

BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 7439

1. Place of Death Page 1111 W. Sheridan Shenandoah, IA
(County) (Township, Village or City) (Hospital)
2. Full name Robert Benjamin Reed
3. Sex Male 4. Color or Race White
5. Single, Married, Widowed or Divorced Widowed
6. Date of Birth October 10, 1906, 19... 7. Age 98 Years 8 Months 22 Days
8. Occupation Laborer/Agriculture
9. Birthplace (State or Country) Clarinda, Iowa
10. Name of Father Benjamin Reed
11. Birthplace of Father (State or Country) Susan Abeigail Werthan
12. Maiden Name of Mother
13. Birthplace of Mother (State or Country)
14. Informant Gary Reed 15. Address 1111 W. Sheridan Shenandoah, IA
16. Date of Death July 2, 2005, ~~XX~~
- 17.

Name of Doctor (or Coroner or Health Officer) Jerry Schaaf, M.D.
 Address 1 Jack Foster Drive Shenandoah, Iowa 51601

19. Place of Burial or Removal Rose Hill Cemetery Date of Burial July 6, 2005, ~~XX~~
20. Undertaker William D. Selby Address 405 W. Thomas Ave. P.O. Box 526
Shenandoah, Iowa 51601

1-2-05

BURIAL REPORT

Name Robert B. Reed

No. 7439

Filed 1-6-05 19__

MATT PARROTT & SONS CO., WATERLOO, IOWA #E832

Field Record of Previous Burials

FORM 35-7

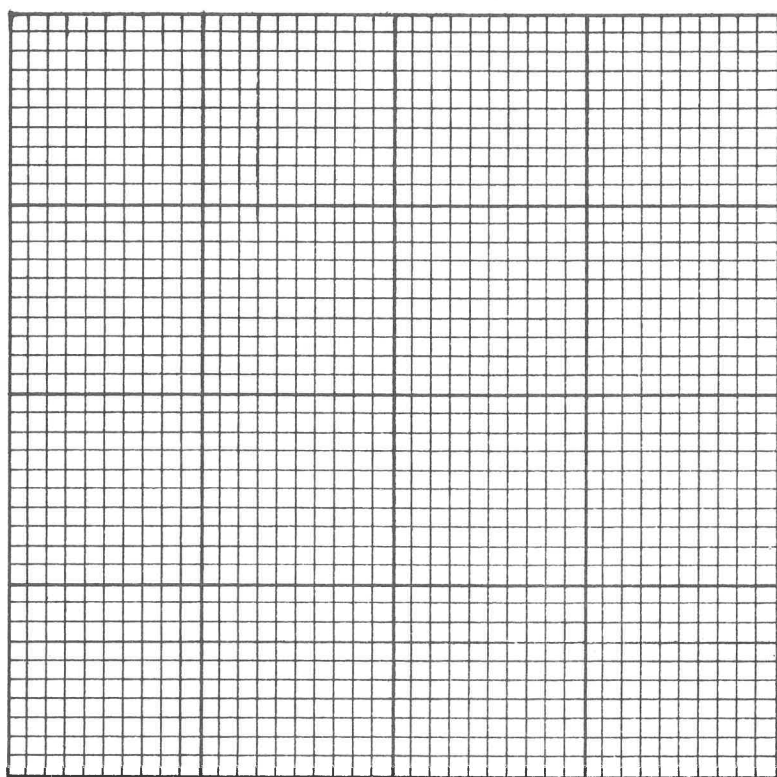
These sheets to be used on the grounds to secure data which will be copied permanently in Cemetery Lot Record.

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 same may be placed on plat to identify grave.

Description Owned Second Addition, Block 43 N40FN2, Lot No. 3, Dimensions Ft.

Name of Owner _____ Address _____ Date Sold _____

Remarks: concrete Vault Price, \$ 350.00



| Grave No. | FULL NAME OF DECEASED | REMARKS |
|-----------|-----------------------|--|
| 1 | Robert B. Reed | |
| 2 | | |
| 3 | | 2' from North lot line of the North half to center of grave. |
| 5 | | |
| 6 | | 2 1/2" from West lot line to edge of grave. |
| 7 | | |
| 8 | | |
| 9 | | Burial date July 6, 2005 |
| 10 | | |
| 11 | | Selby Sew. |
| 12 | | |

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

6