900

WHITE ..... TO CUSTOMER

CITY OF BAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

Nº 37746

From: Letter Shanas Address 108 1050 Second #1716 Cathedral at After Steen of Pil-Deld thust Couple 8  Dollars (\$ 57.00)  1810  Division 1.3
ACTU WELL OF COUNT COUPIN 8 DOLLARS (\$ 57.00)
Lot
Acct. No. 100 C/TV Acrt. No. 100
Burist 77182 May 18 7
Pro Need 53033 57 W)
Pre-need Trust Cash Check I Issued by Lack Sales Tax 8022  Trust Sales Tax 8022  Total Paid 500



#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

USE III	204-3181	2	117 29
From: Lette Hinko	W. Adires 68-650	Seen 6.	#176 . 1901
fifte - senen	10/100	Doll	m (\$ 57.00)
In Payment of	Trepan 7	Eleneco	Aust
Lot 186 Grave	Aow	Section	2 Division / 2
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPER PAID IN THIS SPACE.	BORG CHILDRE	7184
w.o. 2 - 76/3	D'AV AU	of Late 7	7184
BALANCE DUE 925, 95	APR 21		100 77185
Pre-Need LotAt Need On Acct		Minc. Fens	100 7183 3003 5002
Pre-need Trust Cash Check	Varble 11/6	Sales Tax	9022
AC-212 (Rev. 10-87) 5/57	ISSUED BY UP THE IN THE	TOTAL PAID	. 3700

### WHITE TO CUSTOMER CAMARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

PINKAUDITOR	264-3151	Date:	3-10	.19
From: State Shame	Address = 61-650	- Cund	4176 ollars (\$ 57)	tal techno
Lot 186 Grave	A Row S	Section	2 Division	72
Acct. No. 2-16/3 BALANCE DUE 962,45	NOT VALID FOR PURPOSE STATED UNLESS STAMPED TRAID IN THIS SPACE	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burlat Containers Handling Fee	77184 100 77184 100 77181 100 77182 100 77182 100 77182	A COUNTY OF A CONTRACTOR OF THE PARTY OF THE
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 10-87)	ISSUED BY MINING W	Recording & Misc. Fees Pre-Moed Trust Sales Tax TOTAL PAID	100 77183 63033 9022 60101 78300	1989



CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

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78300 -	S	700

From: Lette, Hamas	Address FEAST O	Who o	It y	4 16 GTT. 57.00,
Lot 186 Grave	S	ection	2	Division / 2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 90% Sales	87007 77184 —	
Acct. No	CITYAL	of Lets Opening/ Closing	77184 — 100 77181 —	
BALANCE DUE 1039. 45	FEB 10	Handling Fee	77182 — 100 77185 —	
Pre-Need Lot   At Need   On Acct	12010	Pre-Need Trust	77183 — 83033 9022 —	5700
Pro-need Trust M Cash Check M  AC-212 (Rev. 10-87)	ISSUED BY MICH WILLIAM	Sales Tax TOTAL PAID	78380 — 4	5700

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY		1-2	09
From Bette Hank	10 Address 68-650 0	Land	#176	5 00 the
fufty - Neve	n 10/100	710-00	oliars (\$ 5	7.00
In Payment of	sougon 4	cunun		
Lot KG Grave_		Section	2 B	vision /2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 20% Sales Care	67007 77164	
Acct. No. 0 97-1-3	Jan	OR of Lots Opening/ Closing	77184 100	AND STATE
W.O. 0-11010	JAN 09 19	Closing Buriel Containers	77181	SASS DE SA
BALANCE DUE 1076-75		Canting Fee	100 17185	
Pre-Need Lot At Need On Acct		Recording & Misc. Fees Pre-Need Trust	77183	31700
Pre-need Trust Cash Check Ch		Sales Tax	60101 78390	00
AC-212 (Mev. 10-87)	ISSUED BY STOCKED TO THE CONTROL OF	TOTAL PAID		3700

#### OFFICIAL RECEIPT 36612 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT CANARY ..... TO CUSTOMER MOUNT HOPE CEMETERY 284-3151 Date: Dollars (\$ Payment of Division Grave Section Lot Bow NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT Invoice No. 20% Sales Care 80% Sales Acct. No. of Lobs CITY AUBITOROPENING 100 77182 BALANCE DUE Standling Fee Recording 6 100 77183 On Acct Pre-Need 69033 Pre-Need Lot 8022 Troint Pre-need Trust Soles Tax 80101 78300 TOTAL PAID AC-212 (Rev. 10-87)

#### OFFICIAL RECEIPT 36757 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT CANARY CEMETERY MOUNT HOPE CEMETERY 264-3151 Payment of Division Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED TRAID IN THIS SPACE. CREDIT 20% Sales Care 67007 Invoice No 80% Sales of Lote 77184 Acct. No. Opening/ CITY AUDITOR Closing 77181 Buriel Containers BALANCE DUE Handling Fee Recording & 77183 Pre-Need Lot On Acct 83033 9022 Pre-need Trust Sales Tax Check 60101 78390 TOTAL PAID 4. AC-212 (Rev. 10-87)

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ACCOUNT No. 8-7613

Present Trust

Frank & Betty Thomas 68-650 Second, \$176 Cathedral City, Ca 92

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### MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 56-88

J. S. Vand	#	ineral, date, time	Muss 9/8 3	20
Church, Chapel, Graveside	Alinn	Le Si	usis Cal Mo	V
All Funeral cars must arrive before	35	of regular work day	1 4	
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ot X 8 0 Grave	Row	Section	Division/Bleek	
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any liability on account of said at	ithorization	and interment.	1 0	
hereby authorize the interment	in lot I	ma	Tim D. Semon	~
nold under deed.		Signatura	85 1980-C.168 - C.336.10	
Signature of recorded holder of deed		Address		
		State		Z)p (
		Telephone		
		Battoria and Espaira and		
Work Order # E 7614		Invoice # _		
		Acct. #		

#### OFFICIAL RECEIPT 36623 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR MOUNT HOPE CEMETERY 264-3151 Division Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT 67007 77184 Invoice No 20% Sales Care 80% Sales Acct. No. of Lots CITY AUDITOR Closing BALANCE DUE Recording & 63033 On Acct Pre-Need Lot Trust Pre-need Trust Tales Tax 80101 TOTAL PAID AC-212 (Rev. 10-az)

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7614

NAME OF DECEDEN	ग		SEX	DATE OF BIRTH	DATE OF DEATH
	RADA DELORES WILLIAMS	5	female	Dec 30, 1909	Sept 3, 1988
PLACE OF DEATH-	PARTICIPAL VIOLENCE	PLACE OF DEATH—COUNTY IOR	STATE IF NOT IN CALIFORNIA)		SPOUSE OR OTHER INFORMANT
San Diego		San Diego		Martin Simon	STATE OF THE PARTY
NAME AND ADDRE	SS OF FUNERAL DIRECTOR (OR PERSON A	Calon Blvd.	ALIFORNÍA LICENSE NUMBER	3834 Poleris	
Lewie Col	omial/Benbough San Di	Lego, CA 92104	F-480	La Mesa, CA	92041
	TYPE OF PERA	WIT, CHECK ONLY ONE OF TH	E FOLLOWING TYPES O	F DISPOSITION	
* 1	THE OF TEN	mi, check one or in	e rottomino rires o	Distrosmore	
1 BURIAL (IN	NCLUDES ENTOMBMENT)	5 DISINTERMENT AND BU	RIAL (INCLUDES	8. DISINTERMENT AND REMAINS (INCLUDES	REINTERMENT OF CREMATED INURNMENT)
2 CREMATIO	ON AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMA		9 DISINTERMENT OF CI	REMATED REMAINS AND THAN IN A CEMETERY
	N AND DISPOSITION OTHER THAN IN A	WELLES - STATE OF THE STATE OF	10		170786777075755555757
CEMETERY  4. SCIENTIFIC		7. DISINTERMENT, CREMA OTHER THAN IN A CEM	TION, AND DISPOSITION ETERY		ER'S USE ONLY
4. SCIENTIFIC	. OSE		DERGEOSOSI	☐ 10 DISPOSITION PENDIN	IG.
112	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATED RE	MAINS ARE TO BE INTERRE	ED CO	UNTY
INTERMENT	Mount Hope Cemetery .	- San Diego, CA	(3751 Market 1	Se.)	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W		TED DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER IN A CEMETERY EMATED REMAINS	-1- Aga /	INE. OR OTHER DESCRIPTION SUF	FICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF DI	SPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF MACILITY REC	EIVING REMAINS			
	This is to certify that I am the per	rson having the right to contro	the disposition of the	SIGNATURE OF APPLICANT	
ACKNOWLEDGMENT		아이지 않는데 그 아이들이 아니라 하는데		<b>&gt;</b>	
OF APPLICANT	and I hereby acknowledge that to this permit gives no right of unrest	바람들은 얼마나 되었다.		DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED	E AND IS THE	SEP 8 1988	SIGNATION OF LOCAL SEC	STHAN ISSUING TO B
OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	SIGNATURE O	F PERSON IN CHANGE OF I	DISPOSITION LICENSE DISPOSE	NUMBER OF CREMATED REMAINS R. IF APPLICABLE
IF DISPOSITION IS	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH			
ANOTHER COUNTY	n/a		20		

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

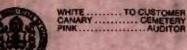
# MT. HOPE SEMETERY INTERMENT ORDER

City of San Diego

Date 9-6-88

of TX laws	1100	9/7 1/am
Veutruner al anala	ineral, date, time	1.1
Church, Chapel, Graveside	Mar Jene	Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an ext	ra charge will be applied
nd billed to undersigned. War time veteran		70077
Lot 1294 Grade Row	Section Di	vision/810ck
	0,0	
Grave space & Care Fund	(he need	
Additional spaces and care fund	nom	
Opening/Closing & Setup	/··· 0:4: ······	3200
Burial Container	ndl	12(00
Hendling Fees		
Flower vases - Marker setting fee		<u> </u>
Recording and filling fee		325
Sales taxes		
2: Week	Total Due	7//37
Paid ro	eceipt number 366	89 711-30
	B	slance due
	0	
I hereby certify I am the	of th	e above named decedent
and this is your authority to make disposition that I have the right to make this authorization	and lagree to hold Mt. Hope	Cemetery harmless from
any liability on account of said authorization	and interment. of the	an a
I hereby authorize the interment in lot I	0.	
hold under deed.	Signature	
Signature of recorded holder of dead	Address	
	State	Zip Code
	Telephone	
Test.	Invoice #	
	IIIVOIGB #	
Work Order # <b>E</b> 7615	Acct.#	

#### OFFICIAL RECEIPT



#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36669

		Date:	9-9	7	19.80
Starn Sun	Address: eleven 37	100	oliars (\$	711.3	2,
In Payment of Grave	RowS	oction	The	Division Block	0
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.  CITY AUDITOR	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burlet	57007 77184 — 100 77184 — 100 77181 —	320	000
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	SEP 14 1988	Containers  Handling Fee Recording & Misc, Fees Pre-Need Trust Sales Tax	77182 — 100 77185 — 100 77183 — 63033 9022 — 60181	135	30
AC-212 (Rev. 10-87) DUNG 19	ISSUED BY STALL VOLD	TOTAL PAID	78390 —	7/1	37

### PERMIT FOR DISPOSITION OF HUMAN REMAINS

F-7615

		USE BLACK INK—MAKE NO AL	TERATIONS OR ERASURE	ES	
NAME OF DECEDEN	MATERIAL CONTRACTOR OF STREET		SEX	DATE OF BIRTH	DATE OF DEATH
	ADDIE LUCILLE ERWIN		female	Oct 30, 1922	Sept 2, 1988
PLACE OF DEATH—CITY OR TOWN Spring Valley		PLACE OF DEATH—COUNTY (OR San Diego	STATE IF NOT IN CALIFORNIA!	Lester Dean Erwin - son	
Levis Col	SS OF FUNERAL DIRECTOR FOR SOST A	El Cajon Blvd. Diego, CA 92104	T-480	2328 Peppermint Lane Lemon Grove, CA 92045	
\ .	TYPE OF PER	MIT, CHECK ONLY ONE OF TH	E FOLLOWING TYPES OF	F DISPOSITION	
BURIAL (IN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND BU	RIAL UNCLUDES	8 DISINTERMENT AND REMAINS INCLUDES	REINTERMENT OF CREMATED INURNMENTI
(1944)	N AND BURIAL IINCLUDES INURNMENTI	6 DISINTERMENT, CREMA (INCLUDES INURNMENT	TION, AND BURIAL		REMATED REMAINS AND THAN IN A CEMETERY
3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY  4 SCIENTIFIC USE		7 DISINTERMENT, CREMA	7 DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		ER'S USE ONLY
	NAME AND ADDRESS OF CEMETERY N	WHERE REMAINS OR CREMATED RE	MAINS ARE TO BE INTERRE	ED CO	UNTY
TERMENT	Mount Hope Cemetery	- San Diego, CA	(3751 Market 1	Se.)	San Diago
CREMATION	NAME AND ADDRESS OF CREMATORY O	WHERE REMAINS ARE TO BE CREMA	TED DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY
BIAL AT SEA OR CASPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	CONTRACTOR OF CHIPTON SUL	Ment 20 Seattle Final	PLACE AND COUNTY OF DI	SPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RE	CEIVING REMAINS	18		
ACKNOWLEDGMENT  A OF  APPLICANT	This is to certify that I am the pr remains of the above named dec- and I hereby acknowledge that to this permit gives no right of unres	edent under provisions of the Ho resposs and nuisance laws appl	ealth and Safety Code, y and understand that	SIGNATURE OF APPLICANT  DATE SIGNED	
LOÇAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS THE	SEP PERMIT 7 198	SIGNATOR OF LAND LEG	PAR ISSUING PERME
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	7/88 SIGNATURE	F PERSON IN CHARGE OF I	POSITION LICENSE DISPOSE	NUMBER OF CREMATED REMAIN: R, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	<i>d</i>		t-

IDPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE REMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 9/6

	Ua	18
You are hereby authorized and instructed, so	biect to your rules and re	equiations, to intenthe remains
of Firm	with	( ASh)
TO 1/2 1-A		2. 06 Man
in a /- S. Veut/Liner	uneral, date, time	1 9/7 /com
Church, Chapel, Graveside	4 Chove Lei	wes (M. 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. War time veterar		0 -
	(III)	
ot Grave /O Row	Section/	Division/Bleek 5
**************************************		
Grave space & Care Fund	A	···················
Additional spaces and care fund	12	
Additional spaces and care fund	2000	
	1	
Burial Container	,	************
Handling Fees		
Flower vases - Marker setting fee		
Recording and filing fee		35,00
Sales taxes		
Gales taxes		3(0)
	Total Du	(2/ 200
Paid	receipt number	Da! 33.00
0		Balance due
$\mathcal{L}$		
I hereby certify I am the and this is your authority to make disposition	<b>f</b>	of the above named decedent
that I have the right to make this authorization	on and I agree to hold Mt.	Hope Cemetery harmless from
any liability on account of said authorization	and interment.	111
I hereby authorize the interment in lot I	Danie A	. Anuthurd
hold under deed.	Signature	To A. R
	Address 7	sung st.
Signature of recorded holder of deed	Cal	9102/
	4471	1226
	Taleghene	
	Invoice #	
F 7616	W-0115/V00000	
Work Order # _ FUIU	Acct. #	

### OFFICIAL RECEIPT

WHITE..... TO CUSTOMER CANARY ..... CEMETERY PHIK ...... AUDITOR

#### CITY OF BAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

36621

PHIXAUDITOR	264-3151		20
From: 1 th 1/40 lac lace	Madress 1917 La	Date: 9-	R. 1988
· Thirt - five	16/100-	Dollar	\$18.35.00
InPayment of	in Southwa	100 /	curden
7	10	7	Division
Lot Grave	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	Section	er Block
Acct. No.	"PAID" IN THIS SPACE.	20% Selse Cere 771 80% Selse 1 of Lots 771 Opening/ 1 Closing 771	84 00 84
BALANCE DUE	CITY AUGIT		00 35 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	January SEP/13	7re-Need 630 7rust 90 Sales Tex 601 763	01 01
AC-212 (Rev. 10-87)	ISSUED BY IF ICA VAC ON A	TOTAL PAID	. 35 00

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-7616

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	n		SEX	DATE OF BIRTH	DATE OF DEATH
The or occupan	FERM ESTRILE RUTH S	OUTHWARD	female	June 22, 189	9 Sept 3, 1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY	PLACE OF DEATH—COUNTY (OR STATE IF NOT IN CALIFORNIA)		F SPOUSE OR OTHER INFORMANT
NAME AND ADDRES	onial/Benbough San	All' Cajon Blvd. Diego, CA 92104	CALIFORNIA LICENSE NUMBER	El Cajon, CA	
FI 6	TYPE OF PE	RMIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	OF DISPOSITION	
1 BÉRIAL (IN	ICLUDES ENTOMBMENT)	5: DISINTERMENT AND ENTOMBMENT)	BURIAL (INCLUDES	8. DISINTERMENT AN REMAINS (INCLUD	D REINTERMENT OF CREMATED ES INURNMENT)
2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT	6 DISINTERMENT, CRE			CREMATED REMAINS AND ER THAN IN A CEMETERY
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 4 SCIENTIFIC USE		☐ / DISINTERMENT, CRE			DNER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY Hount Hope Cemetery		REMAINS ARE TO BE INTERE (3751 Market	1200	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY	WHERE REMAINS ARE TO BE CRE	MATED DATE CREMATED	SIGNATURE OF PERSON	I IN CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER VIN A CEMETERY MATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	ELINE, OR OTHER DESCRIPTION	Levotu to 9	a hime &	DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY R	ECEIVING REMAINS	U		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the premains of the above named de and I hereby acknowledge that this permit gives no right of unre	cedent under provisions of the trespass and nuisance laws a	s Health and Safety Code, pply and understand that	<b>-</b>	NT
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE W OF THE CALIFORNIA HEALTH AND SAFETY O AUTHORITY FOR THE DISPOSITION SPECIFIE	ODE AND IS THE \$4.00	// SEP 8 19	P . COL WORLD	Compat M.S.
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	9/88 SIGNATUR	oren Thange of	DISPOSITION LICEN	ISE NUMBER OF CREMATED REMAIN: DSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICAYE APORESS OF REGISTRAR C	F COUNTY OF DEATH	0		

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

### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

	City of San Diego		- 0
	S	Date 9	6-88
You are hereby authorized and instructe	ed, subject to your jule	s and regulations, t	o inter the remains
of Mohen	e Vu	2000	7
in a) ble cup	Funeral date time	to 1	em 9/9
Church Chanal Councide	Dalla SVANO	PANONA	00
Church, Chapel, Graveside LACLY All Funeral cars must arrive before 3:3	On an of regular work	day ar an arter abo	Mortuary.
And billed to undersigned. War time ve		day or all extra cha	ille will be applied
and billed to undersigned. War time ve	teran	0	
Lot Grave Row	Section	Division	Block //
<i>33</i> / <b>0</b>			1105-1
Grave space & Care Fund			475.00
Additional spaces and care fund	·····/_\$		
Opening/Closing & Setup		L	20.00
Burial Container	$d^{\circ}$		330.00
Handling Fees	121		320.00
Flower vases - Marker setting fee	ON	03,833,843,953,633,633,633	101.101.301.00
	1		35.00
Recording and filing fee	A		21115
Sales taxes	<i>/</i>		1-5115
140	To	Stal Due	2001.00
V	Paid receipt number	26600	800.00
100	× 49	Balance	due /2/. 45
W,	Mund		
I hereby certify I am the and this is your authority to make dispo	sition of remains as a	bove indicated. I ca	re named decedent ertify and represent
that I have the right to make this author any liability on account of said authorize	ization and I agree to h	old Mt. Hope Ceme	tery harmless from
any national strategy and advisors	. ) \	N 70 5	0
I hereby authorize the interment in lot	1 We	elulis	Dessur
hold under deed.	5007	ALTH V	STA AL
Signature of recorded holder of deed	Address	10,25700	-0.92/4
TO A CONTRACT OF THE STATE OF T	36	32000	Zip Code
	Telephone	750	THE REAL PROPERTY.
		173	
Wart Order # E 7617	Involu		-
Work Order # L IUII	Acct.		

NOTE

\$ 721.45 San Diego, California

Sept. 6 19 88

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasures, or order at 3751 Market Street, San Diego, Ca 92102 to make the same of Line to the same of Line to the same 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

P. NAME WILLIE U. GIPS ON SIGNATURE Weller Sepan

ADDRESS 5607 ALTA U.STA AUG DO049875 CQ 1-17-90

CALIF. DRIVERS LIC. # 00049875 Ca 117-90

#### OFFICIAL RECEIPT 36622 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY ..... CEMETERS MOUNT HOPE CEMETERY 264-3151 Payment of Division Grave 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 77184 Acct. No. Opening/ 100 77181 CITY AUGITOR Clasing Containers BALANCE DUE 77185 landling Fee Misc. Fees 100 77183 63033 On Acct Pre-Need Lot Trust Pre-need Trust Cash Check 60101 Sales Tax TOTAL PAID

AC-212 (Rev. 10-87)

### PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-7617



USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	MAXINE GIPSON		FEMALE	JAN. 19, 1924	Sept. 2, 1988		
NAME AND ADDRES	PLACE OF DEATH—COUNTY IOR STATE IF NOT IN CALIFORNIA  HOSDITAL—Rational City  DRESS OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)  DR-Ragsdale Fort : 5050 Federal Blvd.  1329			Statement Committee Commit			
	TYPE OF PERMICLUDES ENTOMEMENT) N AND BURIAL (INCLUDES INURNMENT)	5. DISINTERMENT AND BUENTOMBMENT)  6. DISINTERMENT, CREMA-	RIAL (INCLUDES	B DISINTERMENT AND REMAINS (INCLUDES	REMATED REMAINS AND		
3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 4. SCIENTIFIC USE		7. DISINTERMENT, CREMA OTHER THAN IN A CEM	TION, AND DISPOSITION	FOR CORONER'S USE ONLY  10. DISPOSITION PENDING			
CREMATION  BURIAL AT SEA OR ISTRUM OTHER IN A CEMETERY OF HEMATED REMAINS		HERE REMAINS ARE TO BE CREMAN	San Diego, C	SIGNATURE OF PERSON I	San Diego N CHARGE OF CREMATORY ISPOSITION		
SCIENTIFIC USE ACKNOWLEDGMENT OF APPLICANT	NAME AND ADDRESS OF FACILITY REC  N/A  This is to certify that I am the peremains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	rson having the right to contro dent under provisions of the He espass and nuisance laws appl	ealth and Safety Code, y and understand that	SIGNATURE OF APPLICAN  DATE SIGNED	Ť		
LOCAL REGISTRAR CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COO AUTHORITY FOR THE DISPOSITION SPECIFIED IL CERTIFY THAT THE SPECIFIED OISPOSITION WAS MADE ON THE INDICATE ADDRESS OF REGISTRAR OF	PE AND 19 THE 4.00 SECNATURE OF SECNATURE OF	8EP 9 198	MESPOSITION LICENSE	CISTRAR ISSUING PERMIT  NUMBER OF CREMATED REMAINS HE IF APPLICABLE		
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY		. P. O.	Box 85222 ego. Californi	a 92138-5222			

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR Y THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR Y THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

CITY OF SAN DIEGO AUDITOR & COMPTROLLER REPORT NO. C65-102

## PAID INVOICE REPORT BY DEPARTMENT AS OF 10/04/88

DATE: 10/04/88 TIME: 223134 PAGE: 9

DEPART	MENT 072	PRI	PERTY DEP	T-MT HOP	E CEME	ETERY								12
NO	DATE	ACCT NO	CUSTOMER FUND	NAME DEFT	ORE	ACCT	1/0	PAYN DATE OPER	PD BY BA/E	PAYM REF NO Q FACILI	AMOUNT PAID	AHOUNT	BILLED	UNPAID BALANCE
073829	2-74		MILLIE M. 100 100 100 100 60101	GIP5GN 072 072 072 072 072	t	77181 77182 77183 77185 78390	0000	72 72	CK	2531	721-45 15-00 330-00 35-00 320-00 21-45	./	721-45	PAID IN FULL
NUMBER TOTAL	OF INVOIC	ES PAIN		21.45								OK		

INTERM	PE CEMETERY ENTORDE	R	
Break Interm	l San Diego	Date 9-6-	FF
You are her say authorized and instructed, subject	ecj to your rules an	d regulations, to inte	er the remai
in a Fun	erel, date, time _		
Church, Chapel, Graveside	21		Mortus
All Funeral cars must arrive before 3:30 p.m. o and billed to undersigned. War time veteran _ 22 2		-	V.E.W.
Lot Grave Row	Section	Division/84ee	*/0
		FERNING SOLD AND SOLD	950
Grave space & Care Fund			2/0.0
Additional spaces and care fund	200		11/2
Opening/Closing & Setup	y Sau	.00	640-
Burial Container			330.C
Handling Fees			200 /
Flower vases - Marker setting fee			
Flower vases - Marker setting fee	٥٠٠٠	0	70.0
Sales taxes			04.7
	Total	Due	16.4
Market and	eipt number		
	oipt mannoor		AND THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IN COLUM
Paid res		Balance due	-
Paid res		Balance due	
I hereby certify I am the and this is your authority to make disposition of that I have the right to make this authorization of	f remains as above and lagree to hold and interment.	of the above na	med deced
I hereby certify I am the and this is your authority to make disposition o that I have the right to make this authorization a any liability on account of said authorization at	f remains as above and lagree to hold	of the above na e indicated. I certify Mt. Hope Cemetery I	med deced and repres harmless fr
I hereby certify I am the	fremains as above and lagree to hold interment.	of the above na	med deced and repres harmless fr
1,500,500	fremains as above and lagree to hold interment.  Dance Signature 153 BR	of the above na e indicated. I certify Mt. Hope Cemetery!	med deced and repres harmless fr
I hereby certify I am the	fremains as above and lagree to hold interment.  Dance Signature 153 BR	of the above na e indicated. I certify Mt. Hope Cemetery!	med deced and repres harmless fr
I hereby certify I am the	fremains as above and lagree to hold interment.  Dance Signature 153 BR	of the above na e indicated. I certify Mt. Hope Cemetery!	med deced and repres harmless fr
I hereby certify I am the	fremains as above and lagree to hold interment.  Danie Signature 153 BRI Address 150 State 422 - 1	of the above na e indicated. I certify Mt. Hope Cemetery!	med decade and representations for the second secon

36788

## WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From: Cario Reas Eight - Pia  Be Payment of Co	284-3161 	gate: Do	10-5 19 80 S(he 4 A Hare 18 - 85.00)
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.  CITY AUDITOR  OCT 7 1988:  ISSUED FOR PURPOSE STATED UNLESS STAMPED VIOLENCE VIOLE	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burist Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	57007 77194 100 77184 100 77181 100 77182 100 77182 100 77183 63003 9022 60101 78390

CITY OF RAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151		110	90
From Laniel Reso	_ Hadren 153 Bu	Dete:	Thet.	A Chel-
in perment of Chris	on 2 Custo	det	oliars (\$ 82	,00
Lot 2375 Grave	Row Se	ection	Division	on / O
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 50% Sales of Lots Opening/ Closing	67907 77184 100 77184 100	1200
BALANCE DUE 1609. 45		Burist Containers  Handling Fee Pecording & Misc. Fees	77181 100 77182 100 77185 100 77183	15 1988
Pre-Need Lot	ISSUED BY and la Cald	Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 60101 76390	(20)

### WHITE TO CUSTOMER CANARY CEMETERY PINIC AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

PINIC, AUDITOR	264-3151			0.00
From: Wheel Vers	Address 153 Che	other de	2-5 1 H	Chils
Payment of	ugen 3 le	unt of	ollars is	,
L'ot JO O Grave	RowS	ection	Divisi Stock	on/O
Pre-Need Lot At Need On Acct Pre-need Trust Ceah Check	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE  OFC  9  ISSUED BY DUAL A LOUIS	CREDIT 20% Sales Care 80% Sales 60% Sales Contained Contained Contained Contained Facording & Misc. Feet Pre-Need Trust Sales Tax TOTAL PAID	67007 77184 100 17184 100 77184 100 77182 100 77185 100 77185 63033 60022 60101 78390	(2 0)
AC-212 (Nev. 10-87) 70 7 100 60 6			and the second	ONIFO

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

№ 37201



MOUNT HOPE CEMETERY

	264-3151		1-9	89
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Liot 2375 Grave_	RowS	ection	Division Block	90
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Acct. No. 9-76/1		of Lots Opening/ Closing	77184 100 77181 C	Pra
BALANCE DUE 1645,45		Surial Containers Handling Fee	100 77182 100 77185	BITOR
		Recording & Misc. Fees Pre-Need	77183 63033	1989
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	Sola Chia	Sales Tax	9022 89101 78390	
AC-212 (Rev. 10-87)	ISSUED BY TO THE TOTAL OF THE T	TOTAL PAID	. 8	0 00

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

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ecolity - two	Lu Jon 5 Orch	T det	ollars (\$ Za	2,00,
Cot 2375 Grave	Flow Se	ection	Olvis Block	ion/O
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 27% Sales Care 80% Sales of Lots Opening/ Closing Burtel Containers	67007 77184 77184 100 77181 100 77182	82.05
Pre-Need Lot At Need On Acct Pre-need Trust Cesh Check Dispersion 10-87	ISSUED BY SINK & MILES	Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	100 77185 100 77183 30303 8022 60101 78390	200

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# PROPERTY DEPARTMENT MOUNT HORE CEMETERY 284-3151

Nº 37442

	264-3161		7.1	C	3 4
From Anil Res's	Address: 153 Bu	Atwood	O he	44.0	1
eint-two	00/100	D	ollars (\$ 8	2.00	_)
'In Payment of	upm 6 Mail	OF	Total C	900	
Lot 2375 Grave	RowS	ection		Division /	-
· Invoice No	NOTVALID FOR PURPOSESTATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Core	67007 77184	19/00	2
Acct. No.		80% Sales of Lots Opening/ Closing	77184 ——— 100 77181 ———	63 0	_
BALANCE DUE 1481-45	CITY AUDIT	Burial OR Containers	100 77182	(de la constitución de la consti	
BALANCE DUE	CONTRACTOR OF THE PARTY OF THE	Handling Fee	77185 —— 100 77183 ——		
Pre-Need Lot	MAR 1 0 19	Y Pre-Need Trust Sales Tax	63033 9022 60101		N.
* AC-212 (Rev. 10-87)	ISSUED BY MACILLOUIS	TOTAL PAID	78390	620	)
	1000 · 1	Si settle man		82.00	5

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITON

#### CITY OF BAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

-018	284-3181	Date:	4-1	/	.8
From: X Anie V J. Kes	Address: 153 Que	gtteor	ojiara įš l	W4H	8
tn Payment of	duga 7 Oc	edit &	1	TO SECOND	
Lot 2375 Grave		ection	6250	Division Block	5
Invoice No.	NOT VALID FOR PURPOSE STATED UNCHE PATAGOT	ORIEDIT CR20% Sales Care 80% Sales	67007 77184 ——	89	00
Acot. No. 9 - 216/8	APR 17	of Lots  OR Conning/	77184 — 100 77181 —	-KEO	
W.O		Burial Containers Handling Fee	100 77182 — 100 77185 —		
Pre-Need Lot (V at Need () On Acct ()		Recording & Minc. Fees Pre-Need	100 77183 — 63033 9022 —		
Pre-Need Lot Q At Need On Acct Pre-need Trust Cesh Check	La feath	Sales Tax	9022 60101 78390 —	0	
AG-212 (Rev. 10-57)	ISSUED BY TOTAL TOTAL	CHOTAL PAID		00	00

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

ROPERTY DEPAI
NT HOPE C
Market Control of the
284-315

From: Corneil Pearson  eights - too  to Payment of	Address: 153 Bre	Date:	S- Sl. gliars (\$	9 .8 ue # A 82.00	9
Invoice No	NOT VALID FOR PURPOSE STATED LINLESS 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 TOTAL PAID	87007 77184 — 100 77184 — 100 77181 — 100 77185 — 100 77185 — 100 77183 — 83033 — 8022 — 80303 — 80303 —	Division / O Bitocit 18 00 Orry All Pro MAY 12 989 64 00	5 - 5

# CITY OF SAN DIEGO, CALIFORNIA

No 37883

CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151  Address: 153 Lud	Date: 6-1	100 HA Chu
In Payment of Grave	regar 9 Cudit	Dollars (\$	BQ, OO V
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.  CITY AUDITOR  JUN 09 1989	CREDIT 20% Sales Care 77184 — 80% Sales 100 of Lots 77184 — 100 Closing 77181 — 100 Closing 77181 — 17181 — 100 Closing 77181	8200

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Nº 38263

	264-3151		-	5.80	20
000	150 2	Date:	1-7	17	90/
From: Have Can	Address: / S Lil	Willson	10#1	+, U/U	VA VICE
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In Payment of		THE REAL PROPERTY.	-	44.11	
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w.o. 2-76/6		of Lots Opening/ Closing Burial Containers	77184	JUL	1 4 1989
BALANCE DUE		Handling Fee Recording & Misc. Fees	100 77185 ————————————————————————————————————		
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		Pre-Need Trust Seles Tax	63033 9022 60101 78390	84	0
AC-212 (Mer. 10-87) 244-29/6-40	SOUED BY ADVEL	TOTAL PAID	1	84	00

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

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

19 38278

From: 41 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1	Address: 153 4 4 4 10 10 10 10 10 10 10 10 10 10 10 10 10	Date: 1	# H did	1 1 1 5 1. 3	1.89 10 Tal 45, 92
Lot 375 Grave	Row Se	ection		Division Block	10 :
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41 114	100	15	3	RRI	24	Tui	000	C A	IJE	#	A

NAME DANIEL Amount Received \$ 82.00

ADDRESS /53 BRIGHTWOOD AVE # A

CITY CHULA VISTA STATE CALIS ZIP 92010

Check (V) if this is new address

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NAME DANIEL S. RIOS

ADDRESS 153 BRIGHT WOOD, AVE # A

CITY Chuka VISTA STATE CAL. ZIP 92010

The check (V) if this is new address

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CITY Chula VISTA STATE CA ZIP 52010

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## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 9-6-88

1. J.S. Vault	Fu	geral <sub>e</sub> date, time <sub>4</sub>	Alurs 91	8 18
hurch, Chapel, Graveside	noel	& Drave	Leenshy	Mortua
All Funeral cars must arrive before	8 3-30 n.m.	Action with the same of	11 1	iff be appli
nd billed to undersigned. War tin		A112-812-10-10-10-10-10-10-10-10-10-10-10-10-10-	7 41 411 4114 4 414 4 4	on de leasen
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ignature of recorded holder of deed	-57	Chi	1/a Vista	CA
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Vork Order # (U_I)		Acct. #		

### OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36624

PINK	264-3151		0	1	0
De Command	2356	Date:	7-	3/ 5	000
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Pre-Need Lot	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE  OUT AL  SEP	CREDIT  X/M Sales Care 80% Sales of Lois  Of Conting Burial Containers  Handling Fae Recording & Most. Fees Pte-Need Tyst Sales Tax	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77185 — 100 77185 — 100 77183 — 63033 9022 — 60101 78380 — 3	320 135 135 11	2000 BO

### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7619

Circl .			DOL DEACH	the mane	TO FILLE	THORSE ON CRASUR		-	T/A
NAME OF DECEDER	TECE PAUL R	AVIART		2		Male	09-11-1		09-04-1988
San I	PLACE OF DEATH—CITY OR TOWN  San Diego				TY (OR STA	TE IF NOT IN CALIFORNIA	I NAME AND AD		spouse or other informant t ( <b>Mother</b> )
NAME AND ADDRESS OF FUNERAL DIRECTOR (OR PERSON THE PROPERTY Chula Vista Hortuary			CALIFORNIA LICENSE NUMBER				33 Shas Chula V		
#5 #75.65		V24074 - 18804 V 2000	VIOLET - 100% (1906) (7		OF THE FO	OLLOWING TYPES C	F DISPOSITION		
1 BURIAL III	NCLUDES ENTOMBME	NT)		SINTERMENT A	ND BURIAL	INCLUDES			REINTERMENT OF CREMATED INURNMENT)
5/22/	ON AND BURIAL (INC		☐ 6 DE	SINTERMENT, C	REMATION	, AND BURIAL			REMATED REMAINS AND THAN IN A CEMETERY
3 CREMATIC CEMETER		OTHER THAN IN A		SINTERMENT, C HER THAN IN		, AND DISPOSITION RY	FOR	200000000000000000000000000000000000000	IER'S USE ONLY
NTERMENT	Mt. Rope			NS OR CREMAT		NS ARE TO BE INTERR		0.000	San Diego
CREMATION	NAME AND ADDRE	SS OF CREMATORY V	VHERE REMAIN	IS ARE TO BE C	REMATED	DATE CREMATED	SIGNATURE OF	PERSON II	N CHARGE OF CREMATORY
BURBAL AT SEA DR SITION OTHER IN A CEMETERY OF CREMATED REMAIN	T/A	ST POINT ON SHORE	TOR OTH	PRESCHEDO	SUFFICIE	NT TO IDENTIFY FINA	L PLACE AND COL	INTY OF D	ISPOSITION
SCIENTIFIC USE	The second secon	ESS OF FACILITY REC	EIVING REMA	INS		A.			
ACKNOWLEDGMENT OF APPLICANT	remains of the and I hereby a	above named dece knowledge that tr	dent under espass and i	provisions of a	the Healti apply ar	e disposition of the and Safety Code, ad understand that	SIGNATURE OF  DATE SIGNED	APPLICANT	
9001999000	this permit give	s no right of unres	ricted access	CONTRACTOR CONTRACTOR	SHELLING MET A		4:		
LOCAL <sup>1</sup> REGISTRAR	OF THE CALIFORNIA I	ED IN ACCORDANCE WITH HEALTH AND SAFETY COI DISPOSITION SPECIFIED I	DE AND IS THE	\$4.00	1/2	EP 7 1988		LOCAL REC	L Comes M.D.C.
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE	MADE ON 7//	TER GATE)	SIGNAT	CO )	RSON IN THATE OF	DISPOSITION		NUMBER OF CREMATED REMAINS ER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY		S OF REGISTRAR OF	COUNTY OF	DEATH /	3 <del>0</del>				

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



E-76:19

644 Floyd Avenue Chula Vsita, California 92010 (619) 421-1028

PHONE: 422.63/9 Security Agreement DATE: 9-6-88 PURCHASER(S): ILA E. RAVIART ADDRESS: LOT 2910 DIV PROPERTY DESCRIPTION: CEMETERY. MIT HOPE CONTETERY LAWRENCE P. RAVIART REMARKS: FOR! 9-4-88 DOD: PROPERTY: 535 SELLING PRICE ENDOWMENT CARE TOTAL NSELOR Mr. House DEED TO E. RAVIART MIDTHER ADDRESS RELATION M.S SAME TERMS AND CONDITIONS: It is understood and agreed by Purchaser that the total amount due hereunder is payable within thirty days from the date of this Agreement. If payment is not made at that time, then it is agreed that this account shall bear interest at the rate of 12% per annum from the date of this Agreement until fully paid, and said interest shall apply whether an estate claim is filled or monthly payments are made. Each payment shall be credited first on interest then due and the remainder on principal. Should default be made in any payment of any installment when due, the whole saum of principal and interest shall become immediately die at the option of the Seller. If action be instituted on this Agreement, Purchaser promises to pay ell collection costs including such sum as the Court may fix as attorney's fees. When said purchase price together with accrued interest, if any, is fully paid, March. Associates, known as the Seller, and/or agent for the Purchaser agrees to execute or cause to be executed in favor of the Purchaser a deed or certificate of ownership or other evidence of title of said property, and this Agreement shall terminate. The acceptance of over-due payments or the waiving of any term or condition of this Agreement by the Seller shall not constitute a waiver of any subsequent payment or subsequent breach of any term, condition or provision hereof. Until all the sums due hereunder shall be fully paid, no title shall vest in the Purchaser and Seller reserves the exclusive right to remove any marker or memorial tablet from said property. Any statement inconsistent herewith by Seller or by his agent shall not bind Seller unless in writing signed by 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 both Seller and Purchaser. It is further agreed that when this Agreement is signed by more than one Purchaser each of such Purchasers shall be jointly and severally bound + la P Raviart MOTHEX 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 IN-TERMENT OR SUBSTANTIAL SERVICES OR MERCHANDISE RELATION

HAS BEEN PROVIDED HEREUNDER. TO CANCEL, DELIVER OR

MAIL WRITTEN NOTICE OF YOUR INTENT TO:

## MT. HOLDEMETERY

### INTERMENT\*ORDER

40 call

City of San Diego

Date 9/6/88

You are hereby authorized and instructed subject to	o your rules and regulations, to inter the remains
of Dena Kence	Richmond
in a Bell Lener Funera	, date, time Monday 9/12-2PM
Church, Chapel, Graveside Chapel 4	S; Rags Jale Mortuary.
All Funeral cars must arrive before 3:30 p.m. of reg	gylar work day or an extra charge will be applied
and billed to undersigned. War time veteran	<u>b</u> .
Lot 190 Grave - Row -	
Lot // Grave How	Section Division/Black
Grave space & Care Fund	
Additional spaces and care fund	
Opening/Closing & Setup	195=
Burial Container Bell times	Courte 100°
Handling Fees	
Flower vases - Marker setting fee 1.9 1988	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Recording and filing fee	3500
Sales taxes	(A) (22)
A. Paul STY of SAN DIEGO, CAI	Total Due
Paid receipt	number 36860
Tio Mil	Balance due
9 0:	
I hereby certify I am the successful and this is your authority to make disposition of re-	of the above named decedent
that I have the right to make this authorization and any liability on account of said authorization and in	agree to hold Mt. Hope Cemetery harmless from
	Durth & in
I hereby authorize the interment in lot I hold under deed.	Signed and Al
	Address Address
Signature of recorded holder of deed	Son Drego, Coly 92114
	x 470-1/42
E mono	Invoice #
Work Order # E 7620	Acct. #

	OFFICIAL RECEIPT  WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR  From Payment of Paymen	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151  Jal Address: 5750 Fgl  Lectronic of and for	Date: 60/19 Dollars (\$	Nº 36860 /88 18 53/50, Rechmond
- 4:	Lot 190 Grave	RowS	ection 2	Division 9
	Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	GREDIT 97007 20% Selles Care 77184 —	39 60
	Acct No.	OCT 3	80% Sales 100 of Lots 77184 — Opening/ 100 7 Crosing 77181 —	19500
	w.o. = 762		Surial Containers 77182 —	100 00
-	BALANCE DUE		Handling Fee 77185 — Recording & 100 Misc Fees 77183 —	3500
	Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐	00 000	Pre-Need 53033 Trust 9022 — Sales Tax 60101	650
	AC-212 (Rev. 10-87) /03/6	ISSUED BY ANGULAR METERS	TOTAL PAID \$	531 50

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7620

NAME OF DECEDEN	T		SEX	DATE OF BIRTH	D	ATE OF DEATH
	RICHMOND		Female	Sept. 3,		ept. 5,1988
PLACE OF DEATH	CITY OR TOWN		YOR STATE IF NOT IN CALLEGRATAL	1		E OR OTHER INFORMANT
San Diego		San Diego	1	John F.		
NAME AND ADDRES	S OF FUNERAL DIRECTOR TOT PERSON AS	ederal Blvd.	CALIFORNIA LICENSE NUMBER	The second secon	okhaven R	
Inderson-Ka	gsdale Mortuary San Di	ego, CA 92102	F 1329	San Diego	o, CA 921	14
12	TYPE OF PERA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES OF	DISPOSITION		
XX 1 EDIRIAL UN	ICLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT)	BURIAL UNCLUDES		ENT AND REINTE	PANENT OF CREMATED
Q 2 CREMATION	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CRE	MATION, AND BURIAL ENTI		ENT OF CREMAT	ED REMAINS AND IN A CEMETERY
3 CREMATIO	N AND DISPOSITION OTHER THAN IN A					Total Control
D 4 SCIENTIFIC		7 DISINTERMENT, CRE	MATION, AND DISPOSITION CEMETERY	D to DISPOSITE	CORONER'S	USE ONLY
-				LI TO DISPUSITE	IN PENDING	
	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS ON CREMATER	REMAINS ARE TO BE INTERRE	D	COUNTY	
INTERMENT	Mt. Hope Cemetery 37	51 Market St. S	an Diego, CA		San	Diego
CREMATION	NAME AND ADDRESS OF CHEMATORY W		The state of the s	SIGNATURE OF		IGE OF CREMATORY
BURDAL AT SEA	ADDRESS, NEAREST POINT ON SHOREL	INE. OR CORNER DESCRIPTION	SUFFICIENT A O IDENTIFY AIN	PLACE ANERCOM	NTY OF DISPOSIT	TION
OR OSITION OTHER	4-0 Child	s Steel Leve	lock Sealed	Cashet		
OF CHEMATED REMAINS	n/a	Was Consulto	Roll Lines -	-48"	France.	
SCIENTIFIC	NAME AND ADDRESS OF FACILITY REC		1 10	110	11	
USE	n/a often	Lui ento.	space ar for	-10		
	This is to certify that I am the per	son having the right to co	ntrol the disposition of the	SIGNATURE OF	PPLICANT	
ACKNOWLEDGMENT	remains of the above named dece			>		
APPLIEANT	and I hereby acknowledge that tre		AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	DATE SIGNED		
31345134.000	this permit gives no right of unresh	ricted access to property no	I owned by me.			
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SATETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND ISHEE	SEP 1 2 1988	SIGN CORE OF	& Came	AS M.B.
CERTIFICATION OF PERSON IN CHARGE OF ENSPOSITION	DISPOSITION WAS MADE ON 9/	0/88	or person of change of the	ISPOSITION	DISPOSEIL IF A	ER OF CREMATED REMAINS APPLICABLE
IF DISPOSITION IS	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH VIta	Records	-	The contract of	
TO OCCUR IN		P.O.	Box 85222			
ANOTHER COUNTY		San	Diego, CA 92138-	5222		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

MT. HOPE CEMEJERY

### INTERMENT ORDER

City of San Diego

Pate 9/6/88

You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains Funeral, date, time Z Church, Chapel, Graveside 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. War time veteran \_ Grave space & Care Fund Additional spaces and care Opening/Closing & Setup ... Burial Container ... Handling Fees . Flower vases - Marker setting fee ... Recording and filing fee Sales taxes of the above named decedent hereby certify I am the 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 M

PY-502 (REV. 8-85)

NOTE

\$ 60/,50 San Diego, California	September 9 19 88
30 days after date for value received, the undersigned	maker promises to pay to Mt. Hope
Cemetery or San Diego City Treasurer or order at 3751 the sum of Legitle The	DOLLARS with interest from

payable on demand.

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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

PRINT NAME DONNIE FOSTER	SIGNATURE Donne Forler
ADDRESS 1237 E' 18+6 STT7	N. City Ca 92050
	9

CALIF. DRIVERS LIC. #

### OFFICIAL RECEIPT



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

36664

32734	204-3131	01	2 - 16
From: Diluc total	Address /23 7 8	Date:	147770
InPayment of	carlo Cathour	Dollars (	200,00
I WIT GILL	Telep G. I		Division / 5
Invoice No. Grave	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID IN THIS SPACE	CREDIT 57007 20% Sales Care 77104	Blook
Acct. No. 2 - 762/	CITY AUDITOR	80% Sales 100 of Lots 7784 - Opening/ 100 Closing 77151 - Burial 100	000 00
BALANCE DUE 68/, SO	SEP 14 1988	Gontainers 77182 - 100 Handling Fee 77185 - Recording & 100	
Pre-Need Lot	1 /2 /11	Misc. Fees 77183 - Pre-Nied 53033 Trust 9022 Bales Tax 60101 78390 -	
AG-212 (Rev. 10-87)	ISSUED BY TAME NO	CHOTAL PAID S	200 00

### PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-7621

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	п		SEX	DATE OF BIRTH	DATE OF DEATH
	NICOLE CATHERI	NE FOSTER	Female	Dec. 11, 1986	Sept. 4, 1988
PLACE OF DEATH	William Tolling Tollin	PLACE OF DEATH-COUNTY IS			POUSE OR OTHER INFORMANT
San	Diego	San Die	ego	Donnie Foste	The state of the s
	SS OF FUNERAL DIRECTOR ION PERSON AC	CONTRACTOR OF THE PROPERTY OF	- The state of the	The second secon	th St. Apt. 7
Anderson-Ra	gsdale Mort.: 5050 Fe	deral Blvd.; Ca.	1329	National Cit	y, California 9205
44.00	TYPE OF PERM	AIT, CHECK ONLY ONE OF T	HE FOLLOWING TYPES O	F DISPOSITION	
M 1 BURIAL IIN	ICLUDES ENTOMBMENT)	D 5 DISINTERMENT AND 8 ENTOMBMENT)	URIAL INCLUDES	B. DISINTERMENT AND R	EINTERMENT OF CHEMATED
	N AND BURIAL (INCLUDES INURNMENT)	B DISINTERMENT, CREM     INCLUDES INURNMENT	ATION, AND BURIAL	9 DISINTERMENT OF CR	EMATED REMAINS AND THAN IN A CEMETERY
GEMETERY  SCIENTIFIC		7 DISINTERMENT, CREM OTHER THAN IN A CE	ATION, AND DISPOSITION METERY	FOR CORONI	ER'S USE ONLY
INTERMENT		3751 Market Stree	et; San Diego,	California	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	h how Pile	NIED DATE CHEMATED	SIGNATURE OF PERSON IN	CHARGE OF CHEMATORY
BURKAL AT SEA DR DIEPOSITION OTHER N. A CEMETERY ATED REMAINS	N/A W	on or proper description su	OX Bell	PLACE AND COUNTY OF DIS	POSITION
SCIENTIFIC	NAME AND ADDRESS OF FACILITY RECI	IN Center	of Spav		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece- and I horeby acknowledge that tre this permit gives no right of unrestr	dent under provisions of the l espass and nuisance laws app	Health and Safety Code, ply and understand that	SIGNATURE OF APPLICANT  DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	ANDAS THE	SEP 9 1988	SIGNATURA OF LOST MES	STAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	1111-1-11-	TER DATE) SIGNALULE	or person of change of a		NUMBER OF CREMATED REMAINS R. IF APPLICABLE
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	P. 0. Box 852 San Diego, Ca	22 	-5222

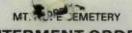
COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

073830 09/13/88 027572 DONNIE FOSTER V 8-762/ 100 072 100 072 100 072 100 072 100 072 100 072 100 072

77181 000072 77182 000072 77183 000072 77183 000072 77184 000072

150.00 90.75 96.75 96.55

PARTIAL PAYMENT



### INTERMENT ORDER

City of San Diego

Date 9-7-88

of Soll Lead	MCA ALEX (TIME MANG 9/12 15:0)
Veult/Liner (1)	BONNO Withall
Church, Chapel, Graveside	A Contract / Resolution
All Funeral cars must arrive before 3:300m.	
and billed to undersigned. War time veteran	
Lot 5/ Grave X Row	Section Division/Block_//_
Grave space & Care Fund	
Additional spaces and care fund	
Opening/Closing & Setup	A.G.
Burial Container	0) (1)
Handling Fees	N 02)
Flower vases - Marker setting fee()	1 Oleral 135.00
Recording and filing fee	V Marew 3500
Sales taxes T.	
( with	Total Due BOR
AVED & Paid re	ceipt number 36670 170-00
11100 2 19	Balance due
Via no	Balance due
I hereby certify I am the	of the above named deceder
that 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
any liability on account of said authorization a	ind interment.
I hereby authorize the interment in lot I	
	Signeture
hold under deed.	Signeture
hold under deed.	Address
hold under deed.	Address
I hereby authorize the interment in lot I hold under deed.  Signature of recorded holder of deed	Address State Zip Cod

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

The seal of the	16 OF 1818 Jus	Date: # 19/1-	7-/2 19
In Payment of	est a Title on	Dollars (	170,00,
Lot Grave_	B Moder	Settle 15	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 -	
BALANCE DUE	CITY AUDITOR SEP 14 1989	Opering 100 Closing 77181 - 100 Containers 77182 - 100 Handling Fee 77185 - 17	
Pre-Need Lot	SET .	Recording & 100   Mac. Faces   77183 -   77183 -   77183   77184   7	190 0
AC-212 (Rev. 10-87) 84/06	ISSUED BY THAT VOL	TOTAL PAID \$	17000

## INTERMENT ORDER AND AUTHORIZATION

E-7622

Contract No.		Interment No.	De la constante de la constant		Date 9/	/9/1988
No interment shall take place unto the Cemetery performing the	til a written authority interment.	y, signed by the p	roper relative or legal	representative	of the decea	sed has been give
e undersigned hereby request a	nd authorize:				POLICE	
Name of Cemetery	Mt. Hope Cemetery					
in accordance with and subject to	its rules and regulati	ons to inter the re	emains of:			4 1 1 1 1 1
NAME OF DECEDENT	Xenia M. Tichacel	c .		Age	87	Sex Female
n the following described interme	nt space:			Ago	H	002
Grave 8 Lot 51	Block La	wn11	Double Dept	h Yes 🗆 No 街	Section	1
Cn/ptTierC	Corridor		Mausol	eum		Salt Fe
Niche No. Colu	mbarium		Mauso	leum	-Tue	
The undersigned hereby certify the interment, entombment or inurnment remains of the deceased as indicated in the interment of the interment of the interment of the interment of the purchased in connection with this undersigned hereby agree to responsible attorneys, fees and a second like the interment of the i	ent of the remains of the above. The uncountries above describe remains of the herei interment in the Intermentity and hold	he deceased, and dersigned hereby ed Interment Rigi in named deceas rment Right descriptions i harmless the co	I hereby authorize the a further certify and rep its and hereby authori- ed. Cemetery is hereby ribed herein.	above named cer present that they ze use of said in y authorized to it d employees fro	netery to may are the ow terment Rig install any or im any and	ke disposition of th ner(s) or authorize hts of the interment after burial contains all liability, including
easonable attorneys' fees, and a authorized hereunder.	gainst any loss it of	4-04-6		on with the interr	ment, entom	bment or inurnme
Signature // CAuthorized Representative	1200s	/ Barbar	a J. Bois	1	Friend mationship to De	
AGOS Ni	. San Diego, CA S				MINERAL MARKET	222-8862
Address 4000 Magaza Ave	City	State	2.ip		Tel. No	222 0002
		,		,		
Signature (Authorized Representative)	-	Print Name		Ri	elationship to De	ceased
Address		The state of the s			Tel. No	
Sti	reet C	ly	State Zi	p.		
		OFFICE U	SE ONLY			
					Interment F	ee \$
Funeral Director					Tel	
ype of Service		Davi	Date	7	Time of Serv	ica
ype of Outer Burial Container	7.72	Day	Supplier		inite of our	
cation Service		Day	Date		Time of Sen	/ice
Date of Birth	Place of Birth	Day				rs in County
Date of Death	Place of Death				The state of the s	rs in State
REMARKS					111130919945501	EVILVE AND SX
	OTHE	R NEAR RELAT	IVES OF DECEASED			
4					345	
***************************************	Address	amount with tall	A		Relat	son
ame	Address				Betat	don
	No.				Datas	
ame y	Address					109
ame)	Address				Relat	lon
Taken By	Location Che	cked and Verified				
	Cocanon One					
OK'd By		Date	RS EBU -			The state of the s
ndex Card Plat Book	Plat Card					P. Carlotte
Recorded By				100	100	

FORM: 23 REV. 8/85

# INTERMENT ORDER AND AUTHORIZATION E-7622

Contract No.	In	terment No.		Date	9/9/1968
No interment shall take place unti-	la written authority, signterment.	ned by the prop	er relative or legal represe	ntative of the dece	eased has been given
me undersigned hereby request ar	nd authorize;	Land 198	CONTRACTOR OF THE	To be did not	7 10 100
Name or Cemetery	t. Hope Cenatery			and the same	
in accordance with and subject to it	s rules and regulations	to inter the rema	ins of:		
NAME OF DECEDENT in the following described intermer	Nemia M. Tichevii nt space:			Age 97	Sex Finale
Grave Lot 5	llockLawn_	13	Double Depth Yes	No 🗀 Section	1
Niche No. Colur	mbarium		Mausoleum	J-4-3	
The undersigned hereby certify the interment, entombment or inurnment remains of the deceased as indicated representative(s) of the owner(s) of entombment or inurnment of the repurchased in connection with this is undersigned hereby agree to	nt of the remains of the di ited above. The undersi- the above described in emains of the herein na interment in the intermer indemnify and hold has	eceased, and he gned hereby fur iterment Rights a med deceased. It Right describe miless the ceme	reby authorize the above na ther certify and represent t and hereby authorize use o Cemetery is hereby authori d herein. ttery, its agents and emplo	med cemetery to meat they are the of said Interment Rized to install any yees from any and	nake disposition of the wner(s) or authorized ghts of the interment, outer burial container of all liability, including
reasonable attorneys' fees, and ac authorized hereunder.	painst any loss it or any	of them may so	ustain in connection with the	ne interment, ento	moment or inurnmen
Signature (Authorized Representative)	150ls	Print Name	. Bola	/ Frien	
Address Street	San Theory, CA 10310 City	State	Zip	Tel. No	222-1963
Signature [Authorized Representative]		Print Name	Holy Bridge	/ Relationship to	Nanosed
- / //		Participante.		The second second	
Address	ret City	Stat	e Zip	181.100	
Funeral Director	0	FFICE USI	ONLY	Interment	Fee \$
Address				T	de la
Type of Service:  Type of Outer Burial Container		Day	Date Supplier	Time of Se	rvice
cation Service	4	Day			rvice
Date of Birth	Place of Birth	211.000			ears in County.
Date of Death REMARKS	Place of Death			No. of ye	ears in State
	OTHER N	EAR RELATIVE	S OF DECEASED	to we	The state of the s
Nam	Address			Be	fation
NAMES	Address			Re	ation
Name	Address			Re	lation
Name	Address	arena yerre et en			tation
Taken By	Location Checked	and Verified			
OK'd By		ite.			The state of
Index Card Plat Book	Plat Card				100000
Benevied De				- 1	

FORM: 23 REV. 8/85

### PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-70 22

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF POSTORS			SEX	Taken or sure	DATE OF DEATH		
XENIA MIC	CEY TICHACEK		FEMALE	JAN 24, 1901	SEP 5, 1988		
PLACE OF DEATH	CITY OR TOWN		PLACE OF DEATH—COUNTY FOR STATE IF NOT IN CALIFORNIAL SAN DIEGO		SPOUSE OR OTHER INFORMANT		
BEARDSLEY.	AFFCHETT FORERAL HOME, THY	"SUNSET" CLIFFS	F-816	SAN DIEGO, CA 92107			
	TYPE OF PERM	NT, CHECK ONLY ONE O	THE FOLLOWING TYPES O	OF DISPOSITION			
XXXI BURIAL IN	CLUDES ENTOMBMENT	5. DISINTERMENT AN	D BURIAL IINCLUDES	B DISINTERMENT AND REMAINS UNCLUDES	REINTERMENT OF CREMATED INURNMENT)		
☐ 2 CREMATION AND BURIAL IINCLUDES INURNMENTI		6 DISINTERMENT, CR		9 DISINTERMENT OF CODISPOSITION OTHER	REMATED REMAINS AND THAN IN A CEMETERY		
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY  4 SCIENTIFIC USE		7. DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY  10 DISPOSITION PENDING			
INTERMENT	NAME AND ADDRESS OF CEMETERY WI HT HOPE CEMETERY, 3751 M		ALL COMPANY OF THE PROPERTY OF	RED CO	SAN DIEGO		
CREMATION	NAME AND ADDRESS OF CREMATORY W	Carlet - L	MATED DATE CREMATED	SIGNATURE OF PERSON I	N CHARGE OF CREMATORY		
BURIAL AT SEA DR DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREU	AE. OR OTHER DESCRIPTION	SUFFICIENT TO IDENTIFY FINA	L PLACE AND COUNTY OF D	SPOSITION		
CIENTIFIC	NAME AND ADDRESS OF FACILITY RECE	EIVING REMAINS			Section 1		
ACKNOWLEDGMENT  OF  and I hereby acknowledge that tresposs and nuisance laws apply and		e Health and Safety Code,					
APPLICANT	this permit gives no right of unrestr	icted access to property no	it owned by me.	DE MARSINES HOUSE L			
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH DE THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	EANDISTHE \$4.00		88 Korall &	Campos M.D. 4A		
CERTIFICATION OF PERSON IN CHARGE QUIEFOSITION	DESCRIPTION WAS MADE ON 19	12/88 SIGNATU	eogew Ill	DISPOSE DISPOSE	E NUMBER OF CREMATED REMAINS ER, IF APPLICABLE		
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	d				

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

## MT, HOPE CEMETERY

City of San Diego

Date 9-7-88

of Jone My	nea	
in aF	uneral, date, time	
Church, Chapel, Graveside		Mortuary
All Funeral cars must arrive before 3:30 p.m	of regular work day or an ext	
and billed to undersigned. War time veteran		
29/1)		61
of Grave Row	Section Div	vision/Block
Grave space & Care Fund	- 0	
additional spaces and care fund	zec ,	
pening/Closing & Setup	Lew from	-
	1 1A	1
urial Container Matte	amstang	
landling Fees	5 Rang	77.
lower vases - Marker setting falls	co co co	X 1
Recording and filing fee		
ales taxes		······ 32 -1
	Total Due	1135.00
Paid r	receipt number 260	35.00
	Ba	lance due
hereby certify I am the and this is your authority to make disposition	of remains as above indicate	
hat I have the right to make this authorization		Cemetery harmless from
ny liability on account of said authorization	and interment.	
	and interment.	
ny liability on account of said authorization hereby authorize the interment in lot I	Signature	
ny liability on account of said authorization hereby authorize the interment in lot I		
ny liability on account of said authorization hereby authorize the interment in lot I old under deed.	Signature	Žip Cod
ny liability on account of said authorization hereby authorize the interment in lot I old under deed.	Signature Address Scese	Zip Cod
ny liability on account of said authorization hereby authorize the interment in lot I old under deed.	Signature	Zip Cod
	Signature Address Scese	Zip Cod



### CITY OF SAN DIEGO, CALIFORNIA MOUNT HOPE CEMETERY

E 7623 9/18/1963

## DEED

### OWNERSHIP AND INTERMENT PRIVILEGES

то	Mattie F. Armstrong	for the sum of \$ (DOLLARS)
LEGAL	DESCRIPTION Lot 2910, Division	on 10
AS DES	SCRIBED ON PURCHASE ORDER NUMBER	C-0129
held for hereafte Cemeter	r burial privileges only with endowed care or be adopted, including the right to ingres ry. The rights hereby conveyed for interme	office of the County Recorder of San Diego County. To be s. Subject to all rules and regulations now in force or may ss and egress with essentials for care and operation of the ent privileges shall not be relinquished without the consent and must be recorded in the office of Mount Hope Cemetery.
repairs after be of plot. natural	to any monument, head stone, vaults or other erected or placed on said lot or plot. Cost In no case will the Cemetery Division be	emetery Division does not undertake or agree to make any ner improvements of like nature that is already, or may here- of same shall be assumed by legal owner or representatives e responsible for damage, malicious mischief, vandalism and right to remove any object that detracts from the embellish- rial will be permitted:

2 x 1 Single Flush Memorial

3 x 1 Double Flush Memorial (2 graves)

Dw. Clehae

Park and Recreation Director

### OFFICIAL RECEIPT



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

NE 36641

From March Cold	TADDIESS 6114 Hoe	Date:	9-11	a 19 60
thirty - fine	and the state		Pollars (\$]	.00,
Lot 29/0 Grave	Row	Section	Divisi Block	
Acct. No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	80% Sales of Lots	67007 77186	
Pre-Need Lot	CITY AUP	Handling Fee Hecording & Misc Fees Pre-Need Trust	77182	500
Pre-need Trust Cash Check C	ISSUED BY	Sales Tex TOTAL PAID	60101 76390	35 00

Pre-need Trust Cash

AC-212 (Rev. 10-87)



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From Ma Barrer	Address: 33 Sh	Date:	Teet 1	lata Vas
InPayment of	F.C. for Su	rance	Para	art'
Lot 29/0 Grave	Row	Section	Divisi Block	MUDITOR
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	OREDIT 20% Sales Care 80% Sales of Lots	57007 77184 100 77184	1 1900
wo 8-7623		Opening/ Closing Burist Containers	100 77181	500
BALANCE DUE		Handling Fee Recording & Misc. Fees	100 77185 ————————————————————————————————————	0.60
Pre-Need Lot At Need On Acct		Pre-Need	63033 9022	

ISSUED BY

Sales Tax

TOTAL PAID

80101 78390

### Memo From . . . . JAMES A. MARCH

Property: Lot 2910, Division 10, Mt. Hope Cemetery

Transfer: Gladys Smart

5118 E. Fallsview Drive

San Diego, CA 92115

(916) 582-3072

New Owner: Ila E. Raviart

33 Shasta St.

Chula Vista, CA 92010 (916) 422-6319

## POWER OF ATTORNEY

### SPECIAL

E 7623

KNOW ALL MEN BY THESE PRESENTS: That I,ES	sther Grossman
	, the undersign
(jointly and severally if more than one, hereinafter co	ollectively "principal"), hereby make, constitute a
appoint James A. March d.b.a. Marc	h Associates
principal's true and lawful attorney to act for princip principal's use and benefit:	bal and in principal's name, place and stead and
(a) To perform and sign in (his/he	r/their) place in all matters
pertaining to the sale, dispos	al, use, or to give burial rights
to any other party or parties	to that certain parcel of Cemeter
Property described as:	
Lot 2910	
Division 10	
Mt. Hope Cemetery	
This listing and Power of Atto	
Principal hereby grants to said attorney in fact full pow and thing which may be necessary, or convenient, in	ver and authority to do and perform each and every
Principal hereby grants to said attorney in fact full pow and thing which may be necessary, or convenient, in intents and purposes, as principal might or could do all that our said attorney in fact shall lawfully do or of Wherever the context so requires, the singular r	ver and authority to do and perform each and every connection with any of the foregoing, as fully, to if personally present, hereby ratifying and confirm cause to be done by authority hereof.
Principal hereby grants to said attorney in fact full pow and thing which may be necessary, or convenient, in intents and purposes, as principal might or could do all that our said attorney in fact shall lawfully do or owner with the context so requires, the singular rewards my hand this day of	ver and authority to do and perform each and every connection with any of the foregoing, as fully, to if personally present, hereby ratifying and confirm cause to be done by authority hereof.
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Principal hereby grants to said attorney in fact full pow and thing which may be necessary, or convenient, in intents and purposes, as principal might or could do all that our said attorney in fact shall lawfully do or on the within instrument, and acknowledged to me that She_executions.  Principal hereby grants to said attorney in fact full power and thing the provided and the said attorney in fact shall lawfully do or on the said state. The said state is a said attorney in fact shall lawfully do or on the said state. The said state is a said attorney in fact shall lawfully do or on the said state. The said state is a said attorney in fact shall lawfully do or on the said state. The said state is a said attorney in fact shall lawfully do or on the said state. The said state is a said attorney in fact shall lawfully do or on the said state full power and said state. The said state is a said attorney in fact shall lawfully do or on the said state full power and said state. The said state full power and said said said said said said said sai	ver and authority to do and perform each and every a connection with any of the foregoing, as fully, to if personally present, hereby ratifying and confirm cause to be done by authority hereof.  number includes the plural.
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## POWER OF ATTORNEY

### SPECIAL

	, the undersigned
fointly and severally if more than one bereins	after collectively "principal"), hereby make, constitute and
appoint James A. March d.b.a.	march Associates
principal's true and lawful attorney to act for principal's use and benefit:	principal and in principal's name, place and stead and for
(a) To perform and sign in (hi	is/her/their) place in all matters
pertaining to the sale, di	isposal, use, or to give burial rights
to any other party or part	ties to that certain parcel of Cemetery
Property described as:	
Lot 2910	
Division 10	
Mt. Hope Cemetery	
	Attorney may be cancelled at any
provided no sale is in pro	ritten notice to James A. March,
Principal hereby grants to said attorney in fact f	full power and authority to do and perform each and every at
intents and purposes, as principal might or cou	lient, in connection with any of the foregoing, as fully, to a uld do if personally present, hereby ratifying and confirmin
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wherever the context so requires, the sin witness my hand this day of	ss.  in the year 19_P. before me, the undersigned, a Notary Public SMI42T
wherever the context so requires, the sin witness my hand this day of	ss.  in the year 19_P. before me, the undersigned, a Notary Public actory evidence) to be the person_whose name subscribe
with the context so requires, the single with the context so requires with the context so r	ss.
witness my hand this day of day of day of	ss.  in the year 19, before me, the undersigned, a Notary Public actory evidence) to be the person_ whose name subscribe executed it.  OFFICIAL SEAL
with the context so requires, the single with the context so requires and	ss.  in the year 19 P. before me, the undersigned, a Notary Public actory evidence) to be the person_whose namesubscribe executed it.  OFFIGIAL SEAL DEBRA J. KNAPP
witness and purposes, as principal might or contail that our said attorney in fact shall lawfully.  Wherever the context so requires, the single witness my hand this	ss.  in the year 19 P. before me, the undersigned, a Notary Public actory evidence) to be the person_ whose name subscribe executed it.

						ALIFORNIA		8009			
STATE FILE NUME						ALTO CONTRACTOR OF THE PARTY OF		LOCAL REGISTRATI			UNBER
IA. NAME OF DEC	EDENT-FIRST	18. MIDDLE			10.	LAST	AST ZA. DATE OF DEATH (MONTH			1	
Mattie		Fran	ces		A	Imstrong		March 4,1978		106	45
	RACE	S. ETHNICI			6. 1	DATE OF BIRTH		7. AGE	IF UNDER 1 YEAR		A ROUSE
Female Ca	aucasian	Americ	an		Ar	ril 15,189	91	86 ****		. sourc	100000
S. BINTHPLACE OF D		9. NAME AND						10 BISTH MAN	AND BIRTHPLACE		
Texas		Willia	m Lut	on-Texa	s			The second second second	Hinds-Te		
11. CITIZEN OF WHAT	COUNTRY	12. SOCIAL SE	CURITY MU	****	2//	13. MARITAL STATUS		IA. NAME OF S	UNVIVING SPOUS	E 110 WIFE. ENTER	
USA		444-12	-097	Annual Contraction of the Contra		Widowed					
Homemake:	Decision .	THIS TENER	ON TEAMS	150,1750,000		loyed	(E)	Own Hom	DUSTRY OF BUSINE	35	
19A, USUAL RESIDE	-		-	OR LOCATION:		198.		ZO, HAME AND	ADDRESS OF INC	ORMANT-RELAT	ONTHIP
5118 E. 1	Fallsview .	Drive						Gladys	Smart-Da	ughter	
ISC. CITT OR TOWN		0 0	19D. Co	UNITY			19E. STATE	5118 E.	Fallsvi	ew Drive	
San Diego	0		San	Diego			CA	San Die	go, Cali	fornia	921
21A. PLACE OF DE	ATH		100000		-		THE RESERVE OF THE PARTY OF THE		SUMBER OF LOCATI	14)	2000000
Mercy Ho:	spital						4077 51	th Street			
21C. CITT OR TOW	N						21D COUNTY			15-16-1	
San Diego	0						San Die	ego			
22. DEATH WAS		LENTE	RONLY	ONE CAUSE PE	ER LI	NE FOR A. B. AND	0 (1)				ITED
INMEDIATE CAU	SE (A)	Circhel	Ta	feet				1 8 dans	APPROSI-	NO	
CURRITIONS, IF ANT.		TE T COMPEDNENC	200					1	100000000000000000000000000000000000000	WAS BIOGRAP PER	-
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							OFERATION.	No		DATE	
28A. I CERTIFY THE	AT DEATH OCCUPAND	AT THE HOUR, D	ATE 288	. AMPSICIAN	erghar		TLE.	Z#C. aute :	IGNED   280. P	HYBIGIAN'S LICENS	E WOMEN
	TATES FROM THE CA		IVE	Ela	1/5	De	100	3-6-	08 (	1296.	5
PERTEN BO. BA.		ER MO. BA TR.	. 288			NAME AND ADDRESS				4 4 4 1	
2-21-71	13	3 78	Dr	. E. Den	isc	on 550 Wasi	hington S	Street San	Diego,	Californ	ia
29. 1940177 ACCION	AT. EUICINE, ETC.	30, 21,	ACE OF IN	JURY		31	-	32A. DATE OF INJUST	MORTH, DAY, FE	32B, HO	u#
33. LOCATION (ST)		E LOCATION AND	CITY 08 TO	(X)		34, DESCRIBE HOW !	MIUNT OCCURRED		TER IN IMJUSTS		
					1					77	
35A. I CENTIFE TH THE CAUSED STATES						358 CONONER - 110	GNATURE AND DECRE	EE GX TIYLE		35C. 641	* RIGHE
36. preposition	Commercial Property and Commer							rket	The second second	. FICENSE HOMBS	•
Burial	3-6-19	78	Gree	enwood M	emo	orial Park	San Dies	o. Calif.	5370		
Greenwood		-	10Cm)	41. Local and		A THE PERSON NAMED IN COLUMN			THE CONTRACT PROPERTY.	TED BY LOCAL PER	
Greenwood	d Mortuar	y		U	16	u or Cil	470		MAR	6 1978	

Jeb 11-88

To whom if my loncene:

J. Glody & Smart of
my Sister Esther Growing
are the Survivaring Childen
J. Mattis F. Armitancy

Ligned

Geody & Swart

Jeb 11-1988

MT. HOPE CEMETERY

### INTERMENT ORDER

City of Sart Diego

Date 9/8/88

You are hereby authorized and instructed sub		at a constitue
of Joseph Substitution	decreased by the same same guilations, to interpret	Tan Is
0.001	ineral, date, time Fric - //Am	9/9
Church, Chapel, Graveside Chapel	Ils Page lab	Martina
The mean of the first of the fi		_ Mortuary.
All Funeral cars must arrive before 3:30 p.m.	V (1.1.11)	il be applied
and billed to undersigned. War time veteran	Adda Land	.,,
Lot 26 Grave Row	Section 2 Division	11
l:-0.	7 -	49/0
Grave space & Care Fund	Jeans.	7/03
Additional spaces and care fund	mon-	210 00
Opening/Closing & Setup		320 -
Burial Container Bell Luce	·	100-
Handling Fees		145 2
Flower vases - Marker setting fee	sut en	444
Recording and filing fee		35 -
Sales taxes	15/00	650
Sales taxes	Total Due	1.50
	eceipt number 36688	101.50
18h	Balance due	-6-
and O.	+	
I hereby certify I am the and this is your authority to make disposition	of the above nam	
that I have the right to make this authorization	and lagree to hold Mt. Hope Cemetery ha	rmless from
any liability on account of said authorization	and interment.	
I hereby authorize the interment in lot I	*	
hold under deed.	Signature	
Signature of recorded holder of deed	Address	
	State	Zip Code
	Telaphone	0
	17382	0
West Corner E 7624	Invoice # P3 75	1
Work Order # _ 1024	Acct. #	1

	W.O.	#	 16	LT
OTE				
	-			

		2000
10150	San Diego,	California

0019	-00
sept /-	1988

m1 011

30 days after date for	r value re	ceived	, the u	ndersigned	maker	promises	to p	ay to	Mt.	Hone
Cemetery or San Diego	City Treas	surer,	or ord	er at 3751	Marke	t Street.	San	Diego.	. Ca	92102
ti of Clober 10,	Munde	20	ne at	50/00-		- DOLLARS	s with	h inte	erest	from
_ October 10.	1988	on the	unpaid	principal	at th	e rate of	12 p	ercent	per	annım
- 72 1 1	White the same of		100000					500 SEC. 100		- management

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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

PRINT NAME	SIGNATURE *	
ADDRESS		
CALIF. DRIVERS LIC. #		

MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 9/8/88

	, //
(larot V.)	ject to your files and regulations, to inter the remains
of Republic	Fai - Usu 9/2
in a Fur	neral, date, time the 1/4m 4/9
Church, Chapel, Graveside Chapety	HS; Pagolele Mortuary.
	of regular work day or an extra charge will be applied
and billed to undersigned. War time veteran	Korea- Curry.
Lot 26 Grave 7 Row	Section Division
Grave space & Care Fund Lengle.	9, and 495 3
Additional spaces and care fund	none -
Opening/Closing & Setup	320 €
Burial Container Bell Lines	
Handling Fees Labor	145 ℃
Flower vases - Marker setting fee	sut in .
Recording and filing fee	- ~ 00
Sales taxes	150
en market	Total Due //Ol. So
Decays	
Paid re	ceipt number
30.	Balance due
Via	to
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 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.	Telesca y Xeny
Signature of recurded holder of deed	Straphorn Chiqueles Joseph Zin Cook
F was.	Invoice #
Work Order # <b>E</b> 7624	Acct. #

NOTE

11-150				
 101-50	Sa Sa	n	Diego,	California

Sept 9- 1988

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 sum of Level Hunter One of Dollars with interest from Colone 10, 1988 on the unpaid principal at 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

ADDRESS X 3515 So JOBNE # 103 J. G. Calif. 900116

CALIF. DRIVERS LIC. #X 71415989

### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E 7624

NAME OF DECEDEN		DE BUICK HAR MAKE 140 P	SEX	DATE OF BIRTH	DATE OF DEATH			
NAME OF DECEDEN	JOSEPH HAI	K	MALE	Nov. 14, 1928	CONTRACTOR DESCRIPTION			
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY IS		NAME AND ADDRESS OF SPOUSE OR OTHER INFORMANT				
NAME AND ADDRES	agsdale Mort.: 5050 Fo	CTING AS EUCHO	1329	The state of the s	rea Ave. Apt. 103			
	TYPE OF PER	MIT, CHECK ONLY ONE OF T	HE FOLLOWING TYPES O	F DISPOSITION				
- 20 1 BURIAL IIN	CLUDES ENTOMBMENTI	5 DISINTERMENT AND 8 ENTOMBMENT)	IURIAL (INCLUDES	B DISINTERMENT AND REPRESENT (INCLUDES II				
	N AND BURIAL (INCLUDES INURNMENT)	DISINTERMENT, CREM	ATION, AND BURIAL	9 DISINTERMENT OF CRE DISPOSITION OTHER T				
☐ 3 CREMATIO CEMETERY ☐ 4 SCIENTIFIC		7 DISINTERMENT, CREM OTHER THAN IN A CE	ATION, AND DISPOSITION METERY	FOR CORONE	R'S USE ONLY			
TERMENT	NAME AND ADDRESS OF CEMETERY W	3751 Market Stree	et: San Diego,	California	San Diego			
CREMATION	NAME AND ADDRESS OF CREMATORY V	2090 NOW	Dealer DATE COMMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY			
BURIAL AT SEA OR SMON OTHER IN A CEMETERY OF OREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	Bell Lines	FFICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF DIS	OSITION.			
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	CEIVING REMAINS	750	MIN'S				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pe remains of the above named dece and I hereby acknowledge that to this permit gives no right of unres	ident under provisions of the l espass and nuisance laws ap	Health and Safety Code, ply and understand that	SIGNATURE OF APPLICANT  DATE SIGNED				
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS THE N THE PERMIT	SEP 9 1988	- Cultural and a second a second and a second a second and a second a second and a second and a second and a	STEAM ISSUING PERMIT			
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	19/88 SHINNIGHT	OF PERSON IN CHARGE OF	DISPOSITION LICENSE I	NUMBER OF CREMATED REMAINS I IF APPLICABLE			
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAN OF	P. (	tal Records 0. Box 85222 Diego, Califor	nia 92138-5222				

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF THE PERSON IN CHARGE OF THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From Bellevon Kenis	Address 35/5 5. 6	Brea Ho	9-1 3,0%	5 (1988)
nPayment of	one 50/100	Cateria	Dollars (\$ _	1101.50
ot 26 Grave	7Row	Section	2	Division // Block
Pre-Need Lot D At Need D On Acct D Pre-need Trust D Cash D Check	NOT VALID FOR PURPOSE STATED UNLESS STATED IN THIS SPACE	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Gosing Burnal Containers  Handling Fee Recording a Miso. Fees Pie-Need Trust Sales Tax  TOTAL PAID	67007 77184 100 77184 100 77181 100 77182 100 77182 100 77183 63033 8022 60101 78390	

## SAN DIEGO,

5563509/16/26	-1	101.1 7388	NU5
09/16/68 5563 09/16/68 5563		1101	CF

CITY OF SAN DIEGO AUDITOR & COMPTROLLER REPORT NO. C65-102

NUMBER OF INVOICES PAID

1,101.50

TOTAL AMOUNT PAID

### PAID INVOICE REPORT BY DEPARTMENT AS DF 09/19/88

DATE: 09/19/88 TIME: 213347 PAGE: 7

PROPERTY DEPT-MT HOPE CEMETERY DEPARTMENT 072 PD ACCT PAYM PAYM INV INV CUSTOMER NAME FUND DEPT DRG UNPA ID BALANCE ND DATE NO DATE REF NO AMOUNT PAID AMOUNT BILLED BN/EQ FACILI AMOUNT APPLIED ACCT 1/0 OPER 1.101.50 073828 09/13/88 027574 REBECCA A. KINES 09/15/88 CK 0.00 1.101.50 PAID IN FULL 072 77181 100 000072 320.00 100 77182 072 000072 100.00 072 000072 35.00 072 100 77184 000072 396.00 000072 072 145.00 100 77185 60101 78390 6.50 77184 99.00

### MT. HOPE CEMETERY

City of San Diego

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 will be applied and billed to undersigned. War time veteran \_ \_\_\_\_Section Row \_ Grave space & Care Fund Additional spaces and care fund Opening/Closing & Setup ..... Burial Container ..... Handling Fees .... Flower vases - Marker setting fee ... Recording and filing fe 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 hold under deed. frignature of recorded holder of deed Invoice # Work Order # Acct. #

PY-593 (REV. 8-85)

ADDRESS	4794 Jeffer Lane, La Mesa, Ca 92041	TING			ACCT. NO.	
DATE	ITEMS	DEBIT	r	1	CREDIT	BALANCE
88 98 10-6-7-13 13-6-8-9-9-9-9-9-9-9-9-9-9-9-9-9-9-9-9-9-9	Lots 4701 & 4702, Division 10  Coupon 182 Leveret 3685  Varian 384 leveret 3685  Coupon 5/6 Reariest 37402  Coupon 11 Peccept 38285  Leveret 38997  Coupon 2, Reariest 38997	1390	00		11600 11400 22800 5700 5700	127900 126000 109600 81800 76100 90900
20 89	Course 16-24, Vereigh 38389				53500	2 201



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA

PROP	ERTY DE	PARTI	MENT	
OUNT	HOPE	CEN	METE	RY
	264-	3151		1000

	110901	Date:	74 .1900
From: Mundlica S	Address: 119	Dollars	(s 1/6 d)
In Payment of	ipon 172 00	dit det	
Lot 470/4 4/1/2 Grave_	Row Se	ection	Division /
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	OREDIT 67007 20% Sales Care 77184	
Acct. No.	CITY AUDITOR	80% Sales 300 of Lots 77184 Opening/ 100 Closing 77181	
BALANCE DUE 1201.00	SEP 19 1988	Burial 500 Containers 77182	
BALANCE DUE		Handling Fee 77185 Recording & 100 Misc. Fees 77183	
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-Need Trust ☐ Cash ☐ Check ☐	1 / //	Pre-Need 63033 Trust 9022 Sales Tax 60101	
AC-212 (Rev. 10-87)	ISSUED BY	TOTAL PAID 1	1160



Invoice No. Acct. No.

From

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

Grave.

On Acct

Check |

Payment of

At Need

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Roy

Address

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

busin

4. Tex	Date:	11-	10	1906
19	Culto	ollars (\$	1190	0,
,s	ection		Division Block	
AUBHOR 21 1988	CREDIT 20% Sales Care 80% Sales of Lota Opening/ Closing Burial Containers Handling Fee Recording & Misc. Feet Pie-Need Trust Sales Tax	67007 77184 — 100 77181 — 100 77181 — 100 77182 — 100 77182 — 100 77183 — 63033 8022 — 60101 78390 —	11	900
L. WALL LIES	TOTAL PAID	3	1/4	011

AC-212 (Rev. 10-67)

Pre-Need Lot

Pre-need Trust Cash

BALANCE DUE

ISSUED BY



WHITE TO CUSTOMER CANARY CEMETERY PINK ADDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From Any Segawa In Payment of	Address: 4794 ) 16	Date:	1-6 -, In Mes	29 0,
-Lot 410 18 4702 Grave	RowSe	ection	Division Block	5
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Bursal Containers	67007 77184 100 77184 100 77181 100 77182 100	T 1900
Pre-Need Lot	ISSUED BY SOUTH MAN	Handling Fee Recording & Mass Fees Pre-Need Trust Sales Tax	77185 100 77183 63033 9022 80101 78090 \$ ////	

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Nº 37402

From: Cyclo Service of Cyclo Payment of	Address: 4-194 Jef	Date: 2- Dollars (	\$ 200 (D)
-Lot 701 # 47102 Grave	RowS	ection	Division /O
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.  CITY A  MAR 06	Ascording & 100	228.00
Pre-need Trust Cash Check C	ISSUED BY TONGO COLO	Sales Tax 80101 78390 TOTAL PAID \$	228 0

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

From: Tom Segawa	Seven & not los & Ban	ollars (\$	57.0	000
Payment of	super 11 overest dot		Division /	0
Lot - 101 - 10 Grave	Row Section	VI COLUMN	_ Block	_
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 20% Sales Care	67007 77184 —	-	
Acat. No.	PAID IN THIS SPACE  20% Sales Care 30% Sales Care 30% Sales of Lots Opening/	77184	51	00
wo E-7625	A CHILDREN TO THE PARTY OF THE	77181 —	Name of Street, or other Designation of Street, or other Desig	-
171100	2 A Buriat Containers	77182 -	-	1
BALANCE DUEY 161100	JOL Handling Fee	77165 —		
	Recording A Misc. Fees	77183 —		-
Pre-Need Lot At Need On Acct	Pra-Need Trust	63033 9022 —		-
Pre-need Trust  Cash  Check	Thousand Man States Tax	60101 78390 —	60 10 A F-3	
AG-212 (Rev. 10-87) 860	ISSUED BY SNOWD OF CROWN TOTAL PAID		57	00

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

NS 38497

	200011	Date:	0 199/
From: State Branch	Address: 7	Dollars (\$	52.00)
In Payment of	laugen 12 On	estet of	
Lot 47014 4702 Grave		ection	DivisionBlock
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 57007 20% Sales Care 77184 —	6005
Acct. No		80% Sales 100 of Lots 77184 — Opening/ 100 Closing 77181 —	CUTY AUDPIOR
w.o. 6-19-5		Burial 100 Containers 77182 -	1 1089
BALANCE DUE		Handling Fee 77185 — Recording & 100 Misc. Fees 77183 —	SEP 11 100
Pre-Need Lot At Need On Acct		Pre-Need 63033 Trust 9022 -	THE RESERVE TO SERVE THE PARTY OF THE PARTY
Pre-need Trust Cash Check C	ISSUED BY MINE MINE	Sales Tax 60101 78390 — TOTAL PAID \$	5.700



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY 264-3151

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		EX.	123	70	ы	60	52.
ю	н	ple.	3	*	0	U.	Ų.

From: Wife State State In Payment of	- moreon	Date: 9	2/11. 1/20 4/ us 57.00 )
Lot 4701 \$4702 Grave	RowSe	ection	Division / Division
Acct. No.  W.O.  BALANCE DUE  Pre-Need Lot  Pre-need Trust  Cash  Check	NOT VALID POR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 5703 20% Sales Care 7718 30% Sales 107 of Lots 7718 Opening/ 107 Closing 7718 Burial 107 Containers 7718 Handling Fee 7718 Recording 5 107 Misc Fees 7718 Pys-Need 5303 Trust 902 Sales Tax 9010	SEP 2 5 1989
AC-212 (Play 10-87)	ISSUED BY BANK BE	TOTAL PAID	5700



WHITE ...... TO CUSTOMER

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

N2 38088

PINKAUDITOR	264-3151		1	21	do
	11.901	Date:	10	31	907
From: PRO SERVICE	Address:	11 hod	-100	1100	200
and purated	bis 11/d 15	11100-0	ollars (\$	1710	0)
In Payment of	ufan 119 10	cuaco	004	450.7	201 P
Lot 4 701 44 12 Grave	Row S	ection	D	ivision/C	)
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care.	87067 77184	1917	W
Acct. No.		80% Sales of Lote Opening/	77184 100	114	OBITOR
w.o. // // // /		Closing Buriel Containers	77181	NOV	6
BALANCE DUE O O O O O		Handling Fee	77185 100		1989
Pre-Need Lot At Need On Acct		Recording & Misc. Fees Pre-Need	77183 ————————————————————————————————————		123
Pre-need Trust Cash Check	1///	Trust Sales Tax	80101 78390	1111	
AC-212 (Rev. 10-87)	ISSUED BY MAN AND COLOR	TOTAL PAID	1 2	114	00



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

NIS

From: Charles May Miles Miles	Address: 4 1/1/4	Date:	01lars (\$ 00000)
4701/5F102	egens for 200	Ulla	Division /
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burisl Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	87007 77184 100 77181 100 77182 100 77185 100 77185 100 77183 83033 9022 60101 78380

1

Tom & Ayako Segawa 4794 Jeffer Lane La Mesa, Ca 92041

ACCOUNT No. E-7625

Month and Day Due Indicated Below

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

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

1.

57.00

Credit Lot

Amount due if paid more than 10 days after due date above.

58.00

NAME TOM & AUDINO SOFAWA
ADDRESS 4794 Jeffer La

CITY LAMESA STATEA ZIP92041

☐ check ( v' ) if this is new address

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ACCOUNT NO. E-7625

Credit Lot

Tom & Ayako Segawa 4794 Jeffer Lage La Mesa, Ca 92041 >

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

Amount due when paid on, or before due date above

\$ 57.00

Amount due if paid more than 10 days after due date above

mount Received NAME TOM + AGAKO SOAWA ADDRESS 4794 Joekle Line

check ( / ) If this is new address

ond or bring one corpon with each remittan	· co	UPON		4
ACCOUNT No. E-7625	Cre	dit L	ot	
Tom & Ayako Segawa 4794 Jeffer Lane La Mesa, Ca 92041 Month and Day Due le	ndicate	d Below		
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NAME TOM TAYAKO	seg			
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ACCOUNT No. E-7625	Credit Lot
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4794 Jeffer Lane	
La Mesa, Ca 92041	
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ADDRESS 4794 Jeffer	L'EN
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Tom & Ayako Segawa 4794 Jeffer Lane La Mesa, Ca 92041	
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ADDRESS 4794 Juffer In	-
CITY of a Mech STATE Ca ZIP 2441	
☐ check ( / ) if this is new address	

and or bring one coupon with each remittance COUPON DO NOT MAIL ENTIRE BOOK	9
ACCOUNT No. 2-7625 Credit Lot	
Tom & Ayako Segawa 4794 Jeffer Lane La Mesa, Ca 92041	
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Send or bring one coupon with each remittance COUPON 10 DO NOT MAIL ENTIRE BOOK
ACCOUNT No. E-7625 Credit Lot
Tom & Ayako Segawa 4794 Jeffer Lane La Mesa, Ca 92041
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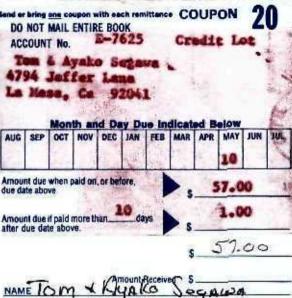
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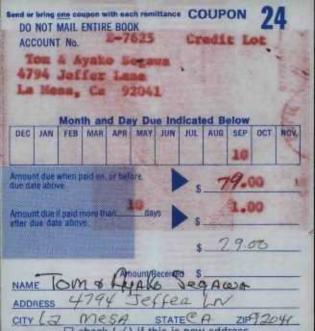
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Send or bring one coopen with each remittance DO NOT MAIL ENTIRE BOOK ACCOUNT No. Ton 5 Ayako S 4794 Jaffar La Nasa, Ca 52041 Month and Day Due Indicated Below AUG SEP OCT DEC JAN FEB MAR APR MAY JUN. JUL Amount due when paid on, or before, due date above. Amount due if paid more than... after due date above. 57.00 Amount Received NAME TOM YOUNKS



# MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 9-12-88

of sevine		Clor	0	-	
ina Dell Lever	Funeral.	date, time	Tues	9/13	201
Church, Chapel, Graveside	avesto	le 8	ecoc-	Kabul	Mortuary.
All Funeral cars must arrive before	3:30 p.m. of real	ular works	y or an ext	a charge will t	anntied
and billed to undersigned. War time			,	ge till	
and billed to diluersigned. War time			2		_
Lot Grave Ro	ow s	ection	O_Div	ision <del>/Block</del> _	0
Grave space & Care Fund					
Additional spaces and care fund					
Opening/Closing & Setup				2	50-00
Burial Container				141	1-00
Handling Fees				111	5.00
Flower vases - Marker setting fee .					
				2	5.00
Recording and filing fee				3	150
Sales taxes	***********				(- (7)
			3/1/	72 60	100
	Paid receipt	number	260	10 00	6
OX.	14	0	Ва	lance due =	0
I hereby certify I am the Jaug	alteri	n- Sa	W of the	above named	decedent
and this is your authority to make di that I have the right to make this aut	isposition of ren	nains as ab	ove indicate	d. I certify and	represent
any liability on account of said auth	orization and in	terment,	5HIL	CEY D.	EL 04
		2 Mes	1. 7	129m	~
I hereby authorize the interment in hold under deed.	lot I	tignatura_	Tella !	8400	-
	_ (	Athlines O	12 40	110 3/	22115
Signature of recorded holder of deed		Giute	V DI	EGU	Zip Code
		Talanhone	128	7-800	4
		- Annual Court			
		lavata #			
Work Order # <b>E</b> 7626		Invoice #			



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

meily how	Address: 452	1 40th Fl	Dollars (\$ 606-50)
ot Payment of	7 Row	Section	Division Block
re-Need Lot	NOT VALID FOR PURPOSE STATED UP TO AUDITOR CITY AUDITOR	80% Sales of Lots	67007 77184 100 77181 100 77182 100 77182 100 77183 63033 80022 60101 78390

E-7626

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	A BELLE CLON		Female	Dec. 17, 1892	Sept. 10, 1988
PLACE OF DEATH		PLACE OF DEATH—COUNTY IOR STA	ITE IF NOT IN CALIFORNIA)	James W. Clow -	
COLUMN TO THE PARTY OF THE PART		tional City Blvd. A pal City, CA	-284	4521 48th St San Diego, C	The second secon
4	TYPE OF PER	MIT, CHECK ONLY ONE OF THE F	OLLOWING TYPES OF	F DISPOSITION	
1 BURIAL (IN	CLLIDES ENTOMBMENTI	5 DISINTERMENT AND BURIAL ENTOMBMENT)	LONCLUDES	8 DISINTERMENT AND R	
-	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMATION (INCLUDES INURNMENT)	I, AND BURIAL	B DISINTERMENT OF CHI	
4 SCIENTIFIC		7. DISINTERMENT, CREMATION OTHER THAN IN A CEMETE		FOR CORONE	R'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY V	San Diego, CA	INS ARE TO BE INTERRE	o COU	N DIEGO
CREMATION	NAME AND ADDRESS OF CREMATORY V		DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY
BURIAL AT SEA OR OR OSITION OTHER N A CEMETRAY MATED REMAINS	Woolen-	COLL Cover	/	PLACE AND COUNTY OF DIS	POSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	CEIVING REMAINS		The second	
ACENOWLEDGMENT OF APPLICANT	remains of the above named dece and I hereby acknowledge that to	erson having the right to control the dent under provisions of the Healt espass and nuisance laws apply a tricted access to property not owne	h and Safety Code, and understand that	SIGNATURE OF APPLICANT  DATE SIGNED	
LOCAL PREGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS THE \$4.00	SEP 1 3 1986	SIGNATURE OF LOCAL REGI	Consol, M.D. Co
CERTIFICATION OF WERSON IN CHARGE OF DISPOSITION	DESCRIPTION WAS MADE ON THE	MITER/DATES	Sun Dang	LICENSE I DISPOSER	NUMBER OF CREMATED REMAINS I. IF APPLICABLE
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	1	N. N. S.	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED. OR BY THE PERSON IN CHARGE OF THE PACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



City of San Diego

Date 9-12-88

Doble Cust Fu	neral, date, time Wed 9/14 /A	m
hurch, Chapel, Graveside	Miles Manhal	ortuar
	//-	
	regular work day or an extra charge will be	ipply
nd billed to undersigned. War time veteran .	- Cate adened	-
ON Grave Row	Section Division/Block	10
		20
irave space & Care Fund		2
dditional spaces and care fund		
pening/Closing & Setup	320.	a
		OC
	320.	01
lower vases - Marker setting fee	25	a
ecording and filing feet	······································	11
ales taxes	1/21	7
Ward N. S.	Total Due	17
Paid re	ceipt number 26824 /621	14.
4100	Balance due	7
0 1 4 75.1		
hereby certify I am the Lage	of the above named de of remains as above indicated. I certify and rep	cede
nat I have the right to make this authorization ny liability on account of said authorization s	and lagree to hold Mt. Hope Cametery harmles	ss fro
ny habitry on account of sale authorization a		,
hereby authorize the interment in lot I	Leeler June	kul
old under deed.	259 San miguel Exe	e i
gnature of recorded holder of dwad	Lemen agent 9	204
	State 41 5-7771	Zip (
	Tulaphore	
E 7627	Invoice #	
Vork Order # E 1021	Acct. #	

F-7677

	U	SE BLACK INK-MAKE NO	ALTERATIONS OR ERASUE	RE5	- 100/
DANIEL T	VINCENT KUNKEL		Male	NOV. 3,	1936 Sept. 9, 1988
Chula V	Ista	San Diego	IGR STATE IF NOT IN CALIFORNIA	Heather	I. Kunkel-Wife
Conrago	S OF FUNERAL DIRECTOR ION FERSON AC LEMON GROVE MORTUA Broadway-Lemon Gr	TWE, CA 92045	P 941		Miguel Avenue ove, CA 92045
47	TYPE OF PERM	NT, CHECK ONLY ONE OF	THE FOLLOWING TYPES C	OF DISPOSITION	
1 SURIAL UN	CLUDES ENTOMBMENTI	5 DISINTERMENT AND ENTOMBMENT)	BURIAL UNCLUDES		CLUDES INURNMENT)
E 12 CREMATION	N AND BURIAL (INCLUDES INURNMENT)	B DISINTERMENT, CRE IINCLUDES INURNM			OTHER THAN IN A CEMETERY
GEMETERY  4 SCIENTIFIC	N AND DISPOSITION OTHER THAN IN A USE	2 DISINTERMENT, CRE OTHER THAN IN A	MATION, AND DISPOSITION CEMETERY	FOR C	ORONER'S USE ONLY
TERMENT	NAME AND ADDRESS OF CEMETERY WI	HERE REMAINS OR PREMATER BY San Dieg	REMAINS ARE TO BE INTERE	SED.	San Diego
CREMATION	NAME AND ADDRESS OF CREMATURY W	HERE REMAINS ARE TO BE CRE	MATED DATE CREMATED	SIGNATURE OF PE	RSON IN CHARGE OF CREMATORY
DISPOSITION OTHER THAN IN A CEMETERY OF CHEMATED REMAINS	N/A Soled Ho	NE. OR OTHER DESCRIPTION	Batesville	A	
SCIENTIFIC USE	N/A	Clom DE	suble Criffet	- Sher	il Seoclation
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tre this permit gives no right of unrest	dent under provisions of the spass and nuisance laws of	e Health and Safety Code, apply and understand that	SIGNATURE OF API	Ely over
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	EAND ISHIE &A OO	SEP 1 3 1988	SIGNATURE OF LO	L Comedi MD
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON 9/1	#/88 SIGNAYU	ogur Stelle	DISPOSITION	LICENSE NUMBER OF CREMATED REMAINS DISPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	N/A	COUNTY OF DEATH	0		

PY IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE FEMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

From: Dead Jenson No.	Les thente-che	N Samuel	10-12.	88
Invoice No.  Acct. No.  W.O.  BALANCE DUE  Pre-Need Lot  Pre-need Trust  Cash  Check  Acc-212 (Rev. 10-87)	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.  OCT 14 1988	CTION  CREDIT 20% Sales Care 80% Sales of Lota Opening Glosing Bunal Containers Handling Fee Flecording & Misc. Fees Fre-Need Trust Sales Tax TOTAL PAID	67007 77184 100 77184 100 77181 100 77181 100 77185 100	0 0000000000000000000000000000000000000



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

38646

	264-3151		146		The same
	mont 4391 (10h)	Date:	12	6	19_0/
From Cloude Mandel	Address: 27 Cont	nopue o	ollars (\$ _	125	00,
In Payment of	norther Follows.	400			
Lot 2804 Grave_	RowSe	ection		Division Block	2
Invoice No.	NOT VALID FOR PURPOSESTATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Cara	67007 77184 —	ary	1
Acct. No.		60% Sales of Lots Opening/	77184 100	DECL	O' TOP
w.o. 2- 1421		Closing Burial Containers	77181 100 77182	1	1989
BALANCE DUE		Handling Fee Recording &	77185 — 100	12	70
Pre-Need Lot		Misc. Fees Pre-Need Trust	77183 — 63033 9022 —	120	00
Pre-need Trust □ Cash □ Check 匝	1/1/	Sales Tax	60101 78390 —		
AC-212 (Rev. 10-67) 10731	ISSUED BY 1/2 COLO	TOTAL PAID	3	125	00

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 9-12-88

1921/03/04/99/09/09/07/07/09/09/07				
You are hereby authorized and	to 4 -	a Dela	gulations, to inte	r the remains
of Bell Line	The second section	el, date, time 9/	15 Thus	o Ilma
Church, Chapel, Graveside	1		oshale	Mortuary.
All Funeral cars must arrive be			on extra charge v	
and billed to undersigned. War		1		
/		2		11
Lot 19 Grave //	1	Section	Division/Bloc	k_//
Grave space & Care Fund	Lingle			2500
Additional spaces and care fur		none		- m
Opening/Closing & Setup	ייסרים			J20 =
Opening/Closing & Setup  Burial Container	sell con	ull sever	*********	100-
Handling Fees	Late	<del></del>	********	140 =
Flower vases - Marker setting				2/00
Recording and filing fee				150
Sales taxes	************			05750
Relative		Total Du	79	40000
and w	Paid recei	pt number 268	Balance due	456 50
	V	, 36e	687 due	456-50
I hereby certify I am the and this is your authority to ma	aka disposition of r	emains as above in	of the above na	and represent
that I have the right to make the any liability on account of said	authorization and	interment.	Hope Cometery	narmless from
15		Hoers	paid	4/2
I hereby authorize the interme hold under deed.	nt in lot	Andrew O	Rox 41	160
Signature of recollined holder of doed	98	Man dal 1	ECO CAL	= 9210
SEP A SEAL D	WELENIE.	12 (PL 24	22-59	7   Eq Code
ST. DER CE	EGO	helikhom)	52 52	-
WI. HOSAND	METERY.	Invoice #		
Work Order # 7628		Acct.#		
PY-883 (REV. 8-85)				



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

NY 36687

2(2)20	264-3151	0	11/ 2/
From Alexander	Address P.O. Box	Date: 7	Son (19630)
n Payment of P	il the Lagin's	Cotte	wat
ot Grave	// Row S	ection_2	Division //
Acct. No.	NOT VALID FOR PURPOSESTATED UNLESS STAMPED PAID IN THIS SPACE CITY AUDITOR	CREDIT 20% Sales Care 80% Sales of Lots	87007 77184 100 77184
NO E-7626	SEP 19 1988	Opening/ Closing Bursel Containers	100 100 00 00 00 TT182 100 100 00
Pre-Need Lot  At Need  On Acct		Handling Fee Recording & Misc. Feea Pre-Need	77185 1000 77183 690033
Pre-Need Lot	ISSUED BY ANDREW WAY	Trust Sales Tax TOTAL PAID	9022 90101 78390 \$ 4/5/6

Pre-Need Lot 
At Need

Pre-need Trust Cash

AC-212 (Rev. 10-87)

On Acct

WHITE ..... TO CUSTOMER

Division Block

Pre-Need

Sales Tax

TOTAL PAID

Trust

63033

60101

GANARY CEMETERY AUDITOR	MOUNT HOPE CEMETERY 264-3151	9/12/
From Best Tapia	Address PO Pox 444	9 - 8 B 92
In Payment of	tement face for to bar	Dollars (\$
Lot 19 Grave	// Row Se	ection 2
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	GREDIT 57007 20% Sales Care 77184 —
Acct. No. F-7/28	CITY AUDITOR	80% Sales 100 of Lots 77184 — Opening 100 Closing 77181 —
BALANCE DUE 457	SEP 19 1988	Buttat 100 Containers 77182 — 100 Handling Fee 77185 — Recording & 77182 — 77185 — 77185 — 77182 — 771

ISSUED BY

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E7628

NAME OF DECEDEN	T		SEX	DATE OF BIRTH	DATE OF DEATH
	Roberto Hernandez	Tapia	Male	Feb. 4, 1907	Aug. 31, 1988
Home Tijua	THE RESERVE OF THE PARTY OF THE	B. C. Mexi	IOR STATE IF NOT IN CALIFORNIA!	Robert Ta	POUSE OR OTHER INFORMANT
	S OF FUNERAL DIRECTOR FOR PERSON AN		CALIFORNIA LICENSE NUMBER	P. O. Box	
Anderson-F	tagsdale Mortuary 5050	Federal Blvd	1329	San Diego	, CA 92104
	TYPE OF PER	WIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES OF	DISPOSITION	
R f BURIAL BN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND	BURIAL UNCLUDES	B DISINTERMENT AND REMAINS (INCLUDES )	
2 CREMATION	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CRI		8 DISINTERMENT OF CRE	EMATED REMAINS AND HAN IN A CEMETERY
3 CREMATION CEMETERY	N AND DISPOSITION OTHER THAN IN A	T a supulation was part		ron cononir	R'S USE ONLY
☐ 4 SCIENTIFIC	USE	OTHER THAN IN A	EMATION, AND DISPOSITION CEMETERY	☐ 10 DISPOSITION PENDING	
				La lo bisrosition revoluto	
CREMATION  BURIAL AT SEA OF SSITION OTHER IN A CEMETERY MATER REMAIRS  SCIENTIFIC USE	NAME AND ADDRESS OF CREMATORY WANDAMES NEAREST BOINT ON SHORES OF ADDRESS OF FACILITY GEO	THERE REMAINS ARE TO BE CHE  Open Coult  INSERT OF THE PERMITTER  Famul  FERVING REMAINS		SIGNATURE OF PERSON IN  PLACE, AND COUNTY OF DIS	
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	dent under provisions of the espass and nuisance laws of the second nuisance laws of t	e Health and Safety Code, apply and understand that	DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE OLD	SED 1 4 198		L'Emily M.D.
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	11-11 1	NYM DATE	Corsen Tol	DISPOSER DISPOSER	NUMBER OF CREMATED REMAINS I, IF APPLICABLE
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTIFAR OF	COUNTY OF DEATH	0		

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

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

You are hereby authorized and instruct	ed, subject to your rules and regulations, to inter the remains
Bell henie	Funeral, date, time 34 9/6 2pm
hurch, Chapel, Graveside	1124 - 11
U	
	0 p.m. of regular work day or an extra charge will be applied
nd billed to undersigned. War time ve	Aeran Aeran
ot 67 Grave 10 Row	Section Division/Bleek
	1 1 10-
Brave space & Care Fund	engle + Care 300=
dditional spaces and care fund	none -
pening/Closing & Setup	300-
urial Container	100-
andling Fees Labo	
lower vases - Marker setting fee	
ecording and filing fee	3500
ales taxes	650
Let Q	Total Due 906.4
en e	Paid receipt number 36699 906-50
Kar	Balance due
_	4
hereby certify I am the	of the above named decedent
hat I have the right to make this author	osition of remains as above indicated. I certify and represent rization and I agree to hold Mt. Hope Cemetery harmless from
ny liability on account of said authoriz	zation and interment.
hereby authorize the interment in lot	x Many Hoskins
old under deed.	* 6891 Brock lyna
greature of recorded holder of deed	* Lan Diego Ca 9211
	x 266-255/ Zip Code
	Telephane
*	
F 7629	Invoice #
Vork Order # IU & 3	_ Acct. #



WHITE TO CUSTOMER CANARY CEMETERY AUDITOR

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

NE 36694

			264-3151		Date:	9-	15 198	8
From May The May Control of the Payment of the Paym	ursay	Address	Sara	0-	-	Dollars (\$	906-20 12 12 12 12	- 2
Lot 67	Grave	/o	Row	Section	n	67007	Division //	_
Acct. No. 9 -2/629	PA	D IN THIS SPACE	E at KIEU UNLEAD &	om	M/W Sales Care 10% Sales of Dots Opening/ Closing	77184 — 100 77184 — 100 100	3280	か
BALANCE DUE	Name of the last			SE	Surial Contained.  Fandling Fee Recording & Mrsc. Fees	77182 — 100 77185 — 100 77183 —	1950	000
Control of the Contro	On Acct C	JED BY	Jua 1	Pal	Pre-Need Trust Sales Tax	63033 9022 — 90101 78390 —	906 5	000

E 7629

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

		out bostes from more sto		The same of the sa	T 2102122 22323		
Levern Harris			Male	Aug. 22,	1948 Sept. 9, 1988		
PLACE OF DEATH-	San Diego	San Diego	IOR STATE IF NOT IN CALIFORNIA	Ina Flour	noy - Mother		
Anderson-Ra	agsdale Mortuary: San	Federal Bitd. Diego, &A 92102	CALIFORNIA LICENSE NUMBER	6552 Orange Ave., Apt. 2 North Long Beach, CA 90905			
-1	TYPE OF PER	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES C	OF DISPOSITION			
A)(1 BURIAL UN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT)	BURIAL (INCLUDES		NT AND REINTERMENT OF CREMATED CLUDES INURNMENT)		
☐ 2 CREMATION	N AND BURIAL UNCLUDES INURNMENT)	6 DISINTERMENT, CRE			NT OF CREMATED REMAINS AND OTHER THAN IN A CEMETERY		
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY     4 SCIENTIFIC USE		7 DISINTERMENT, CRE	MATION, AND DISPOSITION	FOR CORONER'S USE ONLY			
•	NAME AND ADDRESS OF CEMETERY V	VHERE REMAINS OR CREMATED	REMAINS ARE TO BE INTERE	10 DISPOSITION	COUNTY		
INTERMENT	Mt. Hope Cemetery;	3751 Market St.	San Diego,	CA	San Diego		
CHEMATION	NAME AND ADDRESS OF CREMATORY N	WHERE REMAINS ARE TO BE CRE	MATED DATE CREMATED	SIGNATURE OF PE	RSON IN CHARGE OF CREMATORY		
BURIAL AT SEA OR SITION OTHER IN A CEMETERY OF CHEMATED REMAINS	ADDRESS NEAREST POINT ON SHORE	LINE, OR OTHER DESCRIPTION :	SUFFICIENT TO IDENTIFY FINA	AL PLACE AND COUNT	Y OF DISPOSITION		
SCIENTIFIC USE	n/a Fin The	Lay at Rapa	ali Chipal.		Kennya Kanada		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the po remains of the above named dec and I hereby acknowledge that to this permit gives no right of unres	erson having the right to consider trader provisions of the resposs and nuisance laws a	ntrol the disposition of the E Health and Safety Code, ppfy and understand that	SIGNATURE OF AP	PLICANT		
L DCAL REGISTRAR	THE PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION EPECIFIED	DE AND IS THE	SEP 1 4 198		A. Comos M.D. B.		
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	MIERI DATE SIGNATUS	E OF PERSON IN THAIR OF		LICENSE NUMBER OF CREMATED REMAINS DISPOSER, IF APPLICABLE		
IF DISPOSITION IS TO OCCUM IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	0				

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS



# MT. HOPE CEMETERY INTERIME T ORDER

City of San Diego

Date 9/13/88

You are hereby authorized and instructed, sub	ject to your rules and reg	ulations, to inter the remains
of Ernest B	and &	
in a Col Vault Fu	neral, date, time 9/2	2-1:38M-
Church, Chapel, Graveside Quaves	ile : Us	emost Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or ar	extra charge will be applied
and billed to undersigned. War time veteran .		
Lot 38 Grave 2 Row		
		_ Division/ <del>2lask</del> _ / <del>_</del>
Grave space & Care Fund . 5-359	6	
Additional spaces and care fund	no	
Opening/Closing & Setup	,	1052
Burial Container	te Vault	40 **
Handling Fees	Labor	60 9
Flower vases - Marker setting fee		<u> </u>
Recording and fitting fee 2.1980		3500
Sales taxes CHMETERY		2.60
WI. HO PANDIEGO, CALIF.	Total Due	242.60
V - All 0	ceipt number	1/2 242,60
9/20 Maris		Balance due
Na. h	ter	data also assessed decedent
I hereby certify I am theand this is your authority to make disposition	of remains as above indi	
that I have the right to make this authorization any liability on account of said authorization a		ope Cemetery narmiess from
	Jeannet	V. a. Sioliva
I hereby authorize the interment in lot I hold under deed.	Signatura	7 0 11011
Signature of recorded holder of deed.	Address	
A ROLL OF	Stees	Ep Code
4 1.145	Telephone	
E 7630	Invoice #	
Work Order # TO OO	Acct. #	

# VALLEY CREMATORY

White River Jct., Vermont

E-7630

lame	Ernest H. Baird		
ite of	Bellows Falls, Ve	ermont	
ho died at B	ellows Falls, Vt. on	September 10, 1988	
79	years of age, was cromated	at Valley Crematory	
n Septemb	er 13, 1988 (Talo	of M Knurde 34	
,	0.04	Schoring of miles from atory.	
	DISPOSI	ITION OF CREMAINS	
remains we	o Rusied	on 9/22/88	
moto	Ale Comment from the control of the	late O	-
cernes		Town Star Digo, Ca	
ate	signed	Soyeu sulus Cem, mgr.	



WHITE .... TO GUSTOMER CEMETERY

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

36712

AUDITOR AUDITOR	264-3151	Date: 9-80	2 19
In Payment of	And too 60	Dollars (\$	212.60 ,
Lot 36 Grave	2 Rows	ection	Division/2
Acct No. 2 - 7630	NOTVALID FOR PURPOSE STATED LINLESS STAMPED "PAID" IN THIS SPACE  CITY AUDITOR	CREDIT 67007 20% Sales Care 77184 80% Sales 100 of Lots 77184 Opening/ 100 Closing 77181 Burst 100 Containers 77182	165 00
Pre-Need Lot	SEP 29 1988	Handling Fee 77185 - 9022 - 90	25 88
AC-212 (Rev. 10-87) 369	ISSUED BY GRAGE WELL	TOTAL PAID \$	242 60

# MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 9/13/88

You are hereby authorized and instruct	ted, subject to your rules and regulations, to inter the remains
of alice Be	mett Kasten,
ina South Crypt	Funeral, date, time Sat - 9/17/88 - 10 Am
Church, Chapel, Graveside	everide : Paris Mortuery.
	Shull
	30 p.m. of regular work day or an extra charge will be applied
and billed to undersigned. War time ve	iteran
Lot 4 Grave 2 Row	- Section Loof Division/Block //
0	
	u hed -
Additional spaces and care fund . 1.6	p of Double Cuffet ==
Opening/Closing & Setup	320
Burial Container Double	Cupt 330=
Handling Fees Lab	3200
Flower vases - Marker setting fee	Sat overtini fre 3800
Recording and filing fee	3500
Sales taxes	21.45
Quality.	Total Due 140 6.44
13 10	21/82 4/0/1/8
	Paid receipt number 3 660 3 7906 35
	Balance due
I hereby certify I am the	of the above named decadent
and this is your authority to make dispe	osition of remains as above indicated. I certify and represent rization and lagree to hold Mt. Hope Cemetery harmless from
I hereby authorize the interment in lot hold under deed.	1 Milliam & Benney
Signature of recorded holder of deed	State Cayon 14 92019
	felsphone
****	
F 7691	Invoice #
Work Order # <b>L</b> 7631	_ Acct. #



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From Bellen R. S	30 MAddress 1723	Date:	1-19	,1	9 61
ne titusand	Lee & Kasters	Lite	ollars (\$	1406.	15,
Lot Grave_	Row	Section IODF	=	Division /	1
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	80% Sales	67007 77184 — 100	1	
Aget. No. 8-7631	CITY AUDITOR	of Lots Opening/ Closing Buriel	77184 — 106 77181 — 100	380	00
BALANCE DUE	SEP 19 1988	Containers  Handling Fee Recording &	77162 — 100 77185 — 100	340	00
Pre-Need Lot At Need On Acct	1/1/	Misc. Fees Pro-Need Trust Saigs Tax	77183 — 63033 9022 — 60101 78390 —	21	45
AC-212 (Rev. 10-87)	ISSUED BY DRUE M.	TOTAL PAID	\$	1406	45



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

36750

	-01	Date: 9-3	30 19 80
From Millean L. Ly	11 Address 1123 M	nai be,	10/16
Journa de	walls my, 40	Dollars (	\$ 1906.95
In Payment of	express of all	the fitte	un deliberal
- The world	2 Row Se	ection IOOF	Division
Lot Grave	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	CREDIT 67007	Block
Acct. No	CITY AUBITOR	20% Sains Care 77184 80% Sains 100 of Lots 77184 Opening/ 100 Crossing 77181 Burial 100 Containers 77182	399 00
Pre-Need Lot	00T 7 1988	Handling Fee 77185 Recording & 100 Misc. Fees 77183 Pro-Need 53033 Trust 9022 Sales Tax 50101 78290	730 00
AC-212 (Nev 10-87)	ISSUED BY DANGE MA	TOTAL PAID \$	1406 451

F-7631

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	r		SEX	DATE OF BIRTH	DATE OF DEATH	
Alice Kaste	an .		Female	March 8, 1	907 Sept. 13, 1988	
PLACE OF DEATH-		PLACE OF DEATH—COUNTY OR	STATE IF NOT IN CALIFORNIA:		SS OF SPOUSE OR OTHER INFORMANT	
El Cajon		San Diego		Robert P.	Kasten-Husband	
Paris-Frede	S OF FUNERAL DIRECTOR OF PERSONNEL PROCESSION OF PERSO	Cajon CA. 92020 Magnolia Avenue	795	2400-95 Al Alpine CA.		
	TYPE OF PERA	AIT, CHECK ONLY ONE OF TH	FOLLOWING TYPES OF	DISPOSITION		
X 1 BURIAL IIN	CLUDES ENTOMBMENTI	6 DISINTERMENT AND BU	RIAL IINCLUDES		AND REINTERMENT OF CREMATED	
-225	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMA-			OF CREMATED REMAINS AND OTHER THAN IN A CEMETERY	
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY		7 DISINTERMENT, CREMA- OTHER THAN IN A CEM		FOR CORONER'S USE ONLY		
4 SCIENTIFIC	USE			☐ 10 DISPOSITION	PENDING	
INTERMENT	NAME AND ADDRESS OF CEMETERY W				San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CREMAT		SIGNATURE OF PER	SON IN CHARGE OF CREMATORY	
BURIAL AT SEA OII FOSITION GTHER 4 IN A CEMETERY REMATED REMAINS	ADDRESS NEAREST POINT ON SHOREL	HE OR OTHER DESCRIPTION SUF		PLACE AND COUNTY	OF DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC					
This is to certify that I am the per		son having the right to control dent under provisions of the He		SIGNATURE OF APPLICANT		
APPLICANT	and I hereby acknowledge that tre this permit gives no right of unrest		ALTERIOR PROPERTY AND ADDRESS OF THE PROPERTY AND ADDRESS OF THE PARTY	DATE SIGNED		
-LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COC AUTHORITY FOR THE DISPOSITION SPECIFIED IS	CAND IS/D∈	SEP 1 4 198	SIGNATURE OF COL	all & Central M. S.	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	7/88 SIGNAFOTE O	en letter	DISPOSITION LI	CENSE NUMBER OF CREMATED REMAINS ISPOSER, IF APPLICABLE	
# DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH				

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CHEMATORY WHERE THE REMAINS ARE CHEMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

### MT. HOPE CEMETERY

# INTERMENT ORDER

City of San Diego

Date 9-14-88

of Therese	
ns Jault	Funeral date, time Fu 9/16 1/an
Church, Chapel, Graveside	Del & Stave Raphale Mortuary
All Funeral cars must arrive before 3	:30 p.m. of regular work day or an extra charge will be applied
nd billed to undersigned. War time	veteran No.
ot 45 77 Grave Roy	w Section Division/Black _/O
Grave space & Care Fund	1950
THE RESIDENCE OF THE PARTY OF T	
Additional spaces and care fund	
Opening/Closing & Setup	ute Vault 125
landling Fees	200-
lower voses - Merker setting fee .	
Recording and filling fee	332
Sales taxes - P. 1. X. 1988	1/31
0=L TV 1900	Total Due
MI. HOPE CEMETERY	Paid receipt number 36686 1406.3
CITY of SAN DIEGO, CALIF.	Balance due
a	catarice due
hereby certify I am the	of the above named deceden
and this is your authority to make dis hat I have the right to make this auth	sposition of remains as above indicated. I certify and represent porization and I agree to hold Mt. Hope Cemetery harmless from
any liability on account of said autho	prization and interment.
banks and other the leterment in I.	Harrie I Ward
hereby authorize the interment in k hold under deed.	Signify 2 Anding It.
	- 10 10 00 10 1 1 1 1 1 1 1 1 1 1 1 1 1
Ignature of recorded holder of deed	Simo Cales 92 10 000
	1 239 - W94-8
F	Invoice #
Nork Order # <b>E</b> 7632	Acct. #
Y-593 (REV. 8-85)	



# CITY OF SAN DIEGO, CALIFORNIA

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151	9	/14	lox	
From Carrier L. War Fourteen for Sul Sul In Gull Payment of Br	Address 423 Dodom	Date: D	ollars (\$	14063 uson	37
Lot 4549 Grave	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales	67067 77184 100	-	00
Acct. No	SEP 19 1988	of Lots Opening/ Closing Burlel Containers Handling Fee Recording &	77184 — 100 77181 — 100 77182 — 100 77185 —	320	00
Pre-Need Lot	ISSUED BY LEDGE WITHER	Misc. Fees Pre-Neeg Trust Sales Tax TOTAL PAID	77183 — 63033 9022 — 60101 78390 —	1406	37

E-7632

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

		OF BEHON HAN MAKE 110 HE			Tear of Bearing	
NAME OF DECEDEN			SEX	DATE OF BIRTH	DATE OF DEATH	
	MINNIE HEND		Female	April 24,1903	Sept. 10, 1988	
PLACE OF DEATH-		PLACE OF DEATH—COUNTY ION S	TATE IF NOT IN CALIFORNIA!		POUSE OR OTHER INFORMANT	
India	anapolis	Indiana	The Street Street	Carrie Ward - Cousin		
NAME AND ADDRES	S OF FUNERAL DIRECTOR IOR PERSON A	CTING AS SUCHI San Diego	FORMA LICENSE NUMBER	423 Dotson S	TOTAL TOTAL CONTRACTOR OF THE PARTY OF THE P	
Anderson-Ra	agsdale Mort.: 5050 Fo	ederal Blvd.;Ca.	1329	San Diego, C	alifornia 92102	
	TYPE OF BED	WIT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF	DISPOSITION		
	TIPE OF FER	WII, CHECK ONLY ONL OF THE	TOLLOWING TITLE C.	5101 50111011		
1 SURIAL IIN	CLUDES ENTOMBMENTI	5. DISINTERMENT AND BUR ENTOMBMENTI	AL UNCLUDES	REMAINS INCLUDES I		
2 CREMATION	N AND BURIAL INCLUDES INURNMENT!	G DISINTERMENT, CREMATI (INCLUDES INURIMENT)	ON, AND BURIAL	DISINTERMENT OF CRE DISPOSITION OTHER T	MATED REMAINS AND HAN IN A CEMETERY	
CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY		7 DISINTERMENT, CREMATI		FOR CORONER'S USE ONLY		
4 SCIENTIFIC	USE	Daniel There is a cent		10 DISPOSITION PENDING		
	NAME AND ADDRESS OF CEMETERY V	VHERE REMAINS OR CREMATED REM	IAINS ARE TO BE INTERRE	D COU	NTY	
INTERMENT	Mt. Hope Cemetery:	3751 Market Street	: San Diego.	California	San Diego	
CREMATION	NAME AND ADDRESS OF CHEMATORY V	WHERE REMAINS ARE TO BE CREMATE	D DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CHEMATORY	
RURIAL AT SEA OR DISPOSITION OTHER IN A CEMETERY MATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	we or other description suffices - how lend	CIENT TO IDELUITY FINAL	PLACE AND COUNTY OF DIS	at enymo.	
SCIENTIFIC	NAME AND ADDRESS OF FACILITY REC	CEIVING REMAINS	Maria de la compansión de			
USE	N/A					
	This is to certify that I am the pe	son having the right to control	the disposition of the	SIGNATURE OF APPLICANT		
ACKNOWLEDGMENT	remains of the above named deci	edent under provisions of the He	olth and Safety Code,	<b>&gt;</b>		
DE EXPELICANT	and I hereby acknowledge that to this permit gives no right of unres	espass and nuisance laws apply tricted access to property not ow	and understand that ned by me.	DATE SIGNED		
1 OCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED.	DE AND IS THE A ON	SEP 1 5 1988	SIGNATURE OF LOCAL REGI	mark MAB	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPASSITING WAS MADE ON THE	NEW BATE	ven tel		NUMBER OF CREMATED REMAINS 7. IF APPLICABLE	
The statement	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH Vita	Records			
IF DISPOSITION IS TO OCCUP IN		P. 0	Box 85222		A STATE OF THE PARTY OF THE PAR	
ANOTHER COUNTY		San	Diego, Califo	rnia 92138-522	2	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

# MT. HORE CEMETERY INTERMENT ORDER

City of San Diego

Date 9-15-88

ina Daleble	Cunto	peral, date, ti	7	100	9/19	8130
Church, Chapel, Graveside Z	1. 1	Derai, date, u	20	Ca	ich	Mortuary
		~		(	de	111
All Funeral cars must arrive b	The same of the same of	9		e extra t		be applied
and billed to undersigned. Wa	ar time vateran		_		Pic	28
Lot 62 & Grave	Row	Section .	5	_ Divisi	on/Blook	8
						0-1
Grave space & Care Fund					2	13.00
Additional spaces and care fu	ind				=	2m - 10
Opening/Closing & Setup				****		20-00
Burial Container					20	20.00
landling Fees						20.00
lower vases - Marker setting	tee	********				
Recording and filing fee	************	*********		******		35.00
Sales taxes						21.48
			Total Due		/6	621.45
	Paid re	ceipt number	36	68%	1 /6	21.45
				Balan	ce due (	3
.11	1 00	0				
hereby certify I am the Mand this is your authority to m	Wyord	of sometime of	about in	of the a	bove name	d decedent
that I have the right to make th	nis authorization	and lagree to	hold Mt.	Hope Ce	metery har	mless from
any liability on account of said	d authorization	and interment	71	1		
hereby authorize the interme	ent in lot I	AR	Mys	M		
old under deed.	/	Signature	56 2	7 0	olles	ne.
lignature of recorded holder of dead		Address	and	Tu	12-	415
		State 4	542.	0 =	Ser	- Zip Code
		Telephorit		-		1000
		#2//290				
E 7633	}	Invoice				
Nork Order # <u>L 100</u> 2		Acct.				



From:\_

In\_

Lot \_\_\_ Invoice Acct No W.O.\_\_ BALAN

Pre-Nee Pro-need AC-212

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

35689

	204-3131		2.1- 28
Marca Chest	Address: D 29 Cal	Date:	-15 .10 60
Payment of	elen Whitsters	Sep John	tell ( )
622 Grave	Row So	ection	Division Block
No	"PAID IN THIS SPACE: CITY AUDITOR	80% Sales	57007 77184 100 77184 100 47
E-7633	SEP 19 1988	Opening/ Closing 3 Burist	700 77181 100 77182
Lot At Need On Acct		Recording & Misc. Fees	100 17185 100 171193 19033
Trust Cash Check	ISSUED BY Andre Ale	Trust Sales Tax TOTAL PAID	\$ 16-21 (5-5)
16V 10-87)			

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

		SE BLACK INK - MAKE 140 HEILI	SECTION OF THE PROPERTY.	No. of the last of	
Helen EL	izabeth Christensen		Yemale	Feb. 28, 1901	Sept. 14, 1988
PLACE OF DEATH—COUNT  E1 Cajon  NAME AND ADDRESS OF FUNERAL DIRECTOR ION PERSON ACTING AS SUCH  584 So. Mollison Ave. — E1 Cajon, CA 92020		PLACE OF DEATH—COUNTY ION STA	ATE IF NOT IN CALIFORNIA)	NAME AND ADDRESS OF SPOUSE OR OTHER INFORMANT Hagen Christensen - Husband	
		on, CA 92020 F-	-1022	5029 College Avenue San Diego, CA	
*	TYPE OF PERM	AIT, CHECK ONLY ONE OF THE F	OLLOWING TYPES OF	DISPOSITION	
DE 1 BURIAL UN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND BURIA ENTOMBMENTI	LUNCLUDES	8 DISINTERMENT AND RE	INTERMENT OF CREMATED
	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMATION (INCLUDES INURNMENT)	N. AND BURIAL	9 DISINTERMENT OF CRE	
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY     4 SCIENTIFIC USE		2 DISINTERMENT, CREMATION, AND DISPOSITION		FOR CORONER'S USE ONLY	
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATED REMA	INS ARE TO BE INTERRE		fTY.
CREMATION	Mt. Hope Cemetery - 3	HERE RUMAINS ARE TO BE CREMATED		SIGNATURE OF PERSON IN L	HARGE OF CHEMATORY
BURIAL AT SEA OR DISTRION OTHER WA A CEMETERY MATED REMAINS	ADDRESS, NEAREST POINT ON SHORELIN	elecupt	ENT TO IDENTIFY FINAL	PLACE AND COUNTY OF DISK	OSITION
SCIENTIFIC USE	MAME AND ADDRESS OF FACILITY BECK	ender Mach	Lew area	_	
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I pm the per remains of the above named dece- and I hereby acknowledge that tre this permit gives no right of unrestr	dent under provisions of the Heal resposs and nuisance laws apply a	h and Safety Code, nd understand that	DATE SIGNED	
LOCAL REDISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	EAND IS THE	EP 1 6 1988	Nonally Ca	TRAH SSUIN HANGEN
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	CERTIFY THAT THE SPECIFIED	1/00	ERSON IN CHARGE OF D	HISPOSITION LICENSE N DISPOSER	UMBER OF CREMATED REMAINS IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAN OF	COUNTY OF DEATH			

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OIL BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Page 9-15-88

	Date		
You are hereby authorized and instructed, sub	ject to your rules and req	ulations, to inte	er the remains
of Leon Su	thon	. ,	
Y.CIII 14	neral, date, time Sa	+ 9/11	1 100m
Vault/Liner VI a D	June DA	sanoa)	10071
Church, Chapel, Graveside Chapel 9	some pay	June	Mortuary.
All Funeral cars must arrive before 3:30 p.m.	11	n extra charge v	vill be applied
and billed to undersigned. War time veteran	NO		
102267 Grave - Row -	Section	D1 1-1 (D1	. 10
Lot 15 . E / Grave Row	Section	Division Alle	F 48
Grave space & Care Fund			695=
Additional spaces and care fund Rev. Ly	12268-for	T.P.	
Opening/Closing & Setup	300		3200
C +	2.01		175000
Burial Container	-		17000
Handling Fees	8/3 QX		200 00
Flower vases - Marker setting fee	. 17.000	******	2000
Recording and filing fee	Vare		150
Sales taxes	······································	·y5	7- 11-73
	fotal bue	(64)	1702.65
Paid re	eceipt number 36 7	126	170265
		Balance due	-
0.			
I hereby certify I am the		of the above na	
and this is your authority to make disposition that I have the right to make this authorization	and lagree to hold Mt. H	loge Cemetery	narmless from
any liability on account of said authorization	and interment.	1-00	
I hereby authorize the interment in lot I	Mustophi	WT.D	ullon
hold under deed.	Signature 5/0	STREET	
Signature of recorded holder of deed	Address Ann Negon	CA 98	2105
	State 21.2-204	6	Zig Code
	Talephone	0	
200	STATE OF THE PERSON NAMED IN		
E mcoa	Invoice #		
Work Order # <b>L</b> 7634	Acct,#	_	
PY-593 (REV. 8-85)			

_ MOLE
1702 5 San Diego, California 9/15/88 19
30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or 83n Diego City, Treasurer, or order at 3751 Market Street, San Diego, Ca 92102
the sum of Seventeen hundred two & 500 DOLLARS with interest from
October 20, 1988 on the unpaid principal at 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 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 had
against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix
as attorney's fees.
Part II, Chapter I, Article 2, Para. 7528 of the State of California Health &
Safety Code authorizes the removal of any remains from a plot for which the
purchase price is past due or unpaid.
PRINT NAME SIGNATURE CHARLOSTIC Julion
ADDRESS

w.o. # E- 7634

MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE

CALIF. DRIVERS LIC. #

E-7634

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	Leon Sutton, Jr.		SEX Male	Sept. 5.1937	DATE OF DEATH	
PLACE OF DEATH—CITY OR TOWN PLACE OF PL		San Diego	Juli Diego		NAME AND ADDRESS OF SPOUSE OR OTHER INFORMANT Rozalind J. Sutton - Wife	
				2479 56th St. San Diego, CA 92105		
		MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES (	OF DISPOSITION		
M'+ BURIAL IIN	CLUDES ENTOMBMENTI	D 5 DISINTERMENT AND	BURIAL (INCLUDES	B DISINTERMENT AN	D REINTERMENT OF CREMATED	
	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CRI			CREMATED REMAINS AND IR THAN IN A CEMETERY	
CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY     SCIENTIFIC USE		7 DISINTERMENT, CREMATION, AND DISPOSITION		FOR CORONER'S USE ONLY		
INTERMENT	NAME AND ADDRESS OF CEMETERY W	751 Market St.		NED C	San Diego	
CHEMATION	NA Locatore	HERE HEMAINS ARE TO HE CHE	P. V. 17 .	SIGNATURE OF PERSON	IN CHARGE OF CREMATORY	
BURIAL AT SEA ON DISPOSITION OTHER N A CEMETER'S OF ATED REMAINS	N/A T. Z. Vaul		SUFFICIENT TO IDENTIFY FINA	L PLACE AND COUNTY OF	DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pe remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	dent under provisions of the espass and nuisance laws a	e Health and Safety Code, apply and understand that	SIGNATURE OF APPLICA  DATE SIGNED	NT.	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY CO ALITHORITY FOR THE DISPOSITION SPECIFIED.	DE AND IS THE . CA DO	SEP 1 6 19	88 Conall &	Parties M. B. D. B.	
CERMICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON 9	1/00	or PERSON IN OFFICE OF	DISPOSITION LICENT DISPO	SE NUMBER OF CREMATED REMAINS SER, IF APPLICABLE	
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	San Diego Co. Dept.		Box 85222 Diego, CA 92138-	-5222		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36726

<b>日本代表 2</b> 周	264-3151	6	3 41	X
		Date:/	-20	19
From Lyller Str- Ros	24 4 Address: 5050 FLA	Cerol o	Blud, -	10
source les les	deed two 65%	100 0	ollars (\$	2.65.
7	Jen Jutton	A 1	terme	7
In Payment of	THE CHURCH	1		
- 0000			Division	12
Lot dd6 Grave	RowSe	ection	Block_	10
Invaice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	57007 77184	1900
Acct. No.	1.00 IN THIS SEASE	80% Sales of Lots	77184	1600
0 11 211	THE PART AND TOP	Opening/ Closing	77181	2) 00
W.O. 2 - 7637	CITY AUDITOR	Burial Containers	77182	000
BALANCE DUE	20 1000	Handling Fee	77185	0 60
	SEP 29 1988	Recording & Misc. Fees	77183	5 00
Pre-Need Lot At Need On Acct		Pre-Need Trust	63033 9022	H MIT
Pre-need Trust   Cash   Check	Make Wheel	Sales Tax	50101 78390	700
AC-212 (May 10-67) 10/16	ISBUED BY THAIR VOICE	TOTAL PAID	\$ 1700	5 65

# MT. HOPE COMETERY INTERMENT ORDER

City of San Diego

You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains Funeral, date, time Church, Chapel, Graveside A 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. War time veteran . Grave space & Care Fund Additional spaces and care fund Opening/Closing & Setup Burial Container ... Handling Fees . Flower vases - Marker setting fee . M.L. HOPE CEMETERY CITY of SAN DIEGO, CALIF. Recording and filing fee Sales taxes Paid receipt number Balance due 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 Zip Code Invoice # Work Order # Acct. # PY-593 (REV. 8-85)

		E SENCE WIN THAT THE THE PLETE			
NAME OF DECEDEN			SEX	DATE OF BIRTH	DATE OF DEATH
	KATHRYNE L. MONT	The second secon	Female	A DESCRIPTION OF THE PARTY OF T	1897 Sept. 19, 1988
NAME AND ADDRESS OF THREE ALDRESTOR ADDRESSON ACT		PLACE OF DEATH—COUNTY IOR STATE IF NOT IN CALIFORNIAL SAN Diego TING AS SUCHI CALIFORNIA LICENSE NUMBER  Diego 1083		Frieda Hunt Friend 7700-34 Parkway Dr. La Mesa, CA 92042	
1 BURIAL UN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND BURIA ENTOMBMENT)	MINCLUDES		AND REINTERMENT OF CREMATED
2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMATION (INCLUDES INJRINMENT)	I, AND BURIAL		OF CREMATED REMAINS AND OTHER THAN IN A CEMETERY
CEMETERY		7 DISINTERMENT, CREMATION			DRONER'S USE ONLY
4 SCIENTIFIC	USE			☐ 10 DISPOSITION I	PENDING
INTERMENT	NAME AND ADDRESS OF CEMETERY WH	ERE REMAINS OR CREMATED REMA	the state of the s		COUNTY San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY WH	ERE REMAINS ARE TO BE CREMATED	DATE CHEMATED	-	SON IN CHARGE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER N IN A CEMETERY EMATED REMAINS	n/a Server on SHORELIN	Diwton-	non Ce	PLACE AND COUNTY	Voo Den
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY HECE	WING HEMAINS	uble C	reft	Lul -
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pers remains of the above named deced and I hereby acknowledge that tres this permit gives no right of unrestri	ent under provisions of the Healt pass and nuisance laws opply a	h and Safety Code, and understand that	DATE SIGNED	YEANT C
* LOCAL REGISTRAR	THIS PLEMIT IS ISSUED IN ACCORDANCE WITH OF THE CACHONINA HEALTH AND SAFETY CODE AUTHORITY FOR THE DISPOSITION SPECIFIED IN	AND THE . CA OO	SEP 2 0 1988	SIGNATURE OF LOC	A REGISTRAN ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON JENT	27 8 SIGNATUR OF PI	en The	ISPOSITION LI	CENSE NUMBER OF CREMATED REMAINS ISPOSER, IF APPLICABLE
IE DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF C	OUNTY OF DEATH			

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS



Invoice No. Acct. No.

**BALANCE DUE** 

Pre-Need Lot Pre-need Trust

AC-212 (Rev. 10-87)

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

Payment of

At Need

Cash

Grave.

On Acct

ISSUED BY

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Bow.

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

CITY AUBITOR

Revery - L	Soliars (\$	35%	19.88 1042 Dera
Section 2	2.00	Division Block	72
CREDIT 20% Sales Care 80% Sales of Lois Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 —	32	000
Pre-Need Trust Sales Tax TOTAL PAID	60033 9022 — 60101 78390 —	35	100

# MT. HOPE CEMETERY

City of San Diego

Date 9-19-88

11 11 11 11	, cross	Ces Gas		-
ina Dellas	ree Fun	peral, date, time	ti 9/2.	3 21PM
Church, Chapel, Graveside L	Ukazol to	HOLL RA	solale	Mortuary,
All Funeral cars must arrive t	U	f regular work day	or an extra charge	will be applied
und billed to undersigned. W	ar time veteran _	ato	Chapel	
08 6	_	1	2	11
ot 70 Grave	Row	Section	Division/Bl	ock //
Grave space & Care Fund				250.00
additional spaces and care for				
pening/Closing & Setup				3,90,40
Burial Container	PA			100.00
landling Fees				145.00
	SEP'1'9"	1988		
lower vases - Marker setting ecording and filing fee !		METERN		35.02
C	ITY of SAN DIE	GO, CALIF.		6.50
ales taxes		T		856.50
		Total C	4700	800 50
	Paid rec	ceipt number	0100	-
	61-01		Balance due	
hereby certify I am the	Malke	0	of the above n	amed decedent
and this is your authority to n	nake disposition on a suther ization a	of remains as above and lagree to hold N	indicated. I certif	y and represent
hereby certify I am the hereby certify I am the hereby to not authority to not I have the right to make the property I ability on account of sai	his authorization a	and I agree to hold N	indicated. I certif	y and represent
nd this is your authority to n hat I have the right to make th ny liability on account of sai	his authorization a id authorization a	and I agree to hold N	indicated. I certif	y and represent
nd this is your authority to n hat I have the right to make th ny liability on account of sai hereby authorize the interm	his authorization a id authorization a	and I agree to hold Nond interment	indicated. I certif	y and represent
and this is your authority to make the	his authorization a id authorization a	and I agree to hold N	indicated. I certif	y and represent harmless from
and this is your authority to not at I have the right to make the right to make the property of sail the line of the intermoded under deed.	his authorization a id authorization a	and I agree to hold Nond interment	indicated. I certif	y and represent
and this is your authority to not at I have the right to make the right to make the property of sail the line of the intermoded under deed.	his authorization a id authorization a	and I agree to hold Nond interment	indicated. I certif	y and represent harmless from
nd this is your authority to neat I have the right to make the right to make the properties of the intermold under deed.	his authorization a id authorization a	and I agree to hold Nond interment	indicated. I certif	y and represent harmless from

PY-503 (REV. 8-88)

### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 9-19-88

You are hereby authorized and instructe	ed subject to your rul	and regulations, to in	nter the remains
of Kay Ch	carles 0	orner	
ina bell Lyce	Funeral, date, tin	ne #1 9/2	3 Jan
Church, Chapel, Graveside Chape	A Hore	Rapplale	Mortuary.
All Funeral cars must arrive before 3:30	p.m. of regular work	k day or an extra charge	e will be applied
and billed to undersigned. War time ver			
20 -		2	"
Lot ZO Grave S Row	Section _	Division/8	lock_//_
			2000
		*****************	.030-012
Additional spaces and care fund	VID.	**************	200 10
Opening/Closing & Setup	The Later of		.00,40
Burial Container SEP	110119881111		100,00
Handling Fees	10 1000		145,00
Flower vases - Marker setting Tee IOP.	E CEMETERY.		2 0 -11
Recording and filing fee CTIY of SAI	N DIEGO, CALIF.		. QS.OC
Sales taxes			6.50
		Total Due	856-50
	Paid receipt number	36700-	843.00
PART IN THE RESERVE		Balance du	0
(1/7	4.)	Data not de	
I hereby certify I am the	uer		named decedent
and this is your authority to make dispo that I have the right to make this authori	ization and lagree to	hold Mt. Hope Cemeter	y harmless from
any liability on account of said authoriz	ation and interment.		
I hereby authorize the interment in lot			
hold under deed.	Signature		
Signature of recorded holder of deed	Address		
	State		Zip Code
	Telephone		
West Order # <b>E</b> 7636	Invoice	#	
Work Order # L 1030	Acct. #	-	-



CITY OF SAN DIEGO, CALIFORNIA

CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151	0	1 word
rom Jules Henter	- Address: 1627 Mars	Low Date:	19/88 19
- of them del for	They go 1/200 0	OO Dollars	18 856 39
Payment of	arrient of and gov Bu	Xauti Ja	Mu - acarras
or <u>98</u> Grave	5 Row Se	ection 2	Division //
nvoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 6700 20% Sales Care 7718 80% Sales 10 of Lots 7718	20000
v.o. F-7636	CITY AUBITOR	Opening 10 Closing 7718 Burial 10 Containers 2718	320 00
BALANCE DUE	SEP 21 1988	Handling Fee 7718 Recording & 10 Misc. Fees 7718	145 60
re-Need Lot	D MARL	Pre-Need 6303 Trust 902 Sales Tax 6010 7838	650
C-212 (FMV. 10-87) 426	ISSUED BY	TOTAL PAID	856 50

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7636

NAME OF DECEDEN	NT		SEX	DATE OF SIRTH	DATE OF DEATH
RAY CHARLE	S PARKER		Male	1-7-57	9-17-88
PLACE OF DEATH		PLACE OF DEATH—COUNTY			F SPOUSE OR OTHER INFORMANT
San Diego		San Diego		Ozell Parker	-Hother
Anderson-P	SS OF FUNERAL DIRECTOR OUR FEMALES TO SO THE STATE OF THE	Federal Blvd.	F 1329	614 Cadman S San Diego, C	TO COMPANY OF THE PARTY OF THE
	TYPE OF PERA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES	OF DISPOSITION	
M & BURIAL (IA	VCLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT)	BURIAL UNCLUDES	B. DISINTERMENT AND REMAINS (INCLUDE	D REINTERMENT OF CREMATED S INURNIMENT)
	ON AND BURIAL (INCLUDES INURNMENT)	G DISINTERMENT, CREM			CREMATED REMAINS AND R THAN IN A CEMETERY
☐ 3 CREMATIO CEMETERY		7 DISINTERMENT, CREA	MATION, AND DISPOSITION EMETERY	PARTY OF THE PARTY	NER'S USE ONLY
JE 4 SCIENTIFIC	. USE			10 to disposition PENO	IMEG
INTERMENT	NAME AND ADDRESS OF CEMETERY W				San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W				IN CHARGE OF CHEMATORY
BURIAL AT SEA OII DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS		INE OR OTHER DESCRIPTION S	UFFICIENT TO IDENTIFY FIN.	AL PLACE AND COUNTY OF	DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECI	EIVING REMAINS			
ACKNOWLEDGMENT	This is to certify that I am the per				NT
OF APPLICANT	and I hereby acknowledge that tre this permit gives no right of unresh		A CONTRACTOR OF THE PARTY OF TH	DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE CL DO	DATE PERMIT ISSUED	SIGNATURE OF LOCAL RI	Connet M 8:0.3
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	23/84 GRATLIN	Soven The		SE NUMBER OF CREMATED REMAINS SER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	P/0	1 Records . Box 85222 Diego, CA 9213	8-5222	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS



#### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

N	Date
You are hereby authorized and instructed, sub	ject to your rules and regulations, to inter the remains
	neral, date, time Thurs. 923 118
Church, Chapel, Graveside	Meskley Mitchandary
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. War time veteran .	Tomule may be
Lot 176 Grave 4 Botton	Section Division/Block
Grave space & Care Fund	<u>55.0</u>
Additional spaces and care fund	
Opening/Closing & Setup	90,00
Burial Container	
Handling Fees	********
Flower vases - Marker setting fee	
Recording and filing fee/	
Sales taxes	***************************************
Sales taxes	Total Due
Paid re	ceipt number
1,00	Balance due
I hereby certify I am the	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.	Signature
Signature of recorded holder of deed	Address
Silverine or cacorday conder or news	State Zip Code
	Timehone

Work Order # E 7637

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-7637

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN			SEX MALE	DATE OF BIRTH	DATE OF DEATH
PLACE OF DEATH-	-CITY OR TOWN	PLACE OF DEATH—COUNTY SAN DI	ON STATE IF NOT IN CALIFORNIA	NAME AND ADDRESS O BOSSY R. WILLIA	SEP 18, 1988  F SPOUSE OR OTHER INFORMANT  MS. FATHER
NAME AND ADDRESS NERKLEY-MIT	CHELL WORTHARY, 3655 FIFTH	AVENUE,	F-119	P.O. BOX 133-81 SAN DIEGO, CA	A Constitution of the Cons
1	TYPE OF PER/	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION	
XXI 1 BURIAL IIK	ICLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENTI	BURIAL UNCLUDES	B DISINTERMENT AND REMAINS INCLUDE	D REINTERMENT OF CREMATED
2 CREMATIO	IN AND BURIAL (INCLUDES INURNMENT)	☐ 6 DISINTERMENT, CREI	MATION, AND BURIAL		CREMATED REMAINS AND R THAN IN A CEMETERY
3. CREMATIO CEMETERY 4. SCIENTIFIC		7 DISINTERMENT, CREI	MAZION, AND DISPOSITION EMETERY	FOR CORO	NER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF GEMETERY W			10	SAN DIEGO
CREMATION	NAME AND ADDRESS OF CREMATORY W	MERE REMAINS ARE TO BE CREA	Parel DATE CHEMATED	SIGNATURE OF PERSON	IN CHARGE OF CREMATORY
BURIAL AT SEA DR DRSPOSITION OTHER IN A CEMETERY MATED REMAINS	ADDRESS NEW EST POINT ON SHORE	thow in	50" grav	PLACE AND COUNTY OF	DISPOSITION
SCIENTIFIC	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the pe remains of the above named dece and I hereby acknowledge that to this permit gives no right of unres	dent under provisions of the espass and nuisance laws a	Health and Safety Code, apply and understand that	SIGNATURE OF APPLICAL  DATE SIGNED	NT
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE SA. OO	SEP 2 2 1988		STRAR ISSUING BERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DESTRICT THAT THE SPECIFIED 9	23/88 SIGNATIAN	OF PERSON IN CHARGE OF	SPOSITION LICENS	SE NUMBER OF CREMATED REMAINS SER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE AGDRESS OF REGISTRAR OF	COUNTY OF DEATH	0		

COPY Z IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

# MT. HOPE CEMETERY

City of San Diego

Date 9-21-88

of	(	1 gr	eg	ea.	K	call	alaxs	son	-
ina	2-	Vace	4	Fune	eral) date, ti	ime 🚄	kurs	9/2:	2 200
hurch, Char	oel. Gra	veside	Kase	Od o	France	RA	asso	ele	_ Mortuan
All Funeral ca	ars mu	st arrive be	efore 3:3	0 p.m. of	regular wo	ork day o	r an extra c	harge wil	l be annlie
nd billed to				48.50a3652222					
1/12	5	girou, iro							12
01/4012	Grav	е	Row		Section	_	Divisio	n/Bleck/	10
								3	950
irave space			********	******	, 0	7			
dditional sp					10	Ø		2	20 0
pening/Clo	44/4	Setup	******						2500
urial Contai	ner	*******	******	*******	3	*******	******		70.00
andling Fee	\$	*********				• • • • • • • • • • • • • • • • • • • •		4	10,00
lower vases	- Mark	er setting	fee	(J)					2-1
ecording an	d filing	fee	1	·					25.00
ales taxes	*****		1.10	······			*******	*****	11-51
			0			Total D	ue	/3	306-3
				Paid rece	eipt numbe	36	103	6	20.00
							Balan	e due	7063
	and and	1	1.	ah	Basil	1 1	1/2/80	5	1063
hereby certi- nd this is yo	ur auth	ority to ma	ake dispo	sition of	remains as	s above i	indicated. I	certify an	ed deceder ed represer
nat I have the	e right t	to make th	s authoriz	ization an	nd lagree to d intermen	o hold M	t. Hope Cen	netery ha	rmless from
					D.	.0.	10	2:	0. 0
hereby auth		ne interme	nt in lot	1	Sprature	man	dh-	year	landa
and direct of					23/5	00	lboa l	/esta	m.
gnature of recorded	t holder of	deed	BY.		Co	2,			Zip Co
					269	4-17	145		
					resuphon		2	201	1
No.	_				Invoic	0 H C	1/5	200	1
ork Order #	E	7638	}		Acct	. 0	279	63	/
CSAS MEV BARN					ALCUI.				

NOTE

\$ 706.37 San Diego, California	Siptember 2/ 19 80
30 days after date for value received, the undersigned make Cemetery or San Diego City Treasurer, or order at 3751 Mark the um of Aller Aller on the unpaid principal at to payable on demand.	DOLLARS with interest from
Should this note not be paid when due, it shall thereafter Interest after maturity will accrue at the rate indicated are payable in lawful money of the United States. The make to renewals, replacements and extensions of time for payment maturity, and waives presentment, demand and protest and the of limitations. A married person who signs this note agree against his/her separate property for any obligation containstituted on this note, the undersigned promises(s) to pay as attorney's fees.	above. Principal and interest er will be liable and consents nt hereof before, at or after he right to assert any statute es that recourse may be had ined herein. If any action be
Part II, Chapter I, Article 2, Para. 7528 of the State Safety Code authorizes the removal of any remains from purchase price is past due or unpaid.  PROPERTY NAME  SIGNATURE	
ADDRESS 2315 Balboa Vista an-	
CALIF. DRIVERS LIG. # Z 0 185764	

MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE

#### OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

36703

From Rechard Right	16 Middless 2315 L	alpan Vis	the lu 51
In Payment of Ox	Cola Perha	Dollars (\$	Caterna
Lot 1922 Grave_	Row Se	ection	Division / O
Invoice No	NOTVALIDEOR PURPOSE STATED UNLESS STAMPED "PAID IN THIS SPACE."	CREDIT 57007 20% Sales Care 77184 ~	117 00
Acct. No	CITY AUBITOR	80% Saies 100 of Lots 77184 — Opening/ 100 Crosing 77181 — Bural 100	500
BALANCE DUE 706-37	SEP 29 1988	Containers 77182 — 100 Handling Fee 77185 — Recording & 100	
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐	Jan Wal	Misc. Fees 77183 Pre-Need 83033 Trust 9022 Sales Tax 60101 78390	Car Ward
AC-212 (Rov. (0-87)	ISSUED BY	TOTAL PAID \$	100000

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7638

NAME OF DECEDEN			SEX	DATE OF BIRTH	4244	DATE OF DEATH	
	OSCEOLA RI		Female	Apr. 22,		Sept. 19	
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY IOR ST		The state of the s		USE OR OTHER IN	
Sa	n Diego	San Dieg				hardson -	Husban
	SS OF FUNERAL DIRECTOR (OR PERSON A		ORNIA LICENSE NUMBER			sta Drive	
Anderson-R	agsdale Mort.: 5050 F	ederalBBlvd.; Ca.	1329	San Die	go, Cal	Ifornia S	32114
	TYPE OF PER/	MIT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF	DISPOSITION			
HURSAL IN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND BURIA	AL UNCLUDES		ENT AND REIN	(TERMENT OF CHE	MATEO
	N AND BURIAL IINCLUDES INURNMENT!	6 DISINTERMENT, CHEMATIC INCLUDES INURNMENT)	N, AND BURIAL	9 DISINTERN DISPOSITIO	ENT OF CREM ON OTHER THA	ATED REMAINS AT	NO
4 SCIENTIFIC		7. DISINTERMENT, CREMATIC OTHER THAN IN A CEMET		FOR DISPOSITE		S USE ONLY	
INTERMENT	NAME AND ADDRESS OF CEMETERY WATER HOPE COMMETTERY WATER AND ADDRESS OF CREMATORY WATER ADDRESS OF CREMATORY WATER AND ADDRE	3751 Market Street	: San Diego.	Californi		San Dieg	
CREMATION	N/A		and the scale of the	<b>.</b>			
OR OR POSITION OTHER IN A CEMETERY MATER REMAINS	N/A Lee	-Non-Sea		PLACE AND COU	VTY OF DISPO	SITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	cete Vault					
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the peremains of the above named dece and I hereby acknowledge that tr	edent under provisions of the Hea espass and nuisance laws apply o	th and Safety Code, and understand that	SIGNATURE OF  DATE SIGNED	APPLICANT		
LOCAL REGISTRAR	This permit gives no right of unres  THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO ALTHORITY FOR THE DISPOSITION SPECIFIED.	H PROVISIONS AMOUNT OF FEE PAIR	DATE PERMIT ISSUED	SIGN/QUE OF	L. Las	RAR ISSUING PERO	D.B.
CERTIFICATION OF PERSON IN CHARGE DE DISPOSITION	DISPOSITION WAS MADE ON	24/8 SIGNATURE OF	Whater or	DISPOSITION		IMBER OF CREMAT F APPLICABLE	ED REMAINS
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	) P. 0	l Records . Box 85222 Diego, Califo	rnia 921	38-5222		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR BY THE PERSON IN CHARGE OF THE CREMATED REMAINS

075204 10/18/88 027963 RICHARD L. RICHARDSON

8-76 38

RICHARD L. RICHARDSON 100 072 100 072 100 072 100 072 60101 10590

77181 000072 77182 000072 77183 000072 77185 000072 78390

CA 700 31: 17:

706-37 315-00 175-00 35-00 170-00 11-37 706-37 PAID IN FULL

#### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 92/-88

		instructed, su	ibject to your rules a	nd regulations, to	inter the remains
of	1				
in a	Veult/Liner		uneral, date, time	<b>\</b>	
Church, Chapel,	Graveside		:_£	100	Mortuary.
All Funeral cars	must arrive b	efore 3:30 p.m	of regular work da	y or an extra char	ge will be applied
and billed to un	dersigned. Wa	ir time veteran	· ·		
Lot	Grave	Row	Section	Division/I	Block
Grave space &	Care Fund				
Additional space	es and care fu	nd		**********	**
Opening/Closin	ng & Setup				
<b>Burial Containe</b>	f				
Handling Fees					
Flower vases - I	Marker setting	fee			
Recording and f	iling fee		D.		
Sales taxes			()		
			Tota	l Due	***
		Paid	receipt number		
			1	Balance o	fue
I hereby certify	am the			of the above	named decedent
that I have the ri	ight to make th	is authorization	n of remains as abo on and lagree to hole and interment.	ve indicated. I cer	tify and represent
I hereby authori hold under deed		ent in lot I	Signature		
2000 CO			Address		
Signature of recorded ho	ider of deed		State		Zip Code
			Telephone	375, 1	THE REAL PROPERTY.
7			posterio de Ho		
	E 7639	1	Invoice # -		
Work Order # _	- 1000		Acct. #		

# MT. HOPS CEMETERY INTERMENT ORDER

City of San Diego

Date 9-21-88

of Megter	Nustr	
ina Wile Crest Fu	meral date, time St. 923 12.	id
Church, Chapel, Graveside Cherch &	Slave Possbale Mor	uary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge will be app	plied
and billed to undersigned. War time veteran .		
1 14	0 4	
Lot Grave Row	Section Division/Block	_
Grave space & Care Fund	al Crist 195	,00
Additional spaces and care fund	- 0	
Opening/Closing & Setup	320	00
	231.	00
	320	do
Handling Fees		
Flower vases - Marker setting fee	20	n
Recording and filing fee	2/	ik
Sales taxes	157	15
	Total Due	30
Paid re	oceipt number 26/05	1/2
	Balance due	4
Som	36721 100	NA DECEMBER
that I have the right to make this authorization any liability on account of said authorization a	of the above named dece of remains as above indicated. I certify and repre and I agree to hold Mt. Hope Cemetery harmless and interment.	esent
hold under deed.	546 MT DELL DE	
Signature of recorded holder of deed		7_
	415- 672-1436	- Cook
	Tilleghone	
4 10		-
100000000000000000000000000000000000000	Invoice #	
Work Order # <b>E</b> 7640	Acet #	H

NOTE

\$ 1021.45 San Diego, California	September 2/19 88
30 days after date for value received, the undersigned ma Cemetery or San Diego City Treasurer, or order at 3751 Ma the sum of the thousand twenty one 15/100	DOLLARS with interest from
payable on demand.	the rate of 12 percent per annum,
Should this note not be paid when due, it shall thereafte Interest after maturity will accrue at the rate indicated are payable in lawful money of the United States. The material to renewals, replacements and extensions of time for paymenturity, and waives presentment, demand and protest and of lightations. A married person who signs this note agragainst his/her separate property for any obligation continuations on this note, the undersigned promises(s) to pas attorney's fees.	above. Principal and interest ker will be liable and consents then thereof before, at or after the right to assert any statute sees that recourse may be had ained herein. If any action be
Part II, Chapter I, Article 2, Para. 7528 of the Sta Safety Code authorizes the removal of any remains fr purchase price is past due or unpaid.	com a plot for which the
PI NAME LARRY A. DUSON SIGNATURE DUE	y K. Nellen
ADDRESS 451 So. EUCILD AVE SAN	DIE30 CM. 92114
CALIF. DRIVERS LIC. # MS58115	

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

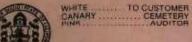
USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7640

NAME OF DECEDEN	T.		SEX	DATE OF BRITH		DATE OF DEATH
	CHESTER DUS	ON	Male	April 2	, 1911	Sept. 18, 1988
and the second s	Juana	CONTRACTOR OF THE PARTY OF THE	ON STATE IF NOT IN CALIFORNIA!	Johnn	ie R. D	ouse OR OTHER INFORMANT
	s of Funeral Director for Person Ac gsdale Mort.: 5050 Fe		T329	100000000000000000000000000000000000000		id Avenue alifornia 92114
	TYPE OF PERA	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES OF	DISPOSITION		
M 1 BURIAL UN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT)	BURIAL UNCLUDES		AENT AND RE	INTERMENT OF CREMATED URNMENT)
2018	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMINGLUDES INURNAME				MATED REMAINS AND IAN IN A CEMETERY
3 CREMATION CEMETERY 4 SCIENTIFIC	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT, CREA	MATION, AND DISPOSITION METERY	FOR ID DISPOSITI		R'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W	751 Market Stree	t; San Diego, Ca	lifornia	COUN	San Diego
CREMATION	NA LEVEL OF	11 0111	DATE CREMATED	SIGNATURE OF	PERSON IN C	HARSE OF CREMATORY
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY OF CHEMATED REMAINS	N/A Bottom of	DE ON OUR DESCRIPTION S	UFFICIENT TO IDENTIFY FINAL	PLACE AND COU	NTY OF DISP	OSITION
USE USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that to	dent under provisions of the	Health and Safety Code,	SIGNATURE OF  DATE SIGNED	APPLICANT	
AFFLICARY	this permit gives no right of unrest			A-	400	1
LOCAL - REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFFTY COS AUTHORITY FOR THE DISPOSITION SPECIFIED II	DE AND IS THEY	SEP 2 1 1988	SIGNATION	W. L. C.	acoust 11.20 pl
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	33/88 SIGNATURE	OF PERSON IN CHARGE OF I	NSPOSITION		UMBER OF CREMATED REMAIN: IF APPLICABLE
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF HEGISTRAN OF	P.	0. Box 85222 Dlego, Ca. 92	138-5222		

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

#### OFFICIAL RECEIPT



#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

Nº 36705

rom Me builm	Address 51/6 ///	Date:	9-21	Clarke la
nPayment of	lester lusars	· Fredham	Dollars (\$	50.00,
ot 95 Grave_	12 Row_s	ection	2	Division / 2
nvoice No	NOT VALID FOR PURPOSE STATED LINLESS STAMPED -PAID' IN THIS SPACE	CREDIT 20% Sales Care 80% Sales	57007 77184 — 100	296 00
N.O. 21-7640	CITY AUBITOR	of Lots Opening/ Closing Burial Containers	77184 — 100 77181 — 100 77182 —	500
BALANCE DUE 102/193	SEP 2 9 1988	Handling Fee Recording & Misc. Fees	77185 — 100 77183 —	
Pre-Need Lot	ISSUED BY John Mar Whi	Pre-Need Prust Sales Tax	63033 9022 — 60101 78390 —	(M) (M)
C-212 (Boy. 10.87)	199000 01	CEOTALFAID	1000	WIN OU

#### OFFICIAL RECEIPT

CANARY PINK

WHITE TO CUSTOMER CANARY CEMETERY AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36721

	264-3151	9.	20 88
rom Mary buson		Date:	Chipo (4
ore thousand	Taxente, gre 9	5 Dollar	102/95
n Payment of	Makes Kusty	3 Mec	skind .
ot Grave	/2 RowSe	ection 2	Division //
nvoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 670 20% Sales Care 775 80% Sales 1	07 84 00
N.O. 2-7640	CITY AUDITOR	Closing 771 Burial 0 Containers 773	81 350 00
BALANCE DUE	SEP 29 1988	Handling Fee 775	85
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	Moder Ver	Pré-Need 630 Frust 90 Sales Tax 601 783	22 27 01
AG-212 (Rev. 10-87)	ISSUED BY	TOTAL PAID	10010

# MT NOPE CEMETERY INTERMENT ORDER

City of San Diego

9-21-88

AC BILL	A. Newell
in a tell Tener	Funeral, date, time / Kon 4/26/16/1
Church, Chapel, Graveside	apel Follow; Payorale Mortuary
	e 3:30 p.m. of regular work day or an extra charge will be applied
and billed to undersigned. War tim	ne veteran WW II.
Last 44 Group 5 1	Row Section Division/Block
LOUGraveF	Section Division/Block
Grave space & Care Fund	995.0
Additional spaces and care fund .	
Opening/Closing & Setup	320.00
Burial Container	100.00
Handling Fees	145.00
Flower vases - Marker setting fee	1.0
Recording and filing fee	35-01
Sales taxes	6.50
0.00	Total Due,
Park	Paid receipt number
O MAR	Balance due 701.S
0.	-0 N 1/2
	disposition of remains as above indicated. I certify and represent
I hereby certify I am the	
and this is your authority to make o that I have the right to make this au	uthorization and lagree to hold Mt. Hope Cemetery harmless from
and this is your authority to make o	uthorization and lagree to hold Mt. Hope Cemetery harmless from
and this is your authority to make o that I have the right to make this au any liability on account of said auth	uthorization and I agree to hold Mt. Hope Cemetery harmless from thorization and interment.
and this is your authority to make o that I have the right to make this au	uthorization and I agree to hold Mt. Hope Cemetery harmless from thorization and interment.
and this is your authority to make on that I have the right to make this au- any liability on account of said authorized.	uthorization and I agree to hold Mt. Hope Cemetery harmless from thorization and interment.  In lot I Signature Address
and this is your authority to make o that I have the right to make this au any liability on account of said auth hereby authorize the interment in hold under deed.	uthorization and I agree to hold Mt. Hope Cemetery harmless from thorization and interment.  In lot I Signature Address State Zip Code
and this is your authority to make other I have the right to make this authory liability on account of said authorize the interment inhold under deed.	uthorization and I agree to hold Mt. Hope Cemetery harmless from thorization and interment.  In lot I Signature Address
and this is your authority to make o that I have the right to make this au any liability on account of said auth hereby authorize the interment in hold under deed.	uthorization and I agree to hold Mt. Hope Cemetery harmless from thorization and interment.  In lot I Signature Address State Zip Code

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

SEX

E-7641

DATE OF DEATH

DATE OF BIRTH

ALBERT	HEWETT		Male	12-24-20	9-19-88
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY	OR STATE P NOT IN CALIFORNIA		F SPOUSE OR OTHER INFORMANT
San Die		San Diego		Control of the Contro	intob-Mother
NAME AND ADDRES	S OF FUNERAL DIRECTOR TOP PERSON AC	Federal Blud	CALIFORNIA LICENSE NUMBER	2144 Everett	BOTTOM DATE OF THE STATE OF THE
Anderson-Ra	gsdale Mortuary: San D	lego, CA 92102	F 1329	San Diego, CA	92113
***	TYPE OF PERA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES OF	DISPOSITION	
1 BURIAL IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT)	BURIAL IINCLUDES	B DISINTERMENT AN REMAINS (INCLUDE)	D REINTERMENT OF CHEMATED (S INURNMENT)
	N AND BURIAL IINCLUDES INURNMENT)	6 DISINTERMENT, CRE	MATION, AND BURIAL		CREMATED REMAINS AND ER THAN IN A CEMETERY
CEMETERY		7. DISINTERMENT, CRE	MATION, AND DISPOSITION		ONER'S USE ONLY
4 SCIENTIFIC	USE	West War	STATE THAT AT A CENTER CO.		DING
INTERMENT	NAME AND ADDRESS OF CEMETERY W Mt. Hope Cemetery: 3				San Diego
CREMATION	NAME AND ADDRESS OF CHEMOTORY OF NAME AND ADDRESS OF CHEMOTORY OF THE PROPERTY				IN CHARGE OF CREMATORY
NURIAL AT SEA OR OSTITION OTHER IN A CEMITERY ISMATED REMAINS	N/A	INF, OR OTHER DESCRIPTION S	UFFICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF	DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECI	EIVING REMAINS	1	THE CALL	
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece- and I hereby acknowledge that tre this permit gives no right of unresh	dent under provisions of the espass and nuisance laws a	Health and Safety Code,	SIGNATURE OF APPLICA  DATE SIGNED	NT.
LOCAL REGISTRAR	THIS PERMYT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COR AUTHORITY FOR THE DISPOSITION SPECIFIED IN	PROVIDIONS AMOUNT OF FEE	SEP, 2 2 199	SIGNATURE OF LUCAL P	Campat MDD B.
CERTIFICATION OF FERSON IN CHARGE OF DISPOSITION	44/571/11 /EN	TER DITTEL	WWW THERSON WITH THE PARTY OF T		SE NUMBER OF CREMATED REMAINS SER, IF APPLICABLE
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDUCATION ADDRESS OF REGISTRAL OF	P. 0	Records Box 85222 Diego, CA 92138-	5222	

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

NAME OF DECEDENT

1.0. # 6- 1691	0 4	2	7/	111	
	U. #	<u> </u>	10	7/	

\$ //0/.50 San Diego, Ca	alifornia	Septenber 2/ 1988
30 days after date for value received, Contery or San Diego City Treasurer, of the sum of planer washes on	or order at 3751 Marke	DOLLARS with interest from
payable on demand.	unpaid principal at the	he rate of 12 percent per annum,
Should this note not be paid when due, Interest after maturity will accrue at are payable in lawful money of the Unito renewals, replacements and extension maturity, and waives presentment, demand of limitations. A married person who against his/her separate property for instituted on this note, the undersigned as attorney's fees.	the rate indicated al ted States. The maker ns of time for payment nd and protest and the signs this note agrees any obligation contain	bove. Principal and interest r will be liable and consents t hereof before, at or after e right to assert any statute s that recourse may be had ned herein. If any action be
Part II, Chapter I, Article 2, Pa Safety Code authorizes the remova purchase price is past due or unp	1 of any remains from aid.	a plot for which the
PRINT NAME	STONAMIDE P	ie B. Eliston
	San Desgo	1/4 92/13
CALIF, DRIVERS LIC. #	0	



Invoice No. Acct No. W.O.

BALANCE DUE

Pre-Need Lot Pre-need Trust

AC-212 (Rev. 10-87)

Grave.

On Acct

ISSUED BY

Check

Payment of

At Need

Cash

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Row

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

Address

Date:	1-3	-	19.80
1100	ollars (\$	1 2/1	1/2
etion	1	Division Block	1/
CREDIT	57007	100000000000000000000000000000000000000	1
20% Sales Care	77184 -	_	-
80% Sales	100		
of Lois	77184 —	-	
Opening/ Closing	77181 -		4
Burner	100		JI .
Containers	77182 -	_	+
20	100		
Handling Fee	77185 -	155	1000
Recording & Misc. Fees	77183 -	1000	1000
Pre-Need	63033	CONTRACTOR OF THE PARTY.	
Trust	9022 -		-
Sales Tax	60101 78390 —	110	-
TOTAL PAID	\$	105	00



#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

11 10	10

From: The the fire Inc.	and the face Only	Hars (\$ 3/190 )
Lot Grave	Row Section	Division Block
Invoice No	C/77 AUDIT Closing	67007 77164 100 77184 100 77181 100 77181 100
Pre-Need Lot	Handling Fee Recording & Misc. Fees Pre-Need Trust	7106 77185 100 77183 69033 9022 80101 78390 8

075206 10/18/88 027965 E-7641	CARRIE B. CLINTON 100 072 100 072 100 072 100 072 100 072 60101 67007	77181 000072 77182 000072 77183 000072 77184 000072 77185 000072 77185 000072 77184	Called	350.00 101.68 31.77 11.12 125.83 46.07 2.07 31.46	1,101.50 PARTIAL PAYMENT

075206 10/18/88 027965 CARRIE B. CLINTON
100 072
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77181 000072 77182 000072 77183 000072 77184 000072 77185 000072 78390 77184

400.00 116.21 36.31 12.71 143.80 52.66 2.36 35.95

1.101.50 PARTIAL PAYMENT

## MT. HOPE SEMETERY INTERMENT ORDER

City of San Diego

Date 9-22-88

1	fleringel falle charge w	Mortuary.
regular work day o	1-010. 8	Mortuary.
	ran extra charge w	ill be applied
	0	100
		10
Section	Division/Bloc	10
	********	200 00
34		360.00
e To		230-00
suble Ci	eget Z.	175.00
spe-	U	77.33
im de	wT	25.00
	5.95)	25.45
Total D	ue7	75,45
oipt number _3	6911 7	75.45
		0
complete at about		
nd lagree to hold M	t. Hope Cemetery h	armless from
a interment.	0.0	
Lou-	the m	9494
7745	SKYLINE	DR
SAV DIE	50, CH.	921/4
475-0	589	Zip Code
Telephone		
Invoice #		THEAT
	Total D  ipt number 3  remains as above ad lagree to hold M d interment.  Signature  Type  Signature  475-0  Tulaphone	Total Due  Internal Superior S

DOY



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Row

CITY AUGITOR

SEP 29 1988

Date: _	Dollars (\$	775.4	92/19
2			
Section	THE STATE OF	Division/	)
CREDIT 20% Sales 80% Sales of Lots Opening/ Closing Bunal Containers	77184 — 100 77181 — 100	300	00
Handling F Recording Misc. Fees Ppe-Need Trust Sales Tax		175	45
TOTAL PAID		705	45

Payment of \_\_\_ Grave NOT VALID FOR PURPOSE STATED UNLESS STAMPE "PAID" IN THIS SPACE. Invoice No... Acct. No. BALANCE DUE At Need On Acct Pre-Need Lot Cash E Pre-need Trust Check BSUED BY AC-212 (Nov. 10-87)

### PERMIT FOR DISPOSITION OF HUMAN REMAINS E - 7642

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

		SE SEASE HAR THORE IS NEVER		make of ports	DATE OF DEATH
NAME OF DECEDEN	MARIE T. BRADLEY		Female	Aug. 24,1963	Sept.21,1988
PLACE OF DEATH-	n Diego	PLACE OF DEATH—COUNTY IOR STA		Hoi thi Nguyen mpther 7745 Skyline Dr. San Diego, CA	
ES SEE	HETELERABBETOARY PRODUCE Cajon Blvd. Sa	n Diego, CA	1083		
40	TYPE OF PERM	AIT, CHECK ONLY ONE OF THE F	OLLOWING TYPES OF	DISPOSITION	
TA + BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND BURIAL ENTOMBMENT)	L (INCLUDES	8 DISINTERMENT AND R REMAINS (INCLUDES I	
2 CREMATION	N AND BURIAL INCLUDES INURNMENT)	6 DISINTERMENT, CREMATION (INCLUDES INURNMENT)	N, AND BURIAL	DISINTERMENT OF CR DISPOSITION OTHER 1	
3 CREMATIO CEMETERY 4 SCIENTIFIC		7 DISINTERMENT, CREMATION OTHER THAN IN A CEMETE	N, AND DISPOSITION RY	FOR CORONE	ER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY WI Mt. Hope 3751 Ma	HERE REMAINS OR CREMATED REMAI		cou	San Diego
CREMATION	name and address of chematory with 1/a 20 ga B	Terrillo Sealer	DATE CHEMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY
RUBIAL AT SEA OR DISPOSITION OTHER IAN IN A CEMETERY CREMATED REMAINS	n/a Botton	NE OF THE DESCRIPTION SUFFICE	ENT TO DENTIFY FINAL	PLACE AND COUNTY OF DIS	POSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	LANGE REMAINS			
ACKNOWLEDGMENT	This is to certify that I am the per remains of the above named decer			SIGNATURE OF APPLICANT	
OF APPLICANT	and I hereby acknowledge that tre this permit gives no right of unrest	spass and nuisance laws apply a	nd understand that	DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	FANDISTHE CA DO	SEP 2 3 1988	SIGNALIZE OF LOCAL RESI	STRAB ISSUING PROMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED 9/1	SIGNATURE OF SIGNA	ERSON IN CHARGE OF	SPOSITION LICENSE DISPOSEI	NUMBER OF CREMATED REMAINS 1. IF APPLICABLE
IF DISPOSITION IS TO DECLIE IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF				MEN

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OIL BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

weak De

#### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 9-22-88

of District	cker		
in a Fu	neral, date, time		
			Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work d	ay or an extra charge	will be applied
and billed to undersigned. War time veteran	No		
Lot 2059 Grave Row	22100000	1201212101111111	. 10
ot Crave Row	Section	Division	10
Grave space & Care Fund	********		595.9
Additional spaces and care fund			
Opening/Closing & Setup			
Burial Container			
Handling Fees			
Flower vases - Marker setting fee			
Recording and filing fee	· · · · · · · · · · · · · · · · · · ·		
Recording and filing fee	)		
40) 150	Tot	al Due	595,00
40 150	Tot	al Due	595,00
40) 150	Tot		25.00
250 15° Paid re	Tot	36713	25.00
Paid re	Tot eceipt number	Balance due	25.00 570.00
Paid re  I hereby certify I am the and this is your authority to make disposition that I have the right to make this authorization	Tot sceipt number of remains as ab	Balance due	25.00 570.00
Paid re  Pai	Tot sceipt number of remains as ab	Balance due	25.00 570.0
Paid replacement in lot I	Tot sceipt number of remains as ab	Balance due	25.00 570.0
Paid report of the paid report o	Totaceipt number of remains as ab a and l'agree to ho and interment.	Balance due	25.00 570.00
Paid no Paid n	Tot eceipt number of remains as ab and lagree to ho and interment.	Balance due	25.00 570.00
Paid report of the paid report o	of remains as ab a and l agree to ho and interment.	Balance due	25.00 25.00 570.00 samed decedent y and represent y harmless from
Paid report of the paid report o	of remains as ab an and lagree to ho and interment.  Signature  Address  State	Balance due of the above nove indicated. I certified Mt. Hope Cemetern	25.00 25.00 a 570.00 amed decedent y and represent harmless from
Paid re  Pai	of remains as ab an and lagree to ho and interment.  Signature  Address  State	Balance due	25.00 25.00 a 570.00 amed decedent y and represent harmless from

#### OFFICIAL RECEIPT



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

No 41368

From: 1-atra C Toulcas	Address: 4816 Federal B	Date:	10-1	2102.1971
Twenty form			ollars (\$ _	25 50
Lot 2057 Grave_	Row Se	ction		Division Block
Acct. No.  W.O. E 7 64 3  BALANCE DUE  Pre-Need Lot	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales Care 80% Sales 61 Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need Trust	67007 77184 100 77184 100 77181 100 77182 100 77182 100 77183 63033 9022	25 50
Pre-need Trust D Cash D Check D  AC 212 (Rev. 10-87) 0372	ISSUED BY CO. J.	Sales Tax TOTAL PAID	60101 78390 —— \$	25 50



#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Nº 36713

		Date: 4-22	. 19
From Katra E. Tucket	Address: 4816 Federal	Blud, San D	11ego, CA 9210
Twenty five dollars	and *//100	Dollars (	25.00
In part Payment of Cred	it lot sale for Kati	a E. Tucker	- District of the second
Lot 2059 Grave	Row Se	ection	Division /O
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 67007 20% Sales Carls 77184 -	
Acct, No.	- Crist, its 11300 St. Nove.	80% Sales 100 of Lots 77184 -	25 00
wo E 7643		Opening/ 100 Closing 77181 - Burlat 100	
BALANCE DUE 570.00	CITY AUDITOR	Containers 77182 - 100 Handling Fee 77185 -	
	050 00 1000	Recording & 100 Misc. Fees 77183	
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐	SEP 29 1988	Pre-Nicet 63033 Trust 9022 - Sales Tay 60101	1
AO-212 (Rev. 10-67)	ISSUED BY W.J. Hengues	TOTAL PAID \$	25 00

# PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

PINKAUDITOR	264-3151		
The Latine	1811. Lader	Pate; 10-6	1988
From KUUU ( SUF)	Address to the second	Dollars (	25:00
In 2014 Deayment of COU	pa #1 adiffo	+	
Lot 2059 Grave	Row Se	ction	Division //
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	CREDIT 67007 20% Sales Care 77584 -	as to
Acct. No.	CITY AUDITOR	80% Sales 100 of Lots 77184 - Opening/ 100 Closing 77181 -	25 00
W.O. E-7073	OCT 14 1988	Buital 100 Containers 77182	
	1 1988	Handling Fee 77185 - Recording & 100 Misc Fees 77183 -	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	Man Alach	Pre-Need 53033 Trust 9022 - Sales Tax 50101 78390 -	
AC-212 (Rev. 10-87) 2195	ISSUED BY AND INC.	TOTAL PAID \$	25 00

Nº 36926

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

#### MOUNT HOPE CEMETERY 264-3151

From: Latin & Sta	Me Address UNIS So	Date: Dollars (\$	25 D	5,
In Payment of		ection	Division Block	5
Acct. 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 — Burst 100 Containers 77182 — 100 Handling Fee 11195 — Recording & 300 Misc Fees 77183 —	NOV 1	00) 190
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Nev. 10-87)	ISSUED BY MILE MED	Pre-Need 63033 Trust 9022 - Sales Tax 60101 78390 - TOTAL PAID 5	15	00

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

	1 3		Date: 12-7-	19.88
From Kotra V	o Jucker	Address: 48110 Fidera	1 Blod Jan Ha	30 CA 92103
MOEL +4-	hot dellars	12,800/100	Dollars (\$ .25.	00
in post The	Payment of Child	Lot, coupox #3	THE WATER OF	The same of the

In 101 + T Payment of CAL	Row Se	ection	Divis Bloo	
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	CREDIT 20's Sales Care 80's Sales of Lots Opening/ Crosling Burial Containers Handling Fee	67007 77194 100 77194 100 77181 100 77182 100 77185	25 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Pay 10-87)	ISSUED BY HEABlack	Recording & Misc. Frees Pre-Need Trust Sales Tax	77183 63033 9022 60101 78390	25 M



### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

	264-	3151		12/	1 0	9
From Katha Agas	Karladress 5	1816	Date:	1-4	Mary 19 0	1
twenty - few	restino	4 0	edet o	ollars (\$	15,00	
Lot 2059 Grave_	V	Row	Section		Division O	No.
Acct. No.	NOT VALID FOR PURPOSE STA "PAID" IN THIS SPACE.	AUB)	80% Salen	67007 77384	25 00	
w.o. = 7643		JAN 09 19	Opening/ Closing Burial	100 77181		
BALANCE DUE 4770-00		19	Handling Fee Repording & Misc Fees	77185		The last
Pre-Need Lot	200/1	1/2	Pre-Need Trust Sales Tax	63033 9022 60101 78390		All IN
AC-212 (Nov. 10-87) 230 2	ISSUED BY	a Ward	TOTAL PAID	*	25 00	



#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From: The Such	- Address 49716 -	Date Dil	J 1961
- Trocatey - years	20/10 - 141	det do	(\$ 25.00)
Lot 2059 Grave_	Row Se	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	
Acct, No. 8-7643	CITY ALBITON	of Lots 77184 Opening/ 100 Closing 77181	
BALANCE DUE 445.00	FEB 1 0 1989	Burial 100 Containers 77182 100 Handling Fee 77185	
Pre-Need Lot At Need O On Acct O	1989	Recording & 100	
Pre-need Trust  Cash  Check	ISSUEDBY Shala and	Salen Tax 60101 78390 TOTAL PAID	
AC-312 (Nev. 10-87) 8366	ISSUED BY	IUINLINIU .	00



### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY 264-3151

	t interest	Date:	.199
From After May Mille	Address: 9116 Off	GRAN SHO	
- Moraley - ple	repar 6 Ced	Dollars (\$	20.00
In Payment of	argues a com	4 6001	
Lot Grave_	Flow Se	ction	Division / O
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	CREDIT 67007 20% Sales Care 77184 —	100
Acct. No.		80% Sales 100 of Lots 77184 — Opening/ 100 Closing 77181 —	C 3 00
W.O. = 1/642		Buriat 100 Containers 77182 —	AVOITOR
BALANCE DUE		Handling Fee 77185 —  Recording & 100  Misc Fees 77183 —	MAR 16 1000
Pre-Need Lot At Need On Acct	11	Pre-Need 63033 Trust 9022 —	1009
Pre-need Trust □ Cash □ Check □	ISSUED BY MALL COLOR	Sales Tax 80101 78390 — TOTAL PAID \$	2=10
AC-212 (Rev. 10-87)	NOVACCO CONTRACTOR OF THE PARTY	A DECURRONNE	000

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Date:	4	7	19 8
ella!	XXU	et s	7
R. P.L.	SHEET VA	25	00).
D D	ollars (\$	from.	
68 1 6	757		
	-		
_	-		75
ection		Division Block	0
- Colon	-	Block	70
CREDIT	67007 77184 —		The same
20% Sales Care 80% Sales	100	200	1918
of Lots	77184 -	-	200
Opening/	100		
Oldlosing	77181 -		
Burial Containers	77182 -		
Committee	100		1000
8Q Handling Fee	77165 -	_	+
Recording & Misc Free	100		1
	77163 -		
Pre-Need Trust	63033		
Sales Tax	60101		
THE PERSON NAMED IN	78390 -	1100	1 3
TOTAL PAID	5	OX 5	col

From: La Clare	Junear	Address	98160	leavas	Llu	701
In Payme	nt of	raugon	- 7	Crestil !	ollars (\$	
Lot 2059	Grave		Row	Section	W10	Division Slock
Pre-Need Lot  At Need	On Acct	NOT VALID FOR PURPOS PAID IN THIS SPACE	ADD	MPED CREDIT 20% Sales Care 80% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Becording & Misc. Fres Pre-Need Trust Sales Tax	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 — 8023 — 8022 — 80101	25
Pre-need Trust U Cash AC-212 (Rev. 10-82)	CHOCK	SSUED BY	da Va	TOTAL PAID	78390 — \$ —	85

•	OFFICIAL RECEIPT  WHITE TO CUSTOMER DANAARY SEMETTERY PINK AUDITOR  From Payment of Paym	CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151  Address: 4/8/6 \$\frac{1}{2} \text{Address} \te	Date:	Nº 37756
	Lot Grave Invoice No Acct. No W.O # 16/13 BALANCE DUE PALANCE DUE	NOT VALID FOR PURPOSE STATE OUNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 67007 20% Sales Care 77154 — 80% Sales Care 77184 — 00 of Lots 77184 — 00 closing 77181 — 00 closing 77181 — 00 containers 77182 — 00 Handling Fee 77185 —	Division/O Black OD CITY AUDITOR
•	Pre-Need Lot At Need On Acct O		Recording &   100	1009

AC-212 (Rev 10-87)

TOTAL PAID



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

### MOUNT HOPE CEMETERY

	Address: 1/8/4 Jean	Date:	G-	2/	9 < /
In Payment of	Layer 9 11/16	IT de	ollars (\$	28.00	_
Lot 2059 Grave	Row Se	ection		Division O	
Acct. No. W.O. 27643 BALANCE DUE 29200	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 77784 — 100 77784 — 100 77781 — 100 77782 — 100 77185 — 100 77183 —	CITY AL	IDITOR 1989
Pre-Need Lot At Need On Acct At Need Check Ac-212 (Rev. 10-07)	ISSUED BY	Pre-Need Trust Sales Tax TOTAL PAID	63033 9022 60101 78390 —	26	00

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAIN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

(523)	264-3151	0.	-	450
		Date:	3,02.	19
From: O I	Address: 46 6 500	000121	M.	-
Duxity-QU		Dollars	(\$ 303	V_)
In Payment of	redit Lot C	1 200	0	
				Ball In
Lot SS 9 Grave	RowSe	ection	Division Block	0
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 67003 20% Sales Care 77184		
Acet. No.		60% Sales 100 of Lots 77184	-	-
wo. 25-76-13		Opening/ 100 Closing 77181 Burial 100	GITTE	AUDITOR
BALANCE DUE \$314	HER WILLIAM TO STORY	Containers 77182		OR
		Handling Fee 77185 Recording & 100 Misc. Fees 77183	7105	7 1980
Pre-Need Lot  At Need  On Acct		Pre-Need 63033 Trust 9022		.009
Pre-need Trust Cash Check	· TILL ON THE	Sales Tax 60101 76390		
AG-212 (Rev. 10-87)	ISSUED BY	TOTAL PAID \$	- 08	



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

	11 11911	Date:	100	
From CHICLE STOR	Address	Do	lars (\$ 7	7.00
In Payment of	Carefan 11-13	and	TOLT	4
Lot SUS 7 Grave	Row Se	ction	Divisi Block	
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	80% Sales of Lots Opening/	67007 77184 100 77184 100	7:700
W.O. BALANCE DUE		Burial Containers Handling Fee	100 77185	YAUSTION
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check		Sales Tax	100 77183 63033 9022 60101 78390	1 0 1989
AC-212 (Rev 10-87)	ISSUED BY MERCHAN	TOTAL PAID	1 /	700



WHITE TO CUSTOMER CANARY CEMETERY FINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From: Marty - Jay	Address: 4/1/6	Date:Dol	11-13-19-19-19-19-19-19-19-19-19-19-19-19-19-
Lot 2059 Grave_		ction	Division /O
Pre-Need Lot Al Need Check Pre-need Trust Cash Check	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77184 100 77184 100 77184 100 77181 100 77182 100 77185 100 77183 63033 8022 60101 78390

WHITE ..... TO CUSTOMER CANARY CEMETERY

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINK AUDITOR	264-3151		11-	11 00
From Patra Tuake	Address 486 A	Date:	Stud	201
twente, - year	10/100 Tax	1. + 1. D	ollars (\$ 2	25,00,
In Payment of	define is well	11 001		
Lot 2059 Grave_	Row	Section		Division O
Acct. No. 2 - 76 (/3 W.O. 2 - 76 (/3 )	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Cars 80% Sales of Lots Opening/ Closing Burlal Containers	67007 77184 100 77184 100 77181	ATT ALS TOR
BALANCE DUE 26 7.00		Handling Fee Recording & Misc. Fees	77185 L 100 L 17185 - 100 27183 -	EC 18 1989
Pre-need Trust Cash Check	And Whi	Pre-Need Trust Sales Tax	63033 9022 80101 78390	05 00
AC-212 (Rev. 10-87) 2/3	ISSUED BY	TOTAL PAID	•	00

WHITE TO CUSTOMER CANARY DEMETERY PINK AUDITOR

## PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

NO 38857

From: Kata & Turke	Nollars 4814 Fode	Date: 2	90/10 ollars (\$ 260	. 1990
In Payment of	C+7 K+T Row So	ection	Division	10
Invoice No.  Acct. No.  W.O. E-7/643  BALANCE DUE At Need On Acct On Acct	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	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77185 100 77185	AUSTOR 12 1990
Pre-need Trust Cash Check C	ISSUED BY autolit	Trust Sales Tax TOTAL PAID	9022 60101 78390 \$	o a



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

No 39938

From Att Aug del	Address 48 11 Andre o	Date:	n   1000	10 90 gays
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 670 20% Sales Care 771 80% Sales 10 of Lots 771 Opening/ 10 Closing 771 Burial 11 Containers 771	84 200 84 200 81 31 300	0
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 10-67)	ISSUED BY AMARIAN L	Handling Fee 7710	00 85 00 83 83 22	10



# PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Nº 40036

In Payment of  Lot Grave Row Section  Invoice No NOT VALID FOR PURPOSE STATED UNLESS STAMPED CRE	Dollars	(\$ 35.00	)
NOT VALID FOR PURPOSE STATED UNLESS STAMPED CRE			
NOT VALID FOR PURPOSE STATED UNLESS STAMPED CRE		Division Block	10
Aget No	EDIT 67007 9% Sales Care 77184 9% Sales 100 1 Lots 77184 pening/ 100 losing 77181 urial 100 ontainers 77185 andling Fee 77185 ecording & 100 iss. Fees 77185 re-Need 63033 rust 9022 ales Tax 60101 78390	30	

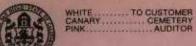


WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

#### MOUNT HOPE CEMETERY 264-3151

From Later Turker	Address: 4814 Fadea	Date: _/-	5.0.		19.7/
In Payment of	Let Let	D	ollars (\$ =	26.50	
Lot 20 55 Grave	Row Se	ction		Division Block	0
Acct. No	NOTVALIDEOR 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	57007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 — 100 77183 — 100 77183 — 100 77183 —	26	50
Pre-need Trust  Cash  Check  Ac-212 (Nev. 10-87)		Sales Tax TOTAL PAID	60101 78390 —	26	50



#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 42079

From Latra Tucker	Address: 48/6 Feder	Date: 4	1-3 10 Oliars (\$ 25.4	. 1992
Lot 2057 Grave	Row Se	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 Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	67007 77184 100 77184 100 77181 100 77182 100 77182 100 77185 100 77185 100 77183 83033 9022 90101 78390	5 W

Send or bring one coupon with each remittance COUPON DO NOT MAIL ENTIRE BOOK ACCOUNT No. E-7643 Credit Lot

Katra E. Tucker 4816 Federal Blvd. San Diego, Ca 92102

Month and Day Due Indicated Below

JAN	FEB	MAH	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
									10		
	nt due ate abo	when p	aid on	or bef	ore.		> 5	25	.00		

Amount due if paid more than 10 days after due date above.



26.00

Amount Received	

NAME

**ADDRESS** 

STATE ZIP CITY

DO NOT MAIL ENTIRE BOOK ACCOUNT No. E-7643

Credit Lot

Katra E. Tucker 4816 Federal Blvd. San Diego, Ca 92102

	San		æ. 30							
FEB	MAR				AUG					JAN
								10		
	nt due ite abo	aid on	or bei	ore.	-	<b>s</b>	_ 2	5.0	0	
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□ check ( ✓ ) if this is new address

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due date abo				V. 100		.00		
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Amount due if paid more than. 10 days after due date above.

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HEV. 34

Send or bring one soupen with each remittance COUPON

10

DO NOT MAIL ENTIRE BOOK ACCOUNT No. B-7643

Credit Lot

Katra E. Tucker 4816 Federal Blvd. San Diego, Ca 92102

OCT NOV DEC IAN FEB MAR APR MAY JUN JUL ANG SEP

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

\$ 25.00

1.00

Amount Received

-80

NAME

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STATE

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CITY

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#### Sent or bring one coupon with each remittance COUPON

DO NOT MAIL ENTIRE BOOK

ACCOUNT No. 12-7643 Credit Lot

Serra E. Tucker 4816 Federal Sivd. San Diego, Ca 9216

		Mon	th ar	nd Da	y Di	e Inc	dicat	ed B	elow	-	
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Send o		Contract of the last	ENT)			mittans	· C	out	PON	1	7
AC	COUN	T No.		-7	643		1	Cra	äit	Lot	
	181	Die Die		Ca	Els	210					
MAY	JUN	-	great and	-	Part of the last	THE RESERVE	The second second	-	FEB	Name and Address of the Owner, where	APR
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lend or bring one coupon with each remit	une COUPON	18
DO NOT MAIL ENTIRE BOOK		TO
ACCOUNT No. 3-7643	Gredit Lot	

Eatre E. Tucker 4816 Federal Blyd. San Diego, Ca 92102

			Mon	th an	d Da	y Du	e Inc	dicat	ed B	elaw		
ı	JUN	IUL	AUG	SEP	DOT	NOV	DEC	JAN	FEB	MAR	APR	MAY
1	H			1						10		

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



Amount due if paid more than 10 days after due date above.

s. 1.00

Amount Received

35,00

ADDRESS.

CITY

STATE

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Theck (V) if this is new address

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NAME				An	rount.	Receive	s s	2	6.	50	)
ADDRE	ESS										
CITY		Пе	heck	(V	11.1	STAT		v ado	ZIF		

# Present

#### MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 9-22-88

You are hereby authorized and instructed, sub	to a Company to the control of the c	she compine
of	Washord rules and regulations, to inter	theremains
in a Fu	ineral, date, time	
Veult/Liner		
We have a survival to the control of		
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge w	ill be applied
and billed to undersigned. War time veteran		
Lot 26 Grave Row 40	Section 5 Division/Block	7
Lot Grave Row _/	Section Division/Stock	
Grave space & Care Fund		
Additional spaces and care fund		
Opening/Closing & Setup		320-cl
Opening/Closing & Setup Burisl Container PAIP Handling Fees 6 - 6	N FULL	75:02
Handling Fees 6 - 6	-89	20.08
Flower vases - Marker setting fee		
		350
Recording and filing fee		11.31
Sales taxes		11 21
	Total Due	10-21
Paid re	eceipt number 24 //3	65-04
	Balance due	46,00
I hereby certify I am the	of the above nam	ned 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 a	of remains as above indicated. I certify a n and I agree to hold Mt. Hope Cemetery ha	nd represent
	71	
I hereby authorize the interment in lot I hold under deed.	Sagaro NV / R (10)	. #
	palayer 0 - 010	19/12
Signature of recorded helder of deed	State	Zip Code
	Telephone	
	The state of the s	
	Invoice #	
Work Order # E 7644	Acct #	
PY-693 (REV. 8-86)	110001	



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

NB -36715

		Date:	7-22	
From Aught, - few	30/00	D.	ollara (\$	5.37
in Psyment of	MARCH MUSH	Cad	wat	
Lot Grave_	Row S	ection	Divisio Block	
Acct. No. 2-/6/44	- NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 90% Sales of Lots Opening/ Closing Burial	67007 77104 100 77184 100 77185 100	
BALANCE DUE	MEP 29 1988	Containers  Handling Fee  Recording &  Misc. Fees	77182	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	ISSUED BY Sadalky	Pre-Nond Trust Sales Tax TOTAL PAID	9022 90101 78390	6537



WHITE TO CUSTOMER CANARY CEMETERY AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Nº 36949

From: Locy (Dark)	and Address: 2050, K	Date: Doll	11-7 19:00 ars (\$ 20.00)
1. 48	uges I guera	M Mus	Division
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	80% Sales of Lots Opening/ Closing 7 Burial Containers 7 Handling Fee 7 Recording &	Block
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev. 10-67)	ISSUED BY AND A MALE	Pre-Need 5 Trust Spios Tax 6	33933 9022 90101 18390 1 90 00



WHITE TO CUSTOMER CANARY CEMETERY

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

	264-3151		00
	1 1	Date / - =	,19 8/
From Mary Marks	Address: 3050 F	HUET	A 45
- (10TB) dalla	( ) 28/10/15-	Dollars (\$	40,00,
In Payment of	lougon 293	gregord	Hust
Lot 26 Grave.	40 Row \$	ection 5	Division /
Invoice No	NOTVALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 67007 20% Sales Care 77184 —	
Acct. No.	ALBO	80% Sales 100 of Lots 77184 —	
w.o. 8 - 1644	JAN 09 m	Closing 77181 — Burial 100	
BALANCE DUE 586, 00	19 19	Containers 77182 — 100 Handling Fee 77185 —	
State of the last of the last		Recording & 100 Misc Fees 77183 —	1000
Pre-Need Lot   At Need   On Acct  Pre-need Trust   Cash   O Check	1111	Pre-Need 63033 Trust 9022 — Sales Tax 60101	9000
7 0101	ISSUED BY BYALL MOY	TOTAL PAID \$	11111
AC-212 (Rev. 10-67)			7000



Invoice No.

Acct No.

TO CUSTOMER CEMETERY PINK AUDITOR

Grave

On Acct

ISSUED BY

Payment of

At Need

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151 Dollars (\$ Division Bow. Section Block NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE CREDIT 67007 20% Sales Care 77184 80% Sales of Lots Opening/ Closing 100 Burnat Containers Handling Fee 77185 Recording & Misc. Feet 100 77183 Pre-Need 63033

Trest Sales Tax

TOTAL PAID

9022

80101 78380

Fre-need Trust AC-212 (Rev. 10-87)

BALANCE DUE

Pre-Need Lot



WHITE TO GUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

White Chief	0 305) K	Date:	F A 12/1
From Payment of	Address - Jej	19/10 DO	llars (\$ 596.00 )
Lot 26 Grave	40 Row_s	ectionS	Division /
Acct. No. 2-1644 w.o. 2-244	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers	67007 77184 100 77184 100 77181 100 77182
Pre-Need Lot	ISSUED BY DINGLE - LAN	Pre-Need Trust Sales Tax	100 77185 100 77183 59033 9022 60101 78380 \$

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IAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
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CIT	4	45-411				STA			211		
2001			chec	KIV	) if !	this is	s nev	v ad	dress		

ACCOUNT No.

E-7644

Preneed Trust

Lucy Warford 3050 "K" Street San Diego Ca -92113

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

Amount due if paid more than 10 days

due date above

after due date above.

21.00

Amount Received

DO	NOT COUN Luc 305	MAIL T No.	ENTIFE E	-76 ord Str	OK 44 eet a	921	Pre	en est u	d T	rus	<b>3</b>
MAR	APR		_	_	AUG			NOV			FEB
		-	14		1		P. Common of the	executive and		10	
lue di	nt due	when y	moret	Special Specia		ays	> s	20	1.0		
NAM	1000	4		1	noung.			22	3	. 0	00
CITY	-	3	5.		) if t	STA his i		a add			10

Send or bring any soupon with such remittance COUPON DO NOT MAIL ENTIRE BOOK ACCOUNT No. E-7644 Breneed Trust Lucy Warford 3050 "K" Street San Diego, Ca 92113 Month and Day Due Indicated Below APR MAY JUN JUL AUG SEP OCT NOV DEC JAN FEB MAR 10 Amount due when paid on, or before: due date above Amount due if paid more than 10 days after due date above. Amount Received NAME ADDRESS CITY STATE check this is new address.

P.A.

### MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 9/22

	Date /	
You are hereby authorized any instructed, su	bject to your rules and regulations, to inter th	ne remains
of John An	e # 105-9564	
name	uneral, date, time 9/23-	
Vault/Liner Vall	m. 10 / 1.1.00	
Church, Chapel, Graveside	- Mariney Marine	Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day of an extra charge will	be applied
and billed to undersigned. War time veteran	· · · · · · · · · · · · · · · · · · ·	
Lot /76 Grave 4 TOREW	Section Division/@dentk_	12
	Section Sectio	10
Grave space & Care Fund		53.00
Additional spaces and care fund	η <b>Λ</b>	- 18
Opening/Closing & Setup	11	10,00
Burial Container	H'	
Handling Fees		
Flower vases - Marker setting fee		
Recording and filing fee		
Sales taxes		14/30
1004	Total Due ∠	70)
75-736 Paid	eceipt number	
	Balance due	
I hereby certify I am the	of the above name	d de andoni
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		miess from
hereby authorize the interment in lot I hold under deed.	Signature	
	Address	-
Signature of recorded holder of deed	State	Zip Codi
	Telephone	
	A D	-
	Invoice # 075208	
Work Order # <b>E</b> 7645	Acct # 000952	-/1
THE COLUMN TWO IS NOT	Provide the second seco	

## PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-7645

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

JOHN DOE CO			HALE	UNK.	FOUND JUN 26, 1988
SAN YSIDRO	CITY OR TOWN	The state of the s	DE DEATH—COUNTY IDENSTATE IF NOT IN CALIFORNIA) SAN DIEGO		OF SPOUSE OR OTHER INFORMANT
NAME AND ADDRESS	SS OF FUNERAL DIRECTOR, LOR PERSON AS RITCHELL FUNERAL HOME, 1818 DIEGO, CA 92107	SUNSET CLIFFS	CALIFORNIA LICENSE NUMBER F-816	SAN DIEGO, CA	
	TYPE OF PER	MIT, CHECK ONLY ONE O	THE FOLLOWING TYPES OF	DISPOSITION	
DON'T BURIAL DA	ICLUDES ENTOMBMENT)	5 DISINTERMENT AN	D BURIAL IINCLUDES		AND REINTERMENT OF CREMATED DES INURNMENT)
2. CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CR			OF CREMATED REMAINS AND HER THAN IN A CEMETERY
☐ 3 CREMATIO CEMETERY ☐ 4 SCIENTIFIC		7 DISINTERMENT, CR OTHER THAN IN A	EMATION, AND DISPOSITION CEMETERY	FOR COR	NONER'S USE ONLY
NTERMENT	NAME AND ADDRESS OF CEMETERY W			D	SAN DIEGO
CREMATION	NAME AND APPRESS OF CHEMATORY W	AIRE HEMAINS ARE TO BE CR	DATE CHEMATO	SIGNATURE OF PERSO	IN IN CHARGE OF CREMATORY
DURIAL AT SEA OR OSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	De William	SUFFICIENT TO IDENTIFY FINAL	oth in	Same style
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	(2)	asket)	
ACKNOWLEDGMENT OF ARPLICANT	This is to certify that I am the pe remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	edent under provisions of the espass and nuisance laws	se Health and Safety Code, apply and understand that	DATE SIGNED	CANT
LOCAL REGISTRAR	THIS FERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED I	THE ANIMASTHE A DA MA	SEP 2 3 1998	Norall &	PETRAN ISSUM DRANT (A
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISSOSTION PLANT THE SPECIFIED OF	123/SY SIGNATU	eswelly	DISPOSITION LICE	ENSE NUMBER OF CREMATED REMAIN: POSER IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAD OF	COUNTY OF DEATH	.0		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR IT THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

## MT. HOPE CEMPTERY INTERMENT ORDER

City of San Diego

9-26-88 You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains Funeral, date, time Church, Chapel, Graveside . 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. War time veteran . 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 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 Zie Code Invoice # Work Order # Acct. # PY-593 (REV. 8-86)

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

From enchanger Pas	Malladdress 5050 Feb	Date:	Ollars (\$	856-03
'InPayment of	by dettes in	terms	ct	
Lot 104 Grave	7 Row S	ection	4	Division //
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED CITY ALBOTTOR SEP 29 1988	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Pecording 8	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 —	320 dD 320 dD 100 dD
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check AC-212 (Rev 10-07)	ISSUED BY Andla Wars	Miss. Fens Pro-Need Trust Salies Tex TOTAL PAID	77183 — 63633 9022 — 60101 78390 —	600

## PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-7646

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

		The continue of the second of the second	ALCOHOLOGICA CONTRACTOR	The second second second	
NAME OF DECEDEN			SEX	DATE OF BIRTH	DATE OF DEATH
	Ruby Gertrude Wh	ite	Female		99 Sept. 19, 1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY	OR STATE IF NOT IN CACHORINAL	NAME AND ADDRESS	OF SPOUSE OR OTHER INFORMANT
	Diego	San Diego		CONTRACTOR OF STREET	ms - Daughter
NAME AND ADDRES	SS OF FUNERAL DIRECTOR FOR PLRSON AS		CALIFORNIA LICENSE NUMBER		se Valley Ct.
Anderson-R	adedate Mortuary	Federal Blvd.	F 1329	spring vall	ey, CA 92077
		MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES OF	DISTOSITION	
	TIPE OF PER	HIT, CHECK ONL! ONE OF	THE POLLOWING TIPES OF	DISPOSITION	
BURIAL UN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT)	BURIAL (INCLUDES		AND REINTERMENT OF CHEMATED UDES INURINMENTI
	N AND BURIAL UNCLUDES INURNMENT)	6 DISINTERMENT, CREMINGLUDGES INCHRIME			OF CREMATED REMAINS AND THER THAN IN A CEMETERY
CEMETERY		7 DISINTERMENT CREM	MATION, AND DISPOSITION	FOR COF	RONER'S USE ONLY
4 SCIENTIFIC	USE	Office friend twin c	EMETERY.	O DISPOSITION PE	NOING
INTERMENT	Mt. Hope Cemetery		REMAINS ARE TO BE INTERRE	0	San Diego
CREMATION	NAME AND ADDRESS OF CREMATOR	Paler - Kull	DATE PREMATED	SIGNATURE OF PERSO	ON IN CHARGE OF CREMATORY
BURIAL AT SEA OR ISPESSITION OTHER HAN IN A CEMETERY OF CREMATED REMAINS	N/A NAMEST FORMET ON SHOREL	INE, OR OTHER DESCRIPTION S	UFFICIENT TO IDENTIFY FINAL	PLACE AND COUNTY O	IF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	ALL THE REAL PROPERTY.	2 - 17 11/2	
ACKNOWLEDGMENT	This is to certify that I am the per remains of the above named dece			SIGNATURE OF APPLIC	CANT
A) LICANT	and I hereby acknowledge that tre this permit gives no right of unrest		A PROPERTY OF THE PROPERTY OF	DATE SIGNED	
LOCAL RESISTRAB	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEASTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE CA OO	SEP 2 6 1980	SIGNATURE OF LOCAL	Campai, M.D.
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	SIGNATURE SIGNATURE	OF PERSON IN CHARGE OF D		ENSE NUMBER OF CREMATED REMAINS POSER: IF APPLICABLE
IF DISPOSITION IS TO DOCUM IN ANOTHER COUNTY	San Diego County		P. O. Box 8522 San Diego, CA		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 9-26-88

Manuto	crousnon.
. Bell Line Fo	uneral date, time Humpher Ha
nurch, Chapel, Graveside	
man Grand Walls and the same of the same of	of regular work day or an extra charge will be applied
d billed to undersigned. War time veteran	
10	
ot 48 Grave 9 Row	Section Division/Block
rave space & Care Fund	
dditional spaces and care fund	
pening/Closing & Setup	20x (
	180 /
urial Container	11/50
andling Fees	Mark
ower vases - Marker setting fee V. H	11/11/12 July 135.0
ecording and filing fee	55-6
eles texes	
	Total Due
Paid re	eceipt number 36722 791.50
	Balance due 741.5
1 6	1
nereby certify I am the days of Q	of the above named decede
id this is your authority to make disposition at I have the right to make this authorization by liability on account of said authorization	of remains as above indicated, I certify and represent and I agree to hold Mt. Hope Cemetery harmless fro
(	50 11) 1
ereby authorize the interment in lot I	Dearine /1 (1600)
old under deed.	28/2 Sayordo (1)al
nature of recorded holder of deed	San Dago CA 9210
	619 4880 5 729
	Telephane
E 7647	Invoice #



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From: & Carese De	Address:	2812 1	be seile	11	ult 3	5/3
In Payment of	bug fr	Francis	Sylon o	ollars (\$	JE1/2	9
Cot 4/6 Grave	9	Row	Section 17		Division Block	7
Invoice No	NOT VALID FOR PURPOS "PAID" IN THIS SPACE.	BE STATED UNLEBS STAMPED	CREDIT 20% Sales Care 80% Sales	57007 77184 700		
Acct No	THE REAL PROPERTY.	CITY AUDITOR	of Lots Opening/ Closing	77184 — 100 77181 —	370	00
BALANCE DUE	Miles and the	SEP 29 1988	The state of the s	100 17182 —	100	00
		,	Handling Fee Recording & Misc. Fees	77185 — 100 77183 —	170	00
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐	/	111	Pre-Need Trust Sales Tax	63033 9022 — 60101 78390 —	6	50
AC-212 (Plan 10-67) 3664	ISSUED BY 1916	HER MEG	TOTAL PAID	\$	741	50

### PERMIT FOR DISPOSITION OF HUMAN REMAINS

E - 76+7

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	TH FRANCIS KRAUSMAN		SEX Male	12-16-1919	09-24-1988	
PLACE OF DEATH—CITY OR TOWN Sen Diego  NAME AND ADDRESS OF FUNERAL DIRECTOR IOR PERSONS			Diego CALIFORNIA LICENSE NUMBER	Deanne M. Wood (Daughter) 2812 Bayside Walk		
Humphrey Ch	nula Vista Mortuary-C	hula Vista, CA	F-964	San Diego, CA	92109	
.,	TYPE OF PER	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES OF	DISPOSITION		
XXX 1 BURBAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT)	BURIAL IINCLUDES	8. DISINTERMENT AND I	REINTERMENT OF CREMATED INURNMENT)	
2 CREMATION	N AND BURIAL UNCLUDES INURNMENTI	6 DISINTERMENT, CRE-		B. DISINTERMENT OF CF DISPOSITION OTHER	REMATED REMAINS AND THAN IN A CEMETERY	
3 CREMATION CEMETERY  4 SCIENTIFIC		7 DISINTERMENT, CRE	MATION, AND DISPOSITION		ER'S USE ONLY	
A. SCIENTIFIC	USE		SWSHILD.	☐ 10 DISPOSITION PENDIN	G	
INTERMENT	NAME AND ADDRESS OF CEMETERY W	Control of the Contro		THE RESERVE TO SERVE THE RESERVE THE RE	San Diego	
CREMATION	NAME AND ARTORESS OF CREMATORY W	HERE SAMAINS ARE TO BE SHE	den - h	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY	
BURIAL AT SEA CH OSITION OTHER IN A CEMETERY OF REMAINS	ADDRESS, NEAREST POINT OR SHOPE	LINE OR OTHER DESCRIPTION	DIFFICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF DI	SPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS			24 (1)	
ACKNOWLEDGMENT OF	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tr	dent under provisions of the	Health and Safety Code,	SIGNATURE OF APPLICANT  DATE SIGNED		
APPLICANT	this permit gives no right of unrest		Section of the second section of the second section of the second section sect	Difference of the Control of the Con		
LOCAL REGISTRAR	THIS FERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED.	DE AND IS THE A SEL OO /	SEP 2 7 1988	SIGNATURED LOCALE	Brown M.D. Co	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON		POYEN THANKS IN	POSITION LICENSE DISPOSE	NUMBER OF CREMATED REMAINS R, IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	0			

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 9/26/88

A Sex Wo	10/01	71
TOVALLE		Jun 9/27 12:00
Vault/Uner 1 1 - 1/4	neral, date, time	12 min
hurch, Chapel, Graveside	hove the	Mortuary Mortuary
Il Funeral cars must arrive before 3:30 p.m.	of regular work day	or an extra charge will be applied
od billed to undersigned. War time veteran	1000 TI	
18247		10
Grave Row	Section	Division/Block
tise just	0 595	1190.0
rave space & Care Fund	Z	
dditional spaces and care fund	· · · · · · · · · · · · · · · · · · ·	
pening/Closing & Setup		250.00
urial Container	1 / + 5	00 15.00
andling Fees	10.	60 170.00
ower vases - Marker setting fee 3.5.198	9	
ower vases - Marker setting fee	TERY	20
ecording and tilling tee	O.CALIF.	27 "20
ales taxes		121
The state of the s	Total I	Due/90/,31
Paid re	sceipt number 3	729 017 29
		Balance due
*		1917.21
nereby certify I am the Wife		of the above named deceden
nd this is your authority to make disposition nat I have the right to make this authorization	of remains as above and lagree to hold N	indicated, I certify and represent Mt. Hope Cemetery harmless from
ny liability on account of said authorization i		The second of the second of
	м., е	n. 1,00 Tom
nereby authorize the interment in lot I old under deed.	Signature o 9	70 July 60
	Address	19 A ST.
gnature of recorded holder of doed	Saus	n Diego 4210
	25	2-2374
	Telephone	
	technique at	
The same of the sa	Invoice #	
Vork Order # <b>E</b> 7648		



AC-212 (Hev. 10-87)

From:

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

Payment of \_

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Row

CITY AUDITOR

SEP 29 1988

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Grave NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE Invoice No. Acct. No. BALANCE DUE On Acct Pre-Need Lot Pre-need Trust 
Cash Check

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

E 7648

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	T.			SEX	DATE OF BRITH		DATE OF DEATH	1
GIN WOO TO	M			MALE	MAR. 14.	1917	SEPT. 25	1988
PLACE OF DEATH	CITY OR TOWN	PLACE OF DEATH-COU	NTY 108 STATE	IF NOT IN CALIFORNIA	NAME AND ADD	RESS OF SPO	USE OR OTHER	NEORMANT
SAN DIEGO		SANDIEGO			YUEN TOM	-WIFE		
NAME AND ADDRES	S OF FUNERAL DIRECTOR ION FERSON AC	TING AS SUCH!	CALIFOR	NIA LICENSE NUMBER	2979 A.	STREET		
GREENWOOD	MORT. I 805 & IMPERIA	L. SAN DIEGO.	CA. F	-843	SAN DIEG	O. CA.	92102	
1	TYPE OF PERA	AIT, CHECK ONLY ONE	OF THE FO	LLOWING TYPES O	F DISPOSITION			
XXXI BURIAL IN	CLUDES ENTOMBMENT)	5 DISINTERMENT ENTOMBMENT)	AND BURIAL	INCLUDES	B. DISINTERME REMAINS (II	NT AND REIN		EMATED
	N AND BURIAL IINCLUDES INURNMENT)	D 6 DISINTERMENT,		AND BURIAL	9 DISINTERME	NT OF CREMA	ATED REMAINS A	AND Y
2 CREMATION	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT	COENSATION	AND DISPOSITION	EOR	CORONER	S USE ONLY	
4 SCIENTIFIC	use	OTHER THAN IN	A CEMETER	, and Distriction	□ 10 DISPOSITIO		o osc onc	
INTERMENT	NAME AND ADDRESS OF CEMETERY W	3751 MARKET				COUNT	N DIEGO	
CREMATION	NAME AND ADDRESS OF OREMATOR NA	Le Jealer	CREMATED	DATE CREMATED	SIGNATURE OF P	ERSON IN CH	ARGE OF CREMA	TORY
BURIAL AT SEA DR DOSITION OTHER WATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	11 / 50 //	SUFFICIEN	T TO ICIENTIFY FINAL	PLACE AND COUN	Y OF DISPOS	SITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FAMILY RECE	ERVING REMAINS	_		10 10			
ACKNOWLEDGMENT	This is to certify that I am the per remains of the above named dece	HEAD TO SHEET THE PARTY OF THE		THE RESIDENCE OF THE PARTY OF T	SIGNATURE OF A	PPLICANT	New St	
APPLICANT	and I hereby acknowledge that tre this permit gives no right of unrest	espass and nuisance las	vs apply and	understand that	DATE SIGNED		737	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD ALTHORITY FOR THE DISPOSITION SPECIFIED IN	SE AND IS THE!	FEE PAID	2 7 1988	torall &	Carrie Giste	LM.D.	TS TS
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	CERTIFY THAT THE SPECIFIED 9	127/87 SIGNA	Wind Carpen	Son Sagget	DISPOSITION	DISPOSER, IF	MBER OF CREMA FAPPLICABLE	TED RÉMAINS
OF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	MOICATE ADDRESS OF REGISTRAY OF	COUNTY OF DEATH	20					

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 9/26/88

1 '
ct to your rules and regulations, to inter the remains
reeson
eral, date, time West 1/Am 9/28
: Claremont Mortusry.
regular work day or an extra charge will be applied
3 13
Section Division/Buok/
Top-0-7172
370.0C
100.00
) 145, de
35.00
6-50
606.80
Total Due
eipt number 26/3/ (290)
Balance dué
of the above named decadent
remains as above indicated. I certify and represent nd I agree to hold Mt. Hope Cemetery harmless from
d interment.
HOMAS C. TOKKELSON
Signature 4375 CLAYOND ST
Address AN DIEZO A
State State Star Code
13 11 - 53 47
Telephone
Telephone
Invoice #

### OFFICIAL RECEIPT



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

Nº 36739

MOUNT HOPE CEMETERY 264-3151

From Helping John	Address:	50/195	May for	ollars (\$	treet 1	D E
In Payment of	use o	terfeld	10 - L	The	encent	
Lot 46 Grave		Row	Section	5	Division Brock	2
Acct. No		CITY AUDITOR	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burlat Containers	67007 77184 — 100 77184 — 100 77181 — 100 77182 —	180	0000
Pre-Need Lot	ISSUED BY	OCT 3 1988	Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tex TOTAL PAID	77185 — 100 77185 — 63033 — 63033 — 60101 78390 —	656	5050

## PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-7649

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURE

		DE BLACK HAN-MAKE NO ALTER	ATIONS OR ERASURE	•	
NAME OF DECEDEN	П		SEX	DATE OF BIRTH	DATE OF DEATH
Gladys 1	Wells Torkelson		Female	March 22,1918	Sept.24,1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH COUNTY HOR STA	TE IF NOT IN CALIFORNIAL	NAME AND ADDRESS OF S	POUSE OR OTHER INFORMANT
Housto	n	Texas		Kathy Torkelson	n-Daughter
NAME AND ADDRES	SS OF FUNERAL DIRECTOR FOR PERSON AS	CTING AS SUCHI CALIFO	RIVA LICENSE NUMBER	4375 Clayford	Street
4266 Mt	SS OF FUNERAL DIRECTOR FOR PERSON AND ADDRESS OF ADDRES	Diego.CA P.	-1126	San Diego, CA	92117
3		WIT, CHECK ONLY ONE OF THE F		DISPOSITION	
BURIAL (IN	ICLUDES ENTOMBMENT)	5 DISINTERMENT AND BURIAL ENTOMBMENT)	GNCLUDES	8 DISINTERMENT AND RE HEMAINS (INCLUDES II	
2 CREMATIO	N AND BURIAL IINCLUDES INURNMENTI	6 DISINTERMENT, CREMATION (INCLUDES INURNMENT)	I, AND BURIAL	9. DISINTERMENT OF CRE	
LI 3 CREMATION CEMETERY	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT, CREMATION		ron conour	DIG LIGE ONLY
4 SCIENTIFIC		OTHER THAN IN A CEMETER	IV.	□ 10. DISPOSITION PENDING	R'S USE ONLY
A-11 A-1811/11-15			4	10. DISPOSITION PENDING	
ALTERNATION CONT. (See	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATED REMAI	NS ARE TO BE INTERRE	cou	NTY
INTERMENT	Mt. Hope Cemetery 3	751 Market St. San D	dego, CA	8	an Diego
CREMATION	NAME AND ADDRESS OF CHEMATORY W	Bours Dans	1	SIGNATURE OF PERSON IN I	
BURDAL AT SEA	ADDRESS NEAREST SOMET OF SHOREL	INOR OF ER DESCRIPTION SUFFICIE	NT TO IDENTIFY FINAL	PLACE AND COUNTY OF DIST	OSITION
DISPOSITION OTHER	- 60 de	1 .	-	OFA 1 F	
CREMATED REMAINS	NA Wood	en - Lener	- 19/1	7 211	
SCIENTIFIC	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	V	/	
USE	NA				
	This is to certify that I am the per		LOUIS AND THE PROPERTY OF THE PARTY OF THE P	SIGNATURE OF APPLICANT	
ACKNOWLEDGMENT OF	remains of the above named dece			D. Marie Marie M.	AND ADDRESS OF THE PARTY OF THE
APPLICANT	and I hereby acknowledge that tre this permit gives no right of unrest	11.		DATE SIGNED	
1	THIS PERMIT IS ISSUED IN ACCORDANCE WITH		DATE PERMIT ISSUED	SIGNATURE OF LOCAL SEGIS	THAN OCCURS BEDAME
REGISTRAR	OF THE CALIFORNIA HEALTH AND SAFETY COL	DE AND IS THE	PED 27 1988	- day 00 8 6	THE MAN GA
CERTIFICATION	AUTHORITY FOR THE DISPOSITION SPECIFIED IN		HSON ALLONDE OF D	ISPOSITION LICENSE N	JUMBER OF CREMATED REMAINS
OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	ITER DATES	en later	DISPOSER	IF APPLICABLE
The second second	INDICATE ADDRESS OF REGISTRAR OF		- True		
IF DISPOSITION IS TO OCCUR IN		0			
ANOTHER COUNTY	NA				

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

#### MT. HOPE CEMETERY

### INTERMEDT ORDER

eld Junaficky of San Diego 5-26-8 You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains of. in a 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 will be applied and billed to undersigned. War time veteran 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 9 Balance dué 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 Telephone Invoice # Acct. #

PY-583 (REV. 8-85)

## POWER OF ATTORNEY

## SPECIAL

E-7650

KNOW ALL MEN BY THESE PRESENTS: That I,	Helen Jacobus
	, the undersigned
(jointly and severally if more than one, hereinaft	ter collectively "principal"), hereby make, constitute and
appoint James A. March d.b.a. N	larch Associates
principal's true and lawful attorney to act for principal's use and benefit:	rincipal and in principal's name, place and stead and for
(a) To perform and sign in (his	her/their) place in all matters
pertaining to the sale, dis	sposal, use, or to give burial rights
to any other party or parti	es to that certain parcel of Cemetery
Property described as:	
Grave 9 Division 7 Sectione 17 Lot 48 Mt. Hope Cemetery	
	ttorney may be cancelled at any tten notice to James A. March, ess at that time.
and thing which may be necessary, or convenier	
WITNESS my hand this 23 day of	Learning, 1987.
Helen R Juntus	
STATE OF CALIFORNIA	is.
COUNTY OF SAN DIEGO	
On this 23rd day of February	in the year 1987 before me, the undersigned, a Notary Public in
and for said State, personally appeared*Helen R< Jac	
personally known to me (or proved to me on the basis of satisfacto to the within instrument, and acknowledged to me that She_e	ry evidence) to be the person_ whose name_ issubscribed
WITNESS my hand and official seal.	
a Choughow	GLORIA P HOFFCIMED NOTARY PUBLIC CALEGORIA
Notary Public in and for said State.	William Willia
GLORIAR Hoffower	My comm. exclass APR 10. 1



CITY OF SAN DIEGO, CALIFORNIA MOUNT HOPE CEMETERY E-7650 7619

# Dead

10/3/1974

OWNERSHIP AND INTERMENT PRIVILEGES
TO Helen R. Jacobus for the sum of \$ 160.00 (DOLLARS
LEGAL DESCRIPTION Lot 48 Grave 9 Section 17 Division 7
AS DESCRIBED ON PURCHASE ORDER NUMBER
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 mat 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 an repairs to any monument, head stone, vaults or other improvements of like nature that is already, or may here after be erected or placed on said lot or plot. Cost of same shall be assumed by legal owner or representative of plot. In no case will the Cemetery Division be responsible for damage, malicious mischief, vandalism an natural causes of deterioration, but reserves the right to remove any object that detracts from the embellish ment of the Cemetery. The following type of memorial will be permitted:
Regulation flush type marker.

A. W. Delmy DO

Cemetery Manager

W.L. Waster Director

PY-584

transfer:::

Helen R. Jacobus

505 E. 3rd St.

National City, CA 92050

to: Deanne M. Wood 2812 Bayside walk San Diego, CA 92109

E-7650

### OFFICIAL RECEIPT



WHITE ..... TO CUSTOMER CANARY .... CEMETERY

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HODE CEMETERY

Nº 36723

AUDITOR	264-3151		and the last	300	0
11/201		Date:	9-2	6	19.00
From: on Illaron	Address:		200		
- Theete- ya	ue o	,	ollars (\$	35.0	10,
InPayment of	LORD Marigue				
1 48 -	9	18-1-3		-	
Lot 2-1650 Grave_	RowS	ection	17	Division / Block	7
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184		
Acct, No		60% Sales of Lots	77184 -		
wo 2-1650	CITY AUDITOR	Opening/ Closing Buriel	77181 — 100		
BALANCE DUE		Continuers	77182		
	SEP 29 1988	Handling Fee Recording & Misc. Fees	77185 — 100 77183 —	3	00
Pre-Need Lot  At Need  On Acct		Pre-Need Trust	50000 9022 —		
Pre-need Trust   Cash  Check	There has	Spics Tax	60101 78090 —	70	1
AC-212 (Rev. 10-87)	ISSUED BY	TOTAL PAID	5	23	00

MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

renece ou 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 will be applied and billed to undersigned. War time veteran \_ \_\_\_\_ Section \_ 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 . 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 Zin Code Telephone Invoice # Acct. # PY-593 (REV. 8-85)

## Anderson-Ragsdale Mortuary

"Fourth Generation In The Mortuary Profession"



5050 FEDERAL BOULEVARD SAN DEGO: CAUFORNA 92102 PHONE (619 ) 243-3141 CLYDE L. ROBERTSON

INSURANCE SEPRESENTATIVE HOME 262-1072



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

		Date:	1-26	, 19
From le de Manden	Address: 5050 July	cal Be	vd,	50
Theleen hun	tell Mx 371	100-0	ollars (\$	306-31
In Payment of	resignal, last o	nd V	west	you
- House M	collect p.		- 10	1
Lot 062 Grave	Row S	ection		ivision /O
Invoice No.	NOTVALID FOR PURIPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77164	119 00
Acct. No	CITY AUDITOR	80% Sales of Lots Opening/	77184	97600
W.O_ E - /65/	1000	Closing Burial	77181	2
BALANCE DUE	SEP 29 1988	Containers Handling Fee	77182 100 77185	
-		Recording & Misc. Fees	77183	-917 27
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐	x / 1 / 1	Pre-Need Trust Sains Tax	63033 9022 60101 78390	11101
AC-212 (Rev 10-87)	ISSUED BY Frale Way	TOTAL PAID	78390	30637
	THE RESERVE THE PARTY OF THE PA			

## MT HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 9-26-88

of 1 1/2 1/4	May alag	AUX
Vilut/Lintr	neral, date, time Web 9/28 1	70
Church, Chapel, Graveside Town	vece: In Office N	fortuary
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. War time veteran .	Duet In	wa
Lot 14/4 Grave Row	Section 3 Division/Stank	?
ot Grave Now		I H
Grave space & Care Fund		
Additional spaces and care fund		- 7
Opening/Closing & Setup		2-06
Burial Container		)-CK
landling Fees		00
lower vases - Marker setting fee		
Recording and filing fee		5.00
Sales taxes		2.60
	Total Due	660
Paid re	ceipt number 36/30 39	2.6
	Balance due _	0
day of	(tex)	
hereby certify I am the and this is your authority to make disposition	of the above named of remains as above indicated. I certify and re	eprese
hat I have the right to make this authorization my liability on account of said authorization a	and lagree to hold Mt. Hope Cemetery harmin and interment.	ess tro
	Welling my Spaul	Lan
hereby authorize the interment in lot I nold under deed.	90000 By 162	CA
	Addition	
Ignature of recorded holder of deed	Sin Jan Jan	y Zip Co
	Talaphana 783 70	
	Invoice #	
Nork Order # <b>E</b> 7652		

#### OFFICIAL RECEIPT

AC-212 (Rev. 10-87)

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

36730

From Helex 111- April	der garte - tice 60/	Date: Hoo	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
In Payment of	elia keetto l	ection 3	Division Blook
Proice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	CREDIT 20% Sales Care	67007 77184
Acct. No. 5 - 165 3	CITY ALIGHTOR	80% Sales of Lots Opening/ Closing	77184 77181 /05 00
N.O. BALANCE DUE	SEP 29 1988	Burial Containers Hundling Fee	100 40 QQ 77182 50 QQ 77185 50 QQ
Pre-Need Lot  At Need  On Acct		Recording & Misc. Fees Pro-Need	100 77183 69033
Pre-need Trust   Cash   Chack	1 1	Trust Sales Tex	60101 2 60

TOTAL PAID

#1 could st

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 9-26-88

A MY - CHANC	UI (XICO)(A) (MUNI)
	The stop AL
n s Self dent Fune	eral, date, time Aller 9127 2.00
Church, Chapel, Graveside Auch 8	Mar Pagolile Mortuary
All Funeral cars must arrive before 3:30 p.m. of	regular work day or an extra charge will be applied
gd billed to undersigned. War time veteran _	
ot \$5 Grave \$ Row	Section Division/Stock //
2 744	71
Grave space & Care Fund	250,00
Additional spaces and care fund	
Opening/Closing & Setup	145.00
Burial Container	75.00
landling Fees	25.00
lower vases - Marker setting fee	A DECO
Recording and filing fee	35.00
Sales taxes	4.81
DAN	Total Due 5.15.1.589.81
Paid rec	eipt number 368 94 589.8
1/00	Balance due
P	+0
hereby certify I am the Jam Norm	of the above named deceden
hat I have the right to make this authorization a my liability on account of said authorization an	nd I agree to hold Mt. Hope Cemetery harmless from
my habitity on decount of said definentiation an	S.0190000
hereby authorize the interment in lot I	Signature F. Valland
nold under deed.	5564 San Onofre In
Signature of recorded holder of deed	Dan Ungo aly 9211
	262-6361-268-470
	Telephone
	Telephone Invoice #



WHITE .... TO CUSTOMER

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

	PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151			1 00
	21 9.11.	1 acres	Date:	01	1900
From:	ul Januar	Address: 569	an Or	0/13	· Very
- 650	of flexite	ca, 79/100-	D	ollars (\$	600,77
In	Payment of	artit of Veals	Latern	5	mus
a	Morrice	lup			FEBRUARY.
Lot_S	Grave	Row	Section	1910	Division Block
Invoice No	THE PARTY OF THE P	NOT VALID FOR PURPOSE STATED UNLESS STAMPED	CREDIT 20% Sales Cere	67007 77184 —	5000
Acot. No			V/3, 80% Sales	77184	20000
w.o. &	-7653	OCT 19	Opening/ Closing Buriel	77181 — 100	20 00
BALANCE DI	UE -	THE STREET	SAA	77182	33700
			Hendling Fee Recording & Misc. Fees	77185 — 100 77183 —	35 00
Pre-Need Lot		111	Pre-Need Trust	63033 9022 —	19
Pre-need Trust	□ Cash □ Check □	Madre 11	Sales Tax	60101 78390 —	13/10
AC 212 (Rev. 1)	0-87)	ISSUED BY	CTOTAL PAID	*	600 17

_	011	0	1
\$ 2	04.	0	1

San Diego, California

Sestenber 26	19	88

30 days after date for value re	eceived, the undersigned	maker promises to pay to Mt. Hope	
Cemetery or Sap Diego, City Tree	surer, or order at 3751	Market Street, San Diego, Ca 9210	2
11-36-88	on the unpaid principal	at the rate of 12 percent per annu	um,

payable on demand.

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 off limitations. A married person who signs this note agrees that recourse may be had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

NAME Ethell Pollard	SIGNATURE Ethel L. Pollard
ADDRESS 5564 San Onofe Lee	
CALIF. DRIVERS LIC. # J322 936	

MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7653

NAME OF DECEDEN	MARTEL LAMAR VEAL	Benjari - Mar	SEX MALE	JULY 20. 19	DATE OF DEATH
AN DIEGO		SAN DIEGO	OR STATE IF NOT IN CALIFORNIAL	ANNIE A. CI	OF SPOUSE OR OTHER INFORMANT
ANDERSON-	RAGSDALE MORTUARY SAI	FEDERAL BLVD.	1329		LLA ST APT. 17 CALIF. 92105
STATE OF THE STATE	TYPE OF PER	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES OF	F DISPOSITION	
BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENTI	BURIAL UNCLUDES		NO REINTERMENT OF CREMATED DES INURINMENTI
-	A AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, CREA			OF CREMATED REMAINS AND HER THAN IN A CEMETERY
☐ 3 CREMATION CEMETERY	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT, CREATING THAN IN A CI	MATION, AND DISPOSITION	FOR COR	NONER'S USE ONLY
TERMENT	NAME AND ADDRESS OF CEMETERY V	3751 MARKET STRE	ET		SAN DIEGO
CREMATION	NA 48	el askut	LEVEU A	SIGNATURE OF PERSO	IN IN CHARGE OF CREMATORY
OR OSTITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	LINE OF OTHER DESCRIPTION S	Center of gr	MACE AND COUNTY O	F DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	CEIVING REMAINS	ALLES TO		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named deco and I hereby acknowledge that to this permit gives no right of unres	edent under provisions of the espass and nuisance laws ap	Health and Safety Gode, - ply and understand that	BATE SIGNED	CANT
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED.	DE NOSS THE	SEP 2 7 1988		CONTRACT SSUING PERMIT
CERTUFICATION OF PERSON IN CHARGE OF DISPOSITION	DET STOCKHOLOMAGE ON	19/88 SIGNATED	OYEW LELL		NSE NUMBER OF CREMATED REMAINS POSER, IF APPLICABLE
If DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	0		

OPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

### INTERMENT ORDER

MT. HO	PE CEMETERY	
()   INTERM	ENT ORDER	
Querelyws chy6	San Diego	
() 10 Men Just	9-	26-88
Ma The	Date	X6 0 0
· · · · · · · · · · · · · · · · · · ·		
You are hereby authorized and instructed, subj	ect to your rules and regulations, to	11.11-
		25//
Vault/Liner	neral, date, time	
Church, Chapel, Graveside		Mortuary,
All Funeral cars must arrive before 3:30 p.m. o	f regular work day or an extra char	ge will be applied
and billed to undersigned. War time veteran _		
Lot 9/ Grave 6 Row	2	11
Lot / Grave Row	Section Division/t	Hock //
Grave space & Care Fund		250,d
Additional spaces and care fund		
Opening/Closing & Setup		7344 F/83
		100 (1)
Burial Container		111 1
Handling Fees		195.00
Flower vases - Marker setting fee		
Recording and filing fee		25.00
Sales taxes		6.30
	Total Due	856.50
Paid re	ceipt number <u>36731</u>	856.50
	Balance of	-
0	Datalica C	
I hereby certify I am the		named decedent
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 a	and lagree to hold Mt. Hope Cemete	tify and represent ery harmless from
	Peter Schmi	at .
I hereby authorize the interment in lot I hold under deed.	Signature O 2 C C	1 1
	Address 8 S/9 Senta	Arminte
Signature of recorded holder of dead	Salitornia	9212G
	5867276	
	Talaphona	
	Invoice #	No. of Lot
Work Order # E 7654		
Work Order # L 1009	Acct. #	

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

### MOUNT HOPE CEMETERY 264-3151

	1 0010	Date:	7 06 1900
From: 1000 Johnes	Address: 8317 M	the a	Mesta
earlest bundl	ed left - Sex 54	V/00 _ DO	Hars (\$ 856.50)
In Payment of	entil late	west -	n
- Heldenar	Walnut		
Lot 5 9/ Grave	6 Rows	ection 2	Division //
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20's Sales Care	67007
Acct. No.	DIEG STREET	80% Sales of Lots	77184 200 00
W.O. E- 1654	CITY AUDITOR	Opening/ Closing Burial	77181 100
BALANCE DUE	SEP 2.9 1988	Containers	77162
	SET 23 1500	Recording &	77185 100 77183
Pre-Need Lot At Need On Acct		Pre-Need Trust	9022 606 50
Pre-need Trust Cash Check C	July 191	The second second	60101 78390
AC-212 (Rev. 10-87)	ISSUED BY THE TOTAL TOTAL	TOTAL PAID	1 800 00

## MT. K PE CEMETERY INTERMENT ORDER

City of San Diego

Date 9-26-8

of 1697/100 4 100	when No	100
n a Full	neral, date, time	
Church, Chapel, Graveside		Mortuary
All Funeral cars must arrive before 3:30 p.m. o	of regular work day or an ex	tra charge will be applied
nd billed to undersigned. War time veteran		
ot 108 Grave Row	Section Di	vision/Block //
		000
Grave space & Care Fund		250-00
Additional spaces and care fund		
Opening/Closing & Setup		
Jurial Container		
landling Fees		
lower vases - Marker setting fee		
Recording and filling fee //		
Sales taxes \$10		`
2(0) 4	Total Due	15011
2300		
Paid re	ceipt number	
		alance due
	В	alance due
hereby certify I am the	of th	e above named deceden
and this is your authority to make disposition of that I have the right to make this authorization.	of the of	e above named deceder
and this is your authority to make disposition of that I have the right to make this authorization.	of the of	e above named deceder
and this is your authority to make disposition on that I have the right to make this authorization any liability on account of said authorization a	of the of	e above named deceder
and this is your authority to make disposition of hat I have the right to make this authorization any liability on account of said authorization a hereby authorize the interment in lot I	of the of	e above named deceder
and this is your authority to make disposition of hat I have the right to make this authorization any liability on account of said authorization a hereby authorize the interment in lot I hold under deed.	of the of the office of the of	e above named deceder
and this is your authority to make disposition of hat I have the right to make this authorization any liability on account of said authorization a hereby authorize the interment in lot I hold under deed.	of the of the office of the of	e above named deceder ed. I certify and represer Cemetery harmless fron
and this is your authority to make disposition of hat I have the right to make this authorization any liability on account of said authorization a hereby authorize the interment in lot I hold under deed.	of the of remains as above indicated and lagree to hold Mt. Hope and interment.  Signature  Address State	e above named deceder ed. I certify and represer Cemetery harmless from
and this is your authority to make disposition of hat I have the right to make this authorization any liability on account of said authorization a hereby authorize the interment in lot I hold under deed.	of the of the office of the of	e above named deceder ed. I certify and represer Cemetery harmless from
and this is your authority to make disposition of hat I have the right to make this authorization any liability on account of said authorization a hereby authorize the interment in lot I hold under deed.	of the of the original	e above named deceder ed. I certify and represer Cemetery harmless from
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 hereby authorize the interment in lot I hold under deed.  Signature of recorded halder of deed	of the of remains as above indicated and lagree to hold Mt. Hope and interment.  Signature  Address State	e above named deceden

#### OFFICIAL RECEIPT



WHITE TO CUSTOMER CEMETERY

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36768

PINKAUDITOR	264-3151		
no Poster	· 17 /	Date: - ////	10-5 1906
From the Caller	Address	Dollars	\$ 50,00
In Payment of	upen 1-5, l	Hat do	
161 108 Grave_		ection 2	Division // Block
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE AUDITOR	CREDIT 67007 20% Sales Care 77184 80% Sales 100	50 005
Acct. No.		of Lots 77184 Opening/ 100	00 00
wo. E-1655	OCT 7 1988	Closing 77181 Buriel 100 Containers 77182	
BALANCE DUE		Handling Fee 77185 Recording & 100 Misc Fees 77183	
Pre-Need Lot At Need On Acct	///	Pre-Need 63033 Trust 9022	
Pre-need Trust Cash Check	A South of the sa	Sules Tax 60101 78390	10 00
400000000000000000000000000000000000000	ISSUED BY	TOTAL PAID \$	50 000

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

			/ Date:	11	, 19.	00
From: Janes falls	Address	2021/20	brea 1	Une	man to	1
- John Mushin	10/	(0)	0	ollars (\$	100-0	0)
,in Payment of	upono	6-/	Clear	100	0-1	
J.ot Grave	7	Row	_ Section	2	Division //	
Invoice No.	NOT VALID FOR PURPOS "PAID" IN THIS SPACE	SE STATED UNLESS STAM		57007 77154 —		
Acct. No.			80% Sales of Lots Opening/	77184 — 100	19PCA	20
w.o. 6- /655			Closing Burial Containers	77181 — 100 77182 —	May	Such
BALANCE DUE	100000		Handling Fee Recording & Misc. Fees	100 77186 — 100 77183 —	- 10	1988
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐	13 1		Pre-Need Trust Sales Tex	63033 9022 — 80101		-
AC-212 (Nov. 10-87)	ISSUED BY	dex War	TOTAL PAID	78390 —	100	30



WHITE .... TO CUSTOMER

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

PINK AUDITOR	264-3151		11	55 0
From romes & Rowers	Postadies 5527 An	Date:	unti	10 H
Bu fundled	10/100-		offars (\$ _	100:00,
In Payment of Ca	rugon 16-211 U	reada	27	
Lot 108 Grave	7 Rows	ection	2	Division //
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	CREDIT 20% Sales Care 30% Sales of Lote of Lote Opening/Closing Burtal Containers Handling Fee Recording & Misc Fees Bre-Need Trust Sales Tax	77184 — 100 77184 — 100 77184 — 100 77185 — 100 77182 — 100 77182 — 100 77183 — 100 7718 — 100 771	50 00 50 00 City Auditor
AC-212 (New 10-ar) 4623	ISSUED BY MACH ACC	TOTAL PAID	78390	100 00

DO NOT ACCOUN	MAIL ENTIR T No. 3- 3 & Ro	E BOOK 7655 Wena I	Cauter Brita	OUPON redit La	24
	Month an	d Day D	n Indian	ed Below	
DEC JAN	FEB MAR	AFR MAY	Distriction of the last		OCT NOV
			3 7	10	1 6
Amount due due date abo	when paid on ve	er billare,	<b>)</b>	20.00	Po
Amount dus	il pald more the m above	an 10 da	yu > s	1.00	100
NAME ADDRESS CITY OF	Jems 1527 Wreed	Sau Sau	STATE C	rgarill Zip o	a 10

Send or bring one coupon with DO NOT MAIL ENTIRE		COUPON	23
ACCOUNT No.		Credit	Lot
James & Soun 5527 Santa : San Diego, (	ca 92214	Street Street	1
	YAM RYA RAN	JUN JUL AUG	SEP OCT
Amount due when paid on, o due date above.	pe before.	\$ 10.0	00
Amount due if paid more that after due date above.	ne 15 days	\$ 1.0	10
NAME LINE ADDRESS 507- CITY DEC	Amenia Agenta Figure Deuty STAT V) If this is	Muszare Muszare Caradress	to 41

DO	NOT	MAIL	ENTIR	Vith ea RE BOO -765	)K	iltenc	2 10	OUP		2 lot	2
5	527	58	mta	Wen No Ca	E BA	rit	a 2		39	£ **	
		Mon	th ar	d Da	P Du	e in	dicat	ed B	elow		
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mout fter d	nt due lue dat	if paid te abo	more ti	nan_1	O_da	<b>y</b> 5	s	1	.00		-
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ADD	RESS	_		_		-					
CITY						STAT			ZIE	2	

Solid or bring one causan with each remittance COUPON 31
DO NOT MAIL ENTIRE BOOK
ACCOUNT No. 3-7655 Credit Lot
James & Rowana Paster
San Diego, Ca 92114
Month and Day Due Indicated Below
SEP OCT NOV DEC JAN FEB MAR APR MAY JUN JUL AUG
Amount due when gaid on, or before due date above.
Amount due if paid more than 19 days \$ 1000 gifter due dark above.
NAME James Jastes
ADDRESS
CITY STATE ZIP
☐ check ( / ) If this is new address

DO NOT	MAIL E	NTIRE	B00	Ж	ittance				2	
ACCOUN	No.	200	760	5		CZ	pai	F	30	
5527 San	Sa Dib	Ronta nta	No.	a P rga	ast rit 211	a S	tre	et		
	Mont				e In	dicab	od B	alow		
AUG SEIF	qcr	NOV	DEC	IAN	FEB	MAR	APR	MAY 10	JUN	Inr
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ADDRESS	/_		_				_	_		_
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	T No.			0	red	ic	Lot	
	piego,		2114			-		0.70
Daywood Daywood		nd Day D	-	_	Street, or other Designation of the last o	Distance of the last	MAY	TOTAL DE
JUL AUG	SEP OCT	NOV FOEC	JAN	FEB	MAR	APR LC	MAY	Wh.
Amount due due date abo		in or before.		> 5	1	0.0	0	
Amount due da	it paid more to above.	than 10 d	ays	> 5		1.0	0	-
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NAME	Jane	es /	down	e	2			
ADDRESS								
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			upon w ENTIR			ttance	CC	UP	ON	1	8
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BUN	JUL.	AUG	SEP	OCT	NOV	DEG	MN	FEB	MAR	APR	MAY
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		n				0	2				
NAM		Va	EUI.	AT	nough	M	40			-	-
ADD	1	1	g ru	~_	15	AP L	1				
CITY	-		-		1	STAT	ne:		ZIF	,	
- City			check	11	) if t	erita a line de la		v ado	dress		-

bend or bring time coupon with each remittance COUPON 17
ACCOUNT No. 2-7655 Credit Lot
James & Housea Paster
5527 Santa Margarita Strepts San Diego, Ca 92114
Month and Day Due Indicated Below
MAY JUN JUL AUG SEP OCT NOV DES JAH FEB MAR APR
Amount due when paid on, or before due date above \$ 120.00
Amount due if paid more than 10 days s 1.00
NAME James Paster
CITY STATE ZIP
☐ check ( / ) if this is new address

Sand or DO		MAIL I				ITAmes	CO	UP	ON	1	6
ACC	OUNT	No.	I-	765	5		Cx	ed1	tl	30	
3	527	Sa Die	nta	No	rga	ric	a S	tre	et		
APR	****			d Da				-		The state of the s	TOTAL T
next :	DUAT	JUN	JUL.	AUG	SEP	ocr	NOV	DEC	10	LEB	MAR
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Amour after d	nt due lue da	if paid i	more ti	nan_1	O_da	ys ]	> 5	1	.00		100
	_						\$	_	_	-	_
NAM	E	ay	ny	A	nouth	locem 2	tes s			-	
CITY	7	0	17	-9	<del>e</del> a	STAT		lis	ZIF	92	931
		11	nec	KIV	1 11 1	nis is	nev	ado	ITBSS	6	

Send or bring one coupon with each remittance COUPON DO NOT MAIL ENTIRE BOOK ACCOUNT No. E-7655 Credit Lot es & Soumme Paster 3527 Santa Margarita Street San Diego, Ca Month and Day Due Indicated Below MAR APR MAY JUN JUL AUG SEP OCT NOV DEC JAN Amount due when paid on, or before, due date above Amount due if paid more than 10 days. after due date above s 100,00

NAME Sque states

ADDRESS 55 27 Starte Threatly ff

CITY STATE ZIPG 114

Check (/) If this is new address

DO NOT A ACCOUNT James 5527 San	MAIL E	Ro Ro Ro Ro	B00 765 wan Ma	K S n P rgs	aut rit 211	er a S	edi	e L	1 ot	4
FEB MAR					AUG			NOV	DEC	JAN
					-			10		
Amount que due date above	when p	aid on	or bef	ore.		> s	10	.00		-
Amount due i	f paid n n abov	nore th	an 1	O_da	yn )	5	1	.00	-	
						5		4	-	
NAME			An	naunt l	Receive	nd S		1		-
ADDRESS					10		Sec.	-	X	-
CITY			-	-	STAT		-	ZIF		
	LIG	heck	(V	l if t	his is	nev	v ado	iress		

DO ACI	NOT 1	MAIL S	EO.	765 Man Man Ga	K S S S	inte	1 61	rec	ing.	1	3
JAN	TEB	MAR	- Brenneson	MAY	ALC: UNKNOWN	100000000000000000000000000000000000000	AUG	The state of the s	0CT	and Property	DEC
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ACCOUNT No. =-7655

Credit Lot

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Month and Day Due Indicated Below    NOV DEC   JAN   FEB   MAR   APR   MAY   JUN   JUL   AUG   SEP   OCT     Amount due when paid on or before due date above   \$ 10.00     Amount due if paid more than 10 days   \$ 1.00     Amount Received   \$     NAME   ADDRESS	ACCOUNT No.	E-7655		credi	it /Lat/
Month and Day Due Indicated Below    Nov   Dec   Jan   FEB   Mar   APR   MAY   JUN   JUL   AUG   SEP   OCT     Amount due when paid on or before due date above   \$ 10.00     Amount due if paid more than 10 days   \$ 1.00     S			miler		
Month and Day Due Indicated Below    NOV DEC   JAN   FEB   MAR   APR   MAY   JUN   JUL   AUG   SEP   OCT     Amount due when paid on or before due date above   \$ 10.00     Amount due if paid more than 10 days   \$ 1.00     S			2112	FOR	5
Amount due when paid on or before due date above \$ 10.00  Amount due if paid more than 10 days \$ 1.00  \$ Amount Received \$ NAME  ADDRESS	- Company of the Comp	The state of the same of the same of	ue Indica	ted Bel	ow
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Send or bring one coupon with each remittance COUPON
DO NOT MAIL ENTIRE BOOK

ACCOUNT No. E-7655

Credit Lot

James & Rovens Paster 5527 Santa Margarita Street San Diego, Ca 92114

	_	mon	en an	id ni	y Dt	ie in	olcar	ea B	elow	-	
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5 DO NOT MAIL ENTIRE BOOK	3
ACCOUNT No. E-7655 Credit Lot	
James & Rowman Paster 5527 Santa Margarita Street San Diego, Ca 92114	
Month and Day Due Indicated Below	-
MAY JUN JUL AUG SEP OCT NOV DEG JAN SES MAJL A	R:
Amount due when paid on or before by \$ 10.00	
Amount due if paid more than 10 days s 1.00 after due date above.	
\$ 1	-
NAME James PASTERS ADDRESS 5522 - SANTA MARKARITA-S	<b>一</b> ナ
CITY SP STATE ZIP 92	(14

NAME JAMES PASTER

ADDRESS 5 5 27 - SANTA MARIARITA S

CITY SD STATE 4 ZIP 9 24 14

ACCOUNT No. E-7655

Credit Lot

James & Rowman Paster 5527 Santa Margarita Street San Diego, Ca' 92114

Month and Day Due Indicated Below MAR APR MAY JUST BUG SEP OCT MON DEC JAM FEB 10

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

Amount due if paid more than 10 days after due date above.

NAME AMES PASTER ADDRESS 5527-SANTA-MARGARITA S

STATE (2)

/) if this is new address

### Send or bring one coupon with each remittance COUPON DO NOT MAIL ENTIRE BOOK

ACCOUNT No. E-7655

Credit Lot

James & Rowena Paster 5527 Santa Margarita Street San Diego, Ca 92114

		1/4/5	Mon	th-an	d Da	y Du	ie Inc	licat	ed Below		
	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT NOA	DEC	JAN
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319	CONTRACT OF	- COLUMN	Albur .	The same	1000		-	_	-	_	_

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

\$ 10.00

Amount due if paid more than 10, days after due date above.

\$ 1.00

s 11.00

NAME JAMES PASTER

ADDRESS 5527-SANTA MARKARITA ST

CITY SD STATE 4 219 92119

With this is new address

Send or bring one coupon with each remittance COUPON DO NOT MAIL ENTIRE BOOK

ACCOUNT No. E-7655

Credit Lot

James & Rowena Paster 5527 Santa Margarita Street San Diego, Ca 92114

Month and Day Due Indicated Below FEB MAR APR MAY JUN JUL LAUG SEP OCT NOV DEC 10

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

10.00

Amount due if paid more than 10 days after due date above.

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NAME JAMES A MARGARITA S

check ( / ) if this is new address

NAME	Pas	ter, James and Rowena		ACCT. NO.	E-7655
ADDRES	ss 55	27 Santa Margarita Street, San Diego, Ca 92114RAT	ING	LIMIT	
DATE	E	ITEMS	DESIT V	CREDIT	BALANCE
9-26	88	Lot 108, Grave 7, Section 2, Division 11	250 00		
K	88	Oxugen 1-5, Regeist 36768		5000	20000
11-7	88	Cupora 6-15, fecospt 36932		10000	10000
11-28	20	Jugar 16 - 24, Leavest 5'1001		10000	100
					111
-					111
AIGNER FO	ORM NO.	Paster, James and Rowena 108 - 7 - 2 -	11		PRINTED IN USA

#### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 9/27/88

in a Fun		
Vault/Liner	eral, date, time	
Church, Chapel, Graveside		_ Mortuary
All Funeral cars must arrive before 3:30 p.m. o	regular work day or an extra charge wil	Il be applied
and billed to undersigned. War time veteran _	-	
87 10	3	12
Lot 8'/ Grave /O Row	Section Division/Block	1-
Grave space & Care Fund		A TOL
Additional spaces and care fund		
Opening/Closing & Setup	2	20-C
Burial Container		25.02
Handling Fees		70-d
Flower vases - Marker setting fee		
Recording and filing fee		35.00
Sales taxes		11.31
50105 10000	Total Due	11.31
market and the second	eipt number 36936 7	11.37
Paid rec	<	6
0 . 4	Balance due	
I hereby certify I am the Sister	of the above nam	ed deceden
and this is your authority to make disposition o that I have the right to make this authorization a	f remains as above indicated. I certify an	nd represen
any liability on account of said authorization ar	nd interment.	1
	Ing h morr	w
heraby authorize the interment in lot I	Signature	
hereby authorize the interment in lot I hold under deed,	76626	
hold under deed.	San Dies Calib 9	2/04
hold under deed.	San Diego Calif 9	2/0 4 zipcos
hold under deed.	Address San Diego Calif 9.  San Diego Calif 9.  San Jacob 2592  Talaphona	2/0 4 zwcoo
	283-2592	J/0 4 zidcod

#### OFFICIAL RECEIPT



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY 264-3151

From Mouse Mouse	- nuureos	2552	E Hue	7-d	In fee	19.
In Payment of	Menced	Trust	1/40 8	_ Dollars (\$	ic M-	do
Lot Grave	10	Row	Section	3	Division Block	2
Acct. No.	PAID IN THIS SPAC	POSESTATED UNLESS SE.	20% Sales		Circa .	
w.o E - 1656	LO LO POSTORIO	SEP 29 1988	Opening/ Glosing	100 77181 — 100		
BALANCE DUE		OEF 23 1000	Handling I Recording Misc. Feet	Tee 77185 —		77
Pre-Need Lot ☐ At Need ☐ On Acct Pre-need Trust ☐ Cash ☐ Check		Lilea	Pre-Need Trust Sales Tax	63033 9022 60101 76390	7//	21
AC-212 (Rev. 10-87)	ISSUED BY	Difference of	TOTAL PAIL		711	21

## MT. HOPE CEMETERY INTERMENT ORDER

	5 3008	
Date_	12/00	

Λ	AT. HOPE CEMETERY ERMENT ORDER
Brengedt	City of San Diego Date 5-27-88
	d, subject to your rules and regulations, to inter the remains
ina	Funeral, date, time
Church, Chapel, Graveside	
Annual Control of the	p.m. of regular work day or an extra charge will be applied
and billed to undersigned. War time vet	eran
Lot M Grave 9 Row	Section 3 Division/Block/2
Grave space & Care Fund	
The second of the second secon	
A STATE OF THE PARTY OF THE PAR	320.00
	100,00
	745-0
	35.4
The second supplies the second supplies to th	6.50
	Total Due
	Balance due
I hereby certify I am the and this is your authority to make disport 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.	Elma mc Casbey
Signature of recorded holder of deed	Address Diogs Calif-92/ Spin 93-2592 Zoco
E morm	Invoice #
Work Order # E 7657	Acct. #

#### OFFICIAL RECEIPT



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

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151 Date: Address Payment of Division Grave. Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 Invoice No. PAID' IN THIS SPACE 20% Sams Care 77184 CITY AUBITOR 80% Sales 100 of Lots 77184 Acct. No. Opening/ 100 77181 100 Buriol Containers **BALANCE DUE** 100 Handling Fee 77185 Recording & 100 Misc Fees 77183 Pre-Need Lot At Need On Acct Pre-Need 63033 Trust 9022 ☐ Check Pre-need Trust E Cash Sales Tax 60101 TOTAL PAID AC-212 (Rev. 10-87)

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 9-27-88

You are hereby authorized and instructe	ed, subject to your rules and regulations, t	o inter the remains
of Marcy	Maeles	- /
ina Bell Lines	Funeral, date, time	9/29/2:30
Church, Chapel, Graveside	we kasphal	Mortuary.
All Funeral cars must arrive before 3:30	p.m. of regular work day or an extra cha	irge will be applied
and billed to undersigned. War time ver	teran	
106 11	2	11
Lot Grave Row .	Section Division.	/Block //
Grave space & Care Fund	***************************************	25000
Additional spaces and care fund		320.00
		180
		145.00
Handling Fees		
Flower vases - Marker setting fee		
Recording and filing fee		3:00
Sales taxes		107
	Total Due	856.50
	Paid receipt number 36738	856.50
	Balance	due O
6.	1	
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 authorize	sition of remains as above indicated. I co ization and I agree to hold Mt. Hope Ceme	ve named decedent ertify and represent stery harmless from
I hereby authorize the interment in lot	celyley upher	>
hold under deed.	730 Dima	Texo St.
Signature of recorded holder of deed	Jan Diego	CA 92114
	State 464-5186	Ziń Code
	Telephone	
	Security #	
Wat Carter E 7658	Invoice #	
Work Order # 1000	Acct. #	

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-7658

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN		DE DENCH HAN-MAKE IN	SD		DATE OF BIRTH		DATE OF DEA	TH	
NAME OF DESCRIPT	NANCY NAILES			Female	July 7.	1888	Sept.	SEL	1988
PLACE OF DEATH—CITY OR TOWN PLACE OF DEATH—COUNTY FOR STATE #		OR STATE IF	TATE IF NOT IN CALIFORNIAI NAME AN		ME AND ADDRESS OF SPOUSE OR OTHER INFORMANT			THAME	
NAME AND ADDRES	gsdale Mort.:5050 Fed	eral Blvd.	F 132	DECRISE NOMITER	930 Dimar San Diego			R	
*.		AIT, CHECK ONLY ONE O	F THE FOLLO	WING TYPES OF	DISPOSITION				
BURIAL ON	CLUDES ENTOMBMENT)	5 DISINTERMENT AN ENTOMBMENT)	D BURIAL (INC	LUDES	B DISINTERME REMAINS IN			CREMA	TED
And the state of t	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CH		D BURIAL	9 DISINTERME DISPOSITION		MATED REMAIN		
3 CREMATION CEMETERY 4 SCIENTIFIC		7 DISINTERMENT, OF OTHER THAN IN A		SCHOOL STATE OF THE PARTY OF TH	FOR (	Name and Address of the Owner, where	R'S USE ON	LY	
INTERMENT	NAME AND ADDRESS OF CEMETERY W		- Strainstance	The state of the s	9	COUN	an Diego		
CREMATION	NAME AND ADDRESS OF CHEMATORY W	HERE REMAINS ARE TO BE CR	EMATED DA	TE CREMATED	SIGNATURE OF P	ERSON IN C	HARGE OF CRE	MATOR	Y
OR ORSPOSITION OF HER A CEMETERY MATERIAL REMAINS	N/A Bellin		SUFFICIENT T	O IDENTIFY FINAL	PLACE AND COUN	ty OF DISP	OSITION		
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	S IT'S			-43			HIM
ACKNOWLEDGMENT OF	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tre	dent under provisions of the	he Health an	d Safety Code,	SIGNATURE OF A	PPLICANT	53.		
APPLICANT	this permit gives no right of unrest	ricted access to property n	ot owned by	me.				-	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	SE AND IS THE	SEP	29 1988	Signature of the	& Can	vas M.B	5m	m
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I GERTIFY THAT THE SPECIFIED DISPOSITION WAS MADE ON	SIGNATU	RE OF PERSON	N IN CHARGE OF D	ISPOSITION		UMBER OF CREE	MATED	REMAINS
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	San Diego C	County Dept. of	Health	P. O. Box San Diego	Company of the Compan	8-5222	a les		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OH THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

#### OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

Nº 36738

## MOUNT HOPE CEMETERY

264-3151

Payment of	Address 930 Uni		ollars (\$	1800, 1800, new #
ot 79.6 Grave	THE RESIDENCE OF THE PARTY OF T	Section	2	Division // Block //
occt. No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID IN THIS SPACE.  CITY AUDITOR	20% Sales Care 80% Sales of Lots Opening/ Closing	67007 77184 — 100 77184 — 100 77181 —	390 00
ALANCE DUE	SEP 29 1988	Bunar Containers Handling Fee Recording &	100 77182 — 100 77185 —	145 00
re-Need Lot    At Need    On Acct    Ore-need Trust    Cash    Check     Cash	Issues & Andrea Was	Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	77183 — 63033 9022 — 60101 78390 —	85 00 6 50 856 30

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 9-27-88

na Bell Liner Fun	neral, date, time Wed 9/29 by2
Vault/Liner vg	rece: Step Alse, Mortuary
All Funeral cars must arrive before 3:30 p.m. o	of regular work day or an extra charge will be applied
nd billed to undersigned. War time veteran _	wither
ot 3788 Grave Row	Section Division/Block /
ot 2700 Grave	>/ C
Grave space & Care Fund	6/
additional spaces and care fund	200
pening/Closing & Setup	320,00
Burial Container	100-00
landling Fees	145.00
lower vases - Marker setting fee	3507
ecording and filing fee	25.00
ales taxes	10/50
an Geo.	Total Due
20 Paid rec	ceipt number
) No.	Balance due
hereby certify I am the	of the above named deceden
hat I have the right to make this authorization a	of remains as above indicated. I certify and represent and I agree to hold Mt. Hope Cemetery harmless from
my liability on account of said authorization a	nd interment.
hereby authorize the interment in lot I	Signature 15
old under deed.	510mayura 852, 60 TH ST
ignature of recorded holder of deed	Carry grus
	Telephone
	07-02
E mero	Invoice # 0 13 205
Vork Order # <b>E</b> 7659	Acct. # 02 1964

1	W.O. #_	- 19		-
// - //	1		A Training	

\$ 606.50

San Diego, California

payable on demand.

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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

ADDRESS 4852 60th St. San Digo Ca. 92115

CALIF. DRIVERS LIC. # mo469 384

E-1659

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

PAULI	NE ETHEL HOUSEMAN		Female	05-03-191	5 09-27-1988
PLACE OF DEATH—	tiego	PLACE OF DEATH—COUNTY   San 1	THE RESERVE THE PROPERTY WAS	Michael Ho	SS OF SPOUSE OR OTHER INFORMANT DISEMBN (Son)
NAME AND ADDRE	SS OF FLINERAL DIRECTOR ION FERSON CHULA VISTA MORTULARY	Broadway ula Vista, CA	F-964	4852 60th San Diego,	COMPANY DESIGNATION OF THE PROPERTY OF THE PRO
7	TYPE OF PERM	IT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION	
BUHIAL (IN	ICLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENTI	BURIAL IINCLUDES		T AND REINTERMENT OF CREMATED
2. CREMATIO	N AND BURIAL (INCLUDES INVENMENT)	6 DISINTERMENT, CREM			OF CREMATED REMAINS AND OTHER THAN IN A CEMETERY
3 CREMATIO CEMETERY  4 SCIENTIFIC		7 DISINTERMENT, CREM OTHER THAN IN A CE	MATION, AND DISPOSITION	FOR CO	DRONER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY WI Mt. Hope Cemetery 3	751 Market St.	REMAINS ARE TO BE INTERRE		San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CHEM	NATED DATE CREMATED	SIGNATURE OF PER	SON IN CHARGE OF CREMATORY
BHRIAL AT SEA  OR SITION OTHER IN A CLIMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT ON SHORELI	NE. OF OTHER DESCRIPTION SI	UFFICIENT TO IDENTIFY FINAL	PLACE AND COUNTY	OF DISPOSITION
SCIENTIFIC USE	MAME AND ADDRESS OF PACILITY REPO	VING REMAINS			
ACKNOWLEDGMENT OF APPEICANT	This is to certify that I am the per remains of the above named decea and I hereby acknowledge that tre this permit gives no right of unrestr	lent under provisions of the spass and nuisance laws ap	Health and Safety Code, uply and understand that	SIGNATURE OF APP	EICANT
LOCAL *	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	AND IS THE ALL	SEP 2 8 1988	SIGNATURE OF LOC	AL REGISTRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPESSOR WAS MADE ON	19/58 GIGNATURE	OF PERSON IN CYPROF OF	DISPOSITION LI	ICENSE NUMBER OF CREMATED REMAINS ISPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF		3		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains Funeral, date, timeo Church, Chapel, Graveside 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. War time veteran Section Division/Bleek 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 **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. ature of recorded helder of dead Zip Code Invoice # 7660

Acct. #

Work Order #

PY-503 (NEV. 9-85)

E-7660

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN			SEX	DATE OF BIRTH	DATE OF DEATH
ANITA MAR	IE WHITE		Female	Dec. 15,1924	Sept. 23, 1988
San Diego	SECOND STATE OF STATE	San Diego	OR STATE IF NOT IN CALIFORNIA.	Mayme Cotne	
Conrad Le 7387 B	mon Grove Mortuary roadway-Lemon Grov	TING AS SUCHI Pe, CA 92045	F 941	41711 36th San Diego,	Street CA 92104
N. A.	TYPE OF PERA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION	
1 BURIAN UN	ICLUDES ENTOMBMENTI	5. DISINTERMENT AND ENTOMBMENT)	BURIAL INCLUDES	B. DISINTERMENT AND REMAINS (INCLUDES	REINTERMENT OF CREMATED INURNMENT)
☐ 2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	B. DISINTERMENT, CREMINGLUDES INURNMENT			REMATED REMAINS AND THAN IN A CEMETERY
CEMETERY	N AND DISPOSITION OTHER THAN IN A	7. DISINTERMENT, CREM	MATION AND DISPOSITION	FOR CORON	ER'S USE ONLY
4 SCIENTIFIC	USE	LITHER THAN IN A C	EMETERY	D to disposition PENDIN	IG —
INTERMENT	NAME AND ADDRESS OF CEMETERY W	31 / 15 1 18 19 20 16	et Street California		an Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CREM		SIGNATURE OF PERSON IN	CHARGE OF CREMATORY
DURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY MATED REMAINS	N/A LOS Skin &	Plate - Woo	Cubb Final	PLACE AND COUNTY OF DI	SPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING HEMAINS	91		
ACKNOWLEDGMENT OF	This is to certify that I am the per remains of the above named dece	dent under provisions of the	Health and Safety Code,	SIGNATURE OF APPLICANT	
APPLICANT!	and I hereby acknowledge that tre this permit gives no right of unrest			DATE SIGNED	
LOCAL REGISTRAR •	THE PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COS AUTHORITY FOR THE DISPOSITION SPECIFIED IS	HADORINE SA PO	3 EP 2 8 1988	Denall & Co	SETHAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPUSITION	DEPOSITION WAS MADE ON 9	SIGNATURE SIGNATURE	OS CUSTOS OF		NUMBER OF CREMATED REMAINS H IF APPLICABLE
If DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	NOICATE ADDRÉSS OF REGISTRARIOF	COUNTY OF DEATH	O		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN RUMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

NE 36743

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

<b>【圣经》之</b> 》	264-3151	9. 1	79	TH
From Mayne Cotie	U_ Address 4/14/1/2	Date:	lat y	1
In Payment of Stu	ta M. White	Dollars (	774.7	5,
Ot 1123 Grave	uprade soll	ection	Division /	Cup
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	GREDIT 67007 20% Sales Care 77384 - 80% Sales 100	BIOCK	
Acct. No	CITY AUDITOR	of Lots 77184 - Opening/ 100 Closing 77181 - Burnal 100	230	00
BALANCE DUE	OCT 3 1988	Containing 77182 100 Handling Fee 77185 100 Misc. Fees 77183 77183	725	33
Pre-Need Lot	La Mark	Pre-Neet 63033 Trust 9022 - Sales Ta <sub>2</sub> 60101 78390 -	14	15
AC-212 (Rev 10-87) 12/6	ISSUED BY	TOTAL PAID 1	774	75

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 9/28

of ances Edw	and Kloves
naFu	ineral, date, time
Church, Chapel, Graveside 10 10	ruce: Passale Mortuary.
which was a second and a second	of regular work day or an extra charge will be applied
and billed to undersigned. War time veteran	
70 11	1 15
Lot Grave Row	Section Division/Block
Grave space & Care Fund	55,00
Additional spaces and care fund	` . ()
Opening/Closing & Setup	90,00
Burial Container	00
Handling Fees	10 1 Co
Flower vases - Marker setting fee	2 1/V
Recording and filing fee	V/ /
Sales taxes	
285	Total Due
A glo Paid re	eceipt number
10 51	Balance due
100	
hereby certify I am the	of the above named decedent
hat I have the right to make this authorization any liability on account of said authorization	and lagree to hold Mt. Hope Cemetery harmless from
my masking on account of said additionization	
hereby authorize the interment in lot I hold under deed.	Signature
iola dilate deed.	Address
lignature of recorded holder of deed	State Zip Code
	Telephone
Dud	
1//4000	
( F ===================================	Invoice #

P.A.

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 9/29

of John Farke		05-713	Vere ola
ina Thomas Full	neral, date, time	Ir.m.	rus 1/2
Church, Chapel, Graveside		Mayou	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. War time veteran .			
ma u	Section	1	15
Lot Grave Row	Section	Division/BI	OCK /
Grave space & Care Fund			55.00
Additional spaces and care fund			
Opening/Closing & Setup			90.00
Burial Container			
Handling Fees			
Flower vases - Marker setting fee			
Recording and filing fee			. —
Sales taxes			1/20
29/50	То	tal Due	190 c
Recording and filing fee	ceipt number _		
747		Balance due	
hereby certify I am the and this is your authority to make disposition	of remains as al	of the above n	amed deceden
that I have the right to make this authorization	and lagree to he	old Mt. Hope Cemetery	harmless from
any liability on account of said authorization a	and interment.		
I hereby authorize the interment in lot I			
hold under deed.	Signature		
Signature of seconded holder of deed	Address		
	State		Zip Code
	Telaphone	V.02	Erry I
	100	0750	77
	Invoice N		
Work Order # <b>E</b> 7662			45

E-7662

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN			SEX	DATE OF BIRTH	DATE OF DEATH
NAME OF DECEDER	John Larker		male	July 10,1956	August 15,1988
PLACE OF DEATH-	The state of the s	PLACE OF DEATH—COUNTY IOR	STATE IF NOT IN CALIFORNIA		SPOUSE OR OTHER INFORMANT
San Dieg	0	San Diego		San Diego Co	
A CONTRACT OF THE PARTY OF THE	SS OF FUNERAL DIRECTOR FOR PERSON A	TANAMA CONTROL DE CONT	LIFORNIA LICENSE NUMBER	5555 Overlan	ADVIATION OF THE PARTY.
Mayer Mor	tuary 2859 Adams Ave.	San Diego, CA	1424	San Diego, C	A 92123
	TYPE OF PERA	MIT, CHECK ONLY ONE OF THE	E FOLLOWING TYPES OF	DISPOSITION	
¥:		XX 5 DISINTERMENT AND BU	aver areas report		
LJ 1 BURIAL UN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND BU ENTOMBMENT)	MAL (INCLUDES	REMAINS (INCLUDES	REINTERMENT OF CREMATED INURNMENTI
2 CREMATIO	IN AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMA			REMATED REMAINS AND
D 3 CREMATIO	N AND DISPOSITION OTHER THAN IN A	IINCLUDES INURNMENT	_	DISPOSITION OTHER	THAN IN A CEMETERY
CEMETERY		7. DISINTERMENT, CREMA		FOR CORON	IER'S USE ONLY
A SCIENTIFIC	USE	OTHER THAN IN A CEM	ETERY	10 DISPOSITION PENDIN	NG
	NAME AND ADDRESS OF CEMETERY W	WHERE REMAINS OR CREMATED RE	MAINS ARE TO BE INTERRE	0 500	UNTY
INTERMENT	Mt. Hope Cemetery, 37	51 Market St. San	Diego, CA		San Diego
CREMATION	NAME AND ADDRESS OF THEMATORY W	WHERE REMAINS ARE TO BE CREMAT	ED DATE CREMATED	SIGNATURE OF PERSON II	N CHARGE OF CREMATORY
BURIAL AT SEA OR OSITION OTHER IN A CEMETERY	N/A Bollom	Send of the Confidence Sun	no Que	PLACE AND COUNTY OF DI	SPOSITION
OF CREMATED REMAINS	NAME AND ADDRESS OF FACILITY BE	EIVING REMAIN!			
SCIENTIFIC	N/A	eave"			
	This is to certify that I am the pe	rson having the right to control	the disposition of the	SIGNATURE OF APPLICANT	
ACKNOWLEDGMENT	remains of the above named dece			>	
OF APPLICANT	and I hereby acknowledge that tr this permit gives no right of unrest			DATE SIGNED	
LOCAL BEGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED.	DE AND IS THE	SEP 2 8 1988	SIGNATURE OF DELLE	TRAP ISSUING BERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON 9/10	29/83 SIGNATURE	PERSON IN ENGINEE OF C		NUMBER OF CREMATED REMAINS II, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	NOICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH		231514	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR IT THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

MT HOP	E CEMETERY	
	NT ORDER	
	ADD A THE COMMISSION	1 1
City or	San Diego Date 9/	28/88
	/	
You are hereby authorized and instructed, subject	ct to your rules and regulations	t, to inter the remains
of Comple Add	Fi -2	Om 10,0
Vault/Liner N A A A	eral, date, time Tag -	m. Chapix
Church, Chapel, Graveside	ro. : Magade	Mortuary.
All Funeral cars must arrive before 3:30 p.m. of	regular work day or an extra c	harge will be applied
and billed to undersigned. War time veteran	me.	
Joi 158 Grave 12 Row	Section Division	n/81mt /2
0 0 6	.00.	2.00
Grave space & Care Fund	sever spece	odo-
Additional spaces and care fund	now	
Opening/Closing & Setup		320-
Burial Container	well have	100=
Handling Fees	✓	145-
Flower vases - Marker setting fee		
Recording and filing fee		3500
Sales taxes	************	6.50
a lue o m.	Total Dug	906.50
Bal and 3 Paid rece	eipt number <u>36 74/</u>	856,50
Balduap, W. Paid rece	Balan	se due _50.00
13/	4, 3674	8 50.00
I hereby certify I am the and this is your authority to make disposition of that I have the right to make this authorization are any liability on account of said authorization and the said authorization are said authorization and the said authorization and the said authorization and the said authorization are said authorization are said authorization and the said authorization are said authorization and the said authorization are said authorization and authorization are said authorization and authorization are said authorization are said authorization and authorization are said authorization and authorization are said authorizatio	remains as above indicated. I nd I agree to hold Mt. Hope Cen	ove named decedent certify and represent netery harmless from
I hereby authorize the interment in lot I	Darbara Jean	n Staces
hold under deed.	TSignature POBON 81	5541
Signature of recorded holder of dead	Addings Diecoc	A 92102
	563-946	65 Zip Code
	Telegrane	
	Invoice #	
Work Order # E 7663		
PY-593 (REV. 8-85)		

	U	SE BLACK INK-MAKE	E NO ALTERAT	IONS OR ERASURE	5		
NAME OF DECEDEN			2	SEX	DATE OF BIRTH		DATE OF DEATH
PLACE OF DEATH-		PLACE OF DEATH—COU	JNTY IOR STATE	Female IF NOT IN CALIFORNIAI	Barbara St	tacy-F	September 22, I DUSE OR OTHER INFORMANT Telds-Daughter
NAME AND ADDRE	gsdale Mort San Diego	Tinic & C walking a	O STATE OF THE PARTY OF THE PAR	A LICENSE NUMBER	3223 45th San Diego,		
	TYPE OF PERM	NT, CHECK ONLY ONE	E OF THE FOLI	LOWING TYPES OF	DISPOSITION		
P DURIAL (IN	ICLUDES ENTOMBMENT)	5 DISINTERMENT		NCLUDES	B. DISINTERMEN		NTERMENT OF CREMATED URNMENT)
144	IN AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT INCLUDES INC.	I, CREMATION, A	AND BURIAL			MATED REMAINS AND AN IN A CEMETERY
3 CREMATIC CEMETERY     4 SCIENTIFIC		7 DISINTERMENT OTHER THAN	CREMATION, A	ND DISPOSITION	FOR C		'S USE ONLY
NTERMENT	NAME AND ADDRESS OF CEMETERY WI Mt. Hope Cemetery: 37				0	COUN	San Diego
CHEMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO B	E CREMATED	DATE CREMATED	SIGNATURE OF PE	RSON IN C	HARGE OF CREMATORY
BURKAL AT SEA OR POSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	N/A Metal C	entre Ca	TION OFFICIENT	Sealer Enal	PLACE AND COUNT	Y OF DISPI	OSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	IVING REMAINS			THE PARTY	EN	
ACKNOWLEDGMENT OF SAPPLICANT	This is to certify that I am the per remains of the above named dece- and I hereby acknowledge that tre this permit gives no right of unrestr	dent under provisions of spass and nuisance la	of the Health a	and Safety Code, understand that	SIGNATURE OF APP	PLICANT	
LOCAL BEGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CAUFORINA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFED IN	PROVISIONS AMOUNT O	F FEE PAID	P 2 9 1988	SIGNATURE OF LOC	L. Can	THAR ISSUING BERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	I CERTIFY THAT THE SPECIFIED 9			u The			MBER OF CREMATED REMAINS IF APPLICABLE
IF DISPOSITION IS TO OCCUP IN ANOTHER EQUINTY	San Diego County	ALTO DESCRIPTION OF THE PARTY O		Box 8522			

OPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE EMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

#### OFFICIAL RECEIPT 36741 CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE .... TO CUSTOMER CANARY .... CEMETERY MOUNT HOPE CEMETERY 264-3151 Date: Address: Dollars (\$ Payment of Division Grave Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT 67007 77184 Invoice No. 20% Sales Care 80% Sales of Lots Acct. No. Opening/ CITY AUDITOR Closing 77181 Burnal 100 Containers 77.182 BALANCE DUE Handling Fee Recording & 100 Mind Fron 77183 Pre-Need Lot On Acct Pre-Need 63033 9022 At Need Truss Pre-need Trust D Cash Sales Tax 50101 Check ISSUED BY TOTAL PAID

AC-212 (Rev. 10-87)



WHITE TO CUSTOMER CANARY CEMETERY HINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

#### MOUNT HOPE CEMETERY 264-3151

003560

Nº 36748

		Date:	9-30-	. 19.88
From: Oslores Miller	Address: 5 5 5 5 5	19 St. 3.0	. CA 12	113
Lifty dollars as	rd xx/100	Do	ollars (\$ 50.0	0 1
In Flagment of Land	terment of alme	ie. J. Ci	an	
Lot Grave	12 Row	Section /	Division Block	D
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPAGE	CREDIT 20% Sales Care 80% Sales	67007 77184 100	-
Acct. No	CITY AUDITOR	of Lots Opening/ Cloung Burst Containers	77184 100 77181 100 77182	
BALANCE DUE	ACT 7 1968	Handling Fee Recording & Misc. Fees	77185 100 77183	\$ 50
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	W. J. January	Pre-Need Trust Sales Tax	63033 9022 65101 78390	650
AC-212 (Rev. 10-87)	ISSUED BY	TOTAL PAID	1 30	200

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 9-29-88

ina T.S. Vacelt Fu	ineral/date, time	wed 101	5 100
Vault/Lines / 1 / 1 / 1	101.	- /1/0	Me Mortuary.
Church, Chapel, Graveside		1 - 1 -	
All Funeral cars must arrive before 3:30 p.m.	of regular work da	ay or an extra charge	will be applied
and billed to undersigned. War time veteran	- 1		
Lot SSOGrave Row	Section	Division/Blo	10
U.S. Contraction	- Colon-	Division Sig	
Grave space & Care Fund			-
Additional spaces and care fund	t		M
Opening/Closing & Setup	(T)		20-00
Burial Container	$\sim$		15.00
Handling Fees			20.00
Flower vases - Marker setting file	2		
Recording and filing fee	KX		35.00
Sales taxes	4		11.37
- NY NY	-	al Due	7/1.39
The Car o		al Due	
Paldy	eceipt number		
Will	1	Balance due	
I hereby certify 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	of remains as about and lagree to hol	eve indicated. I certify	and represent
any liability on account of said authorization	and interment.		
I hereby authorize the interment in lot I			
hold under deed.	Signature	HEATT DATE	
Signature of recorded holder of drived	Address		
300000000000000000000000000000000000000	State		Zip Code
	Telephone		
	Invoice #		
- 7CCA			
Work Order # E 7664	Acct. # _		

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 9-29-88

41	She	odone	- KOU	Rev	ell	
	Boll Tis	Q-) E	uneral, date, tim	A)	9/30	1am
	Vault/Line	11	Marso !	Mar	ionant	.0
SILVE CONT.	hapel, Graveside	1	HIME:	Men	1414	. Mortuary
All Funera	al cars must arrive	before 3:30 p.m	of regular work	day or ar	extra charge will	be applied
and billed	to undersigned.	War time veteran				0
180	YX Grove	Row	Section	5	Division Alton	8
	Gravq	- now	Section _	7	_ DIVISION / BIDGE _	
Grave spa	ice & Care Fund					
Additional	spaces and care	fund				
Opening/	Closing & Setup				3	20,00
Burial Cor	ntainer				/	20-00
Handling I	Fees				/9	500
DEED TO	ses - Marker setti					
	and filing fee	A				35.00
Sales taxe	termination of the second					450
Dales rave		*************		otal Due		1650
		74 FA		211	21/5	27 50
				- 150		
		Paid	receipt number			6
		Paid	receipt number		Balance due _	6
l hereby c	ertify I am the		receipt number		SECONDET TO THE	6 deceden
and this is	ertify I am thes syour authority to	Apauxe make disposition	n of remains as	above ind	of the above name	d represen
and this is that I have	your authority to	Apacese make disposition this authorization	n of remains as	above ind	of the above name	d represen
and this is that I have any liabili	s your authority to the right to make ty on account of s	Abouse make disposition this authorization said authorization	n of remains as	above ind	of the above name	d represen
and this is that I have any liabili	s your authority to the right to make ty on account of s outhorize the inter	Abouse make disposition this authorization said authorization	n of remains as	above ind	of the above name	d represen
and this is hat I have any liabili hereby a hold unde	s your authority to the right to make ty on account of s authorize the inter or deed.	Abouse make disposition this authorization said authorization	n of remains as	above ind	of the above name icated. I certify an ope Cemetery har	d represen miess fron
and this is that I have any liabili hereby a hold unde	s your authority to the right to make ty on account of s outhorize the inter	Abouse make disposition this authorization said authorization	n of remains as	above ind	of the above name	d represen miess from
and this is hat I have any liabili hereby a hold unde	s your authority to the right to make ty on account of s authorize the inter or deed.	Abouse make disposition this authorization said authorization	n of remains as on and lagree to a and interment.	above ind	of the above name icated. I certify an ope Cemetery har	d represen miess fron
and this is hat I have any liabili hereby a hold unde	s your authority to the right to make ty on account of s authorize the inter or deed.	Abouse make disposition this authorization said authorization	n of remains as on and lagree to a and interment.	above ind	of the above name icated. I certify an ope Cemetery har	d represen miess fron
and this is that I have any liabili hereby a hold unde	s your authority to the right to make ty on account of s authorize the inter or deed.	Abouse make disposition this authorization said authorization	n of remains as on and lagree to a and interment.	above ind hold Mt. H lim A 481 ZL ax Duga 0-508	of the above name icated. I certify an ope Cemetery har	d represen miess from

USE BLACK INK-MAKE NO ALTERATIONS OF ERASURES

E 7665

NAME OF DECEDEN	IT	- OTHER DESIGNATION OF THE PERSON OF THE PER	SEX	DATE OF BIRTH	DATE OF DEATH	
Theodore	L. Rockwell Sr.	Male		Oct. 14.	1910 Sept. 27, 1989	
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY ION ST	ATE IF NOT IN CALIFORNIA	NAME AND ADD	RESS OF SPOUSE OR OTHER INFORMANT	
San Diego		San Diego		Julia Ro	ockwell - Wife	
	SS OF FUNERAL DIRECTOR ION PERSON AC			2481 Ulr	The state of the s	
Clairemor	nt Mortuary 4266 Mt. A	bernathy Ave. F-	1126	San Dieg	10, CA. 92111	
the state of	TYPE OF PERA	MIT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF	DISPOSITION		
IX 1 BURIAL UN	CLUDES ENTOMBMENTI	5. DISINTERMENT AND BURIA ENTOMBMENT)	L INCLUDES	a disinterm	ENT AND REINTERMENT OF CREMATED INCLUDES (NURNMENT)	
	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTEHMENT CREMATIO	N. AND BURIAL		ENT OF CREMATED REMAINS AND ON OTHER THAN IN A CEMETERY	
CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY     SCIENTIFIC USE		7 DISINTERMENT, CREMATIO OTHER THAN IN A CEMETR		FOR CORONER'S USE ONLY  10. DISPOSITION PENDING		
INTERMENT	Mt. Hope Cemetery W		THE RESERVE OF THE PARTY OF THE	D	San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY W	Flattop - W	DOTE GREMATED	SIGNATURE OF E	PERSON IN CHARGE OF CREMATORY	
BURIAL AT SEA ON DISPOSITION OTHER DIAN IN A CLIMETERY DEMATED REMAINS	N/A BELL A	INE, ON OTHER DESCRIPTION SUFFIC	ENT TO IDENTIFY FINAL	PLACE AND COUR	AY OF DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACRITY RECE	EIVING REMAINS				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece- and I hereby acknowledge that tre this permit gives no right of unrest	dent under provisions of the Heal espass and nuisance laws apply a	th and Safety Code, and understand that	SIGNATURE OF A	PPEIGANT	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH DE THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE	SEP 29 1988		LE COMO MA	
CERTIFICATION OF PERSON WI CHARGE OF DISPOSITION	/00 U-2 0	30/88 SIGNATURE P	Delles	ISPOSITION	LICENSE NUMBER OF CREMATED REMAIN DISPOSER, IF APPLICABLE	
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTMAN OF I	COUNTY OF DEATH				
	Company of the Company of the Company	The second secon	Maria Carlo	All property and the second	TO THE OWNER OF THE PARTY OF TH	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CHEMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 PROPERTY DEPARTMENT

#### MOUNT HOPE CEMETERY 264-3151

Nº 36745

	2191 1/2	Date:	9-0	29 . 19 CC
From: Sept Mendich	Address D Hot		Dollars (\$	606.50
In Payment of	whene Rockers	Co 1	200	MAN
Lot 1806 Grave	Row S	ection	3	Division Block
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CHEDIT 20% Sales Care 80% Sales	67007 77164	
Acct. No. 2 - 1665	CITY AUBITOR	Opening/ Closing Burial Containers	77184 — 100 77181 — 100 77182 —	330 00
BALANCE DUE	OCT 3 1988	Handling Fee Recording & Misc. Fees	77185 — 100 77183 —	195 00
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐	Antes Ches	Pre-Need Trust Sales Tax	63033 9022 — 50101 78390 —	650
AC-212 (Am 10-87) /030	ISSUED BY	TOTAL PAID	-	10000

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

(105-9785)

City of San Diego

Date 9/29/88

	Date //	11/00
You are hereby authorized and instructed suff	ject to your ules and regulations, to	inter the remains
of James Ed	ward Daves	/
in a lener Fu	ineral, date, time Well 10/.	5 12:00
Church, Chapet, Graveside	rucci Ragidale	Mortuary.
All Funeral cars must arrive before 3:30 p.m.		
and billed to undersigned. War time veteran	? Nelwe	Waley
Lot 149 Grave 8 Row	Section Division/E	12
Lot 7 1 Grave Now	Section Division/E	
Grave space & Care Fund	ngle grave	30000
Additional spaces and care fund	none	0
Opening/Closing & Setup	·····	32000
Burial Container	THE TOTAL PROPERTY OF THE PARTY	1000
Handling Fees	AID	14500
Flower vases - Marker setting fee	SEP 1-7-1990	
Recording and filing fee	SEI	35%
Sales taxes	HOPE CEMETERY	6,5
Crolito Clamber	Total Due	406-
may be hard Paid re	eceipt number 37733	-9060
Time of good wil R.A.3	ffee To Balance d	Marie Control of the
Monthantick	thou discourse	1066.50
and this is your authority to make disposition	of remains as above indicated. I cert	named decedent ify and represent
that I have the right to make this authorization any liability on account of said authorization	and lagree to hold Mt. Hope Cemete and interment.	ry harmless from
I hereby authorize the interment in lot I		
hold under deed.	Signature	
Signature of recorded holder of deed	Address	
	State	Zip Code
	Talephone	
	Involve II	
West Outs. # E 7666	Invoice #	-
Work Order # (000	Acct.#	

E-7666

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	T.	100000000000000000000000000000000000000	SEX	DATE OF BIRTH	DATE OF DEATH Found		
	JAMES EDWARD DAVIS		Male	Oct. 25,190			
San Die	ELECTRIC TO THE PARTY OF THE PA	PLACE OF DEATH—COUNTY San Diego	ION STATE IF NOT IN CALIFORNIA	Public Administrators Records			
Anderson-Ragsdale Mort: San Diego, CA			F 1329	San Diego, CA 92123			
	TYPE OF PERA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION			
🗗 1 BURIAL (IN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENT	BURIAL IINCLUDES		AND REINTERMENT OF CREMATED JOES INURNMENTI		
2. CREMATION AND BURIAL IINCEUDES INURINMENT     3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY     4. SCIENTIFIC USE		G DISINTERMENT, CRI			OF CREMATED REMAINS AND THER THAN IN A CEMETERY		
		7 DISINTERMENT, CRI	MATION, AND DISPOSITION CEMETERY	FOR CORONER'S USE ONLY			
INTERIMENT	NAME AND ADDRESS OF CEMETERY W				San Diego		
CREMATION	NAME AND ADDRESS OF CREMATORY W	gere REMAINS ARE TO BE GIL		SIGNATURE OF PERS	ON IN CHARGE OF CREMATORY		
BURIAL AT SEA OR DISPOSITION OTHER DIAM IN A CEMETERY CREMATED REMAINS	ADDRESS, NEAREST PORT ON SHOREL	Heavy 1	SUFFICIENT TO IDENTIFY FINA	PLACE AND COUNTY	OF DISPOSITION		
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	Grave # i	n Lot -	- Del.	only - PA Specie		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece- and I hereby acknowledge that the this permit gives no right of unrest	dent under provisions of the espass and nuisance laws o	e Health and Safety Cade, apply and understand that	DATE SIGNED			
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COC AUTHORITY FOR THE DISPOSITION SPECIFIED II	EAND IS THE	OCT 0 5 1988	Donald &	Campos, M.D.		
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISSOSITION WAS MADE ON 1	SIGNATURE SIGNATURE	ONEW THE	DISPOSITION LIC	ENSE NUMBER OF CREMATED REMAINS POSER, IF APPLICABLE		
IF DISPOSITION IS TO DECLIF IN ANOTHER COUNTY	S. D. Co. Dept. o	TO STATE OF THE PARTY OF THE PA	P. O. Box 85 es San Diego, C	222 A 92138-8522	2		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CHMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

No 39722

	Elime J.	Date: 9	-17 . 19	0
De Tona de Di	Address:		illars (\$ 4 244 300	_)
In Payment of Lot 149 Grave	RowSe	ection	Division Black	
Pre-Need Lot	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Bunal Containers Handling Fee Recording & Music Fees Pre-Need Trust Sales Tax	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77185 100 77185 100 77183 6303 9022 60101 78390	2 3 2 3 3
AC-212 (Rev. 10-87)	ISSUED BY	TOTAL PAID	\$ 1066 5	70

### MT. KOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 9-29-88

of was	with		Need	range
in a	Funeral, date, tim	e		/
Church, Chapel, Graveside				Manus
All Funeral cars must arrive before 3:30	p.m. of regular work	day or a	n extra charge w	ill be applied
and billed to undersigned. War time vet	eran			~
1888 \$		3		X
ot / TAY Grave Row _	Section	_	_ Division/Block	-
Grave space & Care Fund				
Additional spaces and care fund	······································	,	) <del>g</del>	
Opening/Closing & Setup	asselle	0	60	
Burial Container	Rocke	uel		
landling Fees				
lower vases - Marker setting fee		******		
Recording and filing fee				
Sales taxes				
		otal Due		35.d
		2/	NII	35.0
	Paid receipt number _	2010	144	2300
			Balance due	0
hereby certify I am the and this is your authority to make dispos	altina of samples on a		of the above nam	
hat I have the right to make this authori iny liability on account of said authorize	zation and lagree to h	old Mt. F	lope Cemetery h	armless from
hereby authorize the interment in lot I	Signature			
old under deed.		-		1300
ignature of recorded holder of deed	Address			
TO A THE STATE OF	State			Zip Cod
	Telephone			
930	Invoice	#		
Nork Order # <b>E</b> 7667	Acct.#			
	ALCCE H			

#### CITY OF SAN DIEGO, CALIFORNIA MOUNT HOPE CEMETERY



## DEED

E-7667

		OWNERSHIP ANI	INTERMENT PRIVILEGES	
то	Carl E.	Virginia A. Ericson	1 for the sum of \$ 280.00	(DOLLARS)
LEGAL	DESCRIPTION	Lots 1888 & 1889	Sec 3 Div 8	
		PURCHASE ORDER NUMBER		

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:

2 x 1 Flush Marker Only

Raymond W. Delne Ceptery Manager

Park and Recreation Director

PINK

WHITE ..... TO CUSTOMER CANARY ..... CEMETERY

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

36744

Date: From Address Payment of Division Row Section Block Lot Grave NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE CREDIT **67007** - Invoice No. 20% Sales Care 10% Sales. 100 of Lots 77184 Acct. No. CITY AUBITOR Opening/ 100 Closing Guriat 100 Containers 100 **BALANCE DUE** Handling Fee 77186 Recording & 100 Misc Fees 77183 On Acct Pre-Neut 63033 Pre-Need Lot At Need Trust 9022 Pre-need Trust Sales Tax 60101 ISSUED BY TOTAL PAID AC-212 (Rev 10-87)

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTS TO:

CAME STREET ADDRESS CITY, STATE ZIP

Title Order No.

Escrow No.

F-7667

SPACE ABOVE THIS LINE FOR RECORDER'S USE.

### QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$\_

computed on full value of property conveyed, or
 computed on full value less value of liens and encumbrances remaining at the time of sale.

Signature of Declarant or Agent Determining Tax.

Firm Name

CARL E. and VIRGINIA A. ERICSON

count or type name of grantor(s);

the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do\_\_\_\_\_ hereby remise,

release and forever quitclaim to

JULIA ROCKWELL

the following described real property in the City of

y of San Diego

County of

San Diego

. State of California:

City of San Diego, California Mount Hope Cemetery LOTS 1888 & 1898 Sec. 3 Div 8., as described on Purchase Order Number B-7314.

Assessor's parcel No. \_\_\_\_\_

Executed on Sept. 29, 1988 at San Diego, California

CARL E. ERICSON

VIRGINIA A. ERICSON

STATE OF CALIFORNIA

COUNTY OF Sa

San Diego

On this 29 day of Sept. in the year 1988 before me, the undersigned, a Notary Public in and for said State, personally appeared

CARL E. ERICSON, and VIRGINIA A. ERICSON,

personally known to me (or proved to

me on the basis of satisfactory evidence) to be the person\_Swhose nameS

WITNESS my hand and official seal

Notary Public in and for said State

SANDRA L. CASEY

NAME

(This area for official notarial seal)

ADDRESS

ZIP

WOLCOTTS FORM 790. Rev. 8-84 QUITCLAIM DEED (price class 3)

STATEMENTS TO .

This standard form is intended for the typical situations encountered in the field indicated. However, before you sign round, fifth in all blanks, and easie whatever changes are appropriate and necessary to your particular transaction consult a lawyer if you doubt the form's litness for your purpose and use.

## MT. AOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 929-88

You are hereby authorized and instructed, sub	ect to your rules and regulations, to inter the remains
of Xologlier	M. Velasley
ina Comite hant o Fu	nergly date, time Luce Stat 4 2gm
Church, Chapel, Graveside Aurah \$	Since Passale Mortuary.
	of regular work day or an extra charge will be applied
and billed to undersigned. War time veteran .	No
Lot 105 Grave 3 Row	Section Division Block //
	3000
Grave space & Care Fund	.0.1/0/12-0
Grave space & Care Fund	20 4 for 2000p
Opening/Closing & Setup	320-
Burial Container	
Handling Fees Labor	170°°
Flower vases - Marker setting fee	
Recording and filing fee	35=
Sales taxes	_//.37
	Total Due
Dalid es	sceipt number 36841 1011-37
Laio re	
,,	Balance due
I hereby certify I am the	of the above named decedent
	of 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 a	and interment
	Mamora a Ver Don
I hereby authorize the interment in lot I hold under deed.	Giorgania CO D To - Acott
	According to the same of the s
Signature of recorded holder of deed	San Diego Ca, 9211
	262-9/61
	- salpinous
	Invoice #
Work Order # <b>E</b> 7668	Acct. #
PY-880 (REV. 8-85)	PAGE II

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7668

NAME OF DECEDEN	dT.			SEX	DATE OF BIRTH	Te	ATE OF DEATH
				The same of the sa		12	ATE OF DEATH
DOROTHY MA		PLACE OF DEATH COUN	TV 100 STATE	Female	2-9-44	DEED OF CORVE	SE OR OTHER INFORMANT
SHALL STREET	Sir on form		It was start	IF NOT IN CALIFORNIA	Mes and the last	ALL PROPERTY.	DESCRIPTION OF THE PROPERTY OF
El Cajon	SS OF FUNERAL DIRECTOR ION PERSON AC	San Diego	CALIFORN	HA LICENSE NUMBER			y- Husband
All the same to be a second	Ragsdale Mortuary		- Westernoon	329		ta St. /	
Alluciauli	The second secon	ave			CONTROL MANAGE	go, CA 92	4113
2 3	TYPE OF PERM	IT, CHECK ONLY ONE	OF THE FO	LOWING TYPES OF	DISPOSITION		
*		FI - Commence and a		analisman s	<b>m</b>		
A) 1. BURIAL IIN	ICLUDES ENTOMBMENT)	LI 5 DISINTERMENT A	AND BURIAL	INCLUDES		NT AND REINTE	EMMENT OF CREMATED
2 CREMATIO	N AND BURIAL (INCLUDES INUHNMENT)	G DISINTERMENT,		AND BURIAL	9 DISINTERME	NT OF CREMAT	TED REMAINS AND
☐ 3 CREMATIO	N AND DISPOSITION OTHER THAN IN A	(INCLUDES INUR	NMENT)	1000	DISPOSITIO	N OTHER THAN	IN A CEMETERY
CEMETERY		7. DISINTERMENT,	CREMATION.	AND DISPOSITION	FOR	CORONER'S	USE ONLY
4 SCIENTIFIC	use	OTHER THAN IN A CEMETERY		☐ 10 DISPOSITION PENDING			
		THE PRINCIPLE SHOWS				-	Commence of the Commence of th
INTERMENT	NAME AND ADDRESS OF CEMETERY WI				9	COUNTY	
	Mt Hope Cemetery: 3751				Celebration of 6	San D	
CREMATION	N/A Mitables	lei -	CHEMATER	GATE CREMATED	> SIGNATURE OF F	EHSON IN CHAR	IGE OF CREMATORY
BUBIAL AT SUA	ADDRESS, NEAREST POINT ON SHORELI	NE. OR OTHER DESCRIPTION	ON SUFFICIEN	T TO IDENTIFY FINAL	PLACE AND COUN	TY OF DISPOSIT	TION
DISPOSITION STHER	Vand						
O ATEO REMAINS		- Annual Control of the Control of t					
SCIENTIFIC	NAME AND ADDRESS OF FACILITY RECE	IVING REMAINS					
USE	N/A						
		rson having the right to control the disposition of the		SIGNATURE OF APPLICANT			
ACKNOWLEDGMENT OF	remains of the above named deced				<b>P</b>		
APPLICANT	this permit gives no right of unrestr	espass and nuisance laws apply and understand that			DATE SIGNED		
. '						2-181-2-1744	
REGISTRAH	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND GAFETY CODE AUTHORITY FOR TI€ DISPOSITION SPECIFIED IN	AND IS THE .	70	CT 3 1988	AL OF	& Comra	H ISSUING PERMIT
CERTIFICATION OF FERSON IN CHARGE OF DISPOSITION	DEPOSITION WAS MADE ON 10	14/88 SGNAT	ON PU	2 Waste	ISPOSITION	DISPOSER, IF A	ER OF CREMATED REMAINS
IF DISPOSITION IS	INDICATE ADDRESS OF REGISTRAN OF		2	- Service -			
TO OCCUPI IN			85222				
Dept. of Health Serv		ces: San Diego	o, CA 9	2138-5222	The state of the s		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED. OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 PROPERTY DEPARTMENT

### MOUNT HOPE CEMETERY

但是是是	264-3151		10	22
	11209 1	Date: _	10/	3 1900
From 120 V ghalley	Address: 9070	LUO .	SHILL	FIFT SL
Ene Thousak	a clevery 31	100	Dollars (\$	10/1/37
In Payment of	mathe Versell	upo \	Sple	MENT
	-			Marie Labor
Lot 105 Grave	3s	Section	2	Division Block
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales C	AND THE PERSON NAMED IN	60 00
Acct. No.		C/40% Sales of Loui	77184 77184 700 100 7	135 10
wo. E - 1660		Closing Containers	77183 -	170 00
BALANCE DUE		Handling Fe	On- 100 /	320 00
		Recording ( Misc. Fees Pre-Need	100 77183 — 63033	2500
Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐	1/1/1	Prust Sales Tax	9022 — 50101	11 307
AC-212 (Hev. 10-87) 7036/	ISSUED BY AND ALL	TOTAL PAID	78390 —	1011 37

	HOPE-CEMETERY	
	MENT-ORDER	
mericinet "	ty of San Diego Date 929-8	7
	subject to your rules and regulations, to inter the res	nair
in a	Funeral, date, time	
	Mor	tuar
All Funeral cars must arrive before 3:30 p.	m, of regular work day or an extra charge will be as	oplie
and billed to undersigned. War time vetera		-
70	0	Y
Lot 56 / Grave Row	Section Division/Block	5
Grave space & Care Fund	**********	
Additional spaces and care fund		
Opening/Closing & Setup	0 6 320	. (
	1	- /
Burial Container	1720	
Handling Fees	No. 10	- (
Flower vases - Marker setting fee	)	
Recording and filing fee	1 1. 35	5.6
, , ,	2 3	3
Sales taxes	7//	3
	Total Due	2
Pak	receipt number 36 /4 / //-	2
	Balance due	_
hereby certify I am the	of the above named dec	ede
that I have the right to make this authorizat	on of remains as above indicated. I certify and reprison and I agree to hold Mt. Hope Cemetery harmless on and interment.	s fro
any liability on account of said authorization	on and interment. L. H. Mixeles	KB
Lead on the state of the state		
hereby authorize the interment in lot I hold under deed.	Signatura US Mary No DA	41
	Address / Concrad Dez	-/
Signature of recorded holder of daed	Spring Valley 419	120
	0 1	200
	Talaghane	
Work Order # <b>E</b> 7669	Invoice #	



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

36747

MOUNT HOPE CEMETERY 264-3151

	2809 0	Date:	us 4 19 0
From State State	Address: 3047	Dollars (\$	711-39
Payment of	word frust	fre ou	us
bt 567 Grave		ection/	Division Block
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	OREDIT 57007 20% Sales Care 77184 - 80% Sales 100 of Lots 77184 - Opening/ 100 Circing 77181 -	
BALANCE DUE	OCT 3 1988	Buriel 100 Containers 77182 - 100 Handling Fee 77185 - Recording \$ 100 Misc Fees 77183 -	377 30
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	ISSUED BY MINER MAN	Pre-Need 63033 Trust 9022 - Sales Tax 50101 78390 - TOTAL PAID \$	71/30

## MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 9-30 -88

You are hereby authorized and instructed, sub-	ect to your rules and regulat	ions to inter the remains
of Rose	A. Mus	DAIL 1
0.00 1.	Mar	14.19/24
Vault/Lifer > 0 1	neral, date, time	May 10 ATT
Church, Chapel, Graveside All YUU	reco: Just	Mortuary.
All Funeral cars must arrive before 3:30 p.m. o	of regular work day or an ext	ra charge will be applied
and billed to undersigned. War time veteran	- the	these
ot 79 Grave 1/ Row	Section 16_ Di	vision/Block
Grave space & Care Fund	Α	W.W. E.
Additional spaces and care fund	eed D-26	272
Opening/Closing & Setup		
Burial Container		
Handling Fees	*****************	
lower vases - Marker setting fee		
Recording and filing lee		35,0
Sales taxes		
4100-11	Total Due	35.06
Sales taxes	ceipt number 369	35.00
The Court	NOTE OF THE PARTY	0
11		slance due
heraby certify I am the		e above named decedent
and this is your authority to make disposition of that I have the right to make this authorization	of remains as above indicate and lagree to hold Mt. Hope	ed. I certify and represent Cemetery harmless from
any liability on account of said authorization a	nd interment.	
hereby authorize the interment in lot I		
hold under deed.	Signature	
ignature of recorded holder of dead	Address	
Agriature of recursood horses of deeps	State	Zip Code
	Tulephone	
8 2 2 2 2 2		-
E momo	Invoice #	
Work Order # <b>E</b> 7670	Acct. #	

E-1670

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

		THE HEALTH WATER THE PARTY OF T			
NAME OF DECEDENT ROSE MURRAY			Female	06-24-189	09029-1988
PLACE OF DEATH—CITY OR TOWN  National City  NAME AND ADDRESS OF FUNERAL DIRECTOR FOR PERSONS  Humphrey Chula Vista Mortuary		PLACE OF DEATH—COUNTY (OR STATE IF NOT IN CALIFORNIA)  San Diego		NAME AND ADDRESS OF SPOUSE OF OTHER INFORMANT Public Administrator	
		broadway hula Vista, CA	F-964	San Diego, CA 92123	
	TYPE OF PER	MIT, CHECK ONLY ONE OF THE I	FOLLOWING TYPES OF	DISPOSITION	
XX 1 BURIAL IIN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND BURIA ENTOMBMENT)	UNCLUDES		AND REINTERMENT OF CREMATED LUCES INCRNMENT)
2 CREMATION	N AND BURIAL (INCLUDES INURNMENT)	B. DISINTERMENT, CREMATION INCLUDES INURNMENT)	N. AND BURIAL	DISINFERMENT OF CREMATED REMAINS AND DISPOSITION OTHER THAN IN A CEMETERY	
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 4 SCIENTIFIC USE		7 DISINTERMENT, CREMATION, AND DISPOSITION		FOR CORONER'S USE ONLY	
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATED REMA 3751 Market St. 8			San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY V	St. No low	, in	>	SON IN CHARGE OF CREMATORY
OURIAL AT SEA OR DISPOSITION OTHER SALIN A CEMETERY EMATED REMAINS	ADDRESS, NEAREST POINT ON SHORE	INC ON OTHER DESCRIPTION STREET	THE THE STATE OF T	PLACE AND COUNTY	OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS		F 34.0	
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the peremains of the above ramed decorded I hereby acknowledge that this permit gives no right of unres	edent under provisions of the Heal espass and nuisance laws apply o	th and Safety Code, and understand that	DATE SIGNED	LICANT
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCURDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS THE \$4.00	OCT 0 4 1988	Do 80	L. Parros, M. D. Co
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	LICERTIFY THAT THE SPECIFIED OF STREET OF STREET	14/88 SIGNATION OF P	CULLITY		CENSE NUMBER OF CREMATED REMAINS ISPOSER, IF APPLICABLE
III DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	)		

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

264-3151

Nº 36975

From: June Line Control	Address 5 201- A	Ruffen V	1-16 1966 Dool 3D
InPayment of	malle Jee	for Roser	( 35.00)
Lot Grave	Row	Section Apply	Division Block
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAN- PAID IN THIS SPACE	APED GREDIT 67007 20% Sales Care 77184 80% Sales 100 of Lots 77184	988
W.O. 2-7670	3 37 7 23	Opening/ 100 Closing 27181 Buriel 100	
BALANCE DUE		Containers 77182 100 Handling Fee 77185 Recorging & 100 Missc. Fees 77183	35 00
Pre-Need Lot	18 / D 189	Pre-Need 63033 Trust 9022 Sales Tax 60101	
AC-212 (Rev. 10-87)	ISSUED BY AND A	TOTAL PAID \$	35 00

MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

You are hereby authorized and instructed, subject to your rules and regulations, to inter the remains of the control of the co		Date //30/88
of Bell Control, Chapel, Graveside Church, Chapel, Grave		RARCLEV
in a Bell Funeral, date, time All - 1/4 - 1/4 m Church, Chapel, Graveside Shows : Section   Mortuary.  All Funeral cars must arrive before 3:30 p.m. of regular work day of an extra charge will be applied and silled to undersigned. War time veteran    Lot   Grave   Row   Section   Division/Back   12  Grave space & Care Fund   Grave	You are hereby authorized and instructed, subject	to your rules and regulations, to inter the remains
Church, Chapel, Graveside  All Funeral cars must arrive before 3:30 p.m. of regular work day of an extra charge will be applied and billed to undersigned. War time veteran  Lot //2 Grave 3 Row Section Division/Back /2  Grave space & Care Fund Additional spaces and care fund Opening/Closing & Setup  Burial Container 1000  Handling Fees 144  Flower vases - Marker setting fee 8  Recording and filing fee 9  Sales taxes 9  I hereby certify I am the 1000  I hereby certify I am the 1000  I hereby certify I am the 1000  I hereby authorize the interment in lot I hold under deed.  Signature of remoted holder of deed 1000  Signature of remoted holder of deed 1000  Invoice #	of Carice C.	Sar toley,
Church, Chapel, Graveside  All Funeral cars must arrive before 3:30 p.m. of regular work day of an extra charge will be applied and billed to undersigned. War time veteran  Lot //2 Grave 3 Row Section Division/Back /2  Grave space & Care Fund Additional spaces and care fund Opening/Closing & Setup  Burial Container 1000  Handling Fees 144  Flower vases - Marker setting fee 8  Recording and filing fee 9  Sales taxes 9  I hereby certify I am the 1000  I hereby certify I am the 1000  I hereby certify I am the 1000  I hereby authorize the interment in lot I hold under deed.  Signature of remoted holder of deed 1000  Signature of remoted holder of deed 1000  Invoice #	ina Bell Liner Funer	al data tima trues - 104 - 11 Am
All Funeral cars must arrive before 3:30 p.m. of regular work day of an extra charge will be applied and billed to undersigned. War time veteran  Lot // Grave 3 Row Section Division/ Color / Section Division Division Division Division Division/ Color / Section Division Divisio	Vault/Uner Quality	- C 000' Q Q
and filled to undersigned. War time veteran  Section Division/Back 12  Grave space & Care Fund Additional spaces and care fund Dening/Closing & Setup  Burial Container Burial C		5 Tus leur
Grave space & Care Fund  Additional spaces and care fund  Opening/Closing & Setup  Burial Container  Handling Fees  Recording and filing fee  Sales taxes  Paid recipion number  Again Section  Paid recipion number  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 lagree 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 at deed  Invoice #	All Funeral cars must arrive before 3:30 p.m. of re	egular work day or an extra charge will be applied
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  Paid rectipi number  A 1988  Bajance due  Boas  Paid rectipi number  A 1988  Bajance due  Boas  Flower vases - Marker setting fee  Recording and filing fee  OCT 04 1988  Bajance due  Boas  Flower vases - Marker setting fee  Recording and filing fee  Sales taxes  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 lagree 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 harber of deed  Invoice #	and filled to undersigned. War time veteran	
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  Paid rectipi number  A 1988  Bajance due  Boas  Paid rectipi number  A 1988  Bajance due  Boas  Flower vases - Marker setting fee  Recording and filing fee  OCT 04 1988  Bajance due  Boas  Flower vases - Marker setting fee  Recording and filing fee  Sales taxes  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 lagree 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 harber of deed  Invoice #	11/2 3	1 12
Additional spaces and care fund  Opening/Closing & Setup  Burial Container  Handling Fees  Flower vases - Marker setting fee  Recording and filing fee  Sales taxes  Paid retain number  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  Signature of recorded holder of deed  Invoice #	Cot / Grave Row	Section Division/Buck
Additional spaces and care fund  Opening/Closing & Setup  Burial Container  Handling Fees  Flower vases - Marker setting fee  Recording and filing fee  Sales taxes  Paid retain number  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  Signature of recorded holder of deed  Invoice #	Levely	lo- 3000
Opening/Closing & Setup  Burial Container  Handling Fees  Flower vases - Marker setting fee  Recording and filing fee  Sales taxes  Paid recording and filing fee  OCT-04 1988  3500  Realance due  806 50  Bajance due  80	0	
Handling Fees  Flower vases - Marker setting fee  Recording and filing fee  Sales taxes  Paid rectip number  Paid rectip number  Read to the above named decedent 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 recarded holder of deed  Signature of recarded holder of deed  Invoice #	Additional spaces and care fund	20000
Flower vases - Marker setting fee  Recording and filing fee  Sales taxes  Paid rectipin number  Paid rectipin number  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  Signature  Table Down Market  Signat	Opening/Closing & Setup	520-
Recording and filling fee  Sales taxes  Paid respiration of remains as above indicated. I certify and represent that I have the right to make this authorization and lagree 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  Signature of recorded holder of deed  Signature of recorded holder of deed  Invoice #	Burial Container Rell Lenew.	10000
Recording and filling fee  Sales taxes  Paid respiration of remains as above indicated. I certify and represent that I have the right to make this authorization and lagree 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  Signature of recorded holder of deed  Signature of recorded holder of deed  Invoice #	Handling Fees	1450
Recording and filing fee  Sales taxes  Paid recording and filing fee  OCT-0 4 1988  Sales taxes  Paid recording and filing fee  Paid recording and filing fee  OCT-0 4 1988  Sales taxes  Paid recording and filing fee  Sales taxes  Paid recording and filing fee  Sales taxes  Paid recording and filing fee  Sales taxes		AIDI
Paid receipt number  Paid receipt number  Relative Solution 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 lagree 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 dead.  Signature of recorded holder of dead  Signature of recorded holder of dead  Invoice #	Flower vases - Marker Setting fee	1000 7000
Paid receipt number  Paid receipt number  Relative Solution 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 lagree 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 dead.  Signature of recorded holder of dead  Signature of recorded holder of dead  Invoice #	Recording and filing fee	1CT-04-1909
Paid receipt number 36 / 200 80 806 80 80 80 80 80 80 80 80 80 80 80 80 80	Sales taxes	
Paid rectipit number 36 / 80 80 80 80 80 80 80 80 80 80 80 80 80	alog hall	A STATE OF THE OWNER, THE PARTY OF THE PARTY
I hereby certify I am the	Paid rect	1000
I hereby certify I am the		Balanca due 806 50
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  Signature of recorded holder of deed  Takephana  Invoice #	0	1 36763 806.50
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  Signature of recorded holder of deed  Signature  Adapted  Signature  Takephana  Invoice #	I hereby certify I am the	of the above named decedent
I hereby authorize the interment in lot I hold under deed.  Signature of recarded holder of deed  Signature of recarded holder of deed  Invoice #	and this is your authority to make disposition of n	emains as above indicated. I certify and represent
hold under deed,  Table Dor Rmon #C  Augusture of recorded holder of deed  Signature of recorded holder of deed  Toleghana  Invoice #		
hold under deed,  Table Dor Rmon #C  Augusture of recorded holder of deed  Signature of recorded holder of deed  Toleghana  Invoice #		the comment
Signature of recorded holder of deed  Applies  Covering, Ca 91723  Sinte  818-967-7807  Telephone		Gignatury of the state of the s
\$18-967-2807 Ep Code  Telephone		120 Workman -C
818-967-2807 Telephana	Signature of recorded holder of deed	
Invoice #		818-967-2807
Invoice #		Telephone
Invoice #		
- F 7671	West Order # E 7671	Invoice #
Work Order # L (U(1 Acct. # Acct. #	VVOIX Order #	Acct. #

San Diego, California

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasurer or order at 3751 Market Street, San Diego, Ca 92102 seil of 100 -DOLLARS with interest from on the unpaid principal at 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

NAME DONALD N. MINO 1 SIGNATURE , Donald

ADDRESS

CALIF. DRIVERS LIC. # 20559260

E-7671

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN		DE BENCK HAR TRANK THE MELL	I SEX	DATE OF BIRTH	DATE OF DEATH	
Clarice C. Barclay			Penale	Aucr. 15.1998	Setto 29,1988	
PLACE OF DEATH-	THE RESERVE TO SERVE	PLACE OF DEATH-COUNTY ION ST	Dr. designation	I MANUAL STATE OF THE STATE OF	SPOUSE OR OTHER INFORMANT	
Santa Ana		Orange		Don Minoli/So	n	
	SS OF FUNERAL DIRECTOR (OR PERSON AS		FORNIA LICENSE NUMBER	720 E. Worlden		
Saddlehack Chapel, 220 E. Main S		t., Tustin, CA	1.099	Covina, CA 91723		
1.2	TYPE OF PER/	WIT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF	DISPOSITION		
A BURIAL DIN	CLUDES ENTOMRMENTI	5 DISINTERMENT AND BURN ENTOMBMENTI	AL IINCLUDES	8 DISINTERMENT AND REMAINS (INCLUDES	REINTERMENT OF CREMATED INGROMENTI	
	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMATION, AND BURIAL INCLUDES INURINMENT)		DISINTERMENT OF CREMATED REMAINS AND DISPOSITION OTHER THAN IN A CEMETERY		
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY		DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY		
4 SCIENTIFIC	Mor			10 DISPOSITION PENDIN	16	
Derrott ar are	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATED REM	AINS ARE TO BE INTERRE	o co	UNTY	
INTERMENT	Mt. Hope Cametery, S	andDiego, CA			San Diego	
CREMATION	NAME AND ADDRESS OF CHISAATORY IN	- Wooden	DATE CHEMATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY	
OR DEMATERY OF CHEMATER PREMATER	N/A Bravesil	INE. OR OTHER DESCRIPTION SUFFIC	IENT TO IDENTIFY FINAL	PLACE AND COUNTY OF DE	SPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS				
This is to certify that I am the person having the right to control the disposition of the remains of the above named decedent under provisions of the Health and Safety Code, and I hereby acknowledge that trespass and nuisance laws apply and understand that this permit gives no right of unrestricted access to property not owned by me.				SIGNATURE OF APPLICANT		
		and understand that	DATE SIGNED			
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CAUPORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED II	= AND IF THE BE DO	DATE PERMIT ISSUED	SIGNATURE OF LOCAL REC	EAL O.M	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON 10	WES DATE	wildle or I	DISPOSITION LICENSE DISPOSE	NUMBER DECREMATED REMAINS R. IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	Orange County Health P.O. 355, Santa Ana,	Care Agency				

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

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

### CITY OF SAN DIEGO, CALIFORNIA

36751

	- 8	ROP	ERTY	DE	PART	MENT	
AC	110	NT	HO	DE	CE	MET	EBY
	,,,		110		CE	MI	211

264-3151 Date: Dollars (\$ Payment of \_\_\_\_\_ Division Grave. Row Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED 'PAID' IN THIS SPACE CREDIT 67007 Invoice No. 20% Sales Cars 80% Sales Acat. No. of Lots 27184 CITY AUDITOR Opening/ Closing 100 77181 Burial 100 Continuers 77382 BALANCE DUE 100 1988 Handling Fee 77185 Recording A. Misc. Fees 100 77183 On Acct At Need Pre-Need Lot Pre-Need 63033 Trust Pre-need Trust Cash Check Sales Tax 60101 78300 ISSUED BY TOTAL PAID AC-212 (Rev. 10-67)



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36763

264-3151

From Joseph Men	04 Address: 720 1000	Date: #C, O	24 50, OH
In Payment of	rise C, Sar	May	
Lot 102 Grave	Row Se	ection	Division /
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 67007 20% Salos Care 71184 —	60 00
Acct. No.	CITY AUDITOR	80% Sales 100 of Lots 27184 — Opening/ 188	320 00
wo 2-1011	OCT 7 1988	Closing 77181 — Burial 100 Containers 77182 —	100 00
BALANCE DUE	100	Handling Fee 77185 — Recording & 100	193 00
Pre-Need Lot At Need On Acct	1 1	Misc. Fees 77183 — Pre-Need 63033	0300
Pre-need Trust   Cash Check	Made My	Sales Tax 80101 76390	650
AC-219 (Flav 10-67) 504	issued by 24044 Car	TOTAL PAID \$	806 500

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 9-30-88

no T.S. Vault and		10/0	1 10
110	eral date, time, 2014	x 1913	1:00
Church, Chapel, Graveside	Spore Calif	Buria ,	Mortuary.
All Funeral cars must arrive before 3:30 p.m. of	regular work day of an	extra charge will be	applied
and billed to undersigned. War time veteran _	regular from any ar ar		cuppines.
0.5			10
ot Grave 70 Row	_Section	Division/Block	12
Grave space & Care Fund			
Additional spaces and care fund	1		
		Minimikatika e	
Opening/Closing & Setup	ulla 1765	/	
Burial Container	1	<u></u>	
landling Fees		····· —	
lower vases - Marker setting fee			-
lecording and filing fee	.Q		
Sales taxes			
	Total Due .		_
Paid rec	eipt number		-
Paid rec	eipt number ————	Balance due	9
Paid rec			-
hereby certify I am the and this is your authority to make disposition o hat I have the right to make this authorization a any liability on account of said authorization ar	f remains as above indicand lagree to hold Mt. Ho	f the above named	epresent
hereby certify I am the and this is your authority to make disposition o hat I have the right to make this authorization a	f remains as above indicand lagree to hold Mt. Ho	f the above named	epresen
hereby certify I am the	f remains as above indicand lagree to hold Mt. Ho	f the above named	epresen
hereby certify I am the	fremains as above indicated agree to hold Mt. Hond interment.	f the above named	epresen less from
hereby certify I am the	f remains as above indicind I agree to hold Mt. Hond interment.	f the above named	epresen less from
hereby certify I am the and this is your authority to make disposition of hat I have the right to make this authorization as any liability on account of said authorization as the hereby authorize the interment in lot I	fremains as above indicated agree to hold Mt. Hold interment.	f the above named	epresen

E7172 ACCT.NO. E7656

DORESS	2552	2 E Street, San Diego, Ca 92104	RATING			L	TIMI		
DATE		ITEMS	DES	HT	1	CREDI	T	BALA	NCE
7	88	Opening/Closing, T.S. Vault, Recording Fee	711	37	П	711	37		(
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4		The second live of the second							
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	DOT!								



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

From MALE (AMA)	Address: 214 Age	Date:	11/10	10 19 9
• In Payment of	Marker Steen	Jan 0	ollars (\$ _	125.00,
Lot 87 Grave	D Row	Section		Division / 2
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPE *PAID IN THIS SPACE	60% Sales of Lots Opening/ Closing Burial	67007 77184	MAR 1 8 1980
Pre-Need Lot  At Need  On Acct Pre-need Trust  Cash  Check		Containers  Handling Fee Pacording & Misc. Fees Pre-Need Trust Sales Tax.	77182 100 77185 100 77183 63031 9022 60101	125 00
AC-212 (Rev 10-87) 4209	ISSUED BY MANN ON	TOTAL PAID	78390	1250

## PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7672

NAME OF DECEDEN	WT.		SEX	DATE OF BIRTH	DATE OF DEATH	
	Beatrice M Wood		Female	8 March 17	29 Sept 88	
PLACE OF DEATH-	THE PARTY OF THE P	PLACE OF DEATH—COUNTY	TOR STATE IF NOT IN CALIFORNIAS	NAME AND ADDRESS OF	SPOUSE OR OTHER INFORMANT	
Vacavil	The same of the sa	Solano			oreGrd-Daughter	
	SS OF FUNERAL DIRECTOR (OR PERSON AC		CALIFORNIA LICENSE NUMBER	214 Pepperell		
Galifor	nia Burial Chapel,	San Diego	1357	Vacaville, Ci	95688	
	TYPE OF PER/	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION		
XXX 1. BURIAL (IN	ICLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENTI	BURIAL IINCLUDES	a disinterment and REMAINS IINCLUDES	REINTERMENT OF CREMATED INURNMENT)	
-	N AND BURIAL IINCLUDES INCRMMENT)	6. DISINTERMENT, CHE	MATION, AND BURIAL	DISINTERMENT OF CONTROL  DISPOSITION OTHER	REMATED REMAINS AND THAN IN A CEMETERY	
LJ 3 CREMATIO CEMETERY	N AND DISPOSITION OTHER THAN IN A	T 7 DISINTERMENT CRE	MATION, AND DISPOSITION	FOR CORON	ED'S LISE ONLY	
4 SCIENTIFIC	USE	OTHER THAN IN A	CEMETERY	FOR CORONER'S USE ONLY    10 DISPOSITION PENDING		
				WATER STATE OF THE	M.	
INTERMENT	NAME AND ADDRESS OF CEMETERY W		REMAINS ARE TO BE INTERRE	io co	UNTY	
	Mt Hope Cemetery, Sa NAME AND ADDRESS OF CREMATORY W		Total application	I source on preparation	San Diego	
CREMATION	78 ga	metal Seals	w + Bateris	SIGNATURE OF PERSON IN		
BURIAL AT SEA CRE DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS, NEAREST POINT (A) SHOREL	NE, OR OTHER DESCRIPTION	Gravenile	PLACE AND COUNTY OF DE	SPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	THE W			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that the this permit gives no right of unrest	dent under provisions of the espass and nuisance laws a	Health and Safety Code, pply and understand that	DATE SIGNED		
LÖCAL REMSTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	EAND IS THE	PAID DATE PERMIT ISSUED	SIGNATURE OF LOCAL REG	OF THE ISSUING PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON 10	3/88 SIGNATUR	E OF PERSON IN CHARGE OF I		NUMBER OF CREMATED REMAINS B. IT APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	PO Box 295, Vallejo,					

22Y 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE EMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

(FAR)

## MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 10-3-88

You are hereby authorized and instructed, su	bject to your rules an	d regulations, to inter	the remains
of Hovenne	es Na	boachia	en
ina T.S. Voult F	uneşak date, time	Ded 40/5	-10:30
Church, Chapel, Graveside Justit E	THANG Z	no Coole	Mortuary
	al and the same to do	1 Batteren	-ell'
All Funeral cars must arrive before 3:30 p.m		or an extra charge w	gi be applied
and billed to undersigned. War time veteran	-		
Lot 5063 Grave Row	Section	Division/Block	10
			en e de
Grave space & Care Fund		6	73.0
Additional spaces and care fund			- d
Opening/Closing & Setup			20.00
Burial Container		/	75-06
landling Fees		/	10.00
lower vases - Marker setting fee			
lecording and filing fee			35.0
Sales taxes			11.3
iolos tando	Total		406-3
	7	6755	UN-3
Paid	receipt number 2	,,,,,	Dr
		Balance due <	-
hereby certify I am the Son		of the above nam	ned 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	in and lagree to hold	e indicated. I certify a Mt. Hope Cemetery h	and represen armiess from
hereby authorize the interment in lot I nold under deed.	Signature 7820	Eagle R.d	ge Dr
ignature of recorded holder of deed	Stem 46	5-7373	9 2 119 Zip Cod
	Invoice #		9.11
Nork Order # E 7673	Acct. #	The state of the	
PY-603 (REV. 8-85)	Acct. II	1 - 1 - 1 - 1 - 1	

## PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7673

NAME OF DECEDEN	IT.			SEX	DATE OF BIRTH	DATE OF DEATH
	AVANES D. FAR			Male	Jan. 14	,1907 Oct. 2, 1988
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH-	-COUNTY IOR STA	TE IF NOT IN CALIFORNIA		BESS OF SPOUSE OR OTHER INFORMANT
	El Cajon		n Diego		Yeglish	Dabbaghian son
NAME CATHE	Cajon Blyd.	TING AS SUCHO San Diegp		1083	El Cajo	on, CA
	TYPE OF PERA	AIT, CHECK ONLY	ONE OF THE F	OLLOWING TYPES O	F DISPOSITION	
D. I BURIAL III	ICLUDES ENTOMBMENTI	5 DISINTER	MENT AND BURIA	L (INCLUDES		NT AND REINTERMENT OF CREMATED INCLUDES INURINMENT)
1	N AND BURIAL (INCLUDES INURNMENT)		MENT, CREMATION	N. AND BURIAL		NT OF CREMATED REMAINS AND N OTHER THAN IN A CEMETERY
GEMETERY  4 SCIENTIFIC		7 DISINTER T	MENT, CREMATION HAN IN A CEMETE	N, AND DISPOSITION RY	FOR (	CORONER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR	San Di	NS ARE TO BE INTERR	ED	COUNTY San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERENEMAINS ARE	alex	DATE CREMATED	SIGNATURE OF P	FRSON IN CHARGE OF CHEMATORY
BURIAL AT SEA OR SPOSITION OTHER LI IN A CEMETERY PEMATED REMAINS	n/a		SCHIPTION SUFFICE	ENT TO IDENTIFY FINA	L PLACE AND COUN	TY OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	The same			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tre this permit gives no right of unrest	dent under provis	ions of the Healt ace laws apply a	h and Safety Code, and understand that	SIGNATURE OF A	PPLICANT
LOCAL	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED II	E AND IS THE	LA . 90	DCT 4 198	SIGNATURE OF L	L. Comes M.S. MM
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION		TENDATE -	SIENAMINE OF P	en stell	POSITION	LICENSE NUMBER OF CREMATED REMAINS DISPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH				

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OF BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 PROPERTY DEPARTMENT

NE 36755

MOUNT HOPE CEMETERY 264-3151

rom LAK Dulkash	(dr) Address: 6080 20	Date: 10-	3 19.86 Maga
Payment of	al leaded are 3	Dollars	15 21 01.37 Cherry
ot 50 62/500 Grave	Row Se	ection	Division Block
v.o.2 - 1673 £ 8-761	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE  CITY AUDITOR	CREDIT 6700.  20% Sales Care 7718  80% Sales 100  of Lots 7718  Opening 100  Closing 7718  Burlal 100  Containers 7718	13/30 98
re-Need Lot	OCT 7 1988	Handling Fee 7718:  Recording & 10: Misc. Fees 7718:  Pre-Need 3303: Trust 902: Sales Tax 6010 7839: TOTAL PAID	11 30

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 16-2-88

of Apple		10 10 10 10 -1	d regulations, to inter	
of Agranda		2	que	
in a	Fu	neral, date, time		
Church, Chapel, Graveside				Mortuary.
All Funeral cars must arrive be	ofore 3:30 p.m.	of regular work day	or an extra charge w	ill be applied
and billed to undersigned. Wa	r time veteran			
110				10
Lot Suran Grave	Row	Section	Division/Block	10
				19Kd
Grave space & Care Fund			4	70,000
Additional spaces and care fur	nd			
Opening/Closing & Setup	**********			
Burial Container				
landling Fees	**********		**************	
lower vases - Marker setting	fee			
Recording and filing fee	20000 200200 20000			
Sales taxes				19/11
		0	Oue	ac A
	Paid re	sceipt number	0/33 6	7320
	SEE	6-767	Salance due	0
and the gard to the contact of the contact of	TO	e kede	CIPIT	Design source of the co
hereby certify I am the and this is your authority to ma	ake disposition	of remains as above	of the above name indicated. I certify a	nd represent
hat I have the right to make this any liability on account of said	s authorization	and lagree to hold l	Mt. Hope Cemetery ha	armless from
MA MARIAN CONTRACTOR AND SOUTH		Va	ner san	agues
hereby authorize the interme	nt in lot I	-	N.	_
old under deed.		7820	Eagle Reds	e so
ignature of recorded holder of deed		S'D	OF 929	19
		Statu		Zip Code
		Talephone	VE SI COLO	
Nork Order # <b>E</b> 7674		Invoice #		1000

MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

	m/2/88
,	ROSE Date 145/00
You are hereby authorized and instructed, sa	bigot to four rules and regulations, to intenthe remains
of Honry	ofe, fr. (Kose)
ina Bell Line	uneral, date, time There 2,00 146
Church, Chapel, Graveside	: Rapplale Mortuary.
All Funeral cars must arrive before 3:30 p.m.	n, of regular work day or an extra charge will be applied
and billed to undersigned. War time veterar	No.
Lot 159 Grave 3 Row	Section
6	2 0 0 0 300
Grave space & Care Fund	uga bund 000-
Additional spaces and care fund	2 Afron Like for Body 2000
Opening/Closing & Setup	# 320-
Burial Container	the Line 100
Handling Fees	
Flower vases - Marker setting fee	2/20
Recording and filing fee	16
Sales taxes	901 60
so any noce	Total Due
Paid	receipt number
004	Balance due
I hereby certify I am the	of the above named decedent
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 on and I agree to hold Mt. Hope Cemetery harmless from
any habinty of account of said authorization	1000 and the state of the state
I hereby authorize the interment in lot I hold under deed.	Manusch December 1
	Address Of State Of S
Signature of recorded holder of dural	San Clear Cot 1911
10 and the se	*(619) 4-104-11(04
No of the	
E 7675	Invoice #
Work Order # E 7675	Acct. #
-31 les 0 1/-0	- Cometal

-7675
2-88

9062 San Diego, California

30 days after date for value 1	eceived, the undersigned maker promises to pay to Mt. Hope
Cemetery or San Diego City Tre	asyfer, or order at 3751 Market Street, San Diego, Ca 92102
the sum of Trink Heindul	Set at 100 DOLLARS with interest from
Now 4, 1988	on the unpaid principal at 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

Safety Code authorizes the removal of any remains from a plot for which the purchase price is past due or unpaid.

PRINT NAME CLOVIA POUNCLYSIGNATURE 1 CONCRETE PRINT NAME CALIF. DRIVERS LIC. A 12462680

Part II, Chapter I, Article 2, Para. 7528 of the State of California Health &

MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE

## MT. HOSE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 10-3-88

of	1	
in aFu	ineral, date, time _	
Church, Chapel, Graveside		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. War time veteran		
11049-Top Der		10
Lot 4017 Grave Row	Section	Division/Block /O
Grave space & Care Fund		
Additional spaces and care fund		
Opening/Closing & Setup		320.00
Burial Container		175.00
Handling Fees		170.00
Flower vases - Marker setting fee		
Recording and filing fee		3500
Sales taxes		-// 70
		Due
Paid re	eceipt number	
		Balance due
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 lagree to hold	of the above named decedent indicated. I certify and represent Mt. Hope Cemetery harmless from
hereby authorize the interment in lot I hold under deed.	Sycatore 55550	Genesed ct. E. 159
Signature of recorded holder of deed	Glate 5	65-1952 ZIPCOO
	Invoice # _	



WHITE TO GUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

From: Helma free  House of - New  In Payment of	Address 5550 Se	13:	11-8 12 SD 14 SD	. 19 86
Lot 4249 Grave	Row Se	ection	Division Block	70
Acct. No. 2 - 7676 W.O. 2 - 7676	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	20% Sales Caro 80% Sales of Lots Opening/ Closing Burial	67007 77184 100 77184 100 77181 100 77182	V J 5 1988
Pre-Need Lot  At Need  On Acct  Pre-need Trust  Cash  Check  Ac-ese (New 10-87)	ISSUED BY Orders Wash	Recording & Misc. Fees Pre-Need Trust Sales Tax	77185 100 77183 683033 9022 60101 78390	9 00

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From A A A A A A A A A A A A A A A A A A A	and trust, confirme	Date: 42-8 H.E.Apt 104 Dollars (\$	1988 1900 (1900) 1900 (1900)
Lot 4249 Grave	Row Se	ction	Division 10
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 87007 20% Sales Care 77384 —	4D
ACCI, No. F-7676	THE RESERVE OF THE PARTY OF THE	80% Sales 500 of Lots 77184 — Opening/ 100	Or Oppor
W.O		Opening/ 100 Closing 77191 — Buriel 100 Containers 77182 —	2 2
BALANCE DUE 105337	THE RESERVE TO SERVE	Handsing Fee 77185 —	1380
Pre-Need Lot □ At Need □ On Acct □	THE RESERVED TO	Misc. Fees 77183 — Pre-Need 83033	200
Pre-need Trust 🖫 Cash 🗆 Check 🖫	Cun Mach	Trust 9022 — Sales Tax 60101 78390 —	
AC-212 (Hev. 10-87) 564	ISSUED BY	TOTAL PAID \$	29 00



WHITE TO CUSTOMER CANARY CEMETERY

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

	es bres	264-3151 Address 50	Ver	Date:	1-5	# 107	89
Trong to	Payment of	molico -	0		Dollars (\$	29.00	)
J.ot	Grave	Row_	St	ection		Division Block	
Acct, No	676	NOT VALID FOR PURPOSE STATED UNLE	SSSTAMPED	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees	100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77183 —	JAN ZZ	1989
THE RESERVE OF THE PARTY OF THE	Need On Acct On Acct On Acct On Acct On Acct On	ISSUED BY AND	Chro	Pre-Need Trust Sales Tex TOTAL PAID	60033 9022 — 60101 76390 —	29	00

From:

Invoice No. Acct. No. W.O

BALANCE DUE

Pre-need Trust

AC-212 (Rev. 10:87)

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

Grave.

Payment of

Pre-Need Lot At Need On Acct

Cash

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Row.

Address -

NOT VALID FOR PURPOSE STATED UNLESS STATED IN THIS SPACE

Vitte der

ISSUED BY

	Date:	0	100	194
12	0	ollars (\$	290	5,
The	CP 8 16		110017	
Se	ction		Division Block	0
MPED	CREDIT 20% Sales Core	67007 77184 —		1
D.F.YO.	80% Sales of Lots	77184 —		
MUL	Opening/ Clasing	77181 —		-
1000	Burial Containers	77182 -		
1989	Handling Fee Recording &	77.185 — 100		-
	Misc Fees Pre-Need	77183 — 63033	24	1000
1	Trust Sales Tax	9022 — 60101	-	-
al	TOTAL PAID	78380 — \$	20	100

E	The state of the s	Date:	1000	. 19
From:	Address:	ander.	1 19	910
-	1992 5 Pares		ollars (\$	-
Lot Grave	Row S	ection		vision
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 20% Sales Care	67007 77184	
Acct. No	CITY AUI	Both Sales of Lots Opening/ Opening/	100 77184 ————————————————————————————————————	
W.O		Burial Containers	100 77182	
BALANCE DUE	MAR 1 0	198 Andling Fee Recording & Misc. Fees	77185 ————————————————————————————————————	
Pre-Need Lot □ At Need □ On Acct □ Pre-need Trust □ Cash □ Check □		Misc. Fees Pre-Need Trust Sales Tax	77183 63033 9022 60101	04 0
AC 212 (Rev. 10-87)	ISSUED BY A MALE	TOTAL PAID	78390	39 00



WHITE TO CUSTOMER CANARY CEMETERY

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY

	<b>14</b> ):	264-3151	APR 07	1889	- 29
		-	Date:	7-7	190/
From Julia Ko	Address	5550	V19 600	(4)	## 109
Morey te - 1	WAR !	20/100-	7	_ Dollars (\$ =	29-00,
InPayment of	Ote Dun	6	Musica	Me	I
				1918	
Lot 4249 Grav	10	Row	Section		Division / O
Invoice No.	NOT VALID FOR PUP	HPOSE STATED UNLESS ST	AMPED CREDIT 20% Sales (	67007 Care 77184 —	3 6 9
Acet. No			60% Sales of Lots Opening/	77184	
wo 2-1676	A DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN		Closing Bunal	77181 — 100	
BALANCE DUE 537,37			Containers Handling Fa	77182 — 100 77185 —	THE PARTY NAMED IN
			Hecording Misc. Fees		777
Pre-Need Lot At Need On Acc	and I		Pre-Need Trust	63033 9022 —	29 00
Pre-need Trust Cash Check	to	16.11 / 11	Sales Tax	60101 78390 —	11/1/23
AC-212 (Rev. 10-87)	ISSUED BY	A De De	TOTAL PAID		0110

WHITE TO CUSTOMER CANARY CEMETERY

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

	2 2 21	Date:	190/
From the Mid of	Address: 359	nedic 1	7900
	regan 7 Ju	10 de Dollan	Must
Lot 4249 Grave	Row Se	ection	Division / O
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 6700 20% Sales Care 7716 80% Sales 16	07 04 00
Acet. No.		of Lots 7711	00 Atav
BALANCE DUE _508.37		Containers 7714	1989
Pre-Need Lot ☐ At Need ☐ On Acct ☐		Recording 8 11 Misc Fees 7711 Pre-Need 630 Trust 90	33 29 (1)
Pre-need Trust Gash Check G	ISSUED BY Andre Mas	Sales Tax 60H 783F	
			-

WHITE CANARY PINK

WHITE TO CUSTOMER CANARY CEMETERY AUDITOR

# PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

	From: Aclina 1 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Address: T530	Date:	15-4 4 8 4 109 collars (\$ 29 6 Au 51	19 20
	Lot 4249 Grave	Row	Section	Division Block	0
*	Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS S	20% Sales Care	67007 C/TV	AURITHA
	Acct No.		80% Sales of Lots Opening/	100 77184 100	CHOR
	BALANCE DUE & 26 3 37		Closing Buriel Containers	77181 - 66 7 100 77182 -	I 0 1989
	BALANCE DUE DO GO		Handling Fee - Recording & Misc. Fees	77185 100 77183	
	Pre-Need Lot ☐ At Need ☐ On Acct ☐ Pre-need Trust ☐ Cash ☐ Check ☐	1, 1	Pre-Need Trust Sales Tax	63033 9022 80101	180
	AC-212 (Rev. 10-87) 726	ISSUED BY BANG IN	TOTAL PAID	78390	00.



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

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From: felling to you	2 Address 555 0.0/	Date:	144 199 ars (\$ 29 65
InPayment of	region to fles	and A	Division //
Lot Grave	RowS	ection	Block
Pre-Need Lot  At Need  On Acct Pre-need Trust Cash Check	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.  OF AUDITOR  JUN 09 1989	20% Sales Care 80% Sales of Lots Opening/ Closing Burial Containers  Handling Fee Recording & Misc. Fees Pre-Neog Trust Sales Tax	77007 77184 100 17184 100 17185 100 17185 100 17185 100 17185 100 17185 100 17185 100 17185 100 17185 100 17185 100 17185 100 17185 100 17185 100 17185 100 17185 1889 1890



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From:	Address: 3330 Ms	Date: Dollars (	8#109	
Lot 4219 Grave	Row Se	ection	Division Block	0
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED -PAID IN THIS SPACE	CREDIT 67007 20% Sales Cara 77184 80% Sales 100 of Lofs 77184	CITY	UDITOR
W.O. 21-1676		Opening/ 100 Closing 77181 Bunal 100 Containers 77182	JUL	4 1989
BALANCE DUE 750.57		Handling Fee 77185 Recording & 100 Misc. Fees 77183		
Pre-Need Lot At Need On Acct Pre-need Trust A Cash Check	1 / 1 / 1 / A	Pre-Need 63033 Trust 9022 Sales Tax 60101 78390	07	80
AC-212 (Rev. 10-87)	ISSUED BY THE MEA	TOTAL PAID 5	29	00



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

[1] [1] [1]		264-3151			0	50
		a ceen	Date:	10	+	19
From:	The King	Address:		ollars (\$	29-	-,
in point	_ Payment of					
Lot	Grave	Row	Section		Division Block	110
Invoice No		NOT VALID FOR PURPOSE STATED UNLESS STAMPER	20% Sales Care	67007 77184 —	Block A	DITON
Acct. No.			80% Sales of Lots Opening/	100 77184 — 100	AUG 10	1
w.o.	100		Closing Burial Containers	77181 — 100 77182 —		1989
BALANCE DUE	101.31		Handling Fee	100 77185 —	1	
Pre-Need Lot  A	Nesd On Acct		Recording & Misc. Fees Pre-Need	77183 — 63033	29	
	ash Check		Trust Sales Tax	9022 — 60101 78390 —		
AC-212 (Rev. 10-87)	7683	ISSUED BY	TOTAL PAID	\$	24	-



WHITE TO CUSTOMER CANARY GEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

\* 264-3151

From: Jacob State	Address: 550 %	Date:	Ollars (\$	4109. 8	
In Payment of	Jacoban II VII	det &	Ec.	and IN	
Lot Grave	Row Se	ection	-	Division O	-
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED -PAID' IN THIS SPACE:	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing	57007 77184 — 100 77184 — 100 77181 —	CITY AU	BATCHE .
BALANCE DUE 392.37		Burial Containers Handling Fee Recording & Misc. Fees	100 77182 — 100 77185 — 100 77183 —	SEP	1 190
Pre-Need Lot	ISSUED BY Hardle Char	Pro-Need Frust Sales Tax TOTAL PAID	63033 9072 — 60101 78390 —	29	90



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY

From helmen for new	a malling -	Date:	ollars (\$	4109 9 10 29.00	99 
11509	Row Se	ection	Alle	Division /	_
Lot Grave	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184	Block	Lam
Acct. No. 9 - 76 76 W.O. 9 - 76 76		80% Sales of Lots Opening/ Closing Burist Containers	77184 — 100 77181 — 100 77182 —	NOV 1	9 1989
Pre-Need Lot		Handling Fee Recording & Misc. Fees Pre-Need Trust	100 77185 — 100 77183 — 63033 9022 —	27	00
Pre-need Trust Cash Check C	ISSUED BY Madra Mira	Sales Tax TOTAL PAID	60101 78390 ——	29	00

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

	264-3151			THE .
		Date:	-9	
From Melaa the	Address:	see Cy	E #109	92111
Fiet.	- Depo Rollar	- Tullo De	ollars (\$ 59	1
In Payment of	Phined My T			
rayment or		- Carlo - Carlo	- GS Thire	1000
Lot 4347 Grave	RowSe	ection	Divisio Block	
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 100	
W.O. E-TLTL		Opening/ Closing Burial	77181	
BALANCE DUE	CITY AUSITOR	Containers Handling Fee	77182 100 77185	
	Mark Street	Recording & Misc. Fees	100 77183	
Pre-Need Lot At Need On Acct	JAN 1 6 1990	Pre-Need Trust	9072	9 00
Pre-need Trust   Cash   Check   Check	level pit	Sales Tax	60101 78390	9 00
AC-212 (Rev. 10-87) 774	ISSUED BY	TOTAL PAID	. 5	100



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

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY 264-3151

From: Melya	Ag-Zhu	Address 5550 Alex	Date:Do	1109, 9- ollars (\$ 29.00	19.98
Lot	Grave	Row So	ection	Division Block	
Invoice 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	Y Warron
BALANCE DUE	46.31		Closing Burial Containers Handling Fee Recording &	77181 100 77182 FEE	2 1998
Pre-Need Lot At Ne Pre-need Trust Cast		ISSUED BY Autority	Misc. Fees Pro-Neori Trust Sales Tax TOTAL PAID	77183 63033 9022 60101 78390	200



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY AUDITOR

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

## MOUNT HOPE CEMETERYAR 2 0 1990

284-3151

	N. T. C.	Date:	2-9		19
From: Dune	Address:		ollars (\$	29.0	
In Payment of	and not				
Lot Grave	RowSe	ection		Division Block	
Acct. No	NOTVALIDEOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burisl Containers Handling Fee Recording & Micc. Fees Pre-Niedd Trust Sales Tax	67007 77184 — 1000 77181 — 100 77181 — 100 77185 — 100 77185 — 100 77185 — 100 77183 — 83033 9022 — 60101 75390 —	29	2
AC-212 (Rev. 10-87)	ISSUED BY MICHELLAND	TOTAL PAID	\$_	29	00



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

CITY AUDITOR

From Marina beautiful	Address 5550 4000	Date: 7	- 19	M.	921
InPayment of	Prosent Dint		Dollars (\$	29,02	
Lot Grave	RowS	ection	141	Division Block	
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Gloeing Burlal Containers Handling Fea Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77185 — 100 77185 — 100 77183 — 80033 9022 — 80161 76390 —	29	a
AG-212 (Rev. 10-87) / 3	ISSUED BY	TOTAL PAID	-	29	00



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA
PROPERTY DEPARTMENT MOUNT HOPE CEMETERY MAY 2 9 1990

From: Melys	F/ 00 - 12	Address: 450 4	Date: _5	-17 E-10	3/1	934
InPaymer	nt of P	to that Dear			Division	
Lot	Grave	Row Se	ection		Block	
NO. E - 1/61/6  BALANCE DUE		NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID' IN THIS SPACE.	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Burisl Containers Handling Fee Recording & Misc. Fees	67007 77184 — 100 77184 — 100 77181 — 100 77182 — 100 77185 — 100 77185 —		
Pre-Need Lot	On Acct Check		Pre-Need Trust Sales Tax TOTAL PAID	63033 8022 — 60101 78360 —	29	a



WHITE TO CUSTOMER CANARY CEMETERY RINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

No 39475

In Payment of Payment	Dylas o	ollars (\$		
		-		
Lot Grave Row Sec	ection		Division Block	
Invoice No	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Buriar Containers Handling Fee Recording & Misc Fees Pre-Need Trust Sales Tax	67007 77184 — 100 77181 — 100 77181 — 100 77182 — 100 77185 — 100 77183 — 65083 — 9022 — 66101 78380	20	a



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

## CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY 264-3151

From: Con and Property	Address: 5550 San and a	Date:	and the state of	. 19_
In Payment of	ollars (\$			
Lot <u>40 %41</u> Grave	Row Se	ection	Div Blo	vision
Acct. No.  W.O.  BALANCE DUE  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 Burial Containers Handling Fee. Recording & Misc. Fees Pre-Need Trust Sales Tax	67007 77184 ————————————————————————————————————	24 00
AC-212 (Rev. 10-87) #888	ISSUED BY	TOTAL PAID	s	29.0



AC-212 (Rev. 10:87)

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

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

78390

TOTAL PAID

Date: \* From: Payment of Division Grave. Row Section Block Lot NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE CREDIT 67007 Invaice No. 20% Sales Care 77284 80% Salos 100 Acct. No. of Lots 77184 Opening/ 100 Clasing 77181 Burial 100 77182 Containers BALANCE DUE 100 77185 Handling Fee Recording & Misc. Fees 100 77183 Pre-Need Lot At Need Pre Need 63033 On Acct Trust 9022 Pre-need Trust Check Cash Sales Tax 60101

ISSUED BY



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From THE IMA MINENE	Address: 55 50 Grates	Date: JU	ollars (\$	44 27	
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Pre-Need Lot  At Need On Acct Pre-need Trust Cash Check	NOT VALIDEOR 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	67007 77184 — 1000 77184 — 1000 77184 — 1000 77185 — 1000 7718 — 1000 7	44	87



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

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Thelma Jones 5550 Genesee Ct. E. #109 San Diego, Ca 92111

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Amount due when paid on, or before.

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Amount due it paid more than 10 days

after due date above.

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ACCOUNT No. E-7676

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Thelms Jones 5550 Genesee E. #109 San Diego, Ca 92111

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ACCOUNT No. E-7676

Breneed Trust

Thelma Jones 5550 Genesce Ct. E. #109 San Diego, Ca 92111

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MRS THELMA M. JONES
ADDRESS APT 100

SAN DIEGO, CA 92111 ZIP

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Thelma Jones 5550 Genesee Ct. E. #109 San Diego, Ca 92111

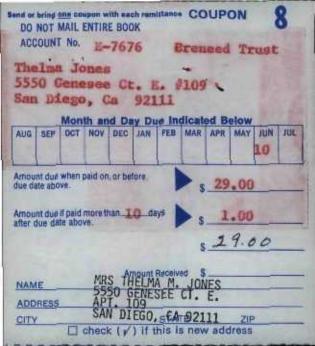
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Thelma Jones 5550 Genesee Ct. E. \$109 San Dieso, Ca 92111

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

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Amount due it paid more than 10 days after due date above.

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Send or bring one couper with each remittance COUPON DO NOT MAIL ENTIRE BOOK ACCOUNT No. 3-7676 The Ima Jones San Diego, Ca Month and Day Due Indicated Below NOV DEC JAN FEB MAR APR MAY JUN JUL AUG SEP OCT Amount due when paid on or before. doe dole above. Amount due if paid more than \_\_\_\_\_\_days after due date above. \$ 29.00 Amount Received S NAME MRS THELMA M. JONES 5550 GENESEE CT. E. ADDRESS CITY

Send or bring one coupen with each remittance COUPON DO NOT MAIL ENTIRE BOOK ACCOUNT No. #-7676

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Month and Day Due Indicated Below

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CITY

# MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 10-3-88

of Ellene	ject to your rules and regulations, to inter the remains
Bind.	neral, date, time Thurs 10/6 1000
Vault/Liner	Shothari. On
	FA
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. War time veteran .	Keliney crity
Lot 47 Grave 6 Row	Section Division/Black
Grave space & Care Fund	need D-5-410
Additional spaces and care fund	D D -
Opening/Closing & Setup	please
Burial Container	
Handling Fees	<b>}</b>
Flower vases - Marker setting fee	
Recording and filing fee	25,00
Alala Paid re	Total Due
Man 69	Balance due
I hereby certify I am the	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 a	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.	Signature
	Address
Signature of recorded holder of Seed	State En God
	Telephone
E 7677	Invoice #

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-7677

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	EILEEN G. UTTER	DACK	SEX Female	Mar. 17.	1005	Oct. 2. 1988	
PLACE OF DEATH		PLACE OF DEATH—COUNTY II	H STATE IF NOT IN CALIFORNIA)	NAME AND ADDE	RESS OF SPO	USE ON OTHER INFORMANT	
PEATHERT	HETELERANDINTON RYERSON AS	CTING AS SUCHI	5201-A Ruffin Ad. San Diego, CA				
	TYPE OF PER	AIT, CHECK ONLY ONE OF T	HE FOLLOWING TYPES OF	DISPOSITION	100		
TX 4 BURIAL IIN	CLUDES ENTOMBMENTI	5. DISINTERMENT AND E	BURIAL IINCLUDES		NT AND BEIN	TERMENT OF CREMATED	
2. CREMATION AND BURIAL (INCLUDES INURNMENT) 6. DISINTERMENT, CREMATION, AND (INCLUDES INURNMENT)				DISINTERMENT OF CREMATED REMAINS AND DISPOSITION OTHER THAN IN A CEMETERY			
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY  7. DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY				FOR CORONER'S USE ONLY			
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATED	MAINS ARE TO BE INTERRE	D	COUNT	San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CREM	ATED DATE CREMATED	SIGNATURE OF PI	ERSON IN CH	ARGE OF CREMATORY	
BURIAL AT SEA OR DISPOSITION OTHER UN IN A CEMETERY CREMATED REMAINS	ADDRESS. NEAREST POINT ON SHOHEL	INE, OH OTHER DESCRIPTION SU	PERCENT TO IDENTIFY FINAL	PLACE AND COUN	TY OF DISPO	SITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS NO	Sewii		10.00		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that the this permit gives no right of unrest	dent under provisions of the l espass and nuisance laws ap	Health and Safety Code, ply and understand that	DATE SIGNED	PPLICANT		
LOCAL REGISTRAR	OF THE CALIFORNIA HEALTH AND SAFETY COO	HIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS FINE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE UTHORITY FOR THE DISPOSITION SPECIFIED IN 1975 POPULIT				RAR ISSUING PERMIT	
CERTIFICATION OF PERSON IN CHANGE OF DISPOSITION	DISPOSITION WAS MADE ON THE	SIGNATURE SIGNATURE	OF PERSON IN HAME OF	ASPOSITION -		MBER OF CREMATED REMAINS APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	0		Ten I		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

# WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

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From: Australia September 11 Payment of Edit	Record 5201-19	Date: // Dollars (5	25.00	) )
,Lot Grave	RowSe	ction	Division Block	AUDITO
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 100 Glosing 77181 - Burlal 100 Containers 77182 - 100 100 100 100 100 100 100 100 100 100	NOV	5 1988
Pre-Need Lot  At Need  On Acct  Pre-need Trust  Cash  Check  AC-212 (New 10-67)	ISSUED BY SANDA MAN	Handling Fee 77185 - Recording & 100 Misc Fees 77187 - Pre-Need 63033 Trust 9022 - Sales Tax 80101 TOTAL PAID \$	35	00

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 16-4-88

You are hereby authorized and instruc	sted, subject to your rules and regulations, to inter the remains
of Juge	de assuread
in a Valle Gry FT	Funeral date, time Wed 10/5 10:00
Church, Chapel, Graveside	BR Hour Tews Colorea 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. War time v	eteran ,
1530	
Lot Grave Row	Section Division/Block
Grave space & Care Fund	2 thomas De
Additional spaces and care fund	The first and the same of the
Opening/Closing & Setup	all the same
Burial Container	550-00
Handling Fees	\$20,00
Flower vases - Marker setting fee	
Recording and filing fee	35.00
Sales taxes	21.45
( Aux	Total Dife
20 P	Paid receipt number 11/188 1026-45
30 No 00-	Balance due
I hereby certify I am the //al	Of the above named decedent
and this is your authority to make disp that I have the right to make this author any liability on account of said author	position of remains as above indicated. I certify and represent orization and I agree to hold Mt. Hope Cemetery harmless from ization and interment.
I hereby authorize the interment in lo	Whense astareda
hold under deed.	13420-7211e/12. E.
Signature of recorded holder of deed	- hatrey anally 4/A. 98373
	Telephone Telephone
	075201
Work Order # <b>E</b> 7678	Acct. # 027960

W.O. # <u>E-7678</u> V.A-1 // '98

\$ 1026.45 San Diego, California

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of the Market Street, San Diego, Ca 92102 DOLLARS with interest from on the unpaid principal at 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as at a nev's fees.

Safety Code authorizes the removal of any remains from a plot for which the purchase price is past due or unpaid.

P. NAME JOHNE ASTANFOA SIGNATURE Winse WA. 98373

CALIF. DRIVERS LIC. # CASTAS -62/RG

Part II, Chapter I, Article 2, Para. 7528 of the State of California Health &

MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE

#### SHIPPED IN FOR INTERMENT

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-7618

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	BRIGITTE MICHELLE CA	STANEDA	SEX	Oct 15, 1964	Sept 28, 1988		
PLACE OF DEATH		Washington	IOR STATE IF NOT IN CALIFORNIA	NAME AND ADDRESS OF SPOUSE OR OTHER INFORMAN' Robert Castaneda - father			
Levis Col	onial/Benbough San D	El Cajon Blvd. iego, CA 92104	F-480	8365 Broadway #11 Lemon Grove, CA 92045			
	TYPE OF PERA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION			
🚨 1. BURIAL IIN	CLUDES ENTOMBMENTI	5 DISINTERMENT AND ENTOMBMENT)	BURNAL (INCLUDES	B DISINTERMENT AND I	REINTERMENT OF CREMATED		
☐ 2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	DISINTERMENT, CRE INCLUDES INURNM		A DISINTERMENT OF CE	THAN IN A CEMETERY		
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY     4 SCIENTIFIC USE		7 DISINTERMENT, CRE	MATION, AND DISPOSITION	FOR CORONER'S USE ONLY			
INTERMENT	NAME AND ADDRESS OF CEMETERY W		REMAINS ARE TO BE INTERRE	ED CO	NIV San Diego		
CREMATION	name and addities of crematory	Shew —	Salesville	SIGNATURE OF PERSON IN	Marie Control of the		
BURIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY SEMATED REMAINS	n/a	Boul	Control of the Contro	PLACE AND COUNTY OF DE	POSITION		
CIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECI	EIVING REMAINS					
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tre this permit gives no right of unrest	dent under provisions of the espais and nuisance laws a	Health and Safety Code, pply and understand that	SIGNATURE OF APPLICANT  DATE SIGNED			
* LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH DE THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE		SIGNATURE OF JOHN HE	STRAN ISSUING PERMIT		
CERTIFICATION OF PERIOD IN CHARGE OF DISPOSITION		TEV DATES SIGNATUR	COLLEW S	DISPOSITION LICENSE DISPOSE	NUMBER OF CREMATED REMAINS IT APPLICABLE		
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ACCRESS OF REGISTRAR OF C	DUNTY OF DEATH					

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

075201 10/18/88 027960 JOANNE CASTANEDA

2-7678

100 072
17181 000072
77182 000072
100 072 77183 000072
100 072 77183 000072
100 072 77185 000072
100 072 77185 000072
100 072 77185 000072

1,026.45 PAID IN FULL

#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 10-4-88

Funeral, date, time		Da. Thothe	10
All Funeral cars must arrive before 3:30 p.m. of regular work day or an extra charge will be appeared billed to undersigned. War time veteran for the following of the above named deceased by the fight to make this authorization and lagree to hold Mt. Hope Cemetery harmless any liability on account of said authorization and interment.  Address  Signature of recorded holder of dead  Address  Signature of recorded holder of dead  Section Division/Stock / Department of the above named deceased by the said the said that have the right to make this authorization and lagree to hold Mt. Hope Cemetery harmless any liability on account of said authorization and interment.  Signature of recorded holder of dead	Mault/Lines 40 A	in a rate of a	4-00
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  Flower vases - Marker setting fee  Recording and filling fee  Sales taxes  Total Due  Division/Btock   20  Faid receipt number  Balance due  Of the above named deceand this is your authority to make disposition of remains as above indicated. I certify and representating has been applied by the right to make this authorization and lagree to hold Mt. Hope Cemetery harmless any liability on account of said authorization and interment.  Thereby authorize the interment in lot I  Signature  Address  State  Zignature  Address  State	Church, Chapel, Graveside Deliver	care : Er cagen car	Wertuary
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  Flower vases - Marker setting fee  Paid receipt number  Balance due  Of the above named decested this is your authority to make disposition of remains as above indicated. I certify and representat I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless any liability on account of said authorization and interment.  Address  Fignature of recorded holder of deed  Fignature of recorded holder of deed	All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge v	will be applied
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  Total Due  Paid receipt number  Balance due  I hereby certify I am the and this is your authority to make disposition of remains as above indicated. I certify and reprethat I have the right to make this authorization and lagree to hold Mt. Hope Cemetery harmless any liability on account of said authorization and interment.  I hereby authorize the interment in lot I Signature of recorded heider of deed	and billed to undersigned. War time veteran	1/ -d/5'le	
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  Total Due  Paid receipt number  Balance due  Thereby certify I am the and this is your authority to make disposition of remains as above indicated. I certify and representant have the right to make this authorization and lagree to hold Mt. Hope Cemetery harmless any liability on account of said authorization and interment.  Thereby authorize the interment in lot I signature of recorded holder of deed  Signature of recorded holder of deed  State  Zignature of recorded holder of deed  State	170 Grava 4-1012-1	Section Division / Street	-12
Additional spaces and care fund  Depening/Closing & Setup  Burial Container  Handling Fees  Flower vases - Marker setting fee  Recording and filing fee  Sales taxes  Total Due  Paid receipt number  Balance due  of the above named deceand this is your authority to make disposition of remains as above indicated. I certify and represent this this your authority to make this authorization and lagree to hold Mt. Hope Cemetery harmless any liability on account of said authorization and interment.  hereby authorize the interment in lot I  Signature of recorded hidder of deed.  Address  State  Z	Grave Now	Section Division/ Bloc	
Burial Container  Handling Fees  Flower vases - Marker setting fee  Recording and filing fee  Sales taxes  Total Due  Paid receipt number  Batance due  Thereby certify I am the 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 lagree to hold Mt. Hope Cemetery harmless any liability on account of said authorization and interment.  Thereby authorize the interment in lot I signature  Address  Signature of rescorded holder of deet  Signature of rescorded holder of deet	Grave space & Care Fund		55.00
Burial Container  Handling Fees  Flower vases - Marker setting fee  Recording and filing fee  Sales taxes  Total Due  Paid receipt number  Balance due  Of the above named deceared 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 any liability on account of said authorization and interment.  Thereby authorize the interment in lot I hold under deed.  Signature  Figure of recorded holder of deed.	Additional spaces and care fund		
Burial Container  Handling Fees  Flower vases - Marker setting fee  Recording and filing fee  Sales taxes  Total Due  Paid receipt number  Balance due  of the above named deceared this is your authority to make disposition of remains as above indicated. I certify and represents I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless in any liability on account of said authorization and interment.  hereby authorize the interment in lot I signature  Fignature of recorded holder of deed  Signature  Address  State  Z	Opening/Closing & Setup		90.00
Recording and filling fee  Sales taxes  Total Due  Paid receipt number  Balance due  chereby certify I am the chart I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless any liability on account of said authorization and interment.  Thereby authorize the interment in lot I signature of recorded holder of deed.  Signature of recorded holder of deed.			
Recording and filing fee  Sales taxes  Paid receipt number  Balance due  of the above named dece and this is your authority to make disposition of remains as above indicated. I certify and represent I have the right to make this authorization and lagree to hold Mt. Hope Cemetery harmless any liability on account of said authorization and interment.  Thereby authorize the interment in lot I signature  Address  Signature of recorded holder of deed.	Handling Fees		
Paid receipt number  Balance due  Chereby certify I am the Address  Signature of recorded holder of deed  Total Due  Balance due  Balance due  of the above named dece and the signature of the above named dece and the signature of recorded holder to hold Mt. Hope Cemetery harmless than I labellity on account of said authorization and interment.  Signature  Signature  Address  Total Due  Total Due  Balance due  Signature  Address  Total Due  Address  Total Due  Total Due  Signature  Address  Total Due  Address  Total Due  Total Due  Balance due  Signature  Address  Total Due  Total Due  Address  Total Due  Balance due  Balance due  Address  Total Due  Total Due  Address  Total Due  Total Due  Balance due  Balance due  Address  Total Due  Total Due  Address  Total Due  Balance due  Balance due  Address  Total Due  Balance due  Balance due  Balance due  Address  Total Due  Balance due  Balance due  Balance due  Balance due  Balance due  Address  Total Due  Balance due  Bal	Flower vases - Marker setting fee		
Paid receipt number  Balance due  hereby certify I am the hereby certify I am	Recording and filing fee		
Paid receipt number  Balance due  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 Cemetery harmless 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.			
hereby certify I am the			145,00
hereby certify I am the	OBIO DE Paidre	ceipt number	
hereby certify I am the	11.500		
and this is your authority to make disposition of remains as above indicated. I certify and repre that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless 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.  State  Z	11110	Dului ice duo	
that I have the right to make this authorization and I agree to hold Mt. Hope Cemetery harmless 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 States	0 100		
I hereby authorize the interment in lot I Signature hold under deed.  Signature of recorded holder of deed  State  Z	hereby certify I am the		
hold under deed.  Address  Signature of recorded holder of deed  State  Z	hereby certify I am the	of remains as above indicated. I certify and I agree to hold Mt. Hope Cemetery I	and represen
Signature of recorded holder of deed State 2	I hereby certify I am the	of remains as above indicated. I certify and I agree to hold Mt. Hope Cemetery I	and represen
Signature of recorded holder of cleat State Z	hereby certify I am the	of remains as above indicated. I certify and I agree to hold Mt. Hope Cemetery I and interment.	and represen
	hereby certify I am the	of remains as above indicated. I certify and I agree to hold Mt. Hope Cemetery I and interment.	and represen
Telephone	hereby certify I am the	of remains as above indicated. I certify and I agree to hold Mt. Hope Cemetery I and interment.	and represen
22-71/	hereby certify I am the	of remains as above indicated. I certify and I agree to hold Mt. Hope Cemetery I and interment.  Signature Address	and represen
175211	hereby certify I am the	of remains as above indicated. I certify and I agree to hold Mt. Hope Cemetery I and interment.  Signature  Address  State	and represen harmless fron
Work Order # E 7679 Acct. # 2009 95 2	hereby certify I am the	of remains as above indicated. I certify and I agree to hold Mt. Hope Cemetery I and interment.  Signature Address State Telephone	and represen harmless fron

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E- 7679

NAME OF DECEDEN	T.		SEX	DATE OF BIRTH	DATE OF DEATH		
Adriene 1	La Mothe		Male	Jan. 28	, 1922 Oct. 1, 1988		
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH-COUNTY	IOR STATE # NOT IN CALIFORNIA		NAME AND ADDRESS OF SPOUSE OR OTHER INFORMANT		
El Cajon		San Diego		Public Administrator			
Bl Cajon	SS OF FUNERAL DIRECTOR FOR PERSON AC Mortuary Mollison Ave El Caj	on, CA 92020	F-1022	5201-A	t Burial Officer Ruffin Road go, CA 92123		
	TYPE OF PERA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES C	OF DISPOSITION			
1 BURIAL IIN	ICLUDES ENTOMRMENT)	5 DISINTERMENT AND ENTOMBMENT)	BURIAL (INCLUDES	B DISINTERMENT AND REINTERMENT OF CREMATED REMAINS INCLUDES INURNMENT)			
CREMATION AND BURIAL (INCLUDES INURNMENT)     B. DISINTERMENT, CREMATION, AND BURIAL INCLUDES INURNMENT)					DISINTERMENT OF CREMATED REMAINS AND DISPOSITION OTHER THAN IN A CEMETERY		
3 CHEMATIO CEMETERY  4 SCIENTIFIC		7. DISINTERMENT, CRE	MATION, AND DISPOSITION	FOR CORONER'S USE ONLY			
INTERIMENT	NAME AND ADDRESS OF CEMETERY W Mt. Hope Cemetery - 3	751 Market St.	- San Diego, CA		San Diego		
CREMATION	MAN Carlboar	Box - To	a Clovel on		PERSON IN CHARGE OF CHEMATORY		
BURIAL AT SEA OR DISPOSITION OTHER IN A CEMETERY EMATED REMAINS	ADDRESS, MEAREST POINT BY SHORED	NE SOTHER DESCRIPTION	SUFFICIENT TO IDENTIFY FINA	L PLACE AND COUR	VITY OF DISPOSITION		
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECI	EIVING REMAINS	al Dha				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tre this permit gives no right of unresh	dent under provisions of the espass and nuisance laws o	e Health and Safety Code, apply and understand that	DATE SIGNED	APPLICANT		
LOCAL REGISTRAR	THIS PERMIT IT, ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE	OCT 5 198	8 SIGNATURE L	all & Campas, M.D.		
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON TO	TEH GATES SIGNATURE	eoyew tels	DISPOSITION	LICENSE NUMBER OF CREMATED REMAIN DISPOSER, IF APPLICABLE		
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH					

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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/0-4-88

You are hereby authorized and instr	1 11	egulations, to inter	the remains
of OKNA	ue Luster	7	0
	Funeral date, time	u 10/11	dan
Church, Chapel, Graveside	wesede Du	exwood	_ Mortuary.
All Funeral cars must arrive before	3:30 p.m. of regular work day or	an extra charge wil	Il be applied
and billed to undersigned. War time	veteran		
199 4		2	11
Lot C Grave Ro	ow Section	Division/Block	11_
Grave space & Care Fund			1000
Additional spaces and care fund			
Opening/Closing & Setup		1	20. a
Burial Container			10000
		100	W.01
Handling Fees	4		75-0
Flower vases - Marker setting fee	j[		25 1
V.			10
Sales taxes			787
Minder of the co	Total Do		7 17
[0,10	Paid receipt number 36	50/ 83	6.40
1 well		Balance due _	-
I hereby certify I am the F/AN	ver	_ of the above nam	and also need needs
and this is your authority to make di that I have the right to make this aut any liability on account of said auth	isposition of remains as above i horization and I agree to hold Mt	ndicated. I certify an	nd represent
I hereby authorize the interment in hold under deed.	lot I Signature 4220 M	MARKET S	T
Signature of recorded holder of deed	SAN OF	5088	77102 Zip Coda
E 7680	Invoice #		
Work Order # E 100U	Acct. #		

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

	U	SE BLACK INK-	MAKE NO ALTER	ATIONS OR ERASURE	s E	-76	86
NAME OF DECEDEN	п			SEX	DATE OF BIRTH		DATE OF DEATH
Johnnie Lee Tucker			Male	April 27	1928	Oct. 2. 1988	
PLACE OF DEATH	CITY OR TOWN	PLACE OF DEATH.	-COUNTY FOR STA	THE NOT IN CALIFORNIAL	NAME AND ADD	RESS OF STY	OUSE OR OTHER INFORMANT
San Diego NAME AND ADDRESS OF FUNERAL DIRECTOR (OR PERSON AC		TING AS SUCHI CAUFORNA LICENSE MUMBER		Michaelyn Rommel-Friend			
Greenwood 1	Nort. I-805 & Imperial	. San Dies	O. CA. F-	343	4220 Mari		92102
	Annual constant to the	A STATE OF THE PARTY OF THE PAR	Service and Company	OTHER WHITE WILLIAM CO.	and the same of the same	,	74106
	TIPE OF PERW	III, CHECK GIVET	ONE OF THE PO	OLLOWING TYPES OF	DISPOSITION		
DE 2 CREMATION AND BURIAL INCLUDES INURNMENT)		ENTOMRMENTI		B DISINTERMENT AND REINTERMENT OF CREMATED REMAINS UNCLUDES INURNMENTS  DISINTERMENT OF CREMATED REMAINS AND DISPOSITION OTHER THAN IN A CEMETERY			
CEMETERY  A SCIENTIFIC USE		7 DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY  10. DISPOSITION PENDING			
INTERMENT	NAME AND ADDRESS OF CEMETERY WITH THE COMMETTER OF COMMETTER OF CREMATORY WITH THE CREMATORY WITH THE COMMETTER OF CREMATORY WITH THE CREMATORY	Market St	reet. San	Diego. CA.		100000	TY  n Diego  HARGE OF CREMATORY
CHEMATION	N/A SY GILV	ran			<b>&gt;</b>		E BROWN BL
BURIAL AT SEA OR DISPOSITION OTHER HAN IN A CEMETERY CREMATED REMAINS	ADDRESS, NEAREST PONT ON SHOREL	-	Level	NT TO IDENTIFY FINAL	PLACE AND COUN	ITY OF DISPO	SITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	EVING REMAINS	Summar 1		Maria S		
ACKNOWLEDGMENT  OF APPLICANT  This is to certify that I am the per remains of the above named decean and I hereby acknowledge that tree		rson having the right to control the disposition of the dont under provisions of the Health and Safety Code,			SIGNATURE OF APPLICANT		
		spass and nuisance laws apply and understand that icted access to property not owned by me.		DATE SIGNED			
LOCAL REGISTRAR	THE PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE	4.00	PATE PERMIT ISSUED 7 1988	SIGNATURE OF	2 L. Z.	HAR ISSUM DAMIT
CERTIFICATION OF PERSON IN CHARSE OF DISPOSITION	DISPOSITION WAS MADE ON	TER DATE:	SIGNATURE OF PE	RSON IN CHARGE OF D	DISPOSITION		IMBER OF CREMATED REMAINS IF APPLICABLE
IF DISPOSITION IS 10 OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH					

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFICATION. OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFICATION. OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

From: Payment of Payme	Address: Polystanie	Date: 10 Mg	Nº 36807
Invoice No  Acct. No  W.O.   7680  BALANCE DUE   On Acct   Pre-Need Lot   Cash   Check   Acceptable Lot   At Need   Check   Acceptable Lot   A	NOT VALID FOR PURPOSE STATED UNLESS STANFED FOR PAID IN THIS SPACE.  OCT 14 1988	### CREDIT ### 57007 ### 5	Division // 3000 00 200 00 145 00 00 30 00 00 00 00 00 00 00 00 00 00

#### MT. HOPE CEMETERY

#### INTERMENT'ORDER

City of San Diego

Date 16-5-88

of	milleran,
in a Ventryline Full	meral, date, time 1/Am - 10/5/88 -
Church, Chapel, Graveside Mo Seru	were Mayer Mortus
	of regular work day or an extra charge will be applie
and billed to undersigned. War time veteran .	- the Dupoth -obbin
170 11- middle	1 12
ot IU Grave T Row Top	Section Division/Block
Grave space & Care Fund	55.0
Additional spaces and care fund	
Opening/Closing & Setup	90.00
Burial Container	
Handling Fees	
Flower vases - Marker setting fee	
Recording and filing fee	
Sales taxes	We a
A CVZ	Total Due
P No 10 s	eceipt number
- 100 DA	Balance due
D 11.	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	of remains as above indicated. I certify and represe n and I agree to hold Mt. Hope Cemetery harmless fro
any liability on account of said authorization a	and interment.
I hereby authorize the interment in lot I	
hold under deed.	Signature
Signature of recorded holder of deed	Address
	Siane Zip (
	Telephone
	075210
	Invited # (//20/1)
Work Order # E 7681	Acct. # 0009525

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-768

NAME OF DECEDENT  Alex Mittleman			sex Male	Dec.6,1960	Sept. 28,1988	
PLACE OF DEATH—CITY OR TOWN San Diego  NAME AND ADDRESS OF FUNERAL DIRECTOR KON PERSON AND MAYER MORTURY 2859 Adamssave.		PLACE OF DEATH—COUNTY FOR STATE IF NOT IN CALIFORNIAN		NAME AND ADDRESS OF SPOUSE OR OTHER INFORMANT Public Administrator 5201-A Ruffin Road		
			1424	San Diego, C	The state of the s	
	TYPE OF PER	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	OF DISPOSITION		
TI I BURIAL (INCLUDES ENTOMBMENT)		S. DISINTERMENT AND BURIAL (INCLUDES ENTOMBMENT)		8. DISINTERMENT AND REINTERMENT OF CREMATED REMAINS (INCLUDES INDRINMENT)		
2 CREMATION AND BURIAL (INCLUDES INURNMENT)  2 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY  4 SCIENTIFIC USE		O. DISINTERMENT, CREMATION, AND BURIAL IINCLUDES INURNMENT)  7. DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		DISINTERMENT OF CREMATED REMAINS AND DISPOSITION OTHER THAN IN A CEMETERY		
				FOR CORONER'S USE ONLY  10 DISPOSITION PENDING		
INTERMENT	Mt. Rope Cemetery	HERE REMAINS OR CREMATED	REMAINS ARE TO BE INTERE		n Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY W	ARE HEMANS ARE TO SE CREM	MATE CHEMATED	MONATURE OF PERSON IN	CHARGE OF CREMATORY	
BUBIAL AT SEA OR OUSPOSITION OTHER LIAN IN A CEMETERY DEMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREI	H - 4 CL	Stee Har	LELACE AND COUNTY OF DIS	POSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	South	Side-	op		
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the peremains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	dent under provisions of the espass and nuisance laws as	Health and Safety Code, oply and understand that	SIGNATURE OF APPLICANT  DATE SIGNED		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE 4. OO	DATE PERMIT ISSUED	F-10 10 4 62	TRAR ISSUING SERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISEDSHION JULAS MADE AND	SIGNATURE SIGNATURE	CON EN TO		NUMBER OF CREMATED REMAINS 1, IF APPLICABLE	
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH			and the	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 10-5-88

Muss. C	ect to your rules and regulations, to inter the remains
of Thursday	Januar Worker N
valio rinii 7	neral date, time there 10/6 from
Church, Chapel, Graveside	Mortuary.
All Funeral cars must arrive before 3:30 p.m. o	of regular work day or an extra charge will be applied
and billed to undersigned. War time veteran _	
Lov/33 Grave 6 Row	Section Division/Block / 2
	BE A
Grave space & Care Fund	2/3,00
Additional spaces and care fund	200 -0
Opening/Closing & Setup	350.00
Burial Container	F/S.00
Handling Fees	170,00
Flower vases - Marker setting fee	
Recording and filing fee	35.00
Sales taxes	[1.34]
	Total Due
Paid re	peipt number 36/1/ 400.00
1/190	Balance due (10/0-3)
1 antal	5. X Milles
and this is your authority to make disposition of	of the above named decedent of remains as above indicated. I certify and represent
that I have the right to make this authorization a any liability on account of said authorization a	and lagree to hold Mt. Hope Cemetery harmless from
	La shar Jah Julen
I hereby authorize the interment in lot I hold under deed.	Suparay 5
Contraction of the Contraction o	AND THE PARTY OF T
Signature of recorded holder of dead	Scale 12 9 31 - 210 Code
	Telephone
212	00000
E 7682	Invoice # 015 doo
Work Order # _ (DOG	Acat. 11 0 2 79 57

NOTE

KI OD		
706.37	San Diego,	California

W.O. # E-7682 October 5 1988

30 days after date for val	ue received, the undersigned maker promises to pay to Mt. Hope	
Cemetery or San Diego City	Treasurer or order at 3751 Market Street, San Diego, Ca 92102  DOLLARS with interest from on the unpaid principal at the rate of 12 percent per annuments.	
the sim of Aluen	wasted of 2/100 DOLLARS with interest from	
22-6-38	on the unpaid principal at the rate of 12 percent per annu	п,

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 had agains his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

Part II, Chapter I, Article 2, Para. 7528 of the State of California Health &

purchas	Code authorizes the removal of any remains fro	
PR NAME_	Brenda lates SIGNATURE/STU	El Can CA 90021
ADDRESS	1490 Oakdale ani#3	EX CAP , CH POLL 1
CALIF. DRIVE	ERS LIC. # / POOD/D/D	289 1697



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Nº 36777

rom:	Address: 1215 0	Date: 10-	5 10 8C
n Payment of	were Hm itten	Dollars (\$	12296
ot Grave	RowSe	ection	Division / Block
nvoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	CPEDIT 67057 20% Sales Care 77184 —	79 00
N.O. 5 - 76 6 2	CITY AUDITOR	80% Sales 100 of Lots 77184 — Opening 100 Closing 77181 — Bunai 100	500
BALANCE DUE	OCT 7 1988	Containers 77182 — 100 Handling Fee 77185 — Recording & 100 Misc Fees 77183 —	
Pre-Need Lot		Pre-Need 63033 Trust 9022 — Sales Tax 60101 78390 —	
CG-212 (Rev. 10-87)	ISSUED BY	TOTAL PAID \$	40000

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7682

NAME OF DECEDEN	T.		SEX	DATE OF BIRTH	DATE OF DEATH
Murry Hamilton Doxey, Jr.			Male	Sept. 30,	1928 Oct. 2, 1988
PEACE OF DEATH CITY OR TOWN		The state of the s		Brenda Do	RESS OF SPOUSE OR OTHER INFORMANT Key Tates - Daughter
NAME AND ADDRESS OF FUNERAL DIRECTOR ION PERSON AN Anderson-Ragsdale Mortuary 5050		THE RESERVE TO SELECTION OF THE PERSON OF TH		El Cajon,	CA 92101
	# TYPE OF PERA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION	
1 BURIAL ON	CLUDES ENTOMBMENT)	5. DISINTERMENT AND ENTOMBMENT)	BURIAL IINCLUDES		NT AND REINTERMENT OF CREMATED INCLUDES INJANMENT)
	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREM			INT OF CREMATED REMAINS AND N OTHER THAN IN A CEMETERY
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 4 SCIENTIFIC USE		7 DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY  10. DISPOSITION PENDING	
INTERMENT NAME AND ADDRESS OF CEMETERY WHERE REMAINS OF CREMATED REMAINS ARE TO BE INTERRED San Diego. CA San Diego				San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY W		ATED DATE CREMATED	SIGNATURE OF P	ERSON IN CHARGE OF CREMATORY
BURIAL AT SEA OH DISPOSITION OTHER THAN IN A CLIMETERY OF SEMATIO REMAINS	ADDRESS, NEAREST POINT ON SHORELI	NE. OR OTHER DESCRIPTION SI	JFFICIENT TO IDENTIFY FINAL	PLACE AND COUN	TY OF DISPOSITION
LENTIFIC USE	NAME AND ADDRESS OF FACILITY RECI	EIVING REMAINS	NEW COLUMN	IN THE	
ACKNOWLEDGMENT OF  This is to certify that I am the person having the right to control the disposition of the remains of the above named decedent under provisions of the Health and Safety Code,		SIGNATURE OF APPLICANT  DATE SIGNED			
APPLICANT and I hereby acknowledge that tresposs and nuisance laws apply and understand that this permit gives no right of unrestricted access to property not owned by me.					
• LOCAL REGISTRAR	THIS PERBUT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COC AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE	OCT 6 1988	Dorall	& Campas, M.D. MM
GERTIFICATION OF PERSONAL CHARGE OF DISPOSITION	DISPOSION WAS MADE ON IEN	96/88 SIGNATURE	ESPENDING THE	DISPOSITION	LICENSE NUMBER OF CREMATED REMAINS DISPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF San	Diego P.O.	Box 85222 Diego, CA 921	38-5222	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

CITY OF SAN DIEGO AUDITOR & COMPTROLLER REPORT NO. C65-102 PAID INVOICE REPORT BY DEPARTMENT AS OF 12/13/88 DATE: 12/13/88 TIME: 220132 PAGE: 5

KEPUKI NU. C65-102		AS OF 12/13/88		THE COURSE OF TH
DEPARTMENT 072 PROI	PERTY DEPT-MT HOPE CEMETERY			
INV INV ACCT	CUSTOMER NAME FUND DEPT DRG ACCT	PAYM PD PAYM DATE BY REF NO DPER BN/EQ FACILI	AMOUNT PAID AMOU AMOUNT APPLIED	UNT BILLED UNPAID BALANCE
075200 10/18/88 027959	BRENDA TATES 100 072 77181	12/08/88 CK 49-064302	20.00	706.37 PARTIAL PAYMENT
E-7682	100 072 77181 100 072 77182 100 072 77183 100 072 77185 60101 78390	000072 000072 000072	20.00 9.92 4.95 0.99 4.81 0.33	*

MY. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

	11-5-58
Falin "Lois	" A Coulded
You are hereby authorized and instructed, subject	t to your rules and regulations, to inter the remains
of Selec (ACA tel	(K) D. Teyler,
in a Bell Lenn Fuga	ral, date, time Mond /B// NAM
Church, Chapel, Graveside Junk E	tone Calif. Bullal Mortuary.
All Funeral cars must arrive before 3:30 p.m. of	egular work day of an extra charge will be applied
and billed to undersigned. War time veteran	
17/ - 1	1 12
Lot / Grave Row	Section Division/Stock
Grave space & Care Fund Surg	a Burnal 3000
Additional spaces and care fund	none
Opening/Closing & Setup	3.00=
Burial Container	Vault Jene 100 at 115
Handling Fees	741-170
Flower vases - Marker setting fee	9
Recording and filing fee	3900
Sales taxes	74/50 to 13/1
30000150	Total Due 9.00 - 10110
Paid rece	ipt number 36805 150
Bally	3670S
I hereby certify I am the	of the above named decedent
that I have the right to make this authorization an	remains as above indicated. I certify and represent diagree 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.	Signaria Signaria
Hold dilber deed.	* 840 Scraemento ane
Signature of recorded holder of deed	* Spring Valley CA SZOZZ
	F (619) 697-1754
* 12	M = 199
West Outer # E 7683	Invoice # 0 10 + 0
Work Order # L 1003	Acet. N Dal 1750

19.00	-	-	-
N		-	- 14
1/3			88

\_\_\_\_ San Diego, California

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treashrer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of Company of the unpaid principal at 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

PRINT NAME

SIGNATURE

ADDRESS

CALIF, DRIVERS LIC. #

N3180527

MAKE ALL PAYMENTS AT MT. HOPE CEMETERY OFFICE

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-6783

	U	SE BLACK INK-MAKE NO ALTER	ATIONS OR ERASURE	5	
NAME OF DECEDEN	AAKA Felix Dean C Jalik Dean C		Male Male	9-10-1952	10-2-1988
PLACE OF DEATH—CITY OR TOWN PLACE OF DEATH—COUNTY FOR STATE OF NOT IN CAUFERROAD  ** Brooklyn  Kings		NAME AND ADDRESS OF SPOUSE OR OTHER INFORMANT Dorothy Cuyler- Mother			
MAME AND ADDRES	IA CREMATION AND BURIAL CHAPE 5602 El Cejon Blvd.	Pris as buchi	1357	840 Sacramer Spring Valle	TOTAL STREET,
1. 1	San Diego, CA 92115 OF PERA	AIT, CHECK ONLY ONE OF THE F	OLLOWING TYPES OF	DISPOSITION	
1 ITURIAL IN	CLUDES ENTOMEMENT)	5 DISINTERMENT AND BURIAL ENTOMBMENT)	L BNCLUDES 1	B DISINTERMENT AND P	
	N AND BURIAL INCLUDES INURNMENT)	6 DISINTERMENT, CREMATION (INCLUDES INCRINMENT)	N, AND BURIAL	9. DISINTERMENT OF CR DISPOSITION OTHER	
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY 5		7 DISINTERMENT, CREMATION OTHER THAN IN A CEMETE	HY	FOR CORONER'S USE ONLY	
INTERMENT	NAME AND ADDRESS OF CEMETERY W	-4470 Hilltop Dr	. San Dieg	o. CA	San Diego
CREMATION	RIA Metal Lev	w Lock Seal	lee	SIGNATURE OF PERSON IN	
EURIAL AT SEA OR DIEFOSITION OTHER THAN IN A CEMETERY EMATED REMAINS	11/A Bell Line	win - Lat" as	mid at /i		POSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY HECK	EIVING REMAINS			THE RELLEVAN
ACKNOWLEDGMENT  OF  APPLICANT  This is to certify that I am the person having the right to control the disposition of the remains of the above named decedent under provisions of the Health and Safety Cod and I hereby acknowledge that tresposs and nuisance laws apply and understand the this permit gives no right of unrestricted access to property not owned by me.		h and Safety Code, and understand that	D		
LOCAL *REGISTRAR	AL THIS FERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS AMOUNT OF FEE PAID ATT PERMIT ISSUED		Donall & Can	STRAR ISSUED TERMIT	
CERTIFICATION OF MIRSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON 10/		new The	SENSON LICENSE DISPOSER	NUMBER OF CREMATED REMAINS A. IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	N/A		7		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151	Nº 36805
S. Carlotte	From Doutty Cuffer In Sund or	Address: 840 Lecramons	Date: 19 92077 Dollars (\$ 300 2
	Payment of State   17/ Grave	RowSe	ection Division /2
*	Acct. No. F 7683	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE  CITY AUBITOR	CREDIT 20% Sales Cate 77184 00 00 00 00 00 00 00 00 00 00 00 00 00
)	Pre-Need Lot	OCT 14 1988	Handling Fee 77185  Ascording & 100  Misc. Fees 77183  Pre-Need 69033  Trust 9022  Sales Tax 60101  76390  TOTAL PAID \$

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36927

From Hotelley Can G	Address: 240 11-01	Date:	ne So
In Payment of	lif lugles	Dolla	Division Division
Pre-Need Lot  At Need B On Acct Pre-need Trust Cash Check CAST	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CRECAT 20% Sales Care 77 80% Sales of Lots Opening Closing 77 Burial Containers 77 Harding Fee 77 Recording & Misc. Fees 77 Pre-Need 55 Trust 66	184 100 184 100 184 100 182 100 182 100 185 100 183 100 183 100 183 183 183 183 183 183 183 183 183 183

#### OFFICIAL RECEIPT CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY CEMETERY PINK AUDITOR MOUNT HOPE CEMETERY 264-3151 Dollars (\$ Division Row Section Block NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE. CREDIT 57007 77384 Ivoice No. 20% Sales Care 80% Sales of Lots Acct. No Opening/ Closing 771B1 Buriat 100 Containers BALANCE DUE Handling Fee 100 Recording & Misc Fors 77163 On Acct Pre-Need 53033 Pre-Need Lot 9022 Trust Pre-need Trust Check Salen Tax 60101 78390 ISSUED BY TOTAL PAID AC-212 (Rev 10-87)

# CAN SANK

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

	103 11.53	100
Date:	12-21	100
Date		- 10

1103 11		Date.	200
From: M. Cuy Cay	Address:		-
Mrca Lanar	ed 13/100	D	ollars (\$ 300+00)
In Payment of	elex austres	Call	uncet
•	0		
Lot Grave	Row So	ection	Division / 2
Invoice No. 012 199	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 20% Sales Care	67007 77184
Acct. No. 0217956		80% Sales of Lots	77184 <u>C77</u> 2
wo = -7663		Opening/ Closing Bunal	77181 AUSING
BALANCE DUE		Containers	100 JAN 2
	A STATE OF STREET	Handling Fee Recording & Misc. Fees	77185
Pre-Need Lot  At Need  On Acct	1 1 1	Pre-Need Tryst	63033
Pre-need Trust Cash Check C	Markla 11	Sales Tax	78390
AC-212 (Rev. 10-67)	IRSUED BY.	TOTAL PAID	20000

075199 10/18/88 027958 DDRDTHY CUYLER  100 072 77181 000072  100 072 77182 000072  100 072 77183 000072  100 072 77185 000072  100 072 77185 000072  77185 000072	106.50 56.19 17.56 6.15 25.46 1.14	606.50 PARTIAL PAYN	OD MENT
---	---	---------------------	------------

CITY OF SAN DIEGO AUDITOR E COMPTROLLER REPORT NO. C65-102 PAID INVOICE REPORT BY DEPARTMENT AS OF 12/09/88

DATE: 12/09/88 TIME: 200101 PAGE: 6

REPORT	NO. C65-	102					AS	OF 12/0	19/88			PAGE 4
DEPART	MENT 072	PRO	PERTY DEP	T-MT HO	E CEME	TERY						
INV	INV	ACCT NO	CUSTOMER	NAME DEPT	DRG	ACCT	J/0	PAYM DATE OPER	PD PAYM BY REF NO BN/EQ FACILI	AMOUNT PAID	AMOUNT BILLED	UNPAID BALANCE
075199	2-76	027958	DOROTHY 100 100 100 100 60101	CUYLER 072 072 072 072 072		77181 77182 77183 77185 78390	00007 00007 00007 00007	2 2	CA 37015	200.00 105.52 32.98 11.54 47.82 2.14	606.50	PARTIAL PAYMENT

## MT. HOPE PEMETERY INTERMENT ORDER

City of San Diego

Date 10/6/88

			//	
You are hereby authorized and	instructed, subject	to your rules and	egulations, to int	er the remains
of Jacky	line Lou	ine D	nown	ShiNe
ina T. S. Valel	E Europe	I, date, time	1.1-21	M 10/12
Vautt/Einer	The + 21	& Rag	2000	
Church, Chapel, Graveside	Section 1 14	- Hand		Mortuary.
All Funeral cars must arrive be		/-	an extra charge	will be applied
and billed to undersigned. Wa	r time veteran	<u>D</u> .		
101 159 Grava	2 Row	Section /	Division/	- 12
0.00	1.0	0 : 0 0	Division/ Law	_ @
Grave space & Care Fund	sengle (	Secreal &	pere	200 =
Additional spaces and care fur	nd	***************		
Opening/Closing & Setup				3200
Burial Container Con	inte las	elt		17500
Handling Fees La	bor fu	T		1700
Flower vases - Marker setting	faa			-
		***************************************	************	36°°
Recording and filing fee				11.37
Sales taxes	*************	************		101137
10,3000		Total Du	790	340-0
o las	Paid receip	t number 36	× 1/0	74000
al 0			Balance due	11101
I hereby certify I am the	lister			611.31
and this is your authority to ma	ske disposition of re	mains as above in	of the above no ndicated. I certify	and represent
that I have the right to make the any liability on account of said	authorization and	nterment.	. Hope Cemetery	harmless from
		Zu S	no Jal	heran -
I hereby authorize the interme hold under deed.	nt in lot I	Signature	rac ja	#0
Titals silver south		3599 -	Imperial 1	the a
Signature of recorded holder of deed		SAN Die	290, Calif	93101 No Code
		239-	5731	
		Telephone	ne of	1
100		Invoice #	15/90	
Work Order # E 7684		Acct. # Q	2795	7
PY-583 (REV. 8-85)		MUUL II		

NOTE

	17	137
\$_	611	-

San Diego, California

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of Sex Survey Swentyone 37/00 DOLLARS with interest from November 10, 1988 on the unpaid principal at 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

RINT NAME Lera MAR DOHNSON SIGNATURE Lera

ADDRESS 3299 Imperial Ave #8

San Diego, Ca

95100

CALIF. DRIVERS LIC. # 40560893

#### PERMIT FOR DISPOSITION OF HUMAN REMAINS

E-7684

•		JSE BLACK IN	NK-MAKE NO ALTER	ATIONS OR ERASURE				
OF DECEDEN				SEX	DATE OF BIRTH		DATE OF DEATH	
Jacque	aline Louise Brown-Sh	ine		Female	March 27,	1954	October 5,	1988
	LACE OF DEATH—CITY OR TOWN PLACE OF DEATH—COUNTY IOR STATE IF NOT IN CALIFORNIA NAME AND ADDRESS OF SPOUSE C						IMANT	
Natio	nal City	San D	liego		Leroy Shi			
NAME AND ADDRES	S OF FUNERAL DIRECTOR SON PLUSON A	EDED E	doral BI CALIFO	MINIA LICENSE HUMBER	3214 "L"			
Anders	son-Ragsdale Mortuary	San Die	go, CA. 13	29	San Diego	, Call	f. 92102	
	TYPE OF PER	MIT, CHECK	ONLY ONE OF THE F	OLLOWING TYPES OF	DISPOSITION			
1 BURIAL IIN	CLUDES ENTOMBMENT)		INTERMENT AND BURIA	UNCLUDES	8 DISINTERMEN REMAINS (IN		INTERMENT OF CREMA	TED
□ 2 CREMATION	N AND BURIAL (INCLUDES INUBNMENT)		INTERMENT, CHEMATION LUDES INURNMENT)	I, AND BURIAL			MATED REMAINS AND AN IN A CEMETERY	
CEMETERY	A AND DISPOSITION OTHER THAN IN A		INTERMENT, CREMATION		FOR CORONER'S USE DNLY			1
☐ 4. SCIENTIFIC	USE	OTHER THAN IN A CEMETERY			10 DISPOSITION PENDING			
	NAME AND ADDRESS OF CEMETERY W	HERE REMAIN	S OR CREMATED REMA	NS ARE TO BE INTERRE	5	COUN	BY	
NTERMENT			ket St. San D			Sa	n Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY Y				SIGNATURE OF PE	RSON IN C	HARGE OF CREMATOR	Y
HIAL AT SEA OR DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED BEMAINS	ADDRESS, NEAREST POINT IN SHORE	DE OR OTHER	R DESCRIPTION SUFFICE	TO IDENTIFY FINAL	PLACE AND COUNT	Y OF DISP	OSITION	
SCIENTIFIC	NAME AND ADDRESS OF FACILITY REC	EIVING REMAI	NS	TOTAL TOTAL				
USE	N/A						- 13	
100 E 100 E	This is to certify that I am the pe	rson having	the right to control th	e disposition of the	SIGNATURE OF AP	PLICANT		
ACKNOWLEDGMENT	remains of the above named dece	dent under p	provisions of the Healt	h and Safety Code,	<b>&gt;</b>			
- APPLICANT	greducant and I hereby acknowledge that trespass and nuisance laws apply and understand that this permit gives no right of unrestricted access to property not owned by me.			DATE SIGNED				
LOCAL BEGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WIT OF THE CALIFORNIA HEALTH AND SAFETY CO AUTHORITY FOR THE DISPOSITION SPECIFIED	DE AND IS THE	4.00	OCT 12 1988	* Storal	0 6 6	MAR ISSUING PERMIT	8
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	3-1-1	2 SIGNATURE OF P	ew Stell	Sosition		UMBER OF CREMATED IF APPLICABLE	REMAINS
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRATION	COUNTY OF D	DEATH U					

BRY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

36795

PINK	264-3151	101	lan
	2200 1	Date:	0/88,19
From Lesse Mar Johns	Address: 52 17 Strylers	Way 8 11 93	71021
three hundre Korty and	100	Dollars (\$	340 =
In that Payment of In	ement fees for ta	earling house	Brown - dec
PART CONTRACTOR OF	, 0 0	0	HINA SEL
Lot 159 Grave	6 Row S	ection/	Division / 2
Invoice No	NOT VALID FOR PURPOSESTATED UNLESS STAMPED PAID IN THIS SPACE TAUDITOR	CREDIT 67007 20% Sales Care 77184 -	60 00
Acct. No		80% Sales 100 of Lofs 77184 -	24000
wo =- 7684	OCT 14 1988	Opening/ 100 Classed 77181 - Burw! 100	40 00
BALANCE DUE 671.37	1000	Containers 77182 -	
	Make Water	Handling Fee 77185 - Recording 8 160	
Pre-Need Lot At Need D On Acct D	00	Misc. Fees 77183 - Pre-Need 63033 Trust 9022 -	
Pre-need Trust   Cash   Check	J. John	Sales Tax 60101 78390 -	
AC-212 (Rev. 10-87)	ISSUED BY COUNTY IN STREET	TOTAL PAID \$	340 00

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

# CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

Nº 37063

Farack While	Anna Address:	Date: 12-6 , 19 0
In Payment of	ceouline Voluse	Dollars (\$ 100-00)
Lot 159 Grave	BowSe	ection / Crr Division / 2
Acct. No. 0 2 7 9 5 9 W.O. 0 - 16/9	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAIL!" IN THIS SPACE.	CREDIT 20% Sales Care 77184 80% Sales Care 77184 7184 7184 7184 7184 7184 7184 718
Pre-Need Lot	ISSUED BY DALA OF WOL	Handling Fee 77185 Recording \$ 100 Misc. Fees 77185 Pre-Need 63333 Trust 9022 Sales Tax 80101 78380 TOTAL PAID \$



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

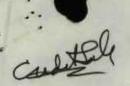
	Lusa	Address:	299 6	Date:	1500	C#2	19-8
From	bunkers	Address:	100-	1 0	ollars (\$ _	acio-	10,
In	Payment of	pallen	Lilaco	5	a ter	200	
Lot 159	Grave	3	RowS	ection	1	Division /	2
Invoice No. 027	959	NOT VALID FOR PURPOSE PAID IN THIS SPACE.	STATED UNLESS STAMPED	TOPEDIT 20% Sales Care 80% Sales of Lots	77184		
W.O. BALANCE DUE	1689	STATE OF	DEC 15	198@ening/ Burial Containers	77181 — 100 77182 —		
	Need ☑ On Acct ☐	1		Handling Fee Recording & Misc. Fees Pre-Need Trust	77185 — 100 77183 — 63033 9022 —		
AND THE PARTY OF T	sh Check 9	ISSUED BY	dea My	Sales Tax TOTAL PAID	80101 78390 —	200	00

CITY OF SAN DIEGO AUDITOR & COMPTROLLER

## ACCOUNTS RECEIVABLE

DATE: 12/12/88

REPORT NO. C65-102			AS OF 12/12	Y DEPARTMENT			TIME: 205450 PAGE: 7
INV INV ACCT NO CL	STOMER NAME FUND DEPT DRG ERA MAE JOHNSON 100 072 100 072 100 072 100 072 100 072 100 072	ACCT J/ 77181 00 77182 00 77183 00	O OPER	PD PAYM BY REF NO BN/EQ FACILI CK 37063	AMOUNT PAID AMOUNT APPLIED 100.00 41.71 26.07 5.21 25.32 1.69	AMOUNT BILLED	UNPAID BALANCE 271.37 PARTIAL PAYMENT
CITY OF SAN DIEGO AUDITOR & COMPTROLLER REPORT NO. C65-102		PAID IN	ACCOUNTS RECE VOICE REPORT AS OF 12/1	BY DEPARTMENT			DATE: 12/14/88 TIME: 201208 PAGE: 11
INV INV ACCT	ERTY DEPT-MT HOPE CEME:	TERY	PAYM DATE	PD PAYM BY REF ND	AMOUNT PAID	AMOUNT BILLED	UNPAID_
	FUND DEPT DRG  LERA MAE JOHNSON  100 072  100 072  100 072	77181 ( 77182 (	J/D ÖPER 12/12/88 000072 000072 000072	BN/EQ FACILI	200.00 83.41 52.13 10.43	671.37	PARTIAL PAYMENT
2-7607	100 0 72 60101	77185 78390	000072		50.64 3.39		•
DEPARTMENT 072 PROPI	ERTY DEPT-MT HOPE CEME	TERY					
NO DATE NO	CUSTOMER NAME FUND DEPT DRG	ACCT .	J/O PAYM DATE OPER	BY REF NO BN/EQ FACILI	AMOUNT PAID	AMOUNT BILLED	UNPAID BALANCE
8-7684 8-7684	LERA MAE JOHNSON 100 072 100 072 100 072 100 072 100 072 100 072 100 072	77181 77182 77183	11/10/88 000072 000072 000072 000072	Service Control Control Control	300.00 125.12 78.20 15.64 75.96 5.08	671.37	PARTIAL PAYMENT



### MT. HOPE CEMETERY

### INTERMENT ORDER

City of San Diego

Date 10/6/88

of Royalend Latto			
4070			
in a Fu	neral, date, time		_
Church, Chapel, Graveside	- 1	Mor	tuary
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an e	dra charge will be at	plied
and billed to undersigned. War time veteran .			
Loto 2268 Grave Row	Section	ivision/Block	0
Grave space & Care Fund		594	60
Additional spaces and care fund			
Opening/Closing & Setup			
Burial Container	J. In. Cl		
Handling Fees	x 10 191		
Flower vases - Marker setting fee	10 14		
Recording and filing fee	)' ,D.		
Sales taxes			
	Total Due	56	150
Paid re	ceipt number 3680	0 5	0.00
1 divis		Balance due 545	-00
I hereby certify I am the	of remains as above indica	he above named decited. I certify and repleted to the certify and repleted to the certify armies.	resen
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. Hop and interment.	Scenario de Carto de	
that I have the right to make this authorization	and I agree to hold Mt. Hop and interment.	of Ands	
that I have the right to make this authorization any liability on account of said authorization at I hereby authorize the interment in lot I hold under deed.	and I agree to hold Mt. Hop and interment. Signature	Scenario de Carto de	•
that I have the right to make this authorization any liability on account of said authorization at I hereby authorize the interment in lot I hold under deed.	and I agree to hold Mt. Hop and interment.	Scenario de Carto de	
that I have the right to make this authorization any liability on account of said authorization and I hereby authorize the interment in lot I	Address State	Scenario de Carto de	•

ADDRESS 24	79 56th Street, San Diego, Ca 92105	RATING	LIMIT	
DATE	ITEMS	DEBIT	V CREDIT	BALANCE
10-6 88	Lot 2268, Division 10	595.00	50 00	545-00
11-15 88	Leceist 36973		1250	42 30
3-7, 89	france 37474		5000	37000
5-4 87	Receipt 27768		1500	35500
526 87	Reac pt 9 1858		asa	33000
7-2/89	Kerent 38308		Sow	20000
3-9-90	ryceipt 36183		7500	20500
3-11-41	Keeupt \$ 40434		2000	1330
10-11-01	Receipt 41264		50-	100
107691	Receipt # 41399		1050	-
	lul lul			
	(A)			
	1 1 01			
-	Vail 11-91			
	1000			
	1			
	2			

E-7685

#### AGREEMENT FOR BEFORE-NEED CREDIT LOT SALE

ROZALIND SUTTON TO 40	
This Agreement entered into this 6 day of October, 1988 between Sulton, herein known as "Purchaser," and	,
between to making Sulton, 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 2268, Grave \_\_\_\_, Row \_\_\_\_\_, Section -, stock/Division /O , located in Mt. Hope Cemetery, for and in consideration of a total purchase price of  $$595^{\circ\circ}$$ , payable as follows: \$ 50° cash herewith, the receipt of which is hereby acknowledged; \$ 25°0 on the 10 day of Movembu, 1988; and the balance in installments of \$2500 or more, payable at the office of Mt. Hope Cemetery, on the loth 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 INTER-MENT 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 ONLY THE INTERMENT RIGHT IN 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 the Cemetery's Perpetuity Fund. This Perpetuity Fund provides income for the care and maintenance of all portions of the Cemetery.

Setting a Comp. marker

E-7685

WITNESS our hands this day and year above written.

Deed to be issued to:

2 | Roughput of 2500

2 | Roughput of 2000

1 Strain

ROZALIND	SUTTON
2479-52th	ex
San Diego Ca	92105

PURCHAS		J Sutte	
	1	2 me	
٠.	Street Add	dress (Mail)	
City	-	State	Zip Code

CITY OF SAN DIEGO Mt. Hope Cemetery

BV:



#### CITY OF SAN DIEGO, CALIFORNIA MOUNT HOPE CEMETERY

E-7685

Nº 11323

# DEED

#### OWNERSHIP AND INTERMENT PRIVILEGES

TORosalind Sutton	for the sum of \$	(DOLLARS)
LEGAL DESCRIPTION Lot 2268, Division 10		
AS DESCRIBED ON PURCHASE ORDER NUMBER _	E-7685	
According to a map of said Cemetery filed in the of held for burial privileges only with endowed care. hereafter be adopted, including the right to ingress Cemetery. The rights hereby conveyed for interment of the Cemetery Authority in each and every case and	Subject to all rules and regulations not and egress with essentials for care and privileges shall not be relinquished with	w in force or may operation of the bour the consent
It is expressly understood however, that said Cemerepairs to any monument, head stone, vaults or other after be erected or placed on said lot or plot. Cost of of plot. In no case will the Cemetery Division be renatural causes of deterioration, but reserves the rigment of the Cemetery. The following type of memoria	improvements of like nature that is alread same shall be assumed by legal owner or esponsible for damage, malicious mischie ht to remove any object that detracts from	ady, or may here- r representatives ef, vandalism and
Regulation Marker Size is	12" X 24". Flat Marker Only	

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

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

From Absolind Sutte	527-3400 —Address: 2479 -564	Date:	92105 1991
InPayment of	Live C	10/10 DO	llars (\$ 105. (*)
Lot 2068 Grave	- Row Se	ection	Division 10
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 Buriat Containers Handling Fee Hacording & Misc Fees Pre-Need Trust Sales Tax	67007 77184 100 77181 100 77181 100 77162 100 77163 63033 9022 60101
AC-212 (Rev. 1-91)	ISSUED BY Chart	TOTAL PAID	78390 105 00

CITY OF SAN DIEGO, CALIFORNIA

Nº 36800

WHITE TO CUSTOMER DANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 264-3151	11	1/6	188	
From Braland Sulto	Address: 2479-564 8	Date: Do	93 ollars (\$ )	5000	
2010	more que monte-	ection		Division /	0
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 20% Sales Care 80% Sales	67007 77184 —	50	00
W.O. E 7685	CITY AUBITOR	of Lots Opening/ Closing Burisl Containers	77164 — 100 77181 — 100 77182 —		-
BALANCE DUE 545 2	OCT 14 1988	Handling Fee Recording & Misc. Fees	77185 — 100 77183 —		-
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	(D) mad	Pre-Nend Trust Sales Tax	63033 9022 — 60101 78300 —		-



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY 284-3151

From: Payment of June 1					
Lot 2256 Grave	Row Se	ection NOV 25	Division / O		
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE.	CREDIT 67007 20% Sales Care 77164 -	1308		
Acct. No.		80% Sales 100 of Lots 77184 - Opening/ 100 Closing 77181 -	100 00		
W.O. SALANCEDIE UZO, CO	005375	Burial 100 Containers 77182 -			
BALANCE DUE	000	Handling Fee 77185 — Recording & 100			
Pre-Need Lot   At Need   On Acct	72 7	Misc. Fees 77183 - Pre-Need 63033 Trust 9022 -			
Pre-need Trust Cash Check C	India / Se	Sales Tax 00101 78390 -	15-100		
AC-212 (Rov. 10-87)	ISSUED BY	TOTAL PAID 1	100		

CITY OF SAN DIEGO, CALIFORNIA

	WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR	MOUNT HOPE CEMETERY 254-3151		2/2	70
From:	Prolands	Mr. Address: 2499-50	Date: 14	900	92105
an he	alty asmo	of P. hand -		ollars (\$	5000
In Chace	Payment of	TO THE WORLD	FR C	Div	ision /o
Lot 221	Grave_		ection	BIO	
Invoice No		NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 2X/A Sales Care 80% Sales	57007 77184 100	30 00
Acct, No.	Ther	CITY AUDITO	of Lots Opening/ Closing	77184 100 77181	
W.O.	#3/7/000	(	Burial Containers	77182 100	
BALANCE D	JE 11979	MAR 1 0 198	9 Handling Fee Recording & Misc. Fees	77185 100 77183	
Pre-Need Lot.		000	Pre-Need Trust	63033	
Pre-need Trust	692	1550ED WY COLLECTION	Sales Tax TOTAL PAID	80101 78390 ————	50 00
AC-212 (Rev. 1	0-87)		A CONTRACT OF THE PARTY OF THE		



WHITE TO CUSTOMER CANARY CEMETERY

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

From: Malind who	TANADERS 2479	Date:	act 50
In Payment of	mant of	Dollars (\$	CITY AUDITOR
Lot 2268 Grave_	RowS	ection	Block 1990
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 87007 20% Sales Care 77384 80% Sales 100 of Lots 77184 Opening/ 100 Closing 77181 Burial 100 Containers 77182 Handling Fee 77185 Recording 8 100	15 00
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	YSSUED BY SANGER WALLS	Misc Fees 77183 - Pra-Need 63033 - Trust 9022 - Sales Tax 60101 78390 - TOTAL PAID 5	15 00

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

NE 37858

From: Challes Latt	The Address 2479 562	Date:	5-16 7-15	19.87 A 10.10
Payment of	add det		Division	AUDITOR
Acct. No.  BALANCE DUE  Pre-Need Lot At Need On Acct Pre-need Trust Cash Check  Acc. 212 (Rev. 10-67)	Row S  NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE  ISSUED BY	CREDIT 20% Sales Care 30% Sales of Lots Opening/ Closing Burial Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	67007 77184 100 77184 100 77181 100 77182 100 77185 100 77183 63033 9022 60101 78390 \$	989 50

#### . · OFFICIAL RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

112 38308

	204-3151	Date:	7-21 1989
From Probable Sall	Address 24/19 5	Dolla	TILL SOTTWALEN
In Payment of	Custo det		JUL 3 1 1000
Lot Dalo Grave	RowS	ection	Division
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	20% Sales Care 77	007
Acct. No.		of Lots 77 Opening/	100 20 05
wo 2- 1660		Burial	181 100 182
BALANCE DUE		Handling Fee 77	100
Pre-Need Lot At Need On Acct		Misc. Fees 77 Pre-Need 63	183
	y the his hours	Sales Tax 60	101
AC-212 (Rev. 10-87) 954	ISSUED BY	TOTAL PAID	1 00 00

L RECEIPT

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

Mg

38983

### MOUNT HOPE CEMETERYMAR 2 0 1990

From Kagalian Vigo	Address: 3479 Total	AL 93	WT HEID
In Payment of	Lit for wellow	Dolla	ars (\$
Lot Grave	Row Se	ection	Division Block
Acct. No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED PAID IN THIS SPACE	20% Sales Care 7/ 80% Sales of Lots 7/ Opening/ Closing 7/ Burial Containers 7/ Handling Fee 7/ Recording &	7007 7184 100 7184 100 7181 100 7182 1100 7182 1100 7183
Pre-Need Lot	ISSUED BY WILLOW E	Pre-Need 6	9023 9022 0101 8390



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

No 40434

Address:    Dollars (\$   Dollar	. 19_//
Invoice No.   Row   Section   Block	)
DOW Pales 100	
W.O.	50 0



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

41264 Nº

From: 10=0	Address: 2479 - 6 - 2	Date: 50 F	DIGO CH 92
InPayment of	ind for	Dollars	(\$ 50.00)
Lot	Row Sec	tion	Division Block
Invoice No	NOTVALID FOR PLIS POSE STATED LINES SERVING PAID IN THIS SPACE	CREDIT 6700 20% Sales Care 7718/ 80% Sales 100	4 - 17
Acct. No	SEP . 23 1991	of Lots 77184 Opening/ 100 Closing 77181 Buriel 10 Containers 77182	
BALANCE DUE 105.00	003420	Handling Fee 77181 Recording & 100 Misc Fees 77183	000
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	AN AN	Pre-Need 63033 Trust 9023 Sales Tax 6010 7839	2
AC-212 (Rev. 10-87)	ISSUED BY	TOTAL PAID	50 00



#### MT. HOPE CEMETERY

#### INTERMENT ORDER

City of San Diego

Date 10-7-88

You are hereby authorized and instructed, sub	ject to your rules and regulations, to inter the remains
of Saura	Martin (X)
ina ast lault - ober	neral, date, time wed 10/26 AYO
Church, Chapel, Graveside	In a telephane Mortuery
	of regular work day or an extra charge will be applied
A William Co. William Co.	nolliture
and billed to undersigned. War time veteran	0 0
Lot 49 Grave Row	Section Division/Block &
Grave space & Care Fund	
Additional spaces and care fund	a continue of the second
Opening/Closing & Setup	g All II
Burial Container	VI 3 \ \
Handling Fees	~
Flower vases - Marker setting fee	Ć
Recording and filing fee	
Sales taxes	
3413 1433	Total Due
Paid re	ceipt number
	Balance due
	Balanto oue
I hereby certify I am the	of the above named decedent
and this is your authority to make disposition i	of remains as above indicated. I certify and represent
that I have the right to make this authorization	and lagree to hold Mt. Hope Cemetery harmless from
that I have the right to make this authorization any liability on account of said authorization a	and lagree to hold Mt. Hope Cemetery harmless from
that I have the right to make this authorization any liability on account of said authorization a	and lagree to hold Mt. Hope Cemetery harmless from
that I have the right to make this authorization	and lagree to hold Mt. Hope Cemetery harmless from
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 hold under deed.	and I agree to hold Mt. Hope Cemetery harmless from
that I have the right to make this authorization any liability on account of said authorization at I hereby authorize the interment in lot I hold under deed.  Signature of recorded process of closed	and I agree to hold Mt. Hope Cemetery harmless from and interment.
that I have the right to make this authorization any liability on account of said authorization at I hereby authorize the interment in lot I hold under deed.  Signature of recorded process of closed	and I agree to hold Mt. Hope Cemetery harmless from and interment.  Signifium  Address
that I have the right to make this authorization any liability on account of said authorization at I hereby authorize the interment in lot I hold under deed.  Signature of recorded process of closed	and I agree to hold Mt. Hope Cemetery harmless from and interment.    Compared   Compare
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 hold under deed.  Signature of recorded/hoster of deed	and I agree to hold Mt. Hope Cemetery harmless from and interment.  Signifium  Address
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 hold under deed.  Signature of recordal blooder of closed	and I agree to hold Mt. Hope Cemetery harmless from and interment.  Signifium  Address  State 73-245/  Telephohe

Reo : 10/18/0 Telephase Lura Martin had Expired 10/14 in L.A. Son Floyd Perkins 273-2451 See E- 1314 for Paid Pur need Berial no Witwen Pour in Place O.K. Call him When done!

E-7686

31460 E-1686

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	T		SEX	DATE OF BIRTH	DATE OF DEATH	
	Laura Fern Martin		Female	Oct. 11, 1898	Oct. 14, 1988	
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY (OR ST	ATE IF NOT IN CALIFORNIAL	NAME AND ADDRESS OF S	POUSE OR OTHER INFORMANT	
Tos Anceles		Los Angeles		Keith Perkins - Great Nephew		
NAME AND ADDRES	SS OF FUNERAL DIRECTOR FOR PERSON AC	TING AS SUCH) CA	ORNIA LICENSE NUMBER	The state of the s	nandoah St., #10	
helophase	Society 1541 Wilshire	Blvd., Los Angeles	1346	Los Angeles, C	90034	
*	TYPE OF PERA	AIT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF	DISPOSITION		
1 BURIAL IIN	CLUDES ENTOMBMENTI	5 DISINTERMENT AND BURIA ENTOMBMENT)	AL (INCLUDES	8 DISINTERMENT AND R		
☑ 2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, CREMATIC (INCLUDES INURNMENT)	IN. AND BURIAL	9 DISINTERMENT OF CR		
LI 3 CREMATIO CEMETERY		7 DISINTERMENT, CREMATIO OTHER THAN IN A CEMET		FOR CORONE	R'S USE ONLY	
INTERMENT	NAME AND ADDRESS OF CEMETERY W Mt. Hope Cemetery 375	1 Market St., San I	Diego, CA 92	102 Sa	an Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY W Cremar Crematory 2299		161	SIGNATURE OF PERSON IN	Scarling	
BURIAL AT SEA DR SITION OTHER N A CEMETERY OF CREMATED REMAINS	Not Applicable	INE, OR OTHER DESCRIPTION SUFFIC	IENT TO IDENTIFY FINAL	PLACE AND COUNTY OF DIS	POSITION //	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS				
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tre this permit gives no right of unrest	dent under provisions of the Heal expass and nuisance laws apply o	th and Safety Code, ( and understand that	DATE JUNE OF BELLINITY TO STATE JUNE OCTOBER 15	INDER	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED	A AND & THE \$4.00	OCT 2 0 1988	SIGN TOTAL COCAL REST		
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	-/ 0 0	Senson in Charles OF C	DISPOSEF	NUMBER OF CREMATED REMAINS	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	Vital Records 313 N.		Angeles, CA L	os Angeles Coun	ty	

COPY 1 OF THE PERMIT ACCOMPANIES THE REMAINS TO THE STATED PLACE OF DISPOSITION. THE PERSON IN CHARGE OF DISPOSITION IS RESPONSIBLE FOR OMPLETING THE PERMIT AND FORWARDING THE COMPLETED PERMIT WITHIN 10 DAYS OF DISPOSITION TO THE REGISTRAR OF THE DISTRICT IN WHICH DISPOSI-NOCCURRED OR THE DISTRICT NEAREST THE POINT WHERE THE CREMATED REMAINS WERE BURIED AT SEA. THE LOCAL REGISTRAR MAY DESTROY ANY GINAL OR DUPLICATE PERMIT AFTER ONE YEAR

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 10-7-88

of The recu	Voornan
+-17-00	W/ 1/1 1
na Ventrime (VI	
Church, Chapel, Graveside	of Shook Passable Mortuan
All Funeral cars must arrive before 3:30 p.n	m, of regular work day or an extra charge will be applie
and billed to undersigned. War time veteral	0
ot 100 Grave 1 Row	Section
	1/00
Grave space & Care Fund	770,0
Additional spaces and care fund	
Opening/Closing & Setup	2m A
	1000
Burial Container	103
landling Fees	
lower vases - Marker setting fee	
Recording and filling fee	35-0
V	11.2
alor tayor	1/2
Sales taxes	120.3
1 Nov	Total Due
I VEN	170/2
I VEN	Total Due
Manual Park	Total Due
Paid Paid Paid Paid	receipt number 36953 NS 63  Balance due 331.2  Hawwy of the above named decede
hereby certify I am the Mary A and this is your authority to make disposition that I have the right to make this authorization.	Total Due
hereby certify I am the Mary A and this is your authority to make disposition that I have the right to make this authorization.	Total Due
hereby certify I am the May A and this is your authority to make disposition that I have the right to make this authorization in the liability on account of said authorizations.	Balance due 331.2  Balance due 331.2  Balance due 331.2  On of remains as above indicated. I certify and represe on and lagree to hold Mt. Hope Cemetery harmless from and interment.
hereby certify I am the Mary And this is your authority to make disposition that I have the right to make this authorization I liability on account of said authorization hereby authorize the interment in lot I	Balance due 331.2  Balance due 331.2  Balance due 331.2  On of remains as above indicated. I certify and represe on and lagree to hold Mt. Hope Cemetery harmless from and interment.
hereby certify I am the May A and this is your authority to make disposition that I have the right to make this authorization I liability on account of said authorization hereby authorize the interment in lot I	Total Due
hereby certify I am the May A and this is your authority to make disposition to hat I have the right to make this authorization liability on account of said authorization hereby authorize the interment in lot I hold under deed.	Total Due
hereby certify I am the May A and this is your authority to make disposition to hat 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 331.2  Balance due 331.2  Balance due 331.2  On of remains as above indicated. I certify and represe on and lagree to hold Mt. Hope Cemetery harmless from and interment.
hereby certify I am the May A and this is your authority to make disposition to hat I have the right to make this authorization liability on account of said authorization hereby authorize the interment in lot I hold under deed.	Total Due
hereby certify I am the May A and this is your authority to make disposition to hat I have the right to make this authorization liability on account of said authorization hereby authorize the interment in lot I hold under deed.	Total Due
hereby certify I am the May A	Total Due

E-7687

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDENT	a description of the second		SEX	DATE OF BIRTH	0	DATE OF DEATH
	LEONIA GOODMAN		Female	Apr11 15		Oct. 2, 1988
National City		San Diego		NAME AND ADDRESS OF SPOUSE ON OTHER INFORMANT Mary Helen Harvey - Daughter 7271 Peter Pan Street		The state of the s
Anderson-Rag	s of Funenal Directos 050 Frade gsdale Mort. San Diego	rat Bivd.	F 1329	San Dieg		
	TYPE OF PERA	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION		
XX + SURIAL DINC	CLUDES ENTOMBMENT)	5 DISINTERMENT AND	BURIAL (INCLUDES		MENT AND RE	INTERMENT OF CREMATED
17	AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, CRE				MATED REMAINS AND HAN IN A CEMETERY
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY  4 SCIENTIFIC USE		7 DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY		
INTERMENT	NAME AND ADDRESS OF CEMETERY W			ED	COUN	n Diego
CREMATION	NAME AND ADDRESS DECEMBER WITH WAR			SIGNATURE OF	PERSON IN C	HARGE OF CREMATORY
BORRAL AT SEA OR DISTRION OTHER NA CEMETERY EMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	THE OR OTHER DESCRIPTION S	SUFFICIENT TO CENTIFY FINAL	PLACE AND COU	NTY OF DISP	OSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECEIVED	n Coustody-2	Dys. 11			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that the this permit gives no right of unrest	son having the right to cor dent under provisions of the espass and nuisance laws a	atrol the disposition of the Health and Safety Code, pply and understand that	SIGNATURE OF DATE SIGNED		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	E AND IS THE \$4.00	PAID DATE PERMIT ISSUED	SIGNA OF OF	12.6	THAR ISSUM BANT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON	0/10/6 SIGNATUR	ON MUSICAL PROPERTY OF THE PERSON OF THE PER	SPOSITION	LICENSE N	IUMBER OF CHEMATED REMAIN IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	San Diego County De		ervices San DI	Box 85222 ego, CA 9	2138-52	22

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR Y THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.



WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

	1	10			Date:	11-	10 11	986
From: Till Call	no Col	Address	2000	) Street	wall &	Hos	1 30	
Thirtees	fill	rdred	thet	-6	SIL 8	oliars (S	133/-	27
In Paymen	tol De	mea 1	John Co	morn	3 Int	ein	cot	and the
and	mark	her in	1 stall	otea	2 Le	-	SELECT STREET	19.90
Lot 186	Grave	12	Row_	Se	ction	2	Division /	2
Invoice No.		NOT VALID FOR PURPO PAID IN THIS SPACE	SESTATED UNLES	SSTAMPED	CREDIT 20% Sales Care	67007 77184 —	,99	00
Acct. No.	7	The same of the sa	CITY AL	1	80% Sales of Lots Opening/	77184 — 100	376	00
W.O. 2- 166	/_			MIOR.	Clasing Bunal	77181 -	175	00
BALANCE DUE		MARKY S	NOV 21	1980	Containers Handling Fee	77182 — 100 77185 —	170	00
X		135437	ALL WATER	1000	Recording & Misc. Fees	100 77183 -	160	00
Pre-Need Lot At Need Pre-need Trust Cash	On Acct Check		1	11/1	Pre-Need Trust Sales Tax	63033 9022 — 60101	1/	27 50
10	025	ISSUED BY	dia 1	de de	TOTAL PAID	78390 —	1331	37
AC-212 (Rev. 10-87)	100			2 10		-	1001	The state of the s

rever frust

## MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

10-7-88

Date	
ect to your rules and regulations, to int	ter the remains
oglewyyo	
neral, date, time	
Courad	Mortuary
f regular work day or an extra charge	will be applied
No.	
2)	. 12.
Section Division/	100
lp-	4950
in	
· f. · · p. · p. · · · · · · · · · · · · ·	320 =
telault	175=
V.	170=0
	350
	11.37
Total Due	1206.3
ceipt number 36840	6206-3
Balance due	0
7	
of the above n	amed deceden
and I agree to hold Mt. Hope Cemetery	harmless from
. C. 1 1 2 1	
X Other Dogler	12 D
x 40 70 Hans	457.200
x S.an. Shippy	La. 92/19
1 282-789-	
Invoice #	
	Total Due  Section  Total Due  Of the above no fremains as above indicated. I certificant large to hold Mt. Hope Cemeters and interment.  **Ethal Seglin Signature  **X

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

	11	Date Lotote.	13 ,19.88
From the Days C	1/10 Kadress 40 10 Kg	KARD JE	W #205 3P
Thelue lunde	J 24 37/100-	Dollars	15 /206.37 200
in Payment of	red thust bu	eal de	vec for
Stark Solverso	- lot, Open/Cline	. Tog seal	West of Know
Lot 9 Grave		ection 2	Division / 2
Invoice Na.	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 6700 20% Sales Care 7718	
Acct. No.		80% Sales 10 of Lots 7718 Opening/ 10	Corv
w.o_ 2 - 1660		Closing 7718 Burial 10 Containers 7718	100
BALANCE DUE	EAST-STORY	Handling Fee 7718 Recording 5 10	700
Pre-Need Lot At Need On Acct	1 1	Recording & 10   Misc. Fees   7718   Pre-Need   6303   Trust   902	
Pre-need Trust Cash Check C	Janea h	Sales Tax 6010 7839	
AG-212 (Rev. 10-87)	ISSUED BY	TOTAL PAID	190001

## MT, HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 16-10-88

fou are hereby authorized and instructed, subj	ject to your rules and regulations, to inter the remains
ot Nelen	survey 1 11/2 1/2
na Bell Ferre Fur	neral, date, time Word 1012 116%
Church, Chapel, Graveside	; Consad Mortuary.
all Funeral cars must arrive before 3:30 p.m. o	of regular work day or an extra charge will be applied
and billed to undersigned. War time veteran	_ Willies only
	The state of the s
Lot Grave Row	Section MASDivision/Block
Grave space & Care Fund	
Additional spaces and care fund	
Opening/Closing & Setup	320-00
Burial Container	100-00
landling Fees	148.00
Tower vases - Marker setting fee	
ecording and filing fee	35.00
	6-57
	Total Due
Paid ra	ceipt number 36809 606-50
1 010.10	Balance due
1, .	Datation due
hereby certify I am the Duce	of the above named decedent
and this is your authority to make disposition on 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
any liability on account of said authorization a	and interment.
hereby authorize the interment in lot I	Fraco (Islams
old under deed.	Signatura Children Co
ignature of recorded holder of deed	Adams 111. 950061
grature of recorded naider of deed.	5000 M - 75 410 - 14 Code
	Telephine 7 / 13 /
The state of the s	Invalor #
F 7689	Invoice #
Nork Order # 1003	Acct. #

E- 7689

_	U	SE BLACK INK-MAKE NO	ALTERATIONS OR ERASURE	5		
OF DECEDEN			Female .	March 1,	1902 Oct. 7, 1988	
La Mesa Con rad Desessor Funda Directes of Character 7387 Broadway-Lemon Grove		PLACE OF DEATH—COUNTY IO San Diego	IR STATE IF NOT IN CALIFORNIA)	WAME AND ADDRESS OF SPOUSE OR DIVER INFORMANT Grace L. Adams - Niece		
				1184 Sidonia Court Leucadia, CA 92024		
	TYPE OF PERA	AIT, CHECK ONLY ONE OF T	HE FOLLOWING TYPES OF	DISPOSITION		
A SURIAL (IN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND E	URIAL (INCLUDES		NT AND REINTERMENT OF CREMATED	
2 CREMATION	N AND BURIAL (INCLUDES INURNMENT)	DISINTERMENT, CREM     INCLUDES INURNMEN		DISINTERMENT OF CREMATED REMAINS AND DISPOSITION OTHER THAN IN A CEMETERY		
3. CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY     4 SCIENTIFIC USE		7 DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY  10 DISPOSITION PENDING		
TERMENT	NAME AND ADDRESS OF CEMETERY W	ery San Diego	EMAINS ARE TO BE INTERRE	D	San Diego	
CREMATION	NAME AND ADDRESS OF CREMATORY W	HERE REMAINS ARE TO BE CREM	Des DATE CREMATED	SIGNATURE OF PE	RSON IN CHARGE OF CREMATORY	
DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	N/A COTH	Bell Live	FFICIENT TO IDENTIFY FINAL	PLACE AND COUNT	Y OF DISPOSITION	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS				
ACKNOWLEDGMENT	This is to certify that I am the per remains of the above named dece	dent under provisions of the I	tealth and Safety Code,	SIGNATURE OF APPLICANT		
APPLICANT	and I hereby acknowledge that tre this permit gives no right of unrest	Control of the Contro	Control of the state of the sta	DATE SIGNED		
LOCAL REGISTRAR	THES PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CAUPONNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	HAND IS THE \$4.00	7 OCT 1 1 1988	Morall	L Const M. Dimm	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPUSITION WANTED OF	SIGNALUS SIG	OF PERSON OF GRANGE DE T	DISPOSITION	LICENSE NUMBER OF CREMATED REMAINS DISPOSER, IF APPLICABLE	
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	N/A	COUNTY OF DEATH	J			

PY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

Nº 36809

		14	10 21
have ledon	D 1184 N	Date:	0 1900
From the departs	Address:	carried ut,	10/50/9
Ly nevaced	late to the	Dollara (S	100g-30)
In Payment of	elle yel alla	neersk	in .
14	F	- MAS	Division
Lot Grave	Row City	Section / //	Block
Invoice No.	NOT VALID FOR PURPOSE STATED UNLESS STAMP	CREDIT 67007 77184 -	-
Acct. No.	OCT 14	80% Sales 100 of Lots 77184 - Opening/ 100 Closing 77181 -	2000
w.o. 6-1661	TARREST LICENSES	/988 Closing 77181 - 100 Containers 77182 -	10000
BALANCE DUE		Handling Fee 77185 -	145 00
	The state of the s	Recording & 100 Minc. Fees 77183 -	55 00
Pre-Need Lot At Need On Acct	1 / / /	Pre-Need 63033 Trust 9032 -	1
Pre-need Trust Cash Check C	hade the	Sales Tax 60107 78390 -	600
AC-212 (Rev. 10-87)	ISSUED BY THE OWN	TOTAL PAID \$	606 50

## MT HOPE CEMETERY INTERMENT ORDER

City of San Diego

Date 10-11-88

Man O	ect to your rules and regulations, to inter the remains
of Tillout	Manual 10/11 300
Vault/Liner A.A.	neral, date, time
Church, Chapel, Graveside	Mortuary,
All Funeral cars must arrive before 3:30 p.m. o	f regular work day or an extra charge will be applied
and billed to undersigned. War time veteran _	
823	TAME US
	Section FOOF Division/Block 92
Grave space & Care Fund Br	<u></u>
Additional spaces and care fund	
Opening/Closing & Setup	320-a
Burial Container	12501
Handling Fees	rin of
Flower vases - Marker setting fee	
Recording and filing fee	2501
	1130
	Total Due
	36210 -1126
Paid rec	ceipt number
a' 1	Balance due
hereby certify I am the 5 15 tz	of the above 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 a	of remains as above indicated. I certify and represent and I agree to hold Mt. Hope Cemetery harmless from the interment.
I hereby authorize the interment in lot I hold under deed.	Signatury Dougatuck
Signature of recorded holder of deed	San Diego CH 92/1° Sinn 273-4044 Telephone
3 3	Invaled #
Work Order # <b>E</b> 7690	Invoice #

		DE BLACK INK-WAKE NO ALLE	KATIONS OR ERASURE	5		
E OF DECEDEN	(T		SEX	DATE OF BIRTH	DATE OF DEATH	
Paul C. Ma	unning		Male	Oct. 7, 1915	Oct. 8, 1988	
PLACE OF DEATH	CITY OF TOWN	PLACE OF DEATH-COUNTY ION S	TATE IF NOT IN CALIFORNIA)	NAME AND ADDRESS OF	SPOUSE OR OTHER INFORMANT	
		San Diego		Jolene Manning-Daughter		
	SS OF FUNERAL DIRECTOR TON PERSON AC	- 10 TO 10 T	FORNIA LICENSE NUMBER	4711 Muir Ave	The state of the s	
Greenwood	Mort. I-805 & Imperia	1, San Diego, CA.	F-843	San Diego, CA	. 92107	
	TYPE OF PERA	WIT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF	DISPOSITION		
NOTE BURIAL UN	CLUDES ENTOMBMENT)	D 5 DISINTERMENT AND BURN ENTOMBMENTI	AL IINCLUDES	REMAINS (INCLUDES	REINTERMENT OF CREMATED INURNMENT)	
	N AND BURIAL IINCLUDES INURNMENTI	INCLUDES INURNMENT)  7 DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		DISPOSITION OTHER THAN IN A CEMETERY  FOR CORONER'S USE ONLY  10. DISPOSITION PENDING		
CREMATION CEMETERY     SCIENTIFIC						
4 SCIENTIFIC	USE					
	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATED REM	AINS ARE TO BE INTERRE	p co	UNTY	
INTERMENT	Mt Hope Cemetery Sa	n Diego, CA.		Sa	n Diego	
CREMATION	NAME AND ADDRESS OF CHEMATORY W	NON PENER CREMOTE	DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CHEMATORY	
MIAL AT SEA	ADDRESS, NEAREST POINT ON SHOREL	INE. OR OTHER DESCRIPTION SUFFIC	SENT TO IDENTIFY FINAL	PLACE AND COUNTY OF DE	SPOSITION	
CHEROSITION OTHER THAN IN A CEMETERY DE CREMATED REMAINS	N/A Comutava	Fult			SHIP I	
SCIENTIFIC	NAME AND ADDRESS OF FACILITY REC	Saviside -	3PM			
			g the right to control the disposition of the		SIGNATURE OF APPLICANT	
ACKNOWLE DISMENT		edent under provisions of the Health and Safety Code, espass and nuisance laws apply and understand that		DATE SIGNED		
APPECANT	this permit gives no right of unrest			DATE SIGNED		
L(EAL REGISTRAR	THIS PERMIT IS DISCUSS IN ACCORDANCE WITH PROVISIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS FERMIT			SUNATURE DE LECAL DE GISTRAR ISSUING PERMIT		
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON 10	AR CLATE SEIGNATURE OF	un lotte	DISPOSITION LICENSE DISPOSE	NUMBER OF CREMATED REMAINS R. IF APPLICABLE	
IF DISPOSITION IS TO OCCUP IN	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH			KIE STEEL ST	
ANOTHER COUNTY	N/A					

PY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY INHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 PROPERTY DEPARTMENT

MOUNT HOPE CEMETERY

	23410131	10-	11 22
Twen Lynnie	MONABleds: 3002	Mangetine	6,5 19 92 111
n Payment of	and Manner	Dollars (\$	ment)
Lot 823 Grave.		ection ZODF	Division 42
nvoice No	NOT VALID FOR PURPOSE STATED CHARGES STAMPED PAID IN THIS SPACE	CREDIT 67007 20% Sales Care 77184 — 80% Sales 100	
Acct. No. 5 - 16.90	OCT		33000
WO CONTRACTOR	OCT 14 1988	Burial 100 Containers 77182 —	17/30 80
BALANCE DUE		Handling Fee 77185 — Recording & 100 Misc Fees 77183 —	3500
Pre-Need Lot	( ( )	Pre-Need 63033 Trust 9022 - Sales Tax 60101	1130
Pre-need Trust Cash Check CA	ISSUED BY DIALA (A)	TOTAL PAID \$	71137

## MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 10-10-88

Manua	eject to your rules and regulations, to inter the rem
Boll land	The sold of
Voult/Liner /	meral, date, time Muss 1415
Church, Chapel, Graveside Auch	Have Fagodale Mort
Ill Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charge will be app
and billed to undersigned. War time veteran .	- 4 ft lours
70	3 0
ot / O Grave Row _	Section Division/etock
	X 100 3 10 195
Srave space & Care Fund	NO ME DO NO 19
Additional spaces and care fund	
Opening/Closing & Setup	190 A. J.
Burial Container	
landling Fees	J. 25-
lower vases - Marker setting fee	
Recording and filipp lee	9 111 OF 35
Sales taxes	18 4
1	Total Due 529
	07702 079
Paid re	eceipt number 3 700 a 000
000	Balance due
hereby certify I am the Fattor	of the above named dece
and this is your authority to make disposition	of remains as above indicated. I certify and repre- and lagree to hold Mt. Hope Cemetery harmless
ny liability on account of said authorization i	and interment.
	Lan MAL went
hereby authorize the interment in lot I hold under deed.	Signature 32 100 02828 N
	Las Los KETO IK.
ignature of recorded holder of deed	Szene 2
	Telephone
	facilities of the second
	Location H
Vork Order # <b>E</b> 7691	Invoice #

E-7691

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	Sheena Robbin St	anhane	SEX Famala	DATE OF BIRTH	DATE OF DEATH
PLACE OF DEATH-	CITY OR TOWN	PLACE OF DEATH—COUNTY I	Fema 1 е	June 15, 1986 NAME AND ADDRESS OF John Givens - I	Oct. 8, 1988 SPOUSE OR OTHER INFORMANT Foster Father
Anderson-	S OF FUNERAL DIRECTOR ICA HERSON F Ragsdale Mort.: San Di		F 1329	237 Los Reyes   San Diego, CA	UTB MICHIGAN CO.
	TYPE OF PERA	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION	
M 1 BURIAL IIN	CLUDES ENTOMBMENTI	5 DISINTERMENT AND ENTOMBMENT)	BURIAL UNCLUDES	8 DISINTERMENT AND I	REINTERMENT OF CREMATED INURNMENT)
2 CREMATION	N AND BURIAL (INCLUDES INURNMENT)	6. DISINTERMENT, CREN		9 DISINTERMENT OF CO	REMATED REMAINS AND THAN IN A CEMETERY
3 CREMATION CEMETERY  4 SCIENTIFIC	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT, CREM OTHER THAN IN A CI	MATION, AND DISPOSITION	FOR CORON	ER'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W		REMAINS ARE TO BE INTERR	1	UNITY San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY	NERE REMAINS ARE TO BE CREM	White Per	NATURE OF PERSON IN	CHARGE OF CREMATORY
PURIAL AT SEA OR DISPOSITION OTHER VIN A CEMETERY EMATED REMAINS	N/A WO	ine or other describition si	#/ Bell Li	PLACE AND COUNTY OF DE	SPOSITION:
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	dent under provisions of the espass and nuisance laws op	Health and Safety Code, ply and understand that	SIGNATURE OF APPLICANT  DATE SIGNED	
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CACIFORNIA HEALTH AND ILAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED II	DE AND IS THE	DCT 13 198	SIGNATURE OF LOCALIFIED	STRAN ISSUING PERMIT D.B.
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DESCRIPTION WAS LADE ON	3/00	Sycu State		NUMBER OF CREMATED REMAINS FR. IF APPLICABLE
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	NOICATE ADDRESS OF REGISTRAR OF San Diego Dept	of Health Servi	P. O. Box lces San Diego	x 85222 , CA 92138-5222	

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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 PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

From: Just lienshies	Address: Mach Fre There - Marie	Date: 4	1957 Dillars (\$ 529.87)
In Payment of	Hara Stephen	10 04	THE
Lot Grave	RowS	ection	Division 9
Pre-Need Lot	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.  CITY AUDITOR FEB 06 1989	CREDIT 20% Sales Care 80% Sales of Lots Opening/ Closing Suna/ Containers Handling Fee Recording & Misc. Fees Pre-Need Trust Sales Tax TOTAL PAID	57007 77184 100 77184 100 77181 foz 77182 100 77185 100 77185 100 77183 60033 9072 60101 78390

MT. HOPE CEMETERY INTERMENT ORDER City of San Diego You are bereby authorized and instructed, subject to your rules and regulations, to inter the remains Fogeral, date, time Church, Chapel, Graveside 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. War time veteran Section MAJ Division/84 Additional spaces and care fund Cornew Ruth Opening/Closing & Setup **Burial Container** Handling Fees Flower vuses - Marker setting Recording and filing fee Sales taxes MT. HGPE CEMETERY Paid receipt number a CITY of SAN DIEGO, CALIF. Balance due Thereby certify I am the .

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

\* Carment Joung Signature 28 E8 Th 57 By 3 \*2728 E8 Th 57 By 3 \*Address National Cty 92050 State 267-8667

Invoice # \_\_\_

Acct. #

Work Order # .

Sales Tax

TOTAL PAID

60101

Pre-need Trust Gash

Check

ISSUED IS

## MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

	Date //	00
	Rolle	
You are hereby authorized and instructed, sub	ject to your rules and regulations, to inter the	ne remains
of ann	a Melle Rolax	4
ina 1-S. Vault Fu	necal date, time to 10/14	11:00
Church, Chapel, Graveside Church E	Enge Feathering	Mortuary
All Funeral cars must arrive before 3:30 p.m.	of requiler work day or an extendibution will	
and billed to undersigned. War time veteran	or regular work day or on extra priarge will	ne applica
	- 11	/
Lot Grave Row	Section Division/Block_	6
Grave space & Care Fund		
Additional spaces and care fund		
Opening/Closing & Setup	3	2000
Burial Container	ne as New Mars D 17	5.00
	many the state of	man
Handling Fees	······································	0,00
Flower vases - Marker setting fee		25-1
Recording and filing fee		70.00
Sales taxes		11-01
-10 News	Total Due	11.01
Paid re	ceipt number 36 8 43 7	11.5
e place	Balance due	0
hereby certify I am the and this is your authority to make disposition	of the above name	d deceden
that I have the right to make this authorization	and I agree to hold Mt. Hope Cemetery har	mless from
any liability on account of said authorization a	ind interment.	
hereby authorize the interment in lot I	Signature	-
	Address	
Signature of recorded holder of deed	State	Zip Cod
	Telephone	1975/8/20
THE STREET	12-0/1010	
	Invoice #	
Work Order # E 7693	Acet.#	
PY-993 (REV. 8-95)	CNUL II	

## WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 284-3151

		284-3151		10-	111	CHA
In Anthon	bust	625	/ MDate:	10	7 19	00
From: 11.11 - dependence	Address:_	900	2000	up by	4 1/ 3	17
- Merlin fleak	Car C	e are	211/6	Dollars (\$	1140	1
In Payment of	111 /	Moreco	RARU	noch	Muss	and
Lot 191 Grave_	2	Row	Section	4	Division Stock	
Invoice No	NOT VALID FOR PURPO "PAID" IN THIS SPACE		COREDIT	es Care 77184 —		
Acct. No			80% Soft Lots Openin	10/ 70/ 100	320	00
W.O. 6 16/5	THE IN		Bunati Contail	100	175	23
BALANCE DUE			Record Misc F	ing 8 100	25	20
Pre-Need Lot	1 1	1.1	Pre-Na Trush Sales	9922 — Fax 60101	17	37
AC-212 (Rov. 10-87) 3 4/85	ISSUED BY	May 1	C GOTAL	78390 — PAID \$	711	30

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E 7693

NAME OF DECEDEN	П	ELEPTE III 20	SEX	DATE OF BIRTH	DATE OF DEATH
	ANNA M. ROLLIN		Female	Jan. 22,	1907 Oct. 10,1986
PLACE OF DEATH-	The state of the s	San Dieg			ith Daughter
	SALEANE MODINATION DON LEURON VO		ORNIA LICENSE NUMBER	6451 El	
		San Diego	1083	Redding	
1/	TYPE OF PERA	NT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF	DISPOSITION	
D 1 BORIAL IIN	CLUDES ENTOMBMENTI	5. DISINTERMENT AND BURGENTOMBMENT)	AL (INCLUDES	8 DISINTERMEN	NT AND BEINTERMENT OF CREMATED CLUDES INURNMENT!
2 CREMATIO	N AND BURIAL (INCLUDES INURNMENT)	6 DISINTERMENT, CREMATIC IINCLUDES INURNMENT)	N, AND BURIAL		NT OF CREMATED REMAINS AND OTHER THAN IN A CEMETERY
3 CREMATIO	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT, CREMATIC	AND DESIGNATION T	FOR (	CORONER'S USE ONLY
4 SCIENTIFIC		OTHER THAN IN A CEMET	ERY	D to DISPOSITION	
INTERMENT	NAME AND ADDRESS OF CEMETERY W Mt. Hope 3751 Man	eket St. San Di		ь	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	Pore Sealer	Blesol	SIGNATURE OF PE	RSON IN CHARGE OF CREMATORY
BURIAL AT SEA OR POSITION OTHER IN A CEMETERY OF REMATED REMAINS	n/a Local	NE OR OTHER DESCRIPTION SUFFIC	ENT TO IDENTIFY FINAL	PLACE AND COUNT	Y OF DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECI	Walls	THE REAL PROPERTY.		
ACKNOWLEDGMENT * OF APPLICANT	This is to certify that I am the per remains of the above named dece- and I hereby acknowledge that tre this permit gives no right of unresh	dent under provisions of the Hear spass and nuisance laws apply o	th and Safety Code, and understand that	SIGNATURE OF AP	PLICANT
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	EAND IS THE \$4.00_0	OCT 1 3 1988	COMMISSION AND RESIDENCE	LA Campos, M.D. w
CERTIFICATION UNIVERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON 10/	14 SIGNATURE OF THE	PERSON IN CHARGE OF S	SPOSITION	LICENSE NUMBER OF CREMATED REMAIN DISPOSER, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	7		

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

## MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

to took

Date 10-11-88

of E131 Treso (1)	_ Funeral_date, tin	ne Frile	1/14 /	0:30
Church, Chapel, Graveside	e & Morie	May	er	Mortu
All Funeral cars must arrive before 3:30	p.m. of regular worl	k day or an	extra charg	ge will be app
and billed to undersigned. War time vete	eran			
Lot 3255 Grave Row _	ALCOHOLD OF	1	ELECTRIC CONTROL	9
Lot 2200 Grave Row _	Section _	-	_ Division/	Houk
Grave space & Care Fund				100-0
Additional spaces and care fund				
Opening/Closing & Setup				640
Burial Container				
Handling Fees				
Flower vases - Marker setting fee	********	*******		
				ant E
Recording and filing fee				005
Recording and filing fee				005
Recording and filing fee		Total Due		005
Recording and filing fee	***************************************	Total Due		1990
Recording and filing fee	aid receipt number	Total Due	8 /8	199.0 199.0
Recording and filing fee  Sales taxes  I hereby certify I am the	Paid receipt number	Total Due	Balance d	1990 1990 named dece
Recording and filing fee  Sales taxes  I hereby certify I am the	Paid receipt number	above indihold Mt. H	Balance d of the above cated. I cert ope Cemete  Hema th ST	1990 unamed dece tify and repre ery harmless
Recording and filing fee	Paid receipt number	above indihold Mt. H	Balance d of the above cated. I cert ope Cemete  Hema th ST	1990 1990 named dece
Recording and filing fee  Sales taxes  I hereby certify I am the	Paid receipt number	above indihold Mt. H	Balance d of the above cated. I cert ope Cemete  Hema th ST	1990 unamed dece tify and repre ery harmless



WHITE TO CUSTOMER CANARY CEMETERY AUDITOR

#### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY 264-3151

3	N. 18	ο.	20	0.1	O.	411	a
	N	u	31	20	88	10	
	2002	_	940	200	90	-	84

From Many Herman Dez	Address 5/25, 46457	Date	7-11- A 9.	2113	19 28
In Audit Payment of Lineto		0	ollars (\$	199.00	)
Lot 3255 Grave	Row C/5 Sec	etion_/		Division Block	9
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STANDED TO PAID IN THIS SPACE	CREDIT	67007 77184 — 100 77184 — 100 77181 —	20 80 84	00
Pre-Need Lot		Handling Fee Recording & Misc. Fees Pre-Neod Trust Sales Tax	77182 — 100 77185 — 100 77183 — 63033 9022 — 60101 78390 —	35	OD
AC-212 (Nev 10-87)	ISSUED BY W. J. Flagues	TOTAL PAID	1_	199	-

E-7694

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

4000	NAME OF DECEDENT Elsi Trejo			Aug. 8. 1988	Oct.9, 1988
National	City	PLACE OF DEATH—COUNTY FOR S		MMria J. Hern	ouse on other informant andez -Mother
	ss of Funeral Director (or Ferson Adams At		1424	512 S.46th S San Diego, C	
. 1	TYPE OF PERA	MIT, CHECK ONLY ONE OF THE	FOLLOWING TYPES OF	DISPOSITION	C N CO
S SURFAL IIN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND BURN ENTOMBMENT)	AL (INCLUDES	B. DISINTERMENT AND RE	INTERMENT OF CREMATED
☐ 2 CREMATIO	N AND BURIAL IINCLUDES INURNMENT)	6. DISINTERMENT, CREMATIO	ON, AND BURIAL	9 DISINTERMENT OF CRE	
3 CREMATION CEMETERY  4 SCIENTIFIC		7 DISINTERMENT, CREMATIC OTHER THAN IN A CEMET		FOR CORONEI	R'S USE ONLY
INTERMENT	NAME AND ADDRESS OF CEMETERY W	3751 Market St.	San Diego,	Ca. Sa	n Diego
CREMATION	NAME AND ADDRESS OF CREMATORY W	A CONTRACTOR OF THE PROPERTY O	DATE CREMATED	SIGNATURE OF PERSON IN C	HARGE OF CREMATORY
BURIAL AT SEA UR DISPOSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	ADDRESS. NEAREST POINT ON SHORE, N/A Gravel (	WE OR OTHER DESCRIPTION SUFFIC	LENEY FINAL	PLACE AND COUNTY OF DISP	OSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that to this permit gives no right of unrest	edent under provisions of the Hea espass and nuisonce laws apply	Ith and Safety Code, and understand that	SIGNATURE OF APPLICANT  DATE SIGNED	
LOCAL REGISTRAR ,	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DISPOSITION SPECIFIED II	H PROVISIONS AMOUNT OF FEE PAID	OCT 1.3 1988	SIGNATURA LOCALINA	Compact, M.D.
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISCOUNTING WAS MADE ON	SIGNATURE OF	PERSON IN CHARGOS	DISPOSER.	UMBER OF CREMATED REMAINS IF APPLICABLE
IF DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF	COUNTY OF DEATH	7		

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

## MT. HORE CEMETERY INTERMENT ORDER

#### A STATE OF THE STA

City of San Diego

Date 16-11-88

You are hereby authorized and instructed, sub	ect to your rules and regulations, to inter the remains
of to the	a, Oslam
in a Vault/Liner Di	neral dete, time the 10/19 110m
Church, Chapel, Graveside	Hove Korball 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. War time veteran	
50 11	-
Lot 99 Grave Row	Section Division=Block
Grave space & Care Fund	250.00
Additional spaces and care fund	
	200 70
Opening/Closing & Setup	. 0 1000
Burial Container	1 1XA 1700
Handling Fees	(110)
Flower vases - Marker setting fee	250
Recording and filing fee	JI-3
Sales taxes	11-3
nous.	Total Due
Paid re	ceipt number
20 W	Balance due
in this	
I hereby certify I am the and this is your authority to make disposition	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 a	and I agree to hold Mt. Hope Cemetery harmless from and interment.
	Douga & Odgas)
I hereby authorize the interment in lot I hold under deed.	Surger 11 th of the American
	3404 Ballbackens Dr. 30
Signature of recorded holder of deed	Caley. To Code
	365 - 8758
	12-18-11
	Invoice # 075 48 4
Work Order # <b>E</b> 7695	Acct. # 028039
PY-593 (REV. 8-85)	

W.O. #_	2-769	2	
Pa-1	2/		0
(Date	the 11	19	88

96/, 37 San Diego, California

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 to sum of Alak Market Street, San Diego, Ca 92102 DOLLARS with interest from on the unpaid principal at 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 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 fenewals, 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

PAR NAME Donna S. Odom SIGNATURE DOLLA J. Edom

ADDRESS

CALIF. DRIVERS LIC. # CO 446893

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

NAME OF DECEDEN	Larry Andrea Odom		sex Male	Jan. 26, 1957	Oct. 10, 1988
PLACE OF DEATH	CITY OR TOWN Diego	PLACE OF DEATH—COUNTY San DI	OR STATE - NOT IN CALIFORNIA!	NAME AND ADDRESS OF Donna Odom -	SPOUSE OR OTHER INFORMANT
	ss of funeral director for person act lagsdale Mortuary 5050		F1329	San Diego, Co	Arms Dr. Apt. 355 A 92117
	TYPE OF PERA	MIT, CHECK ONLY ONE O	F THE FOLLOWING TYPES OF	F DISPOSITION	
MI BURIAL IIN	ICCUDES ENTOMBMENT)	5 DISINTERMENT AN	D BURIAL (INCLUDES	8 DISINTERMENT AND REMAINS IINCLUDE:	REINTERMENT OF CREMATED
	N AND BURIAL (INCLUDES INURINMENT)	6 DISINTERMENT, CR	EMATION, AND BURIAL MENT)		CHEMATED REMAINS AND THAN IS A CEMETERY
3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY  SCIENTIFIC USE		7 DISINTERMENT, CREMATION, AND DISPOSITION		FOR CORONER'S USE ONLY	
INTERMENT	NAME AND ADDRESS OF CEMETERY W			0 0	San Diego
CREMATION	NAME AND ADDRESS OF CREMATORY	WHERE REMAINS ARE TO BE OF	MATED DATE CREMATED	SIGNATURE OF PERSON	IN CHARGE OF CREMATORY
BURIAL AT SEA DII DISPOSITION OTHER IN A CEMETERY MATED REMAINS	N/A South	Taux	MANCIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF C	DISPOSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	0. / 222 /)	held in	1-11-	. 0 . 0
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the per remains of the above named dece and I hereby acknowledge that tre this permit gives no right of unrest	dent under provisions of the espass and nuisance laws	ne Health and Safety Code, opply and understand that	DATE SIGNED	gy to family -
LOCAL REGISTRAN	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED II	DE AND IS THE	0ct 14 1980	SIGNATURE OF LOCAL RE	GISTAAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPUSITION		ATTER COATES	oleultate		E NUMBER OF CREMATED REMAINS SER, IF APPLICABLE
IF DISPOSITION IS TO GECUP IN ANOTHER COUNTY	San Diego, DEAL. of		San Diego, CA	92138-5222	

COPY Z IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR Y THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

CITY OF SAN DIEGO AUDITOR & COMPTROLLER REPORT NO. C65-102

# PAID INVOICE REPORT BY DEPARTMENT AS OF 11/18/88

DATE: 11/18/88 TIME: 212740 PAGE: 12

DEPARTMENT 072

PROPERTY DEPT-MT HOPE CEMETERY

INV	DATE	ACCT NO	CUSTOMER	NAME	ORG	ACCT	J/0	PAYM DATE OPER	PD BY BN/E	PAYM REF NO PACILI	AMOUNT PAID AMOUNT APPLIED	AMOUNT	BILLED	UNPAID BALANCE
075484	10/27/88	95	DONNA J. 100 100 100 100 100 60101 67007	072 072 072 072 072 072		77181 77182 77183 77184 77185 78390 77184	0000 0000 0000 0000	72 72 72	CK	112	961.37 320.00 175.00 35.00 200.00 170.00 11.37 50.00	(OX	961.37	PAID IN FULL

## MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 10/12/88

You are hereby authorized and instructed, sub	ject to your rules and regulations, to inter the remains
of Jonnie W	right
in a John Coult Full	neral, date, time Ex JOHN 10/14
Church, Chapel, Graveside gravesid	e : daystale 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. War time veteran .	16.
9	- 10
Lot Grave Row	Section Division/863
Grave space & Care Fund	59500
Additional spaces and care fund	none
Opening/Closing & Setup	32000
Burial Container J. S Va	ult-Corule 17500
Handling Fees Labor	- 170°°
Flower vases - Marker setting fee	
Recording and filing fee	35 -
	11 37
a Any hate	Total Die 130637
Dodg	oceipt number 37/03 1386-3
Faid re	
0 -	Balance due
I hereby certify I am the	new 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 a	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	1 Colles Morre
hold under deed.	\$ 17 E 18
Signature of recorded holder of deed	Address (20 Die 0 0 92102
	State 238-0450 Ep Code
	Talaphone
	01543
West Order # E 7696	Invoice # D2XO3X
Work Order # 1000	Acct. #

	NOTE	w.o. #	096
130637	San Diego, Califòrnia	Oct 12	1988

7 -101

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope tery or San Diego City Treasurer, or order at 3751 Market Street, San Diego, Ca 92102 to Sum of Theteen funder and 3/100 \_\_\_\_\_\_\_ DOLLARS with interest from \_\_\_\_\_\_\_ Overhow 15, 1988 on the unpaid principal at 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 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 had against his/her separate property for any obligation contained herein. If any action be instituted on this note, the undersigned promises(s) to pay such sum as the Court may fix as attorney's fees.

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

PRINT NAME ARCHIE MORE SIGNATURES SIGNATURES

ADDRESS

CALIF. DRIVERS LIC. # .

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

t-7696

The same of the sa			STEEL ST			
NAME OF DECEDEN			SEX	DATE OF BIRTH	DATE OF DEATH	
	Tomie Wright, Jr.		Male	Sept. 24, 1933	Oct. 8, 1988	
PLACE OF DEATH-		PLACE OF DEATH—COUNTY ID	R STATE IF NOT IN CALIFORNIA)		POUSE OR OTHER INFORMANT	
San DI	ego	San	Diego	Pearl Hae Pone	dar - Classe	
	S OF FUNERAL DIRECTOR TON PERSON ACTI		ALIFORNIA DICENSE NUMBER	6441 - 62nd St		
Anderson-	Ragsdale Mortuary 5050	Federal Rlvd	F1329	San Diego, CA	02114	
	30	1000101 0110	11323	San Diego, GA	24114	
1	TYPE OF PERMI	T, CHECK ONLY ONE OF T	HE FOLLOWING TYPES OF	DISPOSITION		
1 SURIAL UN	CLUDES ENTOMBMENTI	5. DISINTERMENT AND 8 ENTOMBMENT)	URIAL (INCLUDES:	B. DISINTERMENT AND R REMAINS (INCLUDES I		
2 CREMATION	N AND BURIAL (INCLUDES INURNMENT)	8. DISINTERMENT, CREMI		8 DISINTERMENT OF CHEMATED REMAINS AND DISPOSITION OTHER THAN IN A CEMETERY		
2 CREMATION CEMETERY	N AND DISPOSITION OTHER THAN IN A	7. DISINTERMENT, CREM-	ATION AND DISPOSITION	FOR CORONE	R'S USE ONLY	
☐ 4 SCIENTIFIC	USE	OTHER THAN IN A CE		☐ 10 DISPOSITION PENDING	The second second	
OR OTHER DESIGNATION OF	NAME AND ADDRESS OF CEMETERY WH		EMAINS ARE TO BE INTERRE	cou	NTY	
INTERMENT	Mt. Hope Cemetery 375	1 Market Street		1 5	an Diego	
CREMATION	NA HELD	ERE REMAINS ARE TO SE CREMA	ATED DATE CREMATED	SIGNATURE OF PERSON IN	CHARGE OF CHEMATORY	
BURIAL AT SEA	ADDRESS, NEAREST POINT ON SHORELIN	E. OR OTHER DESCRIPTION SH	FFICIENT TO IDENTIFY FINAL	HACE AND COUNTY OF DIS	POSITION	
OR  CPOULTION OTHER  IN A CEMETERY  MATER REMAINS	N/A Conut	Taul		( new Ma	tts)	
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECA	is moore "	rient -			
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the personal transfer of the above named deceded and I hereby acknowledge that tresthis permit gives no right of unrestricted.	ent under provisions of the b pass and nuisance laws app	fealth and Safety Code, ply and understand that	SIGNATURE OF APPLICANT  DATE SIGNED		
LOCAL REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH P OF THE CALIFORNIA HEALTH AND SAFETY CODE AUTHORITY SON THE DISPOSITION SPECIFIED IN	ADD IS THE	OCT 14 1988	Dorall & Ca	STRAR ISSUING PERMIT	
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DESENSITION WAS MADE ON	14/88 SIGNATURA	eogew Su		NUMBER OF CREMATED REMAINS , IF APPLICABLE	
IF DISPOSITION IS 10 OCCUP IN ANOTHER COUNTY	San Diego Dept. o		The second secon	A 92138-5222		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

Nº 37103

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT						
MOUNT HOPE CEMETER						
264-3151						

		Date:	-1 19 80
From: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Address: 5050 ted	wel blue	d, 6 10 921
there per	dead sei 37	//OD Dollar	18 1306-37
In Payment of	Janua Wint	her la	10000
In Payment of		A TORONTO	
3	Children of the Control	NE L	Division
Lot Grave	Row S	ection	Block
Invoice No. 075 47 3	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE.	CREDIT 670 20% Sales Care 771	119 00
Acct. No. 62803Z	PAID IN THIS SPACE	80% Sales	100 474
5-71-91		Opening/	100 340 00
wo	DEC 28 1988	Burial	100 7/15 00
BALANCE DUE	" *** 1988		100 190
Contract of the Contract of th		Recording &	100
Pre-Need Lot At Need On Acct	1	Pre-Need 63	033
Pre-need Trust   Cash   Check   Check	6 Lethe	Sales Tax 60	101 // 3')
AC-212 (Rev. 10-87) 30(60	ISSUED BY	TOTAL PAID	130637

MT. HOPE CEMETERY

## INTERMENT ORDER

City of San Diego

Date 10/12/88

	00.00	
You are hereby authorized and instructed, sub	113 0 :	nter the remains
of teraldene	Donds.	
in a topsed Comel Vault Fu	neral, date, time Lu - 2 PM -	10/14
Church, Chapel, Graveside Chapel 4	Sa : Hagsdale	Mortuary.
All Funeral cars must arrive before 3:30 p.m.	of regular work day or an extra charg	e will be applied
and billed to undersigned. War time veteran	No.	
Lot 4 Grave 2 Row	Section Division A	12
		11000
Grave space & Care Fund . Spour	Clock	7759
Additional spaces and care fund		30.00
Opening/Closing & Setup	-01704	320=
Buriel Container Conquile 1	-S. Vault	175 -
Handling Fees	( <del></del>	170 =
Flower vases - Marker setting fee		2/00
Recording and filing fee		1/37
Sales taxes		120132
noteson.	7/ 924	100001
2009 Paid re	eceipt number 5605/	10637
Bush	Balance de	350.00
I hereby certify I am the Same for	new for of the above	named decedent
and this is your authority to make disposition that I have the right to make this authorization	and I agree to hold Mt. Hope Cemeter	
any liability on account of said authorization	and interment.	1
I hereby authorize the interment in lot I	weam Jones	(for
hold upder deed.	12/3 Dorstby	Street
Signality of Secreted holder at these	Taxa Kelley C	25446
	805-238-	-3/28
	MACIA	-1
E mean	Invoice # 0 75 90	
Work Order # <b>L</b> 7697	Acct. # 828039	-
11 300 1007 0 301		

 •	w	•	-
 ne o		м	и

Oct 12 1988

San Diego, Califòrnia

30 days after date for value received, the undersigned maker promises to pay to Mt. Hope Cemetery or San Diego City Preadurer, or order at 3751 Market Street, San Diego, Ca 92102 the sum of Street, San Diego, Ca 92102 DOLLARS with interest from on the unpaid principal at the rate of 12 percent per annum,

payable on demand.

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

PRINT NAME\_\_\_\_\_\_ SIGNATURE & Same Jones;

ADDRESS

CALIF. DRIVERS LIC. # FD 494021

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E- 7697

DATE OF DEATH NAME OF DECEDENT DATE OF BRITH SEX Geraldine Bonds Female. Oct. 6. PLACE OF DEATH-CITY OR TOWN NAME AND ADDRESS OF SPOUSE OR OTHER INFORMANT PLACE OF DEATH-COUNTY IOR STATE # NOT IN CALIFORNIA! National City San Diego Bryan Tecumseh Carter - Son NAME AND ADDRESS OF FUNERAL DIRECTOR TOR PERSON ACTING AS SUCHO 3621 Adams Avenue Apt. 2 CALIFORNIA LICENSE NUMBER 1 Anderson-Ragsdale Mortuary San Diego, CA 92116 5050 Federal F1329 TYPE OF PERMIT, CHECK ONLY ONE OF THE FOLLOWING TYPES OF DISPOSITION BURIAL (INCLUDES ENTOMBMENT) □ 5. DISINTERMENT AND BURIAL UNCLUDES ■ 8. DISINTERMENT AND REINTERMENT OF CREMATED. ENTOMBMENT REMAINS IINCLUDES INURNMENTI 2 CREMATION AND BURIAL (INCLUDES INURNMENT) 9 DISINTERMENT OF CREMATED REMAINS AND B. DISINTERMENT, CREMATION, AND BURIAL DISPOSITION OTHER THAN IN A CEMETERY INCLUDES INHENMENT 3 CREMATION AND DISPOSITION OTHER THAN IN A 7. DISINTERMENT, CREMATION, AND DISPOSITION FOR CORONER'S USE ONLY OTHER THAN IN A CEMETERY 4 SCIENTIFIC USE \* TO DISPOSITION PENDING NAME AND ADDRESS OF CEMETERY WHERE REMAINS OR CREMATED REMAINS ARE TO BE INTERRED COUNTY INTERMENT Mt. Hope Cemetery - 3751 Market St. San Diego, CA San Diego NAME AND ADDRESS OF CRIMATORY WHERE REMAINS ARE TO SE CREMATED. DATE CREMATED SIGNATURE OF BERSON IN CHARGE OF CREMATORY CREMATION N/A BURGAL AT SEA ADDRESS, NEAREST POINT ON SHORELINE, OR WHER AESCRIPTION SUFFICIENT TO IDENTIFY FINAL PLACE AND COUNTY OF DISPOSITION N/A госитом отней IN A CEMETERY MATED REMAINS NAME AND ADDRESS OF FACILITY RECEIVING REMAINS SCIENTIFIC N/A USE SIGNATURE OF APPLICANT This is to certify that I am the person having the right to control the disposition of the **ACKNOWLEDGMENT** remains of the above named decedent under provisions of the Health and Safety Code, OF DATE SIGNED and I hereby acknowledge that trespass and nuisance laws apply and understand that APPLICANT this permit gives no right of unrestricted access to property not owned by me. AMOUNT OF FEE PAID DATE PERMIT ISSUED SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT THIS PERMIT IS ISSUED IN ACCORDANCE WITH PROVISIONS LOCAL OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS THE \$4.00 REGISTRAR AUTHORITY FOR THE DISPOSITION SPECIFIED IN THIS PERMIT SIGNATURE OF PERSON IN CHARGE OF LICENSE NUMBER OF CREMATED REMAINS CERTWICATION THAT THE SPECIFIED DISTOSTION WAS MADE ON DISPOSER, IF APPLICABLE OF PERSON IN CHARGE IENTER DATE OF DISPOSITION NO CASE ADDRESS OF REGISTRAR OF COUNTY OF DEATH P. IF-DISPOSITION IS San Diego Dept. of Health Services San Diego, CA TO OCCUR IN ANOTHER COUNTY.

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

#### OFFICIAL RECEIPT CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT WHITE ..... TO CUSTOMER CANARY CEMETERY MOUNT HOPE CEMETERY 264-3151 Division Bow. Section Grave NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE CREDIT 67007 Invoice No. 20% Sales Care 77184 00% Sales of Lots Acct. No. Opening/ Closing 100 W.O. Burian Containers BALANCE DUE Handling Fee Recording & Misc Fees 77183 63033 Pre-Need Pre-Need Lot At Need On Acct Trust Pre-need Trust Sales Tax 60101 ISSUED BY TOTAL PAID AC-212 (Rev. 10-87)

075481	10/27/88	028036	SAM JONES	072
	8-76	97	100 100 100 60101	072 072 072
NUMBER	OF INVOI	CES PAID	76	2.87

77181 77182 77183 77185 78390	11/04/88 CK 000072 000072 000072 000072	0011756	356.37 126.36 102.85 20.57 99.91 6.68

glers

	100 67007 072	††184 čŏŏŏ†2 77184	44.00 11.00	
8-7697	SAM JONES, JR. 100 072 100 072 100 072 100 072 60101	77181 000072 77182 000072 77183 000072 77185 000072 78390	250.00 60 88.64 72.15 14.43 70.09 4.69	PARTIAL PAYMENT

M 0.

606.37 PAID IN FULL

# MT. HOPE CEMETERY INTERMEDIT ORDER

City of San Diego

Date 10/14/88

	Date 7 / / /
You are herebauthorized and instruc	ted, subject to your rules and regulations, to inter the remains
1110, 1	Resento
of Jack	I May the John
in a Vente/Liner	Funeral, date, time
Church, Chapel, Graveside	( ) : Stenkkam tutch 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. War time v	1/0
A - 1/	4
Lot 20 Grave 4 Row	Section Division/Block
	250
Grave space & Care Fund	250-
Additional spaces and care fund	Mone
Opening/Closing & Setup	320=
Burial Container	en la Joo al Joo
Handling Fees	Labor 145-00
Flower vases - Marker setting fee	>000
Recording and filing fee	150
Sales taxes	6-
*.70	Total Due
Parts.	Paid receipt number 36834 856-50
1-0	Balance due
I hereby certify I am the	of the above garned decedent
that I have the right to make this autho	position of remains as above indicated, treatily and represent prization and lagree to hold Mt. Hope Cometory harmless from
any liability on account of said author	ization and interment/
I hereby authorize the interment in lo	yela oneso
hold under deed.	Supplure 4298 Massurado Do
	- Althor
Signature of recorded holder of deed	State Colo Ca Ta Code
	7 (6/1) 438-4853 Telephone
	32 74 330
F 7608	Invoice #
Work Order # 1030	Acct. #

Nº 36854

WHITE TO CUSTOMER CANARY CEMETERY AUDITOR

PROPERTY DEPARTMENT

## MOUNT HOPE CEMETERY

264-3151 Payment of Division Grave Row. Section NOT VALID FOR PURPOSE STATED UNLESS STAMPED CREDIT 67007 Invoice No. 20% Sales Care 80% Sales of Lots Acct. No. Opening/ Closing Burial Containers BALANCE DUE. Handling Fee Recording & 100 Misc. Fres 77183 63033 Fre-Need Pre-Need Lot On Acct Trust 9022 Pre-need Trust D Cash Sales Tax 60101 78390 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

From: Scriffon - Mo	Me Address: 808 131	Date: Street	19
In Payment of	Marker Tratte	Cotton	105 90)
Lot 20 Grave	4 RowS	Section 2	Division /
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED "PAID" IN THIS SPACE	CREDIT 67007 20th Sales Care 77184 — 80th Sales 100 of Lots 77184 — Opening/ 100 Closing 77181 Burlal 100 Containers 77182 —	DEC 02 1988
Pre-Need Lot	ISSUED BY STILLE MALE	Handling Fee 77185 — Recording & 100 Misc. Fees 77183 — Pre-Need 63033 Trust 9022 — Sales Tax 60101 78390 — TOTAL PAID \$	125 00

## PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E-7698

NAME OF DECEDEN			SEX	DEC 12, 1908	OCT 13, 1988
PLACE OF BEATH—CITY OR TOWN  SAN DIEGO  NAME THE HAND HITCHELY MOR TURK TOR 988 113TH AS IMPERIAL BEACH, CA 92032		PLACE OF DEATH—COUNTY SAN DIEG	(CH STATE II NOT IN CALIFORNIA)	LILIA ROMERO, FRIEND	
		STREET DUCHI CALIFORNIA DICENSE NUMBER F-1178		4288 MARCHADE DRIVE SAN DIEGO, CA 92154	
W .	TYPE OF PER/	AIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES O	F DISPOSITION	
1 BURKAL UN	ICLUDES ENTOMBMENT)	5 DISINTERMENT AND ENTOMBMENTI	BURIAL IINCLUDES	B DISINTERMENT AND REMAINS (INCLUDES	REINTERMENT OF CREMATED INURNMENT?
122	N AND BURIAL IINCLUDES INURNMENTI	6 DISINTERMENT, CRE	MATION, AND BURIAL	9. DISINFERIMENT OF COURSEDSTITION OTHER	REMATED REMAINS AND THAN IN A CEMETERY
3 CREMATION AND DISPOSITION OTHER THAN IN A CREMETERY 4 SCIENTIFIC USE		7 DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY  In disposition pending	
INTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMAINS OR CREMATED MARKET STREET, SAN D	REMAINS ARE TO BE INTERRE	D 00	SAN DIEGO
CREMATION	NAME AND ADDRESS OF CHEMATORY W	PLEATE COVER		SIGNATURE OF PERSON IN	CHARGE OF CREMATORY
BURDAL AT SEA CA SPOSITION OTHER IN IN A CEMETERY DEMATED REMAINS	ADDRESS, NEAREST POINT ON SHOREL	INE. OR OTHER DESCRIPTION S	UFFICIENT TO IDENTIFY FINAL	PLACE AND COUNTY OF D	SPOSITION:
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS			
ACKNOWLEDGMENT OF	remains of the above named dece	rson having the right to control the disposition of the dent under provisions of the Health and Safety Code,			
APPLICANT	and I hereby acknowledge that to this permit gives no right of unrest		A STATE OF THE PARTY OF THE PAR	DATE SIGNED	
PEGISTHAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY COL AUTHORITY FOR THE DIPPOSITION SPECIFIED IS	DE AND IS THE \$4.00	OCT 1 4 1988	Torall & Con	SISTRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITIVE THE SPECIFIED 19	SIGNATURAL DATE	OF PERSON IN CHARGINGS		NUMBER OF CHEMATED REMAINS ER IF ARPLICABLE
IF CHEPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ANOMESS OF REGISTRAN OF	COUNTY OF DEATH	0		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED, OR BY THE PERSON IN CHARGE OF THE CREMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE. OR Y THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS.

# MT. HOPE CEMETERY INTERMENT ORDER

City of San Diego

	Date 10/15	188
DELMER		
You are hereby authorized and instructed, subje	ect to your sules and regulations, to inter	r the remains
of Delman	Sullevan	10-2-
in a tocoble Crypt Fun	eral date, time ///	o agan
Church, Chapel, Graveside	Mare Conrad	Mortuary.
All Funeral cars must arrive before 3:30 p.m. o	f regular work day or an extra charge w	ill be applied
and billed to undersigned. War time veteran	yes.	
1701	0 5	8
11	Section Division/Block	
Grave space & Care Fund For Nocel	the Criffet	495 2
Additional spaces and care fund For Lipe	seese - Louise E.	***
Opening/Closing & Setup		32000
Burial Container Double Cuff	it-	330€
Handling Fees Labor		320 9
Flower vases - Marker setting fee V.A.).	reflew - 3	_
Recording and filing fee		3500
Sales taxes		21.45
FAIDI	Total Due	521.45
PAID	eipt number 36847	M31.81
17 1988	Balance due	0
UCI 1	11.	
I hereby cartify the the Market deposition o	T Musely of the above name	ned decedent
that I have the right to make this authorization a any liability on account of said authorization ar	and I agree to hold Mt. Hope Cemetery h	armless from
any manning on account of sale authorization as	1000	
I hereby authorize the interment in lot I	Down Sul	lux
hold under deed.	7541 Central	are
Signature of recorded holder of deed	Lemor Dron	10
	4667745	Zip Code
	Felephone	
	Invoice #	
Work Order # <b>E</b> 7699	Acct. #	
the same same at the		

## WHITE TO CUSTOMER

CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT

FINK AUDITOR	264-3151	in/	17 OV
0 000	, 74111-A	( Date: ///	1900
From Dely	Address: 5 4/ Couls	of alw of Lon	non France
ty legal Hunder	wenty on a	Dollars	\$ 152 1040
In Payment of	einen san gov	JEKNEV X	warran,
Tol	- Olivers	5	Division 🗸
Lot /OG Grave	RowS	ection	Block
Invoice No.	NOT VALID FOR PURPOSESTATED UNLESS STAMPED PAID IN THIS SPACE	CREDIT 57007 20% Sales Care 77184 80% Sales 100	396 00
Acct. No 17/499	Och	O t Lots 77184 O Clesing 100 Clesing 77181	320 00
W.O. F. T.O.	19	Burial 100 Containers 77182	330 00
BALANCE DUE		Handling Fee 77185 Recording & 100	320 00
Pre-Need Lot At Need On Acct	m	Misc. Fees 77183 Pre-Need 63033	
Pre-need Trust □ Cash □ Check ☑	J. Mad	Trust 9022 Sales Tax 60101 76390	21 4
AC-212 (Rev 10-87) /08	ISSUED BY CONFUNCTION	TOTAL PAID \$	1521 45

WHITE TO CUSTOMER CANARY CEMETERY PINK AUDITOR

### CITY OF SAN DIEGO, CALIFORNIA PROPERTY DEPARTMENT MOUNT HOPE CEMETERY

264-3151

From Ause Julley	there - year ?	A 12 11 11 11 11 11 11 11 11 11 11 11 11	Jenn Jine
In Payment of		ection 5	Division Block
Invoice No	NOT VALID FOR PURPOSE STATED UNLESS STAMPED : PAID IN THIS SPACE.	CREDIT 20% Sales Care 30% Sales of Lots Opening/ Closing Buriel	100 DEC 7 0 1988
Pre-Need Lot	1984ED BY Andy Word	Recording & Misc. Fees Pre-Need Trust Sales Tax	77185 100 77183 50033 9022 60101 78390 5

# PERMIT FOR DISPOSITION OF HUMAN REMAINS E-7699

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

DELMER DE	EAN SULLIVAN		Male Male	July 18	, 1919 Octo	
PLACE OF DEATH—CITY OR TOWN San Diego  NAME AND ADDRESS OF FUNEDAL DIRECTOR, JOH PERSON A CONTROL LEMON GROVE MORTUS 7387 Broadway-Lemon Grove		San Diego	ACE OF DEATH—COUNTY (OR STATE IF NOT IN CALIFORNIA)		Louise E. Sullivan-Wif	
		CALIFORNIA CICENSE NOMBER F 941		The second secon	7541 Central Avenue Lemon Grove, CA 92045	
	TYPE OF PERI	MIT, CHECK ONLY ONE OF	THE FOLLOWING TYPES C	F DISPOSITION		
1 BURIAL IIN	CLUDES ENTOMBMENT)	5. DISINTERMENT AND ENTOMBMENT)	BURIAL IINCLUDES		NT AND BEINTERMENT NCLUDES INURNMENT)	OF CREMATED
The Sections	N AND BURIAL (INCLUDES INURNMENT)	B. DISINTERMENT, CREE UNCLUDES INJRAME			NT OF CREMATED REN N OTHER THAN IN A C	
3 CREMATION CEMETERY  4 SCIENTIFIC	N AND DISPOSITION OTHER THAN IN A	7 DISINTERMENT, CREI	MATION, AND DISPOSITION EMETERY	FOR In Disposmo	CORONER'S USE	ONLY
NTERMENT	NAME AND ADDRESS OF CEMETERY W	HERE REMOTEST CHARACTER	EMANSTREET INTERF	ED	San Die	go
CREMATION	NAME AND ADDRESS OF CREMATORY W		Baterul	SIGNATURE OF F	ERSON IN CHARGE OF	CREMATORY
DR DRIAN AT SEA OR STRONG OTHER OF CREMATED REMAINS	N/A Bollom A	Tuble Cryp	note (	What and coun	A Les	el .
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY REC	EIVING REMAINS	of &	one,	\ \E	=
ACKNOWLEDGMENT OF APPLICANT	This is to certify that I am the po remains of the above named dece and I hereby acknowledge that to this permit gives no right of unres	dent under provisions of the espass and nuisance laws a	Health and Safety Code, aply and understand that	DATE SIGNED		
LOGAL .	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CALIFORNIA HEALTH AND SAFETY CO- AUTHORITY FOR THE DISPOSITION SPECIFIED I	DE AND IS THE \$4.00	OCT 1 8 1980	Signature or	L Campathan issu	20mm
CERTIFICATION OF PERSON IN CHANGE OF DISPOSITION	DISPOSITION WAS MADE ON 10	18/88 SIGNATURE	OF PERSON IN CHARGE OF	DISPOSITION	LICENSE NUMBER OF DISPOSER, IF APPLICA	
H DISPOSITION IS TO OCCUP IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAN OF N/A	COUNTY OF DEATH				

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE REMATORY WHERE THE REMAINS ARE CREMATED, OR BY THE PERSON IN CHARGE OF THE FACILITY WHERL THE REMAINS ARE UTILIZED FOR SCIENTIFIC USE, OR THE PERSON IN CHARGE OF DISPOSING OF THE CREMATED REMAINS

# MT. HOPE CEMETERY INTERMENT GROER

City of San Diego

Date 10-17

		Date	
You are hereby authorized and instructed, subje	ct to your rules ar	nd regulations, to	inter the remains
of Billiams	n. Mu	KOO	was wid
in a Valle Transport	sral date, time	mus,	1900 11.00
Church, Chapel, Graveside Auch A	MOVE A	wood	Mortuary.
All Funeral cars must arrive before 3:30 p.m. of	The second of th	Control of the second	rge will be applied
and billed to undersigned. War time veteran _		Back	Soile
Lot 30 9/ Grave Row	Section	Division#	10
	1	Division?	Block /
Grave space & Care Fund P.U.A.	eed	***********	
Additional spaces and care fund			
Opening/Closing & Setup			320,00
Burial Container			100,00
Handling Fees			14510
lower vases - Marker setting fee			1000
Recording and filing fee			35,00
Sales taxes			151
	Total		606 57
mald see	eipt number 2	2/000	616.50
Paid rec	eipt number	-	-0
		Balance	due I
hereby certify I am the SON		of the above	named decedent
and this is your authority to make disposition of that I have the right to make this authorization a	nd lagree to hold	e indicated. I cer Mt. Hope Cemet	tify and represent ery harmless from
any liability on account of said authorization an	d interment.	. DXD	
hereby authorize the interment in lot I	NU	UNGER	1-
nold under deed.	101 margaret	1 ALTA VU	STA DR.
ignature of recorded holder of deed	Address VIST	A. CA. 9	2084
A CONTRACTOR OF THE CONTRACTOR	State (6.19	)940-05	6 C Zyr Code
	Telephone		U.S
	A. (1) (1) (1) (1)		
F 7700	Invoice # _		
Work Order # L 1100	Acct. #		

## PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK-MAKE NO ALTERATIONS OR ERASURES

E- 7700

NAME OF DECEDEN	The state of the s		SEX Male	May 23,1913	Oct. 15, 1988
PLACE OF DEATH—CITY OR TOWN  La Mesa  PLACE OF DEATH—COUNTY (OR STATE  San Diego			OR STATE # NOT IN CALIFORNIA	NAME AND ADDRESS OF SPOUSE OR OTHER INFORMANT	
Conrad Lei 7387 Br	mon Grove Mortuary oadway-Lemon Grove	TING AS SUCHI , CA 92045	CAUFORNA LICENSE NUMBER  F 941	Vista, CA 92	
	TYPE OF PERM	IT, CHECK ONLY ONE OF T	HE FOLLOWING TYPES O	F DISPOSITION	
B I BURIAL IIN	CLUDES ENTOMBMENT)	5 DISINTERMENT AND E	PURIAL RINCLUDES	B DISINTERMENT AND R	
2 CREMATION AND BURIAL (INCLUDES INURNMENT)     3 CREMATION AND DISPOSITION OTHER THAN IN A CEMETERY     4 SCIENTIFIC USE		6 DISINTERMENT, CREM			EMATED REMAINS AND THAN IN A CEMETERY
		7 DISINTERMENT, CREMATION, AND DISPOSITION OTHER THAN IN A CEMETERY		FOR CORONER'S USE ONLY  10 DISPOSITION PENDING	
TERMENT	NAME AND ADDRESS OF CEMETERY WI	ry San Diego	CA THE BE INTERH	ED SO	an Diego
CREMATION	NAME AND ADDRESS OF CHEMATORY WE	HERE REMAINS ARE TO BE OFEN	MED POATE CREWATED	SIGNATURE OF PERSON IN	CHARGE OF CREMATORY
BUHIAL AT SEA OR OSITION OTHER THAN IN A CEMETERY OF CREMATED REMAINS	N/A Cathol	NE, OR OTHER DESCRIPTION SU		All Control of the Co	POSITION
SCIENTIFIC USE	NAME AND ADDRESS OF FACILITY RECE	EIVING REMAINS			
ACKNOWLE DOMENT OF APPLICANT	This is to certify that I am the per- remains of the above named dece- and I hereby acknowledge that tre	lent under provisions of the I	Health and Safety Code,		
APPLICANT	this permit gives no right of unrestr		CHANGE STANDARD STANDARD OF THE STANDARD OF TH		
REGISTRAR	THIS PERMIT IS ISSUED IN ACCORDANCE WITH OF THE CAUFORNIA HEALTH AND SAFETY COD AUTHORITY FOR THE DISPOSITION SPECIFIED IN	AND IS THE \$4 . OA	OCT 2 0 1988	Torall & Cas	STRAR ISSUING PERMIT
CERTIFICATION OF PERSON IN CHARGE OF DISPOSITION	DISPOSITION WAS MADE ON 10	20/88 SIGNATURE	Sur Delle		NUMBER OF CREMATED REMAINS R, IF APPLICABLE
IF DISPOSITION IS TO OCCUR IN ANOTHER COUNTY	INDICATE ADDRESS OF REGISTRAR OF C	OUNTY OF DEATH	0 0		

COPY 2 IS RETAINED BY THE PERSON IN CHARGE OF THE CEMETERY WHERE THE HUMAN REMAINS ARE INTERRED. OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE CREMATED. OR BY THE PERSON IN CHARGE OF THE FACILITY WHERE THE REMAINS ARE UTILIZED 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

PROPER	TY DEPARTMENT			***	00
OUNT H	OPE CEMET	ERY			
	264-3151		10	in	
		con	Date: / / / -	11	
Address:	1011	alto	Vista	16	, 0
7.	1501	1001		61	1

in Payment of	Address: Dollars (	606-50	
- 30 9/ Grave	Row Section	Division / O	
Acct. No	NOT VALID FOR PURPOSE STATED UNKESS STAMPED 20% Sales Care 77184 - 20% Sales Care 77184 - 20% Sales 100 6f Lots 77184 - 20% Sales 100 77185 - 20% Sales 100 77185 - 20% Sales 100 77185 - 20% Sales Care 77185 - 20% Sales Sales Sales 77185 - 20% Sales Sa	339 G	
Pre-Need Lot At Need On Acct Pre-need Trust Cash Check	Handling Fee 77155 - Recording & 100 Misc. Fees 77183 - Pre-Need 83033 Prust 9022 -	6 50 66 50	