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

Burial or Permit No. **8075**

1. Place of Death _____ Edmond Oklahoma _____ Edmond Health Care Center _____
   (County)   (Township or City)   (Facility)
2. Name: _____ Kathleen Marie Beilman _____ .

3. Sex: _____ female _____ 4. Color or Race _____ white _____ .

5. Single, Married, Widowed or Divorced _____ widowed _____ .

6. Date of Birth 11/16/1929 _____ 7. Age 83 Years _____ Months _____ Days

8. Occupation: ___homemaker_____

9. Birthplace (State or County) _____ Shenandoah, IA _____ .

10. Name of Father __Joseph Connell___ .
11. Birthplace of Father _____ .

12. Maiden Name of Mother _Kathryn Georgia Gleason_____

13. Birthplace of Mother _____ .

14. Informant _Bart Beilman_ 15. Address: 113 W Mead Street: Austin, TX_____ .

15.
16. Date of Death: _____ 5/24/2013 _____ .

17. Name of Doctor (or Coroner or Health Officer) ____unknown_____ 18. Address ____ Edmond, OK

19. Place of Burial or Removal _____ Rose Hill Cemetery _____ 20. Date of Burial: _____ 5/31/2013 _____

21. Undertaker _____ Hackett Livingston Funeral Chapel _____ 22. Address _____ 208 W. Clarinda Avenue, Shenandoah, Iowa 51601 _____ .

$400

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.
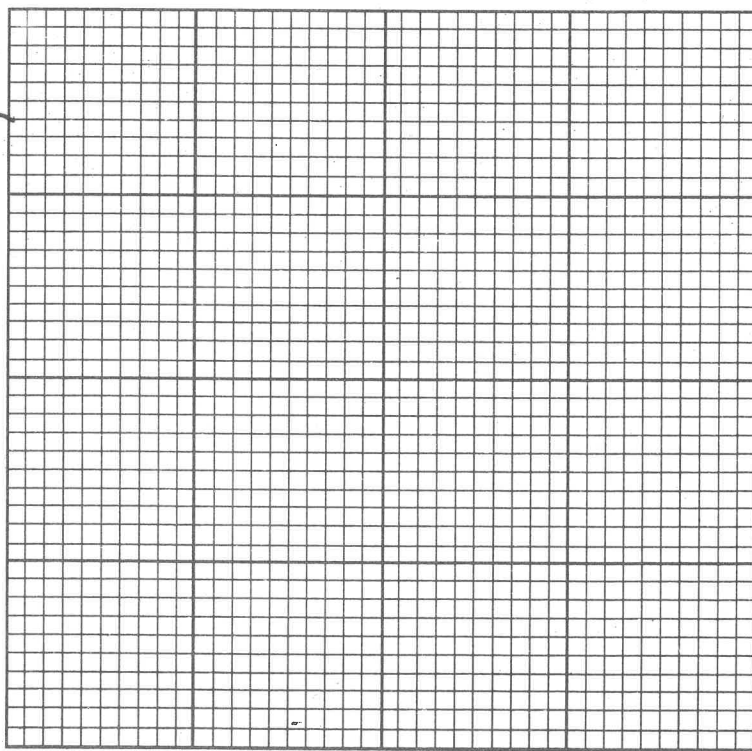
Description Owned __Memorial Park__ , Block __3__ __N 8'0 F S/2__ Lot No. __88__ , _____ Ft.

Addition, Sub-division or Section — *Part of Lot* — *Dimensions*

Name of Owner _____ Address _____ Date Sold _____

Remarks: __Concrete Vault__ Price, $ __400.00__

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

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Grave No.	FULL NAME OF DECEASED	REMARKS
1	Kathleen M. Beilman	
2		
3	2' from North lot line of the	
	South half to center of grave.	
5	2'6" from West lot line to	
	edge of grave.	
8		
	Burial date May 31, 2013	
10		
11	Hkt. + Livingston Ser.	
12		