BURIAL REPORT

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

Burial or Permit No.

1.	Place of Death	Page	Shenandoah, Iowa	Garden View Care Center					
		(County)	(Township or City)	(Facility)					
2.	Name: Lois M. K	iper							
3.	Sex: Female		4. Color	or Race_White					
5.	Single, Married, Wi	dowed or Divorced: Wid	owed						
6.	Date of Birth 08	/02/1929	7. Age <u>86</u> Years _	MonthsDays					
8.	Occupation:Cler	<u>k</u>							
9.	Birthplace (State or	County) Coburg, Iowa	<u>.</u>						
10.	. Name of Father	Paul Luther Lanee							
11.	. Birthplace of Fathe	r							
12.	. Maiden Name of M	other: Lillie Falk Ecklor	f						
13.	. Birthplace of Mothe	er		7.					
14.	Informant <u>Jeremy Shadel</u> 15. Address: <u>512 E. Ferguson Rd. #40 Shenandoah, Iowa 51601</u>								
16.	Date of Death:	08/16/2015							
17.	. Name of Doctor (or	r Coroner or Health Office	r) <u>Dr. Todd Isaccson</u>	_18. Address <u>Shenandoah, IA</u>					
19.	Place of Burial or	Removal Rose H	Iill Cemetery	20. Date of Burial: <u>08/25/2015</u>					
21.	. Undertaker I	Hackett Livingston Funeral	Home						
22.	. Address 208	W. Clarinda Ave,	Shenandoah, Iowa 51601						

Date of Death 08/16/2015 Burial Date 08/25/2015 Name: Lois M. Kiper

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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.

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 blanks will then be taken to the competery 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

IC	dentity grave.		and lots, of the flames of t	nose buried and location of	grave on lot. A number corresponding to name mu	st be placed on plat to
	Description Owned	Addition, Sub-division	n or Section , B	Block 3 E8	SoFS Lot No. 5,	Ft.
N	Name of Owner	1.0	Address		Data C-11	
R	Remarks:	novite B	5%		Price, \$ 450	00
				Grave No.	FULL NAME OF DECEASE	
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