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BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 7/6 9

1.	Place of Death Douglas	Omaha		University Nebraska Medical Center			
	(County)	(Township, Village	er City)	(Hospital)			
2.	Full name Donovan Joseph Ginger			A			
3.	Sex Male	4. Color or	Race Wh	ite			
5.	Single, Married, Widowed or Divorced Marr	ried					
6.	Date of Birth March 4, 1932 Occupation Lineman Power Compan	., 19 7. Age	70 Years	1 Months 17	Days		
8.	Occupation Lineman Power Compan	y					
9.		lowa		••••			
10.	Name of Father George Russell Ginger						
11.							
12.	Maiden Name of Mother Ann Catherine Re	avis		***************************************			
13.	Birthplace of Mother (State or Country)	• • • • • • • • • • • • • • • • • • •		P*************************************			
14.		************	15. Address 201	N. Center St., Shenandoah	, IA 51601		
16.	Date of Death April 21, 2002						
17.		*******	••••••				
	************************************	•••••••	••••••••				
Name of Doctor (or Coroner or Health Officer) Dr. Charles Enke, M. D.							
	Address 44th & Dewey A						
19.			Date of Burial	April 25, 2002			
20.	Undertaker Hackett-Livingston Funeral	Home	Address Shen	andoah, Iowa 51601	, 48		

Filed Hosil 25	Name Donovan	No///	BURIAL,
25,2002 19	Donovan J. Ginger	199	REPORT

MATT PARROTT & SONS CO., WATERLOO, 10WA \$ E832 Field Record of Previous Burials FORM 35-7 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. Something to name must be placed on plat to identify grave.

Description Owned

Additional Addi Addition, Sub-division or Section Part of Lot Name of Owner. Address Date Sold_ Price, \$300.00 Remarks: Grave FULL NAME OF DECEASED REMARKS No. 2 INDICATE DIRECTION BY N. S. E. OR

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