BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 2276

1.	Place of Death Rock Port, Missouri (Township, Village or City) (Hospital)
	Full name David Allen Baker Sex Male 4. Color or Race White
5.	Single, Married, Widowed or Divorced_Single
6.	Date of Birth August 5, 1967 , 19 7. Age 35 Years 9 Months 12 Days Occupation Welder/Laborer
9.	Birthplace (State or Country) Shenandoah, Iowa
10.	Name of Father James -David -Baker
11.	Birthplace of Father (State or Country)
12.	Maiden Name of Mother_Betty_Charlene-Braymen
13.	Birthplace of Mother (State or Country)
14.	Informant Betty Rogers 15. Address 213 W. Sheridan Ave. Shenandoah, IA
16.	Date of Death May 17, 2003 19 19 19
17.	
	Name of Doctor (or Coroner or Health Officer) Shawn-Minter, County-Coroner
19.	Place of Burial or Removal Rose Hill Cemetery Date of BurialMay-22-, -2003, 19
	Funeral Home Selby Funeral Chapel Address 405 W. Thomas Ave. P.O. Box 526
	Funeral Director William D. Selby — Shenandoah, IA 51601

Cremotion	Filed 5 - 22 - 23	Name Dand A. B.	BURIAL RE
	19	Daley	REPORT

◆MATT 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. Onumber corresponding to name must be placed on plat to identify grave.

Description Owned

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Provided the contracti

Description (${\sf Dwned}$
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Addition, Sub-division or Section

Part of Lot

Name of Owner.

Address

Date Sold

hemo Remarks:

75°° Price, \$.

Grave No.	FULL NAME OF DECEASED	REMARKS
1	David allen Bake	2
2		
3/	from South lotling	f
42	outh half to centre of a	ions.
5	PAID MAY 2 7, 2003	
6	3 from West lot lon	2 to
7	ege of grave.	
8		
9	Suria Vate May 23	12003
10		
11	Selly Sev.	
12		

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