B-49

BURIAL—TRANSIT PERMIT

No. 11

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 BEATRICE SARAH KUEPFER Date of death AUG. 26 19 92

Cause of death CONGESTIVE HEART FAILURE

Place of death BARRY (County) HASTINGS TOWNSHIP (Township or village or city) Race WHITE Sex FE Age 89

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 WREN FUNERAL HOME (Funeral director or person acting as such) Address 1401 NORTH BROADWAY

to dispose of body of said deceased. HASTINGS, MICHIGAN 49058

Signature David C. Wren Date AUGUST 28 19 92

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

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was buried (State whether cremated, buried, stored, etc.) on August 28 1992 in Woodlawn Cemetery (Cemetery or crematory)

Place Vermontville, Mich. Signature John E. Gabbeen (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 49 plat B

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