BURIAL REPORT

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

Burial or Permit No. 1919

1.	Place of Death Mills G	lenwood	Hospice with a Heart	
	(County)	(Township or City)		(Facility)
2.	Name: Shirley Lee Butler			<u> </u>
3.	Sex:female			
5.	Single, Married, Widowed or Divorced ma	rried		<u>.</u>
6.	Date of Birth 05/05/1980	7. Age <u>31</u>	YearsMonths	Days
8.	Occupation: <u>LPN</u>			
9.	Birthplace (State or County) Kansas City, MO			.
	Name of Father Ron Bartles Birthplace of Father			
12.	Maiden Name of Mother Susie Sutton			
13.	Birthplace of Mother			
14.	Informant Susie Bartles 15. Address 312	N Broad Street; She	nandoah, IA 51601	·
15. 16.	Date of Death: 2/15/2012			<u>.</u>
17.	Name of Doctor (or Coroner or Health Officer)	Dr. Todd Isaccson		
18.	AddressShenandoah		/	*
19.	Place of Burial or Removal Rose Hill Cemetery		20. Date of Burial: 2/20)/2012
21.	Undertaker Hackett Livingston Funeral Chapel	22. Address	208 W. Clarinda Aven	ue, Shenandoah, Iowa 51601

Burial Date BURIAL REPORTER 0 6, 2012 Shirley Buller

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 identify grave.

Description Owned Addition, Sub-division or Section,	k 4 W4	OF 2 Lot No. 2	Ft.
Name of Owner Address Address		Date Sold	K
Remarks: Concrete Dox		Price, \$ 400°	
	Grave	FULL NAME OF DECEASED	REMARKS

FULL NAME OF DECEASED 5

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