BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 7/27

1.	Place of Death Page Shenandoah, lowa Fair Oaks Care Center (County) (Township, Village or City) (Hospital)						
2.	Full nameFrank Silas Payne						
	SexWale						
5.	Single, Married, Widowed or DivorcedWidowed						
	Date of BirthJune 13, 1902						
8.	OccupationQil-Distributor						
	Birthplace (State or Country) - Allendorf, lowa						
10.	Name of FatherLyman Warner Payne						
11.	Name of Father Lyman-Warner-Payne Birthplace of Father (State or Country)						
12.	Maiden Name of Mother Marie Antoinette De Voss						
	Birthplace of Mother (State or Country)						
	InformantFern Andrew						
	Date of DeathSeptember-17; 2001, 19						
	·						
Name of Doctor (or Coroner or Health Officer)_Dr.J.G.Schaaf,MD.							
	Address 1_Jack_Foster_Dr., Shenandoah, IA_51601						
19.	Place of Burial or Removal_Rose Hill Cemetery						
20.	UndertakerHackett-Livingston-Funeral HomeAddressShenandoah, lowa-51601						
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MATT PARROTT & SONS CO., WATERLOO, 10WA \$E832

N. S. E. OR

INDICATE DIRECTION BY

Field Record of Previous Burials

FORM 35-7

REMARKS

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. In the contract of the cemetery and a record will be made from the lots, of the names of those buried and location of grave on lot.

Description Owned	Addition, Sub-division or Section	, Block_5	NSOFE 2 Lot No	2 Ft
Name of Owner		Address		ate Sold
Remarks: Cons	rete Vault			Price, \$ 300.00

Grave
No.

FULL NAME OF DECEASED

1 Frank S. Payi
2
3 6 from the Morthlo
4 of the East half to C
5 of grave
6 72 from the East lot
8 to edge of grave
9
10 B Wial date Sept.
11
12 factoff the Limination