

J-46

BURIAL—TRANSIT PERMIT No. 13

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Office of the State Registrar and Center for Health Statistics

Full name of deceased FAITH E. DICKINSON Date of death 09-07 19 89

Cause of death METASTATIC LUNG CANCER

Place of death BARRY (County) HASTINGS Race WHITE Sex FE Age 52

Method of disposal BURIAL (Whether burial, cremation, storage, etc.) WOODLAWN CEMETERY (Cemetery or crematory)

County EATON State MICHIGAN

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 MAPLE VALLEY CHAPEL-GENTHER F.H. Address NASHVILLE, MICHIGAN to dispose of body of said deceased.

(Funeral director or person acting as such)

Signature Richard A. Gentes Date 09-08 19 89
(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was BURIED on Sept. 9, 1989 in Woodlawn cemetery
(State whether cremated, buried, stored, etc.)
Place Dea Montville, Mi. Signature Robert H. 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).

(OVER) PLAT J # 46

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION