

GARDENS of MEMORY

CEMETERY AND MAUSOLEUM

10703 North State Road 3
Muncie, Indiana 47303
765-289-0656

GARDEN VIEW

FUNERAL HOME

10501 North State Road 3
Muncie, Indiana 47303
765-284-1920

June 15, 1999

Mrs Ina Henderson
12 C Shyview Apts
Chesterfield, In 46017

Dear Mrs Henderson,

We appreciate the courtesies extended to our counselor and for your decision to plan ahead with Gardens of Memory. Our staff feels a personal responsibility to all our families and we are dedicated to maintaining the cemetery in beauty, dignity, and reverence.

You have selected one of the finest methods of memorialization known to man. Bronze has been used for many centuries and the tradition of fine craftsmanship is still carried on today.

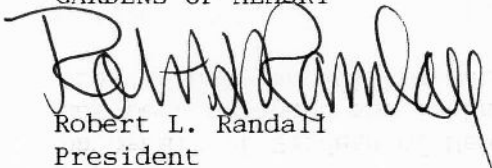
On behalf of Gardens of Memory, your agreement of June 11, 1999 has been accepted and is hereby acknowledged. The memorial will be ordered and you will be notified when it is installed.

Gardens of Memory is recognized as a leader in the industry and will continue to provide the finest products, services, and facilities to those who join our family. This progress is evidenced by the new Garden View Funeral Home, adjacent to Gardens of Memory, designed to further enhance our service to the community.

If at any time you have questions concerning Gardens of Memory or Garden View, please feel free to contact us.

Cordially Yours,

GARDENS OF MEMORY


Robert L. Randall
President

Gardens of Memory CEMETERY

Garden View FUNERAL HOME

Sharon Dalton

Family Counselor

10703 N. State Rd 3
Muncie, IN 47303

765 289 0656 Office
765 281 7283 Pager

CASH CHECK CUST. # _____ CONT. # _____

DATE 6/11/99 ITEMS PURCH'D. 2 c/c, 2 memorials, 2 chapels, 2 final dates

RECEIVED OF Mrs M. Henderson

Four Thousand Seven Hundred Twelve + 10/100 \$ 4712¹⁰/₁₀₀

FOR Payment in full.

GARDENS of MEMORY

CEMETERY AND MAUSOLEUM

10703 North State Road 3
Muncie, Indiana 47303
317-289-0656

BY Sharon Dalton

Thank You!

PURCH. # _____
 CONT. # _____

GARDENS of MEMORY

Cemetery and Mausoleum
 10703 North State Road 3 • Muncie, Indiana 47303

PURCHASE AGREEMENT
TELEPHONE 765-289-0656
STATE CERT # CA29800103

This Agreement, made this 11 day of June, 1999 by and between CARRIAGE FUNERAL HOLDINGS, INC., doing business as GARDENS of MEMORY, a cemetery operating under the laws of the State of Indiana, hereinafter called the SELLER and

NAME Ina Henderson TELEPHONE NO. (765) 378 3829

ADDRESS 12 C Skyview Apts

CITY Chesterfield STATE IN ZIP CODE 473

hereinafter called the PURCHASER, witnesseth that, for and in consideration of mutual covenant herein contained, the PURCHASER agrees to buy and the SELLER agrees to sell burial rights, merchandise and/or services as are described in this agreement and on the terms and conditions shown herein:

BURIAL RIGHTS
 Burial Space(s) Mausoleum Crypt(s) Cremation Niche(s) \$ _____ MAKE DEED TO: (Print)
 Garden _____
 1st Selection Lot# _____ Sp# _____ Ina Henderson
 2nd Selection Lot# _____ Sp# _____
 Bldg _____ Sec. _____ Level _____ Crypt/Niche #(s) _____

It is understood that the Burial Rights are:

MEMORIALS
 2 (two) Outer Burial Container(s): Type GOM TS * \$ 1310.00 completed not completed
 2 (two) Bronze Memorial: Size 24x14 (Does not include final dates) * \$ 1249.24
 2 (two) Memorial Endowment Care (\$ 50.00 per space) \$ 100.00 Merchandise and/or Services being purchased for use by: (Print)
 2 (two) Memorial Base: Granite Concrete _____ * \$ 262.20 Ina Henderson - Hymns
 Vase Assembly * \$ _____ Esther Robbins - Hymns
 Mausoleum Lettering * \$ _____ Lot 765 Sp 3
 Other: 2 (two) Final dates \$ 116.00

PURCHASER(S) CERTIFY THAT HE/SHE HAS/HAS NOT BEEN DIAGNOSED WITH A TERMINAL ILLNESS AND IS IN GOOD HEALTH: (INITIAL)

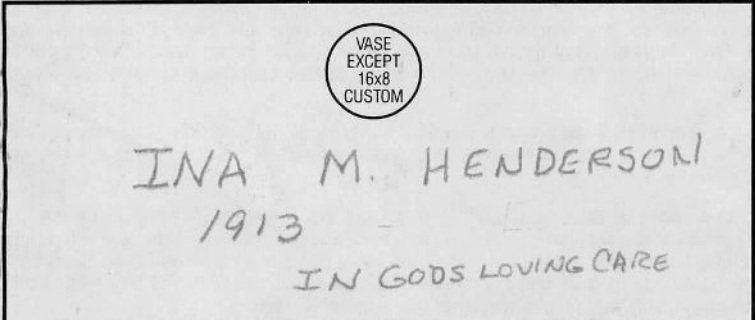
SERVICES
 2 (two) Interment/Entombment/Inurnment Service(s) \$ 1170.00
 2 (two) Rental of Chapel Grave Side Equipment _____ * \$ 130.00
 2 (two) Vault/Crypt Set and Seal \$ 300.00
 2 (two) Assembly/Foundation/Installation of Memorial \$ 252.78
 Other: _____ * \$ _____

HE _____ SHE _____
 HAS _____
 HAS NOT _____

GRAND TOTAL CASH PURCHASE PRICE OF ABOVE ITEMS \$ 4880.22

ITEMIZATION OF AMOUNT FINANCED

| | |
|---------------------------------|-------------------------------------|
| Total Cash Purchase Price | \$ <u>4880.22</u> |
| Sales Tax on Merchandise (*x5%) | \$ <u>146.88</u> |
| Administration/Recording | \$ <u>30.00</u> |
|SUB TOTAL | \$ <u>5057.10</u> |
| Less Trade-In | \$ _____ |
| Discount | \$ <u>Memorial Day Disc. 350.00</u> |
| Other: | \$ _____ |
| Consumer Protection Fund | \$ <u>5.00</u> |
| Net Cash Purchase Price | \$ <u>4512.10</u> |
| Down Payment | \$ <u>140.00</u> |
| Amount Financed | \$ <u>0</u> |



| | |
|---|---------------|
| Mfr. Design/Border | Size |
| <u>Manor Seabrook</u> | <u>24x14</u> |
| Letter Style | Color |
| <u>Roman</u> | <u>Brown</u> |
| Together Forever | EMB.# |
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <u>108788</u> |
| Other | EMB.# |
| Emblems | Description |
| X # _____ | _____ |
| XX # _____ | _____ |
| XXX # _____ | _____ |

PURCHASER'S APPROVAL OF MEMORIAL INSCRIPTION:

Ina Henderson

| Disclosure Statement | | | | |
|---|---|--|---|--|
| ANNUAL PERCENTAGE RATE The cost of your credit as a yearly rate. _____ % | 1. FINANCE CHARGE The dollar amount the credit will cost you. \$ _____ | 2. AMOUNT FINANCED The amount of credit provided to you or on your behalf. \$ _____ | 3. TOTAL OF PAYMENTS The amount you will have paid after you have made all payments as scheduled. \$ _____ | 4. TOTAL SALE PRICE The total cost of your purchase on credit including your down payment of: \$ _____ <i>7352.10 paid in Full</i> |
| Your payment schedule will be as follows: | | | | |
| Total Number of Payments | Amount of Payments | | Date Payments Are To Begin | |
| | _____ @ \$ _____ and _____ @ \$ _____ | | | |
| Late charge: If a payment is more than 10 days late, you may be charged \$3.00 or 3% of the unpaid portion of the payment, whichever is less. Prepayment: If you pay off early, you may be entitled to a refund of part of the finance charge. See your contract document for any additional information about nonpayment, default, any required prepayment in full before the scheduled date, and prepayment refund and penalties. | | | | |

Special Provision: Should the purchaser elect to complete payment for the Amount Financed as shown above within _____ months, NO FINANCE CHARGES will be imposed and any finance charges previously collected will be credited to the full purchase price.

Buyers Right To Cancel: If this sale was solicited by Gardens of Memory or its representative at a place other than Gardens of Memory's place of business, you, the purchaser, may cancel this transaction at any time prior to midnight of the third business day after the date of this transaction. See attached notice of cancellation for an explanation of this right.

Purchaser acknowledges receipt of the completed copy of this agreement and two copies of the Notice of Cancellation.

 Purchaser's Signature

SS# _____
306-17-8007

VET. YES NO DOB _____
12 21 13

 Purchaser's Signature

SS# _____

VET. YES NO DOB _____/_____/_____

GARDENS OF MEMORY Acceptance

WITNESS _____ / _____
 CEMETERY COUNSELOR S.O.S.

By: _____
 Authorized Official

SEE REVERSE SIDE FOR ADDITIONAL TERMS AND CONDITIONS WHICH ARE A PART OF THIS AGREEMENT.

1M/10/98

NOTICE OF CANCELLATION

Contract Date _____

You may cancel this transaction, without any penalty or obligation, within three business days from the above date.

If you cancel, any property traded in, any payments made by you under the contract or sale, and any negotiable instrument executed by you will be returned within 10 business days following receipt by the seller of your cancellation notice, and any security interest arising out of the transaction will be cancelled.

If you cancel, you must make available to the seller at your residence, in substantially as good condition as when received, any goods delivered to you under this contract or sale; or you may if you wish, comply with the instructions of the seller regarding the return shipment of the goods at the seller's expense and risk.

If you do make the goods available to the seller and the seller does not pick them up within 20 days of the date of your notice of cancellation, you may retain or dispose of the goods without any further obligation. If you fail to make the goods available to the seller, or if you agree to return the goods to the seller and fail to do so, then you remain liable for performance of all obligations under the contract.

To cancel this transaction, mail or deliver a signed and dated copy of this cancellation notice or any other written notice, or send a telegram, to:
GARDENS OF MEMORY at 10703 N. St. Rd 3, Muncie, IN 47303

not later than midnight of _____ (Date)

I hereby cancel this transaction

 (Date)

 (Purchaser's Signature)

 (Purchaser's Signature)

LAWN CRYPT CERTIFICATE OF OWNERSHIP

GARDENS of MEMORY

CEMETERY AND MAUSOLEUM

This is to certify that

INA M. HENDERSON and S. ESTHER ROBBINS, Sisters

has contracted for and fully paid for two (2) CONCRETE, STEEL REINFORCED LAWN CRYPT(S) TO BE USED SOLELY IN GARDENS OF MEMORY, 10703 North State Road 3, Muncie, IN 47303. The price paid includes installation charges and state sales tax.

These crypts are either installed on the purchaser's lot, in inventory at Gardens of Memory, or the monies received for such crypt(s) are place in trust with the Citizens First State Bank in Hartford City, Indiana.

These crypts are made to Gardens of Memory specifications and are constructed of the finest materials available for your family and cemetery.

This certificate includes two (2) opening and closing charges.

It is also understood and agreed between the Purchaser and Gardens of Memory that these crypts and services (if applicable) are transferable to any individual or family who is using Gardens of Memory with written instructions to Gardens of Memory from the Purchaser.

This certificate is issued in accordance with the provisions of the contract entered into on June 11, 1999.

Date Issued: July 20, 1999.

Thom S. Woodrum
WITNESS

Robert Randall
PRESIDENT

GARDENS of MEMORY

CEMETERY AND MAUSOLEUM

10703 North State Road 3
Muncie, Indiana 47303
765-289-0656

GARDEN VIEW

FUNERAL HOME

10501 North State Road 3
Muncie, Indiana 47303
765-284-1920

July 20, 1999

Ms. Ina M. Henderson
12 C Skyview Apts
Chesterfield, IN 46017

Dear Ms. Henderson:

Enclosed is your Certificate of Ownership to your pre-need lawn crypts and services (including the use of the Chapel) to be used here in Gardens of Memory.

You should file this Lawn Crypt Certificate of Ownership with the deed to your property at Gardens of Memory, as this is your record of ownership.

It should give you considerable peace of mind in knowing that you have this responsibility taken care of. It gives us a great deal of satisfaction in knowing that we can serve families in this manner.

If you have any questions about Gardens of Memory or we can help you in any way, please be sure and contact us.

Cordially yours,

GARDENS OF MEMORY



Robert L. Randall
President

RLR:d
enclosures

P.S. We have also marked our records to show that you have paid in full for two memorials and two final date scrolls. The second one of each being used for Esther Robbins.

VASE
EXCEPT
16x8
CUSTOM

S. ESTHER ROBBINS
1920
IN LOVING MEMORY

| | | |
|--|---------------------------------------|--|
| Mfr. <u>M</u> | Design/Border <u>Dogwood/Seabrook</u> | Size <u>24x14</u> |
| Letter Style <u>Roman</u> | Color <u>Brown</u> | Scroll Type <u>Tri</u> <input checked="" type="checkbox"/> <u>Full</u> |
| Together Forever <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | EMB.# <u>108797</u> |
| Other _____ | | EMB.# _____ |

| Emblems | Description |
|-------------|-------------|
| X # _____ | _____ |
| XX # _____ | _____ |
| XXX # _____ | _____ |

ITEMIZATION OF AMOUNT FINANCED

| | |
|---------------------------------|----------|
| Total Cash Purchase Price | \$ _____ |
| Sales Tax on Merchandise (*x5%) | \$ _____ |
| Administration/Recording | \$ _____ |
|SUB TOTAL | \$ _____ |
| Less Trade-In . \$ | \$ _____ |
| Discount \$ | \$ _____ |
| Other: \$ | \$ _____ |
| Consumer Protection Fund | \$ _____ |
| Net Cash Purchase Price | \$ _____ |
| Down Payment | \$ _____ |
| Amount Financed | \$ _____ |

PURCHASER'S APPROVAL OF MEMORIAL INSCRIPTION:

Dee Henderson