BURIAL REPORT

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

Burial or Permit No.

I.	Place of Death Page	Shenandoah	Residence		
	(County)	(Township or	· City)	(Facility)	
2.	Name: Clara Jane Matthews				
		4.01	D 13		
3.	Sex:female	4. Col	or or Race white		
5.	Single, Married, Widowed or Divorced	married			
٥.	Single, Married, Widowed of Divorced	marricu		<u>.</u>	
6.	Date of Birth <u>8/22/20</u> 7. Age	92 Years	Days	6	
	-				
8.	Occupation:CEO				
n	Distinction (Charles of County) Charles I I	ii.			
9.	Birthplace (State or County) Shenandoah, Id	1			
10.	Name of FatherErwin J. Gottsch				
11.	Birthplace of Father				
12.	2. Maiden Name of MotherJennie Ellen Dunnegan				
13	. Birthplace of Mother				
IJ.	Bittiplace of Mother				
14.	4. Informant <u>Dale Matthews</u> 15. Address:1203 South Elm; Shenandoah, IA 51601				
15.					
16.	Date of Death:				
17	Name of Doctor (or Coroner or Health Officer) _	Dr. Janet Rumgarner			
	Address Shenandoah, I		•		
	Address Sitellandon, I	<u> </u>		1.	
19.	Place of Burial or Removal Rose Hill Cem	etery	20. Date of Buria	d:12/10/2012	
			,		
21.	Undertaker Hackett Livingston Funeral Cha	pel 22. Addres	ss 208 W. Claris	nda Avenue, Shenandoah, Iowa 5160	1

Burial Date

12/10/2012

Name Clara Jane Matthews

BURIAL REPORTLER 8041

REMARKS

Field Record of Previous Burials

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 dwill 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 Dimensions Address Date Sold Name of Owner Price, \$ Remarks:

Grave

No.

10

FULL NAME OF DECEASED

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