

BURIAL REPORT

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

Burial or Permit No.....

1. Place of Death Montgomery Red Oak Montgomery County Memorial Hospital
(County) (Township or City) (Facility)
2. Name: Mary Katherine Pierce
3. Sex: female 4. Color or Race: Caucasian
5. Single, Married, Widowed, or divorced: Widowed
6. Date of Birth 1/20/1945 7. Age 77 Years
8. Occupation: Certified Nursing Assistant
- 9.
10. Birthplace (State or County): Shenandoah, IA
11. Name of Father: Ople Miller
11. Birthplace of Father:
12. Maiden Name of Mother: Ruby Hall
13. Birthplace of Mother:
14. Informant: Bill Pierce Address: 603 O St. Hamburg, IA 51640
16. Date of Death: 2/6/2022
17. Name of Doctor (or Coroner or Health Officer): Dr. Baer
19. Place of Burial or Removal Rose Hill Cemetery 20. Date of Burial: 2/10/2022
21. Undertaker Hackett Livingston Funeral Home
22. Address 208 W. Clarinda Ave. Shenandoah, Iowa 51601

\$500

BURIAL REPORT

No. 8446

Name: Mary Katherine Pierce

Burial Date: 2/10/2022

Date of Death: 2/6/2022

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.

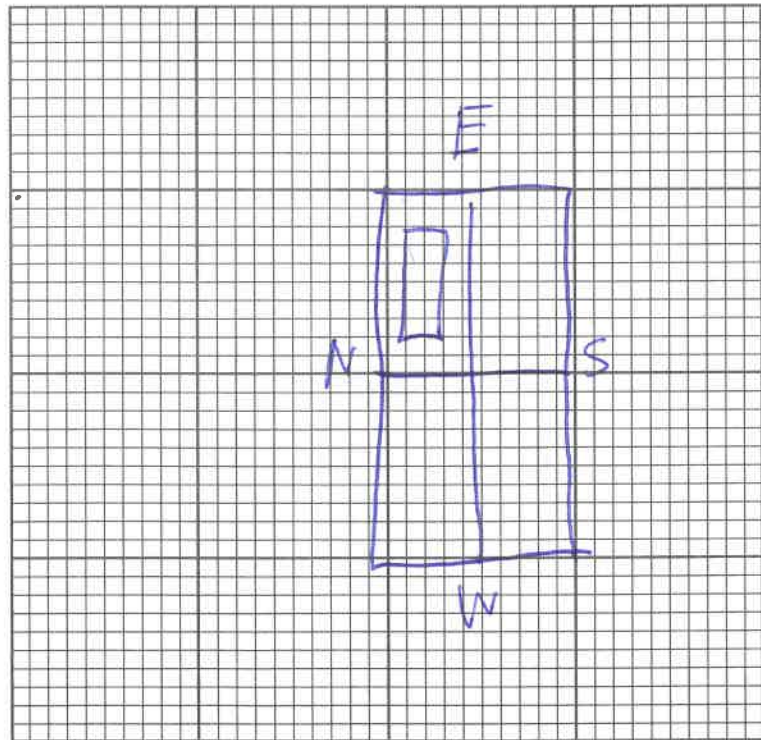
Description Owned Lakes, Block 8, E 1/2 Lot No. 18, _____ Ft.
Addition, Sub-division or Section Part of Lot Dimensions

Name of Owner _____ Address _____ Date Sold 2007

Remarks: Concrete Vault Price, \$ _____

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



Grave No.	FULL NAME OF DECEASED	REMARKS
1	Mary Pierce	
2		
3	2' from E line to	
4	edge of grave.	
5		
6	2' from N line in E 1/2	
7	to center of grave.	
8		
9		
10	Hackett	
11	2-10-22	
12		