

Kimball Cemetery Association Grave Space Claim Form

Last Name First Middle

Mailing Address

City State ZIP

Area Code Phone # Email

If you claim gravesites in the Kimball Cemetery, please fill in the following:

Number of gravesites Location: Section Lot

Mark gravesite(s) claimed: A B C D E F G H I J

Date purchased: or Claimed by

Comments:

The names on the closet graves, North, South, East, and/or West of my gravesite are:

Relatives Buried In Kimball Cemetery

Name Section Lot Grave

Name Section Lot Grave

Name Section Lot Grave

Name Section Lot Grave

Name Section Lot Grave

Name Section Lot Grave

Name Section Lot Grave

Name Section Lot Grave

Name Section Lot Grave

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