BURIAL REPORT

From Sexton to Secretary of Cemetery (TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 8300

1.	Place of Death	Montgomery	Red Oak	Montgomery County Hospital
		(County)	(Township or City)	(Facility)
2.	Name: Jeane	McCrary		
3.			_ 4. Color or RaceW	
5.	Single, Married, V	Widowed or Divorced:	Widowed .	
6.	Date of Birth Ju	ne 5, 1922	7. Age <u>94</u> Years <u>6</u>	_Months _ 5 Days
8.	Occupation: Secre	tary		
9.	Birthplace (State	or County)Shenando	ah, Iowa	
10.	Name of Father	Jay Thomas Borland		
11.	Birthplace of Fath	ner		,
12.	Maiden Name of	Mother:Ferne Spaulo	ling	
13.	Birthplace of Mot	her		
14.	Informant Marth	na Barnett 15. Add	lress: 1604 Oakridge Dr. Rec	l Oak, IA 51566
16.	Date of Death:	12/10/2016		
17.	Name of Doctor (or Coroner or Health Off	ficer)Dr. Brian Couse	18. Address <u>Red Oak, IA</u>
19.	Place of Burial o	r RemovalRos	e Hill Cemetery	20. Date of Burial: <u>12/15/2016</u>
21.	Undertaker	Hackett Livingston Fund	eral Home	
22.	Address 20	8 W. Clarinda Ave,	Shenandoah, Iowa 51601	

Date of Death 12/10/2016

Name: Jeane McCrary

Burial Date: 12/15/2016

BURIAL REPORT

Field Record of Previous Burials

These sheets to be used on the grounds to secure data which will be copied permanently in Cemetery Lot 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 will 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 Addition, Sub-division or Section, Block	Part of Lot No,
Name of Owner Address	Date Sold
Remarks: Concrete Val	Price, \$

		+		
				10
				W L
				Mathan
+				
\Box				
\Box	+			
	+++			
+++				

INDICATE DIRECTION BY N. S. E. OR W.

	Grave No.	FULL NAME OF DECEASED	REMARKS
	1	Lorna Jean	<
	2	McCrary	
	3		k
0.	4	3 from Not line	,
	5	to conter of grave	
	6	2' from W lot	
	7	line to edge of	p ^e
	8	grave.	
	9	J	
	10		
	11	Hackett	
	12	12/30/16	

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