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

Burial or Permit No......

1.	Place of Death: Page			Shenandoah			Elm Heights Care Center				
		(County)	(Township or City)				(Facility)				
2.	Name: Delma	ar Raymond F	Keith								
3.	Sex: Male		4. Color	or Race:		White					
5.	Single, Married,	Widowed or	Divorced:	Widowed							
5.	Date of Birth:	June 30.	1939		7. Age _	71	_Years	7	Months14	Days	
8.	Occupation:	Retired	- Production manager fo	r Imperial Cl	nemical ir	Shenando	ah				
9.	Birthplace (State	e or County):	Quincy, Ic	owa							
10.	Name of Father: Cecil Raymond Keith										
11.	Birthplace of Father:Unknown										
12.	Maiden Name of	Mother:	Helen Virginia Moore	e							
13.	Birthplace of Mo	other:	Unknown								
14.	Informant :	Raymon	d Keith	_5. Address:		106 E. Su	ımmit Ave.	Shenando	ah, Iowa 51601		
16.	Date of Death	4:35 a.m.	Sunday, February 13, 20	11							
								**			
	Name of Doctor ((or Coroner or	Health Officer):	John Bower	y, M.D.						
	Address: 1 Jack Foster Drive Shenandoah, Iowa 51601										
	Place of Burial or	r Removal : _	Rose Hill Cemetery			_Date of B	urial:	Friday, F	ebruary 18, 2011		
19.	Undertaker:	Kirsch F	uneral Chapel		Address: _		405 W. T	homas Ave	. Shenandoah, Iowa	51601	

	ite of Death 02/13/2011	rial Date02/18//2011	ume Delmar Raymond Keith .	No. 1891	BURIAL REPORT	FEB 28 2011	1888 1888
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Field Record of Previous

These sheets to be used on the grounds to secure data which will be copied

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NOTE: Each small square represents a square foot of lot surface. For convenience each tenth foot is indicated by a 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 it blanks will then be taken to the cemetery and a record will be made from the lots, of the names of those buried and loc identify grave.

Block 8 Description Owned Name of Owner Address Remarks:

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

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