

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

BURIAL—TRANSIT PERMIT No. 12

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Office of the State Registrar and Center for Health Statistics

Full name of deceased William K. Gould Date of death 5-26 1996

Cause of death Heart Attack

Place of death Macon Warren Veteran? YES Sex M Age 73

Method of disposal Burial (County) Woodlawn Cemetery (Cemetery or crematory)

(Whether burial, cremation, storage, etc.) 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 Maple Valley Chapel Address Nashville, MI to dispose of body of said deceased.

Signature Richard E. Jenther Date 5-29 1996
(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried on May 30 1996 in Woodlawn Cemetery
(State whether cremated, buried, stored, etc.)
Place Vermontville, MI Signature John F. Adkins (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)