

6-24

BURIAL—TRANSIT PERMIT

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Full name of deceased Ellen O. Ramses No. _____
Cause of death acute myocardial infarct
Place of death Barry (County) public home hosp
Date of death June 21 1974 Race white Sex male Age 70
Method of disposal Burial
County Caton (Whether burial, cremation, storage, etc.) woodlawn
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 Northville Mich
(Funeral director or person acting as such)
to dispose of body of said deceased.

Signature Geo H Vogt Date 6-23 1974
(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Burial on Jun 25 1974 in Woodlawn
(State whether cremated, buried, stored, etc.)
Place Verona Signature Lowell Walbridge (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