

08345

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Form 768b-S594-1022-1m

THE E. L. STECK COMPANY

APPLICATION FOR MORTUARY WARRANT

STATE OF TEXAS, }
County of Henderson } I, Ella Cain

do hereby certify that I am the person to whom is entrusted the paying of the accounts and indebtedness of the late Mrs. Martha Cain, who was a pensioner of the State of Texas, and whose file number is 8345 and whose original county is Henderson

The said pensioner Mrs. Martha Cain, died on the 6th day of January, 1923, in the town of Neer Eustace, County of Henderson, Texas.

The pensioner died in the home of Ella Cain who was related to the pensioner as daughter-in-law

That the warrant, which application is hereby made for, shall be applied to paying all or part of the expenses incurred by the said pensioner Mrs. Martha Cain

I further certify that the warrant for the current quarter has not been cashed by the pensioner, to the best of my knowledge and belief.

I am related to the pensioner as (Friend) daughter-in-law and that my home is in the town of Eustace County of Henderson State of Texas, that my postoffice address is Eustace P.O. - Texas

Signed Ella Cain

Before me, A Notary Public in and for the County of Henderson, State of Texas, personally appeared Ella Cain who being by me duly sworn, did certify to and sign the foregoing statement.

(Seal of Office)

NP. in and for Henderson Co., Texas.

CERTIFICATE OF UNDERTAKER

I, M. B. Ballard & Son, do certify that I am an undertaker in the town of Eustace, County of Henderson, State of Texas that I had charge of the body of Mrs. Martha Cain, who died in the town of Eustace, County of Henderson, State of Texas on the 6th day of January, 1923. That said body was prepared for burial by me on the 7th day of Jan, 1923. That said body was buried in the Payne Springs Cemetery, which is located in the County of Henderson State of Texas, and that I am of the opinion that warrant herein applied for should be issued to the said Mrs. Ella Cain, who makes the foregoing application.

Signed M. B. Ballard & Son Undertaker.

CERTIFICATE OF PHYSICIAN

I, H. P. Lewis, do certify that I am a practicing physician, and that I attended Mrs. Martha Cain in her last illness, and am of the opinion that her ailments were due to senility & organic brain

I further certify that I am of the opinion that the Mortuary Warrant above requested should be issued in the name of the aforementioned applicant, in accordance with Act passed by the Thirty-fifth Legislature, and approved March 2, 1917.

Signed H. P. Lewis Physician.

Physician's Address Habcock Texas

Jan 12 1923
ARK

TX

1-8-23