BURIAL REPORT

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

Burial or Permit No.

1.	Place of Death	Page	Shenandoah	Elm Heights	S Care Center					
		(County)	(Township of	or City)	(Facility)					
2.	Name:Dale Edw	ard Matthews								
3.	Sex: Male		4	. Color or Race	White					
5.	Single, Married, Wi	idowed or Divorced_	Widowed		¥'					
6.	Date of Birth 02/2	.8/1920 7. Age	94_Years	MonthsDays						
8.	Occupation:	Accountant								
9.	Birthplace (State or	County) Tabor, IA		<u>.</u>						
10.	Name of Father	Eugene Matthe	ws							
11.	Birthplace of Father	r								
12.	Maiden Name of M	lother: Nora Buckin	ngham							
13.	Birthplace of Mothe	r								
14.	Informant Nancy Borchert 15. Address: 1242 Camrose St. Ft. Collins, CO 80525									
16.	Date of Death:	12/14/20	014							
17.	Name of Doctor (or	r Coroner or Health	Officer) Dr. Floyd Jo	ones 18. Addre	ssShenandoah, IA					
19.	Place of Burial or l	RemovalF	Rose Hill Cemetery	20.	Date of Burial: <u>12/17/2014</u>					
21.	UndertakerH	Iackett Livingston Fo	uneral Home							
22.	Address 208	W. Clarinda Ave,	Shenandoah, Io	wa 51601						

18 y

Date of Death 12/14/2014

Name: <u>Dale E. Matthews</u>
Burial Date_12/17/2014

BURIAL REPORT
No. 8187

Field Record of Previous Burials

Field Record of Previous Buriais											
These sheets to be used on the grounds to secure data which will be copied permanently in Cemetery Lot Record.											
	NOTE: Each small squar each lot, beginning with Lot Nolanks will then be taken to the dentify grave.	e represents a square foot of lot surf o. 1, and use a separate sheet for each le cemetery and a record will be man			line. To make a record of previous burials, dra er's name and other data as to ownership secur grave on Id. A number corresponding to name						
]	Description Owned		or Section	, Block	, Eart of Lot No.	,Ft.					
]	Name of Owner		Address		Date Sold	^					
]	Remarks:	oncrete V	mtt		Date Sold Price, \$ 45	0.00					
				Grave	FULL NAME OF DECE.	ASED REMARKS					
4	•				ale E. Ma	Thew D					
				2	1/						
OR W.				3/8/1	from North lot	line of the					
ш				East h	all to Center o	f grave:					
INDICATE DIRECTION BY N. S.				5	0						
DIRECTI				261	rom Gast lot	line to					
DICATE				elige	of grave.	şå					
Z				08	OBAIN						
				\mathbb{B}_{1}	vial date N	10.17,2014					
				10	15/1						