## **BURIAL REPORT**

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

Burial or Permit No.

1.	Place of Death Page Shenandoah Shenandoah Medical Center (County) (Township or City) (Facility)						
2.	Name: Rozella Kay Orme						
3.	Sex: Female 4. Color or Race White						
5.	Single, Married, Widowed or Divorced: Married						
6.	Date of Birth 05/24/1946 7. Age 69 Years 8 Months 7 Days						
8.	Occupation: Nurse						
9.	Birthplace (State or County) Shenandoah. Iowa .						
10.	Name of Father Max Shadduck						
11.	Birthplace of Father						
12.	. Maiden Name of Mother: Thelma Thorn						
13.	Birthplace of Mother						
14.	Informant Ronald Orme 15. Address: 502 East Nishna Road, Shenandoah, Iowa 51601						
16.	Date of Death:						
17.	. Name of Doctor (or Coroner or Health Officer) <u>Dr. Bean</u> 18. Address <u>Shenandoah</u> , <u>IA</u>						
19.	Place of Burial or Removal Rose Hill Cemetery 20. Date of Burial: 02/04/2016						
21.	Undertaker Hackett Livingston Funeral Home						
22.	Address 208 W. Clarinda Ave, Shenandoah, Iowa 51601						

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**BURIAL REPORT** 

Name: Rozella K. Orme

Burial Date 02/04/2016

no. <u>8256</u>

## **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

Description Owned Addition, Sub-division or Section		, Block _ <b>O</b>	N40 Payr of Lot No.	$\overline{Dimensions}$ Ft.	
N	ame of Owner		Address	Date Sold _	
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