THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

G-22

No. 13

BURIAL — TRANSIT PERMIT

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
Office of the State Registrar and Center for Health Statistics

Full name of deceased LeVerne Landon Date of death Oct17 20 00

Cause of death Ruptured Cerebral Aneurysm & Uncontrolled Hypertension

Place of death Macomb (County) Warren (Township or village or city) Veteran? No (Yes or No) Sex F Age 35

Method of disposal Burial (whether burial, cremation, storage, etc.) Woodlawn Cemetery (Cemetery of cremetory)

County _____ State MI

APPROVED FOR CREMATION

Signature of Medical Examiner _____ Date _____ 20____

A certificate of death having been filed as required by the laws or regulations of this state, permission is hereby given to Koops Funeral Chapels (Funeral director or person acting as such) Address 935 Fourth Avenue Lake Odessa, MI 48849 to dispose of body of said deceased.

Signature [signature] Date Oct 21 20 00

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

CEMETERY OR CREMETORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried (State whether cremated, buried, stored, etc.) on Oct 21 20 00 in Woodlawn Cemetery (Cemetery or cremetory)

Place Vermontville, Mi 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).

(OVER) Plot B lot 22

B-26 9/94 Authority: Act 368 of 1978 and Act 299 of 1980