

A-22

BURIAL—TRANSIT PERMIT

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Full name of deceased M. Blanche Hammerdy No. _____
Cause of death Cardiac Arrest.
Place of death Hellsdale Hellsdale City
(County) (Township or village or city)
Date of death Aug 6 1975. Race W Sex Fe Age 90
Method of disposal Burial Woodlawn Cem.
(Whether burial, cremation, storage, etc.) (Cemetery or crematory)
County Leaton State Mich

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 William Valentine Address Hellsdale Mich
(Funeral director or person acting as such)
to dispose of body of said deceased.

Signature William Valentine Date Aug 7 1975
(Check one: ☐ Registrar, ☒ Funeral Director, ☐ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried on August 8 1975 in Woodlawn
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)
Place Woodlawn Signature Lowell Halford
(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