BURIAL REPORT

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

Burial or Permit No. 1910

1	Place of Death Page	Shenandoah Fair Oaks Care Center		
1.	(County)	(Township or City)	(Facility)	
2.	Name: Mary	Rose Book		<u>-</u>
3.	Sex:female	4. Color	or RaceWhite	-
5.	Single, Married, Widowed or Divorced	married		•
6.	Date of Birth 11/2/1920	7. Age	90 YearsMonths	Days
8.	Occupation: homemak	er		·
9.	Birthplace (State or County)	Imogene, IA		•
10.	Name of Father Alton Leah	у		÷
11.	Birthplace of Father			
12.	Maiden Name of Mother Rose Hi	ggins		
13.	Birthplace of Mother			
14.	Informant Harold Book	15. Address <u>2155 E Ave S</u>	Shenandoah, IA 51601	<u>-</u>
16.	Date of Death:5/10/2011			
17.	Name of Doctor (or Coroner or Health	Officer) Dr Issacson		·
18.	Address	Shenandoah, IA		
19.	Place of Burial or RemovalRos	e Hill Cemetery	20. Date of Burial: May 14, 2011	
21.	Undertaker Hackett Livingston F	uneral Chapel 22. Address	208 W. Clarinda Avenue, Shenandoah,	Iowa 51601

Burial Date <u>5/ 14 /2011</u> Date of Death <u>5/10/2011</u>	Name Mary Book .	BURIAL REPORT	To A
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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.

JTE: 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 its 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 Description Owned Name of Owner Address

Date Sold Remarks: Price, \$ Grave FULL NAME OF DECEASED No. REMARKS INDICATE DIRECTION BY N. S. E. OR W. 10 11 12