BURIAL REPORT

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

Burial or Permit No.

1.	Place of Death: Douglas	Omaha		Monclair Nursin	g & Rahab Center	
	(County)	(Township or	r City)	(F	acility)	
2.	Name: Elsie Arends					
3.	Sex: Female					
5.	Single, Married, Widowed or Divorced: _	Widowed			6	
6.	Date of Birth: January 16, 1924		7. Age <u>89</u>	Years10		Days
8.	Occupation: Secretary					
9.	Birthplace (State or County):	Calumet, Michigan				
10.	Name of Father: Yalmer I	Lundberg				
11.	Birthplace of Father: Unknow	n				
12.	Maiden Name of Mother: Elizabetl	n Pokommen				Joseph 1997
13.	Birthplace of Mother : Unknow	n				
14.	Informant : Linda Warrick		_5. Address:	600 W. Nishna S	St. Clarinda, IA 51632	
16.	Date of Death 5:35 A.M. Thursday, Dec	ember 12, 2013				
					1.	
	Name of Doctor (or Coroner or Health Off	icer):Craig Meio	er, MD			
	Address: Omaha, NE					
	Place of Burial or Removal : Rose Hil					
19.	Undertaker: Kirsch Funeral Char	pel	Address:	405 W. Thomas	Ave. Shenandoah, Iowa	51601

ВГ	BURIAL REPORT
	No. 8110
Name	ELSIE ARENDS
Burial Date	12/13/2013
Date of Death12/12/2013	12/12/2013

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 Lot No. Name of Owner Address Date Sold Remarks: Price, \$ 4 Grave FULL NAME OF DECEASED REMARKS No. INDICATE DIRECTION BY N. S. E. OR W. 10