

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

BURIAL-TRANSIT PERMIT

No. 15

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

Division for Vital Records

Clara M. Thrun

Full name of deceased Clara M. Thrun Date of death July 10 2001

Cause of death Natural

Place of death Clinton Ovid

(County) (Township or village or city)

Method of disposal Burial Woodlawn Cemetery

(Whether burial, cremation, storage, etc.)

County Eaton State Michigan

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 Scott A. Daniels, Maple Valley Chapel Address 204 N Queen, Nashville, MI 49073 to dispose of body of said deceased.

(Funeral director or person acting as such)

Signature _____

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

Date July 12, 2001

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was buried on July 12 2001 in Woodlawn Cemetery

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

Place Vermontville, MI

Signature _____

(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)

Sheet B lot 41