THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

G-40

BURIAL—TRANSIT PERMIT

No. _____

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Full name of deceased JOYCE E. BRYANS Date of death 10-27- 19 80

Cause of death CEREBROVASCULAR ACCIDENT

Place of death KENT (County) E. GRAND RAPIDS (Township or village or city) Race WHITE Sex FE Age 53

Method of disposal BURIAL (Whether burial, cremation, storage, etc.) WOODLAWN (Cemetery or crematory) EATON County MICH. State

APPROVED FOR CREMATION

Signature of Medical Examiner _____ Date _____ 19 ____

A certificate of death having been filed as required by the laws or regulations of this state, permission is hereby given to LEONARD-OSGOOD & WREN (Funeral director or person acting as such) Address HASTINGS, MICH.

to dispose of body of said deceased.

Signature David C. Wren Date OCT. 28 19 80

(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried (State whether cremated, buried, stored, etc.) on 10-30 1980 in Woodlawn Cemetery (Cemetery or crematory)

Place Vermontville, Mich. Signature Robert L. 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).*

(OVER)