

BURIAL REPORT

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

Burial or Permit No. 8076.....

1. Place of Death Benton Bella Vista, Arkansas Highlands Health & Rehab
(County) (Township or City) (Facility)
 2. Name: Jack Donald Gowing
 3. Sex: Male 4. Color or Race White
 5. Single, Married, Widowed or Divorced Married
 6. Date of Birth March 21, 1926 7. Age 87 Years 2 Months 13 Days
 8. Occupation: Ag Director at KMA Radio
 9. Birthplace (State or County) Essex, Iowa
 10. Name of Father Frank B. Gowing
 11. Birthplace of Father unknown
 12. Maiden Name of Mother Phoebe A. Spunaugle
 13. Birthplace of Mother unknown
 14. Informant Julie Hayes 15. Address 15 Nottingham Dr. Bella Vista, Arkansas 72715
 16. Date of Death: 9:30 P.M. Monday, June 3, 2013
- Name of Doctor (or Coroner or Health Officer) Tina Ward
- Address 203 E. Central, Ste. 105, Benotnville, Arkansas 72712
- Place of Burial or Removal Rose Hill Cemetery, Shenandoah, Iowa Date of Burial: Saturday, June 22, 2013
19. Undertaker Kirsch Funeral Chapel Address 405 W. Thomas Ave. Shenandoah, Iowa 51601

BURIAL REPORT

No. 8076

Name Jack Donald Gowing

Burial Date 06/22/2013

Date of Death 01/01/2013

Field Record of Previous Burials

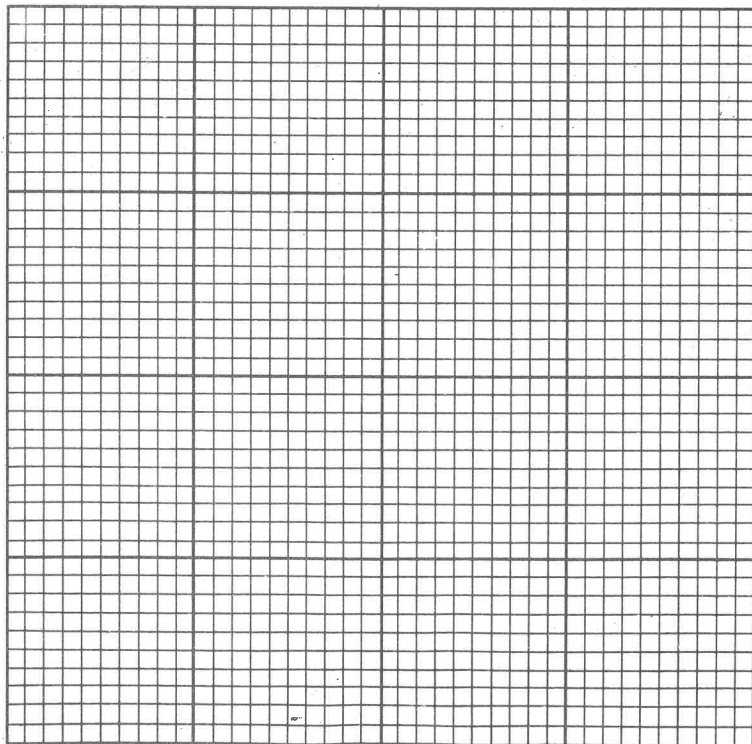
These sheets to be used on the grounds to secure data which will be copied permanently in Cemetery Lot Record.

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 South View, Block 1 W 1/2 Lot No. 65, _____ Ft.
Addition, Sub-division or Section Part of Lot Dimensions

Name of Owner _____ Address _____ Date Sold _____

Remarks: Cremation Price, \$ 200.00



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INDICATE DIRECTION BY N. S. E. OR W.

Grave No.	FULL NAME OF DECEASED	REMARKS
1	Jack D. Gowing	
2		6' from North lot line of the West half to center of grave.
3		2' from West lot line to edge of grave.
4		Burial date June 22, 2013
5		
6		
7		
8		
9		
10		
11	Kirsch Sev.	
12		