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

No. 25

Full name of deceased Don R. Baker Date of death Oct 27 1997

Cause of death Aortic Dissection

Place of death Ingham Lansing, MI (Township or village or city) Veteran? (Yes) Sex M Age 66

Method of disposal Burial (Whether burial, cremation, storage, etc.) Woodlawn Cemetery Woodlawnville

APPROVED FOR CREMATION County MI State MI

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 Joseph Ernest Pray Address 401 W. Seminary
(Funeral Director, or person acting as such) Charlotte MI 48813

to dispose of body of said deceased.

Signature _____ Date 19

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

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was interred on Oct 30 1997 in Woodlawn Cemetery or Woodlawnville

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

Place _____ Signature John H. Gethman

(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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THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION