BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 1296

1.	Place of Death Wyandotte (County)	Prairie Villag	e, KS	Residence	
	(County)	(Township, Village or City)		(Hospital)	
2.	Full name Joseph Christian Gottsc	h			
3.	Sex Male	4. Color or Race.	White		
5.	Single, Married, Widowed or Divorced Marrie	1			
6.	Date of Birth September 23	19 26 7 Age 76	Vears 10	Months 29	D
8.	Occupation Orthopedic Surgeon				-
9.	Birthplace (State or Country) Shenandoah,	Lowa			
10.	Name of Father Erwin Julius Gottsch	, M.D.			
11.	Dirtuplace of Father (State or Country)				
12 .	Maiden Name of Mother Jennie Dunnegan				
13.	Diffinition of Mother (State or Country)				
14.	Informant Janet Sly Gottsch	15	Address 7904 Gra	nada Prairie Vil.	KS 66208
16.	Date of Death August 21, 2003	19	riddioss.		
17.					
	Name of Doctor (or Coroner or Health Officer)				
	71dd1685				
19.	Place of Burial or Removal Rose Hill Cemete	ry	late of Burial Augus	t 26, 2003	
20.	Undertaker Johnson Co Funeral Chapel	Addres	11200 Metcalf	Overland Pk. KS	66210
				The Ro	00210

Name Joseph Christian Gottsch August 26,

MATT PARROTT & SONS CO., WATERLOO, 10W/1 1E832

Field Record of Previous Burials

FORM 35-7

These sheets to be used on the grounds to secure data which will be copied permanently in Cemetery Lat Record.

NOTE: Each small square represents a square foot of lot surface. For convenience each tenth foot is indicated by a heavy line. To make a record of previous burials, draw a diagram, with pencil, of each lot, beginning with Lot No. 1, and use a separate sheet for each lot. This can be done in the office from the plat and the owner's name and other data as to ownership secured from deed record. These blanks will then be taken to the cemetery and a record fill be made from the lots, of the names of those buried and location of grave on lot. A number corresponding to name must be placed on plat to identify grave.

Description Owned

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Addion, Sub-division or Section

ESOFN 2 Lot No. 20

Name of Owner

Address

Date Sold_

Price, \$ 300.

Remarks:

Grave No.

FULL NAME OF DECEASED

REMARKS

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