

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

Burial or Permit No. 7889

1. Place of Death Crawford Denison, Iowa Denison Co. Memorial Hospital
(County) (Township or City) (Facility)
2. Name: Kimberly Marie Leftwich
3. Sex: Female 4. Color or Race White
5. Single, Married, Widowed or Divorced Married
6. Date of Birth 9/3/75 7. Age 35 Years Months Days
8. Occupation: CNA
9. Birthplace (State or County) Shenandoah, IA
10. Name of Father Byron Erickson
11. Birthplace of Father
12. Maiden Name of Mother Karen Hendrickson
13. Birthplace of Mother
14. Informant Leslie Leftwich 15. Address 1218th St Denison, IA 51442
16. Date of Death: January 27, 2011
17. Name of Doctor (or Coroner or Health Officer) Dr. Ingram, M.D.
18. Address Denison, Iowa 51442
19. Place of Burial or Removal Rose Hill Cemetery 20. Date of Burial: February 1, 2011
21. Undertaker Hackett Livingston Funeral Chapel 22. Address 208 W. Clarinda Avenue, Shenandoah, Iowa 51601

\$100 ea

PAID
FEB 06 2011
CITY CLERK

No. 7889

Name Kimberly Leftwich

Burial Date 2/1/2011

Date of Death 1/27/2011

PAID
FEB 06 2011
CITY CLERK

Field Record of Previous Burials

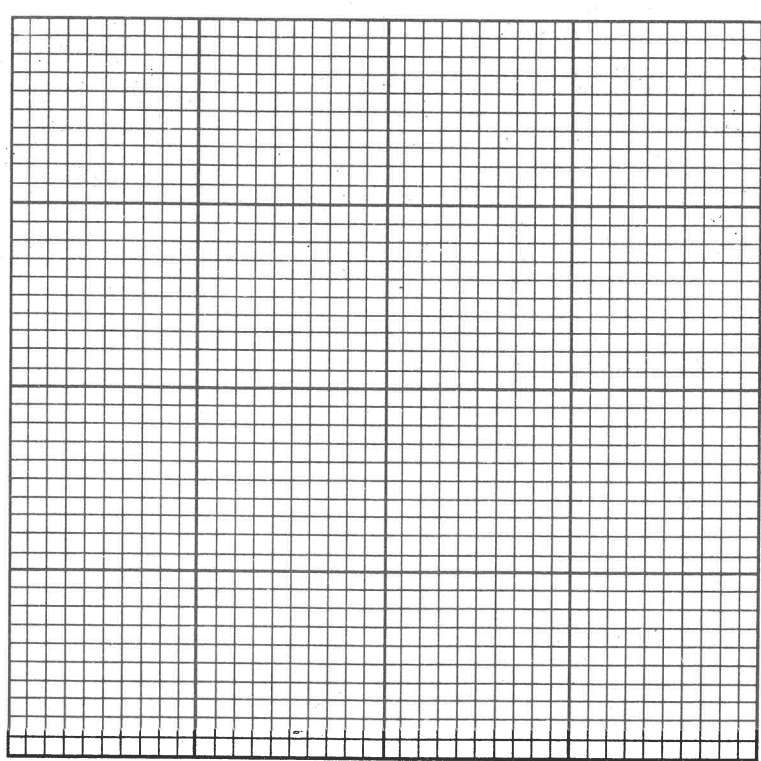
These sheets to be used on the grounds to secure data which will be copied permanently in Cemetery Lot Record.

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 South View, Block 8 N4'0FW 1/2, Lot No. 13, _____ Ft.
Addition, Sub-division or Section Part of Lot Dimensions

Name of Owner _____ Address _____ Date Sold _____

Remarks: concrete vault Price, \$ 400.00



Grave No.	FULL NAME OF DECEASED	REMARKS
1	Kimberly M. Leftwich	
2		
3		
4		3'3" from North lot line of the West half to center of grave.
5		
6		2' from West lot line to edge of grave.
7		
8		
9		Burial date Feb. 1, 2011
10		
11		Abt. Livingston Sew.
12		

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