

BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 7707

1. Place of Death Page Shenandoah, IA Shenandoah Medical Center
(County) (Township, Village or City) (Hospital)

2. Full name Barbara Ann Nielsen

3. Sex female 4. Color or Race White

5. Single, Married, Widowed or Divorced Widowed

6. Date of Birth Dec. 1, 1947, 19 60 7. Age 60 Years Months Days

8. Occupation Operator

9. Birthplace (State or Country) Shenandoah, IA

10. Name of Father Louis Edward O'Brien

11. Birthplace of Father (State or Country)

12. Maiden Name of Mother Julia Jean Rose

13. Birthplace of Mother (State or Country)

14. Informant Troy Nielsen 15. Address 4150 150th St. Imogene, IA

16. Date of Death November 19, 2008, 19

17.

Name of Doctor (or Coroner or Health Officer) Dr. Thippareddi
 Address Shenandoah, IA

19. Place of Burial or Removal Rose Hill Cemetery, Shenandoah, IA Date of Burial November 22, 2008, 19

20. Undertaker Hackett-Livingston Funeral Home Address Shenandoah, Iowa 51601

BURIAL REPORT

#10000

No. JAN-1-0097

Name CITY CLERK
Barbara Nielsen

Burial Date 11/22/2008

Date of Death 11/19/2008

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.

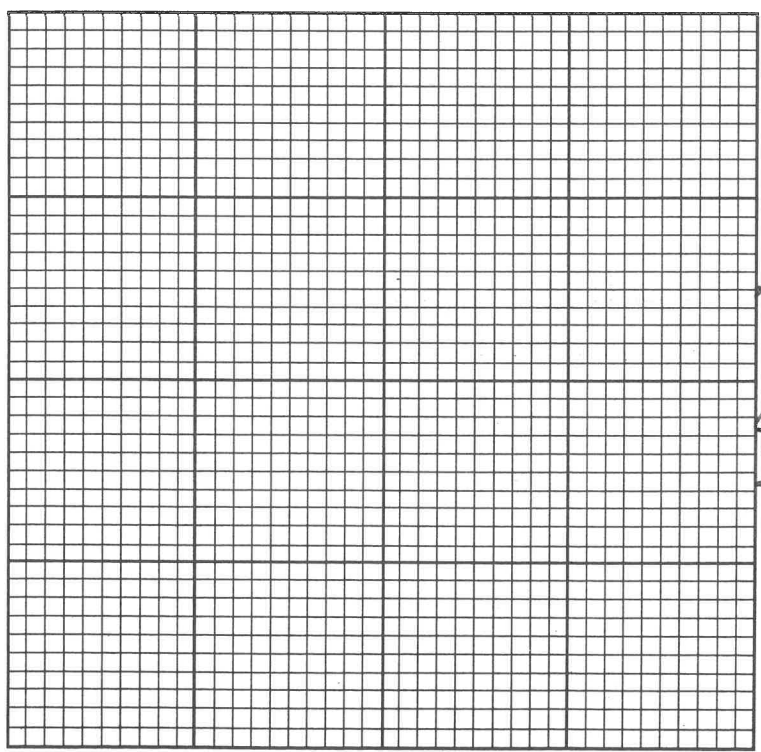
Description Owned Memorial Park, Block 3 S80FS 1/2 Lot No. 71 Ft. **PAID**

Name of Owner _____ Address _____ Date Sold _____

Remarks: Concrete Vault Price, \$ 400.00

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



Grave No.	FULL NAME OF DECEASED	REMARKS
	Barbara A. Nielson	
2		6' from South lot line of the South half to Center of grave.
5		2'6" from West lot line to edge of grave.
8		Burial date Nov. 22, 2008
10		Plot. Livingston Sev.
12		