

27500

BURIAL REPORT

No. 81044

Name Merle Melroe Van Sickle

Burial Date 02-04-2022

Date of Death 01-27-2022

1. Place of Death Douglas (County) Omaha (Township or City) Nebraska (Facility) medicinc
2. Name: Merle Melroe Van Sickle
3. Sex: Male
4. Color or Race: Caucasian
5. Single, Married, Widowed or Divorced: Single
6. Date of Birth 11-30-1958
7. Age 63 Years _____ Months _____ Days _____
8. Occupation: Janitor Seed and Nursery
9. Birthplace (State or County) Omaha, Nebraska Henry Fields and Farmer
10. Name of Father Richard Otis Van Sickle
11. Birthplace of Father N/A
12. Maiden Name of Mother Mary Jean McCullough
13. Birthplace of Mother NI
14. Informant Rebecca Van Sickle
15. Address 715 E. Main St, Clarinda, IA
16. Date of Death: 01-27-2022
- Name of Doctor (or Coroner or Health Officer) DR. Brian Boer
- Address 9874th NE Medical Center, Omaha, NE
- Place of Burial or Removal Rose Hill Cemetery
- Date of Burial: 02-04-2022
19. Undertaker John P. Leese
Address 405 W. Thomas Ave., Shenandoah, IA 51601

From Section to Secretary of Cemetery
(TO BE RECORDED IN CEMETERY RECORD)

BURIAL REPORT

Burial or Permit No.

Field Record of Previous Burials

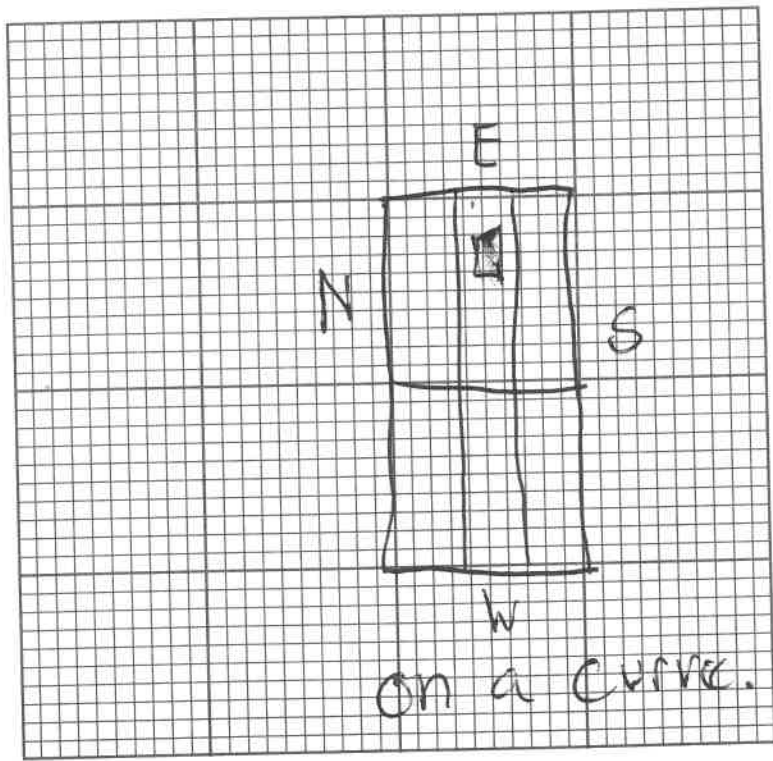
These sheets to be used on the grounds to secure data which will be copied permanently in Cemetery Lot Record.

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 Southview, Block 8, E₂ Part of Lot No. 13, Ft.
Addition, Sub-division or Section Part of Lot Dimensions

Name of Owner _____ Address _____ Date Sold Trans. 2019

Remarks: cremation Price, \$ _____



Grave No.	FULL NAME OF DECEASED	REMARKS
1	Maria VanSickle	
2		
3	2'6" from E line	
4	to edge of grave.	
5		
6	6' from S line to	
7	center of grave	
8		
9		
10		
11	Nishna	
12	2-4-22	