

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

**BURIAL—TRANSIT PERMIT**  
**MICHIGAN DEPARTMENT OF PUBLIC HEALTH**

No. 27

Full name of deceased DEWEY GRANT HAWKINS Date of death Dec. 29 19 83

Cause of death Septicemia

Place of death Calhoun (County) Albion (Township or village or city) Race White Sex M Age 85

Method of disposal Burial (Whether burial, cremation, storage, etc.) Maple Lawn (Cemetery or crematory) State MI County Eaton

**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 Paul Tate Address 111 S. Franklin DeWitt, MI  
(Funeral director or person acting as such) 48820  
to dispose of body of said deceased

Signature \_\_\_\_\_ Date Dec 31 1983  
(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

**CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW**

Body was STORIED on 12-31 1983 in WOODLAWN CEMETERY  
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)  
Place VERMONTVILLE, MI Signature Robert H. 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).

(OVER)