BURIAL REPORT

Name Connie Offe

Burial Date 6/3/21

Date of Death 3/21121

Burial Report
From Sexton to Secretary of Cemetery
(To BE RECORDED IN CEMETERY RECORD)

Burial or Permit No.....

1.	Name Connie Haye Otte Birthdate 12	3/10/43 Age 77
	Date of Death 3/21/21Coroner	
3.	Place of Death (County) (Township or C	Propricy Care Corter (Facility)
4.	Birthplace (State or County) Page Co Loura	
	Sex Comple Ethnicity White.	
6.	Marital Status Dyorcod	
7.	Occupation Registered Nurse	
		_Birthplace
9.	(Maiden) Name Mother Doris Marcine Reed	_Birthplace
10.	Informant	_Address
11.	Place of Burial Rose Hill Cemetery	Date of Burial
12.	Undertaker	_Address

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 lots. A number corresponding to name must be placed on plat to identify crave.

	identify grave.	i be taken to the	connectory and a reso		or are married or a	117	M-11	
	Description	on Owned	Addition	Sub-division or Section	, B	lock 45	, State Lot No, Dimensions	Ft.
	Name of 0	•	KLIESS	ler i	Address		Date Sold	_
	Remarks:		emati	<u> </u>			Price, \$	
						Grav No		REMARKS
t./						1	Connic Otte	
#	1					2		
						3	26" from E lot	line
S. E. OR						S_⁴		
N BY N.						5	6 from N lot lin	6
ЯЕСТІОІ						6		rave
INDICATE DIRECTION BY N. S. E. OR W.				V	Y	7		
Z Z			ma.			8		
						9		
						10	6-3-21	
						11	Donh	
						12		

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