B-39

BURIAL—TRANSIT PERMIT

No. [illegible]

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
Act 368 of 1978 and Act 299 of 1980

Full name of deceased ALTON W. FAUST Date of death 12/22 19 87

Cause of death CARDIAC ARRYTHMIA

Place of death BARRY (County) NASHVILLE (Township or village or city) Race W Sex M Age 73

Method of disposal CREMATION (Whether burial, cremation, storage, etc.) CENTRAL MICHIGAN CREMATORY (Cemetery or crematory)

County CALHOUN State MI

APPROVED FOR CREMATION

Signature of Medical Examiner Thomas W. Myers MD Date 12/23/ 19 87

A certificate of death having been filed as required by the laws or regulations of this state, permission is hereby given to VOGT CHAPEL/WREN FUN. HOMES (Funeral director or person acting as such) Address NASHVILLE, MI to dispose of body of said deceased.

Signature Richard A. Wentka Date Dec 23 19 87

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

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW Battle Creek Mi

Body was Cremated (State whether cremated, buried, stored, etc.) on Dec 26 19 87 in Central Michigan Crematory (Cemetery or crematory)

Place Ashes buried Dec 28, 1987 Vermontville Woodlawn Cemetery Signature John Gatchouse (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)

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

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