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

Burial or Permit No. 8193

1.	Place of Death	Page (County)	Shenandoah, IA (Township or City)		ew Care Cente (Facility)	<u>er</u>
2.	Name: Maurice l		(Township or City)		(гасину)	
3.		-10			White	
5.		idowed or Divorced Wide			· ·	
6.	Date of Birth 04/3	30/1926 7. Age <u>88</u>	B_Years 8 Month	ıs <u>17</u> Days	S	
8.	Occupation:I	Farmer				
9.	Birthplace (State or	County) Shenandoah, Io	wa	•		
10.	Name of FatherF	rank Hoxie, Jr.				
11.	Birthplace of Fathe	er	oppompot transcension by the option of the o			
12.	Maiden Name of N	Mother: Carolyn Kent				
13.	Birthplace of Moth	er			1.	
14.	InformantM. Ke	nt Hoxie 15. Address	: 1637 US Highway 59	Shenandoah	, IA 51601	
16.	Date of Death:	1/16/2015	CONTRACTACIONES (CONTRACTACIONES CONTRACTACIONES CONTRACTACION			
17.	Name of Doctor (o	r Coroner or Health Office	er) <u>Dr. Thippareddi</u>	_18. Address	Shenando	oah, IA
19.	Place of Burial or	Removal Rose I	Hill Cemetery	20.	Date of Buria	d: <u>01/19/2015</u>
21.	UndertakerI	Hackett Livingston Funera	1 Home			
22.	Address 208	W. Clarinda Ave,	Shenandoah, Iowa 516	01		

Name:

Maurice F. Hoxie

Burial Date:

January 19th, 2015

Date of Death:

January 16th, 2015

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 sepagate 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. Alnumber corresponding to name must be placed on plat to identify grave. Description Owned Lot No. Name of Owner Address Date Sold 00 Remarks: Price, \$ Grave FULL NAME OF DECEASED REMARKS No. INDICATE DIRECTION BY N. S. E. OR W.

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