BURIAL REPORT

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

Burial or Permit No.

1.		Fair Oaks Care Center						
	(County) (Township or C	ity) (Facility)						
2.	2. Name: Emil Paul Kesterson							
3.	3. Sex: <u>Male</u> 4. Co	olor or Race White						
5.	5. Single, Married, Widowed or Divorced: Widowed							
5.	Date of Birth <u>04/26/1922</u> 7. Age <u>93</u> Years <u>8</u> Months <u>15</u> Days							
8.	Occupation: Landscape Maintenance							
9.	9. Birthplace (State or County) <u>Tabor, Iowa</u> .							
10.	. Name of Father Arlo Lyle Kesterson							
11.	Birthplace of Father							
12.	Maiden Name of Mother: Ida Grace Rainey							
13.	. Birthplace of Mother							
14.	Informant Randall Kesterson 15. Address: 639 College Ave. Pittsburgh, PA 15232							
16.	16. Date of Death: 01/10/2016							
17.	Name of Doctor (or Coroner or Health Officer) <u>Dr. Todd Isaacson</u> 18. Address <u>Shenandoah</u> , IA							
19.	19. Place of Burial or Removal Rose Hill Cemetery	20. Date of Burial: <u>01/14/2016</u>						
21.	21. Undertaker <u>Hackett Livingston Funeral Home</u>							
22	22 Address 208 W Clarinda Ave Shenandoah Iowa 5	31601						

BURIAL REPORT

No. 8251

Name: Emil P. Kesterson

Burial Date 01/14/2016

Date of Death 01/10/2016

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. Althougher corresponding to name must be placed on plat to identify grave.

D	escription Owned	Addition, Sub-divi	ision or Section	, Block 4 5%	Part of Lot No. AD,	Dimensions Ft.
N	ame of Owner		Address		D-4- C-11	
R	emarks:	on crete	Box		Price, \$ 450.	
				Grave No.	FULL NAME OF DECEASE	
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OR W.				6/	rom South lot	line of th
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INDICATE DIRECTION BY				log	e of grave.	100
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