

Cemetery Transactions Purchase/Sale Information

Completed by _____ Date _____

Cemetery (Circle One)

North Canaan

South Canaan

Worden

Section (Circle one)

Old

New

Lot Number(s) _____

Grave Letter(s) A B C D E F G H I J K L M N O P (Circle those that apply)

Purchaser Information:

Name _____

Address _____

City _____ State _____ Zip _____

Tel No. _____

Residing Entity Type: City Village Township (Circle one)

Residing Entity Name _____

Residing County Name(&State, if out of Ohio) _____

Next of Kin Contact Information

Name _____

Address _____

City _____ State _____ Zip _____

Tel. No. _____