

BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 2115

- 1. Place of Death Page Shenandoah
(County) (Township, Village or City) (Hospital)
- 2. Full name Anita Joan Jackson
- 3. Sex Female 4. Color or Race White
- 5. Single, Married, Widowed or Divorced Married
- 6. Date of Birth March 14, 1935 7. Age 66 Years 5 Months Days
- 8. Occupation Laborer
- 9. Birthplace (State or Country) Elmo, Missouri
- 10. Name of Father Frank P. Lee
- 11. Birthplace of Father (State or Country)
- 12. Maiden Name of Mother Martha Lea Burch
- 13. Birthplace of Mother (State or Country)
- 14. Informant Robert Jackson 15. Address 1205 Vista; Shenandoah, IA 51601
- 16. Date of Death August 13, 2001, ~~XX~~
- 17.

Name of Doctor (or Coroner or Health Officer) Floyd A. Jones, D.O.
 Address 1 Jack Foster Drive; Shenandoah, Iowa 51601

- 19. Place of Burial or Removal Rose Hill Cemetery Date of Burial August 16, 2001, ~~XX~~
- 20. Undertaker William D. Selby, F.D. Address 405 W. Thomas Ave; P.O. Box 526
Shenandoah, IA 51601

2/19

BURIAL REPORT

No.

715

Name *Anita O. Jackson*

Filed *8-16-01* 19__

MATT PARROTT & SONS CO., WATERLOO, IOWA 52240

Field Record of Previous Burials

FORM 35-7

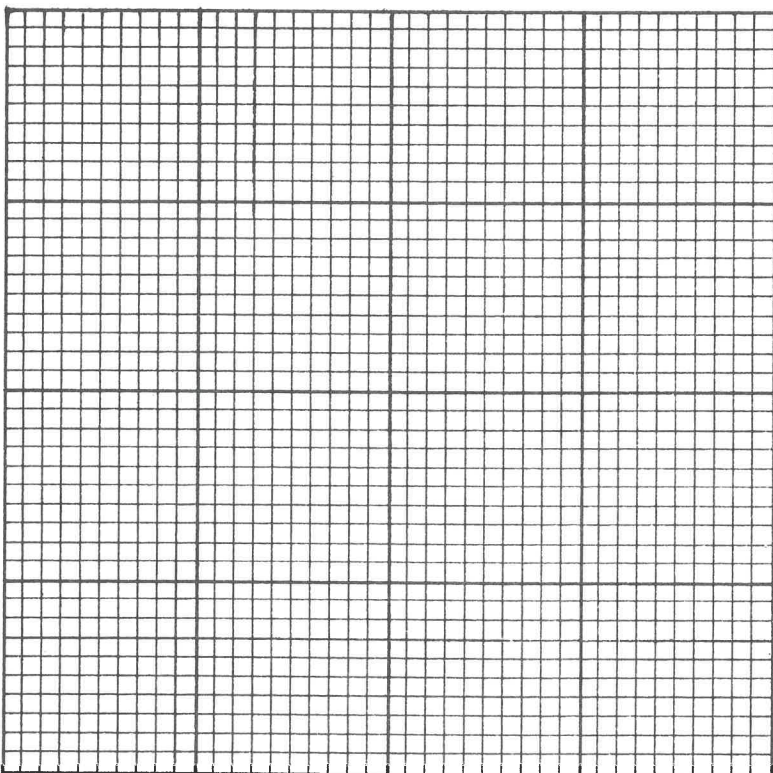
These sheets to be used on the grounds to secure data which will be copied permanently in Cemetery Lot Record.

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 Addition*, Block *8* *N40°E 1/2* Lot No. *63* Ft.
Addition, Sub-division or Section Part of Lot Dimensions

Name of Owner _____ Address _____ Date Sold _____

Remarks: *Concrete Vault* Price, \$ *300.00*



Grave No.	FULL NAME OF DECEASED	REMARKS
1	<i>Anita Joan Jackson</i>	
2		
3		<i>2' from the North lot line</i>
4		<i>of the East half to Center</i>
5		<i>of grave.</i>
6		
7		<i>2' from the East lot line</i>
8		<i>to edge of grave.</i>
9		<i>PAID AUG 20 2001</i>
10		<i>Burial date August 16, 2001</i>
11		
12		<i>Selby Sev.</i>

118

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