

BURIAL REPORT

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

Burial or Permit No. 8376 ©

1. Place of Death Maricopa Sun City West, AZ Banner Del E Webb Med Center
(County) (Township or City) (Facility)
2. Name: Robert Dean Wilson
3. Sex: male 4. Color or Race White
5. Single, Married, Widowed or Divorced: widowed
6. Date of Birth 2/24/1944 7. Age 73 Years 10 Months 30 Days
8. Occupation: Insurance Salesman/Business Owner
9. Birthplace (State or County) Storm Lake, IA
10. Name of Father: Eugene Wilson
11. Birthplace of Father _____
12. Maiden Name of Mother: Beulah Campton
13. Birthplace of Mother _____
14. Informant Stephanie Osborn 15. Address: 2101 I Ave: Shenandoah, IA 51601
16. Date of Death: 1/23/2018
17. Name of Doctor (or Coroner or Health Officer) Hospice 18. Address Phoenix, AZ
19. Place of Burial or Removal Rose Hill Cemetery 20. Date of Burial: 3/7 /2018
21. Undertaker Hackett Livingston Funeral Home
22. Address 208 W. Clarinda Ave. Shenandoah, Iowa 51601

250.00

BURIAL REPORT

No. 83760

Name: Robert Dean Wilson

Burial Date: March 7 /2018

Date of Death 1/23/2018

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.

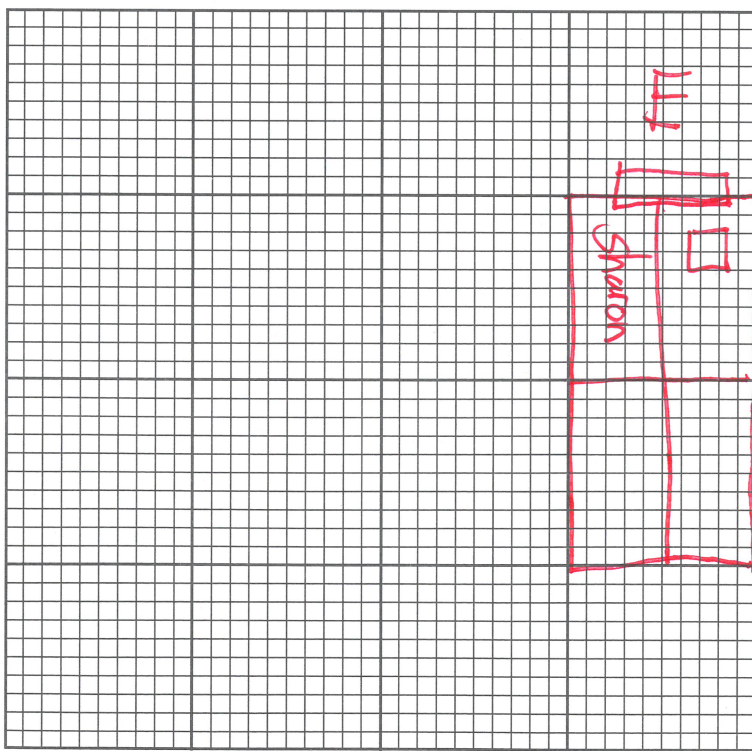
Description Owned Lakes, Block 8, E 1/2 Lot No. 48, _____ Ft.
Addition, Sub-division or Section Part of Lot Dimensions

Name of Owner Wilson Address _____ Date Sold _____

Remarks: cremation Price, \$ _____

36

INDICATE DIRECTION BY N. S. E. OR W.



Grave No.	FULL NAME OF DECEASED	REMARKS
1	Robert Wilson	
2		
3	2'6" from E lot line	
4	to edge of grave	
5		
6	2' from S lot line	
7	in E 1/2 to center	
8	of grave.	
9		
10		
11	3/7/18	
12	factest	