

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

PLAT B-N $\frac{1}{2}$ lot 73

BURIAL—TRANSIT PERMIT
MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Full name of deceased Elgin A. Cotton No. _____

Cause of death Carcinoma

Place of death Barry Maple Grove
(County) (Township or village or city)

Date of death July 20 19 72 Race White Sex Male Age 61

Method of disposal Burial Woodlawn Cemetery
(Whether burial, cremation, storage, etc.) (Cemetery or crematory)

County Eaton State Michigan

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 Burkhead Funeral Home Address Charlotte, Michigan
(Funeral director or person acting as such)

to dispose of body of said deceased.

Signature [Signature] Date July 24 19 72
(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried on July 24 19 72 in Woodlawn
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)

Place Woodlawn Signature [Signature] (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)