

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

BURIAL-TRANSIT PERMIT No. _____
MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

Division for Vital Records

Full name of deceased **Joyce Ann Penix** Date of death **May 17** 20 **03**

Cause of death **Myocardial Infarction**
Place of death **Eaton** **Vermontville Township** Veteran? **No** Sex **Fe** Age **50**
Method of disposal **Burial** **Woodlawn Cemetery**
(Whether burial, cremation, storage, etc.) (County) (Township or village or city) (Yes or No) (Cemetery or crematory)

APPROVED FOR CREMATION County **Barry** State **Michigan**

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 **Maple Valley Chapel** Address **204 N. Queen Street**
(Funeral director or person acting as such) **Nashville, MI 49073**
to dispose of body of said deceased.

Signature _____ Date **May 22** 20 **03**

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

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was **buried** on **May 22** 20 **03** in **Woodlawn Cemetery**
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)
Place **Maple Valley Chapel** Signature **John Galt** (Section 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 I lot 22**