

F-53

BURIAL—TRANSIT PERMIT

No. _____

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Full name of deceased Ethel W. SantDate of death 12-28-1950Cause of death Respiratory failurePlace of death Eaton(County) Eaton

(Township or village or city)

Method of disposal Burial

(Whether burial, cremation, storage, etc.)

County EatonRace WSex FAge 100

(Cemetery or crematory)

State Mich.

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 Geo. H. Vogt

(Funeral director or person acting as such)

Address Nashville, Michigan

to dispose of body of said deceased,

Signature Geo. H. Vogt(Check one: ☐ Registrar, ☒ Funeral Director, ☒ Mortuary Science Licensee)Date 12-31-1950

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Stored (Vault)

(State whether cremated, buried, stored, etc.)

on 12-311950in Woodlawn Cemetery

(Cemetery or crematory)

Place Vermontville, Mich.Signature Robert L. Halliwell

(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