

BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 2264

1. Place of Death Douglas Omaha, Neb. University of Nebraska
(County) (Township, Village or City) (Hospital)

2. Full name Virginia Christine Lillie

3. Sex Female 4. Color or Race White

5. Single, Married, Widowed or Divorced Wiwed

6. Date of Birth February 27, 1931, 19... 7. Age 72 Years 1 Months 6 Days

8. Occupation Housewife

9. Birthplace (State or Country) Hopkinville, Kentucky

10. Name of Father Seaman Burgess

11. Birthplace of Father (State or Country)

12. Maiden Name of Mother Dorothy Lovelace

13. Birthplace of Mother (State or Country)

14. Informant Donna Rascon 15. Address 301 Carter St., Shenandoah, Ia

16. Date of Death April 3, 2003, 19...

17.

Name of Doctor (or Coroner or Health Officer)

Address

19. Place of Burial or Removal Rosehill Cemetery Date of Burial April 7, 2003, 19...

20. Funeral Home Address

Funeral Director

BURIAL REPORT

No. 72164

Name Virginia C. Killie

Filed 4-7-03 19__

MATT PARROTT & SONS CO., WATERLOO, IOWA #E832

Field Record of Previous Burials

FORM 35-7

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.

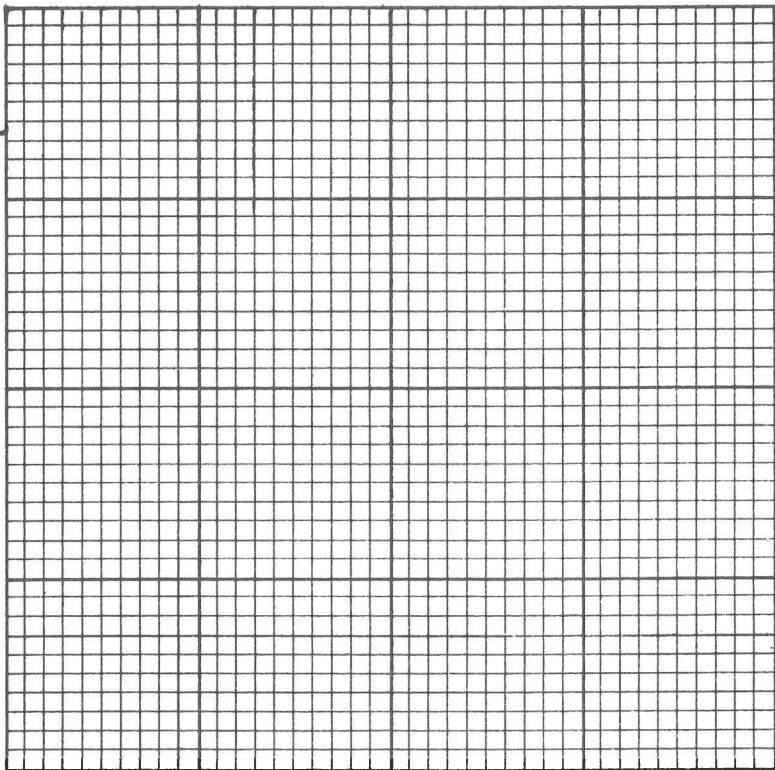
Description Owned South View, Block 3, E4 Lot No. 42, Ft.
Addition, Sub-division or Section Part of Lot Dimensions

Name of Owner _____ Address _____ Date Sold _____

Remarks: Concrete Vault Price, \$ 300.00

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

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| Grave No. | FULL NAME OF DECEASED | REMARKS |
|-----------|---------------------------|--|
| 1 | <u>Virginia C. Lillie</u> | |
| 2 | | |
| 3 | | <u>2' from East lot line to center of grave.</u> |
| 4 | | |
| 5 | | <u>PAID APR 09 2003</u> |
| 6 | | <u>2' from North lot line to edge of grave.</u> |
| 7 | | |
| 8 | | |
| 9 | | <u>B. burial date April 7, 2003</u> |
| 10 | | |
| 11 | | <u>Selby sev.</u> |
| 12 | | |