

J-49

BURIAL—TRANSIT PERMIT

No. _____

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Full name of deceased Thomas Ernest Marcum Date of death 2-8 1981
Cause of death Uremia, generalized arteriosclerosis
Place of death Eaton Race W Sex M Age 76
Method of disposal Burial (County) Woodlawn (Cemetery or crematory) Micth
(Whether burial, cremation, storage, etc.)
County _____ State _____

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 Address Apprehville, Mich
(Funeral director or person acting as such)
to dispose of body of said deceased.

Signature Geo. H. Vogt Date 2-7- 1981
(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Stored on 2-11 1981 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