BURIAL REPORT

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

Burial or Permit No. 7655

1.	Place of Death: Page	Shenandoa		Elm Heights Care			
	(County)	(Township or	r City)	(Facilit	y)		
2.	Name: Geneva Ruby Hiser						
3.	Sex: Female	4. Color or Race:	White				
5.	Single, Married, Widowed or Divorced:	Widowed					
5.	Date of Birth: May 8, 1919		7. Age <u>88</u>	Years10	_Months26Days	3	
3.	Occupation: Homemaker						
9.	Birthplace (State or County):	Essex, Iowa					
10.	Name of Father: John E. La	rson					
11.	Birthplace of Father: Unknown						
12.	faiden Name of Mother:Rose Smith						
13.	Birthplace of Mother :Unknown						
14.	Informant : Gary Hiser		5. Address:	708 Harrison St. Sher	nandoah, Iowa 51601		
16.							
	Name of Doctor (or Coroner or Health Office	er): Janet Bum	garner, M.D.				
	Address: 1 Jack Foster Drive S	ldress:1 Jack Foster Drive Shenandoah, Iowa 51601					
	Place of Burial or Removal : Rose Hill C	of Burial or Removal : Rose Hill Cemetery Date of Burial: Monday, April 7, 2008					
19.	Undertaker: Kirsch Funeral Chape		Address:		Shenandoah, Iowa 51601		

Date of Death_	Burial Date	BURIAI No. 1
04/03/2008	04/07/2008	BURIAL REPORT SEP 08 2008 No. 746 55 CITY CLERK ne Ruby Geneva Hiser

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 , Block_ Name of Owner Date Sold Address Remarks: Price, \$ Grave FULL NAME OF DECEASED REMARKS No. INDICATE DIRECTION BY N. S. E. OR W. 10

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