



Aspen Hill Cemetery

P.O. Box 1687 Jackson WY 83001

TRANSACTION RECORD

Lot ID and Number: _____

Lot Owner's Name: _____

Name of Deceased: _____ Burial Date: _____

CEMETERY FEE SCHEDULE:

| <i>Provided</i> | <i>Type of Service</i> | <i>Amount</i> |
|--------------------------|--|---------------|
| <input type="checkbox"/> | Lot Purchase - Full | \$ 447.00 |
| <input type="checkbox"/> | Lot Purchase 1/2 Lot | 223.50 |
| <input type="checkbox"/> | Lot Purchase - Cremation/Infant Lot | 148.00 |
| <input type="checkbox"/> | Internment - Open/Close Full or 1/2 | 522.00 |
| <input type="checkbox"/> | Internment - Open/Close Cremation/Infant | 74.00 |
| <input type="checkbox"/> | Disinterment - Open/Close Full | 671.00 |
| <input type="checkbox"/> | Disinterment - Open/Close Cremation | 148.00 |
| <input type="checkbox"/> | Deed Filing Fee | 30.00 |
| <input type="checkbox"/> | Weekend / Holiday Charge | 148.00 |
| <input type="checkbox"/> | Winter Charge (Dec 1 - April 30) | 148.00 |
| <input type="checkbox"/> | Public records search cost may apply | <u>TBD</u> |

Total Fee Due: _____

Please make checks payable to: Town of Jackson

PAID BY: _____

Name: _____ Date: _____

Relation: _____

Phone #: _____

| | | |
|--|---|--|
| <i>TOJ OFFICE USE:</i> | Fees per Resolution 25-14, effective 7-1-25 | |
| | Payment Received: | Date: |
| <i>Cemetery Sexton:</i> Mike Halpin , 307-8733-3933 x 3233 | | mhalpin@jacksonwy.gov |
| <i>Deputy Town Clerk:</i> Lynsey Lenamond, 307-733-3932 x 1112 | | lynseylenamond@jacksonwy.gov |