

G-80

BURIAL—TRANSIT PERMIT

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Full name of deceased Sarah Elsie French No. _____

Cause of death Myocardial Infarct

Place of death Hastings
(County) (Township or village or city)

Date of death November 7 19 71. Race White Sex Female Age 87

Method of disposal Burial
(Whether burial, cremation, storage, etc.)

County Caton State Michigan (Cemetery or crematory)

A certificate of death or fetal death having been filed as required by the laws or regulations of this state, permission is hereby given to Geo. H. Vogt Address Mashville, Meek.
(Funeral director or person acting as such)

to dispose of body of said deceased.

Signature Geo. H. Vogt Date 11-9- 19 71
(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried on Nov 9 19 71 in Woodlawn
(State whether cremated, buried, stored, etc.)

Place Mashville Signature Garrett Hallum
(Cemetery or crematory) (Sexton or person in charge)

This permit must be endorsed by the sexton (or by the funeral director or Mortuary Science licensee where there is no sexton) and returned within seven days to the registrar of the district in which the burial takes place.

(OVER)

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION