FORM 35-6 MATT PARROTT & SONS CO., WATERLOO, IOWA \$M428

BURIAL REPORT

pd-1-3-05

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 7398

1. Place of Death Douglas	Omaha, NE	Clarkson Hospital
(County)	(Township, Village or City) Elizabeth Castle	(Hospital)
3. Sex Female 5. Single, Married, Widowed or Divorced W	ido yred	white
8. Occupation Homemaker	, 19 15 7. Age 89	Years 10 Months 17 Days
Name of Father William Miller     Birthplace of Father (State or Country)	*	
13. Birthplace of Mother (State or Country)		
10. Date of DeathDecember 22, 2004	10	ress Rt #1 Box 376, Hortense, GA 31543
Name of Doctor (or Coroner or Health Office Address Omaha: NF	er) Dr. Joshua A. Urban	
19. Place of Burial or Removal Rose Hill Co	metery, Shenandoah, IA Date of	f Burial 12-29-2004 , 19 Shenandoah, Iowa 51601

