F-66

BURIAL—TRANSIT PERMIT

No. 519

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

Full name of deceased Clifford Lavernon Walsh Date of death 4/29/ 19 76

Cause of death Myocardial Infarction

Place of death Ingham (County) Lansing (Township or village or city) Race white Sex M Age 75

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

County Eaton State Michigan

APPROVED FOR CREMATION

Signature of Medical Examiner _____ Date _____ 19 ____

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 Mapes-Fhisher Funeral Home (Funeral director or person acting as such) Address 193 Jackson St., Sunfield, MI. 48890 to dispose of body of said deceased.

Signature Theo Sutton (Check one: ☐ Registrar, ☐ Funeral Director, ☐ Mortuary Science Licensee) Date May 3, 19 76

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried (State whether cremated, buried, stored, etc.) on May 3 19 76 in Woodlawn (Cemetery or crematory)

Place Vermontville Signature Lowell Hallwell (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)