BURIAL REPORT

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

1.	Place of Death	Douglas	Omaha, NE	UNMC						
		(County)	(Township or City)	(Facility)						
2.	Name: Robert J. M	adsen	1							
3.	Sex: Male		4. Color or Ra	ceWhite						
5.	Single, Married, W	idowed or Divorced:	Single	•						
6.	Date of Birth Septe	ember 7, 1941 7	. Age 74 Years Months	Days						
8.	Occupation: Owner	- Implement Dealer								
9.	Birthplace (State or	County) Carroll, Iov	va .							
10.	Name of Father <u>Jos</u>	eph A. Madsen								
11.	Birthplace of Fathe	r								
12.	Maiden Name of M	other: Ruby Byriel								
13.	Birthplace of Mothe	er								
14.	Informant Thomas Madsen 15. Address: 801 Matthew St. Shenandoah, Iowa 51601									
16.	Date of Death:	09/08/2015	5							
17.	Name of Doctor (or	r Coroner or Health C	Officer)18. Address <u>Omaha, NE</u>							
19.	Place of Burial or 1	Removal Removal	ose Hill Cemetery	_ 20. Date of Burial:09/012/2015						
21.	UndertakerH	Iackett Livingston Fu	neral Home							
22.	Address 208	W. Clarinda Ave,	Shenandoah, Iowa 51601							

Name: Robert J. Madsen

Burial Date 09/12/2015

Date of Death 09/08/2015

BURIAL REPOR

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 Second Reddition, Sub-divi	Sion or Section, Block 38	S8	Part of Lot No. 58,	Dimensions	Ft.
Name of Owner	Address		Date Sold	0	_
		Grave No.	FULL NAME OF DECEASED	Λ	REMARKS

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

Sfrom South Ist line of the North half to Center of grave.

26 from West lot line to edge of grave.

Byrial date Sept. 12, 20/5