

BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 7358

1. Place of Death Douglas Omaha, Nebraska Nebraska Medical Center
 (County) (Township, Village or City) (Hospital)
2. Full name Jonna Rhea Glines
3. Sex Female 4. Color or Race white
5. Single, Married, Widowed or Divorced married
6. Date of Birth July 8, 1944 7. Age 59 Years 10 Months 16 Days
8. Occupation Hospital Cafeteria
9. Birthplace (State or Country) Shenandoah, IA
10. Name of Father John Fithen
11. Birthplace of Father (State or Country) _____
12. Maiden Name of Mother Gladys Fremont
13. Birthplace of Mother (State or Country) _____
14. Informant Gary Glines 15. Address 317 East Grant, Shenandoah, IA 51601
16. Date of Death May 24, 2004, 19____
17. _____

Name of Doctor (or Coroner or Health Officer) Dr. Rebecca Rundlett M.D.
 Address Omaha, Nebraska

19. Place of Burial or Removal Rose Hill Cemetary, Shenandoah, IA Date of Burial 05-27-2004, 19____
20. Undertaker Hackett-Livingston Funeral Home Address Shenandoah, Iowa 51601

BURIAL REPORT

Name Jonna Rhee Glines
 No. 7358
 Filed 5-27-04

300.00

5/24/04

MCITY PARROTT & SONS CO., WATERLOO, IOWA E832

Field Record of Previous Burials

FORM 35-7

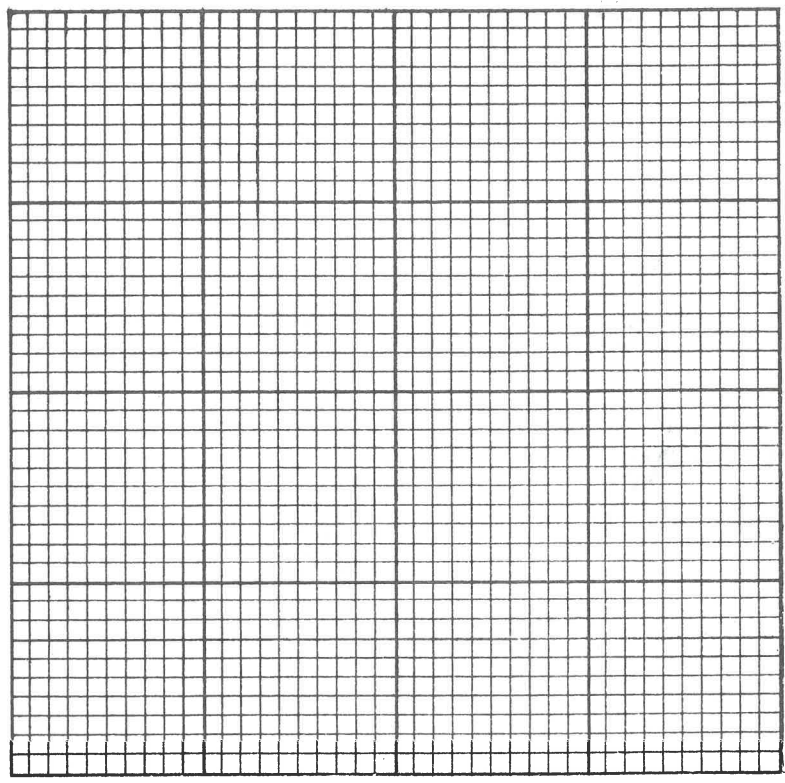
These sheets to be used on the grounds to secure data which will be copied permanently in Cemetery Lot Record.

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 N46E1/2 Lot No. 55 Ft.
Addition, Sub-division or Section Part of Lot Dimensions
 Name of Owner _____ Address _____ Date Sold _____
 Remarks: Concrete Vault Price, \$ 300.00

119

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



Grave No.	FULL NAME OF DECEASED	REMARKS
1	<u>Jonna R. Glines</u>	
2	<u>PAID JUN 03 2004</u>	
3		<u>2' from North lot line of the East half to Center of grave.</u>
5		
6		<u>2' from East lot line to edge of grave.</u>
7		
8		
9		<u>Burial date May 27, 2004</u>
10		
11		<u>Hackett's Livingston Sev.</u>
12		