BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 1287

1.	Place of Death Page (County)	Shenandoah, Iowa (Township, Village or City)	Shenandoah Memorial Hospital
2.	Full name Verna Pauline Cain		
3.	Sex Female	4. Color or RaceWhite	
5.	Single, Married, Widowed or DivorcedDivorce	ed	15 D
6.	Date of Birth November 18, 1925	., 19 7. Age77Years	Months Land Days
8.	Occupation Laborer/Agriculture		
9.	Birthplace (State or Country)Shenandoah,	_ Iowa	
10.	Name of Father Carl Alfred Swan	son	
11.	Birthplace of Father (State or Country)		
12.	Maiden Name of Mother Matilda M.		
13.	Birthplace of Mother (State or Country)		F G 00 1 G 0 1 NE 60107
14.		15. Address65_03	5_So92ndStUmana,-NE0012/
16.	Date of Death July 3, 2003	, 19	
17.			
		D 1. D 11-111 M D	
	Name of Doctor (or Coroner or Health Officer)	Douglas P. Weddle, M.D.	
	Address 1 Jack Foster Drive	Snenandoan, Towa	T1 7 2002
19.	Place of Burial or Removal Rose Hill C	emetery Date of Buriai.	homes Area D.O. Por 526
20.	Funeral Home Selby Funeral Cha	pel Address 403 W. II	Changed Love 51601
	Funeral Director Wm. D. Selby	*	Shenandoah, Iowa 51601

9	Filed 1-1-03	Name Verna tauline (aix	No/281	BURIAL REPOR
	19	7		RT

◆ MATT	PARROTT &	SONS	со.,	WATERLOO,	IOW.	‡E832

Field Record of Previous Burials

FORM 35-7

REMARKS

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. 40FS Lot No.

Description O	wned_
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Addition, Sub-division or Section

Part of Lot

12

Dimensions

Name of Owner

Address

Date Sold

Price, \$ 300.00 Remarks: Grave FULL NAME OF DECEASED No. 1 2 8 #i 5 INDICATE DIRECTION BY 10 11