

BURIAL REPORT

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

Burial or Permit No. 8254

1. Place of Death Page Shenandoah Shenandoah Medical Center
(County) (Township or City) (Facility)
 2. Name: Norma Deane Mattes
 3. Sex: Female 4. Color or Race White
 5. Single, Married, Widowed or Divorced Widowed
 6. Date of Birth December 11, 1923 7. Age 92 Years 1 Months 3 Days
 8. Occupation: Farmwife, Cook
 9. Birthplace (State or County) Shenandoah, Iowa
 10. Name of Father James Herman Nicks
 11. Birthplace of Father unknown
 12. Maiden Name of Mother Yetta Valencia Keith
 13. Birthplace of Mother unknown
 14. Informant Sheryl Waldron 15. Address Villisca, Iowa 50864
 16. Date of Death: 10:59 a.m. Thursday, January 14, 2016
- Name of Doctor (or Coroner or Health Officer) Dennis Klein M.D.
- Address 2250 S. Ankeny Blvd. Ankeny, Iowa 50022
- Place of Burial or Removal Rose Hill Cemetery Date of Burial: Friday, January 29, 2016
19. Undertaker Nishna Valley Funeral Home Address 405 W. Thomas Ave. Shenandoah, Iowa 51601

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No. 8254

Name: Mattes, Norma

Burial Date: Friday, January 29, 2016

Date of Death: Thursday, January 14, 2016

Field Record of Previous Burials

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

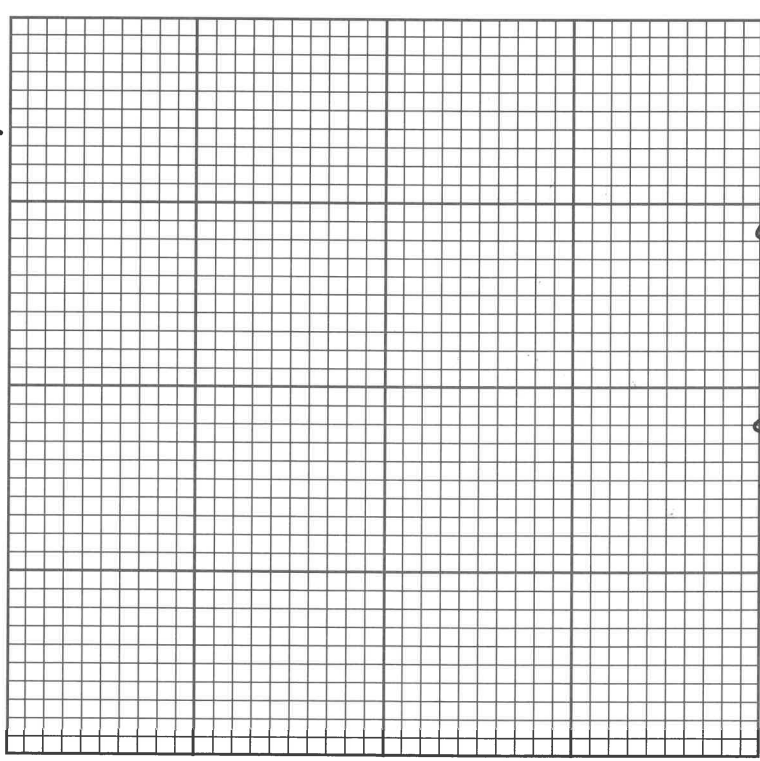
Description Owned South View, Block 6 N4°0'FW/2 Lot No. 14, _____ Ft.
Addition, Sub-division or Section Part of Lot Dimensions

Name of Owner _____ Address _____ Date Sold _____

Remarks: Concrete Vault Price, \$ 450.⁰⁰

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



Grave No.	FULL NAME OF DECEASED	REMARKS
	<u>Norma D. Mattes</u>	
2		<u>2' from North lot line of the West half to center of grave.</u>
3		
5		<u>2' from West lot line to edge of grave.</u>
6		
8		
9		<u>Burial date Jan. 29, 2016</u>
10		
11		<u>Nishna Valley Funeral Home, Shen. Ia.</u>