

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

F-66

No. 15

BURIAL—TRANSIT PERMIT
MICHIGAN DEPARTMENT OF PUBLIC HEALTH
Office of the State Registrar and Center for Health Statistics

Full name of deceased Robert James Milbourn Date of death Sept. 18 19 91

Cause of death Respiratory Failure

Place of death Kent Grand Rapids Race White Sex M Age 65
(County) (Township or village or city)

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

County Barry 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 Wren Funeral Home Address Hastings, Michigan
(Funeral director or person acting as such) to dispose of body of said deceased.

Signature _____ Date September 21 19 91
(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

GEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was buried on Sept 21 19 91 in Woodlawn Cemetery
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)

Place Vermontville Signature John Rathburn
(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).

Plot of lot 66

(OVER)