

BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 6969

1. Place of Death Page Shenandoah, Iowa Shenandoah Memorial Hospital
(County) (Township, Village or City) (Hospital)
2. Full name Sybil Louise Blank
3. Sex Female 4. Color or Race White
5. Single, Married, Widowed or Divorced married
6. Date of Birth October 27, 1917, 19 7 Age 82 Years 1 Months 26 Days
8. Occupation Housewife/Home
9. Birthplace (State or Country) Illinois USA
10. Name of Father Henry Birkman
11. Birthplace of Father (State or Country)
12. Maiden Name of Mother Daisey M. Mulkey
13. Birthplace of Mother (State or Country)
14. Informant Ernest Blank 15. Address 202 Wabash Shenandoah, IA 51601
16. Date of Death December 23, 1999
- 17.

- Name of Doctor (or Coroner or Health Officer) Floyd A. Jones, D.O.
 Address One Jack Foster Drive; Shenandoah, IA 51601
19. Place of Burial or Removal Rose Hill Cemetery Date of Burial December 27, 1999
20. Undertaker William D. Selby, FD Address 405 W. Thomas Ave; P.O. Box 526
Shenandoah, IA 51601

BURIAL REPORT

No. 6969

Name Sybil L. Blank

Filed 12-27-1999

◆ MATT PARSONS & SONS CO., WATERLOO, IOWA †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. A number corresponding to name must be placed on plat to identify grave.

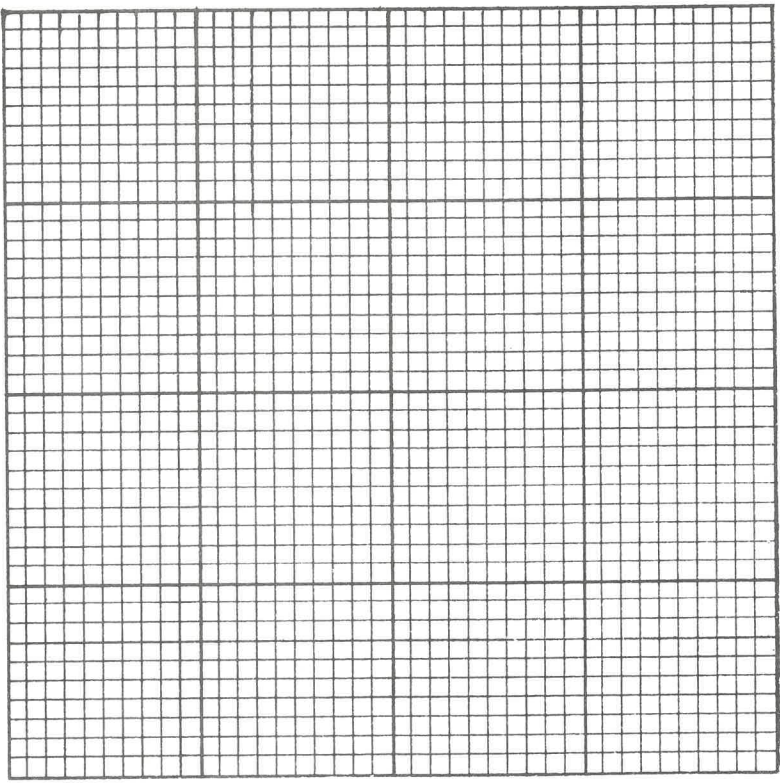
Description Owned South View, Block 8, E80FN 1/2 Lot No. 2, _____ Ft.
Addition, Sub-division or Section Part of Lot Dimensions

Name of Owner _____ Address _____ Date Sold _____

Remarks: Concrete Vault Price, \$ 215.00

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



Grave No.	FULL NAME OF DECEASED	REMARKS
1	<u>Sybil L. Blank</u>	
2		
3	<u>6' from the East lot line</u>	
4	<u>of the North half to Center</u>	
5	<u>of grave.</u>	
6		
7	<u>2' from the North lot line</u>	
8	<u>to edge of grave.</u>	
9		
10	<u>Burial date Dec. 27, 1999</u>	
11		
12	<u>Selby Sev.</u>	

PAID
 JAN 10 2000
 CEMETERY