## BURIAL REPORT

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

Burial or Permit No. 7789

1.	Place of Death Montgomery	Red Oak		Red Oak Ni	ırsing & Rehab
	(County)	(Township or City)		(Facility)	
2.	Name: Rachael Hoffman	,			
3.	Sex: Female	_ 4. Color or Race	White		
5.	Single, Married, Widowed or Divorced wide	owed			
6.	Date of Birth October 3, 1940		_ 7. Age <u>69</u>	Years	_Months20Days
8.	Occupation: <u>Laborer</u>	¥.			
9.	Birthplace (State or County) <u>Iowa City, Iow</u>	va			
10.	Name of FatherWiliam Floyd Kalkas				
11.	Birthplace of Father <u>unknown</u>				
12.	Maiden Name of MotherVivian Marie Lang				
13.	Birthplace of Motherunknown	-			
14.	InformantThomas Hoffman		15. Address _	1100 E. Reed Stre	et Red Oak, IA 51566
16.	Date of Death:Friday, October 23, 2009				
	Name of Doctor (or Coroner or Health Officer)	Varren Hayes, M.D.		/ •	
	Address 1400 Senate Ave. Red Oak, IA 51566		H. C. San		
Plac	ce of Burial or Removal Rose Hill Cemetery		Date of E	Burial: Monday	, October 26, 2009
19.	Undertaker Kirsch Funeral Chapel	Address	405 W. Thomas	Ave. Shenandoah, I	owa 51601

DEC 11 2009  TY CLERK	BURIAL REPORT  No. 1189  Name Rachael Hoffman  Burial Date 10/26/2009  Date of Death 10/23/2009
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**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 identify grave. Description Owned Lot No. Dimensions Name of Owner Address Date Sold Remarks: Price, \$ Grave FULL NAME OF DECEASED REMARKS No. 2 INDICATE DIRECTION BY N. S. E. OR W. 10 11 12