

BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 7202

- 1. Place of Death Utah Orem Orem Nursing and Rehab Center
(County) (Township, Village or City) (Hospital)
- 2. Full name Jack Duane Combs
- 3. Sex male 4. Color or Race White
- 5. Single, Married, Widowed or Divorced _____
- 6. Date of Birth 11/21/1938, 19____ 7. Age 63 Years 9 Months 10 Days
- 8. Occupation Registered Nurse
- 9. Birthplace (State or Country) Shenandoah, Page County, Iowa
- 10. Name of Father Clarence John Combs
- 11. Birthplace of Father (State or Country) _____
- 12. Maiden Name of Mother Marjorie Eleanor Walden
- 13. Birthplace of Mother (State or Country) _____
- 14. Informant Jared Combs, son 15. Address 1209 East 900 South
Pleasant Grove, UT
- 16. Date of Death August 31, ~~19~~ 2002
- 17. _____

Name of Doctor (or Coroner or Health Officer) R. Kim Davis, M.D.
 Address 3C.134A University of Utah Health Sciences Center(Hospital), SLC, UT 84132

- 19. Place of Burial or Removal Rose Hill Cemetery Shenandoah Date of Burial September 10, 2002 ~~xx~~
- 20. Undertaker Lane B Smith Serenicare Address 8535 South 700 West #E Sandy, Salt Lake, UT

BURIAL REPORT

No. 12102

Name Jack Duane Combs

Filed September 10, 2002 ~~PM~~

◆ MATT PARROTT & SONS CO., WATERLOO, IOWA 52240

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 same must be placed on plat to identify grave.

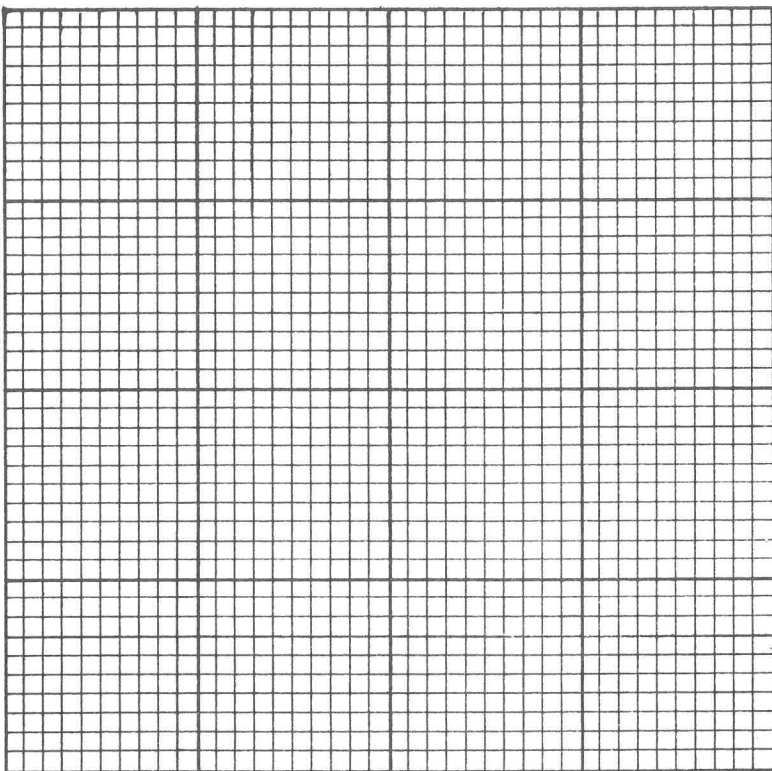
Description Owned Memorial Park, Block 3 SB of N 1/2 Lot No. 34 Ft.
Addition, Sub-division or Section Part of Lot Dimensions

Name of Owner _____ Address _____ Date Sold _____

Remarks: concrete Box Price, \$ 300.00

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

1/10



Grave No.	FULL NAME OF DECEASED	REMARKS
1	Jack D. Combs	
2		
3		6' from the South lot line
4		of the North half to center
5		of grave.
6		PAID SEP 10 2002
7		2'6" from the East lot line
8		to edge of grave.
9		
10		Burial date Sept 10, 2002
11		Jane Smith Serv.
12		Salt Lake City, Utah