## **BURIAL REPORT**

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

Burial or Permit No............

1.	Place of Death Douglas	Omaha, N	Vebraska	University of Nebr	aska Medical Center		
	(County)	(Township	or City)	(Faci	lity)		
2.	Name:Joyce Ann Gibson	£				_	
3.	Sex: Female	4. Color or Race: _	White				
5.	Single, Married, Widowed or Divo	orced: Married			*	_	
6.	Date of Birth: June 26, 194	9	7. Age <u> 62</u>	Years9	Months3	Days	
8.	Occupation: Homemaker						
9.	Birthplace (State or County):	Maryville	e, Missouri				
10.	Name of Father:	eorge Sabastian Zirfas					
11.	Birthplace of Father:U	nknown					
12.	Maiden Name of Mother:A	gatha Cecilia Steinhauser					
13.	Birthplace of Mother:U	nknown					
14.	Informant : William Gib	son	_5. Address90	6 9th Ave Shenandoal	n, Iowa 51601		
16.	Date of Death: 6:15 p.m. T	hursday, March 29, 2012					
				1.			
	Name of Doctor (or Coroner or Health Officer): Dr. Foxley, M.D.						
	Address: Omaha, Neb	raska 68105					
	Place of Burial or Removal :R	ose Hill Cemetery	Date of	Burial: Monday	, April 2, 2012		
19.	Undertaker: Kirsch Funer	ral Chapel	Address:	405 W. Thomas A	ve. Shenandoah, Iowa	51601	

Date of Death 03/29/2012 .	Burial Date 04/02/2012	Name Joyce Ann Gibson .	No. 7989	BURIAL REPORTCLERK	JUN 26 2012	PAGO
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## **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 identify grave.

Description Owned

Addition, Sub-division or Section

Name of Owner

Remarks:

Address

Price, \$

Grave

FULL NAME OF DECEASED

Reference 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 the name of those buried and location of grave on lot. A number corresponding to name must be placed on plat to the name of those buried and location of grave on lot. A number corresponding to name must be placed on plat to the name of those buried and location of grave on lot. A number corresponding to name must be placed on plat to the name of those buried and location of grave on lot. A number corresponding to name must be placed on plat to the name of those buried and location of grave on lot. A number corresponding to name must be placed on plat to the name of those buried and location of grave on lot. A number corresponding to name must be placed on plat to the name of those buried and location of grave on lot. A number corresponding to name must be placed on plat to the name of the name of the name of those buried and location of grave on lot. A number corresponding to name must be placed on plat to the name of the name of

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No.	FULL NAME OF DECEASED	REMARKS
1	Joure a. Libson	N
2		
23/	rom north lot line of	the
East	half to center of gra	ve.
5	0	
261	ron Fast lot line to	
edas	e of grave.	£ **
8		
BA	vial date april 2, 2	0/2
10	11	
11	Kirsch Sev.	
12		