



MANNING WALLAMBA FAMILY HISTORY SOCIETY Inc. TAREE

ISOLATED OR UNMARKED GRAVES

SURNAME: _____ GIVEN NAMES: _____

DEATH DATE: _____ AGE: _____ DEATH PLACE: _____

BURIAL DATE: _____ BURIAL PLACE: _____

CEMETERY SECTION: _____ GRAVE ROW/NUMBER: _____

SPOUSE/S: _____

PARENTS: _____

DO YOU HAVE DOCUMENTATION OF THE ABOVE?

CERTIFICATE? YES / NO: _____ PHOTOS? YES / NO: _____

MAP (if on private property)? YES / NO: _____

Name: _____

Address: _____

Phone: _____ Email: _____

I understand that the above burial details may be used in publications in the future,

Signed: _____ Date: _____

Please return to Manning Wallamba Family History Society Inc. PO Box 48 Taree 2430
Or leave at the Society section of the Greater Taree City Library, Victoria St Taree