

BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 6994

- 1. Place of Death Douglas Omaha NE Methodist
(County) (Township, Village or City) (Hospital)
- 2. Full name Jay D. Smith Rounds
- 3. Sex male 4. Color or Race Caucasian
- 5. Single, Married, Widowed or Divorced Divorced
- 6. Date of Birth 10/28/30, 19__ 7. Age 69 Years Months Days
- 8. Occupation retired - quality control at Crown Cork + Seal
- 9. Birthplace (State or Country) Shenandoah IA
- 10. Name of Father Lee Warren Rounds
- 11. Birthplace of Father (State or Country) Farragut IA
- 12. Maiden Name of Mother Pearl Mae Smith
- 13. Birthplace of Mother (State or Country) Sidney IA
- 14. Informant Deborah J. Dennis 15. Address 526 48th St #5 Des Moines IA
50312-1956
- 16. Date of Death 12/6/99, 19__
- 17. _____

- Name of Doctor (or Coroner or Health Officer) Dr. Terrance Cooney MD
- Address 8901 W. Dodge Rd, Omaha NE 68114
- 19. Place of Burial or Removal Shenandoah IA Date of Burial _____, 19__
- 20. Undertaker _____ Address _____

BURIAL REPORT

No. 60914

Name JAY D. SMITH-ROUNDS

Filed 4-3-2000 *IX*

◆ 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. A number corresponding to name must be placed on plat to identify grave.

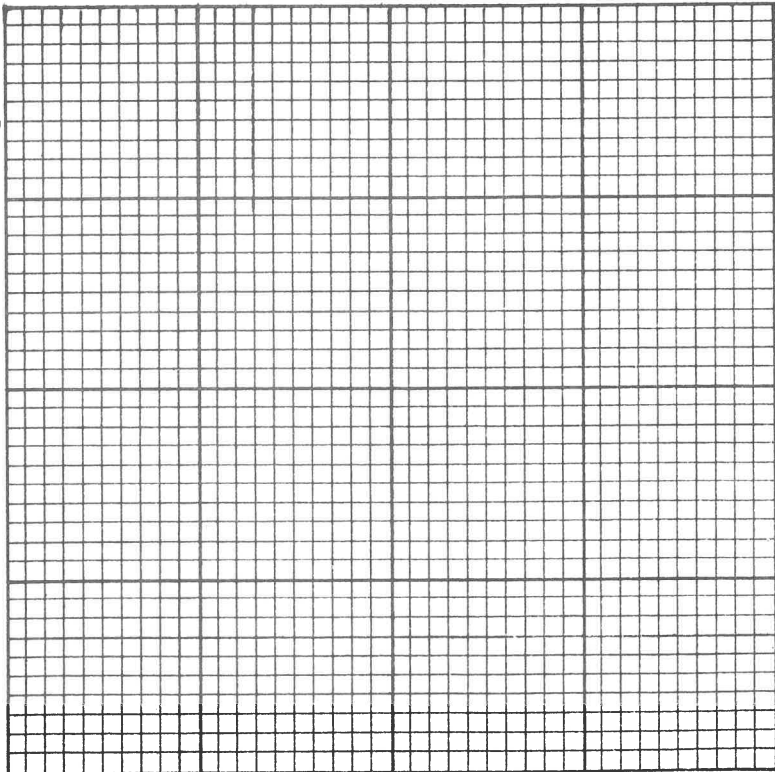
Description Owned Second Addition, Block 39, S80°N½ Lot No. 42, _____ Ft.
Addition, Sub-division or Section Part of Lot Dimensions

Name of Owner _____ Address _____ Date Sold _____

Remarks: Cremation Price, \$ 54.00

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

45



| Grave No. | FULL NAME OF DECEASED | REMARKS |
|-----------|-----------------------------|----------------------------|
| 1 | Jay D. Rounds | |
| 2 | | |
| 3 | 4' from the South lot line | |
| 4 | of the North half to center | |
| 5 | of grave. | |
| 6 | | APR - 3 2000 CITY CLERK |
| 7 | 2'6" from the East lot line | |
| 8 | to edge of grave. | |
| 9 | | |
| 10 | Burial date April 3, 2000 | |
| 11 | | |
| 12 | No Service | |