

CERTIFICATE FOR LOT
TOWN OF DAY ~ DAY MEADOWS CEMETERY

Name of Lot Owner: _____

Address of Lot Owner: _____

DAY MEADOWS CEMETERY LOT ASSIGNED:

Section _____ **Lot** _____ **Grave** _____

Date: _____ Fee Paid: \$ _____

In consideration of the fee noted above, the Cemetery Committee of the Town of Day, by virtue of authority delegated to it by the Town Board of the Town of Day hereby grants this Cemetery Lot Burial Right Certificate to the person or family named above, for the lot designated above.

This Certificate is issued pursuant to the Rules and Regulations governing Town of Day cemeteries. A copy of these Rules and Regulations is attached.

TOWN OF DAY CEMETERY COMMITTEE

BY: _____
Member of Cemetery Committee

FAMILY TREE

****Include Maiden Names of Mother, Wife****

Husband Name: _____ Date of Birth _____ Place of Birth _____
Father _____ Mother _____

Wife Name: _____ Date of Birth _____ Place of Birth _____
Father _____ Mother _____

Children In order of birth

Name _____ Spouse _____ Date Married _____
Date of Birth _____ Place of Birth _____
Date of Death _____

Name _____ Spouse _____ Date Married _____
Date of Birth _____ Place of Birth _____
Date of Death _____

Name _____ Spouse _____ Date Married _____
Date of Birth _____ Place of Birth _____
Date of Death _____