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

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Burial or Permit No	1120	/

1.	Place of Death Contra Costa	Walnut Creek	Kaiser Permanente	Medical Center							
	(County)	(Township or City)	(Facility))							
2.	Name:										
3.	Sex: Female	4. Color or Race	White								
5.	Single, Married, Widowed or Divorced	widowed									
5.	Date of Birth August 27, 1916	7. Age <u>72</u>	Years 2Mon	ths <u>10</u> Days							
8.	Occupation: Boodkeeper, retail sales										
9.	Birthplace (State or County)Iowa										
10.	Name of Father George VanBuskirck	*									
11.	Birthplace of Father										
	Maiden Name of MotherClara Evelyn Mc										
13.	Birthplace of Mother										
14.	Informant Susan Lawson, Daughter	15. Address	_1335 Arnold Drive, Mart	inez,CA. 94553							
16.	Date of Death: November 6, 2008										
	Name of Doctor (or Coroner or Health Officer)	Michael Anthony Fein, MD	· ·								
Address1425 South Main Street, Walnut Creek, Ca. 94596											
	Place of Burial or RemovalRose Hill Ce	emetery	Date of Burial:	March 9, 2009							
9.	Undertaker <u>Trident Society, Wendel Brunner, M.</u>	DAddressContra Costa I	Health Dept, 826 Main Stre	eet, Martinez, Ca. 94553							

BURIAL REPORT
No. TOO
NameJeanne Evelyn Powers
Burial Date 3/09/scc9
Date of Death Woo laces

Field Record of Previous Burials

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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. Apumber corresponding to name must be placed on plat to																	
ide	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. An umber corresponding to name must be placed on plat to identify grave. Description Owned																
D	escriptio	n Own	ed _	4	Additio	n, Sub-d	ivision o	r Section	D		_ , 1	Block		_	/ / /	Part of Lot No,	Ft.
N	ame of C	Owner		-	+			Address								Date Sold	-
Remarks: <u>Cremation</u>											Date Sold Price, \$ 200.00						
													\Box		Grave No.	FULL NAME OF DECEASED	REMARKS
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S. E. OR														1 60	SH	half to Center of oring	est.
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INDICATE DIRECTION BY															36/	rom East lot line	to
ICATE D										#			\parallel	d	20/	e of grave.	
N														_	0		
														1	BA	wia date March 9,5	2009
															10	1 1 2	
															11	Family Ser "	

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