## BURIAL REPORT

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

Burial or Permit No. 7956

| 1.  | Place of Death                              | Page S           |                     | henandoah, Iowa      | Elm Heights Care Center |                    |                   |
|-----|---|------------------|---------------------|----------------------|-------------------------|--------------------|-------------------|
|     |   | (County)         |                     | (Township or City)   |                         | (Facility)         |                   |
| 2.  | Name: W                                     | illiam Walter Fa | rell                |                      |                         |                    |                   |
| 3.  | Sex: Male                                   |                  | _ 4. Color or Race: | White                |                         |                    |                   |
| 5.  | Single, Married                             | , Widowed or D   | ivorced: Married    |                      |                         |                    |                   |
| 6.  | Date of Birth: _                            | January 30, 19   | 36                  | 7. AgeYears          | 75 Months               |                    | _ 12              |
| 8.  | Occupation:                                 | Heating/ Air C   | onditioning Self-En | nployed              |                         |                    |                   |
| 9.  | Birthplace (Stat                            | te or County):   | Long Branch, Nev    | v Jersey             |                         |                    |                   |
| 10. | Name of Father:                             | Robert En        | nmett Farrell       | (4)                  | _                       |                    |                   |
| 11. | Birthplace of Fa                            | ther: unknown    |                     |                      |                         |                    |                   |
| 12. | Maiden Name of Mother: Mary Lillian Sheehan |                  |                     |                      |                         |                    |                   |
| 13. | Birthplace of M                             | Iother :         | Unknown             |                      |                         |                    |                   |
| 14. | Informant :                                 | Shirley Farrell  |                     | 15. Address          | 604 Washington          | St. Shenandoah, IA | 51601             |
| 16. | Date of Death:                              | November         | 11,2011             |                      |                         |                    |                   |
|     |   |                  |                     |                      |                         | - / -              |                   |
| 17. | Name of Doctor                              | (or Coroner or H | lealth Officer):    | Dr. Floyd Jones O.D. |                         |                    |                   |
|     | Address: 1 Ja                               | ck Foster Dr. Sh | enandoah, Iowa 516  | 501                  |                         |                    |                   |
| 18. | Place of Burial or                          | Removal:         | Rose Hill Cemetery  | 7                    | _Date of Burial: _N     | lovember 15, 2011  |                   |
| 19. | Undertaker:                                 | Kirsch Fu        | neral Chapel        | Address:             | 405 W.                  | Thomas Ave. Shena  | ndoah, Iowa 51601 |

William Walter Farrell

te 11/15/2011

te 11/15/2011

te 11/15/2011

Field Record of Previous Burials

Grave

No.

11

12

45

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

William W.Bill Jarrell

2 from North Lot line of the
South half to Center of grave

5
26 from West lot line to
edge of grave.

Byrial date Nov. 15, 2011

FULL NAME OF DECEASED

REMARKS