

F-33

BURIAL—TRANSIT PERMIT No. _____
MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Full name of deceased Gerald E. Shumaker Jr. Date of death 9-20 1950
Cause of death Respiratory failure
Place of death Calton (County) Charlotte Race W Sex M Age 47
Method of disposal Burial (Whether burial, cremation, storage, etc.) Calton (Cemetery or crematory) _____ State Mich
(Township or village or city)

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 Sec A [Signature] Address Washburn Mich
(Funeral director or person acting as such)
to dispose of body of said deceased.

Signature Sec A [Signature] Date 10-1- 1950
(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried on 10-4 1950 in Woodlawn Cemetery
(State whether cremated, buried, stored, etc.)
Place Vermontville, Mich. Signature Robert Halliwell (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