BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 7775

1.	Place of DeathDouglas(County)	Omaha, NE (Township, Village or City)	Nebraska Med. Center (Hospital)		
2.	Full nameEleanor Nadine Hayes				
3.	Sexfemale	4 Color or Race	White		
5.	Single, Married, Widowed or Divorced Married	2. 00/01 01 1882001			
6.	Date of Birth_12/28/1930	19 7 Age 78	Voors Months		
8.	Occupation - Laborer		Wonths	Days	
9.	Birthplace (State or Country) Shenandoah, IA		***************************************		
10.	Name of Father Paul William Croft				
11.	Birthplace of Father (State or Country)				
12.	Maiden Name of Mother_Irene Bussard				
13.	Birthplace of Mother (State or Country)				
14.	Informant Clive Hayes	15	Address 805 Church St. Shenand	 0ah	
16.	Date of Death June 22, 2009	10	Address: 1000 Quarenot. Drienand	ouii	
17.					
	Name of Doctor (or Coroner or Health Officer)	Unknown			
	Address Official, IAD	n cos Quading, TE_			
19.	Place of Burial or Removal Rose Hill Cemetery, Shenandoah, IA Date of Burial June 26, 2009 , 19				
20. Undertaker Hackett-Livingston Funeral Home Address Shenandoah, Iowa 51601					

Date of Death_ Eleanor Nadine Hayes Dimensions Date Sold Price, \$ FULL NAME OF DECEASED REMARKS

Field Record of Previous Burials which will be copied permanently in Cemetery Lot Record. These sheets to be used on the grounds to secure data NOTE: Each small square represents a square foot of lot surface. For each lot, beginning with Lot No. 1, and use a separate sheet for each lot. The blanks will then be taken to the cemetery and a record will be made from identify grave. novenience each tenth foot is indicated by a heavy line. To make a record of previous burials, draw a diagram, with percit of capbe done in fire office from the plat and the owner's name and other data as to ownership secured from deed record. These plates of those buried and location of grave on lot. A number corresponding to name must be placed on plat to the plate of the plate Description Owned Name of Owner Grave No. INDICATE DIRECTION BY N. S. E. OR W. 10

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