

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

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

Full name of deceased Jerold William Dille Date of death Mar 20 20 02

Cause of death Septic shock

Place of death Kent (County) East Grand Rapids (Township or village or city) Veteran? No (Yes or No) Sex M Age 64

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

APPROVED FOR CREMATION Kent County Kent State MI

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 give to Keith Taylor Cook Funeral Home, Inc. Address 4235 Prairie St., SW
(Funeral director or person acting as such) Grandville MI 49418-1518
to dispose of body of said deceased.

Signature Gregory J. Seston Funeral Director (check one) Register (Mortuary Science Licensee) Date March 23 2002

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried on March 23 20 02 in Woodlawn Cemetery
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)

Place Woodlawn, MI Signature John P. Rathbun
(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)