BURIAL REPORT

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

Burial or Permit No.

8310

| 1. | Place of Death | Page | Shenandoah | Elm Height Care Center | | | | | | | | | |
|-----|--|---|----------------------|--------------------------------------|--|--|--|--|--|--|--|--|--|
| | | (County) | (Township or City) | (Facility) | | | | | | | | | |
| 2. | Name: Frances H | lelene Tyner | | | | | | | | | | | |
| 3. | Sex: Female | | 4. Color or Race | White | | | | | | | | | |
| 5. | Single, Married, Widowed or Divorced: Widowed . | | | | | | | | | | | | |
| 6. | Date of Birth <u>07/14/1926</u> 7. Age <u>90 Years 6 Months 13 Days</u> | | | | | | | | | | | | |
| 8. | Occupation: Secretary | | | | | | | | | | | | |
| 9. | Birthplace (State or County) Omaha, NE | | | | | | | | | | | | |
| 10. | Name of Father Jay | Laverty | | | | | | | | | | | |
| 11. | Birthplace of Father | | | | | | | | | | | | |
| 12. | Maiden Name of M | Maiden Name of Mother: Ellen Peterson | | | | | | | | | | | |
| 13. | Birthplace of Mothe | Birthplace of Mother | | | | | | | | | | | |
| 14. | Informant_Richard | Informant Richard Tyner 15. Address: 2610 US Hwy. 59 Shenandoah, IA 51601 | | | | | | | | | | | |
| 16. | Date of Death: _0 | 1/27/2017 | | | | | | | | | | | |
| 17. | Name of Doctor (or Coroner or Health Officer)Dr. Todd Issacson18. Address Shenandoah, IA | | | | | | | | | | | | |
| 19. | Place of Burial or | Removal Rose | Hill Cemetery | 20. Date of Burial: <u>2/11/2017</u> | | | | | | | | | |
| 21. | Undertaker I | Hackett Livingston Fune | ral Home | | | | | | | | | | |
| 22. | Address 208 | W. Clarinda Ave, | Shenandoah, Iowa 516 | <u>01</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 identify grave.

| | Description Owned | | | | | ection | , Block | | , E 1 Lot No. 44 , Dimensions | Ft. |
|-------------------------|-------------------|-----|-----|----|------------------|---------------------------------------|---------------------------------------|--------------|-------------------------------|---------|
| | Name of Ow | ner | ran | 15 | Tyne | Address | | | Date Sold | |
| | Remarks: | (| cru | ma | tion | | | | Price, \$ | |
| | | | | | | | | Grave No. | FULL NAME OF DECEASED | REMARKS |
| BY N. S. E. OR W. | , | | | | | | | 1. | | |
| | - | | E | | 2 | Frances H. Tyne | | | | |
| | | | | | | | , , , , , , , , , , , , , , , , , , , | | | |
| | | 5 1 | 7 | - | 4 | 2 from Elot 1 to ease of grave | ine | | | |
| | | | | 5 | to edge of grave | | | | | |
| NDICATE DIRECTION BY N. | | | | | | | | 6 | C 1. + 156 | c. |
| ATE DIF | | | | | 7 | 2 from 5 lot line to center of gra | C MA | | | |
| INDIC | | | | | | | | 8 | to corner or gra | Ve |
| | | | | | 4 | | | 9 | N. E. | |
| | | | | | | | | 10 | | |
| | | | | | | | | 11 | Hackett | |
| | | | | | | | | 12 | 2/11/17 Bur | ial |

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