BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 7743

1.	Place of Death Omaha, NE Immanuel Medical Center (Hospital)	~~~~
2.	Full name (Hospital)	
3.	Full name Robert Eugene Davis	
5.	Scx. male 4. Color or Race White- Single, Married, Widowed or Divorced married Date of Birth June 27, 1937 19 7. Arc 72 Veers	
6.	Date of Birth	
8.		
9.	Birthplace (State or Country) Kirksville, MO Name of Father Leonard-Thomas Davis	
10.	Name of Father.	
11.	Name of Father Leonard-Thomas-Davis Birthplace of Father (State or Country)	
12.	Birthplace of Father (State or Country) Maiden Name of Mother	
13.	Maiden Name of Mother	
14.	Informant Mary Lou Davis	
16.	Informant Mary Lou Davis Date of Death 08/07/2009 15. Address 809.9th Ave: Shenandoah, IA 51601	
17.	00/07/2009, 19	
	Name of Doctor (or Coroner or Health Officer) Dr. Harvey Hopkins	
19.	Ollidila, Nivertaine en e	
20.	Place of Burial or Removal Rose-Hill Cemetery, Shenandoah, IA Date of Burial Aug. 12, 2009	9
2 0.	Hackett-Livingston Funeral HomeAddress Shenandoah, Iowa 51601	

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, of aw 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** rision or Section Name of Owner Address Date Sold Remarks: Grave FULL NAME OF DECEASED REMARKS INDICATE DIRECTION BY N. S. E. OR W.