BURIAL REPORT

From Sexton to Secretary of Cemetery

(TO BE RECORDED IN CEMETERY RECORD)

Burial or Permit No. 2/53

1.	Place of Death Page County Shenandoah (County) (Township, Village or City) (Hospital)
2.	Full nameLela Sarah Hoy
3.	Sex_Female4. Color or Race_White
5.	Single, Married, Widowed or DivorcedWidowed
6.	Date of Birth December 5, 1910 , 19 7. Age 90 Years 10 Months 10 Days
8.	OccupationTeacher
9.	Birthplace (State or Country) Imogene, Iowa
10.	Name of Father Walter E. Boatwright
11.	Birthplace of Father (State or Country)
12.	Maiden Name of Mother Lena Germer
13.	Birthplace of Mother (State or Country)
14.	InformantMarshall Hoy
16.	Date of Death October 15, 2001 , 19 Matthews, NC 28104
17.	
	Name of Doctor (or Coroner or Health Officer) Floyd Jones, D.O.
	Address 1 Jack Foster Drive Shenandoah, Ia 51601
19.	Place of Burial or Removal Rose Hill Cemetery Date of Burial October 20, 2001
20.	Undertaker William D. Selby, F.D. Address 405 W. Thomas Ave. P.O. Box 526
	Shenandoah, IA 51601

TTAKU	PARROTT	& SONS	со.,	WATERLOO, 10	w.v.	‡E832
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Field Record of Previous Burials

FORM 35-7

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 note must be placed on plat to identify grave.

Description Owned

Addition Sub division as Setting, Block

Part of lot.

Dimensions.

Description Owned

M	eme	orl	al		a	rk	
Ade	lition	Sub-di	vision	or	Section	ממ	

Part of Lot

Name of Owner.

INDICATE DIRECTION BY

Address

Date Sold_

Remarks:

Price, \$350.00

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Grave No.	FULL NAME OF DECEASED	REMARKS
1	Lela Sarah Hoy	
2		
3	6 from the North lottle	ne
4	of the north half to cent	h
5	of gravepain act 23 200	11
6		
7	26 from the East lote	ne
8/	to edge of grove.	
9		
10/	Burial onte Oct. 20,2	00/
11	21	
12	Soll WSev.	