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BURIAL—TRANSIT PERMIT

No. 19

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Office of the State Registrar and Center for Health Statistics

Full name of deceased Nita Marie Sherman Date of death 10-18-1991

Cause of death _____

Place of death Ingham

(County)

Lansing

(Township or village or city)

Race White

Sex F

Age 73

Method of disposal Burial

Woodlawn Cemetery

(Whether burial, cremation, storage, etc.)

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

Signature _____

#5721

Date 10-18-1991

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

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was buried

on

Oct 21

19 91

in

Woodlawn Cemetery

(State whether cremated, buried, stored, etc.)

Place Woodlawn Cemetery, MI

Signature _____

(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)

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