BURIAL REPORT

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

Burial or Permit No. 7824

1.	Place of Death Page	Shenandoah, Iov	ndoah, Iowa			Elm Height Care Center			
	(County)	(Township or City		(Facility)					
2.	Name: Alberta Bryan								
3.	Sex:Female	4.	Color or Race	Whi	te				
5.	Single, Married, Widowed or Divorced	Widowed							
6.	Date of Birth April 12, 1909	7. Aş	ge101	Years	<u>0</u> N	Months	_6	_Days	
8.	Occupation: Homemaker								
9.	Birthplace (State or County) Shenandoal	ı, Iowa 51601							
10.	Name of FatherJim Campin								
11.	Birthplace of Father								
12.	Maiden Name of MotherStella Septer								
13.	Birthplace of Mother	***************************************							
14.	InformantDuane Hilger	1	5. Address	3652 - 250 th	Street, Farra	agut, Iowa			
16.	Date of Death:April 18, 2010								
17.	Name of Doctor (or Coroner or Health Officer)	Dr. Floyd Jone	es						
18.	Address1 Jack Foster Drive, Shenandoah, Iowa 51601								
19.	Place of Burial or RemovalRose Hill C	emetery		Date of	Burial:	04/21/201	10		
20.	Undertaker <u>Hackett-Livingston Funeral Home</u>	LLC Address	P.O. B	ox 395, 208 V	,. Clarinda	Avenue, She	enandoah,	Iowa_	

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.

blanks will then be taken to the cemetery and a record will be identify grave. Description Owned	or each lot. This can be done in the office from the plat and t	a heavy line. To make a record of previous burials, draw a diaghe owner's name and other data as to ownership secured from ation of grave on lot. A number corresponding to name must be secured from the corresponding to name must be secured. Lot No65,	dood record These				
Name of Owner	Address	Date Sold					
Remarks: Convicte V	ault	Price, \$ 400.00					

Grave FULL NAME OF DECEASED REMARKS No. 12