BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 7402

1.	Place of Death Sarpy (County)	Belleyue, Ne. (Township, Village or City)	2010 VanBuren St. (Hospital)					
2.	Full name Joyce Louise Sondag							
3.								
5.								
6.								
8.								
9.								
10.								
11.			_					
12.	Maiden Name of Mother_Opal Lewis		9					
13.	Birthplace of Mother (State or Country)							
14.	Informant Stephen M Sondag	15. Address 11	313 Hanlebar Rd Reston VA 20101					
16.	Date of Death August 12, 2007		717 11anibbar 10a, 1863wi, 4-A. 2017					
	Name of Doctor (or Coroner or Health Officer)							
	Address Pappillion, NE.							
19.	Place of Burial or Removal-Rose Hill-Cemetery	Shenandoah, IA Date of Burial	August-17-2007, 19					
20.	Undertaker Hackett-Livingston Funeral Hom	eAddressShenando	ah-Iowa 51601					



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.

	identify grave.	cemetery and a record will be r	made from the lots, of the names	of those buried and location of	f grave on lot. A number corresponding to name must b	e placed on plat to
	Description Owned	Members Addition, Sub-divis	ision or Section	, Block <u>3</u>	, $\frac{58}{P_{ant of Lot}}$ Lot No. $\frac{92}{}$,	Ft.
	Name of Owner		Address _		Date Sold	
	Remarks:	onchete	Box		Price, \$ 400°C	0
				Grave No.	FULL NAME OF DECEASED	REMARKS
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DICATE				To	edge of gry	ve.
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