BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 7710

1.	Place of Death Page	Shenandoah, IA	Residence	
	(County)	(Township, Village or City)	(Hospital))
2.	Full name Charlie Morris Freeze			
3.	Sex_male			
5.	Single, Married, Widowed or Divorced_Widow			
6.	Date of Birth Dec. 16, 1917			
8.	Occupation_Farmer			
9.	Birthplace (State or Country) Barada, NE			
10.	Name of Father Charlie William Freeze			
11.	Birthplace of Father (State or Country)			
12.	Maiden Name of Mother Lillie Mae Mount			
13.	Birthplace of Mother (State or Country)			******
14.	Informant Dixie Major	15. A	ddress 2017 170th St; Essex, IA	A 51638
16.	Date of Death December 9, 2008	, 19		
17.				
	Name of Doctor (or Coroner or Health Officer)	Dr. Janet Bumgarne	er 	
19.	Place of Burial or Removal Rose Hill Cemeter			
20.	Undertaker Hackett-Livingston Funeral Hon			
	Sexton's Rep	ort of Burial to (Cemetery Officer	
of t	The following must be filled out by the Sexton, Sune Cemetery.	uperintendent or Grave Digger at	time of burial, and report delivere	d to record-keeping officer
Bur	ial made on Lot No, Bl	ock		

Name Charlie Morris Freeze BURIAL REPORT Date of Death Burial Date__

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 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 Name of Owner Address Date Sold Remarks: Price, \$ Grave FULL NAME OF DECEASED REMARKS No 2 INDICATE DIRECTION BY N. S. E. OR W.