

**GERMAN UNION CEMETERY**  
**THREE-GENERATION GENEALOGY**

*Created By: Ronald R. Prinzing*

**UPDATED:** May 24, 2014

Surname: **ENGBRODT (ENG)**

Name: **ALME-CARRIE**

Middle Name If Any: **CHRISTINA**

Gender: **FEMALE**

Date of Birth: **SEPTEMBER 19, 1879**

Place of Birth:

Date of Death: **JULY 24, 1965**

Place of Death: **RICE COUNTY – NORTHFIELD, MINNESOTA**

Place of Burial: **GERMAN UNION CEMETERY – FOREST TOWNSHIP – RICE COUNTY – MINNESOTA**

Plot Number: **48j/k**

Married Name: **SIEMERS (DEDERICK)**

Interred Name: **SIEMERS**

Father: **EMIL ENGERBRODT** or spelled **ENGBRET (ENG)**

Date of Birth: **1848**

Place of Birth: **NORWAY (Immigration: 1880)**

Date of Death: **1924**

Place of Death:

Place of Burial:

Mother: **CAROLINE SOUTHWOOD (ENG)**

Date of Birth: **1845**

Place of Birth: **NORWAY (Immigration: 1880)**

Date of Death: **DECEMBER 11, 1922**

Place of Death: **116 ½ NORTH CENTRAL AVENUE – FARIBAULT, MINNESOTA**

Place of Burial: **MAPLE LAWN CEMETERY – RICE COUNTY – FARIBAULT, MINNESOTA**

Marital Status: **MARRIED** Date: **DECEMBER 3, 1896**

1. **DEDERICK SIEMERS** born: **DECEMBER 18, 1871** in **GERMANY**

Children:

NOTE: The Burial – Removal – Transit Permit shows the place of burial to be **FOREST CEMETERY – FOREST TOWNSHIP – RICE COUNTY – MINNESOTA** which is the same as the **GERMAN UNION CEMETERY – FOREST TOWNSHIP – RICE COUNTY – MINNESOTA...**

**SIEMERS, ALME-CARRIE CHRISTINA. NEE: ENGBRODT**

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| STATE OF MINNESOTA<br>DEPARTMENT OF HEALTH<br>Section of Vital Statistics |   |  | Burial - Removal - Transit Permit No. <u>16</u>  |   |  |
|---|---|--|--|---|--|
| PERSONAL<br>DATA ON<br>DECEASED   | 1. NAME OF DECEASED<br><b>Carrie Siemers</b>  |  | 2. DATE OF DEATH<br>Month <u>July</u> Day <u>24</u> Year <u>1965</u>                         |   | DEATH DUE TO<br>COMMUNICABLE<br>DISEASE<br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
|   | 3. SEX<br><b>F</b>  | 4. COLOR OR RACE<br><b>White</b>                         | 5. AGE<br><b>85</b>  | 6. PLACE OF DEATH (City, Village or Township) (County) (State)<br><b>Northfield-Rice County-Minnesota</b> |  |
|   | METHOD OF DISPOSAL: BURIAL <input checked="" type="checkbox"/> CREMATION <input type="checkbox"/>   |  | PLACE OF THIS BURIAL<br>REMOVAL OR DISPOSAL: <b>Forest Cemetery; Forest Twn., Rice-Minn.</b> |   |  |
| FUNERAL<br>DIRECTOR<br>and/or<br>MORTICIAN                                | SIGNATURE OF MORTICIAN OR FUNERAL DIRECTOR<br><i>Richard A. Poirier</i> #2033   |  | BUSINESS ADDRESS<br><b>Parker Funeral Home; Faribault, Minnesota</b>                         |   |  |
|   | * It is certified that the remains have been properly prepared:   |  | MORTICIANS SIGNATURE   | LICENSE NUMBER AND ADDRESS  |  |
| AUTHORI-<br>ZATION<br>TO DIS-<br>POSE OF<br>BODY                          | A certificate of death having been filed as required by the laws of Minnesota and all laws governing the preparation and disposal of (dead human) bodies compiled with, permission is hereby given to dispose of this body. |  |  |   |  |
|   | SIGNATURE OF REGISTRAR<br><i>Richard A. Poirier</i> sub.  |  | (City, Village or Township)<br><b>Faribault-Rice</b>   | (County)  | DATE<br>Month <u>July</u> Day <u>27</u> Year <u>1965</u>   |
| DISPOSI-<br>TION OF<br>BODY   | BODY WAS<br>BURIED <input checked="" type="checkbox"/>  | DATE<br>Month <u>July</u> Day <u>27</u> Year <u>1965</u> | NAME OF CEMETERY OR CREMATORY<br><b>Forest Cemetery</b>                                      | LOCATION (City, Village or Township) (County) (State)<br><b>Forest Twn-Rice County-Minnesota</b>          |  |
|   | CREMATED <input type="checkbox"/><br>OTHER (specify)  | SIGNATURE OF SEXTON                                      |  | SIGNATURE OF PERSON IN CHARGE OF CONVEYANCE   |  |
| REVERSE SIDE GIVES BURIAL-REMOVAL-TRANSIT INSTRUCTIONS                    |   |  |  |   |  |

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