BURIAL REPORT

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

Burial or Permit No.

1.	Place of Death (Co	unty)	(Township	or City)	(Facility)	
2.	Name: Ruth Louise Fie	nup	,,			
3.	Sex: Female			4. Color or Race		
5.	Single, Married, Widowe	d or Divorced:			6	
6.	Date of Birth	7. Age	Years	_MonthsDays		
8.	Occupation:					
9.	Birthplace (State or Coun	ty)	<u>.</u>			
10.	Name of Father	-				
11.	Birthplace of Father					
12.	Maiden Name of Mother		_			
13.	Birthplace of Mother					
14.	Informant Gregg Fienup	15. Address:712	2-215-3679			
16.	Date of Death:	de la companya de la				
17.	Name of Doctor (or Coro	oner or Health Officer))	_18. Address		
19.	Place of Burial or Remo	valRose Hi	ll Cemetery	20	Date of Burial:	08/22/2015
21.	Undertaker Hacker	t Livingston Funeral I	Home			
22.	Address 208 W. C	larinda Ave, Si	henandoah, Io	owa 51601		

We at Hackett-Livingston Funeral Home did NOT handle the cremation of Ruth. This is all the information we have. You can call the informant Gregg Fienup (Son) at 712-215-3679 for more information.

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Date of Death

Burial Date 08/22/2015

Name: Ruth L. Fienup

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 identify grave. Description Owned , Block Lot No. Name of Owner Address Date Sold Price, \$ Grave FULL NAME OF DECEASED REMARKS No. INDICATE DIRECTION BY N. S. E. OR W. 10