## **BURIAL REPORT**

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

Burial or Permit No.....

1.	Place of Death		Shenandoah		th Care Center	
		(County)	(Township o	r City)	(Facility)	
2.	Name: Eldora Iren	e Gowing				
3.	Sex: female	4. Color or Race	e: Caucasian			
5.	Single, Married, Widowed, or divorced: widowed					
6.	Date of Birth 10/13/1917 7. Age 104 Years Months Days					
8.	Occupation: Bookl	ceeper				
9.	Birthplace (State or County): Essex, IA					
10.	Name of Father: C	arl Luther Almquist				
11.	Birthplace of Father:					
12.	. Maiden Name of Mother: Nora Mathilda Peterson Almquist					
13.	Birthplace of Mother:					
14.	Informant: Mary E	Beth Gowing Address	: PO Box 111; Sidne	ey, IA 51652		
16.	Date of Death: 10	0/30/2021			r	
17.	Name of Doctor (	or Coroner or Health C	Officer): Dr. Clayton	Hoberman		
19.	Place of Burial or	Removal Rose Hi	ll Cemetery	20. Date of l	Burial: 11/6 <u>/2021</u>	
21.	Undertaker	Hackett Livingston Fu	ineral Home			
22.	Address 203	8 W. Clarinda Ave.	Shenandoah, Io	wa 51601		

BURIAL REPORT

No. 863

Name: Eldora I. Gowing

Burial Date: 11/6/2021

Date of Death: 10/30/2021

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 Addition, Sub-division o	Block ,	Part of lot No. Dimensions Ft	
Name of Owner Gowing	Address	Date Sold	
Remarks: Concrete \	ault	Price, \$	

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

Grave No.	FULL NAME OF DECEASED	REMARKS
1	Eldora Gowin	5
2		
3	2' from E lot lin	Ø.
4	to adge of grave	K.
5		167
6	6 from Vline in	Ed
7	to center of an	ace.
8		
9		
10		
11	Hackett	
12	1-6-21	
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