

Joshua Creek Cemetery

Fax info to (863) 494-0974

TRANSFER OF OWNERSHIP

Date: _____

From: _____

Phone # : _____

Address: _____

Email : _____

The below listed spaces are established in the name of: _____,
which were paid in full. I, _____, as next of kin
(relationship : _____) authorize the following person to have
interment rights in the space below:

Lot _____, Tier _____, Addition _____ Space(s) _____

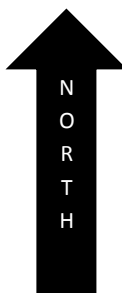
*Below, Please (x) the number where **space** is physically located in above described lot.*

1	2	3
4	5	6
7	8	9
10	11	12

12 Spaces per one 30' x 20' Lot or

1	2
3	4
5	6
7	8

8 Spaces per one 30' x 20' Lot

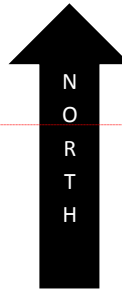


Example:

Lot 40, Tier 5, Second Addition, Space 5

1	2	3
4	5	6
7	8	9
10	11	12

40



Comment [T1]: This is Space 5, within Lot 40