

Drawdy - Rouse Cemetery

Burial Plot Application / Verification

Date: _____

Plot No.: _____

A. Which Family are you a lineal descendant of?

Drawdy

Rouse

Williams

N/A

B. Your Full Name:

Maiden Name or N/A

Date of Birth: _____ County: _____ State: _____ Country: _____

Date of Death: _____ County: _____ State: _____ Country: _____

C. Spouse Full Name:

Maiden Name or N/A

Date of Birth: _____ County: _____ State: _____ Country: _____

Date of Death: _____ County: _____ State: _____ Country: _____

D. Father's Full Name:

Date of Birth: _____ County: _____ State: _____ Country: _____

Date of Death: _____ County: _____ State: _____ Country: _____

E. Mother's Full Name:

Maiden Name or N/A

Date of Birth: _____ County: _____ State: _____ Country: _____

Date of Death: _____ County: _____ State: _____ Country: _____

F. Children's Full Names:

	DOB	State	Country	DOD	State	Country
1 _____						
2 _____						
3 _____						
4 _____						

G. Other Spouses:

H. Additional Information:

SHOW YOUR LINEAGE TO THE DRAYDY, ROUSE or WILLIAMS FAMILIES (if applicable)

It is your responsibility to include documentation to verify your lineage and eligibility for a plot.

You	Lineal Parent	Lineal Grand Parent	Lineal G Grand Parent	Lineal GG Grand Parent	Lineal GGG Grand Parent
B	D or E Circle One	DOB: _____	DOB: _____	DOB: _____	DOB: _____
		DOD: _____	DOD: _____	DOD: _____	DOD: _____

Mail to: Drawdy - Rouse Family Cemetery

P.O. Box 677725

Orlando, Fl. 32867-7725

drawdyrouse@yahoo.com

Your Contact Information:

Mailing Address: _____

Phone Number: _____

email address: _____