D-42

BURIAL—TRANSIT PERMIT

No. #19

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Office of the State Registrar and Center for Health Statistics

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

Full name of deceased Ariel Swank Date of death 10/21 90

Cause of death Congestive Heart Failure

Place of death Kent (County) Grand Rapids (Township or village or city) Race White Sex F Age 93

Method of disposal Burial (Whether burial, cremation, storage, etc.) Woodlawn Cemetery (Cemetery or crematory)

County Eaton State MI

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 Gorsline-Runciman Company (Funeral director or person acting as such) Address 900 E. Michigan Ave. Lansing, MI 48912 to dispose of body of said deceased.

Signature _____ Date 10/24 90

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

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was BURIED (State whether cremated, buried, stored, etc.) on OCT 24 1990 in CEMETERY (WOODLAWN) (Cemetery or crematory)

Place VERMONTVILLE, MICH. Signature John Rathbun (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)

Lot 42 PLAT D.

B-26 4/88 Authority: Act 368 of 1978 and Act 299 of 1980