

6-32

No. #19

BURIAL—TRANSIT PERMIT

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Office of the State Registrar and Center for Health Statistics

BETTY JANE MILES

Full name of deceased BETTY JANE MILES Date of death 9-23 19 96

Cause of death Acute myocardial infarction

Place of death Calhoun Battle Creek Veteran? No Sex F Age 70
(County) (Township or village or city)

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

APPROVED FOR CREMATION _____
County _____ State _____

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 _____
to dispose of body of said deceased.

to Thomas R. Shaw Address 2838 Capital Ave., S.W.
(Funeral director or person acting as such) Battle Creek MI 49015

Signature Thomas R. Shaw Date September 24, 1996
(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was buried on Sept 24 1996 in Wolverine Cemetery
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)

Place Vermontville, Mi Signature John G. Galt
(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 32 plat A

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION